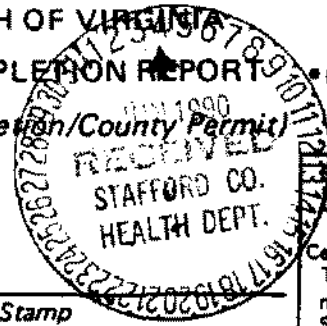


COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT
 (Certification of Completion/County Permit)

BWCM No. _____

43-76-2-11

Water Control Board
 Box 11143
 111 North Hamilton St.
 Richmond, Va. 23230



County/City Stafford County
 County/City Stamp

WCB Permit _____
 County Permit 189-89-267

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 William E. Goodrich
 • Well Designation or Number _____
 Address 10292 Abbott Road
Manassas, VA 22110
 Phone 430-9222 or 361-7100

• Drilling Contractor DOMINION WELL COMPANY
 Address 361-3443 Manassas 361-9126
 Phone 1-800-523-2977

Tax Map I.D. No. 43-76-11
 Subdivision Berea Estates
 Section _____
 Block 106 Berea Woods Dr.
 Lot # 11
 Class Well I _____ IIA _____
 IIB X IIIA _____ IIIB _____
 IIIC _____ IIID _____ IIIE _____

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

Date started 5-22-90 • Date completed 5-22-90 Direction: See Reverse
 Type rig air rotary

1. WELL DATA: New X Reworked _____ Deepened _____

• Total depth 350 ft.
 • Depth to bedrock 30 ft.

• Hole size (Also include reamed zones)
 • 10 inches from 0 to 52 ft.
 • 6 1/8 inches from 52 to 350 ft.

• Casing size (I.D.) and material
 • 6 1/2 inches from +1 to 52 ft.
 Material steel
 Wt. per foot 13 or wall thickness .188 in.

• Screen size and mesh for each zone (where applicable)
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____

• Gravel pack
 • From _____ to _____ ft.
 • From _____ to _____ ft.

• Grout
 • From 0 to 50 ft., Type pressure
 • From _____ to _____ ft., Type 16 bags

2. WATER DATA • Water temperature _____ of _____
 • Static water level (unpumped level-measured) 50 ft.
 • Stabilized measured pumping water level _____ ft.
 • Stabilized yield 25+ gpm after 1 hours
 Natural Flow: Yes _____ No X, flow rate: _____ gpm
 Comment on quality clear

3. WATER ZONES: From 130 To 135
 From 325 To 330 From _____ To _____
 From _____ To _____ From _____ To _____

4. USE DATA:
 Type of use: Drinking X Livestock Watering _____
 Irrigation _____ Food processing _____ Household X
 Manufacturing _____ Fire safety _____ Cleaning _____
 Recreation _____ Aesthetic _____ Cooling or heating _____
 Injection _____ Other _____

• Type of facility: Domestic X 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 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 _____

7. DISINFECTION: Well disinfected _____ yes _____ no _____
 Date _____ Disinfectant used _____
 Amount _____ Hours used _____

8. ABANDONMENT (where applicable) • yes _____ no _____
 Casing pulled yes _____ no _____ not applicable _____
 Plugging grout From _____ to _____ material _____

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made 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)

10. DRILLERS LOG (use additional Sheets if necessary)			11.	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
DEPTH (feet)		TYPE OF ROCK OR SOIL	REMARKS (water, casing, cavities, broken, core, shot, etc.)	Drilling Time (Min.)
From	To	(color, material, fossils, hardness, etc.)		
0	30	Brown Sandy Clay		
30	350	Bluestone./ White & Brown Quartz		
<p>Rt 28 S. to Rt. 17 S. (L) to Rt 654 (R) (at Blue Stafford Water Tower) to Rocky Run Rd. (R) for approx 2 miles to 1st (R) after rd turns to gravel into Berea Estates to "T" (R) to Lot 11 on (R).</p>				

13. Well lot 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 _____

State Water Control Board Regional Offices

Valley Reg. Off.
 116 North Main Street
 P. O. Box 268
 Bridgewater, Va. 22812
 703-828-2595

Piedmont Reg. Off.
 4010 West Broad Street
 P. O. Box 6616
 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

West Central Reg. Off.
 Executive Park
 5312 Peters Creek Road
 Roanoke, Va. 24019
 703-982-7432

Northern Virginia Reg. Off.
 5515 Cherokee Avenue
 Suite 404
 Alexandria, Va. 22312
 703-750-9111

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 _____ (Well driller or authorized person) Date 5-31-90
 License No. _____