

MAIL TO:

WATER SUPPLY BRANCH
DIVISION OF ENVIRONMENTAL CONTROL
P.O. BOX 1401
DOVER, DELAWARE 19901

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST
BE RETURNED 21 DAYS AFTER
CONSTRUCTION DATE

WELL COMPLETION REPORT

Done 8/11/84
Well-02

PLEASE PRINT

PERMIT NO. 57494 LOCAL ID _____

OWNER Belxawa Farms Corp

CONSTRUCTION DATE 8/10/84

PURPOSE: TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 MONITOR DEWATERING
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) _____

IS THIS A REPLACEMENT WELL? YES NO

ABANDONMENT DATE FOR OLD WELL N/A

ABANDONMENT METHOD _____

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____

TOTAL DEPTH DRILLED 30'

CASING SEQUENCE

CASING TOP	1st	2nd	3rd	4th
	25'			
CASING BOTTOM				
CASING DIAMETER	4"			
CASING MATERIAL	PVC			

SCREEN SEQUENCE

SCREEN TOP	1st	2nd	3rd	4th
	25'			
SCREEN BOTTOM	30'			
SCREEN DIAMETER	4"			
SCREEN MATERIAL	PVC			

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

GROUT TYPE: CEMENT BENTONITE CLAY

OTHER: _____
FROM 0 TO 20 FEET

NON-GROUT BACKFILL OF WELL ANNULUS
TYPE _____ FROM _____ TO _____ FEET

GRAVEL PACK: TYPE MORIE 142
FROM 25 TO 30 FEET

STATIC WATER LEVEL: DATE 8/10/84
6 FT. Below above GROUND SURFACE

PUMPING WATER LEVEL: 11 FT. BELOW GRADE
AFTER 1 HOURS AT 60 GPM.

WELL HEAD COMPLETION:

PIPE: PITLESS ADAPTOR
OTHER _____
12 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE N/A

RATED CAPACITY (GPM) _____

PUMP INTAKE SETTING _____ FT. BELOW GRADE

THE COMPLETED WELL IS?

YES NO
A. AT LEAST 5' FROM ANY OVERHANG
B. AT LEAST 50' FROM ANY SEPTIC TANK
C. AT LEAST 10' FROM TOWN SEWER LINE
D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD

THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC TILE FIELD CESSPOOL OR PRIVY
IS 100' FROM COMPLETED WELL.
IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM?
IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

Well-02

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	1	1
Tan Sand F	2	3
Brown Clay	8	11
Tan Sand M	10	21
Brown Sand M	9	30

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
PAGE 1 OF _____ PAGES
COMPANY NAME _____
SIGNATURE OF DRILLER IN CHARGE: _____ DATE 8/14/84