Q.23-13

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 WELL COMPLETION REPORT

MW-7 DH

PLEASE PRINT OR TYPE

PERMIT NO. 17635J LOCAL ID MW-7
Owner Gerald Hoeter
Address PO Box 97
City Ocean View State De Zip 19970
Telephone Number 539-4140
Consulting Firm/Supervising Geologist (If applicable)
Atlantic Hydrologic
Telephone Number 697-3012
Well Contractor Weber
Date of Completion 1-25-00
Name of DNREC Contact Person
Drilling Method Auger

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

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WELL CONSTRUCTION

Total depth drilled: 12.5
Depth to water 6
Surveyed Top of Casing Elevations
0 (Inner) _____ (Outer) Ft. above Sea Level

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	0	
Casing bottom	2.5	
Casing diameter	2"	
Casing material	PVC	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	2.5	
Screen bottom	12.5	
Screen diameter	2"	
Screen material	PVC	

Type of Grout Bent from 2.5 to 0
Gravel pack interval from 2.5 to 12.5
Aquifer/Formation screened in:
Type of samples (ditch, split spoon, etc.)
Flite

Samples Logged By: Steve Keyhill (Name)
Atlantic Hydrologic (Company) (Title)

Well Drilled By: Weber well (Company Name)

(Signature of Driller in Charge) (Date)

DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
Fill	0	1
Brown Sand	1	5
Org Silt	5	10
Brown Sand	10	12.5

RECEIVED
FEB 07 2001
WATER SUPPLY

SUPPLEMENTAL DRILLERS LOG ATTACHED?
YES [ ] NO [✓]
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White - Water Supply • Canary - Other • Pink - Owner • Goldenrod - Contractor

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