

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

PLEASE PRINT OR TYPE

PERMIT NO. 78213 LOCAL ID 4S
 Owner Ag Farm
 Address W.F.D.
 City NEWMARKET State DE Zip 19716
 Telephone Number 451-2468
 Consulting Firm/Supervising Geologist (If applicable)
W. Ritter
 Telephone Number 451-2468
 Well Contractor DGS
 Date of Completion 4/3/99
 Name of DNREC Contact Person _____
 Drilling Method Auger

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

Moved 35' W

WELL CONSTRUCTION

Total depth drilled: 14.7'
 Depth to water 7.5'
 Surveyed Top of Casing Elevations
 _____ Ft. above Sea Level
 Inner N/A Outer _____

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	<u>11.0'</u>	
Casing bottom	<u>17.7'</u>	
Casing diameter	<u>1.25"</u>	
Casing material	<u>PVC</u>	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	<u>12.7'</u>	
Screen bottom	<u>14.7'</u>	
Screen diameter	<u>1.75"</u>	
Screen material	<u>PVC</u>	

Type of Grout BENTONITE from 0 to 6.5
 Gravel pack interval from N/A to _____
 Aquifer/Formation screened in: COLUMBIA
 Type of samples (ditch, split spoon, etc.) _____

Samples Logged By: P.E. BOUNDS
 (Name)
Sr. RES. TECH DGS
 (Title) (Company)

Well Drilled By: DGS
 (Company Name)

Robert E. Bounds 4/6/99
 (Signature of Driller in Charge) (Date)

Pe32-08

DRILLERS LOG DESCRIPT.	TOP OF STRATA	BOTTOM
<u>BROWN SANDY TOPSOIL</u>	<u>0</u>	<u>1.0</u>
<u>ORANGE-BROWN M. SAND W/ TR. CLAY</u>	<u>1.0</u>	<u>4.0</u>
<u>GRAY & BROWN MOD. F-M SANDY CLAY</u>	<u>4.0</u>	<u>8.5</u>
<u>GRAY M-C SAND W/ TR. GRAVEL</u>	<u>8.5</u>	<u>14.7</u>

SUPPLEMENTAL DRILLERS LOG ATTACHED?
 YES [] NO [X]
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