Mor

STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

. SUPPLY SECTION SION OF WATER RESOURCES 39 KINGS HIGHWAY DOVER, DELAWARE 19901 PHONE: 302-739-3665 FAX: 302-739-2296

FORMATION LOG

PAGE ____OF ____PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED				
PERMIT# 162087 LOCAL ID# 1-33-2-32/3				
PROPERTY OWNER PIEHRO HORENDA LANKFORD				
WELL CONTRACTOR PENGLISH		LIC# 28	2	
DESCRIPTION		TOP OF STRATA	BOTTOM OF STRATA	
TOP 50 74		0	/	
SANDELAY WHITESAND JANSAND GRAVE		1	B	
WHITESAND		8	45	
TANSANO GRAVE	5ム	45	65	
		-		
· · · · · · · · · · · · · · · · · · ·				
	. -"			
	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
OTHER COMMENTS:			ED	
		DEC 3 o 1	DEC 3 0 1998	
· · · · · · · · · · · · · · · · · · ·		WATER CU	WATER SUFFLY	
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT 282 /5/14/50				
Signature of Well Driller In Charge	License#	Date	14/78	