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 30 DAYS AFTER** CONSTRUCTION DATE

MONITOR WELL COMPLETION REPORT

PLEASE FRINT OR TIPE			
PERMIT NO. 78224 LOCAL ID 15S	IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM? YES [] NO [X]		
Address _ USD	IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.		
City <u>NFUNIC</u> State <u>DE</u> Zip <u>19716</u> Telephone Number <u>457-2468</u>	Moved	115 W	Ź
Consulting Firm/Supervising Geologist (If applicable)		35' N	
Telephone Number +51-7468	·		
Telephone Number 45/-7468 Well Contractor D6.3			
Date of Completion 5/9/8/			
Drilling Method: Auger	u t	•	
WELL CONSTRUCTION	Pe32-19		·
Total depth drilled:			
Depth to water	DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
Surveyed Top of Casing Elevations			
Inner N Outer Ft. above Sea Level	GROWN SINDS TOPSIL	<i>U</i>	1. 0
- CACING CEQUENCE			
CASING SEQUENCE	BROWN-DRANGE M		11
Inner casing Outer casing	SAND W/TR.CLAY	1.0	7.0
Casing top			
,,			
Casing diameter / 2.5	CAN BROWN MOD	4.0	\$.5
Casing material PV (F-M SANDY CLAY	′	\$ - >
SCREEN SEQUENCE	7		
Inner casing Outer casing			
Screen top	GLAY M-C DAVID	0	y grange
Screen bottom	W/ TR. GRAVEL		77
Screen diameter /25	7		
Screen material PVC			
Type of Grout BANTONITE from 0 to 6.5			
1/ + 1			
Aquifer/Formation screened in:			
000			
Samples Lorged By /2E LOGNOS	·		
Samples Logged By: (Name)			
$1 \cdot (D \cap A) = \lambda / C = 1$			<u> </u>
71. May DO			
(Title) (Company)			
γ_{\prime}			
Well Delled Dec			
Well Drilled By: (Confipany Name)			
Monte founds 1/1/29	SUPPLEMENTAL DRILLERS LOG ATTACHED?		
8/4/8/	_ YES[] NO[Ž]		
(Signature of Driller in Charge) (Date)	PAGE 1 OF PAGES		