

Mullins house 0945-09

MAIL TO:
WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901

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

http://www.dnrec.state.de.us/

APPLICATION MUST BE SUBMITTED
AND PERMIT RECEIVED BEFORE
DRILLING IS STARTED.

- OFFICIAL USE ONLY -

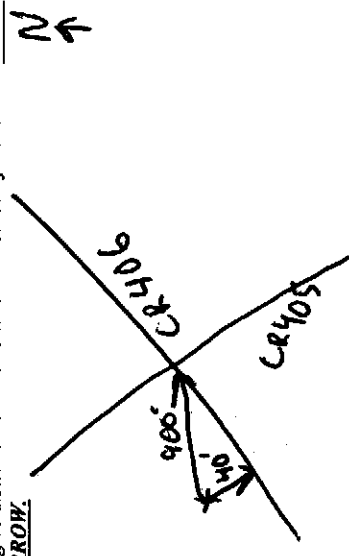
PAGE # 4 OF 7 PAGES
PERMIT NO: 187774

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY
Property Owner: John L. Lynch
Address: P.O. Box 185 State: De Zip: 19945
City: Frankford
Telephone Number: 302-732-1145
Licensed Preparer/WC: Daisey's Well Drilling Inc
Lic. #: 13 Date of Application: 7-16-02

LOCATION MAP - ROAD MAP
County: New Castle Kent Sussex
Subdivision: _____
Lot #: _____ ADC Map Grid: _____
Tax Map/Parcel #: 2-32-16-35.02
Name of Nearest Town: Frankford
Distance to Nearest Town: 2.5

Draw a sketch below showing location of well in relation to at least two county or state roads, give distance from well site to nearest road junction and **SHOW A NORTH ARROW.**



Estimated Construction Date: 7-20-02
PURPOSE: Test Permanent Temporary for Well Construction
USE: Domestic Irrigation
 Industrial Agricultural
 Public Heat Pump Supply
 Miscellaneous Public Heat Pump Recharge
 Other (Specify): _____
Is this a replacement well? NO YES (Reason): _____
Is public water available? NO YES (Utility): _____
On public sewage? YES OR Septic system permit #: 187343-5

PROPOSED WELL CONSTRUCTION:

| Inner Casing | Outer Casing |
|----------------------|----------------------|
| ft. <u>80</u> | ft. <u>80</u> |
| in. <u>12</u> | in. <u>12</u> |
| ft. <u>70</u> | ft. <u>70</u> |
| in. <u>4</u> | in. <u>4</u> |
| Material: <u>PVC</u> | Material: <u>PVC</u> |

Proposed screen setting: 70 ft. TO: 80 ft. Material: _____
Type of Grout: Bestonite 488 From: 0 To: 65
Gravel pack: YES NO From: 66 To: 80
Maximum capacity: 200 (GPM) Max. Daily Withdrawal: 8000 (GPD)

Will the operation of this well by itself or in combination with any other well(s), owned or operated by the permittee, withdraw greater than 50,000 gallons in any 24 hr. period? NO YES
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT.

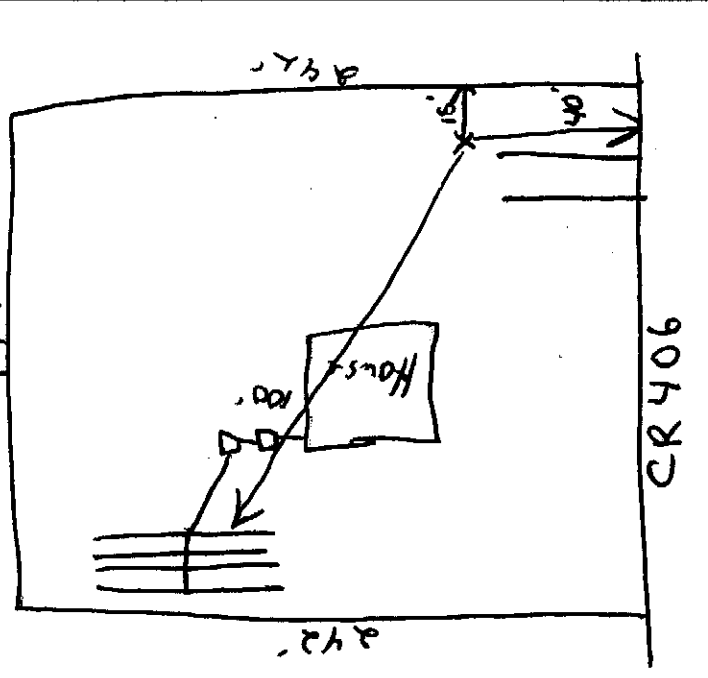
Signature - Licensed Preparer/Water Well Contractor: Michael G. Daisey Date: 7-16-02
Signature - Property Owner: John L. Lynch Date: 7/16/02

