

WATER WELL COMPLETION REPORT

• BWCM No. _____

(Certification of Completion/County Permit)

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

County/City Stafford County

County/City Stamp

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

| |
|------------------------------|
| • 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 Samuel Enfield

• Well Designation or Number _____

Address 8212 Lake Park Drive

Alexandria, VA 22309

Phone (703)780-0871

• Drilling Contractor Van's Const. Co., Inc.

Address P.O. Box 3306

Fredericksburg, VA 22402

Phone 373-7502

| |
|------------------------------------------------------------------|
| Tax Map I.D. No. <u>24A-9</u> |
| Subdivision <u>Kings Grant</u> |
| Section <u>II</u> |
| Block _____ |
| Lot <u>9</u> |
| Class Well: I _____, IIA _____ |
| IIB <input checked="" type="checkbox"/> , 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 7-24-88 • Date completed 7-25-88 Type rig rotary

1. WELL DATA: New Reworked _____ Deepened _____

• Total depth 335 ft.

• Depth to bedrock 48 ft.

• Hole size (Also include reamed zones)

- 10 inches from 0 to 58 ft.
- 6 inches from 58 to 335 ft.
- _____ inches from _____ to _____ ft.

• Casing size (I.D.) and material

- 6 inches from 0 to 58 ft.
Material steel
Wt. per foot _____ or wall thickness _____ in.
- 4 inches from 35 to 335 ft.
Material plastic
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 50 to 0 ft. Type pressure
- From _____ to _____ ft. Type _____

2. WATER DATA • Water temperature _____ OF

• Static water level (unpumped level-measured) 40 ft.

• Stabilized measured pumping water level _____ ft.

• Stabilized yield 20 gpm after 2 hours

Natural Flow: Yes _____ No flow rate _____ gpm

Comment on quality clear

3. WATER ZONES: From 120 To 140

From 300 To 335 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 _____

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) | | | 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, casing, cavities, broken, core, shot, etc.) | |
| 0 | 58 | clay & rock | | |
| 58 | 120 | Rock & clay | | |
| 120 | 300 | rock | with breaks | |
| 300 | 335 | rock, flint, schist | | |

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.

State Water Control Board Regional Offices

Valley Reg. Off.
 116 North Main Street
 P. O. Box 268
 Bridgewater, Va. 22812
 703-628-2595

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
 5512 Peters Creek Road
 Roanoke, Va. 24019
 703-982-7432

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

Signature Sue Sheerutt (Seal), Date 9-20-88
 (Well driller or authorized person) License No. _____