

MAIL TO:
 WATER SUPPLY BRANCH
 DIVISION OF WATER RESOURCES
 P.O. BOX 1401
 DOVER, DELAWARE 19903

STATE OF DELAWARE
 DEPARTMENT OF NATURAL RESOURCES
 AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST
 BE RETURNED WITHIN 30 DAYS
 AFTER CONSTRUCTION DATE.

MONITOR WELL COMPLETION REPORT

PLEASE PRINT OR TYPE

PERMIT NO. 82443 LOCAL ID F12
 Owner W/D Plant & Soil Science
 Address W/D
 City Wilmington State DE Zip 19716
 Telephone Number 451-1392
 Consulting Firm/Supervising Geologist (If applicable)
DGS
 Telephone Number 451-8261
 Well Contractor DGS - BOUNDS
 Date of Completion 5/8/90
 Name of DNREC Contact Person WILLIAMS
 Drilling Method Auger

WELL CONSTRUCTION

Total depth drilled: 14.7
 Depth to water 9.0
 Surveyed Top of Casing Elevations
 Inner N/A Outer _____ Ft. above Sea Level

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	<u>11.0</u>	/
Casing bottom	<u>12.2</u>	
Casing diameter	<u>2.0</u>	
Casing material	<u>PVC</u>	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	<u>12.2</u>	/
Screen bottom	<u>14.7</u>	
Screen diameter	<u>2.0</u>	
Screen material	<u>PVC</u>	

Type of Grout BENTONITE from 0 to 9.0
 Gravel pack interval from N/A to _____
 Aquifer/Formation screened in: UNCONFINED
 Type of samples (ditch, split spoon, etc.)
Auger

Samples Logged By: R. Bounds
 (Name)
Sr. Research Tech DGS
 (Title) (Company)
 Well Drilled By: DGS
 (Company Name)

Roland E. Bounds 5/9/90
 (Signature of Driller in Charge) (Date)

IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM? YES NO
 IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

Pe 33-41

DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
<u>TOP SOIL</u>	<u>0</u>	<u>5.5</u>
<u>FIN M-C SAND w/ TR. GRAVEL</u>	<u>0.5</u>	<u>14.7</u>

SUPPLEMENTAL DRILLERS LOG ATTACHED?
 YES NO
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