

COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT

* BWCM No. _____

(Certification of Completion/County Permit)

256-3-45

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

SWCB Permit 189-89-299
County Permit _____
Certification of inspecting official:
This well does _____ does not
meet code/low requirements.
S. _____
Date _____
For Office Use

County/City Stafford

County/City Stamp

* Virginia Plans Coordinates
N _____
E _____
Latitude & Longitude
N _____
W _____
* Topo. Map No. _____
* Elevation _____ ft.
* Formation _____
* Lithology _____
* River Basin _____
* Province _____
* Type Log _____
* Cuttings _____
* Water Analysis _____
* Aquifer Test _____

* Owner Gold Medallion Const.
* Well Designation or Number _____
Address P.O. Box 1587
Spotsy, Va 22553
Phone 703-785-9704
* Drilling Contractor Water Wells Inc.
Address P.O. Box 491
Mineral, Va. 23117
Phone 894-5461

Tax Map I.D. No. 25-29-3-45
Subdivision Blake Farm
Section _____
Block _____
Lot 45
Class Well: I _____ IIA _____
IIB _____ IIIA _____ IIIB
IIIC _____ IIID _____ IIIE _____

WELL LOCATION: 0.2 (feet/miles) E (direction) of RT 1506 + Debbie Ct.
and 350 (feet/miles) N (direction) of Debbie Ct.
If possible please include map showing location marked!

Date started 11-11-93 * Date completed 11-12-93 Type rig Air Rotary

1. WELL DATA: New Neworked _____ Deepened _____

* Total depth 325 ft.
* Depth to bedrock 116 ft.
* Hole size (Also include reamed zones)
↓ 10 inches from 0 to 60 ft.
↓ 8 3/4 inches from 60 to 120 ft.
↓ 6 3/4 inches from 120 to 325 ft.
* Casing size (I.D.) and material
↓ 6 1/4 inches from 1 to 120 ft.
Material PVC
Wt. per foot _____ or wall thickness Sch. 40 in.
↓ _____ inches from _____ to _____ ft.
Material _____
Wt. per foot _____ or wall thickness _____ in.
↓ _____ inch 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.

* Gravel pack
↓ From _____ to _____ ft.
↓ From _____ to _____ ft.
* Grout
↓ From 0 to 50 ft. Type NC pressure
↓ From _____ to _____ ft. Type _____

2. WATER DATA * Water temperature _____ of _____

* Static water level (unpumped level measured) 30 ft.
* Stabilized measured pumping water level _____ ft.
* Stabilized yield 1 1/2 gpm after _____ hour(s)
Natural Flow: Yes _____ No _____ flow rate _____ gpm
Comment on quality _____

3. WATER ZONES: From 140 To 141
From _____ To _____ From _____ To _____
From _____ To _____ From _____ To _____

4. USE DATA:
Type of use: Drinking Livestock Watering _____
Irrigation _____ Food processing _____ Household
Manufacturing _____ Fire safety _____ Clearing _____
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 WTCCLP
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 _____ Hour(s) 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 pumping 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)

DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, casing, cavities, broken, core, shot, etc.)
From	To		
0	10	red clay	140') WATER ZONE 145')
10	30	reddish brown clay	
30	90	brown clay	
90	116	SANDSTONE	
116	325	GRANITE	

11.

Drilling Time (Min.)

12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)

State Water Control Board Regional Offices

Valley Reg. Off.
115 North Main Street
P. O. Box 260
Bridgeville, Va. 22812
703-628-7395

Piedmont Reg. Off.
4010 West Grand Street
P. O. Box 8518
Richmond, Va. 23230
804-257-1008

Southwest Reg. Off.
408 East Main Street
P. O. Box 476
Arlington, Va. 22210
703-628-3183

Shenandoah Reg. Off.
287 Pambrake Office Park
Suite 310 Pambrake Bldg. 2
Va. Beach, Va. 23462
804-439-8742

West Central Reg. Off.
Executive Park
3515 Patrick Creek Road
Roanoke, Va. 24019
703-782-7452

Northern Virginia Reg. Off.
5415 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-740-9111

13. Well not dedicated? _____ Size _____ ft. X _____ ft.; Well house? _____
Distance to nearest pollutant source _____ ft. Type _____
Distance to nearest property line _____ ft. Building _____ ft.

14. After service _____ checked under _____ p.s.l. for _____
_____ inches, Material _____
Installer _____
Date _____

15. I certify that the information contained herein is true and correct and that this well drill/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 Gregory L. Hatfield (Seal); Date 11-12-93
(Well driller or authorized person) License No. 031685

Schematic drawing of sewage disposal system and topographic features.

