

0935-30

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED IF APPROVED THIS APPLICATION CONSTITUTES A WELL PERMIT. A COMPLETION REPORT MUST BE FILED WITH THE WATER SUPPLY BRANCH WITHIN THIRTY (30) DAYS AFTER COMPLETION OF THIS WELL FAILURE TO DO SO MAY RESULT IN LICENSE SUSPENSION.

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL
APPLICATION FOR A PERMIT TO DRILL A WELL

WATER SUPPLY BRANCH
DIVISION OF WATER RESOURCES
P.O. BOX 1401
DOVER, DELAWARE 19903

PLEASE PRINT OR TYPE

GENERAL INFORMATION

Owner LYNIS L. VICKERS
 Address RR1 BOX 167
 City ROSSBORO State DELA Zip 19929
 Telephone Number 302/3608
 Well Contractor PENNAISH Lic. No. 282
 Pump Installer _____ Lic. No. _____
 Date of Application 2/14/94
 Estimated Construction Date _____
 Purpose: Test Permanent

Use: Domestic Agricultural
 Commercial Industrial
 Irrigation Public
 Observation Dewatering
 Heat Pump Recharge Heat Pump Supply
 Other _____ (Specify)

Is public water service available? Yes No
 Is this a replacement well? Yes No

Replacement reason _____
 Abandonment date for old well _____
 Type of abandonment _____
 Septic system permit no. 44-945

LOCATION MAP - ROAD MAP

Project County DESSER
 Subdivision _____
 Lot no. _____
 Name of nearest town ROSSBORO
 Distance to nearest town _____

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO ROADS AND GIVE DISTANCE FROM WELL SITE TO NEAREST ROAD AND INTERSECTION.

SITE PLAN - INCLUDE DISTANCES FROM WELL TO HOUSE, PROPERTY LINES, NEAREST ROAD AND ALL NEARBY SEPTIC SYSTEMS (INCLUDE SUITABLE PLOT PLAN IF AVAILABLE).

PERMIT NO. 98796

DRILLING METHOD

Augered Bored Cable Tool
 Driven Jetted Air Rotary
 Mud Rotary Reverse Washed
 Other (Specify) _____

PROPOSED WELL CONSTRUCTION

Approximate total depth 60

Inner casing	Outer casing
<u>8</u>	
<u>60</u>	
<u>2"</u>	
<u>PVC</u>	
<u>60</u> (Top) to <u>50</u>	
<u>10</u> Material <u>PVC</u>	
Type of Grout <u>CLAY</u> From _____ (Top) to <u>0</u>	
Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gravel pack interval from <u>50</u> to <u>60</u>	
Desired capacity _____ GPM.	
Maximum daily use <u>400</u> GPD.	

I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT.

Pennington Applicant Representative

FOR OFFICIAL USE ONLY

Modified Grid 174-066 Formation _____
 Drainage Basin 308 Local ID _____
 Aquifer _____ Tax ID 2-33-10-74

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE

SEE ATTACHED CONDITIONS

PURSUANT TO PROVISIONS OF 7 DELAWARE CODE CHAPTER 60, PERMISSION IS HEREBY GRANTED TO CONSTRUCT AND USE A WELL AS DESCRIBED ABOVE AND SUBJECT TO THOSE CONDITIONS ATTACHED. ALL CURRENT REGULATIONS GOVERNING WELL CONSTRUCTION AND WATER RESOURCE USE MUST BE FOLLOWED.

Signed: Charles B. Vickers 98796
 Permit Expires 8-28-94 Reportified 540 Permit No. 35.00

RECEIVED
 FEB 21 1994
 Application Fee Received By _____
 Date _____
 Receipt No. _____

WATER SUPPLY

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. 98296 LOCAL ID _____
OWNER LOUIS VICKERS
CONSTRUCTION DATE 4/15/94 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 _____
ABANDONMENT METHOD _____

DRILLING METHOD

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

TOTAL DEPTH DRILLED 65

CASING SEQUENCE

INNER	OUTER
<u>8"</u>	
<u>5.5"</u>	
<u>2 1/2"</u>	
<u>PVC</u>	

CASING TOP
CASING BOTTOM
CASING DIAMETER
CASING MATERIAL

SCREEN SEQUENCE

INNER	OUTER
<u>8"</u>	
<u>6.5"</u>	
<u>2 1/2"</u>	
<u>PVC</u>	

SCREEN TOP
SCREEN BOTTOM
SCREEN DIAMETER
SCREEN MATERIAL

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 40 FEET
NON-GROUT BACKFILL OF WELL ANNULUS
TYPE SAND FROM 40 TO 65 FEET
GRAVEL PACK TYPE GRAVEL
FROM 35 TO 65 FEET
STATIC WATER LEVEL: DATE 4/15/94
2 FT. (Below, above) GROUND SURFACE
PUMPING WATER LEVEL: 3 FT. BELOW GRADE
AFTER 2 HOURS AT 20 GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR
OTHER _____
0 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE FRUROS
RATED CAPACITY (GPM) _____
PUMP INTAKE SETTING 2 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

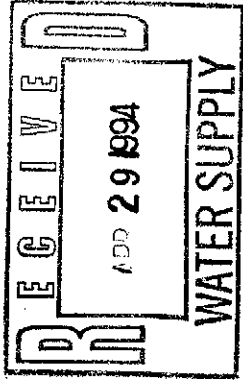
THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC TILE FIELD CESSPOOL OR PRIVY
IS 100' FROM COMPLETED WELL.

IS COMPLETED WELL LOCATED AS SHOWN

ON APPLICATION FORM?

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>SAND CLAY</u>	<u>0</u>	<u>5</u>
<u>SAND</u>	<u>5</u>	<u>15</u>
<u>BLUE CLAY</u>	<u>15</u>	<u>45</u>
<u>GRAY SAND</u>	<u>45</u>	<u>65</u>
<u>GRAVEL</u>		

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO

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COMPANY NAME _____

SIGNATURE OF DRILLER IN CHARGE: _____

DATE

4/15/94