∵しTO:

FAX: 302-739-2296

SUPPLY SECTION
ON OF WATER RESOURCES
GS HIGHWAY
R, 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

Ri24-28

PAGE 2 OF 2 PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 173525	LOCAL ID#		
PROPERTY OWNER Edward Gavenas			
WELL CONTRACTOR ACS D		LIC#	14
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA
Topsoil		0	\ \
Fine Gray Sand w/5,1+	Q.		23
Med-Coarse Gray Sand	T5d 1	23	48
Med-Coarse Gray Sand & Gra	vel	48	67
Med-Coarse Tan Sand & Gra	uel V	67	90
Gray Clay	Tot	90	95
\			
MT: 5			
N			
	•		
-			
OTHER COMMENTS:			
		REC	EINER
	ALIG 2 8 7000		
WATER SUPPLY			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Steven & h Jugar	903	<	8000
Signature of Well Driller In Charge	License#	Date	