STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

SUPPLY SECTION

AON OF WATER RESOURCES
AND ENVIRONM

OVER, DELAWARE 19901

PHONE: 302-739-3665

DEPARTMENT OF 1

AND ENVIRONM

FORMA

FAX: 302-739-2296

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

FORMATION LOG

Pd53-01

PAGE _____ OF ____ PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 189020 W	LOCAL ID#		
PROPERTY OWNER JENNINGS WILLIAMS			
WELL CONTRACTOR WELL CONTRACTOR		LIC# 253	
WELL CONTRACTOR DESCRIPTION		STRATA BOT	OM OF
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OTHER COMMENTS: RECEIVED			
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HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Signature of Well Driller In Charge	257 License#		<u>a</u>