

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

~~R-22-11~~  
 R-12-03

*[Handwritten signature]*

PLEASE PRINT

PERMIT NO. 60511 LOCAL ID 41

OWNER Beach Development Corp.

CONSTRUCTION DATE 4-30 1985

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  
 MUD ROTARY  REVERSE  WASHED  
 OTHER (Specify) \_\_\_\_\_

TOTAL DEPTH DRILLED 14

CASING SEQUENCE

1st	2nd	3rd	4th
72	164		
174	175		
6"	4"		
Steel	Steel		

SCREEN SEQUENCE

1st	2nd	3rd	4th
175			
190			
4			
S. Steel			

WRITTEN APPROVAL FOR SCREENING/  
 GRAVEL PACKING MORE THAN ONE AQU-  
 IFER MUST BE OBTAINED FROM DNREC.

GROUT TYPE: CEMENT  BENTONITE CLAY

OTHER: \_\_\_\_\_

FROM -5 TO 175 FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_ FEET

GRAVEL PACK: TYPE \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_ FEET

STATIC WATER LEVEL: DATE 5-3-85

4.2 FT. (Below, above) GROUND SURFACE

PUMPING WATER LEVEL: 24 FT. BELOW GRADE

AFTER 8 HOURS AT 102 GPM.

WELL HEAD COMPLETION:

TYPE: PITLESS ADAPTOR

OTHER  \_\_\_\_\_

24 INCHES ABOVE GRADE.

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE Goolds

RATED CAPACITY (GPM) 150

PUMP INTAKE SETTING 105 FT. BELOW GRADE

THE COMPLETED WELL IS?

YES NO  
 A. AT LEAST 5' FROM ANY OVERHANG    
 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 \_\_\_\_\_ FROM COMPLETED WELL. county sewer  
 IS COMPLETED WELL LOCATED AS SHOWN  
 ON APPLICATION FORM?    
 IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS.

RECEIVED  
 MAY 28 1985  
 WATER SUPPLY

R-12-03

DRILLERS LOG DESCRIPTION TOP OF STRATA BOTTOM OF STRATA

fill	0	5
gray sand	5	19
clays	19	46
white sand	46	101
tan clay	101	131
brn sand	131	152
tan clay	152	173
gray + white sand	173	198
fine sands + clay	198	224
brn + white sand	224	240
tan clay	240	259
tan clay	259	262

SUPPLEMENTAL DRILLERS LOG ATTACHED YES  NO

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COMPANY NAME Shannon Artesian Well Co Inc

SIGNATURE OF DRILLER IN CHARGE: \_\_\_\_\_ DATE 5-17-85