

TRI-OAK FARMS, INC

Glen R. Jones
8268 Snake Road
Bethel, DE 19931
PHONE 302-542-2875



Watermelons, Vegetables, Grains

4/3/24

FAX # 302-739-2296

To: PATTY MURRY
Allocation Water Supply Branch

REF. Application for Well Permit

FROM: Glen R. Jones
TRI-OAK FARMS

Thank you
Glen Jones

**STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL
APPLICATION FOR A WATER ALLOCATION PERMIT**

VIOLATIONS ARE SUBJECT TO PENALTY PROVIDED BY 7 DEL. C. CHAPTER 60

MAIL TO:

OFFICIAL USE ONLY:

ALLOCATIONS - WATER SUPPLY BRANCH
DIV. of WATER - DNREC
89 KINGS HIGHWAY
DOVER, DE 19901
FOR INFORMATION: (302) 739-9945

DNREC ALLOCATION NO. _____
DRBC DOCKET NO. D- _____ - _____ CP
APPLICATION FEE VALIDATION -> _____
RECEIVED BY _____

PLEASE TYPE OR PRINT

1. Owner's Name Glen & Laurie Jones
Address 8268 Snake Rd
City Bethel State DE Zip 19931 Telephone # 302 542 2875
Email Address fricoakfarms@gmail.com
2. Project Name Warrington farm #2
Address Woodland Ferry Rd
City Laurel State DE Zip 19956 Telephone # 302 542 2875
3. Date of Application 3-29-24
4. Name, address, and telephone # of geologist (or Engineer): Ben Wood 410 924 2889
Lifetime wells Denton MD.
5. Attach a map (USGS 7 1/2-minute quadrangle) with accurately and clearly marked locations of all facilities (wells, streams, and pond intakes). Applications for irrigation systems must also show the acreage served by each facility. All applications must show, where appropriate, the locations of service areas, water tanks, interconnections, and property/corporate boundaries.
6. Purpose (check): Public Industrial Process Industrial Cooling
 Irrigation Commercial Contaminant Recovery Other _____
7. Facility information: (attach additional sheets if needed)

A. Facility Local ID	B. Facility Permit No.	C. Maximum Pump Capacity (Gallons Per Minute)	D. Maximum Use (Gallons Per Day)
<u>Warrington Farm #2</u>	<u>not given yet</u>	<u>500</u>	<u>720,000</u>
<u>Warrington Farm #1</u>	<u>under Wayne Givens</u>	<u>950-1000</u>	<u>1,440,000</u>

These next 6 questions are specific to how your system runs for Irrigation purposes.

8. How many inches of water is required per week to meet the needs of your crop?

2.5

9. How many days would you typically spray irrigate in a week to meet the needs of item 8?

6

10. How many hours per day would the spray irrigation run on a typical day?

24

11. How many weeks is irrigation required during a typical growing season?

16

12. Do you require any pre/post-season irrigation to adjust soil moisture prior to planting the crop?

Sometimes

13. If off-peak season irrigation is required, what is the weekly water need and for how many weeks?

1 inch to 1 1/2 inch 6

14. Requested rates (Million Gals): 720,000 Day 21,900,000 Month 142,350,000 Year

Sub-Total _____ System Total _____ (check Sub if systems interconnect)

15. For irrigation projects only: Total tillable acreage: 212 Irrigated acreage: 180

16. What is the estimated consumptive use, as a percentage of the total withdrawal? ~~100%~~ 100%

17. For each well listed in #8 (above), attach Completion Reports and pumping test reports as specified in the Well Permit. If reports not available, attach all information about the wells or intakes.

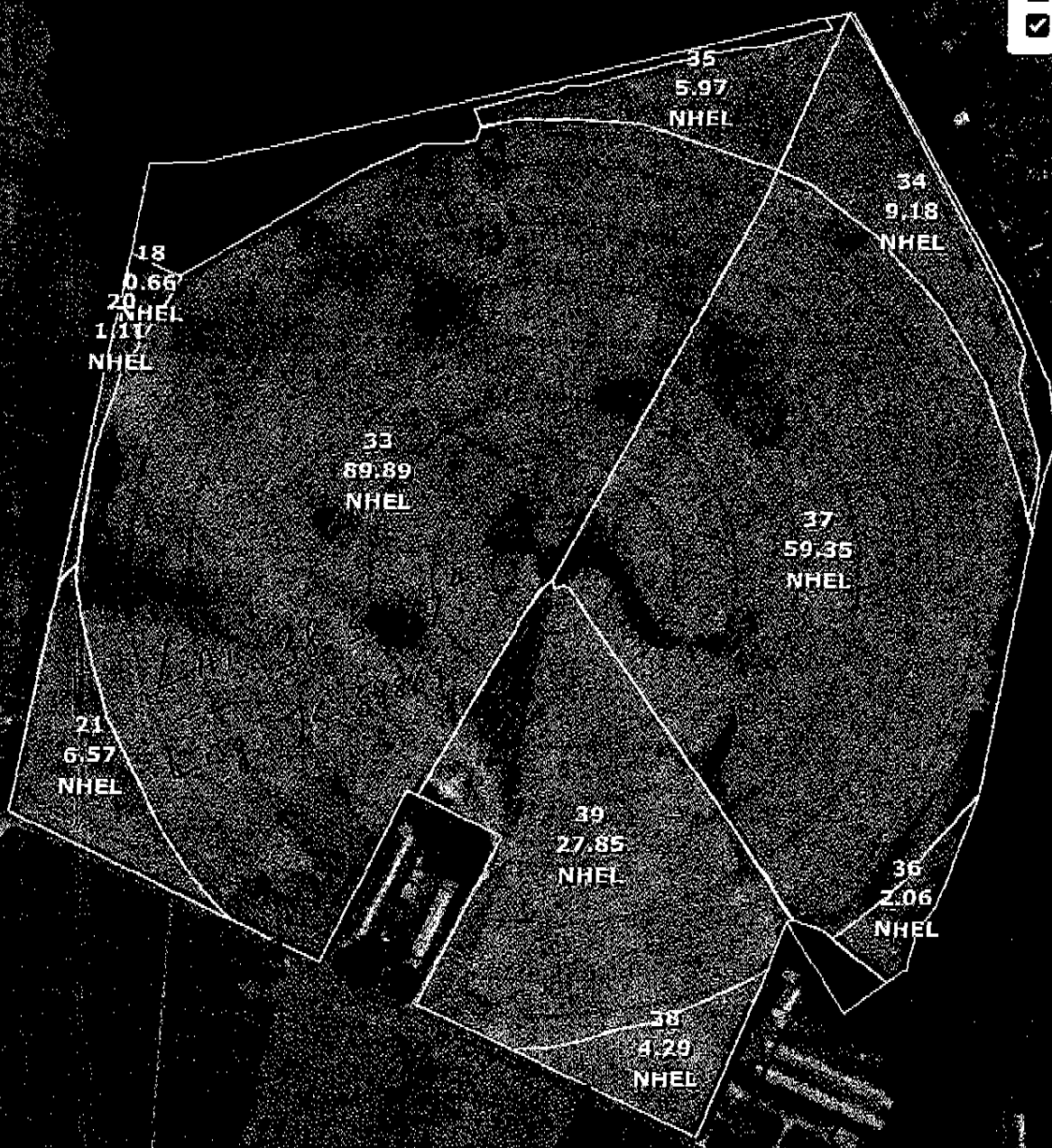
18. Describe all treatment the withdrawn water will receive prior to use.
N/A

