

MAIL TO:

WATER SUPPLY SECTION
 DIVISION OF WATER RESOURCES
 P.O. BOX 1401, 89 KINGS HIGHWAY
 DOVER, DELAWARE 19903
 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

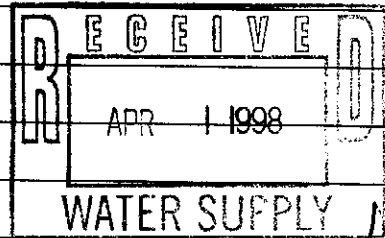
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PAGE 2 OF 2 PAGES

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

PERMIT# 156946	LOCAL ID# TW1	
PROPERTY OWNER Antonio Nero		
WELL CONTRACTOR ACSD	LIC# 14	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Topsoil	0	1
Fine-Med Tan Sand	1	12
Med-Coarse White Sand	12	27
Med-Coarse Orange Sand w/Gravel	27	49
Iron Ore	49	51
White Clay Tbt	51	56
Med Coarse Tan Sand	56	80
Med Coarse Tan Sand	80	115
Orange & Gray Clay Tbt	115	120

OTHER COMMENTS:



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

Signature of Well Driller In Charge [Signature] License# 664 Date 5-26-98