

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

0c45-18

PAGE _____ OF _____ PAGES

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

PERMIT# <u>162780</u>		LOCAL ID#	
PROPERTY OWNER <u>SCOTT QUILLEN</u>			
WELL CONTRACTOR <u>PAUL WOOTTEN</u>		LIC# <u>257</u>	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA	
<u>Sand</u>	<u>0</u>	<u>10</u>	
<u>Clay</u>	<u>10</u>	<u>20</u>	
<u>Sand</u>	<u>20</u>	<u>30</u>	
<u>"</u>	<u>30</u>	<u>40</u>	
<u>"</u>	<u>40</u>	<u>50</u>	

OTHER COMMENTS: _____

RECEIVED
 MAY 13 1999
 WATER SUPPLY

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

Paul Wootten License# 257 Date 3/19/99

Signature of Well Driller In Charge