

Commonwealth of Virginia Uniform Water Well Completion Report

Owner: _____ Tax Map ID _____
 Address: _____ VDH Permit _____
 Phone: _____ VWCB Permit _____
 Location: _____ VWCB ID _____
 County _____

* Well Data *

General Information

Drilling Method _____	Date Completed _____	Total Depth of Well _____
Depth to Bedrock _____	Yield _____ (GMP)	Length of Test _____
Static Water Level _____	Stabilized Water Level _____	Natural Flow (Rate) _____
Well Disinfected (Y or N) _____	Disinfectant Used _____	Amount Used _____

Casing

From _____ To _____	From _____ To _____	From _____ To _____
Size _____ Material _____	Size _____ Material _____	Size _____ Material _____
Weight/Schedule _____	Weight/Schedule _____	Weight/Schedule _____

Gravel Pack

From _____ To _____	From _____ To _____	From _____ To _____
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Grout

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

Water Zones or Screened Intervals

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

*** Drillers Log ***

Depth	Description of Formation or Sediment	Remarks
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(Use 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 _____

Address _____

Phone _____

Drillers Signature _____

Date _____ Representing _____

Virginia Contractors License Number _____