



County/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 John Cormier
• Well Designation or Number _____
Address 1910 Woodlyn Dr Apt 101 50-86-9
Fredericksburg VA 22401
Phone _____
• Drilling Contractor John L. Danielson, Jr., Inc.
Address 4616 Hood Drive
Fredericksburg, Virginia 22401
Phone (703) 898-6025

Certification of installation
This well does _____ does not
meet code/low requirements.
S. _____
Date _____
For Office Use
Tax Map I.D. No. 60-81-A
Subdivision _____
Section _____
Block _____
Lot _____
Class Well: I _____, IIA _____
IIB _____, IIIA _____, IIIB
IIIC _____, IIID _____, IIIE _____

WELL LOCATION: .4 (miles N direction) of intersection of RT 3 + 601
and .1 (miles W direction) of 601
(If possible please include map showing location marked)
Water rose 5 ft. in 30 min. @ time of installation
24" I.D. casing holds 23.5 gal. of water per foot.
Date started 2-26-87 • Date completed 2-26-87 Type rig Boring Rig

Approximate Drawdown 20 ft.

I. WELL DATA: New Reworked _____ Deepened _____
• Total depth _____ ft. 80
• Depth to bedrock _____ ft.
• Hole size (Also include reamed zones)
• 39 inches from 0 to 20 ft.
• 29 inches from 20 to 80 ft.
• _____ inches from _____ to _____ ft.
• Casing size (I.D.) and material
• 24 inches from +1 to 80 ft.
Material cement-concrete casing
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 _____ to _____ ft.
• From _____ to _____ ft.
• Grout
• From _____ to _____ ft. Type _____
• From _____ to _____ ft. Type _____

2. WATER DATA • Water temperature _____ OF _____
• Static water level (unpumped level measured) _____ ft. 45
• Stabilized measured pumping water level _____ ft. 65
• Stabilized yield _____ gpm after _____ hours of installation
Natural Flow: Yes _____ No _____, flow rate _____ gpm
Comment on quality _____

3. WATER ZONES: From 45 To 55
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 installation through Mr. Cormier

Grouting
OVER

any other non-permit well. This information shall certify 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)			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			

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.
 136 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
 9312 Peters Creek Road
 Roanoke, Va. 24019
 703-982-7452

Northern Virginia Reg. Off.
 5515 Cherokee Avenue
 Suite 404
 Alexandria, Va. 22312
 703-750-9111

Signature James P. Donelson Well, Date 3/3/87
 (Well driller or authorized person)

License No. _____