MAIL TO:

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

PHONE: 302-739-9944
FAX:302-739-7764

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

APPLICATION FOR A PERMIT TO CONSTRUCT A WELL

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

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

- OFFICIAL USE ONLY -

PAGE # ____ OF ____ PAGES
PERMIT NO. 242434

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE TYPE OR PRINT - USE BLUE OR BLACK INK ONLY

Property Owner: Town of Blades
Address: 20 West Fourth St
City: Blades State: DE Zip: 19973
Telephone Number: 302-629-7366
Licensed Preparer/WC: Uni-Tech Drilling Co Inc
Lic. #: 928 Date of Application: 1-18-13
Estimated Construction Date: February 2013

PURPOSE: ☒ Test ☐ Permanent ☐ Temporary for Well Construction

USE: ☐ Domestic ☐ Industrial ☒ Public ☐ Miscellaneous Public ☐ Other (Specify) ☐ Irrigation ☐ Agricultural ☐ Heat Pump Supply ☐ Heat Pump Recharge ☐ Closed Loop Heat Pump

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

PROPOSED WELL CONSTRUCTION:

	Inner Casing	Outter Casing
Approximate total depth:	100 ft	ft
Casing top (above grade):	2' in	in
Casing bottom (below grade):	70' ft	ft
Casing diameter:	6"	
Casing material:	PVC	

Proposed screen setting: 70 ft. (top) TO: 100 ft. (bottom) Material: PVC
Type of Grout: Bentonite From: 60 (top) To: 65 (bottom)
Gravel pack: ☐ NO ☒ YES From: 65 (top) To: 100 (bottom)
Maximum capacity: 150 (GPM) Max. Daily Withdrawal: ____ (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.

Ex. 4 CBI 1-18-13
Signature - Licensed Preparer/Water Well Contractor Date

Vikki Shellyman 2-11-13
Signature - Property Owner 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

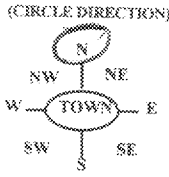
RECEIVED FEB 13 2013 WATER SUPPLY

LOCATION MAP - ROAD MAP

County: ☐ New Castle ☐ Kent ☒ Sussex
Subdivision:
Lot #:
Tax Map/Parcel #:
Name of Nearest Town: Blades
Distance to Nearest Town: 1

DIRECTION OF WELL FROM TOWN (CIRCLE DIRECTION)

N, NW, NE, W, TOWN, E, SW, S, SE



PERMIT #: 242434

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

Received By: Modified Grid: DRBC: ☐ YES ☐ NO X - Coord:
Amount: Drainage Basin: H_2O Utility: Y- Coord:
Date: Quad: Flood Zone/Coastal: DOT #:

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

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