

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

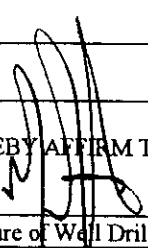
WELL COMPLETION REPORT MUST
BE RETURNED WITHIN 30 DAYS OF
CONSTRUCTION DATE

FORMATION LOG

Q:23-19 Q:13-10

PAGE _____ OF _____ PAGES

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

PERMIT# 165583		LOCAL ID#	
PROPERTY OWNER RICHARD VOLKMAN			
WELL CONTRACTOR MARK MILLIS		LIC# 830	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA	
TOP SOIL	0	2	
YELLOW SAND	2	18	
GRAY CLAY	19	22	
GRAY SILT	22	60	
GRAY SAND FINE	60	80	
YELLOW ORANGE SAND MED	80	100	
OTHER COMMENTS:		<div style="border: 1px solid black; padding: 5px; text-align: center;"> RECEIVED DEC 28 1999 WATER SUPPLY </div>	
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
 Signature of Well Driller In Charge		830 License#	6-22-99 Date