

11/29/88 LOCAL ID \_\_\_\_\_

Carol J. Cannaday \_\_\_\_\_

DATE 11/29/88 \_\_\_\_\_

TEST  PERMANENT

ESTIC  AGRICULTURAL

COMMERCIAL  INDUSTRIAL

RESIDENTIAL  PUBLIC

FLOOR  DEWATERING

PUMP RECHARGE  HEAT PUMP SUPPLY

DEPTH (Specify) \_\_\_\_\_

IS THIS AN EXISTING WELL? YES  NO

START DATE FOR OLD WELL \_\_\_\_\_

TEST METHOD \_\_\_\_\_

**DRILLING METHOD**

- BOPED  CABLE TOOL
- JETTED  AIR ROTARY
- REVERSE  WASHED

DRILLER (Specify) \_\_\_\_\_

DEPTH DRILLED 70 \_\_\_\_\_

**CASING SEQUENCE**

| INNER | OUTER |
|-------|-------|
| + 2   |       |
| 60    |       |
| 4" N  |       |
| PC    |       |

**SCREEN SEQUENCE**

| INNER | OUTER |
|-------|-------|
| 60    |       |
| 70    |       |
| 4" N  |       |
| PC    |       |

WRITTEN APPROVAL FOR SCREENING/ GRAVEL PACKING MORE THAN ONE AQUIFER MUST BE OBTAINED FROM DNREC.

CEMENT  BENTONITE CLAY

TO 30 FEET

JACKFILL OF WELL ANNULUS

FROM \_\_\_\_\_ TO \_\_\_\_\_ FEET

PIPE TYPE # 2

TO 70 FEET

TEST DATE \_\_\_\_\_

(low/above) GROUND SURFACE

TEST LEVEL 25 FT. BELOW GRADE

HOURS AT 40 GPM.

**TEST COMPLETION:**

WELL CAPTOR

FEET ABOVE GRADE \_\_\_\_\_

**TYPE OF PERMANENT PUMP INSTALLED:**

PUMP MANUFACTURE \_\_\_\_\_

RATED CAPACITY (GPM) \_\_\_\_\_

PUMP INTAKE SETTING \_\_\_\_\_ FT BELOW GRADE

**THE COMPLETED WELL IS?**

- |  | YES                                 | NO                       |
|--|-------------------------------------|--------------------------|
| A. AT LEAST 15' FROM ANY FOUNDATION                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. AT LEAST 50' FROM ANY SEPTIC TANK                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. AT LEAST 10' FROM TOWN SEWER LINE                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**THE NEAREST NEIGHBORS (CIRCLE ONE)**

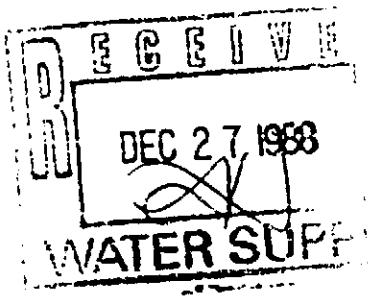
SEPTIC TILE FIELD CESSPOOL OR PRIVY

IS \_\_\_\_\_ FEET FROM COMPLETED WELL.

IS COMPLETED WELL LOCATED AS SHOWN

ON APPLICATION FORM?

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.



Q:35-09

| DRILLERS LOG DESCRIPTION | TOP OF STRATA | BOTTOM OF STRATA |
|--------------------------|---------------|------------------|
| Top soil                 | 0             | 1                |
| Wht fn/md snd            | 1             | 30               |
| Gry cly                  | 30            | 35               |
| Wht fn/md snd            | 35            | 55               |
| In md/crse grvl          | 55            | 70               |
|                          |               |                  |
|                          |               |                  |
|                          |               |                  |
|                          |               |                  |
|                          |               |                  |

SUPPLEMENTAL DRILLERS LOG ATTACHED YES  NO

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COMPANY NAME American Water Well Systems

SIGNATURE OF DRILLER IN CHARGE: \_\_\_\_\_ DATE 11/29/88