Form GW-2
1978-10,000

COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT
(Certification of Completion/County Permit)

State Water Control Board
P. O. Box 11143
2111 North Hamilton St.
Richmond, Va. 23230

TAX MAP # 82(2)B

RECEIVED
DEC 05 2005
APPOMATTOX

SWCM No. _____

SWCB Permit _____
County Permit _____

Certification of inspecting official:
This well does ____ does not ____ meet code/law requirements.
Signature _____
Date _____
For Office Use

County/City Appomattox
County/City Stamp

- Virginia Plane Coordinates
  N _____
  E _____
- Latitude & Longitude
  N _____
  W _____
- Topo. Map No. _____
- Elevation _____ ft.
- Formation _____
- Lithology _____
- River Basin _____
- Province _____
- Type Logs _____
- Cuttings _____
- Water Analysis _____
- Aquifer Test _____

- Owner Eugene Rigdon
- Well Designation or Number 105-05-02
- Address _____
- Phone _____

- Drilling Contractor FRED JONES WELL CO.
- Address P. O. Box 818 Appomattox, Va. 24522
- Phone 352-7872

Tax Map I.D. No. _____
Subdivision _____
Section _____
Block _____
Lot _____
Class Well I _____, IIA _____, IIB _____, IIIA _____, IIIB _____, IIIC _____, IIID _____, IIIE _____

WELL LOCATION: _____ (feet/miles) _____ (direction) of 460 (E) (L) 601 (R) 602 2 miles and _____ feet/miles _____ (direction) of on (R) at 2341 thru metal gate
(If possible please include map showing location marked)

Date started 11-16-05 • Date completed 11-30-05 Type rig rotary air

WELL DATA: New ✓ Reworked _____ Deepened _____
- Total depth 130 ft.
- Depth to bedrock 32 ft.
- Hole size (Also include reamed zones)
  - 10 inches from 0 to 32 ft.
  - 6 inches from 32 to 130 ft.
  - _____ inches from _____ to _____ ft.
- Casing size (I.D.) and material
  - 6 5/8 inches from 0 to 32 ft.
  - Material PVC
  - Wt. per foot _____ or wall thickness _____ in.
  - _____ inches from _____ to _____ ft.
  - Material _____
  - Wt. per foot _____ or wall thickness _____ in.
  - _____ inches from _____ to _____ ft.
  - Material _____
  - Wt. per foot _____ or wall thickness _____ in.
- Screen size and mesh for each zone (where applicable)
  - _____ inches from _____ to _____ ft.
  - Mesh size _____ Type _____
  - _____ inches from _____ to _____ ft.
  - Mesh size _____ Type _____
  - _____ inches from _____ to _____ ft.
  - Mesh size _____ Type _____
  - _____ inches from _____ to _____ ft.
  - Mesh size _____ Type _____

Gravel pack
- From _____ to _____ ft.
- From _____ to _____ ft.

Grout
- From 0 to 20 ft., Type Cement
- From _____ to _____ ft., Type _____

2. WATER DATA • Water temperature _____ °F
- Static water level (unpumped level measured) 40 ft.
- Stabilized measured pumping water level _____ ft.
- Stabilized yield _____ gpm after _____ hours
- Natural Flow: Yes ✓ No ____, flow rate 12 gpm
- Comment on quality _____

3. WATER ZONES: From _____ To _____
From _____ To _____ From _____ To _____
From _____ To _____ From _____ To _____

4. USE DATA:
Type of use: Drinking ✓, Livestock Watering _____
Irrigation _____, Food processing _____, Household ✓
Manufacturing _____, Fire safety _____, Cleaning _____
Recreation _____, Aesthetic _____, Cooling or heating _____
Injection _____, Other _____
- Type of facility: Domestic ✓, Public water supply _____
  Public institution _____, Farm _____, Industry _____
  Commercial _____, Other _____

5. PUMP DATA: Type sub • Rated H.P. 1/2
- Intake depth 115 • Capacity _____ at _____ head

6. WELLHEAD: Type well seal sanitary
Pressure tank PL 44 gal., Loc. house
Sample tap _____, Measurement port _____
Well vent _____, Pressure relief valve _____
Gate valve _____, Check valve (when required) _____
Electrical disconnect switch on power supply _____

7. DISINFECTION: Well disinfected ✓ yes _____ no
Date _____, Disinfectant used _____
Amount _____, Hours used _____

8. ABANDONMENT (where applicable) • yes _____ no _____
Casing pulled yes ____ no ____ not applicable _____
Plugging grout From _____ to _____ material _____

OVER

Owner _____ BWCM No. _____

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in the State intended for water, or any other non-exempt well. This information must be submitted whether the well is completed, on standby, or abandoned. Information required includes: an accurately and completely prepared water well completion report, full data from any aquifer pumping tests, drill cuttings taken at ten foot intervals (unless exemption is secured), the results of any chemical analyses, and copies of any geophysical logs. Quarterly pumpage and use reports are required from owners of public supply and industrial wells. County or State permits to drill may be required in some parts of the state. Some counties require submission of a water well completion report. The Virginia State Health Department requires a water well completion report for public supply wells.

10. DRILLERS LOG (use additional Sheets if necessary)

DEPTH (feet) From	DEPTH (feet) To	TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, etc.)	11. Drilling Time (Min.)	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
0	32	hard	12 gpm		
32	130		Well complete		

13. Well lot dedicated? _____; Size _____ ft. X _____ ft.; Well house? _____
Distance to nearest pollutant source _____ ft., Type _____
Distance to nearest property line _____ ft., Building _____ ft.

