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

0d42-09

PAGE _____ OF _____ PAGES

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

PERMIT# 158691 LOCAL ID# 76847.24

PROPERTY OWNER First State Comm. Action Lot 7

WELL CONTRACTOR T Morris LIC# 1004

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	3
Fine Tan Sand + Clay	3	20
Med Tan Sand	20	40
Course Tan Sand	40	60

OTHER COMMENTS:

RECEIVED
SEP 2 1999
WATER SUPPLY

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

Tom Morris — Signature of Well Driller In Charge
1004 — License#
6/23/98 — Date

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11