

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

P644-02

PAGE _____ OF _____ PAGES

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

PERMIT# 155568-W LOCAL ID# _____

PROPERTY OWNER John T. Hankford

WELL CONTRACTOR Ben Wood LIC# 778

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Clay	0	10
Br. Sand & Coarse Coarse	10	40
Med. Tan Sand	40	57

OTHER COMMENTS:

_____ JAN 14 1999 _____

I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT
Ben Wood Signature of Well Driller In Charge License# 778 Date 1/7/99