MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
PHONE: 302-739-9944
FAX: 302-739-7764

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

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

FORMATION LOG

PH14-22

PAGE _____ OF _____ PAGES

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

PERMIT# 218932 | LOCAL ID#

PROPERTY OWNER Brago

WELL CONTRACTOR Layne | LIC# 319

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill	0	1
clay	1	5
Fine Sand	5	65
Stones	65	70
med Sand	70	140
Coarse Sand	140	160
Fine grey Sand	160	180

OTHER COMMENTS: _____

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

Signature of Well Driller In Charge | License# 429 | Date 4/25/07

White - DNREC • Canary - Contractor • Pink - Owner

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