14. WATER SERVICE PIPE: Checked under _____ p.s.i. for _____ minutes. Pipe size _____ inches, Material _____
Installer _____
Date _____

15. I certify that the information contained herein is true and correct and that this well and/or system has been installed and constructed in accordance with the requirements for well construction as specified in compliance with appropriate county or independent city ordinances and the laws and rules of the Commonwealth of Virginia.

Signature Judith Jones D/A (Seal), Date 12-1-05
(Well driller or authorized person)
License No. 1004

State Water Control Board Regional Offices

Valley Reg. Off.
116 North Main Street
P. O. Box 268
Bridgewater, Va. 22812
703-828-2595

Piedmont Reg. Off.
4010 West Broad Street
P. O. Box 6616
Richmond, Va. 23230
804-257-1006

Southwest Reg. Off.
406 East Main Street
P. O. Box 476
Abingdon, Va. 24210
703-628-5183

Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-499-6742

West Central Reg. Off.
Executive Park
5312 Peters Creek Road
Roanoke, Va. 24019
703-982-7452

Northern Virginia Reg. Off.
5515 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111

VDH VIRGINIA DEPARTMENT OF HEALTH
Protecting You and Your Environment

Appomattox County Health Department
PO Box 355
Appomattox, VA 24522
(434) 352-2313 Voice
(434) 352-0232 Fax

Private Well Construction Permit

Health Department ID Number: **105-05-0242 WR**

Owner / Agent Information		
Owner: Eugene Rigdon 6314 Taylor Drive Norfolk, VA 23502 Owner Phone:	2341 Mount Pleasant Road	
Location Information		
Property Address: State Route 602 Locality: Appomattox County Directions: 460E ,L 601, R 602 += 1 mi on L at 2341	Tax Map: **82(2)8**	
General Information		
Well Class: **Class IIIC**	Minimum Casing Depth: **20 feet**	Minimum Grout Depth: **20 feet**

Comments:

This permit is issued based upon a site evaluation conducted by Guerry Beatson, EHS on October 26, 2005. See following page for Construction Drawing.

Notice: The Virginia Department of Health may revoke or modify this permit if, at a later date, it finds the conditions that formed the basis for issuing the permit do not substantially comply with the *Private Well Regulations* , 12 VAC 5-630-10 et seq., or if the well would threaten public health or the environment.

