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

PAGE _____ OF _____ PAGES

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

PERMIT# 156453 | LOCAL ID#

PROPERTY OWNER Bay Cafe

WELL CONTRACTOR Mark Mills W.S.S. | LIC# 830

DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill Dirt Clay/Sand	0	3
Brown Clay Marsh Glass	3	7
White Sand Med	7	60
Course Sand Yellow/Tan	60	120
Gray Sand Med	120	160
Gray Clay ~~Eg~~	160	170
Wood / Clay	170	180
Gray ~~Clay~~ Silt	180	220
Gray Clay / Shells	220	260
Gray Sand Med	260	300

RJ 3/1-22
156453

MAR 2 5 1998

OTHER COMMENTS: _____

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

Signature of Well Driller In Charge | License# 830 | Date 3/16/98

White - DNREC • Canary - Contractor • Pink - Owner

Doc. No. 40-08-82-12-11