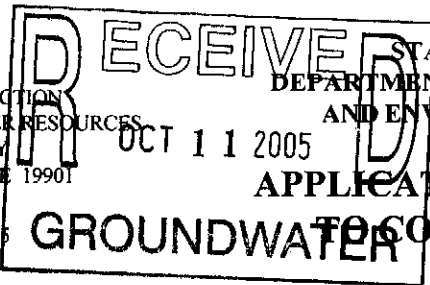


MAIL TO:

WATER SUPPLY SECTION  
DIVISION OF WATER RESOURCES  
89 KINGS HIGHWAY  
DOVER, DELAWARE 19901



STATE OF DELAWARE  
DEPARTMENT OF NATURAL RESOURCES  
AND ENVIRONMENTAL CONTROL

http://www.dnrec.state.de.us/

APPLICATION MUST BE SUBMITTED  
AND PERMIT RECEIVED BEFORE  
DRILLING IS STARTED.

APPLICATION FOR A PERMIT

- OFFICIAL USE ONLY -

PHONE: 302-739-3666  
FAX: 302-739-7764

GROUNDWATER CONSTRUCT A WELL

White

PAGE # \_\_\_\_\_ OF \_\_\_\_\_ PAGES  
PERMIT NO: 211864

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY

Property Owner: Hugo Paetz  
Address: 2 Newport Village Dr.  
City: Frankford State: De. Zip: 19945  
Telephone Number: 302/462-0083  
Licensed Preparer/WC: MORRIS  
Lic. #: 1004 Date of Application: 10-10-05

Estimated Construction Date: ASAP

PURPOSE:  Test  Permanent  Temporary for Well Construction

USE:  Domestic  Irrigation  
 Industrial  Agricultural  
 Public  Heat Pump Supply  
 Miscellaneous Public  Heat Pump Recharge  
 Other (Specify): \_\_\_\_\_  Closed Loop Heat Pump

Is this a replacement well?  NO  YES (Reason): \_\_\_\_\_

Is public water available?  NO  YES (Utility): \_\_\_\_\_

On public sewage?  YES  OR Septic system permit #: 207920

PROPOSED WELL CONSTRUCTION:

	Inner Casing	Outer Casing
Approximate total depth:	<u>120</u> ft.	ft.
Casing top (above grade):	<u>1'</u> in.	in.
Casing bottom (below grade):	<u>110</u> ft.	ft.
Casing diameter:	<u>4"</u>	ft.
Casing material:	<u>PVC</u>	
Proposed screen setting:	<u>110</u> ft. TO: <u>120</u> ft. Material: <u>PVC</u>	
Type of Grout:	<u>Clay</u> From: <u>0</u> To: <u>25</u>	
Gravel pack:	<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES From: <u>110</u> To: <u>120</u>	
Maximum capacity:	<u>18</u> (GPM) Max. Daily Withdrawal: <u>300</u> (GPD)	

Will the operation of this well by itself or in combination with any other well(s), owned or operated by the permittee, withdraw greater than 50,000 gallons in any 24 hr. period?  NO  YES

I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT.

Signature - Licensed Preparer/Water Well Contractor [Signature] Date 10-10-05

Signature - Property Owner [Signature] Date 9-10-05

Please release the contractor's copy of the permit and the well tag to the water well contractor noted on this application:

YES  NO

LOCATION MAP - ROAD MAP

County:  New Castle  Kent  Sussex

Subdivision: \_\_\_\_\_

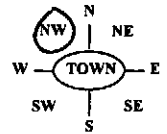
Lot #: \_\_\_\_\_ ADC Map Grid: \_\_\_\_\_

Tax Map/Parcel #: 2-33-14.00-22.04

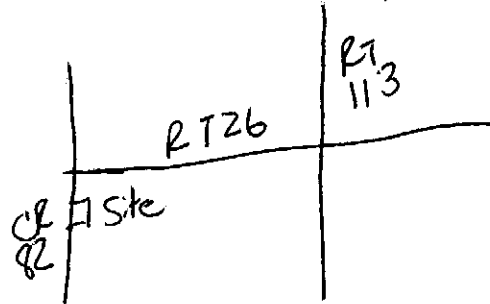
Name of Nearest Town: Frankford

Distance to Nearest Town: 3

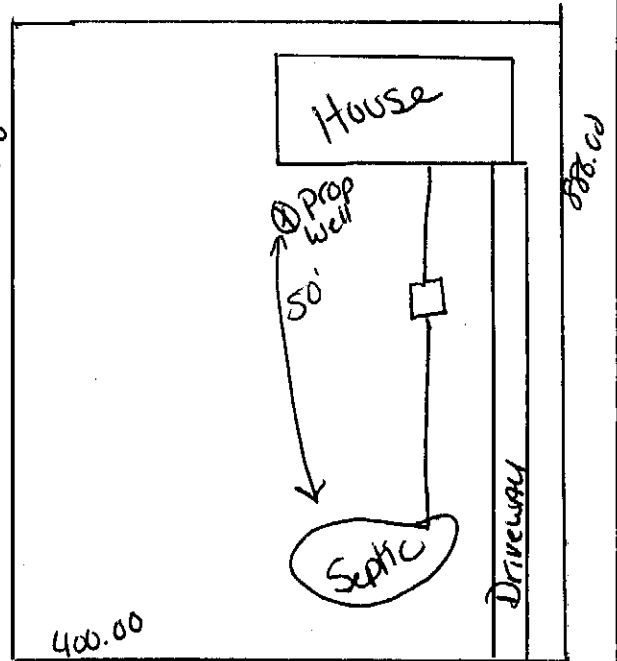
DIRECTION OF WELL FROM TOWN (CIRCLE DIRECTION)



