Appendix A

Nearby Water Well Information (December 2009)

MAIL TO:

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

PHONE: 302-739-3605
FAX: 302-739-7764

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT

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

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

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PAGE _____ OF _____ PAGES

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well:. 198187-W Local ID: MW-5

Tax Map/Parcel #: 0704 34000 61

Property Owner: Thomas Grabowski Sr.

Water Well Contractor: Excelsior Inc. WC Lic #: 4251

Well Driller in Charge during Construction: Randell Weidinger

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 19ft

Construction Date: 1/20/04

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	0ft						N/A
CASING BOTTOM:	4ft						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	4'					
SCREEN BOTTOM:	19'					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 19 ft. To: 2 ft.

Grout Type: ☐ Cement ☒ Bentonite Clay

☐ Other: _____ From: 2 ft. To: 1 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 6 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 1/20/04

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"

☐ Well Pit ☐ Pad Mount

☒ Other - Specify: 12" Manhole w/ Concrete PAD

Well Head Completed: 6 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
FEB 18 2004
WATER SUPPLY

I HEREBY AFFIRM THE INFORMATION ON THIS REPORT IS ACCURATE AND CORRECT.

Randell L Weidinger
Signature - Well Driller in Charge of Well Construction

4251
License #

1-26-04
Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/05 - Rev 7

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 02/02

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

WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION DATE

FORMATION LOG

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 198187-W | LOCAL ID# FW-5

PROPERTY OWNER Thomas Grabowski Sr.

WELL CONTRACTOR Ecklebarger, Inc. | LIC# 4251

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill wood, bricks w/ Brown Sandy Silt	0'	7'
Brown & Gray Clay & Silty Clay w/ Sand & Gravel	7'	19'

OTHER COMMENTS:

RECEIVED
FEB 18 2004
WATER SUPPLY

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

Randall L. Neilson — 4251 — 1-26-04

Signature of Well Driller In Charge | License# | Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 03/24

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

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

STATE OF DELAWARE
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PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well:: 198188W Local ID: RW-6

Tax Map/Parcel #: 07043400060

Property Owner: Mr. Francis Sanna

Water Well Contractor: Eichelberger, Inc. WC Lic #: 4251

Well Driller in Charge during Construction: Randell Neidlinger

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 18'

Construction Date: 1/21/04

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	0'						N/A
CASING BOTTOM:	3'						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	3'					
SCREEN BOTTOM:	18'					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 18' ft. To: 2' ft.

Grout Type: ☐ Cement ☒ Bentonite Clay

☐ Other: _____ From: 2 ft. To: 1 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 6 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 1/21/04

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"

☐ Well Pit ☐ Pad Mount

☒ Other - Specify: 12" Manhole w/ Concrete pad

Well Head Completed: 6 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
FEB 18 2004
WATER SUPPLY

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

Randell P Neidlinger
Signature - Well Driller in Charge of Well Construction

4251
License #

1-26-04
Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - Rev 2

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DOVER, DELAWARE 19901
PHONE: 302-739-3665
FAX: 302-739-2296

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DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

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FORMATION LOG

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PERMIT# 198188-W | LOCAL ID# RW-6

PROPERTY OWNER Ms. Frances Sanna

WELL CONTRACTOR Eschelbergers Inc. | LIC# 4251

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Wood, Glass, Brush, w/ 12" Brown Sandy Silt Soil	0'	10'
Brown & Gray Silty Clay w/ Sand	10'	18'

OTHER COMMENTS:

RECEIVED
FEB 18 2004
WATER SUPPLY

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Randall L Nieblyn — Signature of Well Driller In Charge

4251 — License#

1-26-04 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

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DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901

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

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PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well:. 198150-W Local ID: RW-3

Tax Map/Parcel #: 0704340058

Property Owner: Duane Wagman II

Water Well Contractor: Earl Hoberger Inc. WC Lic #: 4251

Well Driller in Charge during Construction: Randell Meidinger

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 184

Construction Date: 1/22/04

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	0						N/A
CASING BOTTOM:	3'						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	3'					
SCREEN BOTTOM:	18'					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 18 ft. To: 2 ft.

