

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

6

FORMATION LOG

PAGE _____ OF _____ PAGES

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

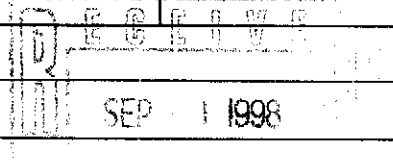
PERMIT#	159777	LOCAL ID#	
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PROPERTY OWNER	Jacqueline Miller
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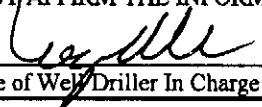
WELL CONTRACTOR	Weber	LIC#	319
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DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top mass	0	2
sand silt clay	2	19
clay-sg	17	43
sand fine sg	43	49
clay-sg	49	55
sand fine red sg	55	130
sand fine sg	130	150
sand fine sg	150	170
clay-sg	170	170
silt sg	180	210
sand fine red sg	210	220
	Q:52-81	

OTHER COMMENTS:



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


319
8/7/98

Signature of Well Driller In Charge License# Date