

**Commonwealth of Virginia
Uniform Water Well Completion Report**

Owner Randall Hedge
 Address 2010 Charles St.
Fredericksburg, Va. 22401
 Phone H. 899-1754 W. 371-3221 Mother 373-9320
 Location Potomac Run #2B

Tax Map ID 37-31-2B
 VDH Permit WS-94-59
 VWCB Permit _____
 VWCB ID _____
 County Stafford
3/2/94 Daniel Jacobson
3/4/94 J.J. H. [unclear]

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

General Information

Drilling Method Air Rotary
 Depth to Bedrock 15
 Static Water Level 40
 Well Disinfected (Y or N) _____

Date Completed 4/7/94
 Yield 4 (GPM)
 Stabilized Water Level 280
 Disinfectant Used _____

Total Depth of Well 360
 Length of Test 1 Hr.
 Natural Flow (Rate) _____
 Amount Used _____

Casing

From +1 To 57
 Size 6 1/2" Material P.V.C.
 Weight/Schedule SDR 27

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

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

Gravel Pack

From _____ To _____

From _____ To _____

From _____ To _____

Hole size

10" from 0 to 57 ft.

6 1/2" from 57 to 360 ft.

_____ " from _____ to _____ ft.

Grout

From 0 To 50'
 Bore Hole Size 10"
 Type Bentonite
 Method Pressure Grouting

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

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

Water Zones or Screened Intervals

From 140 To 141
 Mesh Size _____ Diam _____
 From 200 To 201
 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:

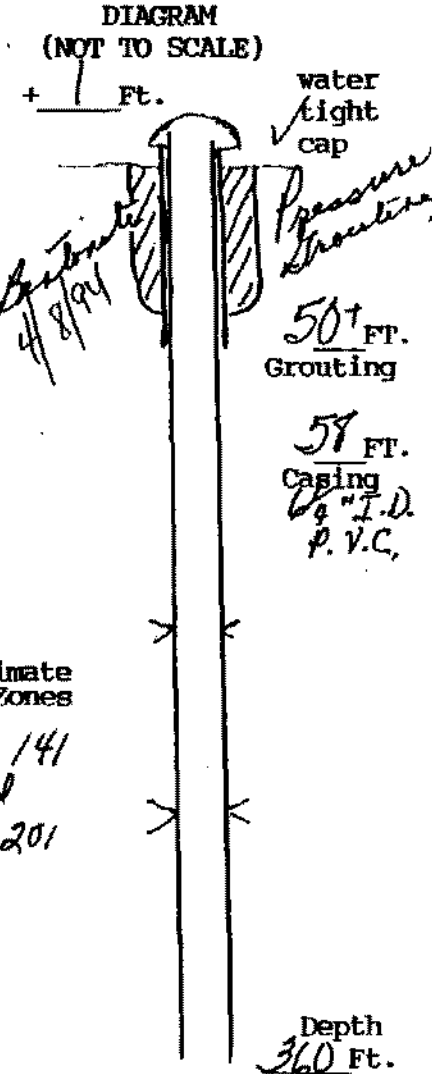
Installed watertight top
 Suggest setting pump @ approx 340 ft.

Virginia Department of Health
 State

Randall Hedge
Poloma Run 2B
Stafford # 653 & 753
 (Near Abel Treatment Plant)
 Drillers Log

Depth Description of Formation or Sediment Remarks

0	10	Red Clay
10	15	Brown Clay
15	360	Light Grey Rock



Approximate Water Zones

140 to 141
 and
 200 to 201



(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, Jr.
 Date 4/8/94 Representing JOHN L. DANIELSON, JR., INC.

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