

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 30 DAYS AFTER
CONSTRUCTION DATE

MONITOR WELL COMPLETION REPORT

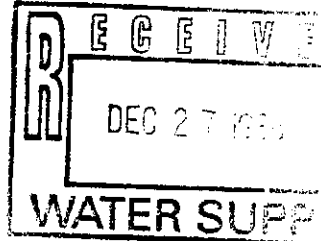
PLEASE PRINT OR TYPE

PERMIT NO. 75216 LOCAL ID #1
 Owner Tunnell Companies
 Address PO Box 308 Long Neck Rd
 City Millsboro State DE Zip 19966
 Telephone Number 302-945-9300
 Consulting Firm/Supervising Geologist (If applicable)

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

Telephone Number _____
 Well Contractor American Waterwell Systems
 Date of Completion 12/13/88

Drilling Method: Mud Rotary



WELL CONSTRUCTION

Total depth drilled: 24'
 Depth to water 5'
 Surveyed Top of Casing Elevations
(2' above grade) Ft. above Sea Level
Inner Outer

DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
top soil	0	1
white clay	1	5
white f. sand	5	15
tan f. m	15	20
sand		
white f. m	20	25
sand		

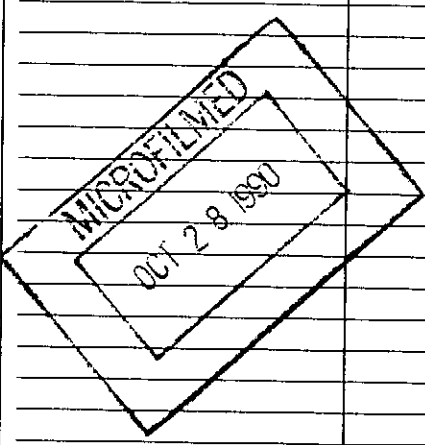
CASING SEQUENCE

	Inner casing	Outer casing
Casing top	<u>±2'</u>	
Casing bottom	<u>4'</u>	
Casing diameter	<u>4"</u>	
Casing material	<u>PVC</u>	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	<u>4"</u>	
Screen bottom	<u>24'</u>	
Screen diameter	<u>4"</u>	
Screen material	<u>PVC</u>	

Type of Grout Clay from 0 to 4
 Gravel pack interval from 4 to 24
 Aquifer/Formation screened in: Columbia



Samples Logged By: _____ (Name)

(Title) _____ (Company)

Well Drilled By: American Waterwell Systems
 (Company Name)

E. Kelly 12/20/88
 (Signature of Driller in Charge) (Date)

SUPPLEMENTAL DRILLERS LOG ATTACHED?
 YES [] NO []
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