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 / OBSERVATION WELL COMPLETION REPORT

PLEASE PRINT OR TYPE

PERMIT NO. 100688 LOCAL ID _____
Owner Gull Point Condominium
Address 40 Rd 313
City Milsboro State De Zip 19966
Telephone Number 302/945-5283
Consulting Firm/Supervising Geologist (If applicable)
Utility Systems Inc.
Telephone Number 1-800-852-5980
Well Contractor Burns Inc.
Date of Completion 11-2-94
Name of DNREC Contact Person _____
Drilling Method Mud Rotary

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

Ph53-12

WELL CONSTRUCTION

Total depth drilled: 16'
Depth to water 11'
Surveyed Top of Casing Elevations
_____ (Inner) _____ (Outer) Ft. above Sea Level

CASING SEQUENCE

	Inner casing	Outer casing
Casing top	1' Above	1' Above
Casing bottom	6'	2'
Casing diameter	2"	4"
Casing material	PVC	Steel

SCREEN SEQUENCE

	Inner casing	Outer casing
Screen top	6'	
Screen bottom	16'	
Screen diameter	2"	
Screen material	PVC	

Type of Grout bentonite/Cement from 0 to 4
Gravel pack interval from 4 to 16
Aquifer/Formation screened in: Surface
Type of samples (ditch, split spoon, etc.)

Samples Logged By: _____ (Name)
_____ (Title) _____ (Company)

Well Drilled By: Burns Inc. (Company Name)

_____ (Signature of Driller in Charge) 11/8/94 (Date)

DRILLERS LOG DESCRIP.	TOP OF STRATA	BOTTOM
Top Soil	0	1/2'
Fine brown SAND	1/2'	2'
Fine tan SAND	2'	3'
Medium gray SAND w/ white clay	3'	7'
Medium coarse gray SAND	7'	7 1/2'
	7 1/2'	13'

SUPPLEMENTAL DRILLERS LOG ATTACHED?
YES [ ] NO [✓]
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White - Water Supply • Canary - Other • Pink - Owner • Goldenrod - Contractor