

MAIL TO:
 WATER SUPPLY BRANCH
 DIVISION OF ENVIRONMENTAL CONTROL
 P.O. BOX 1401
 DOVER, DELAWARE 19901

**STATE OF DELAWARE
 DEPARTMENT OF NATURAL RESOURCES
 AND ENVIRONMENTAL CONTROL**

WELL COMPLETION REPORT MUST
 BE RETURNED 21 DAYS AFTER
 CONSTRUCTION DATE

WELL COMPLETION REPORT

QED 9/12/84

PLEASE PRINT

PERMIT NO. 5650-5 LOCAL ID _____

OWNER Sea Colony

CONSTRUCTION DATE 9/7/84

PURPOSE: 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
 MOD ROTARY REVERSE WASHED
 OTHER (Specify) _____

TOTAL DEPTH DRILLED 400

CASING SEQUENCE

	1st	2nd	3rd	4th
CASING TOP	<u>+2</u>			
CASING BOTTOM	<u>370</u>			
CASING DIAMETER	<u>4"</u>			
CASING MATERIAL	<u>PVC</u>			

SCREEN SEQUENCE

	1st	2nd	3rd	4th
SCREEN TOP	<u>370</u>			
SCREEN BOTTOM	<u>400</u>			
SCREEN DIAMETER	<u>4"</u>			
SCREEN MATERIAL	<u>PVC</u>			

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 330 FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE Cuttings FROM 330 TO 350 FEET

GRAVEL PACK TYPE MORIE #2

FROM 350 TO 400 FEET

STATIC WATER LEVEL: DATE 9/7

6 FT. (Below, above) GROUND SURFACE

PUMPING WATER LEVEL: 16 FT. BELOW GRADE

AFTER 3 HOURS AT 40 GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR

OTHER capped

24 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE _____

RATED CAPACITY (GPM) _____

PUMP INTAKE SETTING _____ FT. BELOW GRADE

THE COMPLETED WELL IS?

- A. AT LEAST 5' FROM ANY OVERHANG YES NO
 B. AT LEAST 50' FROM ANY SEPTIC TANK YES NO
 C. AT LEAST 10' FROM TOWN SEWER LINE YES NO
 D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD YES NO

THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC TILE FIELD CESSPOOL OR PRIVY

IS 1000 FROM COMPLETED WELL.
 IS COMPLETED WELL LOCATED AS SHOWN
 ON APPLICATION FORM? YES NO
 IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

Q:41-04

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Tp soil	0	1
Fn/md snd	1	10
Gry cly	10	18
Fn/md tn snd w/cly	18	75
Gry cly	75	81
Fn/crs snd	81	185
Fn snd w/40% cly	185	207
Fn/md snd	207-	290
Gry cly	290	305
Fn/crs gry snd	305	390
Fn snd w/cly	390	400

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
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 COMPANY NAME Delmarva Drilling Co.
 SIGNATURE OF DRILLER IN CHARGE: Ed Kelley DATE 9/11/84