

Qh31-14

MAIL TO:

WATER SUPPLY SECTION
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901
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# 189369	LOCAL ID#
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PROPERTY OWNER Jennifer Hellen Trust

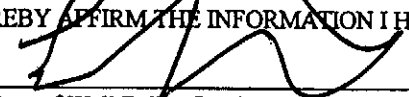
WELL CONTRACTOR Werten	LIC# 319
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DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA
Fill	0	10
med white	10	20
coarse white	20	60

OTHER COMMENTS:

RECEIVED
JAN 07 2003
WATER SUPPLY

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

Signature of Well Driller In Charge:  License#: 4129 Date: 9/30/02