19. Are all facilities listed in #7 (above) individually metered? No. Identify those not metered and submit a proposed schedule for meter installation.

Spring / Summer of 2024



- Non-Cropland
- Acres
- HEL



Leaflet | Powered by Esri

Common Land Unit

- Cropland
- Non-cropland
- CRP

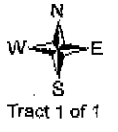
2023 Crop Year

farm 11714
tract 40873

? #5

Wetland Determination Identifiers

- Restricted Use
- Limited Restrictions
- Exempt from Conservation Compliance Provisions



United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership. The map depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) Imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

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

STATE OF DELAWARE
 DEPARTMENT OF NATURAL RESOURCES
 AND ENVIRONMENTAL CONTROL

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.

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

WELL COMPLETION REPORT

-Authorization Number-

6596889

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PLEASE PRINT OR TYPE - USE BLUE OR BLACK INK ONLY

Permit #: 218702 Local ID: IW#1
 Tax Map/Parcel #: 2-32-12.00-0005.00
 Property Owner: King, Leonard
 Water Well Contractor: ACSD WC Lic #: 14
 Well Driller in Charge during Construction: S. Willey

WELL CONSTRUCTION METHOD

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

Total Depth of Excavation: 60'
 Construction Date: 5/3/07

CASING INSTALLATION:

INNER CASING

CASING TOP: 12
 CASING BOTTOM: 23'
 CASING DIAMETER: 8"
 CASING MATERIAL: PVC

OUTER CASING

	(1)	(2)	(3)
CASING TOP:	_____	_____	_____
CASING BOTTOM:	_____	_____	_____
CASING DIAMETER:	_____	_____	_____
CASING MATERIAL:	_____	_____	_____

SCREEN INSTALLATION

SCREEN TOP: 23
 SCREEN BOTTOM: 58'
 SCREEN DIAMETER: 8"
 SCREEN MATERIAL: PVC

SCREEN SLOT SIZE .060/THOUSANDS

GRAVEL PACK SIZE #3

Gravel Pack From: 20 ft. To: 60 ft.
 Grout Type: Cement Bentonite Clay
 Other: _____ From: 0 ft. To: 20 ft.

Type of Non-Grout backfill of Well Annulus: _____
 From: _____ To: _____

Static Water Level: 15 ft. Below OR Above Ground Surface
 On (date): 5/7/07

Pumping Water Level: 39 ft. On (date): 5/7/07
 After: 4 hrs. Pumping at: 234 GPM

Was a Geophysical Log Taken? YES NO

WELL HEAD COMPLETION:

Type: Pitless Adapter Standard "T"
 Well Pit Pad Mount
 Other - Specify: 8" cap

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: _____

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). (If different from original application)

See Permit

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

Signature: [Signature] Well Driller in Charge of Well Construction

License # 991

Date 5/7/07

MAIL TO:

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

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST
BE RETURNED WITHIN 30 DAYS OF
THE DATE OF COMPLETION
<http://www.dnrec.state.de.us/>

FORMATION LOG

- FOR OFFICIAL USE ONLY -

Page ____ of ____

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

ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT #: 218702	TAX MAP #: 2-32-12 UC - 0005.00	LOCAL ID#:
PROPERTY OWNER: King, Leonard		WC LIC #: 14
WELL CONTRACTOR: ACSID		

SOIL DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Topsoil	0	1
Fine Tan Sand	1	11
Med Orange Sand	11	18
Med-Coarse Orange Sand w/ Gravel	18	53
Tan Sandy Clay	53	60

COMMENTS:

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

Signature of Well Driller in Charge of Construction

WD License #

Date

491

5/7/07