TO:

ATER 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

Rc15-14

PAGE _____ OF _____ PAGES

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

PERMIT# 184760 LOCAL ID#

PROPERTY OWNER R. Thomas Vincent

WELL CONTRACTOR Kenny Wood LIC# 101

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	2
Tan Sand	2	20
Light Tan Sand (Course)	20	50
Course Brown Sand	50	72

OTHER COMMENTS:

RECEIVED
JUN 05 2002
WATER SUPPLY

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

Signature of Well Driller In Charge _____ License# 228 Date 5/31/02

White - DNREC • Canary - Contractor • Pink - Owner

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