Rev 3/08

ST/CO USE ONLY
DATE RECEIVED
MM DD YY
__ __ __

DATE THE WELL WAS COMPLETED
MM DD YY
8 28 25

PERMIT NO.
DW 29-26-09

STATE OF WEST VIRGINIA WATER WELL COMPLETION REPORT

FORM SW-258
THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

LOCATION OF WELL
Well Owner: Last Name Cooper WV LLC First Name
Street/Road 102 Bluffs Ridge Rd County Mineral Zip Code 26719

Latitude: ____ Deg ____ Min ____ Sec
Longitude: ____ Deg ____ Min ____ Sec
Acquired By: ☐ GPS ☐ Topo ☐ Other

AREA NAME/LOCATION:
Fort Ashby

TYPE OF WELL:
☒ Potable ☐ Public Water Supply
☐ Geothermal ☐ Industrial
☐ Commercial ☐ Dewatering
☐ Irrigation ☐ Test/Exploratory
☐ Other

WELL LOG

Depth From (ft.)	Depth To (ft.)	State the kind of formation penetrated, their color, caves, and if water bearing with estimate flow (GPM).
0	4	Fill dirt/Shale
4	30	Brown Shale
30	48	Gray/Some Brown Shale
48	419	Gray Shale/Some darker Gray Shale Seams

If additional space is needed, use additional sheets and attach w/permit # at top.

DRILLING METHOD
☐ Cable Tool ☒ Rotary
☐ Rotary Hammer ☐ Other
Hole Diameter 6 (in)
Total depth 419 (ft)

CASINGS RECORD
MAIN CASING TYPE DRIVE SHOE
☒ Steel ☐ Plastic
☐ Other
Casing Diameter 6 5/8 (in)
Wall Thickness .188 (in)
Casing Length 80 (ft)

Other Casing or Liner Used
Type ☐ Steel ☐ Plastic
☐ Other
Casing/Liner Diameter ____ (in)
Length ____ (ft) from ____ (ft)
to ____ (ft)

SCREEN RECORD
☒ Not Installed ☐ Installed
Material: ☐ Bronze ☐ Plastic
Diameter of screen ____ (in)
Slot size ____
Length ____ (ft) from ____ (ft)
to ____ (ft)

GRAVEL PACK RECORD
Gravel Pack: ☐ Yes ☒ No
From ____ (ft) to ____ (ft)

GROUTING RECORD
Grouting Material:
☐ Cement ☒ Bentonite Clay
Other ____
No. of Bags: 4
Installation Method:
PUMPED

PUMP INSTALLED
By Driller ☐ Yes ☒ No

ESTIMATED WELL YIELD
Estimated at 3 1/2 G.P.M
Static Water Level 90 (ft)
*Pumping level below land surface
417 (ft) after 1/2 hrs. at
3 1/2 G.P.M. (Estimated)
*Note: For Public Water Supply wells please submit required yield and drawdown tests.

WELL HEAD COMPLETION
Casing height above grade 1 (ft)
Type Of Well Cap Installed: Harvard

VARIANCE ISSUED ☐ Yes ☒ No
Request Number ____

COMMENTS BY INSTALLER:

I hereby certify that this well has been constructed in accordance with state rules and in conformance with all conditions stated in the above captioned permit, and that the information presented herein is accurate and complete to the best of my knowledge.

Company Name B.W. Smith Well Drilling & Pump Co. WV Contractor No. WV 061399
Business Registration No. 2415-7480 Master Well Driller Certification No. 574
Master Well Driller (print) Chris Wolford
Master Well Driller Signature Chris Wolford

SITE SUPERVISOR (SIGNATURE OF DRILLER OR JOURNEYMAN RESPONSIBLE FOR SITEWORK IF DIFFERENT FROM MASTER DRILLER.)

Journeyman Well Driller Certification No. ____
Journeyman Well Driller (please print) ____
Apprentice and Name (s) ____, ____