

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:

Water Supply Assessment & Protection  
DIV. of WATER - DNREC  
89 KINGS HIGHWAY  
DOVER, DE 19901  
FOR INFORMATION: (302) 739-9948

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

PLEASE TYPE OR PRINT

1. Owner's Name: **Ed Oliver Golf Club** \_\_\_\_\_  
Address **800 N. Dupont Rd** \_\_\_\_\_  
City: **Wilmington** State: **DE** Zip: **19807** Telephone #: **302-571-9041**  
Email Address: **[geisner@troon.com](mailto:geisner@troon.com)** \_\_\_\_\_
2. Project Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_
3. Date of Application: **3/1/2026** \_\_\_\_\_
4. Name, address, and telephone # of geologist (or Engineer): **n/a** \_\_\_\_\_
5. Attach a map with 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)	E. Irrigated Acres/Total Acreage
Pond #1	8199	1250 GPM	450,000 GPD	37 Acres

**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?  
**1-2"/week**
9. How many days would you typically spray irrigate in a week to meet the needs of item 8?  
**7**
10. How many hours per day would the spray irrigation run on a typical day?  
**2-6 hours**
11. How many weeks is irrigation required during a typical growing season?  
**34 weeks**
12. Do you require any pre/post-season irrigation to adjust soil moisture prior to planting the crop?  
**No**
13. If off-peak season irrigation is required, what is the weekly water need and for how many weeks?  
**n/a**
14. Requested rates (Million Gals): **.45 million gallons/Day; 8 million gallons/Month; 20 million gallons/Year**  
Sub-Total\_\_\_\_\_ System Total **X**\_\_\_\_\_ (check Sub if systems interconnect)
15. For irrigation projects only: Total tillable acreage: \_\_\_\_\_ Irrigated acreage: **37A** \_\_\_\_\_
16. What is the estimated consumptive use, as a percentage of the total withdrawal? \_\_\_\_\_
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.
19. Are all facilities listed in #7 (above) individually metered? \_\_\_\_\_. Identify those not metered and submit a proposed schedule for meter installation.

20. A. **Public water supply systems:** A Conservation Program which provides for the monitoring, prevention, and repair of leakage throughout the system, provides customer information relating to water conservation and water-saving devices.

B. **Industrial, Commercial, and other water supply projects:** A Conservation Program which provides for the investigation of all feasible conservation measures and provides for the implementation of those feasible as soon as possible. A description of leak-detection monitoring and all feasible process-modifications for minimizing both water usage and loss.

21. Drought Emergency Plan for projects with total system water withdrawal over 1.0 mgd. Attach the following plan description. (**not applicable to irrigation projects**).

A. Identification of all priority uses for water throughout the system or service area, water usage restriction schedules, implementation procedures, and any alternate sources of water.

22. AFFIDAVIT

I, Greg Eisner, hereby affirm this application and any plans, reports, or documents submitted with this application to be true and correct to the best of my knowledge and belief.

Signature [Signature]  
Date 3-5-26

SWORN TO AND SUBSCRIBED before me the \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**\*Applications for withdrawal for agricultural irrigation are not required to be notarized.**



## DESIGNATION OF LEGALLY AUTHORIZED AGENT

THIS FORM MUST BE PRINTED, COMPLETED AND NOTARIZED, AND THE ORIGINAL MUST BE SUBMITTED WITH THE APPLICATION FOR A WELL PERMIT

Property Owner Name: City of Wilmington  
Property Owner Phone: 302-576-3069  
Property Owner Email Address: kwilliams@wilmingtonde.gov

Authorized Agent Name: Greg Eisner  
Authorized Agent Phone: 480-798-3841  
Authorized Agent Email Address: GEisner@troon.com

The proper completion of this form allows the owner(s) of a parcel to legally designate an agent to act for them in filing an application for a permit to construct and/or use a well. When properly completed and notarized, this form allows the agent to sign his or her name on the permit application form in place of the owner(s) signature.

I, Kelly Williams, Commissioner of Public Works, City of Wilmington hereby authorize Greg Eisner of Ed Oliver Golf Club to act as my agent in filing an application for a well construction and/or use permit, said well to be constructed on property owned by me, located at 800 N DuPont Rd, Wilmington DE 19807 and identified by tax map number 07-033.10-168. The aforementioned person has my permission to sign all well permit application forms otherwise requiring my signature.

[Signature]  
Owner's Signature

2/27/26  
Date

STATE OF \_\_\_\_\_:

COUNTY OF \_\_\_\_\_:

SS

COMES NOW the subscriber, a notary public in and for the state and county aforesaid,

\_\_\_\_\_, known by me to be such, who being by me duly sworn, did depose and say that the preceding instructions constitute their wishes concerning the designation of a legally authorized agent for purposes of submitting application(s) for a permit to construct and/or use a well on property owned by them, and authorizes the agent to sign all application form(s) for them.

SWORN TO AND SUBSCRIBED before me  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Date Commission Expires