

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

• BWCM No. \_\_\_\_\_

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

County/City Stafford

*County/City Stamp*

SWCB Permit <u>SWP-94-369</u>
County Permit _____
Certification of inspecting official: This well does _____ does not meet code/low requirements. S. _____ Date _____
<i>For Office Use</i>

• 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 Garrett Development Corp

• Well Designation or Number \_\_\_\_\_

Address P.O. Box 374  
Garrisonville, VA 22463

Phone 703-659-6172

• Drilling Contractor \_\_\_\_\_

Address DOMINION WELL COMPANY  
381-3413 Manassas 301-9126  
1-800-328-2977

Tax Map I.D. No. <u>17-D-9</u>
Subdivision <u>Harwill Acres</u>
Section _____
Block <u>Harwill Dr</u>
Lot <u>9</u>
Class Well: I _____, IIA _____
IIIB _____, IIIC _____, IIID _____, IIIE _____

WELL LOCATION: \_\_\_\_\_ (feet/miles \_\_\_\_\_ direction) of \_\_\_\_\_  
 and \_\_\_\_\_ (feet/miles \_\_\_\_\_ direction) of \_\_\_\_\_  
 (If possible please include map showing location marked)

Date started 01-12-95 • Date completed 01-12-95 Type rig air rotary

1. WELL DATA: New  Reworked \_\_\_\_\_ Deepened \_\_\_\_\_

• Total depth 340 ft.

• Depth to bedrock 85 ft.

• Hole size (Also include reamed zones)

- 10 inches from 0 to 95 ft.
- \_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.
- \_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.

• Casing size (I.D.) and material

- 6 1/2 inches from + 1 to 95 ft.
- Material steel
- Wt. per foot 13 or wall thickness .188 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 \_\_\_\_\_
- \_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.
- Mesh size \_\_\_\_\_ Type \_\_\_\_\_

• Gravel pack

- From \_\_\_\_\_ to \_\_\_\_\_ ft.
- From \_\_\_\_\_ to \_\_\_\_\_ ft.

• Grout

- From 0 to 50 ft., Type pressure - 10 bags
- From \_\_\_\_\_ to \_\_\_\_\_ ft., Type Benseal

2. WATER DATA • Water temperature \_\_\_\_\_ °F

- Static water level (unpumped level measured) 50 ft.
- Stabilized measured pumping water level + 1 ft.
- Stabilized yield 7 1/2 gpm after 1 hours
- Natural Flow: Yes \_\_\_\_\_ No  flow rate: \_\_\_\_\_ gpm
- Comment on quality clear

3. WATER ZONES: From 150 To 155

From 250 To 255 From 325 To 330

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 \_\_\_\_\_ • Rated H.P. \_\_\_\_\_

- Intake depth \_\_\_\_\_ • Capacity \_\_\_\_\_ at \_\_\_\_\_ head

6. WELLHEAD: Type well seal \_\_\_\_\_

Pressure tank \_\_\_\_\_ gal. Loc. \_\_\_\_\_

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 \_\_\_\_\_

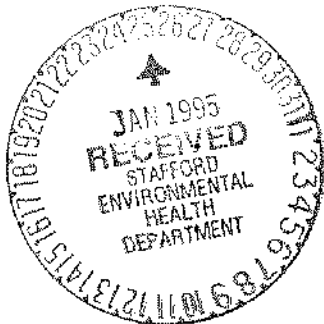
Casing pulled yes \_\_\_\_\_ no \_\_\_\_\_ not applicable \_\_\_\_\_

Plugging grout From \_\_\_\_\_ to \_\_\_\_\_ material \_\_\_\_\_

Owner \_\_\_\_\_

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in the 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 pumping 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)			11. Drilling Time (Min.)	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
DEPTH (feet)		TYPE OF ROCK OR SOIL		
From	To	(color, material, fossils, hardness, etc.)	(water, caving, cavities, broken, core, shot, (etc.))	
0	85	Brown clay soil		
85	260	Grey sandstone		
260	340	Blue stone, blue shale		



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 \_\_\_\_\_

**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.  
 408 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  
 804-499-8742

West Central Reg. Off.  
 Executive Park  
 5312 Peters Creek Road  
 Roanoke, Va. 24019  
 703-982-7432

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

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 *Robert M. Cray* (Seal), Date 1-17-95  
 (Well driller or authorized person) License No. \_\_\_\_\_