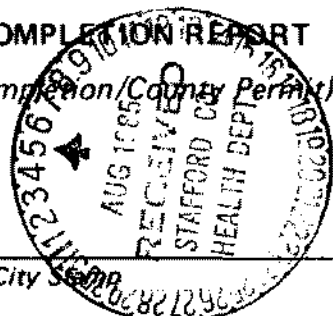


COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT
(Certification of Completion/County Permit)



• BWCM No. _____

Stafford

County/City Stamp

SWCB Permit _____
 County Permit _____
 Certification of inspecting official:
 This well does _____ does not _____
 meet code/low requirements.
 S. _____
 Date _____
 For Office Use

43-76-2-10

Tax Map I.D. No. SD-84-313
 Subdivision Berea Estates
 Section II
 Block _____
 Lot 10
 Class Well I _____, IIA _____
 IIB _____, IIIA X _____, IIIB _____
 IIIC _____, IIID _____, IIIE _____

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 Dennis E. Cwiak
 • Well Designation or Number _____
 Address 5510 Slater St.
 Fredericksburg, VA 22401
 Phone _____
 • Drilling Contractor Van's Construction Co
 Address P.O. Box 3306
 Fredericksburg, VA 22401
 Phone _____

WELL LOCATION: _____ (feet/miles _____ direction) of
 and _____ (feet/miles _____ direction) of Rt 17 to 654 left, bear right
 (If possible please include map showing location marked) at bottom of hill, rgt,
 Date started 7-12-85 • Date completed 7-15-85 Type rig rotory

1. WELL DATA: New X Reworked _____ Deepened _____
 • Total depth 280 ft.
 • Depth to bedrock _____ ft.
 • Hole size (Also include reamed zones)
 • 11 inches from 0 to 87 ft.
 • 6 inches from 87 to 280 ft.
 • _____ inches from _____ to _____ ft.
 • Casing size (I.D.) and material
 • _____ inches from _____ to _____ ft.
 Material steel
 Wt. per foot 13 or wall thickness _____ in.
 • _____ inches from _____ to _____ ft.
 Material _____
 Wt. per foot _____ or wall thickness _____ in.
 • _____ inches from _____ to _____ ft.
 Material _____
 Wt. per foot _____ or wall thickness _____ 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 _____
 • From _____ to _____ ft. Type _____

2. WATER DATA • Water temperature _____ of
 • Static water level (unpumped level-measured) 30 ft.
 • Stabilized measured pumping water level _____ ft.
 • Stabilized yield 40 gpm after 2 hours
 Natural Flow: Yes _____ No X flow rate _____ g pm
 Comment on quality clear
 3. WATER ZONES: From 150 To 275
 From _____ To _____ 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 sub • Rated H.P. 3/4
 • Intake depth 150 • Capacity 18 at 240 head
 6. WELLHEAD: Type well seal pitless
 Pressure tank 42 gal., Loc. _____
 Sample tap X, Measurement port _____
 Well vent _____, Pressure relief valve _____
 Gate valve X, Check valve (when required) _____
 Electrical disconnect switch on power supply _____
 7. DISINFECTION: Well disinfected X
 Date 7-15-85, Disinfectant used Chlorine tab
 Amount 5, Hours used 2
 8. ABANDONMENT (where applicable) • yes _____ no _____
 Casing pulled yes _____ no _____ not applicable _____
 Plugging grout From _____ to _____ material _____

Owner _____

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made intended for water, or any other non-exempt well. This information must be submitted whether the well is completed, on standby, or at. Information required includes: an accurately and completely prepared water well completion report, full data from any aquifer pumping test, 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)			REMARKS (water, caving, cavities, broken, core, shot, etc.)	11. Drilling Time (Min.)	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)			
From	To				
0	20	Clay	Soft places all the way		
20	80	Broken Rock			
80	280	Rock			

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 _____ 60 _____ p.s.i. for _____ 10 _____
 minutes. Pipe size _____ 1 _____ inches. Material _____ plastic
 Installer _____ Van's Construction Co. Inc
 Date _____ 7-15-85

State Water Control Board Regional Offices

Valley Reg. Off.
 116 North Main Street
 P. O. Box 268
 Bridgewater, Va. 22812
 703-628-2595

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) (Seal), Date _____ August 1, 1985
 License No. _____

LOT 7
 VAN'S
 CONSTRUCTION
 SECTION
 11