1 mm

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

FORMATION LOG

	0055-07	PAGE	OFPAGES	
PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED				
PERMIT# 1 (e1552 LOCAL ID# 74081,98				
PROPERTY OWNER Clayton + Patrica McMullen				
WELL CONTRACTOR T, MOCKS			LIC# 1004	
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA	
Top Sand		0	.3	
Fine White Sand Med White Sand (C)	avan	3	200	
Med White Sand FC	lay)	ω Ω	(40)	
Course white Sand		40	75	
OTHER COMMENTS:			TO COMO DESCRIPTION OF THE PROPERTY.	
			- 11-11-11-11-11-11-11-11-11-11-11-11-11	
		SEP 2 1999		
L WATER SUPPLY				
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT				
Jan Morens	1004		11/2/98	
Signature of Well Driller In Charge	License#	Date		