

Keeping you in the
flow of things



Commonwealth of Virginia Uniform Water Well Completion Report

Owner Piccard Buildings & Dev.
Address 1300 Piccard Dr. #205
Rockville MD
Phone (301) 948-9208
Location The Willows Sec. 5 Lot # 609

Tax Map ID 36B-5-69
VDH Permit SWP-01-189
VWCB Permit _____
VWCB ID _____
County Stafford

Well Classification IIIA _____ IIIB IIIC _____ IV _____
* Well Data *

General Information
Drilling Method Air Rotary
Depth to Bedrock 60'
Static Water Level 30'
Well Disinfected (Y or N) N

Date Completed 8/8/01
Yield 20 (GPM)
Stabilized Water Level _____
Disinfectant Used _____

Total Depth of Well 380'
Length of Test 1 hr.
Natural Flow (Rate) N
Amount Used _____

Casing From 68 1/2' To 68 1/2'
Size 10 1/4" ID Material PVC
Weight/Schedule 3.441 # per ft.

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

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

Gravel Pack From _____ To _____
Hole Size _____
From _____ to _____ ft.

From _____ To _____
" from _____ to _____ ft.

From _____ To _____
" from _____ to _____ ft.

From 68 1/2' To 0
Bore Hole Size 10" x 68 1/2'
Type Bentonite F-2 seal
Method pressure grout from bottom to top

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

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

Water Zones or Screened Intervals
From 263' To 265'
Mesh Size _____ Diam _____
From _____ To _____
Mesh Size _____ Diam _____

From 368' To 370'
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 Dig Wells
Casing Removed Y or N? _____
Depth to which casing was removed: _____
Depth and Type of Fill _____
Source of Fill _____
Benign Plugs 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 _____
 Installed watertight top

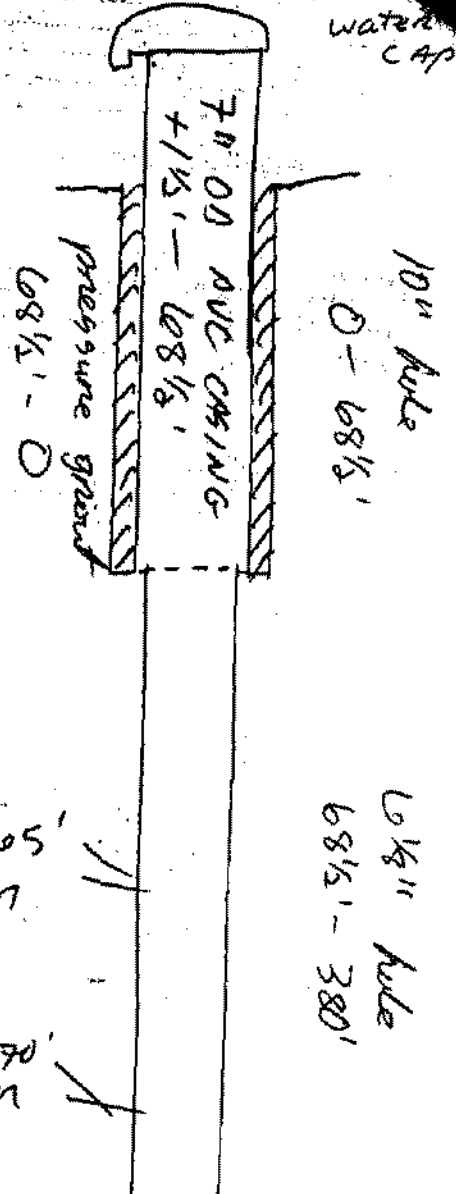
Drillers Log

NOT TO
Remarks

Depth

Description of Formation or Sediment

0	20'	brown sandy clay
20'	60'	Tan/brown sandy clay
60'	68'	med hard sedimentary rock
68'	380'	grey hard rock



263'-265'
3 GPM

368'-370'
17 GPM

(User additional Sheets if necessary)

I hereby certify the information contained here is true and that this well was installed and constructed in accordance with the permit and that the well complies with all applicable state and local regulations, ordinances and laws.

Company ARTESIAN WATER WELLS, INC.
 Address 11412 Gordon Rd
F. BURG VA 22407
 Phone (540) 285-8163

Date 8/8/01 Representing Wade N. Duffin
A. W. W. S.

Drillers License Number 2705-046112