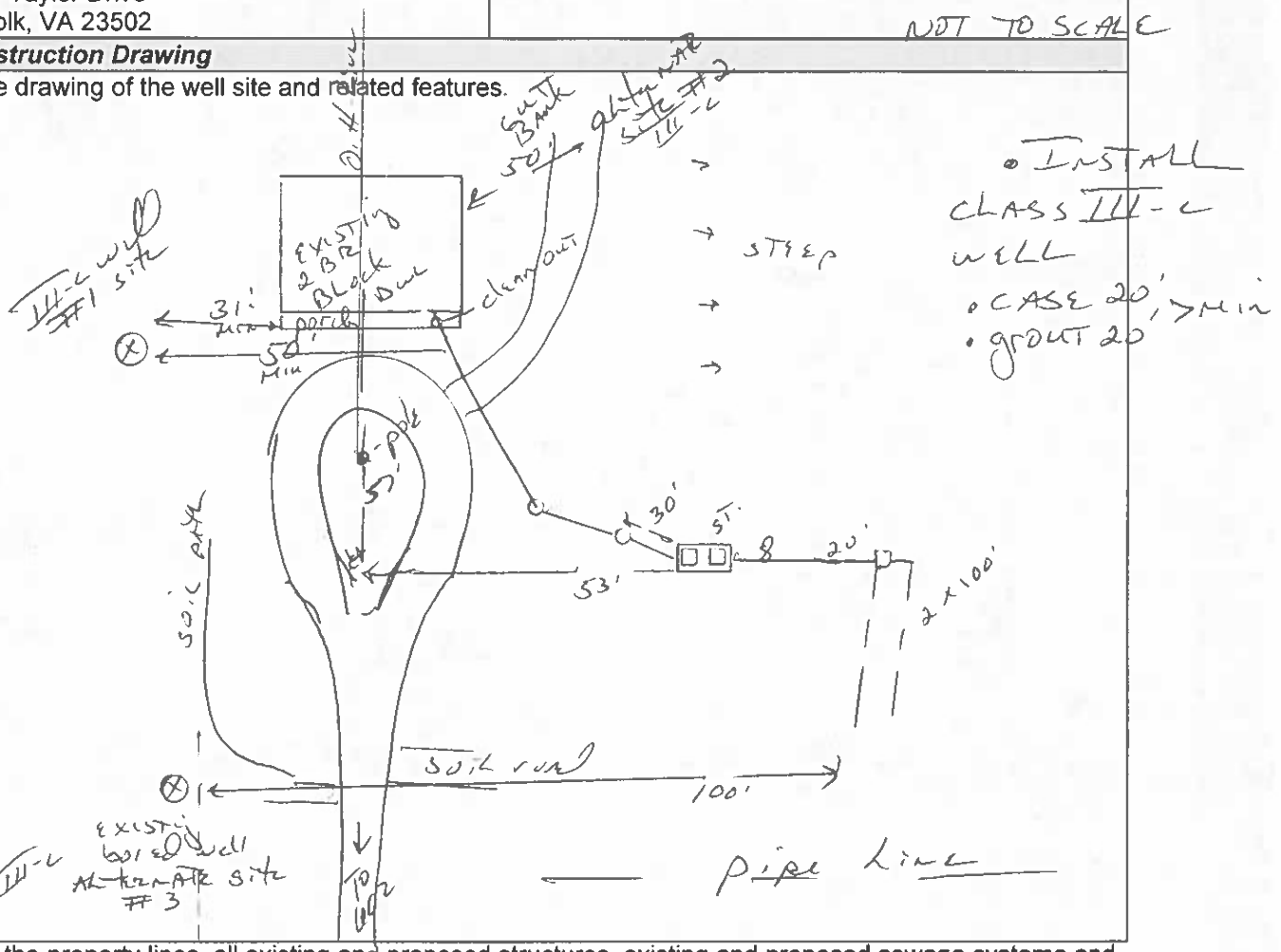
Well Construction Permit -- Drawing

HD ID #: **105-05-0242** WR

Owner Information	
Eugene Rigdon 6314 Taylor Drive Norfolk, VA 23502	Phone:

Construction Drawing

Scale drawing of the well site and related features.

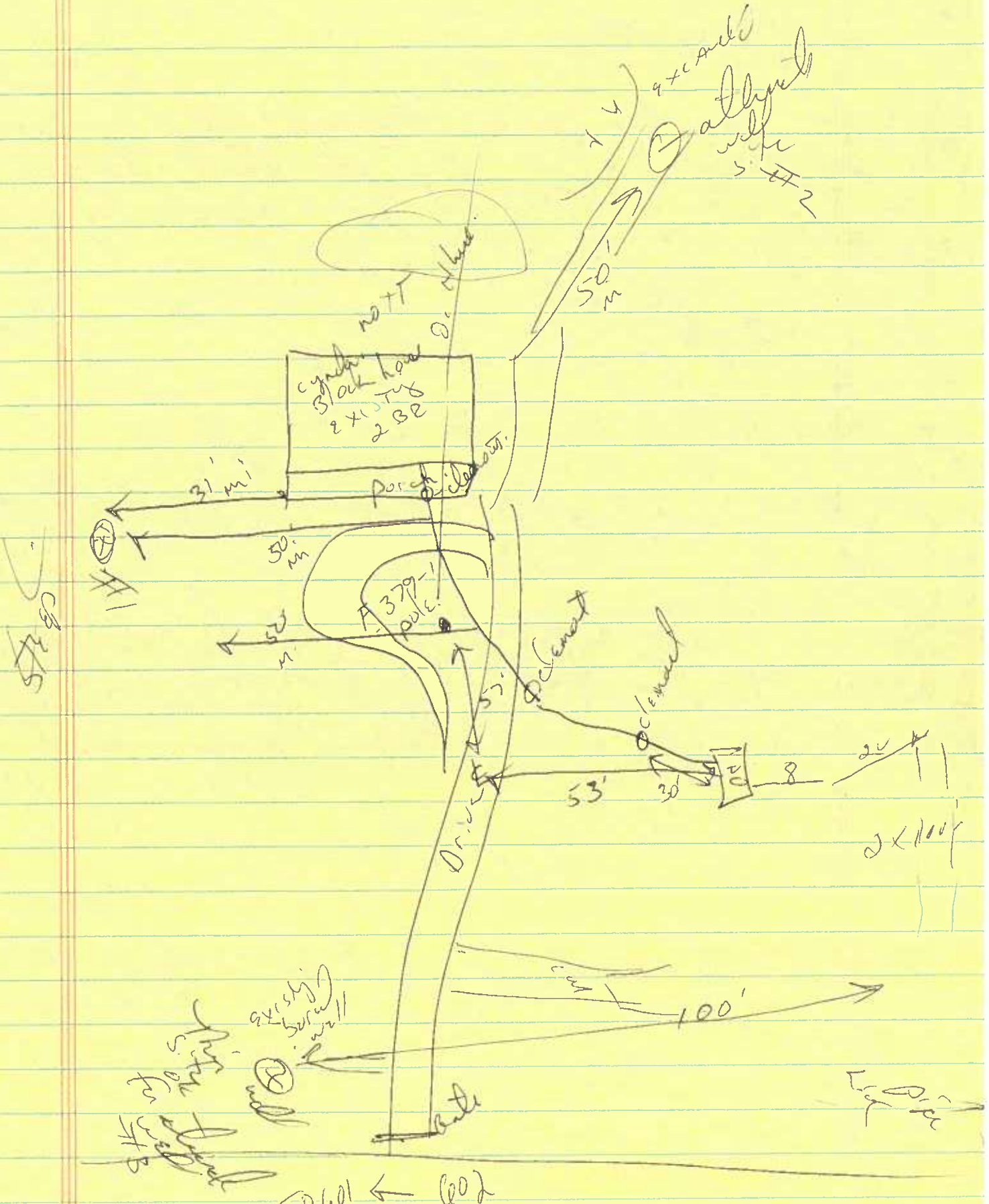


Show the property lines, all existing and proposed structures, existing and proposed sewage systems and water supplies, slope, and any topographic features which may impact the design of the well.

