O:

ATER 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

Pd33-09

PAGE _____ OF _____ PAGES

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

PERMIT# 174020E | LOCAL ID#

PROPERTY OWNER Earl Murray

WELL CONTRACTOR WEBER | LIC# 4011

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	2
Orange Sand	2	8
Dark Gray Sand	8	25
Light Gray Sand	25	60

OTHER COMMENTS:

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

Signature of Well Driller In Charge _____ License# 4011 Date 9-5-00

White - DNREC • Canary - Contractor • Pink - Owner

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