

WATER WELL COMPLETION REPORT

(Certificate of Completion)



City **Stafford**
Owner **Richmond American Homes**
Well Designation of #
Address **3701 Pender Drive**
Fairfax, VA
Phone **703-293-8541**

PWS/ID # **SWP-01-621**
Tax Map ID # **40B-30**
Subdivision **Poplar Hills**
Section/Block **Section 2**
Lot/GPIN # **Lot 30**
Long/Lat
Class/Well **IIIB**

Drilling Contractor **Artesian Water Wells, Inc**
Address **11412 Gordon Road**
Fredericksburg, VA 22407
Phone **(540) 785-8183**

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

Date Started **05-30-02** Date Completed **05-30-02** Type of Rig **Air Rotary**

1. Well Data:

New Rework Deepened

Total Depth **220** ft

Depth to Bedrock **70** ft

Hole size (Also include reamed zones)

10 inches	0 to	73.5 ft
6.125 inches	73.5 to	220 ft
inches	to	ft

Gravel Pack

Size From to ft
Size From to ft

Grout

From **73.5** to **0** ft., Type **Bentonite**
From to ft., Type

Casing size (ID) and material

6.25 inches	+1.5 to	73.5 ft
Material	PVC	
Wt. per ft	3.481 or wall thickness	.250 in
4.2 inches	80 to	180 ft
Material	PVC	
Wt. per ft	2.788 or wall thickness	.291 in
inches	to	ft
Material		
Wt. per ft	or wall thickness	in

2. Water Data:

Water Temperature
Static water level (unpumped level-measured) **85** ft
Stabilized measured pumping water level ft
Stabilized yield **30+** gpm after **1** hours
Natural Flow: Yes No Flow rate gpm
Comment on Quality **Clear**

3. Water Zones:

From **190** To **220**
From To From To

4. Pump Data:

Type Rated H.P.
Intake depth Capacity at TD head
Model No.

5. Disinfection:

Well disinfected? Yes No
Date Disinfectant used
Amount Hours used

6. Abandonment:

Date Casing pulled?
Chlorinated well (explain method)

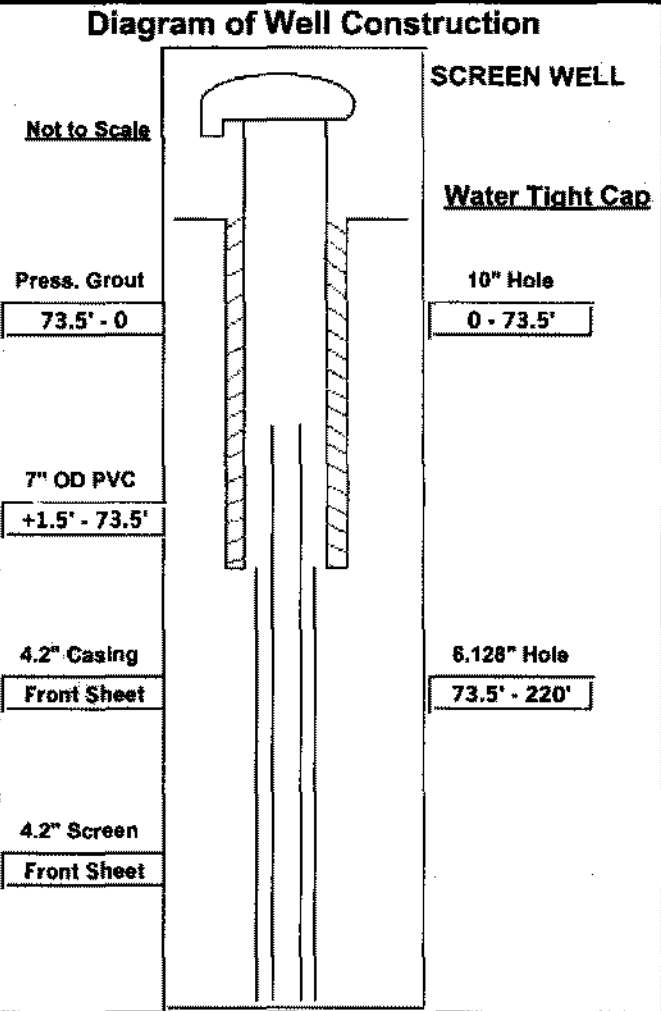
Plugging grout From to material

Screen size and mesh for each zone (where applicable)

inches	to	ft
Mesh size	Type	
inches	to	ft
Mesh size	Type	
inches	to	ft
Mesh size	Type	
inches	to	ft
Mesh size	Type	

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	Brown Sandy Clay	
10	30	Tan Sand	
30	70	Grey Clay	
70	100	Gray Shale	
100	140	Grey Sand Quartz	
140	190	Grey Green Clay	
190	220	White Sand	
190	220	Water @ 30+ GPM	



8. 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 _____

9. Wellhead: Type well seal Water Tight Cap 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? Size _____ ft. x _____ ft.: Well house? Distance to nearest pollutant source _____
 Type _____ Distance to nearest property line _____ ft., Building _____ ft.

11. 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 N. Smith (Seal), Date 06-13-02 License No. 2705-046112
 (Well Driller or Authorized Person)