

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. 85407 LOCAL ID 14

OWNER Kevin Whaley

CONSTRUCTION DATE 12/19/90

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 N/A

ABANDONMENT METHOD 1A

DRILLING METHOD

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

TOTAL DEPTH DRILLED 69'

CASING SEQUENCE

CASING TOP
CASING BOTTOM
CASING DIAMETER
CASING MATERIAL

INNER	OUTER
<u>2'</u>	
<u>49'</u>	
<u>2"</u>	
<u>PVC</u>	

SCREEN SEQUENCE

SCREEN TOP
SCREEN BOTTOM
SCREEN DIAMETER
SCREEN MATERIAL

INNER	OUTER
<u>49'</u>	
<u>59'</u>	
<u>2"</u>	
<u>PVC</u>	

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

GROUT TYPE: CEMENT BENTONITE CLAY

OTHER: _____

FROM 0 TO 40 FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE N/A FROM _____ TO _____ FEET

GRAVEL PACK: TYPE MARIE #1

FROM 40 TO 59 FEET

STATIC WATER LEVEL: DATE 12/19/90

14 FT. (Below, above) GROUND SURFACE

PUMPING WATER LEVEL: 25 FT. BELOW GRADE

AFTER 1 1/2 HOURS AT 15 GPM.

WELL HEAD COMPLETION

PIPE: PITLESS ADAPTOR

OTHER _____

12 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE GOULDS

RATED CAPACITY (GPM) 3

PUMP INTAKE SETTING Jet FT. BELOW GRADE

THE COMPLETED WELL IS?

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

THE NEAREST NEIGHBORS (CIRCLE ONE)

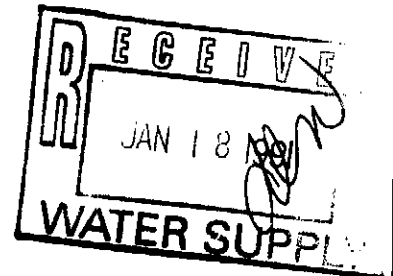
SEPTIC TILE FIELD CESSPOOL OR PRIVY

IS 100+ FROM COMPLETED WELL.

IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM? YES NO

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

QC24-09



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>TOP SOIL</u>	<u>0</u>	<u>1</u>
<u>TAN SAND</u>	<u>1</u>	<u>6</u>
<u>Gray clay + Shell</u>	<u>6</u>	<u>17</u>
<u>Med. coarse</u>		
<u>orange sand</u>	<u>17</u>	<u>60</u>
<u>Gray clay</u>	<u>60</u>	<u>69</u>

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
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COMPANY NAME Delmarva Drilling Co. Inc
SIGNATURE OF DRILLER IN CHARGE: Bruce W. [Signature] DATE 12/19/90