STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

"ÆR SUPPLY SECTION "ÆVISION OF WATER RESOURCES 89 KINGS HIGHWAY DOVER, DELAWARE 19901 PHONE: 302-739-3665 FAX: 302-739-2296

FORMATION LOG

Qd25-10

PAGE _____ OF ____ PAGES

		,	
PERMIT# /8/76/ LOCAL ID#			
PROPERTY OWNER D+N Profer Lies		<u> </u>	
WELL CONTRACTOR MORRIS		LIC# /00Y	
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA
Top 50.1		0	3
Yellow mad sono +c	lag	3	20
white med su	·d	20	48
Top Soil Yellow med Sand + a White med San Tan Louise Sand		48	60
·			
	. [
			1
			<u> </u>
ALTERNATION OF THE PROPERTY OF			
OTHER COMMENTS:		-	
HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS AC	CURATE AND CO	RRECT	
I Mary	/064		2-18-02