

COMMONWEALTH OF VIRGINIA
WATER WELL COMPLETION REPORT

Revised 7/31/07

(Certification of Completion/County Permit)

Virginia Dept. of Environmental Quality
P.O. Box 1105
Richmond, VA 23218

DEQ WELL # \_\_\_\_\_
USGS LOCAL # \_\_\_\_\_

COUNTY / CITY \_\_\_\_\_

Virginia Plane Coordinates
Latitude & Longitude
Datum: \_\_\_\_\_
Topo. Map No. \_\_\_\_\_
Elevation \_\_\_\_\_ ft.
Formation \_\_\_\_\_
Lithology \_\_\_\_\_
River Basin \_\_\_\_\_
Province \_\_\_\_\_
Type Logs \_\_\_\_\_
Cuttings \_\_\_\_\_
Water Analysis \_\_\_\_\_
Aquifer Test \_\_\_\_\_

Owner \_\_\_\_\_
Well Designation or number \_\_\_\_\_
Address \_\_\_\_\_
Phone \_\_\_\_\_
Drilling Contractor \_\_\_\_\_
Address \_\_\_\_\_
Phone \_\_\_\_\_

DEQ Permit \_\_\_\_\_
County Permit \_\_\_\_\_
PWSID No. \_\_\_\_\_
Certification of inspecting official:
This well does \_\_\_\_\_ does not \_\_\_\_\_
Meet code/law requirements.
Signature: \_\_\_\_\_
Date: \_\_\_\_\_
For Office Use

Tax Map I.D. No. \_\_\_\_\_
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 \_\_\_\_\_
If possible please include map showing marked well location.
Date Started \_\_\_\_\_ Date Completed \_\_\_\_\_ Type Rig \_\_\_\_\_

- 1. WELL DATA: New \_\_\_ Reworked \_\_\_ Deepened \_\_\_
Total Depth \_\_\_\_\_ ft.
Depth to Bedrock \_\_\_\_\_ ft.
Hole Size (Also include reamed zones)
\_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.
Casing Size (I.D.) and Material
\_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.
Material \_\_\_\_\_
Weight per ft. \_\_\_\_\_ or wall thickness \_\_\_\_\_ in.
Screen Size & Mesh for Each Zone
\_\_\_\_\_ inches from \_\_\_\_\_ to \_\_\_\_\_ ft.
Mesh Size \_\_\_\_\_ Type \_\_\_\_\_
Gravel Pack
From \_\_\_\_\_ to \_\_\_\_\_ ft.
Grout
From \_\_\_\_\_ to \_\_\_\_\_ ft. Type \_\_\_\_\_
- 2. WATER DATA: Water Temperature \_\_\_\_\_ F
Static Water Level (unpumped level measured) \_\_\_\_\_ ft.
Stabilized measured pumping water level \_\_\_\_\_ ft.
Stabilized Yield \_\_\_\_\_ gpm after \_\_\_\_\_ hours
Natural Flow: Yes \_\_\_ No \_\_\_ Flow Rate \_\_\_\_\_ gpm
Comment on water quality: \_\_\_\_\_
- 3. WATER ZONES: From \_\_\_\_\_ To \_\_\_\_\_
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/Heating \_\_\_\_\_
Injection \_\_\_\_\_ Other \_\_\_\_\_
Type of Facility: Domestic \_\_\_\_\_ Public Water Supply \_\_\_\_\_
Public Institution \_\_\_\_\_ Farm \_\_\_\_\_ Industry \_\_\_\_\_
Commercial \_\_\_\_\_ Other \_\_\_\_\_
- 5. PUMP DATA: Type \_\_\_\_\_ Rated hp. \_\_\_\_\_
Intake Depth \_\_\_\_\_ ft. Capacity \_\_\_\_\_ gpm at \_\_\_\_\_ head
- 6. WELLHEAD: Type of Well Seal \_\_\_\_\_
Pressure Tank \_\_\_\_\_ gal. Location \_\_\_\_\_
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 \_\_\_ NA
Plugging Grout From \_\_\_\_\_ to \_\_\_\_\_ Material \_\_\_\_\_

OWNER: \_\_\_\_\_

DEQ WELL # \_\_\_\_\_  
USGS LOCAL # \_\_\_\_\_

9. State law requires submitting to the Virginia State Water Control board information about ground water and wells for every well made in the State intended for water, or any other non-exempt well. This information must be submitted 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 analysis, and copies of the 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 water supply.

**10. Driller's Log** (Use additional sheets if necessary)

Depth (feet)			Type of Rock or Soil	Remarks	11. Drilling Time (Min.)	12. Diagram of Well Construction (with dimensions)
From	To	(Color, material, fossils, hardness, etc.)	(Water, caving, cavities, broken, core, shot, etc.)			

13. Well Lot Dedicated? \_\_\_\_\_ Size \_\_\_\_\_ ft. by \_\_\_\_\_ 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 \_\_\_\_\_ in. 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 \_\_\_\_\_  
 (Well driller or authorized person)

Date \_\_\_\_\_

License Number \_\_\_\_\_