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	
Owner UNIV OF DEL	IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM? YES[] NO[
	IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.
Address City No. JARK State DE Zip 16716	
Telephone Number 731-2833	LAT 38 31 47
Consulting Firm/Supervising Geologist (If applicable)	LON 75 19 16 0941-05
Telephone Number Well Contractor DG5	\(\langle 91-05
The Contractor	
Date of Completion 4.26.95	
Name of DNREC Contact Person 6 VENAGLES	
Drilling Method	
WELL CONSTRUCTION	
Total depth drilled: 12 Depth to water 4.38	
Depth to water	DRILLERS LOG DESCRIP. TOP OF STRATA BOTTOM
Surveyed Top of Casing Elevations	SAE 1/22 5 2/1
Inner Outer Ft. above Sea Level	Sec 103535
CASING SEQUENCE	
Inner casing Outer casing	
Casing top O	
Casing bottom \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Casing diameter 2	
Casing material	
SCREEN SEQUENCE	
Inner casing Outer casing	
Screen top 6.2	
Screen bottom	
Screen diameter 2	
Screen material	
4	
Type of Grout SENT from to	
Gravel pack interval fromto	
Aquifer/Formation screened in:	
Type of samples (ditch, split spoon, etc.)	
AUGIR FLITE	
Samples Logged By A S ANDRES	
Samples Logged By: (Name)	
D65	
(Title) (Company)	
7/45	
Well Drilled By: DGS (Company Name)	
$1 \times 1 \times 0 \times 1 \times $	
12 91/1/ 4/1/ 1 1/5 1/5 Ex 1	SUPPLEMENTAL DRILLERS LOG ATTACHED?
Me and Jones V 3/5/1	YES[] NO[]
(Signature of Driller in Charge) (Date)	PAGE 1 OF PAGES