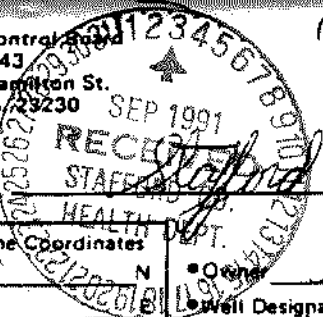


State Water Control Board
 P. O. Box 11143
 2111 North Hamilton St.
 Richmond, Va. 23230

(Certification of Completion/County Permit)

County/City _____



County/City Stamp

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

Well Designation or Number map-17-8
 Address 1644 Hartwood Rd. Hartwood Va 22403
 Phone 752-4459
 Drilling Contractor P. J. Curtis Well Co
 Address RT. 2, Box 163 Beahler Va
 Phone 439-8377

SWCB Permit _____
 County Permit _____
 Certification of inspecting official:
 This well does _____ does not _____
 meet code/low requirements.
 S. _____
 Date _____
 For Office Use

Tax Map I.D. No. WS-90-334
 Subdivision _____
 Section _____
 Block _____
 Lot _____
 Class Well: I _____ IIA _____
 IIB _____ IIIA _____ 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 8/27/91 • Date completed 8/27/91 Type rig air

1. WELL DATA: New Reworked _____ Deepened _____
- Total depth 110 ft.
 - Depth to bedrock 65 ft.
 - Hole size (Also include reamed zones)
 - 10 inches from 0 to 75 ft.
 - 6 inches from 75 to 110 ft.
 - Casing size (I.D.) and material
 - 6 inches from 0 to 75 ft.
Material steel
Wt. per foot 13 or wall thickness 188 in.
 - Screen size and mesh for each zone (where applicable)
 - _____ inches from _____ to _____ ft.
 - Mesh size _____ Type _____
 - Gravel pack
 - From _____ to _____ ft.
 - Grout
 - From 0 to 55 ft. Type Pressure

2. WATER DATA • Water temperature _____ OF
- Static water level (unpumped level-measured) 26 ft.
 - Stabilized measured pumping water level 109 ft.
 - Stabilized yield 20 gpm after 3 hours
 - Natural Flow: Yes _____ No _____ flow rate _____ gpm
 - Comment on quality _____
3. WATER ZONES: 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 _____ • 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 _____

**REPORT ON BACTERIOLOGICAL
EXAMINATION OF WATER**

(703) 898-2115

FREDERICKSBURG, VIRGINIA 22401-4098

150 C OLDE GREENWICH DRIVE

INCORPORATED 1972

STUBBINS W. CHITTON & ASSOCIATES, INC.

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)

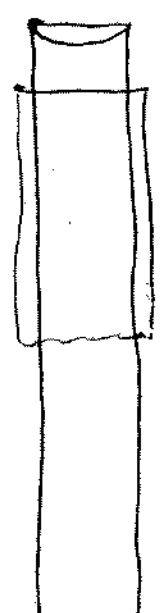
DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, (etc.))
From	To		
0	65	Brown soil	
65	110	sand stone	

11.

Drilling Time (Min.)

12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)

Well 110 ft
75 ft casing
55 ft grout
air tight cap



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

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

West Central Reg. Off.
Executive Park
3312 Peters Creek Road
Roanoke, Va. 24019
703-982-7432

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

Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-499-8742

Northern Virginia Reg. Off.
5515 Cherokee 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 Raymond J. Curtis (Seal) Date 8/27/91
(Well driller or authorized person) License No. _____