## 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**

P921-03

1-)2		PAGE	OFPAGES
PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WIL	L BE RETURNED		
PERMIT# 188351	LOCAL ID#		
PROPERTY OWNER M.D. GILLAM			
WELL CONTRACTOR		LIC#	
DESCRIPTION	TO	OP OF STRATA	BOTTOM OF STRATA
SANA		Ø	50
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OTHER COMMENTS:			
	RECEIVED		
		RECEIVED (SEP 2 6 2002	
WATER SUPPLY			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Thuman & Maxim 40 88 9/13/02			
Signature of Well Driller In Charge	License#	Date	