

**COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT**

*BWCM No. _____

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

(Certification of Completion/County Permit)

Ethelma Carter
Carter Construction
1100 Walnut Ridge Drive
Stafford, Va. 22554
752-2475

40-24

County/City *Stafford*

County/City Stamp

SWCB Permit _____
County Permit _____
Certification of inspecting official:
This well does _____ does not _____
meet code/low requirements.
S. _____
Date _____

For Office Use

189-89-242 9/30/89 Richard Smith
Tax Map I.D. No. ? *Permit*
Subdivision *Widewater*
Section _____
Block _____
Lot *#13*
Class Well: I _____ IIA _____
IIB IIA _____ IIB _____
IIC _____ IID _____ IIE _____

* Virginia Plane Coordinates
N _____
E _____
Latitude & Longitude
N _____
W _____
* Topo. Map No. _____
* Elevation _____ ft.
* Formation _____
* Lithology _____
* River Basin _____
* Province _____
* Type Logs *D. L.*
* Cuttings *N. A.*
* Water Analysis _____
* Aquifer Test _____

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

WELL LOCATION: _____ (feet/miles _____ direction) of _____
and _____ (feet/miles _____ direction) of _____
(If possible please include map showing location marked)
Date started *11/15/89* * Date completed *11/16/89* Type rig *Air Rotary*

WELL DATA: New Reworked _____ Deepened _____
* Total depth *300* ft.
* Depth to bedrock _____ ft.
* Hole size (Also include reamed zones)
• *8* inches from *0* to *60* ft.
• *7* inches from *60* to *300* ft.
• _____ inches from _____ to _____ ft.
* Casing size (I.D.) and material
• *4 1/2* inches from *+1* to *299* ft.
Material *P.V.C. (Including 1/2" Screen from 259' to 299')*
Wt. per foot _____ or wall thickness *SDR 17* in.
• _____ inches from _____ to _____ ft.
Material _____
Wt. per foot _____ or wall thickness _____ in.
• _____ inches from _____ to _____ ft.
Material _____
Wt. per foot _____ or wall thickness _____ in.
* Screen size and mesh for each zone (where applicable)
• *4 1/2* inches from *259* to *299* ft.
• Mesh size *.020* Type *P.V.C.*
• _____ 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 *55* ft. Type *Pressure Grouting Noat Cement*
* From _____ to _____ ft. Type _____
By standard water tight plug
Suggest setting pump @ approx 230'

Approximate Drawdown *110* feet.
2. WATER DATA * Water temperature _____ of _____
* Static water level (unpumped level measured) *100* ft.
* Stabilized measured pumping water level *210* ft.
* Stabilized yield *20* gpm after *2* hour
Natural Flow: Yes _____ No Flow rate _____ gpm
Comment on quality _____

3. WATER ZONES: From *273* To *280*
From *285* To *297* 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 *John Carter*

OVER

Owner Jon Carter
For Sale
Wendover #13

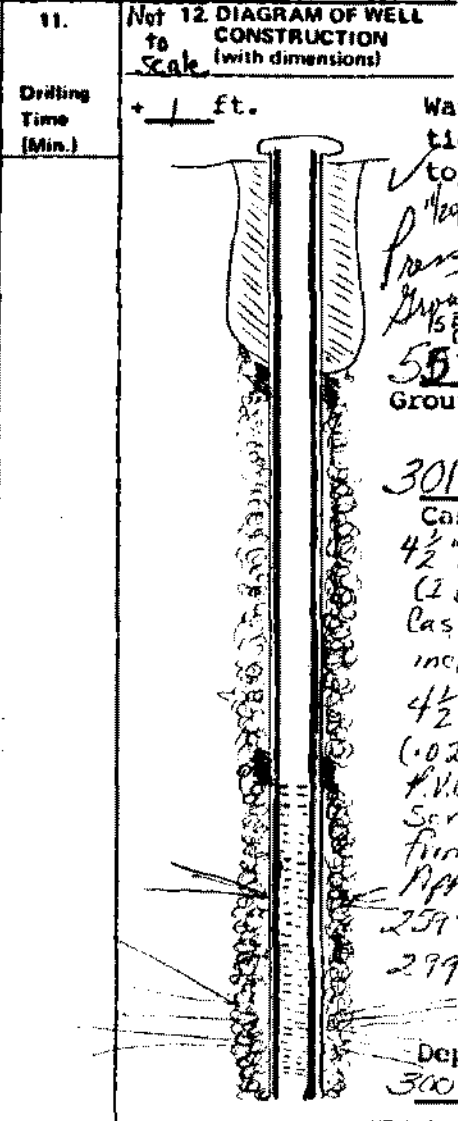
BWCM No. _____

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in the State intended for water, or any other non-exempt well. This information must be submitted whether the well is completed, on standby, or abandoned. Information required includes: an accurately and completely prepared water well completion report, full data from any aquifer pumping tests, drill cuttings taken at ten foot intervals (unless exemption is secured), 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	20	yellow sand	
20	80	red clay & sand	
80	100	black sand	
100	130	grey sand	
130	220	black sand & shells	
220	240	brown clay	
240	260	grey clay	
260	273	sandy clay	
273	280	grey sand	
280	285	grey clay	
285	297	grey sand	
297	300	grey clay	

Approximate
Water Zones
273 to 280
and
285 to 297



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 _____

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 Robert D. Danielson (Seal), Date 11/20/89
 (Well driller or authorized person) License No. _____

State Water Control Board Regional Offices

Valley Reg. Off.
116 North Main Street
P. O. Box 268
Bridgewater, Va. 22812
703-628-2595

Fidmont Reg. Off.
4010 West Broad Street
P. O. Box 6616
Richmond, Va. 23230
804-257-1006

Southwest Reg. Off.
406 East Main Street
P. O. Box 476
Abingdon, Va. 24210
703-628-5183

Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-499-8742

West Central Reg. Off.
Executive Park
5312 Peters Creek Road
Roanoke, Va. 24019
703-982-7452

Northern Virginia Reg. Off.
5515 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111