

MAIL TO:

WATER SUPPLY BRANCH
DIVISION OF WATER RESOURCES
P.O. BOX 1401
DOVER, DELAWARE 19903

2921-09

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

APPLICATION FOR A PERMIT TO DRILL A WELL

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED. IF APPROVED, THIS APPLICATION CONSTITUTES A WELL PERMIT. A COMPLETION REPORT MUST BE FILED WITH THE WATER SUPPLY BRANCH WITHIN THIRTY (30) DAYS AFTER COMPLETION OF THIS WELL. FAILURE TO DO SO MAY RESULT IN LICENSE SUSPENSION.

PLEASE PRINT OR TYPE

GENERAL INFORMATION

Owner BETTY H. KEITERMAN
Address PO BOX 193A
City FRANKFORD State DELA Zip 19743
Telephone Number 338-2254
Well Contractor PENGELISH Lic. No. 222
Pump Installer 81187A Lic. No.
Date of Application ASAD
Estimated Construction Date

Purpose: Test Permanent
Use: Domestic Agricultural
 Commercial Industrial
 Irrigation Public
 Observation Dewatering
 Heat Pump Recharge Heat Pump Supply
 Other _____ (Specify)

Is public water service available? Yes No
Is this a replacement well? Yes No
Replacement reason _____
Abandonment date for old well _____
Type of abandonment _____
Septic system permit no. 1391-935

DRILLING METHOD

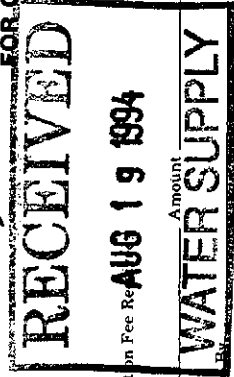
- Augered
- Bored
- Driven
- Mud Rotary
- Other (Specify) _____
- Cable Tool
- Jetted
- Air Rotary
- Reverse
- Washed

PROPOSED WELL CONSTRUCTION

Approximate total depth 60
Inner casing Outer casing
Casing top (above grade) 0
Casing bottom (below grade) 50
Casing diameter 2 1/2"
Casing material PVC
Tentative screen setting 10 (Top) to 50
Tentative screen length 40 Material PVC
Type of Grout Self From 50 (Top) to 0
Gravel pack Yes No
Gravel pack interval from 50 to 60
Desired capacity _____ to _____ GPM.
Maximum daily use 400 GPD.

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

Christa Lyell Applicant
Representative

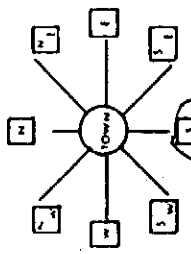


Application Fee 0 Received By _____
Date AUG 19 1994 Amount _____
Water Supply

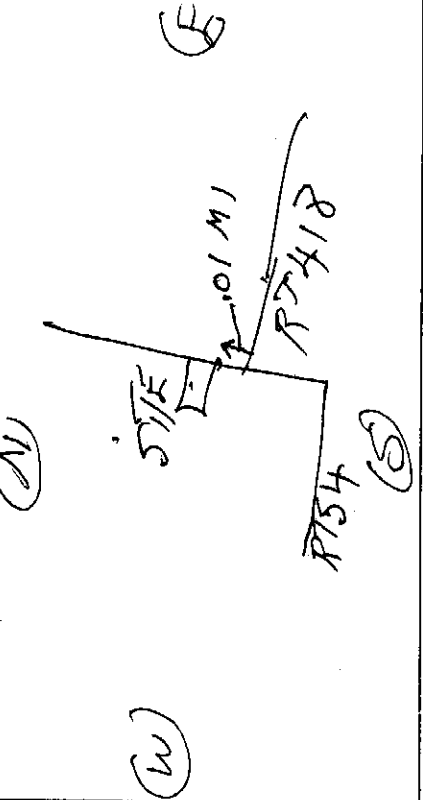
LOCATION MAP - ROAD MAP

Project County 24 SSEX
Subdivision _____
Lot no. _____
Name of nearest town MILLSBORO
Distance to nearest town 6MI

