

WATER WELL COMPLETION REPORT

(Certificate of Completion)



Robert and Laura Farish

Designation of # C/O Colonial Const.

Address 2 Braddock Drive

Phone 373-2148

Drilling Contractor Artesian Water Wells, Inc

Address 11412 Gordon Road

Fredericksburg, VA 22407

Phone (540) 785-8183

PWS/ID # W-02-279

Tax Map ID # 41D-9

Subdivision Brooke Ridge

Section/Block

Lot/GPIN # Lot 9

Long/Lat

Class/Well IIIB

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

Date Started 05-26-02

Date Completed 05-26-02

Type of Rig Air Rotary

1. Well Data:

New Rework Deepened

Total Depth 240 ft

Depth to Bedrock 100 ft

Hole size (Also include reamed zones)

10	Inches	0	to	133.5	ft
6.125	inches	133.5	to	240	ft
	inches		to		ft

Gravel Pack

Size _____ From _____ to _____ ft

Size _____ From _____ to _____ ft

Grout

From 133.5 to 0 ft., Type Bentonite

From 133.5 to 100 ft., Type Backfill

Casing size (ID) and material

6.125 inches +1.5 to 133.5 ft

Material PVC

Wt. per ft 4.480 or wall thickness .329 in

4.2 inches 100 to 200 ft

Material PVC

Wt. per ft 2.788 or wall thickness .291 in

_____ inches _____ to _____ ft

Material _____

Wt. per ft _____ or wall thickness _____ in

Screen size and mesh for each zone (where applicable)

4.2 inches 200 to 240 ft

Mesh size .020 Type PVC

_____ inches _____ to _____ ft

Mesh size _____ Type _____

_____ inches _____ to _____ ft

Mesh size _____ Type _____

_____ inches _____ to _____ ft

Mesh size _____ Type _____

2. Water Data: Water Temperature

Static water level (unpumped level-measured) 90 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 215 To 240

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?

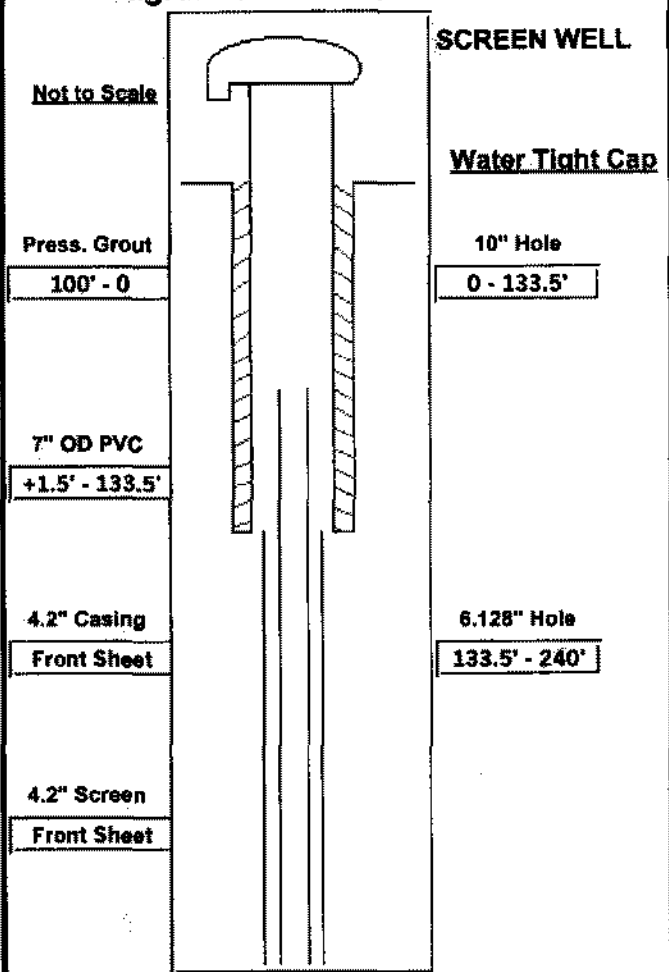
Chlorinated well (explain method) _____

Plugging grout From _____ to _____ material

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	80	Sandy Clay	
80	100	Dark Grey Sandy Clay	
100	190	Grey Hard Clay	
190	210	Brown Hard Clay	
210	250	White Sand	
215	240	Water @ 30+ GPM	

Diagram of Well Construction



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 Walter M. Duff (Seal), Date 06-13-02 License No. 2705-046112
 (Well Driller or Authorized Person)