

Hermanson
Hermanson Construction Services

Shipp's Drive
Leesburg 22407
878-6341 870-4683

Commonwealth of Virginia
Uniform Water Well Completion Report

Owner Gary Hermanson / For Sale
Address _____

Tax Map ID 39-117
VDH Permit SWT-95-41

Phone _____
Location _____

VWCB Permit _____
VWCB ID _____
County Stafford

Well Classification IIIA IIIB IIIC IV
* Well Data *

2/14/95 Rob Snyder
SSK

General Information
Drilling Method Air Rotary
Depth to Bedrock _____
Static Water Level approx 40'
Well Disinfected (Y or N) _____

Date Completed 4/11/95
Yield 15 (GPM)
Stabilized Water Level approx 80'
Disinfectant Used _____

Total Depth of Well 120'
Length of Test approx 1 Hr
Natural Flow (Rate) _____
Amount Used _____

Casing
From 1 To 69
Size 6 1/4 Material P.V.C.
Weight/Schedule SDR 27

From 69 To 89
Size 6 1/8 Material P.V.C.
Weight/Schedule SDR 21

From 80 To 100
Size 4 Material P.V.C.
Weight/Schedule Sch. 40

Gravel Pack
From _____ To _____
Hole size 10" from 0 to 90 ft.
Grout
From 0 To 50+
Bore Hole Size 10" 4/11/95
Type Bentonite
Method Pressure Grouting

From _____ To _____
Hole size 6 1/2" from 90 to 120 ft.
From _____ To _____
Bore Hole Size _____
Type _____
Method _____

From _____ To _____
Hole size _____ from _____ to _____ ft.
From _____ To _____
Bore Hole Size _____
Type _____
Method _____

Water Zones or Screened Intervals
From 100 To 120
Mesh Size 20 Diam 4" (P.V.C.)
From _____ To _____
Mesh Size _____ Diam _____

From 100 To 120
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. 100 ft.

