STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES

AND ENVIRONMENTAL CONTROL

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

FORMATION LOG

Pc 44-11

JPPLY SECTION

لم XINGS HIGHWAY OOVER, DELAWARE 19901

PHONE: 302-739-3665 FAX: 302-739-2296

JON OF WATER RESOURCES

PAGE _____ OF ____ PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL	BE RETURNED		
PERMIT# 191765	LOCAL ID#		
PROPERTY OWNER Glen Eskridge & Jeff Hastings	3		
WELL CONTRACTOR Atlantic Well Drilling, Inc. DESCRIPTION		LIC# 789	
		TOP OF STRATA	BOTTOM OF STRATA
Fine to medium brown sand with gray clay		0	14
Fine to medium tan sand and gravel		14	28
Iron ore		28	30
Fine brown sand		30	37.
Iron ore	*	37	39
Gray clay		39	58
Fine to medium tan sand		58	83
Fine to course brown sand		83	127

OTHER COMMENTS:			
RECEIVED			
WATER SUPPLY			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Edwarf J. Helley L			
Signature of Well Driller & Charge License# Date			, <u>, , , , , , , , , , , , , , , , , , </u>