

Commonwealth of Virginia
Uniform Water Well Completion Report

FILED
2008

258-1-73

Owner Babcock Construction
Address PO. BOX 593, SPOTSV VA 22552
Phone 540-898-2257 Fax 540-898-0518
Location Norfolk Estg Lot 73

Tax Map ID 258-79
VDH Permit SWP-01-667
WVCS Permit _____
WVCS ID _____
County Stafford

* Well Data *

General Information

Drilling Method Rotary
Depth to Bedrock 92
Static Water Level 30
Well Disinfected (Y or N) _____

Date Completed 7-23-02
Yield 20 (GPM)
Stabilized Water Level _____
Disinfectant Used _____

Total Depth of Well 225
Length of Test 1 hr
Natural Flow (Rate) 20 gpm
Artesian Head _____

Casing

From 0 To 65
Size 6 1/2 Material PRC
Weight/Schedule 40

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

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

Gravel Pack

From _____ To NIA

From _____ To _____

From _____ To _____

Grout

From 0 To 60
Bore Hole Size 10 in
Type Port Land / Retient
Method Pressure

From _____ To _____
Bore Hole Size _____
Type _____
Method _____

From _____ To _____
Bore Hole Size _____
Type _____
Method _____

Water Zones or Screened Intervals

From _____ To 208
Mesh Size 20st Diam 4"
From 15 To 225
Mesh Size 20st Diam 4"

From _____ To _____
Mesh Size _____ Diam _____
From _____ To _____
Mesh Size _____ Diam _____

From _____ To _____
Mesh Size _____ Diam _____
From _____ To _____
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 _____
Concrete Plug: 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: _____

PERMIT

Tax map 258-73
SWP-01-683

* Drillers Log *

Depth	Description of Formation or Sediment	Remarks
0-8	Red soil	
8-17	Tan soil	
17-30	Orange soil	
30-36	Brown soil shelly	
36-42	Gray soil shelly	
42-225	Blue Gray Rock	

(Use 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 Diamond Well Drilling
Address 7500 Bruce Road
Fredericksburg Virginia
Phone 591-786-7373

Drillers Signature [Signature]
Date 7-29-07 Representing Diamond Well Drilling

Virginia Contractors License Number 2705 007998A