STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

.∕ER SUPPLY SECTION .∕VISION OF WATER RESOURCES 89 KINGS HIGHWAY DOVER, DELAWARE 19901 PHONE: 302-739-3665 FAX: 302-739-2296

FORMATION LOG

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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 178642	LOCAL ID#	101	Qh23-16
PROPERTY OWNER RUSSell Jones			
WELL CONTRACTOR ACSD		LIC# 14	
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA
Topsoil		0	l
Tan Med Sand w/ Some Clay			22
Med-Coarse White Soud		33	<u> </u>
Med-Coarse Tan Sand W Gravel		50	70
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OTHER COMMENTS:			
RECEIVED			
- 100 1 5 2001			
I HEREBY AFFIRM THE INFORMATION HAVE SUBMITTED IS ACCURATE AND CORRECT			
6/12/01			
Signature of Well Driller In Charge	License#	Date	/ /