

COMMONWEALTH OF VIRGINIA
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

• 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 George Lockwood

• Well Designation or Number _____
Address 101 Stonehouse Road
Hartwood, VA, 22405
Phone 752-7188

• Drilling Contractor Van's Const. Co., Inc.
Address P.O. Box 3306
Fredericksburg, VA, 22402
Phone 373-7502

SWCB Permit _____
County Permit _____

Certification of inspecting official.
This well does _____ does not
meet code/low requirements
S _____
Date _____

For Office Use

SD-87-141

Tax Map ID No. 26A-B
Subdivision Kings Grant
Section _____
Block _____
Lot Parcel B
Class Well I _____ IIIA _____
IIB _____ IIIA X 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 11-6-87 • Date completed 11-6-87 Type rig Rotary

WELL DATA New X Reworked _____ Deepened _____

• Total depth 330 ft
• Depth to bedrock 20 ft

• Hole size (Also include reamed zones)
• 11 inches from 0 to 35 ft
• 6 inches from 35 to 330 ft

• Casing size (I.D.) and material
• 6 inches from 0 to 35 ft
Material steel
Wt per foot 188 or wall thickness _____ in.

• Screen size and mesh for each zone (where applicable)
• Mesh size _____ Type _____
• Mesh size _____ Type _____
• Mesh size _____ Type _____
• Mesh size _____ Type _____

• Gravel pack
• From _____ to _____ ft
• From _____ to _____ ft

• Grout
• From 0 to 20 ft. Type neat
• From _____ to _____ ft. Type _____

2 WATER DATA • Water temperature _____ of _____
• Static water level (unpumped level measured) 60 ft
• Stabilized measured pumping water level _____ ft
• Stabilized yield 6 gpm after 2 hours
Natural Flow Yes _____ No X flow rate _____ gpm
Comment on quality clear

3. WATER ZONES: From 135 To 138
From 315 To 320 From _____ To _____
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 _____ • Rated H.P. _____
• Intake depth _____ • Capacity _____ at _____ head

6. WELLHEAD Type well seal _____
Pressure tank _____ gal. Loc. _____
Sample cap _____ 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 _____