

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
P.O. BOX 1401, 89 KINGS HIGHWAY
DOVER, DELAWARE 19903
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

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

PERMIT# <u>156049-W</u>	LOCAL ID#
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PROPERTY OWNER <u>Mark Hunsberger</u>

WELL CONTRACTOR <u>Kenny Wood</u>	LIC# <u>101</u>
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DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>Top Soil</u>	<u>0</u>	<u>1</u>
<u>Tan Clay</u>	<u>1</u>	<u>5</u>
<u>Fine Tan Sand</u>	<u>5</u>	<u>11</u>
<u>Orange & Tan Clay</u>	<u>11</u>	<u>16</u>
<u>Brown Clay & Sand</u> <u>Tbd</u>	<u>16</u>	<u>20</u>
<u>Coarse dark tan Sand & Gravel</u>	<u>20</u>	<u>80</u>
<u>Med. to Coarse Tan Sand</u> <u>T cont b</u>	<u>80</u>	<u>90</u>

OTHER COMMENTS: _____

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HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT

<u>Henry Coby</u>	<u>H 94</u>	<u>7-28-98</u>
Signature of Well Driller in Charge	License#	Date