MAIL TO:

FAX: 302-739-2296

WATER SUPPLY SECTION DIVISION OF WATER RESOURCES 89 KINGS HIGHWAY DOVER, DELAWARE 19901 PHONE: 302-739-3665

STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

FORMATION LOG

Qc25-06

PAGE _____ OF _____ PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED		
PERMIT# 162433 LOCAL ID# 642067.47		
PROPERTY OWNER LISA Schreiber		
WELL CONTRACTOR T. MOSSIS	LIC# 1004	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil Fine Tan Sand + Clay Med Tan Sand + Clay Med Tan	0	3
Fine Tan Sand + Clay	3	20
Med Tan Sand + Clay	20	40
med Tan	40	60
		-
OTHER COMMENTS:	n e e e i v	V E D
WATER SUPPLY		
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT		
1004 12/16/98		
Signature of Well Driller In Charge	License# Date	Ι/Ψ/ 70