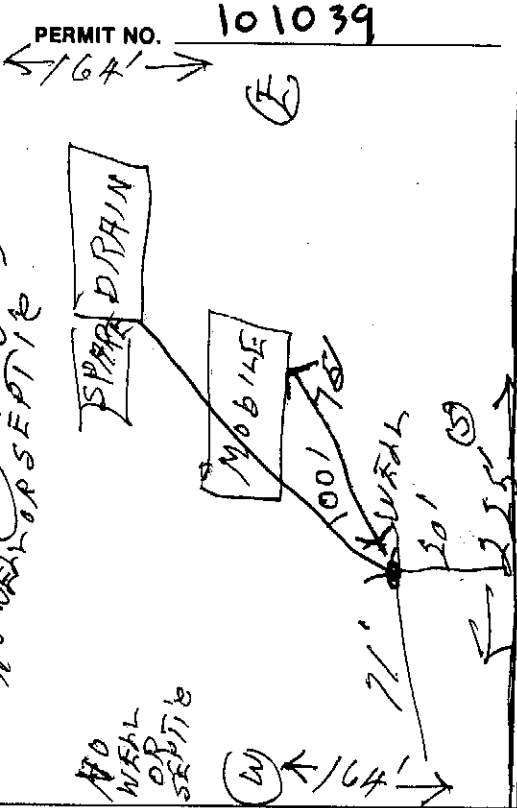
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO ROADS AND GIVE DISTANCE FROM WELL SITE TO NEAREST ROAD JUNCTION.



SITE PLAN - INCLUDE DISTANCES FROM WELL TO HOUSE, PROPERTY LINES, NEAREST ROAD AND ALL NEARBY SEPTIC SYSTEMS (INCLUDE SUITABLE PLOT PLAN IF AVAILABLE).



FOR OFFICIAL USE ONLY

Modified Grid 150-052 Formation _____
Drainage Basin 313 Local ID _____
Aquifer _____ Tax ID 3-33-12-6

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE

PURSUANT TO PROVISIONS OF 7 DELAWARE CODE, CHAPTER 60, PERMISSION IS HEREBY GRANTED TO CONSTRUCT AND USE A WELL AS DESCRIBED ABOVE AND SUBJECT TO THOSE CONDITIONS ATTACHED. ALL CURRENT REGULATIONS GOVERNING WELL CONSTRUCTION AND WATER RESOURCE USE MUST BE FOLLOWED.

Signed: Mmm T M-d-94

Permit Expires 2-19-95 Report Filed 8-19-94 Permit No. 101039

MAIL TO:
 WATER SUPPLY BRANCH
 DIVISION OF ENVIRONMENTAL CONTROL
 P.O. BOX 1401
 DOVER, DELAWARE 19803

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. 101039 LOCAL ID _____
 OWNER BETTY HE THERMAN
 CONSTRUCTION DATE 10/31/94 PERMANENT
 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 _____
 ABANDONMENT METHOD _____

DRILLING METHOD
 AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
 TOTAL DEPTH DRILLED 65

CASING SEQUENCE

INNER	OUTER
55	
65	
8"	
PVC	

SCREEN SEQUENCE

INNER	OUTER
55	
65	
8"	
PVC	

SCREEN TOP _____
 SCREEN BOTTOM _____
 SCREEN DIAMETER _____
 SCREEN MATERIAL _____

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 20 FEET
 NON-GROUT BACKFILL OF WELL ANNULUS
 TYPE SAND FROM 20 TO 55 FEET
 GRAVEL PACK TYPE MORPEX #02
 FROM 55 TO 65 FEET
 STATIC WATER LEVEL: DATE 10/31/94
2 FT. (Below, above) GROUND SURFACE
 PUMPING WATER LEVEL: 2 FT. BELOW GRADE
 AFTER 2 HOURS AT 20 GPM.

WELL HEAD COMPLETION:
 TYPE: PITLESS ADAPTOR JFE
 OTHER _____
8 INCHES ABOVE GRADE.

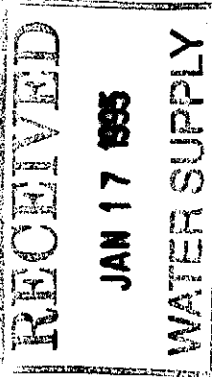
TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE Goolds
 RATED CAPACITY (GPM) _____
 PUMP INTAKE SETTING 2 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 120' FROM COMPLETED WELL.
 IS COMPLETED WELL LOCATED AS SHOWN
 ON APPLICATION FORM?
 IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.



DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
SAND CLAY	0	5
WHITE SAND	5	55
TAN SAND	55	65
GRAVEL		

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
 PAGE 1 OF ___ PAGES
 COMPANY NAME _____
 SIGNATURE OF DRILLER IN CHARGE: Betty Therman DATE 10/31/94