

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 21 DAYS AFTER
 CONSTRUCTION DATE

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 44109 LOCAL ID H-8

OWNER [Signature]

CONSTRUCTION DATE 4/27/86
 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 15.0

CASING SEQUENCE

	INNER	OUTER
CASING TOP	+2.0'	
CASING BOTTOM	16.0'	
CASING DIAMETER	2.0"	
CASING MATERIAL	PVC	

SCREEN SEQUENCE

	INNER	OUTER
SCREEN TOP	6.0'	
SCREEN BOTTOM	8.0'	
SCREEN DIAMETER	2.0"	
SCREEN MATERIAL	PVC	

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

GROUT TYPE: CEMENT BENTONITE CLAY
 OTHER: _____
 FROM 0 TO 4.6 FEET
 NON-GROUT BACKFILL OF WELL ANNULUS
 TYPE GRAVEL FROM 4.6 TO 15 FEET
 GRAVEL PACK: TYPE N/A
 FROM _____ TO _____ FEET
 STATIC WATER LEVEL: DATE 4-22-86
4.6 FT. (Below, above) GROUND SURFACE
 PUMPING WATER LEVEL: _____ FT. BELOW GRADE
 AFTER _____ HOURS AT _____ GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR
 OTHER PVC CAP
1.5 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	<input type="checkbox"/>	<input type="checkbox"/>
B. AT LEAST 50' FROM ANY SEPTIC TANK	<input type="checkbox"/>	<input type="checkbox"/>
C. AT LEAST 10' FROM TOWN SEWER LINE	<input type="checkbox"/>	<input type="checkbox"/>
D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD	<input type="checkbox"/>	<input type="checkbox"/>

THE NEAREST NEIGHBORS (CIRCLE ONE)

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

R; 11-04

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
TOPSOIL	0	1
ORANGE M. SAND	1	
TAN-BROWN F-F-M SAND WITH CLT	4	15

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
 PAGE 1 OF 1 PAGES DGS
 COMPANY NAME _____
 SIGNATURE OF DRILLER IN CHARGE: [Signature] DATE _____