

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

(Certification of Completion/County Permit)

County/City Stafford County

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 Ashby Homes Inc.
• Well Designation or Number _____
Address 4 Hulvey Drive
Stafford, VA. 22554
Phone _____
• Drilling Contractor Van's Const. Co., Inc.
Address P.O. Box 3306
Fredericksburg, VA. 22402
Phone 373-7502

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

Date started 1-5-87 • Date completed 1-7-87 Type rig Rotary

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

SD-86-510
Tax Map I.D. No. 20H-2-21
Subdivision Bald Eagle Hills
Section _____
Block _____
Lot 21
Class Well: I _____ IIA _____
IIB X IIIA _____ IIIB _____
IIIC _____ IIID _____ IIIE _____

1. WELL DATA: New X Reworked _____ Deepened _____
• Total depth 180 ft.
• Depth to bedrock 45 ft.
• Hole size (Also include reamed zones)
• 11 inches from 0 to 55 ft.
• 6 inches from 55 to 180 ft.
• _____ inches from _____ to _____ ft.
• Casing size (I.D.) and material
• 6 inches from 0 to 55 ft.
Material steel
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 50 ft. Type pressure
• From _____ to _____ ft. Type _____

2. WATER DATA • Water temperature _____ of _____
• Static water level (unpumped level measured) 16 ft.
• Stabilized measured pumping water level _____ ft.
• Stabilized yield 30 gpm after 2 hours
Natural Flow: Yes _____ No X flow rate _____ gpm
Comment on quality clear
3. WATER ZONES: From 75 To 80
From 130 To 135 From 170 To 175
From _____ To _____ From _____ To _____
4. USE DATA:
Type of use: Drinking X Livestock Watering _____
Irrigation _____ Food processing _____ Household X
Manufacturing _____ Fire safety _____ Cleaning _____
Recreation _____ Aesthetic _____ Cooling or heating _____
Injection _____ Other _____
• Type of facility: Domestic X Public water supply _____
Public institution _____ Farm _____ Industry _____
Commercial _____ Other _____
5. PUMP DATA: Type sub. • Rated H.P. _____
• Intake depth _____ • Capacity _____ at _____ head
6. WELLHEAD: Type well seal pitless
Pressure tank _____ gal. Loc. house
Sample tap X Measurement port X
Well vent X Pressure relief valve X
Gate valve X Check valve (when required) X
Electrical disconnect switch on power supply X
7. DISINFECTION: Well disinfected X yes _____ no _____
Date _____ Disinfectant used chl. tabl.
Amount _____ Hours used _____
8. ABANDONMENT (where applicable) • yes _____ no _____
Casing pulled yes _____ no _____ not applicable _____
Plugging grout From _____ to _____ material _____

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	15	black clay	granite
15	35	brown clay	
35	55	soft rock	
55	75	rock	
75	80	hole w/water	
80	180	rock w/voids	

11. Drilling Time (Min.)

12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)

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 60 p.s.i. for 10 minutes. Pipe size 1 inches, Material plastic
 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.

State Water Control Board Regional Offices

Valley Reg. Off.
 116 North Main Street
 P. O. Box 268
 Bridgewater, Va. 22812
 703-626-2595

Piedmont Reg. Off.
 4010 West Broad Street
 P. O. Box 5616
 Richmond, Va. 23230
 804-257-1006

Southwest Reg. Off.
 288 East Main Street
 P. O. Box 476
 Abingdon, Va. 24210
 703-626-3183

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
 118 Peters Creek Road
 Manassas, Va. 24019
 703-626-7482

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

Signature Sue Shelnett (Seal), Date 1-21-87
 (Well driller or authorized person) License No. _____