AIL 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

Od35-12

PAGE _____ OF _____ PAGES

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

PERMIT# 169074 | LOCAL ID#

PROPERTY OWNER Tony Johnson

WELL CONTRACTOR MORRIS | LIC#

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top soil	0	2
Yellow med sand + clay	2	25
white med sand	25	40
gray clay	40	50
Tan med sand	50	65
TAN course gravel	65	85

OTHER COMMENTS:

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

Signature of Well Driller In Charge | License# 1004 | Date 11-29-99

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

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