

WELL COMPLETION REPORT

BWCM No. _____

(Certification of Completion/County Permit)

County/City Stafford

County/City Stamp

Virginia Plane Coordinates

N _____

E _____

Latitude & Longitude

N _____

W _____

Topo. Map No. 182B

Elevation _____ ft.

Formation _____

Lithology _____

River Basin _____

Province _____

Type Logs D. L.

Cuttings No. A.

Water Analysis _____

Aquifer Test _____

Owner Bonnie Mark Carriger

Well Designation or Number _____

Address 22 Tara Lane Stafford Va. 22351

Phone 659-6940

Drilling Contractor John L. Danielson, Jr., Inc.

Address 4616 Hood Drive Fredericksburg, Virginia 22401

Phone (703) 898-6025

SWCB Permit _____

County Permit _____

Certification of inspecting official: This well does _____ does not meet code/low requirements.

S. _____

Date _____

For Office Use

189-88-600 ^{1/2}/₁₈₈ ^{Kear}/_{Stafford}

Tax Map I.D. No. 30-182A

Subdivision Twin Oaks

Section _____

Block _____

Lot * 22

Class Well I _____ IIA _____

IIA IIB _____ IIIA _____ IIIB _____

IIIC _____ IIID _____ IIIE _____

WELL LOCATION: 500 feet/miles South direction of Tara & Twin Oaks Drive

and W (direction) of Tara Lane

(If possible please include map showing location marked) 1 1/2 miles S of Stafford

Date started 12/7/89 Date completed 12/7/89

Intersecting 6891 130th St

Twin Oak - last lot on Stafford

West S. of Tara Lane

Type air rotary

WELL DATA: New Reworked _____ Deepened _____

Total depth 200 ft.

Depth to bedrock _____ ft.

Hole size (Also include reamed zones)

- 10 inches from 0 to 80 ft.
- 6 1/2 inches from 80 to 200 ft.

Casing size (I.D.) and material

- 6 1/2 inches from 0 to 80 ft. Material P.V.C. Well Casing
- 4 inches from 75 to 160 ft. Material P.V.C.
- 4 inches from 180 to 200 ft. Material P.V.C.

Wt. per foot _____ or wall thickness SDR 27 in.

Wt. per foot _____ or wall thickness Schedule 40 in.

Wt. per foot _____ or wall thickness Schedule 40 in.

Screen size and mesh for each zone (where applicable)

- 4 inches from 160 to 180 ft.
- Mesh size 10 Type P.V.C.

Approximate Drawdown 50 feet.

2. WATER DATA • Water temperature _____

Static water level (unpumped level measured) 80

Stabilized measured pumping water level 130

Stabilized yield 30 gpm after 1 hr

Natural Flow: Yes _____ No _____ flow rate _____ gpm

Comment on quality _____

3. WATER ZONES: From 160 To 180

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 _____

Gravel pack

- From _____ to _____ ft.
- From _____ to _____ ft.

Grout

- From 0 to 50+ ft. Type Neat Cement
- From _____ to _____ ft. Type _____

Pressure Grouting

12/18/89

130 ft. casing pulled

Plugging grout

you will encounter 4" level approx. 75'

OVER

Mark Carringer

Owner

For Super

Seaford Twp. off Main St. 571

Health D.

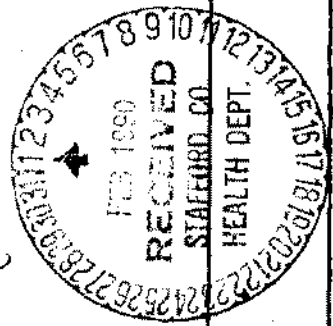
89-88-600
009-88-600

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells intended for water, or any other non-exempt well. This information must be submitted whether the well is completed or not. Information required includes: an accurately and completely prepared water well completion report, full logs of cuttings taken at ten foot intervals (unless exemption is secured), the results of any chemical analyses, and operation, pumpage and use reports are required from owners of public supply and industrial wells. County or State permits to drill any well in the state. Some counties require submission of a water well completion report. The Virginia State Health Department requires a report for public supply wells.

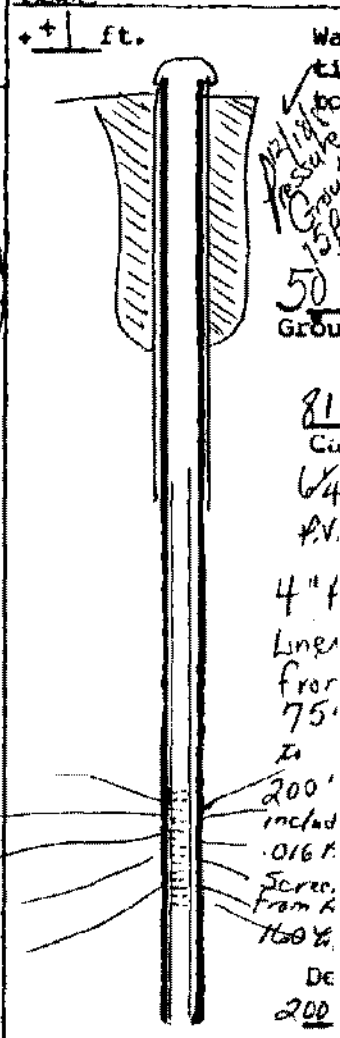
10. DRILLERS LOG (use additional Sheets if necessary)

DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, casing, cavities, broken, core, shot, etc.)
From	To		
0	10	Sandy clay	
10	30	red clay	
30	45	sand & gravel	
45	60	blue clay	
60	75	sand & gravel with sandstone	
75	80	sandstone	
80	120	brown clay	
120	140	blue clay	
140	160	yellow clay	
160	180	grey sand	
180	200	brown clay	

Approximate Water Zones 160-180



11. Net 12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)



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 _____ 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 Mark Carringer (Seal), Date 12/19/89
 (Well driller or authorized person) License No. _____

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 Pembroke Office Park Suite 310 Pembroke No. 2 Va. Beach, Va. 23462 804-499-8742
- West Central Reg. Off. Executive Park 3312 Peters Creek Road Roanoke, Va. 24019 703-982-7432
- Northern Virginia Reg. Off. 5515 Cheroke Avenue Suite 404 Alexandria, Va. 22312 703-750-9111