## MAIL TO:

FAX: 302-739-2296

WATER SUPPLY SECTION DIVISION OF WATER RESOURCES 89 KINGS HIGHWAY DOVER DELAWARE 19901 PHONE: 302-739-3665

## STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

## **FORMATION LOG**

Re.	21	-14
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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 172698	LOCAL ID#		
PROPERTY OWNER Harley P. & Carolyn D. Massey	,		
WELL CONTRACTOR Atlantic Well Drilling			
DESCRIPTION	TOP OF STR	ATA BOTTOM OF STRATA	
Top soil	0	1	
Fine brown sand	1	4	
White clay	4	11	
Medium tan sand	11	31	
Medium brown sand	31	40	
Course tan sand	40	60	
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OTHER COMMENTS:			
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	1	JUN 8 TOTAL	
J.,			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS AC	1/2/22		
Signature of Well Driller In Charge	62 License#	<u>6/21/00</u> Date	