TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
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

Qd21-41

PAGE _____ OF _____ PAGES

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

PERMIT# 185919 LOCAL ID#

PROPERTY OWNER Joyce Nack

WELL CONTRACTOR Morris LIC# 1004

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	2
yellow med sand	2	12
White clay sand	12	18
Tan med sand	18	38
TAN course sand	38	80
gray clay + sand	80	90
gray clay	90	98
gray course sand	98	116

OTHER COMMENTS:

RECEIVED
SEP 17 2004
WATER SUPPLY

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

Signature of Well Driller In Charge: [signature] License#: 1004 Date: 9-18-03

White - DNREC • Canary - Contractor • Pink - Owner

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