

MAIL TO:

WATER SUPPLY BRANCH
DIVISION OF ENVIRONMENTAL CONTROL
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

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 7348 LOCAL ID Phm-9

OWNER W.S. Scaff. Inc.

CONSTRUCTION DATE 4-20-88 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 _____
ABANDONMENT METHOD _____

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
TOTAL DEPTH DRILLED 105'

CASING SEQUENCE

INNER	OUTER
0'	
60'	
2"	
PVC	

SCREEN SEQUENCE

INNER	OUTER
60	
63'	
2"	
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 15 FEET
NON-GROUT BACKFILL OF WELL ANNULUS
TYPE sand FROM 15 TO 20 FEET
GRAVEL PACK: TYPE N/A
FROM _____ TO _____ FEET
STATIC WATER LEVEL: DATE 4-20-88
0 FT. (Below) above) GROUND SURFACE
PUMPING WATER LEVEL: N/A FT. BELOW GRADE
AFTER _____ HOURS AT _____ GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR
OTHER PVC CAP
____ 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 15' FROM ANY FOUNDATION
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 2100' FROM COMPLETED WELL

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

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
br-cr clay sd	0	5'
or m sd	5	10
H tan m-c sd + sH	10	20
or-tan m-c sd	30	55
m-c sd w/ sH	55	65
m-c tan sd	65	100
dk gr clay	100	105'

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