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:35-27

PAGE _____ OF _____ PAGES

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

PERMIT# 185698 LOCAL ID#

PROPERTY OWNER Mohr

WELL CONTRACTOR Weber LIC# 319

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill	0	10
Med White Sand	10	60
Sand & Clay, Blue	60	70
Coarse tan Sands	70	110
	6 10 70 12 54	

OTHER COMMENTS:

RECEIVED
SEP 19 2002
WATER SUPPLY

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

Signature of Well Driller In Charge _____ License# 4129 Date 5/20/02

White - DNREC • *Canary - Contractor* • *Pink - Owner*

Doc. No. 40-08-82-12-11