

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

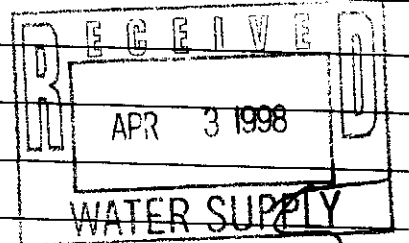
Well-02

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

PERMIT# 156743	LOCAL ID# IW #1	
PROPERTY OWNER Phillis L. Smith		
WELL CONTRACTOR ACSD		LIC# 14
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
TOP SOIL	0	1
MED-COARSE WHITE SAND	1	27
MED-COARSE ORANGE SAND + GRAVEL	27	49
IRON ORE	49	51
TAN CLAY	51	56
MED-COARSE ORANGE SAND w/CLAY LAYERS	56	80
MED ORANGE SAND	80	120
TAN + GRAY CLAY	120	123

OTHER COMMENTS:



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

Signature of Well Driller in Charge *John Kelly*

License# 895

Date 3/31/98

White - DNREC • Canary - Contractor • Pink - Owner