Issued by: Guerry Beatson

October 27, 2005
Issue Date

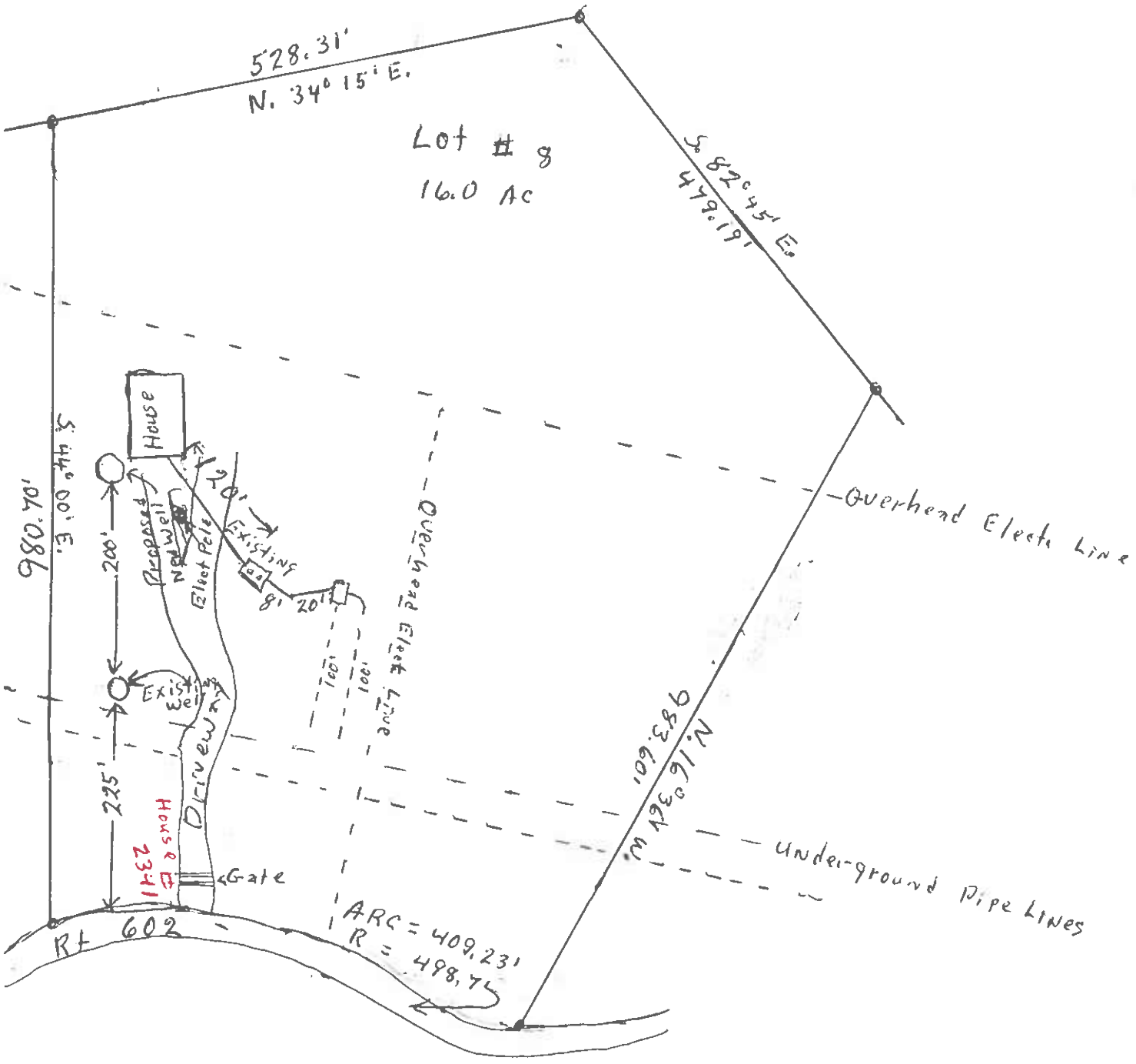
April 27, 2010
Expiration Date


existing
attached
garage
to remain
existing
2 story
house
to remain
existing
garage
to remain
existing
shed
to remain
existing
shed
to remain
existing
garage
to remain
existing
garage
to remain
existing
garage

Direction to Property

From Appomattox 460 East. left on 601, Right on 602 for 2 1/10 Miles Property on left. house # 2341, a gate across Driveway

911 address



Commonwealth of Virginia
Application for a Sewage Disposal and/or Water Supply Permit

Health Department ID 105-05-0242 WL

To Be Completed By The Applicant

Type of Sewage system: ___ New ___ Repair ___ Expanded ___ Conditional
FHA/VA yes ___ no ___ Case No ___

Owner Eugene Rigdon Address 6314 Taylor Dr. Norfolk, Va 23502 Phone 757-461-2032

Agent ___ Address ___ Phone ___

SEND TO: JOHN LATHAM Rt 1 Box 32A Pamplin, Va 23958

Directions of Property Rt 460 East. left on Rt 601 Right on Rt 602. Property on left. 2341

Subdivision ___ Section ___ Block ___ Lot # 8

Other Property Identification 2341 Mount Pleasant Road

Dimension/size of Lot/Property 16.0 AC Tax Map # 92(2)8

Other Application Information

I. Building/facility ✓ New Not completed. building is there - just not complete ___ Existing
Intermittent Use ___ Yes ___ No If yes, describe ___

II. Residential Use ✓ Yes ___ No
Termite Treatment ___ Yes ___ No
✓ Single Family ___ Multi-family
(Number of Bedrooms 2) (Number of Units ___)

