

WATER WELL COMPLETION REPORT (Certificate of Completion)



County/City Stafford
 Owner BYG Assoc. Inc.
 Well Designation of # Poplar Hills Sec. 1 Lot # 5
 Address 8701 Burwell Rd.
 Phone (703) 764-1714

PWS/ID # SWP-01-287
 Tax Map ID # 40B-5
 Subdivision Poplar Hills
 Section/Block 1
 Lot/GPIN # 5
 Long/Lat _____
 Class/Well INH

40B-1-5

Drilling Contractor Artesian Water Wells, Inc
 Address 11412 Gordon Road
Fredericksburg, VA 22407
 Phone (540) 785-8163

Well Location: _____ (feet/miles) _____ (direction) of _____ and _____
 _____ feet/miles _____ (direction) of _____
 (If possible please include map showing location marked)

Date Started 10/30/01 Date Completed 10/30/01 Type of Rig Air Rotary

1. Well Data:

New Rework Deepened

Total Depth 200 ft

Depth to Bedrock 80 ft

Logs size (Also include reamed zones)

<u>10</u> inches	<u>0</u>	to	<u>98.5</u> ft
<u>9.125</u> inches	<u>86.5</u>	to	<u>200</u> ft
_____ inches	_____	to	_____ ft

Casing size (ID) and material

8.25 inches 1.6' to 98.5' ft

Material PVC

Wt. per ft 3.481 or wall thickness .250 in

4.2 inches 90' to 120' ft

Material PVC

Wt. per ft 2.788 or wall thickness .281 in

4.2 inches 140' to 180' ft

Material PVC

Wt. per ft 2.788 or wall thickness .281 in

Screen size and mesh for each zone (where applicable)

4.2 inches 120 to 140 ft

Mesh size .020 Type PVC

4.2 inches 180 to 200 ft

Mesh size _____ Type _____

_____ inches _____ to _____ ft

Mesh size _____ Type _____

Gravel Pack

Size _____ From _____ to _____ ft

Size _____ From _____ to _____ ft

Grout

From 86.5 to 0 ft. Type Bentonite

From _____ to _____ ft. Type _____

2. Water Data: Water Temperature

Static water level (unpumped level-measured) 75' ft

Stabilized measured pumping water level _____ ft

Stabilized yield 20+ gpm after 1 hours

Natural Flow: Yes No Flow rate _____ gpm

Comment on Quality cloudy w/sand

3. Water Zones:

From _____ To _____

From _____ To _____ From _____ To _____

4. Pump Data:

Type _____ Rated H.P. _____

Intake depth _____ Capacity _____ at _____ head

Model No. _____

5. Disinfection:

Well disinfected? Yes No

Date _____ Disinfectant used _____

Amount _____ Hours used _____

6. Abandonment:

Date _____ Casing pulled

Chlorinated well (explain method) _____

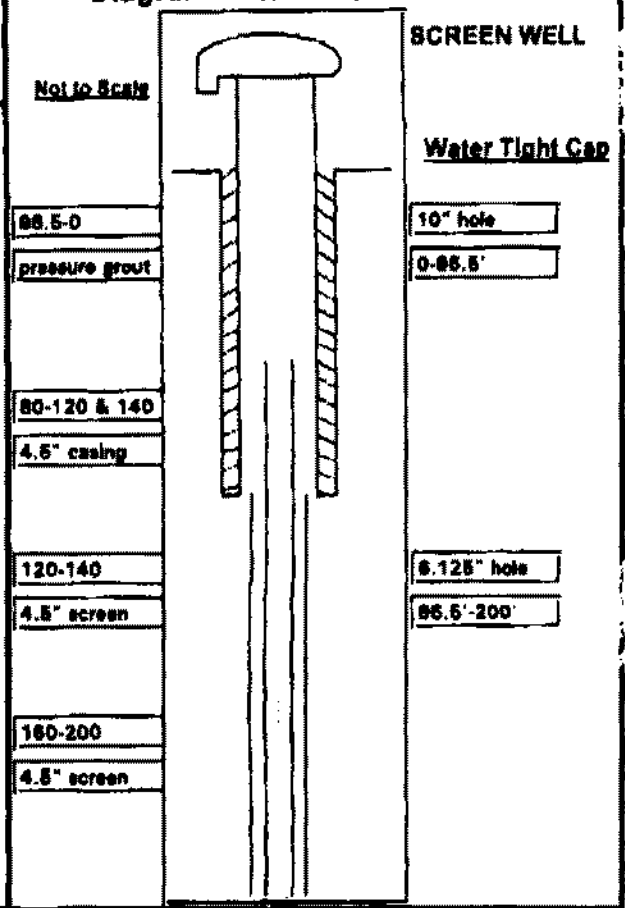
Plugging grout From _____ to _____ material

Owner

Drillers Log (Use Additional Sheets if Necessary)

Depth (Feet)		Type of Rock or Soil (Color, Material, Fossils, Hardness, Etc.)	Remarks (Water, Cavities, Cavings, Broken, Core, Shot, Etc.)
From	To		
0	80	brown sandy clay	
80	120	green hard clay	
120	140	sand	
140	165	clay sand mix	
165	200	sand	
126	136	8 gpm water	
188	188	15+ gpm water	

Diagram of Well Construction



6. 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

8. Wellhead: Type well seal

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

10. Well lot dedicated?

Well lot dedicated? Size ft. x ft. Well house? Distance to nearest pollutant source ft.

11. Water Service Pipe: Checked under

Water Service Pipe: Checked under P.S.I. for minutes. Pipe size inches. Material
 installer Date

12. I certify that the information contained herein is true and correct and that this well has been installed and constructed in accordance with the requirements for well constructions specified in compliance with appropriate county or independent city ordinances and the laws and rules of the Commonwealth of Virginia.

Signature Wade H. Smith
(Well Driller or Authorized Person)

(Seal), Date 10/30/01

License No. 2705-046112