

22
 22402
 Commonwealth of Virginia
 Uniform Water Well Completion Report

36-44-C

Tax Map ID 36-44-3
 VDH Permit WS-93-32
 VWCB Permit _____
 VWCB ID _____
 County Stafford
2/5/93 Christy Jewell
2/9/93 Karl Khololph

Everett
Via De Rosa Drive
Stafford, Va. 22559
720-3231

Bryant Catala #3 (631)
 Well Classification IIIA IIIB IIIC IV
183C 3/4 M. East of 651 + 616 * Well Data *

General Information

Drilling Method Air Rotary
 Depth to Bedrock 92
 Static Water Level 50
 Well Disinfected (Y or N) _____

Date Completed 6/24/93
 Yield 5 (GPM)
 Stabilized Water Level 240
 Disinfectant Used _____

Total Depth of Well 280
 Length of Test 1 Hr
 Natural Flow (Rate) _____
 Amount Used _____

Casing

From +1 To 92
 Size 6.4 Material PVC
 Weight/Schedule SDR 27

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

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

Gravel Pack

From _____ To _____
 Hole size 10" from 0 to 70 ft.
 Gravel _____
 Bore Hole Size _____
 Type _____
 Method _____

From _____ To _____
 Hole size 7 1/8" from 70 to 92 ft.
 Gravel _____
 Bore Hole Size _____
 Type _____
 Method _____

From _____ To _____
 Hole size 6 1/8" from 92 to 280 ft.
 Gravel _____
 Bore Hole Size _____
 Type _____
 Method _____

Water Zones or Screened Intervals

From 262 To 263
 Mesh Size _____ Diam _____
 From _____ To _____
 Mesh Size _____ Diam _____

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 _____
 Bentonite 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
 Suggest setting pump @ approx 260 ft.

SEE BACK

Hand
Steven G. Gresham
Bryant # 3
Slafford # 651
 Drillers Log

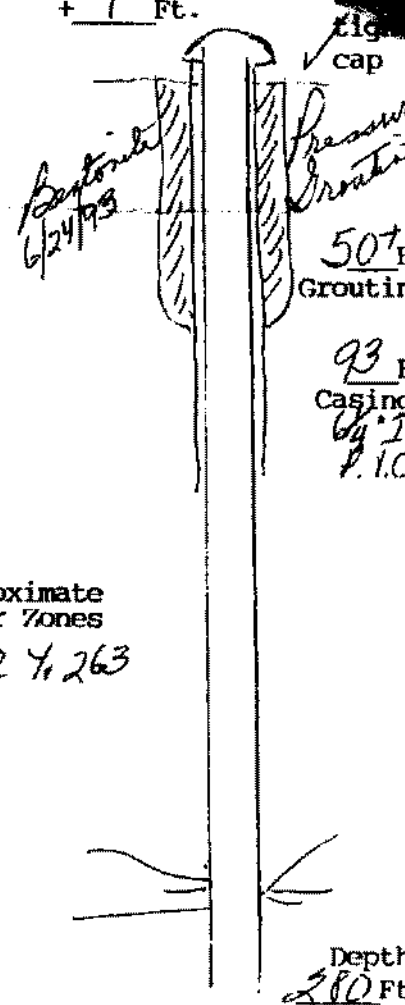
spe
 in of Virginia
 of Health
 or V.A. Case Number
 applicable
 Date 7-20-93
 Owner State Energy

Depth Description of Formation or Sediment

0	10	Red Clay
10	40	Micaceous formation/Red
40	60	Micaceous formation/Brown
60	92	Brown Shale
92	280	Blue Granite

DIAG.
 (NOT TO SCALE)

+ 1 Ft.



Approximate Water Zones

262 ft, 263

(User 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 JOHN L. DANIELSON, JR., INC.
 Address 4616 HOOD DRIVE
FREDERICKSBURG, VIRGINIA 22408
 Phone (703) 898-6025 / 898-9355

Drillers Signature John L. Danielson, Pres
 Date 6/24/93 Representing JOHN L. DANIELSON, JR., INC.

Virginia Contractors License Number CLASS A 2701 014084A H/H WWC