## JON .. ER RESOURCES AWAY ELAWARE 19901 .c: 302-739-3665 .X: 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**

0944-06

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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE R	ETURNED		
PERMIT# 164 217 LC	CAL ID#		
PROPERTY OWNER Survey Country Coun	cil		
WELL CONTRACTOR Glil Share DESCRIPTION		LIC# 104	
DESCRIPTION	Т	OP OF STRATA	BOTTOM OF STRATA
Jop sil		0'	//
yellow Clay		, '	3 '
Course yellow sond		3'	/2'
Coore Jon Sond		12'	45'
Coare Sight Yellow Sand		45'	60'
Fine to Course Sight yellow &	and l	60'	71'
med to Course light yellow		72'	85'
		,	
			,
		14 18 11 11	
OTHER COMMENTS:			
OTTER COMMENTS.		L DEC	EWED
			EIVED
		DEC	0 5 1999
		WATE	RSUPPLY
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCU	RATE AND CORRE	ECT	
Phil Sharp	104		6/1/89
Signature of Well Driller In Charge	License#	Date	* *