STATE OF DELAWARE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL

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

∴TION ∴ER RESOURCES ∴HWAY ∴LAWARE 19901 ∴: 302-739-3665 ∴: 302-739-2296

FORMATION LOG

101.24-26

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PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS W		
PERMIT# 173695	LOCAL ID#	
PROPERTY OWNER ELWOOD Frede	rick	
WELL CONTRACTOR White DESCRIPTION		LIC# /
DESCRIPTION	TOP O	F STRATA BOTTOM OF STRATA
top soil	6	/
top soil		6
medyllow sand Garse yellow sen	6	18
Garse yellow pan	1 18	50
mel		
	,	
OTHER COMMENTS:		
	MI I	RECEIVED
		WATER SUPPLY
I HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT		
THEREBY AFFIRM THE INFORMATION THAVE SUBMITTED IS	S ACCURATE AND CORRECT	8/18/00
Signature of Well Driller In Charge	License#	Date
White - DNREC • Cana	ıry - Contractor 🔹 Pink - Own	er Doc. No. 40-08-82-12-11