

MAIL TO:
WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
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

Rd 24-17

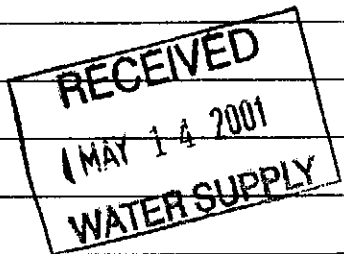
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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED

PERMIT# 178 178184	LOCAL ID# 5-32-14-37.11
PROPERTY OWNER DAVID JOHNSON	
WELL CONTRACTOR _____ LIC# 1051	

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
TOP SOIL	0	1
FINE SAND	1	25
FINE TO MED SAND	25	65
MED TO COARSE SAND	65	90

OTHER COMMENTS: _____



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

Signature of Well Driller in Charge	License# 703	Date 4/27/01
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