STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

.. RESOURCES AY AWARE 19901 ...02-739-3665 ...302-739-2296

FORMATION LOG

Qd22-15

PAGE	OF	PAGES

PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL	BE RETURNED				
PERMIT# 1-3269 LOCALID# 2-32-12-19-139					
PROPERTY OWNER GAIL W. FOOKS					
WELL CONTRACTOR UUD DESCRIPTION			LIC# 105/		
DESCRIPTION			F STRATA	BOTTOM OF STRATA	
TOP SOIL			9	1	
FINE LIKE TAKED				22	
Med Lite 5d			ス	48	
Medto course lite sd		48		60	
					
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		7.7.1.			
OTHER COMMENTS:				11/50	
			RECE	IVED	
			SEP) 7 ZUUU	
			WATER SUPPLY		
UDDEDV ACCIDATUR BEODLATION LITARE GUIDA COMPANY		NTC-		·····	
HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACC	URATE AND COR		<i>a</i>	60-8-	
Signature of Well Driller in Charge	License#		Date	-3-3	
White - DNREC • Canary - C		ink - Owner		Doc. No. 40-08-82-12-11	