STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

"PPLY SECTION "IN OF WATER RESOURCES "INGS HIGHWAY "OVER, DELAWARE 19901 PHONE: 302-739-3665 FAX: 302-739-2296

FORMATION LOG

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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORM	IS WILL BE RETURNED		
PERMIT# 183774	LOCAL ID#		
PROPERTY OWNER Rob Lisle			
WELL CONTRACTOR Atlantic Well Drilling	LIC# 789		
DESCRIPTION		TOP OF STI	RATA BOTTOM OF STRATA
Top soil		00	1
Brown clay		1	15
Fine gray sand		15	20
Course gravel		20	48
Course tan sand	•	48	67
Medium tan sand		67	73
OTHER COMMENTS:			
	RECEIVED		
	PR 0 1 2002		
l W.	ATER SUPPLY I		
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMIT	TED IS ACCURATE AN	D CORRECT	1 1
Edward J. Nellez Ja. Signature of Well Driller In Charge	68	<u></u>	3/27/02
Signature of Well Driller In Charge	License#	Pink - Owner	Date Doc. No. 40-08-82-12-11