

MAIL TO:
WATER SUPPLY DIVISION
DIVISION OF NATURAL RESOURCES
P.O. BOX 1000
DOVER, DELAWARE 19901

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST
BE RETURNED 21 DAYS AFTER
CONSTRUCTION DATE

WELL COMPLETION REPORT

Qd32-A 100

CLASS PRINT

PERMIT NO. 106793 LOCAL ID 14

OWNER John Jacob

CONSTRUCTION DATE 9/29/86
PURPOSE TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 MONITOR DRAINAGE
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) Supply for irrigation

IS THIS A REPLACEMENT WELL? YES NO
ABANDONMENT DATE FOR OLD WELL N/A
ABANDONMENT METHOD N/A

DRILLING METHOD
 AUGERED RORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
TOTAL DEPTH DRILLED _____

CASING SEQUENCE

DEPTH	DIAMETER	MATERIAL
0'	4"	galv
4'	4"	galv
4'	4"	galv

SCREEN SEQUENCE

DEPTH	DIAMETER	MATERIAL
4'	4"	galv
4'	4"	galv
4'	4"	galv

GROUT TYPE: CEMENT BENTONITE CLAY
OTHER: _____
FROM 0 TO 33 FEET
NON-GROUT BACKFILL OF WELL ANNULUS
TYPE: FROM _____ TO _____ FEET
GRAVEL PACK: TYPE: _____
FROM _____ TO _____ FEET
STATIC WATER LEVEL: DATE 9-28-86
106 FT. (Below, above) GROUND SURFACE
PUMPING WATER LEVEL: 15 FT. BELOW GRADE
AFTER 12 HOURS AT 60 GPM.

WELL HEAD COMPLETION:
TYPE: FITLESS ADAPTOR
ORDER
10 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 5' FROM ANY OVERHANG
B. AT LEAST 5' 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 100' FROM COMPLETED WELL.
IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM?
IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

RECEIVED
OCT 6 1986
WATER DIVISION
Qd32-04

DRIERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil		
Fine coarse sand	1	7
Fine med sand + clay	7	21
Fine med tan sand	21	40
Fine coarse sand	42	90
Blue clay	90	93
Fine med gray sand	93	95

SUPPLEMENTAL DRIERS LOG ATTACHED YES NO
PAGE 1 OF _____ PAGES
COMPANY NAME Delaware Drilling
SIGNATURE OF DRILLER IN CHARGE: R. R. ... DATE 10/31/86

PERMIT NO. 01-00-00-01-00

OWNER - BUREAU CONTRACTOR - COMPANY OWNER - PERSON

Document 20-06/78/05/10