Grout Type: ☐ Cement ☒ Bentonite Clay

☐ Other : _____ From: 2 ft. To: 1 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 6 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 1/22/04

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☒ Other - Specify: 12" Manhole w/concrete pad

Well Head Completed: 6" 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
FEB 18 2004
WATER SUPPLY

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

Randell L Meidinger
Signature - Well Driller in Charge of Well Construction

4251
License #

1-26-04
Date

White - DNREC • Canary - Contractor • Pink - Owner

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DOVER, DELAWARE 19901
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FORMATION LOG

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 198150-W | LOCAL ID# RW-3

PROPERTY OWNER Duane Waymon II

WELL CONTRACTOR Edelbergs, Inc. | LIC# 4251

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill, Brick, wood & Brown Sandy Silt	0'	10'
Brown & Gray Silty Clay	10'	18'

OTHER COMMENTS:

RECEIVED
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WATER SUPPLY

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

Randall L. Neidhardt — Signature of Well Driller In Charge

4251 — License#

1-26-04 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 07/24

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WELL COMPLETION REPORT

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PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well:. 198070-W Local ID: PW-4

Tax Map/Parcel #: 070434 0061

Property Owner: Thomas Grabowski Sr.

Water Well Contractor: Eichelberger, Inc. WC Lic #: 4251

Well Driller in Charge during Construction: Randall Neidlinger

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 20+

Construction Date: 1/20/04

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	0'						N/A
CASING BOTTOM:	5'						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	5'					
SCREEN BOTTOM:	20'					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 20 ft. To: 3 ft.

Grout Type: ☐ Cement ☒ Bentonite Clay

☐ Other : _____ From: 3 ft. To: 1 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 7 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 1/20/04

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"

☐ Well Pit ☐ Pad Mount

☒ Other - Specify: 12" Manhole w/concrete pad

Well Head Completed: 6 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
FEB 18 2004
WATER SUPPLY

I HEREBY AFFIRM THE INFORMATION SUBMITTED IS ACCURATE AND CORRECT.

Randall L. Neidlinger
Signature - Well Driller in Charge of Well Construction

4251
License #

1/26/04
Date

White - DNREC • Canary - Contractor • Pink - Owner

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89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-3665
FAX: 302-739-2296

STATE OF DELAWARE
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FORMATION LOG

PAGE 1 OF 1 PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 198070 - W | LOCAL ID# RW-4

PROPERTY OWNER Thomas Grabowski Sr.

WELL CONTRACTOR Eschelbergers Inc. | LIC# 4251

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill Wood, Boulders & Brown Sandy Silt	0'	7'
Brown & Gray Silty Clay w/ sand + gravel	7'	20'

OTHER COMMENTS:

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WATER SUPPLY

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

Randall L. Meadows — Signature of Well Driller In Charge

4251 — License#

1-26-04 — Date

White - DNREC • Canary - Contractor • Pink - Owner

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PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit # of completed well:: 197622-W Local ID: RW-2

Tax Map/Parcel #: 0704340058

Property Owner: Duane Wayman II

Water Well Contractor: Eckelberger, Inc WC Lic #: 425-1

Well Driller in Charge during Construction: Randell Neidlinger

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 18 Ft

Construction Date: 1/22/04

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	@ grade						n/a
CASING BOTTOM:	3						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	3'					
SCREEN BOTTOM:	18'					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 18 ft. To: 2 ft.

