

MAIL TO:

WATER SUPPLY BRANCH
DIVISION OF ENVIRONMENTAL CONTROL
P.O. BOX 1401
DOVER, DELAWARE 19908

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

WELL COMPLETION REPORT MUST
BE RETURNED 30 DAYS AFTER
CONSTRUCTION DATE

WELL COMPLETION REPORT

PLEASE PRINT

PERMIT NO. 106986 LOCAL ID _____

OWNER ARTHUR E GOLF

CONSTRUCTION DATE 2/9/96

PURPOSE: TEST PERMANENT

USE: DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 OBSERVATION DEWATERING
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) _____

IS THIS A REPLACEMENT WELL? YES NO
ABANDONMENT DATE FOR OLD WELL 2/9/96
ABANDONMENT METHOD CEMENT

DRILLING METHOD

AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
TOTAL DEPTH DRILLED 75 1/2

CASING SEQUENCE

	INNER	OUTER
CASING TOP		1
CASING BOTTOM		6.5
CASING DIAMETER		2
CASING MATERIAL		PC

SCREEN SEQUENCE

	INNER	OUTER
SCREEN TOP		6.5
SCREEN BOTTOM		7.5
SCREEN DIAMETER		2
SCREEN MATERIAL		PC

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 70 FEET
NON-GROUT BACKFILL OF WELL ANNULUS
TYPE W/1 FROM 40 TO 75 FEET
GRAVEL PACK: TYPE _____
FROM _____ TO _____ FEET
STATIC WATER LEVEL: DATE 2/9/96
5 FT. (Below, above) GROUND SURFACE
PUMPING WATER LEVEL _____ FT. BELOW GRADE
AFTER _____ HOURS AT _____ GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR
OTHER 1/4
2 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

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

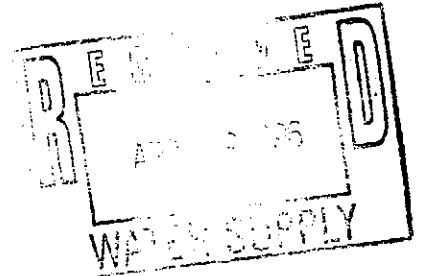
THE COMPLETED WELL IS?

YES NO
A. AT LEAST 15' FROM ANY FOUNDATION
B. AT LEAST 50' FROM ANY SEPTIC TANK
C. AT LEAST 10' FROM TOWN SEWER LINE
D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD

THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC TILE FIELD CESSPOOL OR PRIVY
IS 100' FROM COMPLETED WELL.
IS COMPLETED WELL LOCATED AS SHOWN
ON APPLICATION FORM?
IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

RC14-04



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Sand	1	10
Clay	10	20
Sand	20	30
-	30	40
-	40	50
"	50	60
"	60	70
-	70	75

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
PAGE 1 OF _____ PAGES
COMPANY NAME W. J. ... Drilling
SIGNATURE OF DRILLER IN CHARGE: _____ DATE _____