

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-3665
FAX: 302-739-2296

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
TO CONSTRUCT A WELL

- OFFICIAL USE ONLY -

PAGE # 4 OF 4 PAGES
PERMIT NO: 181413-c

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY -
ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

GENERAL INFORMATION
Property Owner: Elva F. Lester Wells Jr.
Address: Rt 3 Box 234
City: Millsboro State: DE Zip: 19966
Telephone Number: 238-7814
Application Preparer/WC: Michael G. Daisey
Lic. #: 134994 Date of Application: 9-13-07
Estimated Construction Date: 9-25-01

Purpose: Test or Permanent

- Use: Domestic
 Industrial
 Public
 Miscellaneous Public
 Temporary For Well Construction
 Other (Specify): _____
- Irrigation
 Agricultural
 Heat Pump Recharge
 Closed Loop Heat Pump
 Heat Pump Supply

Is this a replacement well? NO YES reason: _____
Is public water available? NO YES (Specify): _____
On public sewage: YES OR Septic system permit # 180704-S

PROPOSED WELL CONSTRUCTION

Approximate total depth:	Inner Casing	Outer Casing
Casing top (above grade):		<u>65'</u>
Casing bottom (below grade):		<u>18"</u>
Casing diameter:		<u>55'</u>
Casing material:		<u>PVC</u>
Tentative screen setting:	<u>55'</u> (top) To:	<u>65'</u>
Tentative screen length:	<u>10'</u> Material: <u>PVC</u>	
Type of Grout:	<u>Bentonite Clay</u> From: <u>0'</u> (top) To: <u>50'</u>	
Gravel pack:	<u>None</u> From: <u>51'</u> To: <u>65'</u>	
Desired capacity:	<u>20</u> (GPM) Est. Max. Daily Use: <u>800</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 - Application Preparer/Water Well Contractor: Michael G. Daisey Date: 9-13-01

~~Signature~~ Michael G. Daisey 9-13-01
RECEIVED

Please include this copy of the permit and the well tag in the water well construction file.
YES NO

WATER SUPPLY
RECEIVED
SEP 23 2001

Received By: _____
Amount: 1 SEP 24 2001

Date: WATER SUPPLY

LOCATION MAP - ROAD MAP

County: New Castle Kent Sussex
Subdivision: _____

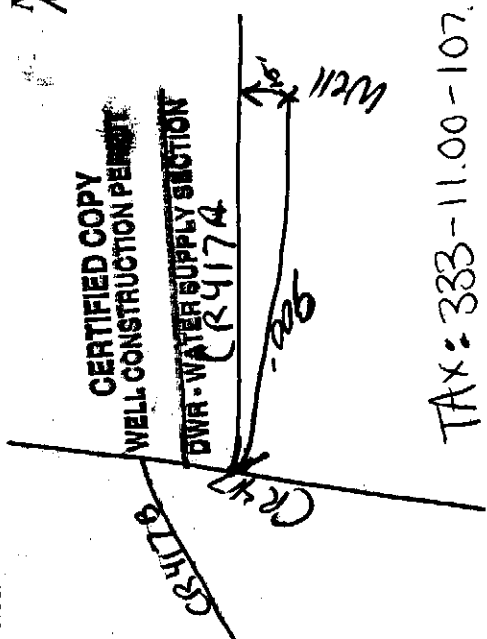
Lot no: _____

Tax Map #: 333

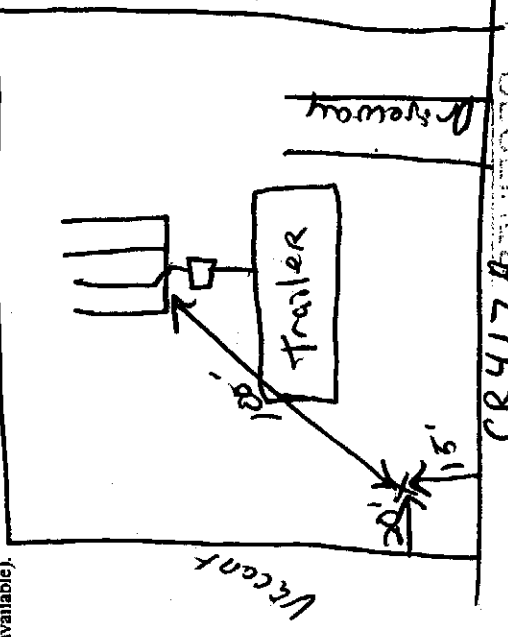
Name of nearest town: Gamburg

Distance to nearest town: 0.5 mile

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).



DO NOT WRITE BELOW THIS LINE

DRBC: YES NO

X-Coord: 205206

Formation: _____

Acquifer: 25-01 600 7532

Y-Coord: 53793.7

DOT # DOMESTIC: 35.00

DOT # DOMESTIC: 35.00

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WELL COMPLETION REPORT

PAGE _____ OF _____ PAGES

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Permit # of completed well: 181413 Local ID: _____
Tax Map/Parcel #: 3-33-11-107
Property Owner: Elysa & Lester Wells Sr.
Water Well Contractor: Daisey's Well Drilling Lic #: 13
Well Driller in Charge during Construction: Michael G. Daisey

WELL CONSTRUCTION METHOD

- Augered
- Driven
- Mud Rotary
- Other (Specify): _____
- Bored
- Jetted
- Reverse
- Cable Tool
- Air Rotary
- Washed

Total Depth of Excavation: 80'
Construction Date: 10-4-01

CASING INSTALLATION:

(1)	(2)	(3)	(4)	(5)	(6)
CASING TOP:					OUTER CASING
CASING BOTTOM:					
CASING DIAMETER:					
CASING MATERIAL:					

SCREEN INSTALLATION

SCREEN TOP:	<u>74'</u>				
SCREEN BOTTOM:	<u>80'</u>				
SCREEN DIAMETER:	<u>2"</u>				
SCREEN MATERIAL:	<u>PVC</u>				

Gravel Pack From: _____ ft. To: _____ ft.
 Grout Type: Cement Bentonite Clay
 Other: _____ From: 0 ft. To: 70' ft.
 Type of Non-Grout backfill of Well Annulus: Natural
 From: 71 To: 80' Below OR Above Ground Surface
 Static Water Level: 6 ft. Below OR Above Ground Surface
 On (date): 10-4-01
 Pumping Water Level: 11 ft. On (date): 10-4-01 GPM
 After: 1 hrs. Pumping at: 25 GPM
 Was a Geophysical Log Taken? YES NO

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: _____

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:

RECEIVED
 NOV 05 2001
WATER SUPPLY
 DIVISION - SUBMITTED IS
 I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT.
Michael G. Daisey
 Signature - Well Driller in Charge of Well Construction
134994 License # 10-4-01 Date

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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

PERMIT#	LOCAL ID#	PROPERTY OWNER	WELL CONTRACTOR	DESCRIPTION	TOP OF STRATA	LIC#	BOTTOM OF STRATA
181413		Elva & Lester Wells SR.	Daisey's Well Drilling			13 & 994	
				Top Soil	0'		3'
				Sand	3'		26'
				Sand & Clay	26'		54'
				Sand	54'		67'
				Sand & Gravel	67'		80'

OTHER COMMENTS:

RECEIVED
 NOV 05 2001
 WATER SUPPLY

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Signature of Well Driller In Charge
 Michael G. Daisey

License#
 13 & 994

Date
 10-4-01