Grout Type: ☐ Cement ☒ Bentonite Clay

☐ Other : _____ From: 2 ft. To: 1 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 6 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 1/22/04

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"

☐ Well Pit ☐ Pad Mount

☒ Other - Specify: 12" Manhole w/ concrete PAD

Well Head Completed: 6 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
FEB 18 2004
WATER SUPPLY

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

Randell L. Neidlinger

Signature - Well Driller in Charge of Well Construction

425-1 License #

1-26-04 Date

White - DNREC • Canary - Contractor • Pink - Owner

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FORMATION LOG

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PERMIT# 197622-W | LOCAL ID# RW-2

PROPERTY OWNER Duane Wayman II

WELL CONTRACTOR Eichelbergers, Inc. | LIC# 4251

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill, Brick, wood, & Brown Sandy Silt	0'	10'
Brown & Gray Silty Clay	10'	18'

OTHER COMMENTS:

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FEB 18 2004
WATER SUPPLY

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Randall L Neidhiser — Signature of Well Driller In Charge

4251 — License#

1-26-04 — Date

White - DNREC • Canary - Contractor • Pink - Owner

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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 # 1 OF 4 PAGES

PERMIT NO: 18210-W

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY -

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

GENERAL INFORMATION

Property Owner: Lisa B. Goodman; Drewry Nash Fennell, Esq. Owners

Address: 2325 Falls Lane

City: Wilmington State: DE Zip: 19808

Telephone Number: 571-6683

Application Preparer/WC: WALTON Corp.

Lic. #: 52 Date of Application: 11-26-01

Estimated Construction Date: ASAP

Purpose: ☐ Test or ☒ Permanent

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

Is this a replacement well? ☒ NO ☐ YES reason:

Is public water available? ☒ NO ☐ YES (Specify):

On public sewage: ☐ YES OR Septic system permit #: Unknown

PROPOSED WELL CONSTRUCTION

	Inner Casing	Outer Casing
Approximate total depth:	260'	
Casing top (above grade):	+1	
Casing bottom (below grade):	-60	
Casing diameter:	6"	
Casing material:	STL	

Tentative screen setting: — (top) To: —

Tentative screen length: — Material: —

Type of Grout: Cement Grout From: -3 (top) To: -60

Gravel pack: ☒ NO ☐ YES From: To:

Desired capacity: 60 (GPM) Est. Max. Daily Use: 1000 (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 — Date: 11-26-01

Signature - Property Owner — Date: 11/15/01

Please release the contractor's copy of the permit and the well tag to the water well contractor.

☒ YES ☐ NO

LOCATION MAP - ROAD MAP

County: ☒ New Castle ☐ Kent ☐ Sussex

Subdivision: NONE

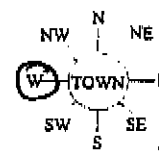
Lot no:

