MAIL TO:

FAX: 302-739-2296

WATER SUPPLY SECTION **DIVISION OF WATER RESOURCES** P.O. BOX 1401, 89 KINGS HIGHWAY DOVER, DELAWARE 19903 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

PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED			
PERMIT# 160136 ~ W LOCAL ID# 4-32-6-70			
PROPERTY OWNER RODG-CF K.6SLOWSKI			
WELL CONTRACTOR UWD	LIC# / 6	LIC# 165/	
DESCRIPTION	TOP OF STRATA	BOTTOM OF STRATA	
TOP SOIL	0		
FINE SE W/WHITECHA, MED OFALGESE	<i>x</i> /	8	
Med oranbeesd	8	40	
Med to Course TAK	\$ 40	100	
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OTHER COMMENTS:	1	1	
OTHER COMMENTS:			
NOV 1 2 1998			
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT			
Jane Inc/ 703 8-24-98			
Signature of Well Priller to Charge License#	Date		