## MAIL 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

Qh21-30

PAGE \_\_\_\_\_ OF \_\_\_\_ PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 183734	LOCAL ID#		
PROPERTY OWNER Kerein Sagers			
WELL CONTRACTOR MOUS		LIC# 1004	
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA
Top Sou		0	2
yellow med Son	<u>d</u>	<b>A</b>	12
White Clay		/>	16
White med San	br	16	45
White med San White Course S	and	45	60
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OTHER COMMENTS:			
OTHER COMMENTS:			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
TMONG 1004 1-30-02			
Signature of Well Driller In Charge	License#	Date	