

COMMONWEALTH OF VIRGINIA
 WATER WELL COMPLETION REPORT
 (Certification of Completion/County Permit)

*BWCM No. _____

Stafford County

County/City Stamp

SWCE Permit _____
 County Permit _____

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

For Office Use

Virginia Plane Coordinates

N _____
 E _____

Latitude & Longitude
 N _____
 W _____

Topo. Map No. _____
 Elevation _____ ft.
 Formation _____
 Lithology _____
 River Basin _____
 Province _____
 Type Logs _____
 Cuttings _____
 Water Analysis _____
 Aquifer Test _____

*Owner Ashby Homes, Inc.

*Well Designation or Number Phillip Oestreich
 Address 45 Hulvay Drive
Stafford, VA. 22554

Phone _____

*Drilling Contractor Van's Const. Co., Inc.
 Address P.O. Box 3306
Fredericksburg, VA. 22402

Phone 373-7502

189-88-434

Tax Map I.D. No. 41-6-3
 Subdivision Tump Farm
 Section _____
 Block _____
 Lot 2

Class Well: I _____, IIA _____
 IIB , IIC _____, IID _____
 IIE _____

WELL LOCATION: _____ feet/miles _____ direction of _____
 and _____ feet/miles _____ (direction of N. Side Rt. 621)
 (If possible please include map showing location marked)

Date started 7-24-89 * Date completed 7-25-89 Type rig Rotary

WELL DATA: New Reworked _____ Deepened _____

Total depth 215 ft.
 Depth to bedrock _____ ft.

Hole size (Also include reamed zones)

- * 6 1/2 inches from 0 to 185 ft.
- * 3 1/2 inches from 185 to 215 ft.
- * _____ inches from _____ to _____ ft.

Casing size (I.D.) and material

- * 4 inches from 0 to 185 ft.
 Material steel
- * _____ inches from _____ to _____ ft.
 Material _____
- * _____ inches from _____ to _____ ft.
 Material _____

Screen size and mesh for each zone (where applicable)

- * 2 inches from 205 to 210 ft.
 Mesh size 0.010 Type galv
- * _____ inches from _____ to _____ ft.
 Mesh size _____ Type _____
- * _____ inches from _____ to _____ ft.
 Mesh size _____ Type _____
- * _____ inches from _____ to _____ ft.
 Mesh size _____ Type _____

Travel pack

- * From _____ to _____ ft.
- * From _____ to _____ ft.

Grout

- * From 50 to 0 ft., Type neat
- * From _____ to _____ ft., Type _____

2. WATER DATA * Water temperature _____ of _____

- * Static water level (unpumped level-measured) 50 ft.
- * Stabilized measured pumping water level _____ ft.
- * Stabilized yield 40 gpm after 2 hours
- Natural Flow: Yes _____ No , flow rate _____ gpm
- Comment on quality clear

3. WATER ZONES: From 205 To 210

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 size _____
 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 _____

The Virginia State Water Control Board information about groundwater and wells for every well made in the State non-exempt well. This information must be submitted whether the well is completed, on standby, or abandoned. An accurately and completely prepared water well completion report, full data from any aquifer pumping tests, drill intervals (unless exemption is secured), the results of any chemical analyses, and copies of any geophysical logs. Quarterly 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. This form requires submission of a water well completion report. The Virginia State Health Department requires a water well completion report for public supply wells.

10. WELL LOG (use additional sheets if necessary)			11. Drilling Time (Min.)	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
DEPTH (feet)		TYPE OF ROCK OR SOIL		
From	To	(color, material, fossils, hardness, etc.)	(water, casing, cavities, broken, core, shot, loss.)	
0	24	sandy, clay		
24	35	sand		
35	70	clay		
70	85	fine sand		
85	105	shell bed		
105	205	clay		
205	210	sand		
210	215	clay		

13. Well not 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.

State Water Control Board Regional Offices

Valley Reg. Off.
 134 North Main Street
 P. O. Box 258
 Bridgewater, Va. 22812
 703-428-2595

Piedmont Reg. Off.
 4010 West Broad Street
 P. O. Box 6816
 Richmond, Va. 23230
 804-257-1006

Southwest Reg. Off.
 408 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

Well Central Reg. Off.
 Executive Park
 5312 Peters Creek Road
 Manassas, Va. 24019

Northern Virginia Reg. Off.
 5515 Cherokee Avenue
 Suite 404
 Alexandria, Va. 22312

Signature *Sue Shelburne* (Seal) Date _____
 (Well driller or authorized person)
 License No. _____