

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. 85159 LOCAL ID _____
 OWNER WILLIAM B. VENABLES

CONSTRUCTION DATE 12/11/90
 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 12/11/90
 ABANDONMENT METHOD CLAY

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
 TOTAL DEPTH DRILLED 45

CASING SEQUENCE

CASING TOP
 CASING BOTTOM
 CASING DIAMETER
 CASING MATERIAL

INNER	OUTER
8	
35	
2"	
PVC	

SCREEN SEQUENCE

SCREEN TOP
 SCREEN BOTTOM
 SCREEN DIAMETER
 SCREEN MATERIAL

INNER	OUTER
35	
45	
2"	
PVC	

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 20 FEET
 NON-GROUT BACKFILL OF WELL ANNULUS
 TYPE SAND FROM 20 TO 35 FEET
 GRAVEL PACK: TYPE NOPEXNUZ
 FROM 35 TO 45 FEET
 STATIC WATER LEVEL: DATE 12/11/90
12 FT. (Below, above) GROUND SURFACE
 PUMPING WATER LEVEL: 12 FT. BELOW GRADE
 AFTER 2 HOURS AT 20 GPM.

WELL HEAD COMPLETION:
 TYPE: FITLESS ADAPTOR TFF
 OTHER _____
8 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE GOULDS
 RATED CAPACITY (GPM) 10
 PUMP INTAKE SETTING 2 FT. BELOW GRADE

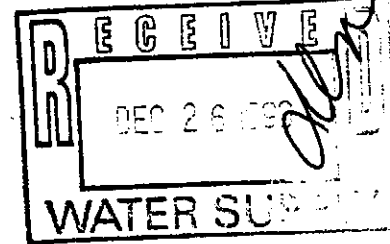
THE COMPLETED WELL IS?

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

Qd 23-11



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
SAND	0	5
ORANGE SAND	5	35
WOOD CLAY		
WHITESAND	35	45
GRAVEL		

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
 PAGE 1 OF ___ PAGES
 COMPANY NAME _____
 SIGNATURE OF DRILLER IN CHARGE: Preston English DATE 12/11/90