Tax Map#: 08-033.00-020

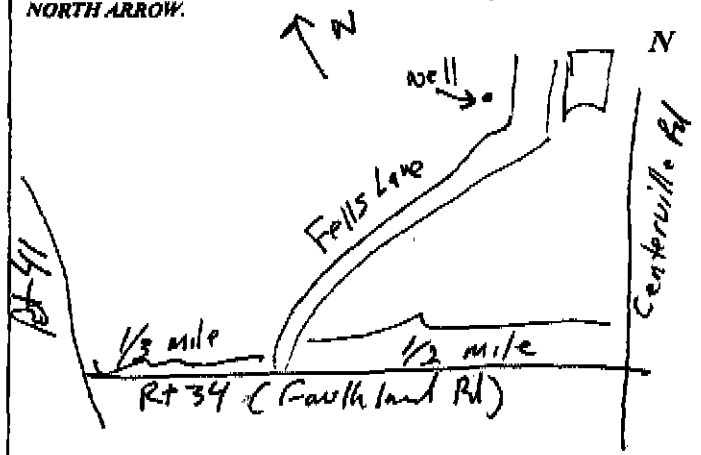
Name of nearest town: Wilmington

Distance to nearest town: 5

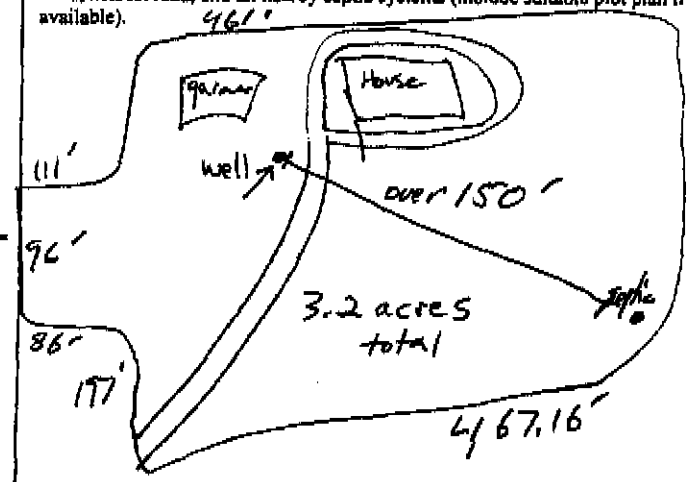
DIRECTION OF WELL FROM TOWN (CIRCLE DIRECTION)



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).



Permit Number: 18210-W

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RECEIVED
Received By:
Amount: NOV 29 2001
Date:
WATER SUPPLY

Modified Grid: 0810-3C0

Drainage Basin: 103

Quad: Newark E

DRBC: ☒ YES ☐ NO

Formation: Potomac

Aquifer:

X- Coord: 180889

Y- Coord: 194059

DOT #:

White - Water Supply • Canary - Work • Pink - Owner • Goldenrod - Contractor

Doc No. 40-08/85/05/01-EC 2

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 12/24

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PHONE: 302-739-3665
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STATE OF DELAWARE
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WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION. A WELL FORMATION LOG MUST BE INCLUDED WITH THIS REPORT.

WELL COMPLETION REPORT

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PAGE 1 OF 2 PAGES

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

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Permit # of completed well:. 182710 Local ID: _____

Tax Map/Parcel #: 08-033.00-020

Property Owner: LISA B. GOODMAN

Water Well Contractor: WALTON CORP. WC Lic #: 52

Well Driller in Charge during Construction: MAX R. WALTON

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 500'

Construction Date: 01-15-02

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+1						
CASING BOTTOM:	-120'						
CASING DIAMETER:	6"						
CASING MATERIAL:	STEEL						

SCREEN INSTALLATION

SCREEN TOP:	N/A					
SCREEN BOTTOM:						
SCREEN DIAMETER:						
SCREEN MATERIAL:						

Gravel Pack From: _____ ft. To: _____ ft.

Grout Type: ☒ Cement ☐ Bentonite Clay

☐ Other: _____ From: 0 ft. To: +120 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 21 ft. ☒ Below OR ☐ Above Ground Surface

On (date): 12-15-02

Pumping Water Level: 400 ft. On (date): 1-15-02

After: 6 hrs. Pumping at: 3 GPM

Was a Geophysical Log Taken? ☐ YES ☒ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☒ Other - Specify: well cap.

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: _____

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JAN 18 2002
WATER SUPPLY

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

Max R. Walton
Signature - Well Driller in Charge of Well Construction

836 License #

1-16-02 Date

White - DNREC Canary - Contractor

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FORMATION LOG

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 182710 | LOCAL ID#

PROPERTY OWNER Lisa B. Goodman

WELL CONTRACTOR Walton Corporation | LIC# 52

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Brown Silt	0	40'
Decomposed Rock w/some Fractures	40'	100'
Hard Gray Rock	100'	500'

OTHER COMMENTS:

RECEIVED
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WATER SUPPLY

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

Mark R. Walton — Signature of Well Driller In Charge
836 — License#
1-16-02 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

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Permit # of completed well:: 180214-W Local ID: WP-105

Tax Map/Parcel #: 07-047.30-108

Property Owner: Dupont-Cargo Remediation Group

Water Well Contractor: William Cargo WC Lic #: 52

Well Driller in Charge during Construction: Daniel Taylor

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 16.0

Construction Date: 9-22-01

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+2.5						
CASING BOTTOM:	5.0						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	5.0					
SCREEN BOTTOM:	16.0					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 1.5.0 ft. To: 3.0 ft.