Draw a sketch below showing location of well in relation to at least two county or state roads, give distance from well site to nearest road junction and **SHOW A NORTH ARROW.**



Site Plan - Include lot size and dimensions, distances from well to house, property lines, nearest road, and all nearby septic systems (include suitable plot plan if available).



PERMIT #: 211864

- FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE -

Received By: mp

Modified Grid: 114-064 DRBC:  YES  NO

X - Coord: 209884

Amount: 35.

Drainage Basin: 308 H<sub>2</sub>O Utility: \_\_\_\_\_

Y - Coord: 581672

Date: 10/11/05

Quad: Millsboro Flood Zone/Coastal: 19-11-05 4CL2869

DOT #: 35.00

MAIL TO:  
 WATER SUPPLY SECTION  
 DIVISION OF WATER RESOURCES  
 89 KINGS HIGHWAY  
 DOVER, DELAWARE 19901

STATE OF DELAWARE  
 DEPARTMENT OF NATURAL RESOURCES  
 AND ENVIRONMENTAL CONTROL

http://www.dnrec.state.de.us/

WELL COMPLETION REPORT  
 MUST BE RETURNED WITHIN 30  
 DAYS OF CONSTRUCTION. A  
 WELL FORMATION LOG MUST BE  
 INCLUDED WITH THIS REPORT.

PHONE: 302-739-9944  
 FAX: 302-739-7764

WELL COMPLETION REPORT

- OFFICIAL USE ONLY -

PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well: 211864 Local ID: \_\_\_\_\_  
 Tax Map/Parcel #: 2-33-14.00-22.04  
 Property Owner: Hugo Perez  
 Water Well Contractor: Morris WC Lic #: 1004  
 Well Driller in Charge during Construction: \_\_\_\_\_

WELL CONSTRUCTION METHOD

Augered  Bored  Cable Tool  
 Driven  Jetted  Air Rotary  
 Mud Rotary  Reverse  Washed  
 Other (Specify): \_\_\_\_\_  
 Total Depth of Excavation: 78  
 Construction Date: 11-18-05

CASING INSTALLATION:

	(1)	(2)	INNER CASING			(6)	OUTER CASING
			(3)	(4)	(5)		
CASING TOP:	<u>1'</u>						
CASING BOTTOM:	<u>68</u>						
CASING DIAMETER:	<u>4"</u>						
CASING MATERIAL:	<u>PVC</u>						

SCREEN INSTALLATION

SCREEN TOP:	<u>68</u>						
SCREEN BOTTOM:	<u>78</u>						
SCREEN DIAMETER:	<u>4"</u>						
SCREEN MATERIAL:	<u>PVC</u>						

Gravel Pack From: 68 ft. To: 78 ft.  
 Grout Type:  Cement  Bentonite Clay  
 Other: \_\_\_\_\_ From: 0 ft. To: 30 ft.  
 Type of Non-Grout backfill of Well Annulus: Sand  
 From: 30 To: 68  
 Static Water Level: 5 ft.  Below OR  Above Ground Surface  
 On (date): 11-18-05  
 Pumping Water Level: 11 ft. On (date): 11-18-05  
 After: 1 hrs. Pumping at: 25 GPM  
 Was a Geophysical Log Taken?  YES  NO

TYPE OF PERMANENT PUMP INSTALLED:

Pump Manufacturer: \_\_\_\_\_  
 Rated Capacity (GPM): \_\_\_\_\_  
 Pump Intake Setting: \_\_\_\_\_ Ft. Below Ground Surface: \_\_\_\_\_  
 Pump Installed By: \_\_\_\_\_ On (date): \_\_\_\_\_  
 The location and construction of this well is in Compliance with all permit conditions and all applicable well construction regulations.  
 YES  NO  
 If "NO," attach a copy of the approved well permit showing the revised location clearly marked.

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

WELL HEAD COMPLETION:

Type:  Pitless Adapter  Standard "T"  
 Well Pit  Pad Mount  
 Other - Specify: \_\_\_\_\_  
 Well Head Completed: 12 inches  Above (OR)  Below Ground Surface  
 Was the Well Tag attached in accordance with current regulations?  
 YES  NO If "NO", Please Explain: \_\_\_\_\_

I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT.

[Signature]  
 Signature - Well Driller in Charge of Well Construction  
1004 11-18-05  
 License # Date

RECEIVED  
 NOV 29 2005  
 WATER SUPPLY

