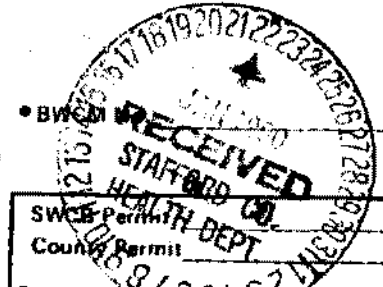


COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT
 (Certification of Completion/County Permit)



City Stafford

County/City Stamp

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

• Owner Mark Sullivan
 • Well Designation or Number "Best Day"
 Address 31 Wood Landing Road
Salisbury, Va 22405
 Phone 371-6824
W 1-703-663-2196
 • Drilling Contractor John L. Danielson, Jr., Inc.
 Address 4616 Hood Drive
Fredericksburg, Virginia 22401
 Phone (703) 898-6025

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

189-89-420 3-9-89
 Tax Map I.D. No. 56-156A
 Subdivision _____
 Section _____
 Block _____
 Lot _____
 Class Well I _____ IIA _____
 IIB IIIA _____ IIIB _____
 IIIC _____ IIID _____ IIIE _____

WELL LOCATION: _____ (feet/miles) (direction) of _____
 and _____ (feet/miles) (direction) of _____ # 712
 (If possible please include map showing location marked # 218 → 600 → 712 (6th lot on left))

Date started 11/6/89 • Date completed 11/7/89 Type rig Air Rotary

WELL DATA: New Reworked _____ Deepened _____

• Total depth 180 ft.
 • Depth to bedrock _____ ft.
 • Hole size (Also include reamed zones)
 • 7 7/8 inches from 0 to 180 ft.
 • _____ inches from _____ to _____ ft.
 • _____ inches from _____ to _____ ft.
 • Casing size (I.D.) and material
 • 4 1/2 inches from +1 to 152 ft.
 Material PVC - CertainTeed
 Wt. per foot _____ or wall thickness SDR 17 in.
 • 4 1/2 inches from 172 to 180 ft.
 Material P.V.C. - CertainTeed
 Wt. per foot _____ or wall thickness SDR 17 in.
 • _____ inches from _____ to _____ ft.
 Material _____
 Wt. per foot _____ or wall thickness _____ in.
 • Screen size and mesh for each zone (where applicable)
 • 4 1/2 inches from 152 to 172 ft.
 • Mesh size 20 Type P.V.C.
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____
 • _____ inches from _____ to _____ ft.
 • Mesh size _____ Type _____

• Gravel pack
 • From 50 to 180 ft.
 • From _____ to _____ ft.

• Grout
 • From 0 to 50 ft. Type Neat Cement
 • From _____ to _____ ft. Type _____

Approximate Drawdown 45 feet.

2. WATER DATA • Water temperature _____ °F
 • Static water level (unpumped level measured) 60 ft.
 • Stabilized measured pumping water level 105 ft.
 • Stabilized yield 30 gpm after 1 hour
 Natural Flow: Yes _____ No _____ flow rate _____ gpm
 Comment on quality _____

3. WATER ZONES: From 152 To 172
 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 Mark Sullivan

Installed watertight cap
suggested hanging pumps @ approx. 125'

OVER

Owner: Mark Sullivan
Stepford #712

PROJECT: 39 MARK S
 GREENWICH DRIVE

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for intended for water, or any other non-exempt well. This information must be submitted whether the well is completed. Information required includes: an accurately and completely prepared water well completion report, full data from any aquifer cuttings taken at ten foot intervals (unless exemption is secured), the results of any chemical analyses, and copies of any geology, pumpage and use reports are required from owners of public supply and industrial wells. County or State permits to drill may be required the state. Some counties require submission of a water well completion report. The Virginia State Health Department requires a water well report for public supply wells.

10. DRILLERS LOG (Use additional Sheets if necessary)				11.	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
DEPTH (feet)		TYPE OF ROCK OR SOIL	REMARKS	Drilling Time (Min.)	
From	To	(color, material, fossils, hardness, etc.)	(water, caving, cavities, broken, core, shot, (etc.))		
0	10	Brown clay			<p>Gravel Packed from Approx. 50' to 180'</p> <p>Approximate Water Zones 152 to 172</p>
10	30	yellow sand			
30	60	blue Marl			
60	90	black sand			
90	110	blue clay			
110	120	black sand			
120	150	blue clay			
150	172	grey sand			
172	180	brown clay			

13. Well not dedicated? _____ Size _____ ft. X _____ ft.; Wall house? _____
 Distance to nearest pollutant source _____ ft. Type _____
 Distance to nearest property line _____ ft. Building _____ ft.

- State Water Control Board Regional Offices**
- Valley Reg. Off.
116 North Main Street
P. O. Box 266
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
5312 Peters Creek Road
Roanoke, Va. 24019
703-982-7482
 - 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
804-459-8742
 - Northern Virginia Reg. Off.
5515 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111

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: [Signature] (Seal), Date 11/18/89
 (Well driller or authorized person) License No. _____