

P. O. Box 11143
2111 North Hamilton St.
Richmond, Va. 23230

Verification of Completion/County Permit
Capl Builders
2143 Jefferson Davis Hwy
Stafford, Va. 22554
659-1063

SWCB Permit
County Permit

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

For Office Use
SD-87-342 Karl Rudolph
7/22/87
Tax Map I.D. No. 24A-19
Subdivision Kings Grant
Section _____
Block _____
Lot #19
Class Well I IIA
IIB IIB
IIC IID IIF

County/City Stafford

County/City Stamp

• Virginia Plane Coordinates
N _____
E _____
Latitude & Longitude
N _____
W _____

• Topo. Map No. _____
• Elevation _____ ft.
• Formation _____
• Lithology _____
• River Basin _____
• Province _____
• Type Logs D. L.
• Cuttings N. C.
• Water Analysis _____
• Aquifer Test _____

• Owner _____
• Well Designation or Number _____
Address _____
Phone _____

• Drilling Contractor John L. Danielson, Jr., Inc.
Address 4616 Hood Drive
Fredericksburg, Virginia 22401
Phone (703) 898-6025

WELL LOCATION: _____ (feet/miles _____ direction) of _____
and 1/2 feet/miles East (direction) of 615 & 614
(if possible please include map showing location marked)

Date started 10/17/87 • Date completed 10/17/87 Type rig Air Rotary

1. WELL DATA: New Reworked _____ Deepened _____

• Total depth 180 ft.
• Depth to bedrock 104 ft.

• Hole size (Also include reamed zones)
• 10 inches from 0 to 60 ft.
• 8 inches from 60 to 104 ft.
• 6 1/4 inches from 104 to 180 ft.

• Casing size (I.D.) and material
• 6 1/4 inches from +1 to 104 ft.
Material Steel
Wt per foot 13.1 or wall thickness .188 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 50' ft. Type Pressure Grout
• From _____ to _____ ft. Type _____

Approximate Drawdown 20 feet.

2. WATER DATA • Water temperature _____
• Static water level (unpumped level measured) 30
• Stabilized measured pumping water level 30
• Stabilized yield 20 gpm after _____
Natural Flow Yes _____ No Flow rate _____
Comment on quality _____

3. WATER ZONES: From 160 To 162
From _____ To _____ 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 HP _____
• Intake depth _____ • Capacity _____ of _____ 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 _____
Installed through Capl Builders

Installed Waterlight top
Suggest setting pump @ approx 90'
Powered 12 GPM @ 90' OVER 10/21/87

Owner: Case Builders
Regis' East

9. State law requires submitting to _____ water and wells for every _____ (b) intended for water, or any other non-exempt well. This information _____ the well is completed, on standby, or abandoned. Information required includes: an accurately and completely _____ 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.

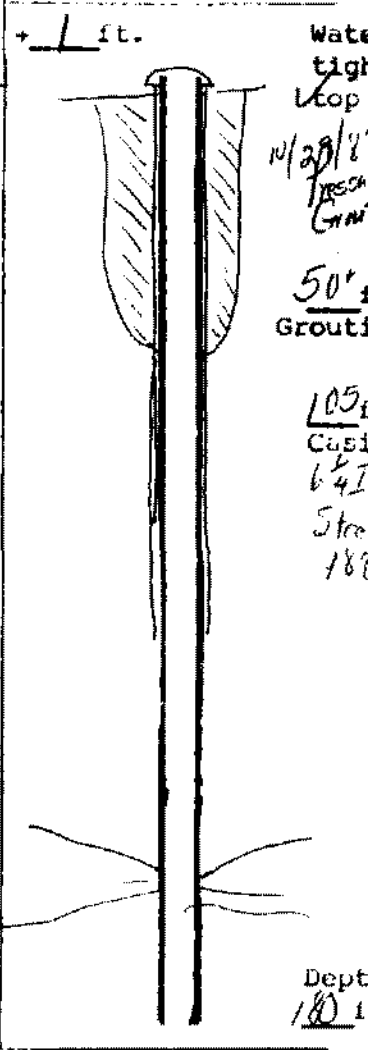
10. DRILLERS LOG (use additional Sheets if necessary)

11.

12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)

DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, (etc.))	Drilling Time (Min.)
From	To			
0	10	red clay		
10	30	red micaceous formation		
30	90	brown micaceous formation		
90	104	soft brown rock		
104	110	white rock		
110	160	soft brown shale		

Approximate water zones
 160' to 162'



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: Case Builders (Seal), Date: 10/29/87
 License No. _____