

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-3665
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STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL



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

FORMATION LOG

Pd 34-08

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

PERMIT# <u>184289</u>	LOCAL ID# <u>TW1</u>	
PROPERTY OWNER <u>Triple A Farm</u>		
WELL CONTRACTOR <u>ACSD</u>	LIC# <u>14</u>	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>Topsoil</u>	<u>0</u>	<u>1</u>
<u>Tan Fine Sand</u>	<u>1</u>	<u>6</u>
<u>Gray Clay</u>	<u>6</u>	<u>18</u>
<u>Med Tan Sand</u>	<u>18</u>	<u>36</u>
<u>Med White Sand w/ Some Gravel</u>	<u>36</u>	<u>71</u>
<u>Fine White Sand</u>	<u>71</u>	<u>75</u>
<u>Gray & White Clay</u>	<u>75</u>	<u>80</u>

OTHER COMMENTS:

RECEIVED
MAR 14 2002
WATER SUPPLY

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

[Handwritten Signature]
Signature of Well Driller In Charge

991
License#

3/8/02
Date