

**Commonwealth of Virginia
Uniform Water Well Completion Report**

Owner Robert Williams Tax Map ID 55-13-A2
 Address 28 Henry Sealar VDI Permit WS-93-258
Fredericksburg, VA 22405 VWCB Permit _____
 Phone (703) 371-1192 VWCB ID _____
 Location Next to above address County Stafford
 Well Classification IIIA _____ IIIB XXXXX IIIC _____ IV _____

* Well Data *

General Information

Drilling Method Rotary Date Completed 10-21-94 Total Depth of Well 212 ft.
 Depth to Bedrock _____ Yield 10 (GPM) Length of Test 4 hrs.
 Static Water Level 90 Stblzd Water Level 120 Natural Flow (rate) _____
 Well Disinfected (Y/N) Y Disinfectant Used Chlorine Amount Used 50 PPM

Casing

From +1 to 170 From 170 to 202 From _____ to _____
 Size 4 1/2" Material PVC Size 2" Material Galv. Size _____ Material _____
~~XXXXX~~/Schedule 40 ~~XXXXX~~/Schedule 40 Weight/Schedule _____

Gravel Pack

From _____ to _____ From _____ to _____ From _____ to _____

Grout

From 0 to 50 From 50 to 170 From 170 to 212
 Bore Hole Size 8" Bore Hole Size 7" Bore Hole Size 3-7/8"
 Type Benseal Type _____ Type _____
 Method Pressure Method _____ Method _____

Water Zones or Screened Intervals

From 202 to 212 From _____ to _____ From _____ to _____
 Mesh Size 15 Diam. 2" Mesh Size _____ Diam. _____ Mesh Size _____ Diam. _____
 From _____ to _____ From _____ to _____ From _____ to _____
 Mesh Size _____ Diam. _____ Mesh Size _____ Diam. _____ Mesh Size _____ Diam. _____

* Use Data *

Private Well: Domestic XXXX Agricultural _____ Industrial _____ Monitoring _____
 Public Well: Community _____ Non Community _____

* Abandonment Information *

Bored or Dug Wells

Casing Removed, Y or N?: _____
 If Y, Depth Removed: _____
 Depth and Type of Fill: _____
 Source of Fill: _____
 Bentonite Plugs: From _____ to _____
 From _____ to _____

Wells other than Bored Wells

Casing Removed, Y or N?: _____
 If Y, Depth Removed: _____
 Depth and type of Fill: _____
 Source of Gravel or Sand: _____
 Cement: From _____ to _____
 From _____ to _____

Method of permanently marking location: _____

DRILLING LOG

DEPTH	DESCRIPTION OF FORMATION OR SEDIMENT	REMARKS
0- 10	Brown and gray clay	12" at top
10- 20	Sand	ground level
20- 80	Green clay	50' grove
80-170	Black sand and shells	static level
170-180	White sand	4 1/2" PVC
80-202	Gray clay and pasty sand	Rubber packer
02-212	Blue and white sand	2" steel
		screen

I certify that the information contained here is true and that this well was installed and constructed in accordance with the permit and further that the well complies with all applicable state and local regulations, ordinances and laws.

Name King George Drilling Service, Inc.
 Address Route 1, Box 86-K
Colonial Beach, VA 22443
 Phone (804) 224-9130

Driller's Signature *J. Lane Jordan*
 Date 10/24/94 Representing Kenneth M. Frank, Jr.

Virginia Contractors License Number 023065A