Basement ___ Yes ✓ No
Fixtures in Basement ___ Yes ✓ No

III. Commercial Use ___ Yes ✓ No Describe: ___

Commercial/Wastewater ___ Yes ✓ No Number of Patrons ___ Number of Employees ___

If yes, give volumes and describe ___

IV. Water Supply: ___ Public ___ New ___ Existing
✓ Private ___ New ✓ Existing

Describe: ___

V. Proposed Sewage Disposal Method:

Onsite Sewage Disposal System: ___ Septic Tank Drainfield ___ LPD ___ Mound ___ Other

Public Sewerage System

Attach a site plan (rough sketch) showing dimensions of property, proposed and/or existing structures and driveways, underground utilities, adjacent soil absorption system, bodies of water, drainage ways, and wells and springs within 200 feet radius of the center of the proposed well or drainfield. Distances may be paced or estimated.

The property lines and building location are clearly marked and the property is sufficiently visible to see the topography. I give permission to the Department to enter onto the property described for the purpose of processing this application.

John Latham for Eugene Rigdon — Signature of Owner/Agent

10/24/05 — Date

CHS 200

APPOMATTOX COUNTY HEALTH DEPARTMENT

Sewage Disposal System Application

Tax Map Parcel Number 82 (2) 8

(Please note that it is the applicant's responsibility to identify their tax map number.)

STEP 1 – ZONING APPROVAL

_____ _____

Signature of Zoning Administrator Date

The County Zoning Administrator's signature is required for all new Sewage Disposal system applications. The Zoning Administrator's office is located in the County administrative building located behind Courthouse Square P.O. Box 787 Appomattox, VA 24522. Telephone (434) 352-8183.

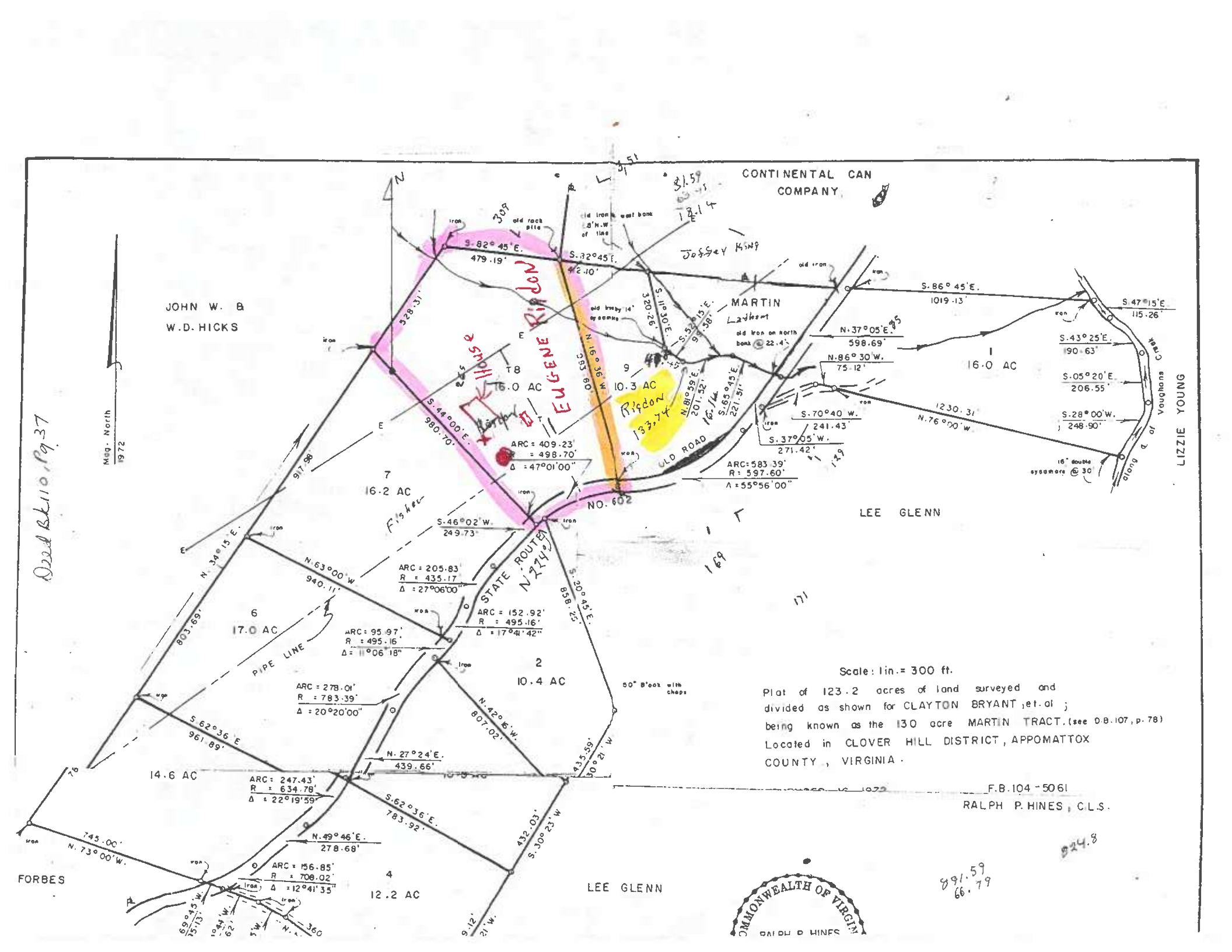
Additional comments:

