

COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT

BWCM No. _____

(Certification of Completion/County Permit)

43-47-16

State Water Control Board
P. O. Box 11149
2117 North Hamilton St.
Richmond, Va. 23230

County/City 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

• Virginia Plane Coordinates

N _____
E _____
Latitude & Longitude _____
N _____
W _____

• Topo. Map No. 183D

• Elevation _____ ft.

• Formation _____

• Lithology _____

• River Basin _____

• Province _____

• Type Logs D. L.

• Cuttings N. A.

• Water Analysis _____

• Aquifer Test _____

• Owner Robert A. Wood

• Well Designation or Number 10902 Frederickson Drive

Address Fredericksburg, Va. 22401

Phone (703) 898-6025

• Drilling Contractor John L. Danielson, Jr., Inc.

Address 4616 Hood Drive

Phone Fredericksburg, Virginia 22401

SD-96-561 A. Newborn 11-28-78

Tax Map I.D. No. 43-04-16-2

Subdivision Maple Grove

Section _____

Block _____

Lot #16

Class Well I _____ IIA _____

IIIB _____ IIIA _____ IIIB _____

IIIC _____ IIID _____ IIIE _____

WELL LOCATION: 1 (feet/miles) South direction of 655' 65' 65'

and _____ (feet/miles) (direction) of _____

(If possible please include map showing location marked)

Date started 4/9/87 • Date completed 4/9/87 Type rig Air Rotary

Approximate Drawdown 40 feet.

I. WELL DATA: New Reworked _____ Deepened _____

• Total depth 160 ft.

• Depth to bedrock 88 ft.

• Hole size (Also include reamed zones)

• 10 inches from 0 to 88 ft.

• 6 inches from 88 to 160 ft.

• _____ inches from _____ to _____ ft.

• Casing size (I.D.) and material

• 6 1/2 inches from +1 to 88 ft.

Material Steel

Wt. per foot 13.16 or wall thickness .188 in.

• _____ inches from _____ to _____ ft.

Material _____

Wt. per foot _____ or wall thickness _____ in.

83 • 4 inches from 77' to 160 ft.

Material P.V.C. Well Casing - As Lined - Staked Piles to 156'

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 Neat Cement

• From _____ to _____ ft. Type _____

2. WATER DATA • Water temperature _____ °

• Static water level (unpumped level measured) 60 ft.

• Stabilized measured pumping water level 100 ft.

• Stabilized yield 6 gpm after 1 hour

Natural Flow: Yes _____ No flow rate: _____ gpr

Comment on quality _____

3. WATER ZONES: From 140 To 141

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 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 _____

Pump installed through Dr. Wood

Installed Waterlight top

Suggest setting pump @ approx. 120' (Pumped 12 G.P.M. @ 120' on 4/9/87)

Prop. centralized filtration system out of 4' liner.

Well excavator liner @ approx 77'

Owner

Robert A. Good
Maple Grove # 16
Slipford #654

BWCM No. _____

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)

DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, etc.)
From	To		
0	10	red clay	
10	60	red formation with thin	
60	86	brown formation with fine	
86	120	blue rock	
120	160	blue rock - soft -	inserted liner

Approximate
Water Zones

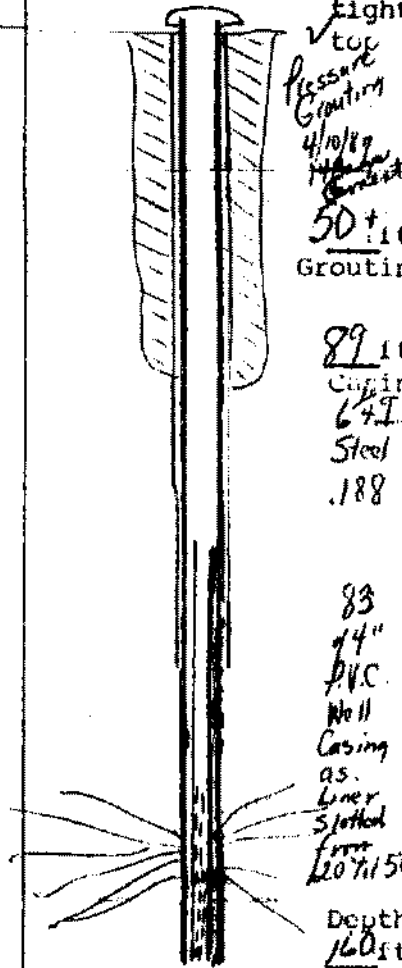
140' ± 141'

11.

Drilling
Time
(Min.)

12. DIAGRAM OF WELL
CONSTRUCTION
(with dimensions)

+ 1 ft.



Water tight
 ✓ top
 Pressure Grouting
 4/10/89
 50' ±
 Grouting
 89 1/2"
 Casing
 6 1/2"
 Steel
 .188
 83
 14"
 PVC
 Well
 Casing
 as
 Liner
 Slotted
 from
 120' to 150'
 Depth
 160 ft

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.

Signature Robert A. Good (Seal), Date 4/13/87
 (Well driller or authorized person) License No. _____

State Water Control Board Regional Offices

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

Southwest Reg. Off.
 408 East Main Street
 P. O. Box 476
 Abingdon, Va. 24210
 703-628-5183

West Central Reg. Off.
 Executive Park
 3312 Peters Creek Road
 Hanoke, Va. 24019
 703-982-7432

Piedmont Reg. Off.
 4010 West Broad Street
 P. O. Box 6616
 Richmond, Va. 23230
 804-257-1006

Tidewater Reg. Off.
 287 Pembroke Office Park
 Suite 310 Pembroke No. 2
 Va. Beach, Va. 23462
 804-499-8742

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