Grout Type: ☐ Cement ☑ Bentonite Clay

☐ Other : _____ From: 3.0 ft. To: 0.0 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 10.0 ft. ☑ Below OR ☐ Above Ground Surface

On (date): 9-22-01

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☑ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☐ Other - Specify: Aco Cover

Well Head Completed: 30 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: well set to Grade

RECEIVED
OCT 22 2001
WATER SUPPLY

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

Signature - Well Driller in Charge of Well Construction

1001 — License #

9-20-01 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - EC 7

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Permit # of completed well:: 180213-W Local ID: EW-1
Tax Map/Parcel #: 07-047.30-108
Property Owner: Dupont Camp Ramada Inn Group
Water Well Contractor: William Cox WC Lic #: 52
Well Driller in Charge during Construction: Daniel Taylor

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 150
Construction Date: 8-22-01

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+2.5'						
CASING BOTTOM:	50						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	50					
SCREEN BOTTOM:	150					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 150 ft. To: 40 ft.
Grout Type: ☐ Cement ☑ Bentonite Clay
☐ Other : _____ From: 40 ft. To: 0.0 ft.
Type of Non-Grout backfill of Well Annulus: _____
From: _____ To: _____
Static Water Level: 9.0 ft. ☑ Below OR ☐ Above Ground Surface
On (date): 8-22-01
Pumping Water Level: _____ ft. On (date): _____
After: _____ hrs. Pumping at: _____ GPM
Was a Geophysical Log Taken? ☐ YES ☑ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☐ Other - Specify: No cover
Well Head Completed: 20 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: well set in Gravel

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OCT 22 2001
WATER SUPPLY

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

Signature - Well Driller in Charge of Well Construction

1991 9-20-01
License # Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - EC 7

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Permit # of completed well:: 180212-W Local ID: EP103

Tax Map/Parcel #: 07-04 7.30-108

Property Owner: Pygon Corp Remediation Group

Water Well Contractor: Walton Corp WC Lic #: 52

Well Driller in Charge during Construction: Daniel Taylor

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 15'0

Construction Date: 8-21-01

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+2.5'						
CASING BOTTOM:	5'0						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	5'0					
SCREEN BOTTOM:	15'0					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 15'0 ft. To: 3'0 ft.

Grout Type: ☐ Cement ☑ Bentonite Clay

☐ Other : _____ From: 3'0 ft. To: 0'0 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 9.5' ft. ☑ Below OR ☐ Above Ground Surface

On (date): 8-21-01

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☑ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☐ Other - Specify: No cover

Well Head Completed: 30 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: Well set in Gravel

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Signature - Well Driller in Charge of Well Construction

1001 — License #

9-20-01 — Date

White - DNREC • Canary - Contractor • Pink - Owner

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Permit # of completed well:: 1902 11-W Local ID: EW-102

Tax Map/Parcel #: 07-047.30-108

Property Owner: Dupont Cargo Remediation Group

Water Well Contractor: Water Cargo WC Lic #: 52

Well Driller in Charge during Construction: Daniel Taylor

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 65.0

Construction Date: 9-22-01

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+2.5						
CASING BOTTOM:	5.0						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	5.0					
SCREEN BOTTOM:	65.0					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 65.0 ft. To: 3.0 ft.

Grout Type: ☐ Cement ☑ Bentonite Clay

☐ Other : _____ From: 3.0 ft. To: 0.0 ft.

Type of Non-Grout backfill of Well Annulus: _____

From: _____ To: _____

Static Water Level: 10.0 ft. ☑ Below OR ☐ Above Ground Surface

On (date): 9-22-01

Pumping Water Level: _____ ft. On (date): _____

After: _____ hrs. Pumping at: _____ GPM

Was a Geophysical Log Taken? ☐ YES ☑ NO

WELL HEAD COMPLETION:

Type: ☐ Pitless Adapter ☐ Standard "T"
☐ Well Pit ☐ Pad Mount
☐ Other - Specify: No Cover

Well Head Completed: 30 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: well set in gravel

RECEIVED
OCT 22 2001
WATER SUPPLY

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

Daniel Taylor
Signature - Well Driller in Charge of Well Construction

1001 9-20-01
License # Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - FC 7

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Permit # of completed well:: 180049-W Local ID: WF 101

Tax Map/Parcel #: 07-042.30-108

Property Owner: DuPont Cerro Remediation Group

Water Well Contractor: Walton Corp WC Lic #: 52

Well Driller in Charge during Construction: Daniel Taylor

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 15.0

Construction Date: 8-21-01

CASING INSTALLATION:

	INNER CASING (1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
CASING TOP:	+2.5						
CASING BOTTOM:	5						
CASING DIAMETER:	6"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	5					
SCREEN BOTTOM:	15					
SCREEN DIAMETER:	6"					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 15.0 ft. To: 3.0 ft.

