

COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT

• BWCN No. _____

(Certification of Completion/County Permit)

Control Board
11143
North Hamilton St.
Richmond, Va. 23230

County/City Stafford

Keith Atkins
Atkins Construction
P.O. Box 313
Stafford Va 22554
County/City Stamp 659-4394

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

• 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. A.
• Water Analysis _____
• Aquifer Test _____

• Owner Robert Malcolm
• Well Designation or Number _____
Address RT. # 3 Box 935
Stafford, Va 22554
Phone 659-5811
• Drilling Contractor John L. Danielson, Jr., Inc.
Address 46.6 Hood Drive
Fredericksburg, Virginia 22401
Phone (703) 898-6025

STAFFORD SD 84-285
Tax Map I.D. No. 29-37A
Subdivision _____
Section _____
Block _____
Lot _____
Class Well. I _____, IIA _____
IIB , IIIA _____, IIIB _____
IIIC _____, IIID _____, IIIE _____

WELL LOCATION: .5 (feet/miles) S (direction) of RT. # 630 + Rollinswood Ln.
and .1 (feet/miles) SW (direction) of Rollinswood Ln.
(If possible please include map showing location marked)

Date started 6-20-85 • Date completed 6-20-85 Type rig Air Rotary

1. WELL DATA: New Reworked _____ Deepened _____

• Total depth 260 ft.
• Depth to bedrock 163 ft.
• Hole size (Also include reamed zones)
• 10 inches from 0 to 167 ft.
• 6 inches from 167 to 260 ft.
• _____ inches from _____ to _____ ft.
• Casing size (I.D.) and material
• 6 1/4 inches from +1 to 167 ft.
Material black steel
Wt. per foot 131.6 or wall thickness .188 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 _____
• _____ inches from _____ to _____ ft.
• Mesh size _____ Type _____
• Gravel pack
• From _____ to _____ ft.
• From _____ to _____ ft.

Approximate Drawdown 50 feet.

2. WATER DATA • Water temperature _____
• Static water level (unpumped level-measured) 40
• Stabilized measured pumping water level 90
• Stabilized yield 25 gpm after 1 hr.
Natural Flow: Yes _____ No flow rate _____ g p
Comment on quality _____

3. WATER ZONES: From 180 To 181
From 210 To 211 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 H.P. _____
• Intake depth _____ • Capacity _____ at _____ 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 _____
Pump installed through Mr. Atkins
Watertight Cap

Grout 6-21-85
From 0 to 50 ft. Type Neat Cement
to _____ ft. Type _____
pressure grout
19 bags of cement (Installer Watertight Cap)
OVER

630 - Robert Malcolm & Rollings well Lvs.

BWCM No. _____

requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in the State of Virginia, 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 logs 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	REMARKS	Drilling Time (Min.)	
From	To	(color, material, fossils, hardness, etc.)	(water, caving, cavities, broken, core, shot, (etc.))		
0	15	Brown clay		25	+ 1 ft. Water high top 19' Brass casing 50' Grout 168' Casing .188 Casing 180'-181' water zone 210'-211' water zone Dept: 260ft
15	50	yellowish brown clay		45	
50	163	Blue sand		1 1/2 hrs	
163	260	gray shale		2 hrs	
			Approximate Water zones 180' - 181' 210' - 211'		

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.

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
5312 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

14. WATER SERVICE PIPE: Checked under _____ p.s.i. for _____ minutes. Pipe size _____ inches, Material _____
 Installer _____
 Date _____

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: Anna T. Danielson (Seal), Date: 6/25/85
 (Well driller or authorized person) License No. _____