

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

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

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
P.O. BOX 1401, 19 KINGS HIGHWAY
DOVER, DELAWARE 19903
PHONE: 302-739-3663
FAX: 302-739-2296

FORMATION LOG

QJ42-48

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

PERMIT# 157850	LOCAL ID#	
PROPERTY OWNER Artesian Water Company Inc.		
WELL CONTRACTOR Layna - Atlantic	LIC# 1057	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
sand	0	42
gray and brown clay	42	45
sand	45	60
gray clay	60	63
sand	63	78
gray clay	78	82
sand - coarse	82	92
clay - gray	92	94
coarse sand	94	160
gray clay	160	170
green and gray sandy clay	170	185
coarse sand	185	300
sandy gray clay and coarse sand	300	310
OTHER COMMENTS:		
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT		
<i>Walter K...</i>	780	6/26/98
Signature of Well Driller in Charge	Licensed	Date

White - DNREC • Canary - Contractor • Pink - Owner Doc. No. 40-08-02-12-11

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