

Water Control Board
P. O. Box 11143
2111 North Hamilton St.
Richmond, Va. 23230

(Certification of Completion/County Permit)

Water Technology
W. Koltzsch
128 Old Manassas Rd.
Dunsmuir, Ca. 22076
1-703-221-9510
County/City Stamp

County/City *Stafford*

SWCB Permit _____
County Permit _____
Certification of inspecting official _____
This well does _____ does not _____
meet code/law requirements _____
S. _____
Date _____
For Office Use

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 *N. A.*
Water Analysis _____
Aquifer Test _____

Owner *For Sale*
Well Designation or Number _____
Address _____
Phone _____
Drilling Contractor *John L. Danielson, Jr., Inc.*
Address *4616 Hood Drive*
Fredericksburg, Virginia 22401
Phone *(703) 898-6025*

189-89-219 *4/14/89* *Ray K. Kitchel*
Tax Map I.D. No. *40A-5*
Subdivision *Widewater*
Section _____
Block _____
Lot *5*
Class Well *I* *IIA*
IIIB *IIIA* *IIIB*
IIIC *IIID* *IIIE*

WELL LOCATION: *1/2* (feet/miles) *N* direction of *Lower Widewater Drive #608*
and *300* (feet/miles) *W* (direction) of *of Widewater Drive*
(If possible please include map showing location marked)

Date started *4/10/90* Date completed *4/11/90* Type rig *Air Rotary*

WELL DATA: New Reworked _____ Deepened _____
Total depth *310* ft. *42*
Depth to bedrock _____ ft. *12*

Hole size (Also include reamed zones)
• *7 7/8* inches from *0* to *244* ft.
• *4 1/8* inches from *244* to *310* ft.
• _____ inches from _____ to _____ ft.

Casing size (I.D.) and material
• *4 1/2* inches from *71* to *244* ft.
Material *PVC*
Wt. per foot _____ or wall thickness *SDR 17* in.
• *2* inches from *239* to *289* ft.
Material *galvanized steel*
Wt. per foot _____ or wall thickness _____ in.
• *2* inches from *300* to *310* ft.
Material *galvanized steel*
Wt. per foot _____ or wall thickness _____ in.

Screen size and mesh for each zone (where applicable)
• *2* inches from *289* to *300* ft.
• Mesh size *.020* Type *316 stainless steel*
• _____ inches from _____ to _____ ft.
• Mesh size _____ Type _____
• _____ inches from _____ to _____ ft.
• Mesh size _____ Type _____
• _____ inches from _____ to _____ ft.
• Mesh size _____ Type _____

Gravel pack
• From _____ to _____ ft.
• From _____ to _____ ft.

Grout
• From *0* to *50* ft. Type *Neat Cement* *4/16/90*
• From _____ to _____ ft. Type _____
Installed Water tight top
Suggest setting pump @ approx 215'
Well will be developed 2" @ approx 239'
OVER

Approximate Drawdown *115* feet.

2. WATER DATA • Water temperature _____ °F
• Static water level (unpumped level-measured) *90* ft.
• Stabilized measured pumping water level *205* ft.
• Stabilized yield *15* gpm after *1* hours
Natural Flow Yes No flow rate _____ gpm
Comment on quality _____

3. WATER ZONES: From *280* To *305*
From _____ To _____ From _____ To _____
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 _____

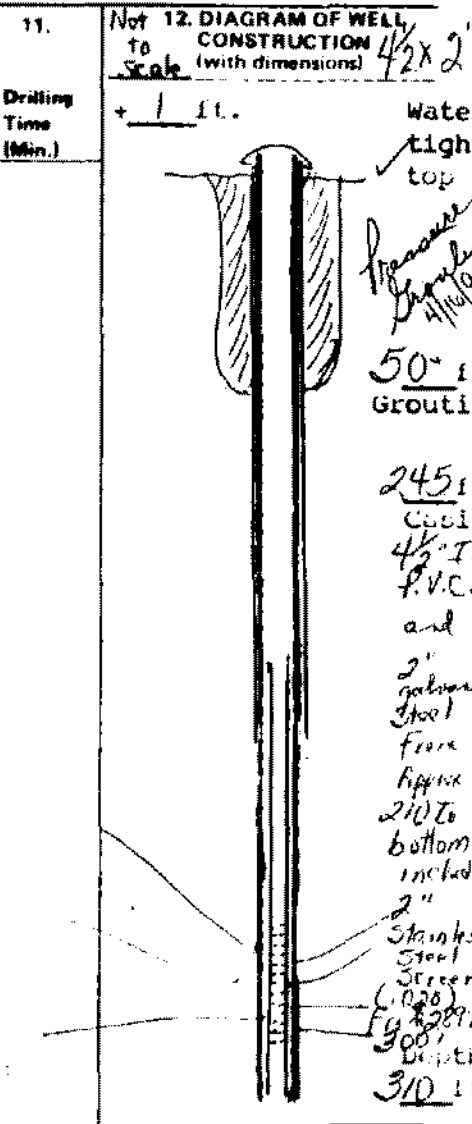
8. ABANDONMENT (where applicable) • yes _____ no _____
Casing pulled yes _____ no _____ not applicable _____
Plugging grout From _____ to _____ material _____
Pump installed through *Water*

Information for users, or any other person, who is required to submit a report to the State Water Control Board regarding the construction of a well. Information required includes: an accurately and completely prepared water well completion report, full data from any geophysical logs, drill cuttings taken at ten foot intervals (unless otherwise specified), the results of any chemical analyses, and copies of any geophysical logs. Quarterly pumpage and use reports are required from owners of public supply and industrial wells. County or State permits to drill may be required in some parts of the state. Some counties require submission of a water well completion report. The Virginia State Health Department requires a water well completion 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, caving, cavities, broken, core, shot, etc.)
From	To		
0	10	red clay	
10	40	yellow sand	
40	100	Blue Marl	
100	200	Black sand	
200	280	Brown clay	
280	305	grey sand	
305	310	brown clay	

Approximate water zones
280 to 305



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 _____

- State Water Control Board Regional Offices**
- Valley Reg. Off.
116 North Main Street
P. O. Box 268
Bridgewater, Va. 22812
703-828-2595
 - Southwest Reg. Off.
408 East Main Street
P. O. Box 476
Arlington, Va. 24210
703-628-5183
 - West Central Reg. Off.
Executive Park
3312 Peters Creek Road
Roanoke, Va. 24019
703-982-7432
 - Piedmont Reg. Off.
4010 West Broad Street
P. O. Box 6616
Richmond, Va. 23230
804-257-1006
 - Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-499-8742
 - Northern Virginia Reg. Off.
5515 Charokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111

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 Anna J. Danielson (Seal), Date 4/17/90
 License No. _____