

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 PRINT OR TYPE

PERMIT NO. 078240 LOCAL ID 315
 Owner [Signature]
 Address [Signature]
 City NEWARK State DE Zip 19716
 Telephone Number 451-2468
 Consulting Firm/Supervising Geologist (If applicable) [Signature]
 Telephone Number 451-2468
 Well Contractor [Signature]
 Date of Completion 5/19/89
 Drilling Method: Auger

WELL CONSTRUCTION

Total depth drilled: 14.5
 Depth to water 7.5
 Surveyed Top of Casing Elevations
 Inner Outer Ft. above Sea Level

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	7.0	
Casing bottom	11.7	
Casing diameter	1.25	
Casing material	PVC	

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	11.7	
Screen bottom	14.5	
Screen diameter	1.25	
Screen material	PVC	

Type of Grout BENT from 0 to 6.5
 Gravel pack interval from N/A to
 Aquifer/Formation screened in: COLUMBIA

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

Pe32-35

DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
BROWN SANDY TOPSOIL	0	1.0
ORANGE-BROWN M. SAND w/ TR. GRAVEL	1.0	4.0
GRAY & BROWN MUD. F. SANDY CLAY	4.0	8.5
GRAY M.C. SAND w/ TR. GRAVEL	8.5	14.5

Samples Logged By: [Signature]
 (Name)
[Signature] [Signature]
 (Title) (Company)
 Well Drilled By: [Signature]
 (Company Name)
[Signature] 6/6/89
 (Signature of Driller in Charge) (Date)

SUPPLEMENTAL DRILLERS LOG ATTACHED?
 YES NO
 PAGE 1 OF 1 PAGES