

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

Owner William H. Nave
 Address P.O. Box 1195
Spotley, Virginia, Va.
 Phone 786-9744 W. Smith 898-2151 Tennell Bowen 895-9545 Grace Marshall 891-4639
 Location 218 -> 1st Street -> 1st House on Right

Tax Map ID 56-32B
 VDH Permit W-93-151
 WVCB Permit _____
 WVCB ID _____
 County Stafford

Well Classification IIIA _____ IIIB IIIC _____ IV _____
 * Well Data *

5/28/13
Don Joubert
T. Thompson

General Information

Drilling Method Aug Rotary
 Depth to Bedrock _____
 Static Water Level 100
 Well Disinfected (Y or N) _____

Date Completed 7/19/93
 Yield 25 (GPM)
 Stabilized Water Level 140
 Disinfectant Used _____

Total Depth of Well 220
 Length of Test 3 HRS
 Natural Flow (Rate) _____
 Amount Used _____

Casing

From 11 To 205
 Size 4 1/2" Material P.V.C.
 Weight/Schedule SDR 17

From 186 To 207
 Size 2 Material galv. steel
 Weight/Schedule Schedule 40

From 218 To 220
 Size 2" Material galvanized steel
 Weight/Schedule Schedule 40

Gravel Pack

From _____ To _____

From _____ To _____

From _____ To _____

Hole size

7 7/8" from 0 to 205 ft.

3 7/8" from 205 to 220 ft.

_____ " from _____ to _____ ft.

Grout

From 0 To 50+ ft.
 Bore Hole Size 7 7/8"
 Type Densarite
 Method Pressure Grout

From _____ To _____
 Bore Hole Size _____
 Type _____
 Method _____

From _____ To _____
 Bore Hole Size _____
 Type _____
 Method _____

Water Zones or Screened Intervals

From 207 To 218
 Mesh Size .020 Diam 3" Screened steel
 From _____ To _____
 Mesh Size _____ Diam _____

approx water zone
 From 208 To 217
 Mesh Size _____ Diam _____
 From _____ To _____
 Mesh Size _____ Diam _____

From _____ To _____
 Mesh Size _____ Diam _____
 From _____ To _____
 Mesh Size _____ Diam _____

*** Use Data ***

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

*** Abandonment Information ***

Bored or Dug Wells

Casing Removed, Y or N? _____
 If Y, Depth to which casing was 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? _____
 Depth to which casing was removed: _____
 Applicable, depth(s), and type of gravel/sand fill: _____
 Source of gravel or sand: _____
 Cement: From _____ to _____ From _____ to _____

Method of permanently marking location:

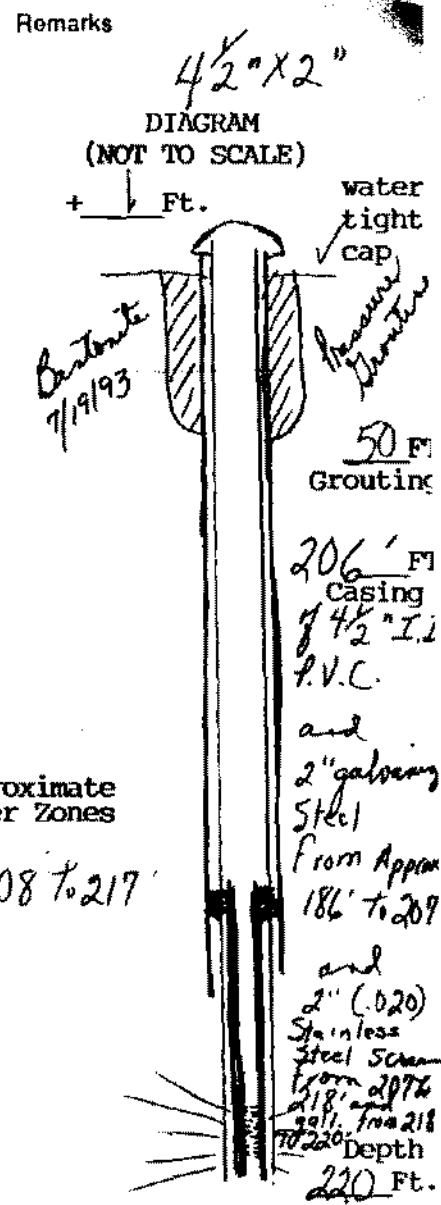
Installed watertight top
 Suggest setting pump @ approx. 160 ft.

Commonwealth of Virginia
 State Department of
 Mineral Resources
 Division of Oil and Gas

William H. Tamm
1st Street (1st House on Right)
Stafford
 44 218

* Drillers Log *

| Depth | Description of Formation or Sediment |
|-------|--------------------------------------|
| 0 | 10 Red Sandy Clay |
| 10 | 20 Sand & Gravel |
| 20 | 30 Grey Clay |
| 30 | 200 Black Sand & Shells |
| 200 | 208 Sandy Grey Clay |
| 208 | 217 Grey & White Sand (water zone) |
| 217 | 220 hard grey clay |



(User additional Sheets if necessary)

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 JOHN L. DANIELSON, JR., INC.
 Address 4616 HOOD DRIVE
FREDERICKSBURG, VIRGINIA 22408
 Phone (703) 898-6025 / 898-9355

Drillers Signature John L. Danielson, Pres.
 Date 7/19/93 Representing JOHN L. DANIELSON, JR., INC.

Virginia Contractors License Number CLASS A 2701 014084A H/H WWC