Rev 3/08 ST/CO USE ONLY DATE RECEIVED MM DD YY ———————	DATE OF PUMP INSTALLATION MM DD YY — — — WATER WELL PERMIT NO. DW-	WEST WAT INST	ATE OF VIRGINIA TER WELL PUMP ALLATION EPORT	FORM SW-262 THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER INSTALLATION IS COMPLETED FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	
PUMP INSTALLATION LOCATION					
			FIRST NAME	FIRST NAME COUNTY ZIP CODE	
AREA NAME/LOCATION:			WATER SYSTEM USE: Potable Public Water Supply		
			Geothermal Industrial Commercial Dewatering Irrigation Test/Exploratory Other		
PUMPING EQUIPMENT			INSTALLATION DETAILS (CONT.)		
Type Pump: Submersible Jet Other (specify)			Pitless: Pitless Adapter Pitless Unit		
Pump Manufacturer:			Pitless Manufacturer:		
Pump Model:			Titless Model: Method of Cutting Hole in Casing for		
INSTALLATION DETAILS Pitless:					
Well Depth (Ft) Ch			Check Valves Locations:		
Static Water Level (from surface):(Ft.)			Well Disinfected: Yes No By Whom:		
Riser Pipe: Material					
Pressure Rating(psi)					
COMMENTS BY INSTALLER					
I hereby certify that this well has been constructed in accordance with state rules and that the information presented herein is accurate and complete to the best of my knowledge.					
Pump Equipment Installed by :					
Property Owner Name (Print) Owner Signature Pump Installation Test Passed on/					
Company Name WV Contractor No Business Franchise Number					
Master Well Driller (print) or Pump Installer Certification No Master Well Driller (print) Master Well Driller Signature					
Pump Installer (print) Pump Installer Signature					
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 Name(s)					