STEP 2 – INSTRUCTIONS FOR WELL AND SEPTIC PERMIT APPLICATIONS

Our goal at the health department is to process your application as quickly as possible. Sometimes we take longer to process applications because of our workload, the weather, or the need for a backhoe to evaluate the soil. These delays cannot be avoided. At other times, we are delayed because applicants have not provided us with the information we need to issue permits quickly. We cannot accept incomplete applications. In order for us to do our job properly, applicants need to provide us the following:

A) A complete application; including **full legal name** and a complete and accurate site plan.
B) accurate directions to the property
C) property lines and house site clearly and accurately marked on the property

The following checklist is provided to assist you with the application process. All of the items listed need to be completed *by the applicant* before the application is given to the health department. If you have questions, or need assistance with your application, please ask. One of our environmental health staff will be happy to help.


CONTINENTAL CAN COMPANY
JOHN W. & W.D. HICKS
MARTIN
LIZZIE YOUNG
LEE GLENN
FORBES
LEE GLENN
Josey King
Rifdon
House
EUGENE
Rifdon
133,74
OLD ROAD
NO. 602
STATE ROUTE N 214
PIPE LINE
Mag. North 1972
T8
16.0 AC
10.3 AC
16.2 AC
17.0 AC
10.4 AC
14.6 AC
12.2 AC
16.0 AC
S. 82° 45' E. 479.19'
S. 32° 45' E. 42.10'
S. 86° 45' E. 1019.13'
S. 47° 15' E. 115.26'
S. 43° 25' E. 190.63'
S. 05° 20' E. 206.55'
S. 28° 00' W. 248.90'
N. 76° 00' W. 1230.31'
N. 37° 05' E. 598.69'
N. 86° 30' W. 75.12'
S. 70° 40' W. 241.43'
S. 37° 05' W. 271.42'
S. 65° 45' E. 221.51'
N. 81° 39' E. 201.32'
S. 11° 30' E. 320.26'
S. 52° 15' E. 95.58'
N. 16° 36' W. 393.60'
S. 44° 00' E. 980.70'
N. 34° 15' E. 917.98'
N. 63° 00' W. 940.11'
S. 46° 02' W. 249.73'
S. 20° 45' E. 858.25'
N. 42° 16' W. 807.02'
S. 30° 21' W. 435.59'
S. 30° 23' W. 432.03'
S. 62° 36' E. 961.89'
N. 27° 24' E. 439.66'
S. 62° 36' E. 783.92'
N. 49° 46' E. 278.68'
N. 73° 00' W. 745.00'
ARC = 409.23' R = 498.70' Δ = 47°01'00"
ARC = 583.39' R = 597.60' Δ = 55°56'00"
ARC = 205.83' R = 435.17' Δ = 27°06'00"
ARC = 152.92' R = 495.16' Δ = 17°41'42"
ARC = 95.97' R = 495.16 Δ = 11°06'18"
ARC = 278.01' R = 783.39' Δ = 20°20'00"
ARC = 247.43' R = 634.78' Δ = 22°19'59"
ARC = 156.85' R = 708.02' Δ = 12°41'35"
50" B'rock with chops
16" double sycamore @ 30'
along ℄ of Vaughans Creek
old rock pile
old iron & west bank 5' N.W. of line
old iron on north bank @ 22.4'
old brick 14' upstream
iron
Scale: 1 in. = 300 ft.
Plat of 123.2 acres of land surveyed and divided as shown for CLAYTON BRYANT, et. al; being known as the 130 acre MARTIN TRACT. (see D.B. 107, p. 78) Located in CLOVER HILL DISTRICT, APPOMATTOX COUNTY, VIRGINIA.
F.B. 104 - 5061
RALPH P. HINES, C.L.S.
COMMONWEALTH OF VIRGIN
RALPH P. HINES

RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

2341 Mount Pleasant Rd.
TAX MAP # 82(2)B

Date 8-27-81 Case No. Grid 20 D

Owner Rigdon, Eugene Address 6314 Taylor Dr. Norfolk Va (Mailing Address) Phone 461-2032

Occupant Same Address Same (Mailing Address) Phone

Exact Location of Premises Rt 460 East, left on Rt 601 bight on Rt 602 to property on left.
(Subdivision, Street or Road Name, Section or Lot No.)

WATER SUPPLY INSPECTION

Installed according to Permit Design ☐ Yes ☐ No. Distance to nearest House Sewer _____ feet. Distance to nearest Sewage Disposal System _____ feet. (Use Form LHS-143 for Detailed inspection of Water Supply Reference Materials.)

WELL HAS LESS THAN 24" OF WATER - THIS IS NOT ENOUGH TO PROVIDE A SATISFACTORY SUPPLY OF WATER

SEWAGE DISPOSAL SYSTEM INSPECTION

(1) LOCATION
Allotted Area adequate ☒ Yes ☐ No. Distance from nearest lot lines _____ feet. Trees 6 feet.
Water Supplies 100 feet. ~~Buildings~~ TRAILER 20 feet. SEE REMARK

(2) INSTALLATION AND DESIGN
Installed according to Permit Design ☐ Yes ☒ No.
Have additional Household Appliances been added NOT on Permit:
☐ Automatic Washer ☐ Garbage Disposal
☐ Other NONE (Describe)

(3) SOIL CONDITION
Are there soil conditions now evident which indicate system may be unsatisfactory as designed: ☐ Yes ☒ No. If Yes, show adjustments required under "Remarks" below.

