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

Qg 15-10



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

PERMIT# 111266 | LOCAL ID#

PROPERTY OWNER Charles Hudson

WELL CONTRACTOR Weber | LIC# 319

| DESCRIPTION | TOP OF STRATA | BOTTOM OF STRATA |
|---|---|---|
| Topsoil | 0 | 2 |
| sand fine white | 2 | 8 |
| clay | 8 | 15 |
| sand fine white | 15 | 30 |
| sand med fine white | 30 | 37 |

OTHER COMMENTS: _____

RECEIVED
MAR 26 1999
WATER SUP

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

Signature of Well Driller In Charge: Wade Weber | License#: 319 | Date: 4/2/99

*White - DNREC • Canary - Contractor • Pink - Owner*

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