

MAIL TO:

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

PHONE: 302-739-3665
FAX: 302-739-7764

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

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

APPLICATION FOR A PERMIT TO CONSTRUCT A WELL

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY

Property Owner: MAIT ROE
Address: RD # 6 Box 372 State: DE Zip: 19947
City: Georgetown Telephone Number: 856-7077
Licensed Preparer/WC: Alexander Well Drilling, Inc.
Lic. #: 4091 Date of Application: 5/2/02

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): _____

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

Is public water available? NO YES (Utility): _____

On public sewage? YES OR Septic system permit #: 1842123

PROPOSED WELL CONSTRUCTION:

| Approximate total depth: | Inner Casing | | Outer Casing | |
|------------------------------|--------------|-----|--------------|-----|
| | ft. | in. | ft. | in. |
| Casing top (above grade): | 60 | 12" | | |
| Casing bottom (below grade): | 50' | | | |
| Casing diameter: | 4" | | | |
| Casing material: | PVC | | | |

Proposed screen setting: 20' ^{top} ft. TO: 60' _{bottom} ft. Material: PVC

Type of Grout: Benitec From: 0' ^{top} To: 30' _{bottom}

Gravel pack: NO YES From: 50' ^{top} To: 60' _{bottom}

Maximum capacity: 17 (GPM) Max. Daily Withdrawal: 200 (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: [Signature] Date: 5/2/02
Signature: [Signature] Date: 05/1/02
Signature: [Signature] Date: _____
Signature: [Signature] Date: _____

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

YES NO

Received By: [Signature]
Amount: 5-3-00
Date: 5-3-02
Modified Grid: 150-050
Drainage Basin: 313
Quad: Whiteyville

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

X-Coord: 205105
Y-Coord: 51462.7
MISC. DOT #: 57,001

- OFFICIAL USE ONLY -

PAGE # 4 OF 4 PAGES
PERMIT NO: 185885-W

LOCATION MAP - ROAD MAP

County: New Castle Kent Sussex

Subdivision: NONE

Lot #: NONE ADC Map Grid: _____

Tax Map/Parcel #: 3-33-15-37 SITEC

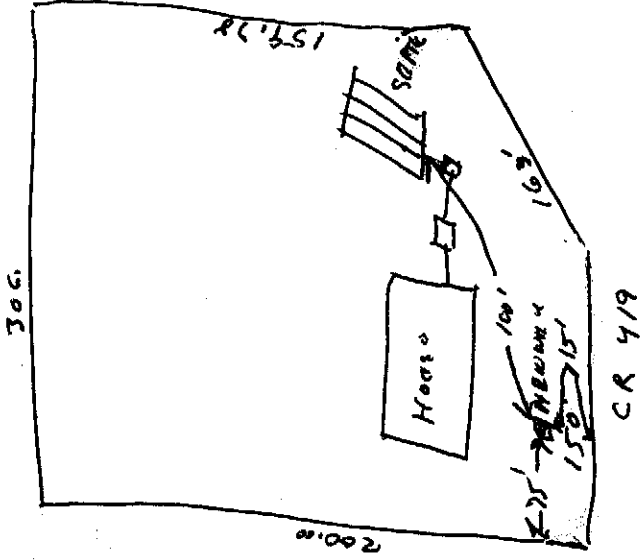
Name of Nearest Town: Georgetown

Distance to Nearest Town: 3 miles

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).



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WELL COMPLETION REPORT

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

- OFFICIAL USE ONLY -

PAGE _____ OF _____ PAGES

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Permit # of completed well: 185886 Local ID: _____
Tax Map/Parcel #: 7-37-15-33
Property Owner: MATT ROE
Water Well Contractor: ALCANDAISI & BROS. INC. WC Lic #: Y051
Well Driller in Charge during Construction: A CANARY

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 60'
Construction Date: 5/20/02

CASING INSTALLATION:

| | (1) | (2) | (3) | (4) | (5) | (6) |
|------------------|------------|-----|-----|-----|-----|-----|
| CASING TOP: | <u>12'</u> | | | | | |
| CASING BOTTOM: | <u>50'</u> | | | | | |
| CASING DIAMETER: | <u>4"</u> | | | | | |
| CASING MATERIAL: | <u>PVC</u> | | | | | |

SCREEN INSTALLATION

SCREEN TOP: 50'
SCREEN BOTTOM: 60'
SCREEN DIAMETER: 4"
SCREEN MATERIAL: PVC

Gravel Pack From: 50' ft. To: 60' ft.
Grout Type: Cement Bentonite Clay
 Other: _____ From: _____ ft. To: _____ ft.
Type of Non-Grout backfill of Well Annulus: CATTINGS
From: 20' To: 50'
Static Water Level: 8' ft Below OR Above Ground Surface
On (date): 5/20/02
Pumping Water Level: 10' ft. On (date): 5/20/02
After: _____ hrs. Pumping at: 50 GPM
Was a Geophysical Log Taken? YES NO

WELL HEAD COMPLETION:

Type: Fltless 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: GOULD
Rated Capacity (GPM): 10
Pump Intake Setting: 40' Ft. Below Ground Surface: 30'
Pump Installed By: A CANARY On (date): 5/22/02

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:

RECEIVED
1 JUN 12 2002
WATER SUPPLY

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

Signature: [Signature] in Charge of Well Construction
4092 License # 610602 Date

DATE:

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CONSTRUCTION DATE

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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 |
|---------|-----------|----------------|-----------------|---------------------------------------|---------------|------|------------------|
| 185885 | | MATT ROE | ALAN DAISY | | | 4091 | |
| | | | | 20 WHITE SAND | 0 | | 20 |
| | | | | 30 GRAY SAND & LIGHT GRAVEL | 20 | | 30 |
| | | | | 40 WHITE COARSE GRAVEL | 30 | | 40 |
| | | | | 50 WHITE COARSE GRAVEL & GREEN SPARKS | 40 | | 50 |
| | | | | 60 WHITE COARSE GRAVEL & GREEN SPARKS | 50 | | 60 |
| | | | | | | | |
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OTHER COMMENTS:

RECEIVED
1 JUN 12 2002
WATER SUPPLY

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

Signature of Well Driller in Charge: *[Signature]* License#: 4092 Date: 6/10/02