

1. Contact Information

Contact:	Name	Address	Phone
Owner			
Driller			
System Provider			

2. Well Location

Physical Address:		County/City:	
Subdivision Name:		Section:	Block: Lot:
Tax Map/GPIN #:		Well Designation or Number:	
Latitude: N		Longitude: W	
Datum Source	Horizontal: <input type="checkbox"/> WGS84 <input type="checkbox"/> NAD83 <input type="checkbox"/> NAD27	Vertical: <input type="checkbox"/> NGVD29 <input type="checkbox"/> NAVD88	
Lat/Long Source (Check One): <input type="checkbox"/> Map <input type="checkbox"/> GPS <input type="checkbox"/> PPDGPS <input type="checkbox"/> Survey <input type="checkbox"/> Imagery <input type="checkbox"/> WASS			
Location Information Collected By :			
Physical Location Description:			

3. Facility & Use

Type of Facility (Check One):	Type of Use (Check All That Apply):		
<input type="checkbox"/> Waterworks	<input type="checkbox"/> Drinking/Domestic Use	<input type="checkbox"/> Food Processing	<input type="checkbox"/> Cooling/Heating
<input type="checkbox"/> Observation/Monitoring Well	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Injection
<input type="checkbox"/> Private Well	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Fire Safety	<input type="checkbox"/> Geothermal

4. Well Construction

Well designation, Name or Number:					
Date Started:		Date Completed:		Type Rig:	
Class Well (Check One): <input type="checkbox"/> I <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IIIC <input type="checkbox"/> IIID <input type="checkbox"/> IIIE <input type="checkbox"/> IV					
Construction Type (Check One): <input type="checkbox"/> New <input type="checkbox"/> Existing-Modified					
Well Depth: ft.		Borehole Depth: ft.		Depth to Bedrock: ft.	
Hole Size (Include reamed zones): inches from to ft. Inches from to ft.					
Height of Casing above Land Surface: ft. inches					
Casing Size (I.D.) and Materials: (below)			Total Depth of Casing: ft.		
inches	from	to	ft.	Material	Weight per ft. or wall thickness in.
inches	from	to	ft.	Material	Weight per ft. or wall thickness in.
inches	from	to	ft.	Material	Weight per ft. or wall thickness in.
inches	from	to	ft.	Material	Weight per ft. or wall thickness in.
inches	from	to	ft.	Material	Weight per ft. or wall thickness in.
Screen Size & Mesh:					
inches	from	to	ft.	Mesh Size	Type
inches	from	to	ft.	Mesh Size	Type
inches	from	to	ft.	Mesh Size	Type
Water Zones: from to ft.		from to ft.		from to ft.	
Gravel Pack: from to ft.		from to ft.		from to ft.	
Grout Type: from to ft.		Grouting Method:		Type of Seal:	
This information was collected by Camera Survey: <input type="checkbox"/> Yes <input type="checkbox"/> No Date Conducted:					
Additional Well Construction Form Information Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No					

Well designation, Name or Number: _____

5. Disinfection

Well Disinfected: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____
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6. Abandonment (*When abandoning a well, Sections 1 thru 6 are required to be completed)

Date Started: _____	Date Completed: _____	Type Rig: _____
Static Water Level (unpumped level measured): _____		ft.
Casing Size (I.D.) and Materials: _____	Casing Pulled: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Uncased Well	
Depth of Fill: _____	Type and Source of Fill: _____	
Grout: From _____ to _____	Type: _____	From _____ to _____
Method of permanently marking location: _____		

7. Pump Test

Static Water Level (unpumped level measured): _____		ft.	
Date: _____	Method (Check One):	<input type="checkbox"/> Water Tape	<input type="checkbox"/> Airline <input type="checkbox"/> Transducer <input type="checkbox"/> Other
Stabilized measured pumping water level: _____		ft.	
Date: _____	Method (Check One):	<input type="checkbox"/> Top of Well	<input type="checkbox"/> Top of Casing <input type="checkbox"/> Surface Level
Test Pump Intake Depth: _____	ft.	Stabilized Yield: _____	gpm after _____ hours
Natural Flow: <input type="checkbox"/> Yes <input type="checkbox"/> No	Flow Rate _____	gpm	

8. Pump Data

Type: _____	Motor HP: _____
Production Pump Intake Depth: _____	ft. Rated Capacity: _____ gpm at _____ ft TDH

9. Geologic Information

Formation: _____	Type Logs: _____
Lithology: _____	Cuttings: _____
Province: _____	Aquifer Test Performed: _____
Geologic Map Used: _____	
Water Quality Results Attached: Yes _____ No _____	

Comments:

COMMONWEALTH OF VIRGINIA
 UNIFORM WATER WELL COMPLETION REPORT

DEQ Well # _____
 USGS Local # _____
 VDH HDIN # _____
 VDH PWSID # _____

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

Well designation, Name or Number:					
Depth (feet)		Type of Rock or Soil	Remarks	Drilling Time (Min.)	Diagram of Well Construction (with dimensions)
From	To	(Color, material, fossils, hardness, etc.)	(Water, caving, cavities, etc.)		

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 applicable permit and further that the well complies with all applicable federal, state and local regulations, ordinances and laws.

Signature: _____ Date: _____

License Number: _____

Additional Well Construction Data

Well designation, Name or Number:											
Physical Location:				Date Started:				Date Completed:			
Hole Size (Include reamed zones):											
inches	from	to	ft.	inches	from	to	ft.	inches	from	to	ft.
inches	from	to	ft.	inches	from	to	ft.	inches	from	to	ft.
inches	from	to	ft.	inches	from	to	ft.	inches	from	to	ft.
Casing Size (I.D.) and Materials:											
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
inches	from	to	ft.	Material	Weight per ft.	or wall thickness	in.				
Screen Size & Mesh:											
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						
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						
inches	from	to	ft.	Mesh Size	Type						
Water Zones:											
From	to	ft.	From	to	ft.	From	to	ft.	From	to	ft.
From	to	ft.	From	to	ft.	From	to	ft.	From	to	ft.
From	to	ft.	From	to	ft.	From	to	ft.	From	to	ft.
From	to	ft.	From	to	ft.	From	to	ft.	From	to	ft.
Gravel Pack:											
From	to	ft.	From	to	ft.	From	to	ft.			
From	to	ft.	From	to	ft.	From	to	ft.			
From	to	ft.	From	to	ft.	From	to	ft.			
Grout: Type:				from	to	ft.					
Grout: Type:				from	to	ft.					
Grout: Type:				from	to	ft.					