Grout Type: ☐ Cement ☑ Bentonite Clay

☐ Other : From: 3.0 ft. To: 4.0 ft.

Type of Non-Grout backfill of Well Annulus:

From: To:

Static Water Level: 10.0 ft. ☑ Below OR ☐ Above Ground Surface

On (date):

Pumping Water Level: ft. On (date):

After: hrs. Pumping at: GPM

Was a Geophysical Log Taken? ☐ YES ☑ NO

WELL HEAD COMPLETION:

Type:
- ☐ Pitless Adapter
- ☐ Standard "T"
- ☐ Well Pit
- ☐ Pad Mount
- ☑ Other - Specify: No cover

Well Head Completed: 30 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: well out to Gravel

RECEIVED
OCT 22 2001
WATER SUPPLY

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

Signature - Well Driller in Charge of Well Construction

1001 (License #) 9-20-01 (Date)

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - EC 7

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Permit # of completed well:. 176502 Local ID: _____
Tax Map/Parcel #: 8-051.00-001
Property Owner: FIRST STATE ENT. INC.
Water Well Contractor: MWD Co. WC Lic #: 607
Well Driller in Charge during Construction: Joseph A. Borrell

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 55
Construction Date: 6-26-01 to 6-26-01

CASING INSTALLATION:

	(1)	(2)	(3)	(4)	(5)	(6)	OUTER CASING
		INNER CASING					
CASING TOP:	+2'						
CASING BOTTOM:	40						
CASING DIAMETER:	4"						
CASING MATERIAL:	PVC						

SCREEN INSTALLATION

SCREEN TOP:	40					
SCREEN BOTTOM:	55					
SCREEN DIAMETER:	4					
SCREEN MATERIAL:	PVC					

Gravel Pack From: 35 ft. To: 55 ft.
Grout Type: ☐ Cement ☑ Bentonite Clay
☐ Other : _____ From: 3 ft. To: 35 ft.
Type of Non-Grout backfill of Well Annulus: none
From: _____ To: _____
Static Water Level: 9 ft. ☑ Below OR ☐ Above Ground Surface
On (date): 6-27-01
Pumping Water Level: 35 ft. On (date): 6-27-01
After: 2 hrs. Pumping at: 20 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: 24 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: Goulds
Rated Capacity (GPM): 18
Pump Intake Setting: 35 Ft. Below Ground Surface: _____
Pump Installed By: driller On (date): 6-27-01

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
SEP 04 2001
WATER SUPPLY

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

Joseph A. Borrell
Signature - Well Driller in Charge of Well Construction

4056 License # 8-30-01 Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - EC 7

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 20/24

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

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# 176502 | LOCAL ID#

PROPERTY OWNER FIRST STATE ENT. INC.

WELL CONTRACTOR M N D Co. | LIC# 607

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
BRN BLK SAND & FILL	0	5
BRN CLAY	5	15
BRN SAND & GRAVEL	15	25
WHT CLAY N SAND LAYERS.	25	55

OTHER COMMENTS: _____

RECEIVED
SEP 04 2001
WATER SUPPLY

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

Joseph D. Emil — Signature of Well Driller In Charge

4056 — License#

8-30-01 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 21/24

DAVE pager 1888-964-9517

MAIL TO:

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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: 72366-W

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

GENERAL INFORMATION

Property Owner: FIRST STATE ENT, INC.
Address: 702 First State BLVD.
City: Wilmington State: De. Zip: 19804
Telephone Number:
Application Preparer/WC: MWD Co.
Lic. #: 607 Date of Application: 3-13-2000
Estimated Construction Date: 3-30-2000

