

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

BWCM No. _____

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

_____ 47-9-13 _____

County/City Stafford

County/City Stamp

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

• Virginia Plane Coordinates
 _____ N
 _____ E
 Latitude & Longitude
 _____ N
 _____ W
 • Topo. Map No. 182C
 • Elevation _____ ft.
 • Formation _____
 • Lithology _____
 • River Basin _____
 • Province _____
 • Type Logs D. 1.
 • Cuttings N. 2.
 • Water Analysis _____
 • Aquifer Test _____

• Owner John W. Sarborn
 • Well Designation or Number _____
 Address 200 Via De Rosa Dr
Stafford VA 22554
 Phone 659-8371
 • Drilling Contractor John L. Danielson, Jr., Inc.
 Address 4616 Hood Drive
Fredericksburg, Virginia 22401
 Phone (703) 898-6025

50-85-65 M. Lechner 4-19-82
 Tax Map I.D. No. _____
 Subdivision _____
 Section _____
 Block _____
 Lot _____
 Class Well I _____, IIA _____
 IIB _____, IIIA _____, IIIB
 IIIC _____, IIID _____, IIIE _____

WELL LOCATION: 1/2 miles N (direction) of intersection of 607 + 623
 and .5 miles E (direction) of 623
 (If possible please include map showing location marked)
 Water rose 15 ft. in 30 min. @ time of installation
24" I.D. casing holds 23.5 gal. of water per foot.
 Date started 4-2-86 • Date completed 4-2-86 Type Boring Rig

Approximate Drawdown 10 ft.

1. WELL DATA New Reworked _____ Deepened _____

• Total depth _____ 72 ft.
 • Depth to bedrock _____ ft.
 • Hole size (Also include reamed zones)
 • 39 inches from 0 to 20 ft.
 • 29 inches from 20 to 72 ft.
 • _____ inches from _____ to _____ ft.
 • Casing size (I.D.) and material
 • 24 inches from +1 to 72 ft.
 Material concrete
 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 _____
 • _____ 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 _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____

2. WATER DATA • Water temperature _____
 • Static water level (unpumped level measured) _____ 20
 • Stabilized measured pumping water level _____
 • Stabilized yield 12 gpm after _____ @ time of installation 30 hrs
 Natural Flow: Yes _____ No flow rate _____ g p
 Comment on quality _____

3. WATER ZONES: From 25 To 40
 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 seat _____
 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 installation through Sarborn

Shouting

OVER

John

Owner John W. Souborn
Stafford 623

BWCM

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in intended for water, or any other non exempt well. This information must be submitted whether the well is completed, on standby, or (b). Information required includes an accurately and completely prepared water well completion report, full data from any aquifer pumping tests, 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 (color, material, fossils, hardness, etc.) | REMARKS (water, caving, cavities, broken, core, shot, etc.) | Drilling Time (Min.) |
| From | To | | | |
| | | | | |

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.f. 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 ordinance and the laws and rules of the Commonwealth of Virginia.

Signature John W. Souborn (Seal), Date 4/2/86
 (Well owner or authorized person) License No _____



- State Water Control Board Regional Offices
- Valley Reg. Off.
1117 74th Main Street
P.O. Box 268
Hampstead, Va. 22812
703-878-1395
 - Southwest Reg. Off.
108 East Main Street
P.O. Box 576
Harrisonburg, Va. 24210
703-578-5181
 - West Central Reg. Off.
Executive Park
5312 Waters Creek Road
Roanoke, Va. 24019
704-962-7432
 - Roanoke Reg. Off.
44 West Broad Street
P.O. Box 6116
Roanoke, Va. 24016
804-257-1111
 - Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-491-8742
 - Northern Virginia Reg. Off.
5515 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111