

Commonwealth of Virginia
Uniform Water Well Completion Report

22407
 Name Mont Pascon
 Address 3544 Covered Bridge Lane
Woodbridge, Va. 22192
 Phone 703-570-6482 / w 703-218-1808
 Location Ben's tract - Sect 4 - Lot 59
615 -> Lucas Ave -> Old Cropp's mill -> St. Michael's Court
 Well Classification IIIA IIIB IIIC IV
183A 1 Mile N.W. Inter of 614 & 615 * Well Data *

Tax Map ID 24A-4B-59
 VDH Permit 615-91-281
 VWCB Permit _____
 VWCB ID _____
 County Stafford
12/17/91 Karl Rudolph
12/17/91 T.T. Thompson

General Information

Drilling Method Air Rotary
 Depth to Bedrock 65
 Static Water Level 40
 Well Disinfected (Y or N) _____

Date Completed 4/30/93
 Yield 12 (GPM)
 Stabilized Water Level 180
 Disinfectant Used _____

Total Depth of Well 225
 Length of Test 1 Hr
 Natural Flow (Rate) _____
 Amount Used _____

Casing

From #1 To 65
 Size 6 1/4 Material PVC
 Weight/Schedule SDR 27

From _____ To _____
 Size _____ Material _____
 Weight/Schedule _____

From _____ To _____
 Size _____ Material _____
 Weight/Schedule _____

Gravel Pack

From _____ To _____

From _____ To _____

From _____ To _____

Hole size

10" from 0 to 50 ft.

7 7/8" from 50 to 65 ft.

6 1/2" from 65 to 200 ft.

Grout

From 0 To 50+

From _____ To _____

From _____ To _____

Bore Hole Size 10 5/3/93

Bore Hole Size _____

Bore Hole Size _____

Type Bentonite

Type _____

Type _____

Method Pressure Grouting

Method _____

Method _____

Water Zones or Screened Intervals

From 210 To 211

From _____ To _____

From _____ To _____

Mesh Size _____ Diam _____

Mesh Size _____ Diam _____

Mesh Size _____ Diam _____

From _____ To _____

From _____ To _____

From _____ To _____

Mesh Size _____ Diam _____

Mesh Size _____ Diam _____

Mesh Size _____ Diam _____

* Use Data *

Private Well: Domestic Agricultural _____ Industrial _____ Monitoring _____
 Public Well: Community _____ Non Community _____

* Abandonment Information *

Bored or Dug Wells

Casing Removed, Y or N?: _____
 If Y, Depth to which casing was removed: _____
 Depth and Type of Fill: _____
 Source of Fill _____
 Bentonite Plugs: From _____ to _____ From _____ to _____

Wells other than Bored Wells

Casing removed, Y or N? _____
 Depth to which casing was removed: _____
 Applicable, depth(s), and type of gravel/sand fill: _____
 Source of gravel or sand: _____
 Cement: From _____ to _____ From _____ to _____

Method of permanently marking location:
 Installed watertight top 5/3
 Suggest setting pump @ approx 200 ft.

Patrol

Leason

King Grant # 59

S. Michael's Court

* Drillers Log *

Depth

Description of Formation or Sediment

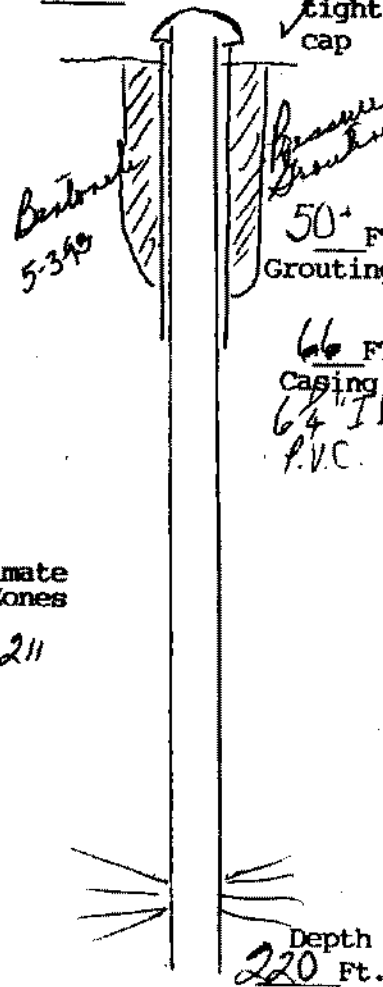
Remarks

0	10	Red Clay
10	30	Micaceous formation / Red
30	50	Micaceous formation / Brown
50	65	Brown Shale
65	220	Blue Granite

DIAGRAM
(NOT TO SCALE)

+ 1 Ft.

water
tight
cap



Approximate
Water Zones

210 to 211

(User additional Sheets if necessary)

I certify that the information contained here is true and that this well was installed and constructed in accordance with the permit and further that the well complies with all applicable state and local regulations, ordinances and laws.

Name JOHN L. DANIELSON, JR., INC.

Address 4616 HOOD DRIVE
FREDERICKSBURG, VIRGINIA 22408

Phone (703) 898-6025 / 898-9355

Drillers Signature [Signature]

Date 5/3/93 Representing JOHN L. DANIELSON, JR., INC.

Virginia Contractors License Number CLASS A 2701 014084A H/H WVC