

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

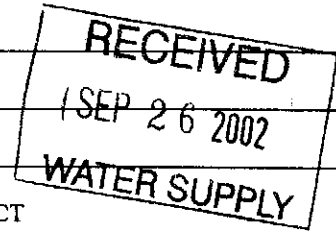
PF3A-06

PAGE _____ OF _____ PAGES

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

PERMIT# <u>1851004</u>		LOCAL ID#	
PROPERTY OWNER <u>MELVIN TOSEPT</u>			
WELL CONTRACTOR <u>WAT TOW</u>		LIC# <u>250</u>	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA	
<u>SAND</u>	<u>0</u>	<u>60</u>	

OTHER COMMENTS: _____



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

Signature of Well Driller In Charge: *Paul Wadley* License# 250 Date 9/17/02