

# WATER WELL COMPLETION REPORT

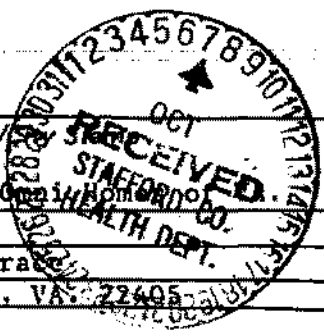
(Certification of Completion/County Permit)

• BVWCM No. \_\_\_\_\_

State Water Control Board  
 P. O. Box 11143  
 2111 North Hamilton St.  
 Richmond, Va. 23230

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

County/City Stafford County



• 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 Donald Bowler/Comair

• Well Designation or Number \_\_\_\_\_

Address 7 Woodland Terrace

Fredericksburg, VA. 22405

Phone 371-6851

• Drilling Contractor Van's Const. Co., Inc.

Address P.O. Box 3306

Fredericksburg, VA. 22402

Phone 373-7502

189-87-603

Tax Map I.D. No. <u>46-46 Part</u>
Subdivision <u>Bowler Family</u>
Section _____
Block _____
Lot _____
Class Well I _____, IIA _____
IIB <u>X</u> , IIIB _____
IIIC _____, IIID _____, IIIE _____

WELL LOCATION: \_\_\_\_\_ (feet/miles \_\_\_\_\_ direction) of \_\_\_\_\_  
 and \_\_\_\_\_ (feet/miles \_\_\_\_\_ direction) of Forbes Street/Next to Falmouth Elem. Sch  
 (If possible please include map showing location marked)

Date started 5-23-88 • Date completed 5-30-88 Type rig Rotary

WELL DATA: New X Reworked \_\_\_\_\_ Deepened \_\_\_\_\_

• Total depth 350 ft.

• Depth to bedrock \_\_\_\_\_ ft.

• Hole size (Also include reamed zones)

- 9 1/2 inches from 0 to 267 ft.
- 6 inches from 267 to 350 ft.
- \_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.

• Casing size (I.D.) and material

- 6 inches from 0 to 267 ft.
- Material steel
- Wt. per foot \_\_\_\_\_ 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 267 to 50 ft.
- From \_\_\_\_\_ to \_\_\_\_\_ ft.

• From 50 to 0 ft. Type neat

- From \_\_\_\_\_ to \_\_\_\_\_ ft. Type \_\_\_\_\_

2. WATER DATA • Water temperature \_\_\_\_\_ of \_\_\_\_\_

- Static water level (unpumped level-measured) 180 ft.
- Stabilized measured pumping water level \_\_\_\_\_ ft.
- Stabilized yield 20 gpm after 2 hours
- Natural Flow: Yes \_\_\_\_\_ No X, flow rate \_\_\_\_\_ gpm
- Comment on quality clear

3. WATER ZONES: From 330 To 340

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 \_\_\_\_\_ • 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)			REMARKS (water, casing, 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	10	sand, gravel			
10	30	clay			
30	50	clay			
50	60	sand			
60	90	clay			
90	130	clay			
130	145	fine sand			
145	260	clay			
260	268	clay			
268	330	rock			
330	340	water			
340	350	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 \_\_\_\_\_ 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.

**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.  
 5315 Cherokee Avenue  
 Suite 404  
 Alexandria, Va. 22312  
 703-750-9111

Signature Sue Shelburne (Seal), Date 6-13-88  
 (Well driller or authorized person) License No. \_\_\_\_\_