Show the lot lines of the building lot and building site, sketch of property showing any topographic features which may impact on the design of the system, all existing and/or proposed structures including sewage disposal systems and wells within 100 feet of sewage disposal system and reserve area. The schematic drawing of the sewage disposal system shall show sewer lines, pretreatment unit, pump station, conveyance system, and subsurface soil absorption system, reserve area, etc. When a nonpublic drinking water supply is to be located on the same lot show all sources of pollution within 100 feet.

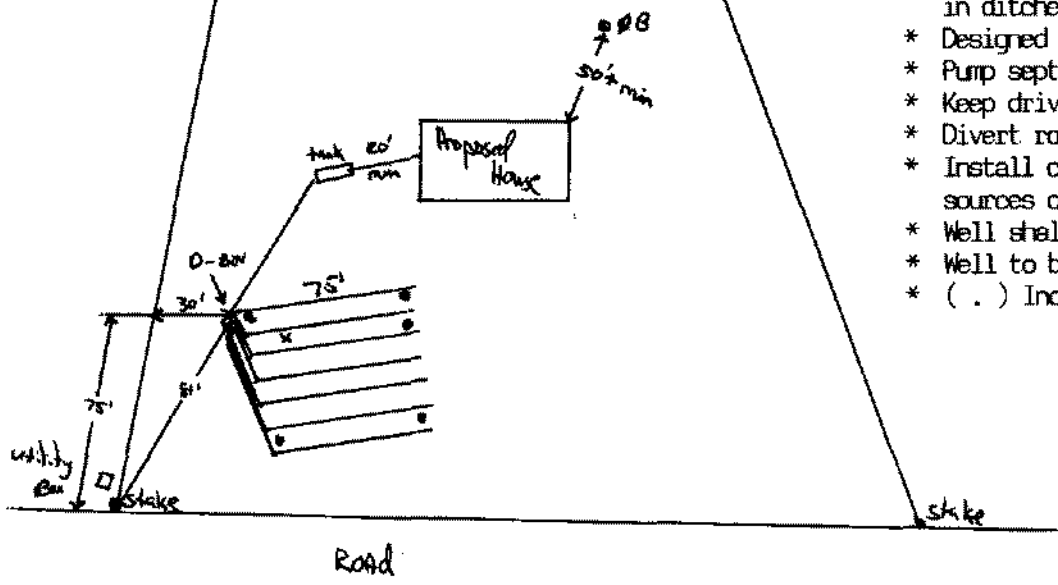
20' Easement 20' Easement for lot 44 Basement Utility

The information required above has been drawn on the attached copy of the sketch submitted with the application. Attach additional sheets as necessary to illustrate the design.

Lot 44

Lot 45

Lot 46



- * Drawing not to scale.
- * Permit void if house location interferes with proposed drainfield location.
- * Drainfield to be 100'+ from all class III wells and 50'+ from all class II wells.
- * Remove all trees within 10' of drainfield.
- * Install (7) 75' lines in 36" wide ditches, following land contours.
- * Install septic tank and distribution box shallow (18" to 24") maximum cover.
- * Install ditches at a depth of 45".
- * Follow OSHA codes.
- * Header lines to extend 24" into ditches.
- * Place untreated building paper over gravel in ditches.
- * Designed for basement plumbing? Yes **(No)**
- * Pump septic tank every 3 to 5 years.
- * Keep driveway off drainfield system.
- * Divert roof drains away from drainfield.
- * Install class ~~3~~ well 50'+ from all sources of contamination.
- * Well shall not be located in a low area.
- * Well to be 10'+ from all property lines.
- * (.) Indicates soil boring.

The sewage disposal system is to be constructed as specified by the permit or attached plans and specifications .

This sewage disposal system construction permit is null and void if (a) conditions are changed from those shown on the application (b) conditions are changed from those shown on the construction permit.

No part of any installation shall be covered or used until inspected, corrections made if necessary, and approved, by the local health department or unless expressly authorized by the local health dept. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary, upon the direction of the Department.

Date: Jan 29, 1991 Issued by: [Signature] Sanitarian

Date: 2-8-90 Reviewed by: [Signature] Supervisory Sanitarian

This Construction Permit Valid until July 1991

If FHA or VA financing

Reviewed by Date _____ Date _____
 Supervisory Sanitarian Regional Sanitarian