WATER SUPPLY SECTION

89 KINGS HIGHWAY DOVER, DELAWARE 1

PHONE: 302-739-3665

DIVISION OF WATER RESOL

STATE OF DELAWARE

DERARTMENT OF NATURAL RESOURCES

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

APPLICATION FOR A PERMIT TO CONSTRUCT A WELL

AND ENVIRONMENTAL CONTROL

- OFFICIAL USE ONLY -

PAGE #_4	OF 4 PA	GES
PERMIT NO:	18986	28'-P

Doc No. 40-08/85/05/01-EC 2

FAX:302-739-7764 ILLEGIBLE* OR INCOMPLETE FORMS WILL BE RETURNED PLEASE TYPE OR PRINT-USE BLUE OR BLACK INK ONLY LOCATION MAP - ROAD MAP DIRECTION OF WELL FROM TOWN □ Kent □ Sussex (CIRCLE DIRECTION) Subdivision: ADC Map Grid: Lot #: Tax Map/Parcel # 2-33-Telephone:Number: Name of Nearest Town: Licensed Preparer/WC: Distance to Nearest Town:___ Date of Application: Draw a sketch below showing location of well in relation to at least two count Estimated Construction Date: 10 /2 0/02 or state roads, give distance from well site to nearest road junction and SHOW A NORTH ARROW. PURPOSE: Test Permanent Temporary for Well Construction USE: Domestic ☐ Irrigation ☐ Industrial ☐ Agricultural ☐ Public ☐ Heat Pump Supply ☐ Miscellaneous Public ☐ Heat Pump Recharge Closed Loop Heat Pump ☐ Other (Specify): Is this a replacement well? INO XYES (Reason): /// VIFLD Is public water available? **XI** NO **D** YES (Utility): On public sewage? TYES OR Septic system permit #: EX) STIME PROPOSED WELL CONSTRUCTION: Inner Casing **Outter Casing** Site Plan - Include lot size and dimensions, distances from well to house, ft. Approximate total depth: ft. property lines, nearest road, and all nearby septic systems (include suitable plot plan if available). in. in. Casing top (above grade): *ŶIJŊĊŖ*Ŧ < ft. Casing bottom (below grade): Casing diameter: Casing material: Proposed screen setting: 40 ft. Material: プ Gravel pack: ☐ NO 🎾YES From: Maximum capacity: / O (GPM) Max. Daily Withdrawa T 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? ONO OYES I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT. Signature - Property Owner Please release the contractor's copy of the permit and the well tag to the water well contractor noted on this application: ☐ YES □NO - FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE -68-064 DRBC: X - Coord: Modified Grid: Received By: Y- Coord: H₂O Utility: Drainage Basin: Amount:

Flood Zone/Coastal:

Ouad:

but would not validat

Date:

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.

- OFFICIAL USE ONLY -

WELL COMPLETION REPORT

89 KINGS HIGHWAY DOVER, DELAWARE 1990 PHONE: 302-739-3665.

DIVISION OF WATER RESOURCES

PAGE OF PAGES		
WELL CONSTRUCTION METHOD		
□ Augered □ Bored □ Cable Tool □ Driven □ Jetted □ Air Rotary □ Mud Rotary □ Reverse □ Washed □ Construction Date:		
OUTER CASING		
4) (5) (6)		
SCREEN INSTALLATION		
TYPE OF PERMANENT PUMP INSTALLED:		
Pump Manufacturer: Rated Capacity (GPM): Pump Intake Setting: Pump Installed By Ft. Below Ground Surface: Pump Installed By On (date): 1/3/02 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:		
I HEREBY AFFIRM THE INFORMATION ALERS GLAPPEYS ACCURATE AND CORRECT. Signature - Well Driller in Charge of Well Construction License # Date		

WATER SUPPLY SECTION L'IVISION OF WATER RESOURCES 89 KINGS HIGHWAY DOVER, DELAWARE 19901

STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

WELL ABANDONMENT REPORT MUST BE RETURNED WITHIN 30 DAYS OF ABANDONMENT

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

WELL or SOIL BORING ABANDONMENT REPORT

- OFFICIAL USE ONLY -PHONE: 302-739-3665 OF PAGES FAX: 302-739-7764 PERMIT #: ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY WELL ABANDONMENT: Permit # of Abandoned Well: Casing Material: Casing Diameter (inches): Local ID: _____ Tax Map/Parcel #: 233-15-36 Well Depth: 30 Property Owner: HFR 85-177+ 1 AURA MOORE Was any Casing Removed? ₩ NO ☐ YES Well Contractor: PENGLISH Lic. #: 283 If YES, Amount of Casing Removed (feet): Well Driller in Charge: PENGLISH Lic #: 849 Was Casing Ripped or Perforated? NO YES Type of Sealing Material Used: とよみす Construction Date of Abandoned Well/Soil Boring: Sealed From: 6t. To: 30 Abandonment Date: 11/14/03 WELL CONSTRUCTIONMETHOD (if known): NOTE: If this form is submitted in place of a completion report for wells or soil borings installed and abandoned on the same date, a ☐ Augered ☐ Bored ☐ Cable Tool formation log must be attached. Formation logs must be submitted Driven ☐ Jetted ☐ Air Rotary ☐ Mud Rotary □ Reverse ☐ Washed on forms provided by DNREC. Other (Specify): The abandonment of this well(s) or soil boring(s) is in compliance with PROVIDE A LOCATION SKETCH OF ABANDONED WELL(S) Draw a sketch below showing location of well in relation to at least two county all permit conditions and with all applicable well construction regulations. or state roads, give distance from site to nearest road junction and SHOWA NORTH ARROW. YES □ NO COMMENTS: I HEREBY AFFIRM THE INFORMAT Signature - Licensed Driller in Charge of Abandonment - FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE -Received By: Modified Grid:__ DRBC: OYES ONO X-Coord: H₂O Utility: _____ Amount: Drainage Basin: Y-Coord;

Quad:

Flood Zone/Coastal:

MAIL TO:

FAX: 302-739-2296

WATER SUPPLY SECTION DIVISION OF WATER RESOURCES **89 KINGS HIGHWAY** DOVER, DELAWARE 19901 PHONE: 302-739-3665

STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION DATE

FORMATION LOG

PAGE _____ OF ____ PAGES PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED 2-33-15-46 LOCAL ID# PERMIT# PROPERTY OWNER HERBERT & LAYRA MOURE 282 PENCLISH WELL CONTRACTOR LIC# TOP OF STRATA **BOTTOM OF** DESCRIPTION **STRATA** TOPSOIL SAKD EZAV 60 WHITE SAND 7.4 TANSAND GRAVEL OTHER COMMENTS:____ RECEIVED AUG 0 8 2003 WATER SUPPLY I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT

Signature of Well Driller In Char

Date