Purpose: ☐ Test or ☐ Permanent

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

Is this a replacement well? ☒ NO ☐ YES reason:
Is public water available? ☒ NO ☐ YES (Specify):
On public sewage: ☐ YES OR Septic system permit #:

PROPOSED WELL CONSTRUCTION

	Inner Casing	Outer Casing
Approximate total depth:	80	
Casing top (above grade):	+1'	
Casing bottom (below grade):	70'	
Casing diameter:	4"	
Casing material:	pvc	

Tentative screen setting: 70 (top) To: 80
Tentative screen length: 10 Material: pvc
Type of Grout: Bentonite From: 0 (top) To: 65
Gravel pack: ☐ NO ☒ YES From: 65 To: 80
Desired capacity: 30 (GPM) Est. Max. Daily Use: 32,000 (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 — Date: 3-13-2000

Signature - Property Owner — Date: 3-14-2000

Please release the contractor's copy of the permit and the well tag to the water well contractor.
☒ YES ☐ NO

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APR 5 2000
WATER SUPPLY

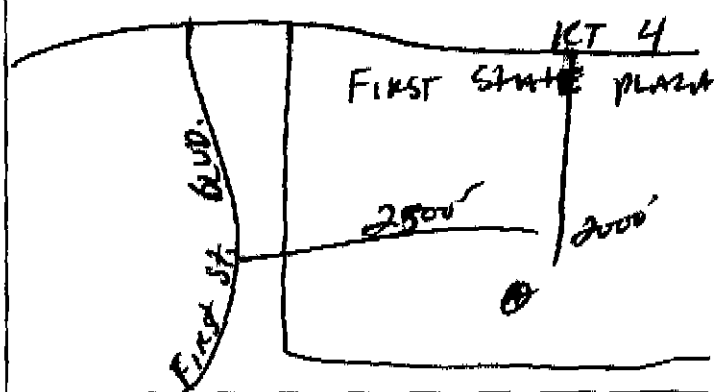
LOCATION MAP - ROAD MAP

County: ☒ New Castle ☐ Kent ☐ Sussex
Subdivision:
Lot no:
Tax Map#: 08-051.00-001
Name of nearest town: NEWPORT
Distance to nearest town: 1 mile.

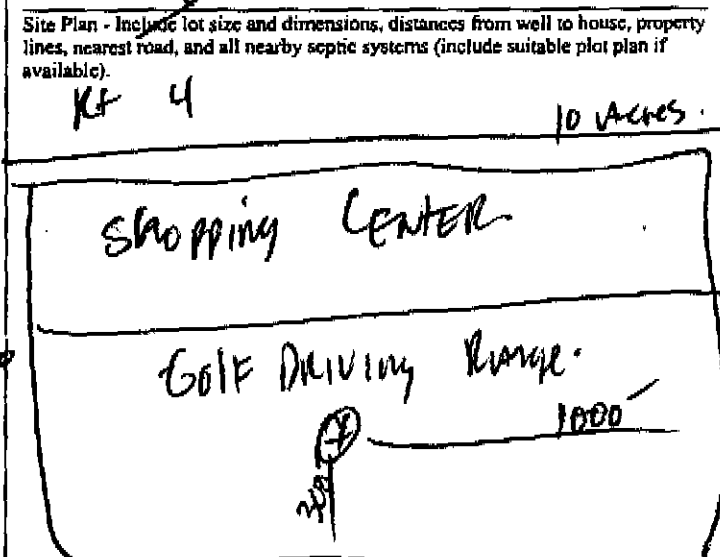
DIRECTION OF WELL FROM TOWN (CIRCLE DIRECTION)

N, NW, NE, W, (TOWN), E, SW, SE

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).



