

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

Q:35-20

PAGE _____ OF _____ PAGES

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

PERMIT# <u>188917</u>	LOCAL ID#
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PROPERTY OWNER Tracy

WELL CONTRACTOR <u>Weber</u>	LIC# <u>319</u>
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DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
<u>Topsoil</u>	<u>0</u>	<u>10</u>
<u>Sand* clay</u>	<u>10</u>	<u>20</u>
<u>hard coarse sands</u>	<u>20</u>	<u>50</u>

OTHER COMMENTS: _____

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

[Signature] 4129 9/9/02

Signature of Well Driller In Charge License# Date