

**COMMONWEALTH OF VIRGINIA**  
**WATER WELL COMPLETION REPORT**  
*(Certification of Completion/County Permit)*

•BWCM No. \_\_\_\_\_

Control Board  
 1143  
 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 _____
<i>For Office Use</i>

• 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 Lawrence F. Duvall, Jr.

• Well Designation or Number \_\_\_\_\_  
 Address 144 Manassas Drive

Manassas, VA.  
 Phone 368-9816

• Drilling Contractor Van's Const. Co., Inc.  
 Address P.O. Box 3306

Fredericksburg, VA. 22402  
 Phone 373-7502

189-87-341
Tax Map I.D. No. <u>25A-8</u>
Subdivision <u>Stone House Wooded Es</u>
Section _____
Block _____
Lot <u>8</u>
Class Well: I _____, IIA _____
IIIB _____, IIIA _____, IIIB <u>X</u>
IIIC _____, IIID _____, IIIE _____

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

Date started 9-15-87 • Date completed 9-15-87 Type rig Boring

**1. WELL DATA:** New X Reworked \_\_\_\_\_ Deepened \_\_\_\_\_

• Total depth 45 ft.

• Depth to bedrock \_\_\_\_\_ ft.

• Hole size (Also include reamed zones)  
 • 36 inches from 0 to 20 ft.  
 • 30 inches from 20 to 45 ft.

• Casing size (I.D.) and material  
 • 24 inches from 0 to 45 ft.  
 Material concrete

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 20 ft., Type neat

• From \_\_\_\_\_ to \_\_\_\_\_ ft., Type \_\_\_\_\_

**2. WATER DATA** • Water temperature \_\_\_\_\_ of \_\_\_\_\_

• Static water level (unpumped level-measured) 20 ft.

• Stabilized measured pumping water level \_\_\_\_\_ ft.

• Stabilized yield 5 gpm after est. ball method \_\_\_\_\_ hours

Natural Flow: Yes \_\_\_\_\_ No X (flow rate \_\_\_\_\_ gpm)

Comment on quality clear

**3. WATER ZONES:** From 20 To 45

From \_\_\_\_\_ To \_\_\_\_\_ 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 sub. • Rated H.P. 1/2

• Intake depth 43 • Capacity 10 at 133 head

**6. WELLHEAD:** Type well seal \_\_\_\_\_

Pressure tank 32 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 10-19-87, Disinfectant used chl. tabl.

Amount \_\_\_\_\_, Hours used \_\_\_\_\_

**8. ABANDONMENT** (where applicable) • yes \_\_\_\_\_ no \_\_\_\_\_

Casing pulled yes \_\_\_\_\_ no \_\_\_\_\_ not applicable \_\_\_\_\_

Plugging grout From \_\_\_\_\_ to \_\_\_\_\_ material \_\_\_\_\_

Department of Health

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well 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 cuttings taken at ten foot intervals (unless exemption is secured), the results of any chemical analyses, and copies of any geophysical logs. 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, caving, cavities, broken, core, shot, (etc.))	
0	4	topsoil		
4	20	red clay		
20	45	brown clay		

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 \_\_\_\_\_ Van's Const. Co., Inc.  
 Date \_\_\_\_\_ 10-19-87

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  
 703-828-2595

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 Pamproke Office Park  
 Suite 310 Pamproke No. 2  
 Va. Beach, Va. 23462  
 804-499-8742

West Central Reg. Off.  
 Executive Park  
 5312 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 Shelburt (Seal, Date 10-20-87)  
 (Well driller or authorized person)  
 License No. \_\_\_\_\_