Permit Number: 72366-W

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE

Received By: APR — 5 2000
Amount:
Date: WATER SUPPLY

Modified Grid: CR8-350 DRBC: ☐ YES ☐ NO X- Coord: 181640
Drainage Basin: 105 Formation: Y- Coord: 190112
Quad: Newark E Aquifer: DOT #:

White - Water Supply • Canary - Work • Pink - Owner • Goldenrod - Contractor

Doc No. 40-08/85/05/01-EC 2

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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

WELL COMPLETION REPORT

WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION.

PAGE 1 OF 2 PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT NO. 171366-W LOCAL ID _____

TAX MAP # 08-051.00-001

PROPERTY OWNER First State Ent, Inc.

WELL CONTRACTOR Joseph D. Borrell

LIC# 4056 CONSTRUCTION DATE 9-1-2000

WELL CONSTRUCTION METHOD

- ☐ AUGERED
- ☐ BORED
- ☐ CABLE TOOL
- ☐ DRIVEN
- ☐ JETTED
- ☐ AIR ROTARY
- ☒ MUD ROTARY
- ☐ REVERSE
- ☐ WASHED
- ☐ OTHER _____ (Specify)

TOTAL DEPTH OF EXCAVATION: 45'

CASING INSTALLATION

	INNER CASING(S)						OUTER CASING
CASING TOP	+1'						
CASING BOTTOM	35'						
CASING DIAMETER	4"						
CASING MATERIAL	PVC						

SCREEN INSTALLATION

	INNER CASING(S)					
SCREEN TOP	35					
SCREEN BOTTOM	45					
SCREEN DIAMETER	4"					
SCREEN MATERIAL	PVC					

GRAVEL PACK FROM 30 TO 45 FEET

GROUT TYPE: ☐ CEMENT (c) ☒ BENTONITE CLAY (b)

OTHER (o) _____

FROM 3 (ft.) TO 30 FROM _____ (ft.) TO _____ FEET

NON-GROUT BACKFILL OF WELL ANNULUS

TYPE none FROM _____ TO _____

STATIC WATER LEVEL OF (DATE) 9-2-2000

6' FT. (Below, Above) GROUND SURFACE

PUMPING WATER LEVEL 30 FT. ON 9-3-2000 (DATE)

AFTER 2 HOURS AT 20 GPM.

WAS A GEOPHYSICAL LOG TAKEN? ☐ YES ☒ NO

WELL HEAD COMPLETION:

TYPE: ☒ PITLESS ADAPTER ☐ STANDARD "T"
☐ WELL PIT ☐ PAD MOUNT
☐ OTHER _____

RECEIVED
OCT 12 2000
WATER SUPPLY

12 INCHES ABOVE GRADE

WAS THE WELL TAG ATTACHED? ☑ YES ☐ NO

IF "NO", EXPLAIN _____

TYPE OF PERMANENT PUMP INSTALLED:

PUMP MANUFACTURE Goulds

RATED CAPACITY (GPM) 10

PUMP INTAKE SETTING 30 FT. BELOW GRADE _____

THE LOCATION AND CONSTRUCTION OF THIS WELL IS IN COMPLIANCE WITH ALL PERMIT CONDITIONS AND WITH ALL APPLICABLE WELL CONSTRUCTION REGULATIONS.

☒ YES ☐ NO

If "no," attach a copy of the approved well permit which has the revised location clearly marked.

NOTE: Completed Formation Log must be attached.

COMMENTS: _____

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

Signature of Well Driller in Charge

4056 — License#

10-1-2000 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc No. 40-08/78/01/03 - EC 7

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-3665
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STATE OF DELAWARE
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AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION DATE

FORMATION LOG

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 171366 - W | LOCAL ID#

PROPERTY OWNER First State Ent. Inc.

WELL CONTRACTOR Middletown Well Drilling Co | LIC# 4056

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
FILL	0	8
Brn Silty sandy clay	8	13
Cobbles & Lrw gravel	13	28
Wht Red clay	28	35
Brn Sand	35	45

OTHER COMMENTS:

RECEIVED
OCT 1 9 2009
WATER SUPPLY

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

Signature of Well Driller In Charge | License# 4056 | Date 11-1-2009

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11

11/10/2009 13:33 302-739-7764 WATER RESOURCES PAGE 24/24