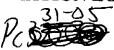
MAIL TO:

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



PAGE _____ OF ____ PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED				
		31-15-126		
PROPERTY OWNER Michelle Leaanen	-, <u>-, -, -</u>			
WELL CONTRACTOR American Water Well System DESCRIPTION	ns. Inc.	LIC# 608		
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA	
Top Soil	Α,	0	1	
Brown Clay	alog"	,	10	
Tan Sand with Clay Layers	129/10	10	35	
Tan Sand	ノ・	35	53	
Orange Sand	Tento	53	70	
Gray Clay	T.ta?	70	75	
		<u>.</u> .		
	,			
OTHER COMMENTS:		grand and the state of the stat	(A) (A)	
		MAR 18	999	
HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT				
·	608			
Signature of Well Driller In Charge	License#	Date	·	