MAIL TO:

WATER 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

Qd52-12

PAGE _____ OF _____ PAGES

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

PERMIT# 157103-W

LOCAL ID#

PROPERTY OWNER Robert M. Steele

WELL CONTRACTOR Kenny Wood

LIC# 101

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	1
Light Tan Sand	1	12
Tan Sand	12	20
Coarse Tan Sand & Gravel	20	45
Coarse Tan Sand	45	78

OTHER COMMENTS:

RECEIVED
JUL 2 1998
WATER SUPPLY

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

Steve Coby — Signature of Well Driller In Charge

494 — License#

5-11-98 — Date

White - DNREC • Canary - Contractor • Pink - Owner

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