(4) HOUSE SEWER LINE
Installed ☒ Yes ☐ No. Type of material SCHEDULE 40 Size 3-4 Inches.

(5) SEPTIC TANK
Constructed of PRE-CAST CONCRETE (Kind of Material)
Inside Dimensions Length 8 feet. Width 4 feet.
Liquid Depth 4 feet. Depth of Air Space 12 inches.
Inside Fittings comply with requirements ☒ Yes ☐ No.

(6) DISTRIBUTION BOX
Watertight and equal surcharge to each line by Water Test ☒ Yes ☐ No. Distribution Box provided with 3 (Number) extra outlets for future use.

(7) SUBSURFACE ABSORPTION FIELD
Total Area in bottom of ditches 600 square feet.
Number of ditches 2 Length of ditches 100 feet.
Grade of ditches Minimum 2 Inches per 100 feet.
Maximum 4 inches per 100 feet. Has system been checked by instruments (Level) ☒ Yes ☐ No.
Type aggregate used CRUSHED STONE
Depth of aggregate under Tile 6 inches
Total depth of aggregate 15 inches
Depth of backfill over aggregate 24-40 inches

(8) SURFACE DRAINAGE
Storm Drains from House and Basement flowing away from Subsurface Drainage Field: N/A ☐ Yes ☐ No. Was Surface Drainage required ☐ Yes ☒ No. If Yes, has this been provided ☐ Yes ☐ No. Has area been drained by lowering Ground Water Table: ☐ Yes ☐ No. ☒ Not required.

(9) Are follow-up inspections necessary ☐ Yes ☒ No.

Septic Tank Contractor: JOHNNY KNIGHT & SONS Address APPOMATTOX, VA Phone 352-7690

This Sewage Disposal System (Is) (~~Is Not~~) Approved by _____ Appomattox Health Department

Date 8-27-81 Signed Clarence L. Stone (Sanitarian)

Date _____ Approved _____ (Reviewing Authority)

With proper maintenance, approved Sewage Disposal systems may be expected to function satisfactorily, provided no overloading or physical damage occurs to the system. Remarks:

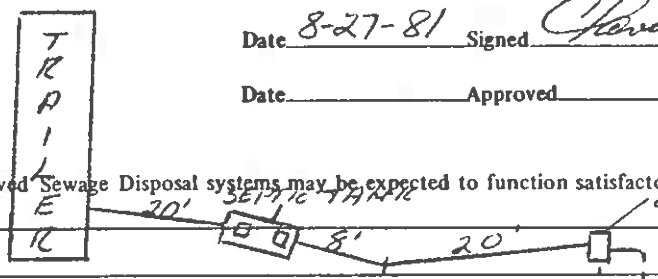
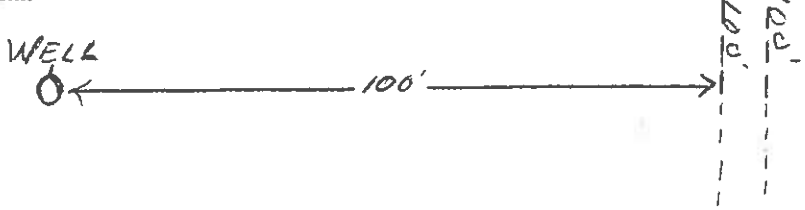


DIAGRAM AS INSTALLED



Virginia Department of Health
LHS-141 Rev. 1/76

. SUPPLY ☒ SEWAGE DISPOSAL SYSTEM ☒

...elve months. (2) Automatically cancelled when site conditions are changed from those shown on permit.
...ically cancelled should facts later become known that a potential hazard would be created by continuing installation.

FHA/Va ☐ Yes ☒ No Date 7-8-81 Case No. GRID - 20D

Owner EUGENE RIGDON Address 6314 TAYLOR DRIVE NORFOLK VA 23502 (Mailing Address) Phone 461-2032

Occupant SAME Address SAME (Mailing Address) Phone

Exact Location of premises RT 460 EAST - LEFT ON RT 601 - RIGHT ON RT 602 TO PROPERTY ON LEFT (Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☐ Dwelling ☒ Other TRAILER Automatic Washing Machine ☒ Yes ☐ No Consumption 200 gal. per day
Actual ☐ Potential ☒ Bedrooms 2 Garbage Disposal Unit ☐ Yes ☒ No (☐ Actual ☒ estimated Water)
Additional wastes

(1) WATER SUPPLY (Existing) Class Approved Yes ☐ No ☐ Other
(To be installed) Class III Cased ft. to be grouted ft.
(Unless supported by positive evidence Class III is to be considered as to be installed.)

