

Atta: Sanitarian

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

*BNOM No. SWP-99-573

Control Board
Box 11143
17th Hamilton St.
Arlington, VA 22230

City STAFFORD / STAFFORD

County/City Stamp

SNCR Permit	
County Permit	
Certification of inspecting official	
This well does <input type="checkbox"/> does not <input type="checkbox"/>	meet code/law requirements.
S	
Date	
For office use	

Virginia Plane Coordinates

N
E

Latitude & Longitude

N
W

Geo Map No.
Elevation

Drainage
Hydrology

Water Basin
Province

Open Logs DRILLERS
Findings

Water Analysis NO
Water Test

* Owner **COVERANT BUILDERS**
* Well Designation or Number **30043**
Address **150 GARDNER RD.**
FREDERICKSBURG, VA 22406-
Phone **(540)752-0099**

* Drilling Contractor **KING GEORGE DRILL SVC INC**
Address **861 MACEDONIA LANE**
COLONIAL BEACH, VA 22443-
Phone **(804)224-9130**

WELL LOCATION FEET direction of
and FEET direction of
(If possible please include map showing location marked)

Date started **03/28/00** * Date completed **03/33/00** Type rig ***94 RIG-WHITE 33**

Tax Map I.D. No.	410-2
Subdivision	ORANGE RIDGE
Section	
Block	
Lot	2
Class Well	IT10

1. WELL DATA: **WELL**

Total depth **272** ft.
Depth to bedrock ft.
Casing size (Also include reamed zones)
* **8** inches from **0** to **250** ft.
* **7.25** inches from **250** to **257** ft.
* **3.00** inches from **257** to **272** ft.
Casing size (I.D.) and material
* **4.5** inches from **41** to **247** ft.
Material **PVC SDR17 SCH40**
Wt. per foot or wall thickness in.
* **2** inches from **247** to **257** ft.
Material **GALVANIZED**
Wt. per foot or wall thickness in.
* inches from to ft.
Material **PVC SDR17 SCH40**
Wt. per foot or wall thickness in.
Screen size and mesh for each zone (where applicable)
* **2** inches from **257** to **272** ft.
* Mesh size **15** Type **STAINLESS STEEL**
* inches from to ft.
* Mesh size Type **STAINLESS STEEL**
* inches from to ft.
* Mesh size Type **STAINLESS STEEL**
* inches from to ft.
* Mesh size Type **STAINLESS STEEL**

Travel Pack
* From to ft.
* From to ft.

Grout
* From **0000** to **50** ft., Type **BEN SEAL**
* From to ft., Type **BEN SEAL**

2. WATER DATA: * Water Temperature **F**
* Static water level (unpumped level) measured **100** ft
* Stabilized measured pumping water level **130** ft
* Stabilized yield **25** gpm after **4** hours
Natural flow **NO** flow rate **GPM**
Comment on quality **GOOD**

3. WATER ZONES: From **250** To **272** From To
From To From To
From To

4. USE DATA:
Type of use: **DRINKING**

Type of facility: **DOMESTIC**

5. PUMP DATA: Type **GARDNER SSB** * Rated HP
* Intake depth * Capacity at

6. WELLHEAD: Type well seal **WELL CAP**
Pressure tank gal., loc.
Sample tap **NO** Measurement port **NO**
Well vent **NO** Pressure relief valve **NO**
Gate valve **NO** Check valve (when required) **NO**
Electrical disconnect switch on power supply **NO**

7. DISINFECTION Well disinfected **YES**
Date **03/30/00** Disinfectant used **CHLORINE**
Amount **50** Hours used

8. ABANDONMENT (where applicable) * **NO**
Casing pulled **Not Applicable**
Plugging grout Fr to wet

WELLS

BNCM No. **SW-99-571**

The law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well 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	REMARKS	Drilling Time (Min.)
0000	10	(Color, material, fossils, hardness, etc.)	
0	70	DIRT	
0	70	YELLOW CLAY	
0	170	BLACK SAND AND SHELLS	
70	250	GREEN AND BROWN SAND	
50	255	BLUE SAND	
55	258	BLUE CLAY	
58	272	WHITE SAND	

12. DIAMETER OF WELL CONSTRUCTION (with dimensions)

13. Well lot dedicated? Size ft. x ft. Well House?
 Distance to nearest pollutant source ft., Type **SEPTIC**
 Distance to nearest property line ft., Building ft.
 14. WATER SERVICE PIPE: Checked under p.s.i. for minutes
 Pipe size inches, Material **BLACK COIL PIPE**
 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 *J. Shepherd* (Seal)
 (Well driller or authorized person)

Date 3-30-2000

License No. 2701 023065A

representing Charles Smith (driller)