

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

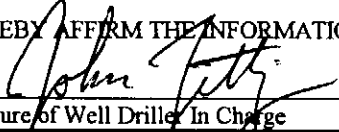
STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL

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

FORMATION LOG
RB15-07

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

PERMIT#	161778	LOCAL ID#	IWT
PROPERTY OWNER	Jerry Rider		
WELL CONTRACTOR	ACSD	LIC#	14
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA	
Topsoil	0	1	
White Sand	1	11	
Med Coarse Tan Sand	11	32	
Coarse Tan Sand w/Gravel	32	47	
Coarse Orange Sand w/Gravel	47	73	
Coarse Orange Sand w/Big Gravel	73	90	
Gray Clay	90	100	
Some log is Test Well RB15-07			
OTHER COMMENTS:			
JAN 21 1999			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Signature of Well Driller In Charge		License#	Date
		895	1/8/99