

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-3665
FAX: 302-739-2296

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

0945-073

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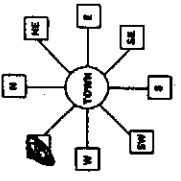
PERMIT NO. 155204-W

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

GENERAL INFORMATION

Property Owner Lloyd Bace
Address RR 3 Box 251 State DC Zip 19945
City Frankford
Telephone Number 732-6185
Application Preparer/WC: TOM MORRIS
Lic# 1004 Date of Application 11-22-97
Estimated Construction Date ASAP

LOCATION MAP - ROAD MAP
County: New Castle Kent Sussex
Subdivision N/A
Lot no. N/A
Tax Map# 2-33-16-48
Name of nearest town Frankford
Distance to nearest town 3



Purpose: Test or Permanent

- Use: Domestic
 Industrial
 Public
 Miscellaneous Public
 Temporary For Well Construction
- Irrigation
 Agricultural
 Heat Pump Recharge
 Closed Loop Heat Pump
 Heat Pump Supply

Other _____ (Specify)

Is this a replacement well? YES NO

Replacement reason N/A

Septic system permit # 154254-5

Is public water available? YES NO

PROPOSED WELL CONSTRUCTION

Approximate total depth	Inner Casing	Outer Casing
Casing top (above grade)	70'	
Casing bottom (below grade)	1'	
Casing diameter	60'	
Casing material	4"	
	PVC	

Tentative screen setting 60 (top) To 70

Tentative screen length 10' Material PVC

Type of Grout Clay From 0 (top) To 40

Gravel pack YES NO

Gravel pack interval: From 60 To 70

Desired capacity 20 GPM.

Maximum daily use 300 GPD.

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

Signature - Application Preparer/WC [Signature]

Date 11-22-97

Signature - Property Owner [Signature]

Date 11-22-97

I also request that the contractor's copy of the permit and the well tag be released to the well contractor YES NO

Amount 35.00 ✓ # 1077 RECEIVED

Date 11-24-97

Received By [Signature]

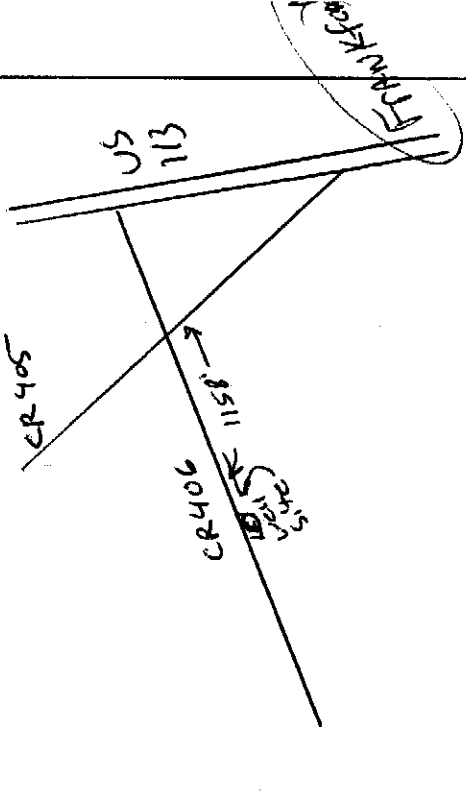
White - Water Supply Company - Work • Pit - Owner WATER SUPPLY

Formation 174-064

Local ID 308

11-24-97 4CL3310 MISC. 35.00

Goldenrod - Contractor



Site Plan - Include lot size and dimensions, distances from well to house, property lines, nearest road and all nearby septic systems (include available plot plan if available)

PERMIT NO. 155204-W

STATE OF DELAWARE
 DEPARTMENT OF NATURAL RESOURCES
 AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT

WELL COMPLETION REPORT MUST BE
 RETURNED WITHIN 30 DAYS OF
 CONSTRUCTION.

10/27/98

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

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PERMIT NO. 155204-W LOCAL ID _____
 TAX MAP # 2-33-16-48
 PROPERTY OWNER Lloyd Bare
 WELL CONTRACTOR Tom Morris
 LIC# 1004 CONSTRUCTION DATE 11-25-97

WELL CONSTRUCTION METHOD

AUGERED
 DRIVEN
 MUD ROTARY
 OTHER _____

BORED
 JETTED
 REVERSE
 WASHED
 (Specify)

TOTAL DEPTH OF EXCAVATION: 40'

CASING INSTALLATION

INNER CASING(S)

CASING TOP _____
 CASING BOTTOM 30
 CASING DIAMETER 2"
 CASING MATERIAL PVC

SCREEN INSTALLATION

INNER CASING(S)

SCREEN TOP 36'
 SCREEN BOTTOM 40'
 SCREEN DIAMETER 2"
 SCREEN MATERIAL PVC

OUTER CASING _____

GRAVEL PACK FROM 30 TO 40 FEET

GROUT TYPE: CEMENT (c) BENTONITE CLAY (b)

OTHER (o) _____

FROM 0 (R) TO 25 FROM _____ (R) TO _____ FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE Sand FROM 25 TO 30

STATIC WATER LEVEL OF (DATE) 5 FT. (Below, Above) GROUND SURFACE

PUMPING WATER LEVEL OF (DATE) 16

AFTER 1 HOURS AT 20 GPM.

WAS A GEOPHYSICAL LOG TAKEN? YES NO

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTER STANDARD "T"
 WELL PIT PAD MOUNT
 OTHER _____

INCHES ABOVE GRADE _____

WAS THE WELL TAG ATTACHED? YES NO

IF "NO", EXPLAIN _____

TYPE OF PERMANENT PUMP INSTALLED: _____

PUMP MANUFACTURE _____

RATED CAPACITY (GPM) _____

PUMP INTAKE SETTING _____ FT. BELOW GRADE _____

THE LOCATION AND CONSTRUCTION OF THIS WELL IS IN COMPLIANCE WITH ALL PERMIT CONDITIONS AND WITH ALL APPLICABLE WELL CONSTRUCTION REGULATIONS. YES NO

If "no," attach a copy of the approved well permit which has the revised location clearly marked.

NOTE: Completed Formatic _____

COMMENTS: _____

DATE: MAY 21 1998

WATER SUPPLY

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

Signature of Well Driller in Charge Tom Morris
 License# 1004
 Date 11/27/98

