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

Q:23-22

PAGE _____ OF _____ PAGES

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

PERMIT# 158092 LOCAL ID#

PROPERTY OWNER Anthony Bonaventure

WELL CONTRACTOR Weber LIC# 319

| DESCRIPTION | TOP OF STRATA | BOTTOM OF STRATA |
|---|---|---|
| Top soil | 0 | 2 |
| sand fine white | 2 | 8 |
| clay brown | 8 | 28 |
| sand fine white | 28 | 60 |
| sand med fine orange | 60 | 102 |
| clay - brown | 102 | 105 |
| clay - light | 105 | 115 |
| sand fine white | 115 | 120 |
| sand fine med tan | 120 | 140 |
| silt - gray | 140 | 150 |

OTHER COMMENTS:

RECEIVED
JUN 2 1998
WATER SUPPLY

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

Signature of Well Driller In Charge: [signature] License#: 319 Date: 5/29/98

White - DNREC • Canary - Contractor • Pink - Owner

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