

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 WITHIN 30 DAYS
 AFTER CONSTRUCTION DATE.

MONITOR / OBSERVATION WELL COMPLETION REPORT

PLEASE PRINT OR TYPE

PERMIT NO. 102521 LOCAL ID 1105
 Owner Water Supply
 Address _____
 City Newark State DE Zip 19716
 Telephone Number 301-375
 Consulting Firm/Supervising Geologist (If applicable)
1001 1001
 Telephone Number _____
 Well Contractor EGS
 Date of Completion 6-15-95
 Name of DNREC Contact Person B. W. [unclear]
 Drilling Method DRILL AND CEMENT

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

LOT 2832
 75 14 48
 Qg 32-14
 MAP A12 = 37

WELL CONSTRUCTION

Total depth drilled: 6
 Depth to water 4.33
 Surveyed Top of Casing Elevations
 Inner _____ Outer _____ Ft. above Sea Level

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	1	
Casing bottom	2	
Casing diameter	2	
Casing material	PVC	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	2	
Screen bottom	5.3	
Screen diameter	2	
Screen material	PVC	

Type of Grout CEMT from 0 to 1
 Gravel pack interval from 1 to 5
 Aquifer/Formation screened in: _____
 Type of samples (ditch, split spoon, etc.) _____

Samples Logged By: J. S. Andrews
 (Name)
EGS
 (Title) (Company)

Well Drilled By: EGS
 (Company Name)
 (Signature of Driller in Charge) (Date)

DRILLERS LOG DESCIP.	TOP OF STRATA	BOTTOM
1" SLT SD in City Orgy	0	
1" SLT SD in City Orgy	0.6	1.6
1" SLT SD in City Orgy	1.8	1.8
1" SLT SD in City Orgy	2.9	2.9
1" SLT SD in City Orgy	3.1	3.1
1" SLT SD in City Orgy	3.1	3.1
1" SLT SD in City Orgy	5.9	5.9
1" SLT SD in City Orgy	6	6

SUPPLEMENTAL DRILLERS LOG ATTACHED?
 YES [] NO []
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