

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. 79296 LOCAL ID 101

OWNER leen Anderson
Millsboro, DE

CONSTRUCTION DATE 7-12-89

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 SOON
ABANDONMENT METHOD BENT.

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
TOTAL DEPTH DRILLED 83

CASING SEQUENCE

	INNER	OUTER
CASING TOP	<u>+1</u>	
CASING BOTTOM	<u>73</u>	
CASING DIAMETER	<u>2</u>	
CASING MATERIAL	<u>PVC</u>	

SCREEN SEQUENCE

	INNER	OUTER
SCREEN TOP	<u>73</u>	
SCREEN BOTTOM	<u>83</u>	
SCREEN DIAMETER	<u>2</u>	
SCREEN MATERIAL	<u>PVC</u>	

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

GROUT TYPE: CEMENT BENTONITE CLAY

OTHER: _____
FROM 0 TO 65 FEET

NON-GROUT BACKFILL OF WELL ANNULUS
TYPE Sand/Clay FROM 65 TO 83 FEET

GRAVEL PACK: TYPE GRIT
FROM 65 TO 83 FEET

STATIC WATER LEVEL: DATE 7-12-89
10 FT. (Below/above) GROUND SURFACE

PUMPING WATER LEVEL: 18 FT. BELOW GRADE
AFTER 5 HOURS AT 20 GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR
OTHER _____
12 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE _____
RATED CAPACITY (GPM) _____
PUMP INTAKE SETTING _____ FT. BELOW GRADE

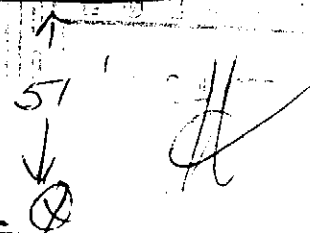
THE COMPLETED WELL IS?

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

House



P923-02

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
TOP SOIL	0	1
LIGHT TAN SAND	1	3
TAN CLAY	3	7
TAN SAND	7	18
DARK TAN SAND	18	24
TAN SAND	24	38
DARK TAN SAND	38	54
MED./CRS TAN SAND	\bar{x} 54	65
CRS TAN SAND	65	70
CRS LIGHT TAN SAND	70	83

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
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COMPANY NAME LIFETIME WELL DRILLING CO.
SIGNATURE OF DRILLER IN CHARGE _____ DATE _____
WILLIAM KENNETH WOOD