

MAIL TO:

WATER SUPPLY BRANCH
DIVISION OF ENVIRONMENTAL CONTROL
P.O. BOX 1401
DOVER, DELAWARE 19903

**STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL**

WELL COMPLETION REPORT MUST
BE RETURNED 30 DAYS AFTER
CONSTRUCTION DATE

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 81551 LOCAL ID _____

OWNER DAVID VOLLMER
RT 4 Box 7900 SEAFORD DE

CONSTRUCTION DATE 2-5-90

PURPOSE: TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 OBSERVATION DEWATERING
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) _____

IS THIS A REPLACEMENT WELL? YES NO

ABANDONMENT DATE FOR OLD WELL 2-5-90

ABANDONMENT METHOD BENTONITE CLAY

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____

TOTAL DEPTH DRILLED 367'

CASING SEQUENCE

CASING TOP
CASING BOTTOM
CASING DIAMETER
CASING MATERIAL

INNER	OUTER
0	
347	
4"	
PVC	

SCREEN SEQUENCE

SCREEN TOP
SCREEN BOTTOM
SCREEN DIAMETER
SCREEN MATERIAL

INNER	OUTER
347'	
367'	
4"	
PVC	

WRITTEN APPROVAL FOR SCREENING/
GRAVEL PACKING MORE THAN ONE AQUIFER
MUST BE OBTAINED FROM DNREC.

GROUT TYPE: CEMENT BENTONITE CLAY

OTHER _____

FROM 0 TO 310 FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE _____ FROM _____ TO _____ FEET

GRAVEL PACK: TYPE F2

FROM 320 TO 367 FEET

STATIC WATER LEVEL: DATE 2-5-90

26 FT. (Below, above) GROUND SURFACE

PUMPING WATER LEVEL: 71 FT. BELOW GRADE

AFTER 3 1/2 HOURS AT 45 GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR

OTHER _____

24 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE BOULDER

RATED CAPACITY (GPM) 25

PUMP INTAKE SETTING 100 FT. BELOW GRADE

THE COMPLETED WELL IS?

YES NO
A. AT LEAST 15' FROM ANY FOUNDATION
B. AT LEAST 50' FROM ANY SEPTIC TANK
C. AT LEAST 10' FROM TOWN SEWER LINE
D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD

THE NEAREST NEIGHBORS (CIRCLE ONE)

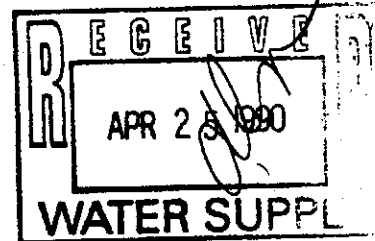
SEPTIC TILE FIELD CESSPOOL OR PRIVY

IS 100' FROM COMPLETED WELL

IS COMPLETED WELL LOCATED AS SHOWN

ON APPLICATION FORM?

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.



Oc45-02

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
TOP SOIL	0	1
Clay/Fine Sand	1	4
Fine to coarse sand	4	39
Gray Clay & Fine Sand	39	58
fine med SAND	58	63
Gray Clay	63	89
Gray Clay & Fine Sand	89	110
Gray Clay	110	190
Gray Clay	190	218
HARD SHELL	218	221

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO

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COMPANY NAME American Water Well System

SIGNATURE OF DRILLER IN CHARGE: Ed Halby DATE 2-5-90

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CONSTRUCTION DATE _____

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 81551 LOCAL ID _____

OWNER David Volmer

CONSTRUCTION DATE _____

PURPOSE: TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 MONITOR DEWATERING
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) _____

IS THIS A REPLACEMENT WELL? YES NO

ABANDONMENT DATE FOR OLD WELL _____

ABANDONMENT METHOD _____

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____

TOTAL DEPTH DRILLED _____

CASING SEQUENCE

	INNER	OUTER
CASING TOP		
CASING BOTTOM		
CASING DIAMETER		
CASING MATERIAL		

SCREEN SEQUENCE

	INNER	OUTER
SCREEN TOP		
SCREEN BOTTOM		
SCREEN DIAMETER		
SCREEN MATERIAL		

WRITTEN APPROVAL FOR SCREENING/
 GRAVEL PACKING MORE THAN ONE AQU-
 IFER MUST BE OBTAINED FROM DNREC.

GROUT TYPE: CEMENT BENTONITE/CLAY

OTHER: _____

FROM _____ TO _____ FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE _____ FROM _____ TO _____ FEET

GRAVEL PACK: TYPE _____

FROM _____ TO _____ FEET

STATIC WATER LEVEL: DATE _____

_____ FT. (Below, above) GROUND SURFACE

PUMPING WATER LEVEL: _____ FT. BELOW GRADE

AFTER _____ HOURS AT _____ GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR

OTHER _____

_____ INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE _____

RATED CAPACITY (GPM) _____

PUMP INTAKE SETTING _____ FT. BELOW GRADE

THE COMPLETED WELL IS?

	YES	NO
A. AT LEAST 5' FROM ANY OVERHANG	<input type="checkbox"/>	<input type="checkbox"/>
B. AT LEAST 50' FROM ANY SEPTIC TANK	<input type="checkbox"/>	<input type="checkbox"/>
C. AT LEAST 10' FROM TOWN SEWER LINE	<input type="checkbox"/>	<input type="checkbox"/>
D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD	<input type="checkbox"/>	<input type="checkbox"/>

THE NEAREST NEIGHBORS (CIRCLE ONE)

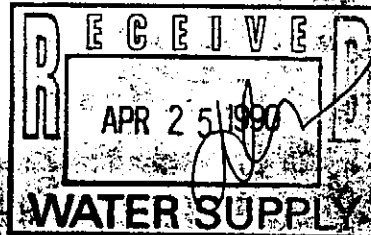
SEPTIC TILE FIELD CESSPOOL OR PRIVY

IS _____ FROM COMPLETED WELL

IS COMPLETED WELL LOCATED AS SHOWN

ON APPLICATION FORM?

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Gray Clay & Shell	221	265
Hard Shell	265	267
Gray Clay	267	305
Hard Shell	305	308
Gray Clay	308	338
FINE COARSE SAND	338	368

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO

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COMPANY NAME _____

SIGNATURE OF DRILLER IN CHARGE: _____ DATE _____