SOIL STUDY Naturally drained, suitable by sight ☒ Yes ☐ No Technical Classification (If Known)

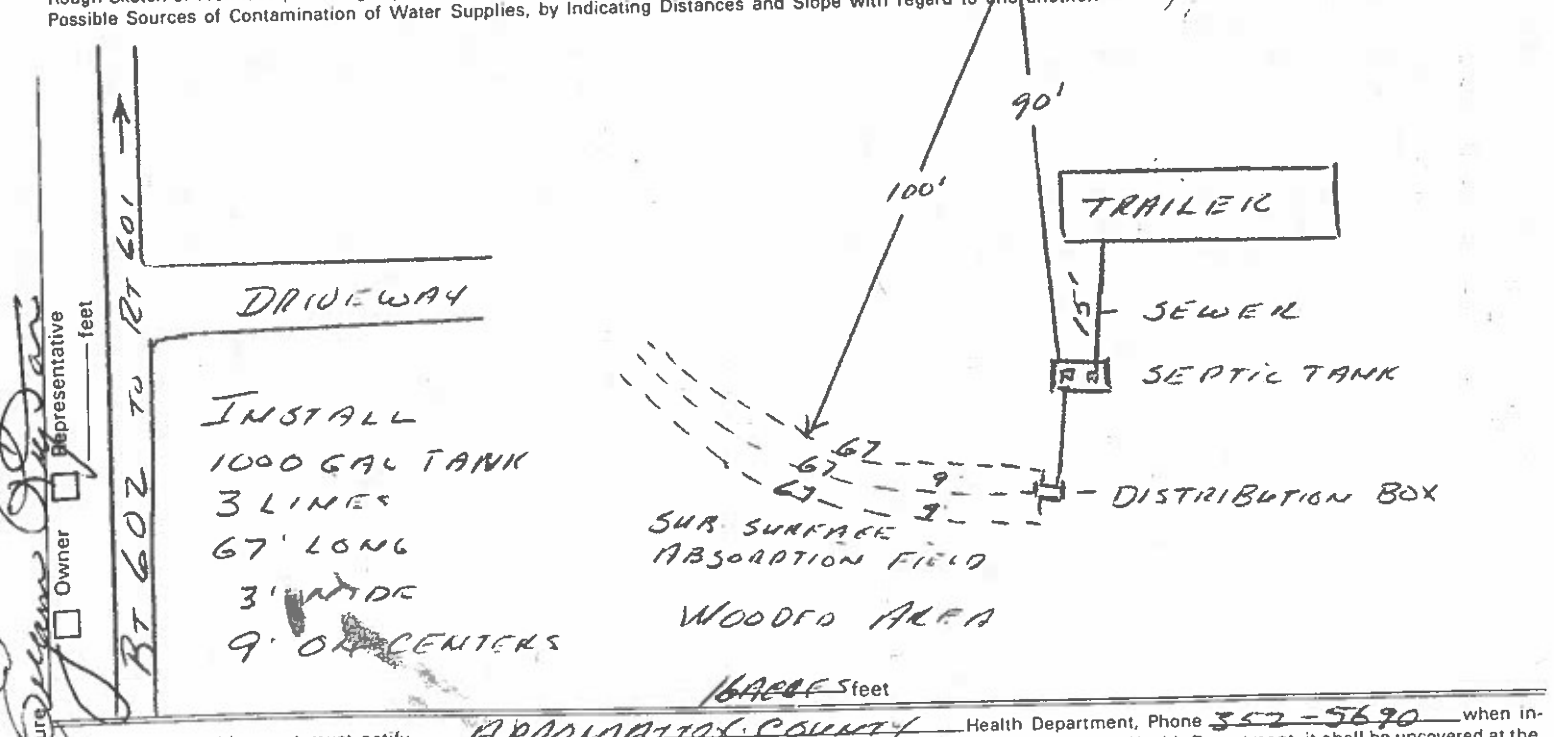
(2) Estimated Percolation Rate (Minutes per inch) 1-10 ☐ 11-25 ☐ 26-50 ☒ >51 ☐ Percolation Test Required ☐ Yes No ☒ Rate (Minutes per inch to nearest 10 minutes)
Depth to Grey Mottles — inches (estimate over 4 ft.) OTHER
Surface drainage required ☐ ☒ No OTHER DRAINAGE

(3) HOUSE SEWER LINE Size 3-4 inches. Type of material required SCH 40 Distance from Water Supply 60 feet.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of PRE-CAST CONCRETE Material Liquid Capacity 1000 gallons.
Inside Dimensions Length 8 feet. Width 4 feet. Liquid Depth 4 feet. Depth of Air Space 1 feet.

(5) SUBSURFACE ABSORPTION FIELD Number of square feet required 600 Type aggregate required CRUSHED STONE
Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 4 inches.
Total aggregate minimum depth 13 inches or more. Depth of drainfield to be 30-48 inches from surface of original ground.
Distance from well to septic tank 90 feet; distance from well to drainfield 100 feet. O - PROPOSED WELL SITE

Rough Sketch of Premises (including adjacent properties if pertinent, Showing Location of Lot Line, Buildings, Water Supplies, Sewage Disposal Systems, Trees, and Other Possible Sources of Contamination of Water Supplies, by Indicating Distances and Slope with regard to one another.



Signature Owner ☐ Representative ☐ feet

Note: Owner or his agent must notify APPOMATTOX COUNTY Health Department, Phone 352-5690 when installation is ready for inspection. If any Sewage Disposal System, or part thereof, is covered before being inspected by the Health Department, it shall be uncovered at the direction of the Health Director or his agent. CONDITIONS DISCOVERED DURING INSTALLATION MAY REQUIRE ADJUSTMENTS OF SYSTEM DESIGN. Changes from above specifications require Health Department approval before being made.

Based on the above information, the undersigned recommends that this permit be issued.

Date — Approved (Reviewing Authority) Date 7-8-81 Signed (Sanitarian or Health Director)

LHS - 121 REV. 12/71
Virginia State Department of Health

DUPLICATE