STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

WELL COMPLETION REPORT MUST BE RETURNED WITHIN 30 DAYS OF CONSTRUCTION DATE

FORMATION LOG

Ph15-17

PAGE _____ OF _____ PAGES

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

PERMIT# 190381 | LOCAL ID#

PROPERTY OWNER Bonthelmess

WELL CONTRACTOR Weber | LIC# 319

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill	0	10
Med Sands	10	20
Heavy Unconsolidated Gravels	20	40
Coarse & Med Sands w/ clay	40	200

OTHER COMMENTS:

RECEIVED
JAN 07 2003
WATER SUPPLY

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

Signature of Well Driller In Charge | License# 4129 | Date 11/12/02

White - DNREC • Canary - Contractor • Pink - Owner

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