

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

Qd23-8

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 704225 LOCAL ID _____

OWNER Attop Inbert

CONSTRUCTION DATE 4/17
 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 3/20/88
 ABANDONMENT METHOD _____

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

CASING SEQUENCE

DEPTH	DITRA
CASING TOP <u>4-14'</u>	
CASING BOTTOM <u>9-5'</u>	
CASING DIAMETER <u>4"</u>	
CASING MATERIAL <u>PVC</u>	

SCREEN SEQUENCE

DEPTH	DITRA
SCREEN TOP <u>9-5'</u>	
SCREEN BOTTOM <u>10-0'</u>	
SCREEN DIAMETER <u>4"</u>	
SCREEN MATERIAL <u>PVC</u>	

GROUT TYPE: CEMENT BENTONITE CLAY
 OTHER: _____
 FROM 0 TO 20 FEET
 NON-GROUT BACKFILL OF WELL ANNULUS
 TYPE _____ FROM _____ TO _____ FEET
 GRAVEL PACK: TYPE #2
 FROM 20 TO 50 FEET
 STATIC WATER LEVEL DATE 4/17
6 FT. BELOW GROUND SURFACE
 PUMPING WATER LEVEL: 26 FT. BELOW GRADE
 AFTER _____ HOURS AT _____ GPM.

WELL HEAD COMPLETION:
 TYPE: (T)LESS ADAPTOR
 OTHER 1 1/2" capped
14 INCHES ABOVE GRADE

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE Grundfos
 RATED CAPACITY (GPM) 10
 PUMP INTAKE SETTING 35 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
 _____ FROM COMPLETED WELL.

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

RECEIVED
 MAY - 4 1988
 WATER SUPPLY

Qd23-08

DRILLERS LOG DESCRIPTION TOP OF STRATA BOTTOM OF STRATA

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top soil	0	1
Tn fn/md and	1	16
Wht fn/md and	16	23
Tn fn/crse and	23	30
Ir or	30	32
Gry cly w/gry fn and	32	50

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
 PAGE 1 OF _____ PAGES
 COMPANY NAME _____
 SIGNATURE OF DRILLER IN CHARGE: Calvin K. Bell DATE 4/17/88