Please release the contractor's copy of the permit and the well tag to the water well contractor noted on this application.

RECEIVED
Received: Jul 22 2002
Approved: _____
Date: _____
WATER SUPPLY

PERMIT #: 187774-W

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



- FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE -
Modified Grid: 1608-0204 DRBC: YES NO
Drainage Basin: 308
Quad: Mullins
Flood Zone: _____
X-Coord: 213959
Y-Coord: 58300
DOT #: DOMESTIC
DOT #: 35.00

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL
WELL COMPLETION REPORT

SUPPLY SECTION
DIVISION OF WATER RESOURCES
1000 S. HIGHWAY
DOVER, DELAWARE 19901

PHONE: 302-739-3665
FAX: 302-739-7764

WELL COMPLETION REPORT
MUST BE RETURNED WITHIN 30
DAYS OF CONSTRUCTION. A
WELL FORMATION LOG MUST BE
INCLUDED WITH THIS REPORT.

- OFFICIAL USE ONLY -

PAGE _____ OF _____ PAGES

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED
PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well: 187774 Local ID: _____
Tax Map/Parcel #: 2-33-16-35.02
Property Owner: JOHN L. LYNCH
Water Well Contractor: Daisey's Well Drilling Lic #: #13
Well Driller in Charge during Construction: Michael G. Daisey

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 80'
Construction Date: 8-20-02

CASING INSTALLATION:

| (1) | (2) | (3) | (4) | (5) | (6) |
|------------------|-----|-----|-----|-----|--------------|
| CASING TOP: | | | | | OUTER CASING |
| CASING BOTTOM: | | | | | <u>12"</u> |
| CASING DIAMETER: | | | | | <u>70"</u> |
| CASING MATERIAL: | | | | | <u>4"</u> |
| | | | | | <u>PVC</u> |

SCREEN INSTALLATION

SCREEN TOP: 20'
SCREEN BOTTOM: 80'
SCREEN DIAMETER: 4"
SCREEN MATERIAL: PVC

Gravel Pack From: _____ ft. To: _____ ft.
Grout Type: Cement Bentonite Clay
 Other: _____ From: 3 ft. To: 63 ft.
Type of Non-Grout backfill of Well Annulus: NATURAL
From: 64 To: 80'
Static Water Level: 8 ft. Below OR Above Ground Surface
On (date): 8-20-02
Pumping Water Level: 19 ft. On (date): 8-20-02
After: 1 hrs. Pumping at: 35 GPM
Was a Geophysical Log Taken? YES NO

WELL HEAD COMPLETION:

Type: Wellless Adapter Standard "T"
 Well Pit Pad Mount
 Other - Specify: _____
Well Head Completed: 12 inches Above (OR) Below Ground Surface
Was the Well Tag attached in accordance with current regulations?
 YES NO If "NO", Please Explain: _____

TYPE OF PERMANENT PUMP INSTALLED:

Pump Manufacturer: _____
Rated Capacity (GPM): _____
Pump Intake Setting: _____ Ft. Below Ground Surface:
Pump Installed By: _____ On (date): _____

The location and construction of this well is in Compliance with all permit conditions and all applicable well construction regulations.

YES NO
If "NO," attach a copy of the approved well permit showing the revised location clearly marked.

COMMENTS:

RECEIVED
1 JAN 23 2003
WATER SUPPLY

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

Signature - Well Driller in Charge of Well Construction
Michael G. Daisey

License # 994 Date 8-20-02

