✓ Form

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.LY SECTION
.N OF WATER RESOURCES
.. 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

Od42-10

PAGE _____ OF _____ PAGES

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

PERMIT# 158825-W

LOCAL ID#

PROPERTY OWNER Thomas J. Ralin

WELL CONTRACTOR Kenny Wood

LIC# 101

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Top Soil	0	1
Tan Sand	1	12
White Clay	12	18
Tan Sand	18	23
White Sand	23	28
Dark Tan Sand & Gravel	28	58

OTHER COMMENTS:

RECEIVED
AUG 25 1998
WATER SUPPLY

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

Ronnie Thomason — Signature of Well Driller In Charge

L-eL355 — License#

6 1 98 — Date

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

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

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