

STATE OF DELAWARE
 WATER SUPPLY BRANCH
 DIVISION OF ENVIRONMENTAL CONTROL
 P.O. BOX 1481
 DOVER, DELAWARE 19901

DEPARTMENT OF ENVIRONMENTAL RESOURCES
 AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST
 BE FILED 21 DAYS AFTER
 CONSTRUCTION DATE

WELL COMPLETION REPORT

Dw 10/2/84

WELL NO. 316989

POINT NO. 316989 LOCAL ID _____

OWNER Therrell, Brian

CONSTRUCTION DATE 6-14-84

PURPOSE TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 COMMUNION PUBLIC
 MICHIFON DRAINAGING
 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 BORER CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MILD ROTARY REVERSE WASHED
 OTHER (Specify) _____

TOTAL DEPTH DRILLED 90

CASING SEQUENCE

DEPTH	DIAMETER	MATERIAL
0	12	PC
12	12	PC
24	12	PC
36	12	PC
48	12	PC
60	12	PC
72	12	PC
84	12	PC
90	12	PC

SCREEN SEQUENCE

DEPTH	DIAMETER	MATERIAL
0	12	PC
12	12	PC
24	12	PC
36	12	PC
48	12	PC
60	12	PC
72	12	PC
84	12	PC
90	12	PC

GROUP TYPE: CEMENT BENTONITE CLAY

OTHER: _____

FROM 0 TO 25 FEET

NON-SHIELD CASING: _____

TYPE OF CASING: FROM 25 TO 90 FEET

CASING JOINT TYPE: Weld

FROM 0 TO 90 FEET

CASING WEIGHT: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

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CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

CASING GRADE: _____

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE _____
 RATED CAPACITY (GPM) _____
 PUMP INTAKE SETTINGS _____ FT. BELOW GRADE

THE COMPLETED WELL IS:
 YES NO
 A. AT LEAST 5' FROM ANY OVERHANG
 B. AT LEAST 10' FROM ANY SEPTIC TANK
 C. AT LEAST 10' FROM TOWN SEWER LINE
 D. AT LEAST 10' FROM THE NEAREST EDGE
 OF ANY TILE FIELD

THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC TILE FIELD CREEKPOOL OR POND

IS THIS A REPLACEMENT/COMPLETED WELL

IS COMPLETED WELL LOCATED AS SHOWN

ON APPLICATION FORM?

IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS

Qe 45-02

WELL LOG DESCRIPTION TOP OF STRATA BOTTOM OF STRATA

WELL LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Yellow clay and sand	1	1
Yellow clay sand	3	4
Yellow clay	8	16
Grey clay	4	20
Grey sand and silt	7	27
Reddish brown sand	5	32
Light colored silty sand		57
Reddish brown sand	15	72
Reddish brown sand	20	91
Reddish brown sand	8	110

DOES THIS WELL LOG ATTACHED YES NO

DATE OF PUMP _____

NAME OF WELL OWNER Brian Therrell

ADDRESS OF WELL OWNER _____

CITY OF WELL OWNER _____

STATE OF WELL OWNER _____

ZIP CODE OF WELL OWNER _____

DATE OF REPORT _____

REPORT MADE BY _____

REPORT MADE AT _____

REPORT MADE FOR _____

REPORT MADE BY _____

REPORT MADE AT _____

REPORT MADE FOR _____

REPORT MADE BY _____

REPORT MADE AT _____

REPORT MADE FOR _____

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REPORT MADE AT _____

REPORT MADE FOR _____

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