

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

Dh24-30

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

PERMIT# 15LOSS-W LOCAL ID# \_\_\_\_\_

PROPERTY OWNER BONARD TIMMONS

WELL CONTRACTOR W.S.S. LIC# 830

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>TOP</u>	<u>0</u>	<u>2</u>
<u>YELLOW ORANGE CLAY</u>	<u>2</u>	<u>5</u>
<u>GRAY SAND MED</u>	<u>5</u>	<u>20</u>
<u>GRAY SILT</u>	<u>20</u>	<u>30</u>
<u>GRAY SAND MED</u>	<u>30</u>	<u>50</u>
<u>YELLOW SAND MED</u>	<u>50</u>	<u>70</u>
<u>YELLOW ORANGE SAND COARSE</u>	<u>70</u>	<u>105</u>
<u>GLY CLAY</u>	<u>105</u>	<u>111</u>
<u>GLY SILT</u>	<u>111</u>	<u>130</u>
<u>GRAY SAND MED</u>	<u>130</u>	<u>160</u>

OTHER COMMENTS: IRON 2.2 ppm  
PH 6.7  
TDS 120  
HARDNESS 5  
NITRATES 2.5

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

Signature of Well Driller In Charge [Signature] License# 830 Date 11/3/97