MAIL TO:

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

| FAX: 302-739-1296 | 6 54 | 2-5/ PAGE | OF PAGES |
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| PLEASE PRINT OR TYPE - ILLEGIBLE OR INCOMPLETE FORMS WILL BE RETURNED | | | |
| PERMIT# 168142 | LOCAL ID# | | |
| PROPERTY OWNER DESCRIPTION BUILD | er- | _ | |
| WELL CONTRACTOR WEBE | | LIC# 3/9 | • |
| DESCRIPTION | | TOP OF STRATA | BOTTOM OF STRATA |
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| - 14-74 | | | |
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| OTHER COMMENTS: | | | |
| | | RECEIVED | |
| | | APR 3 2000 | |
| | | WATER SUPPLY | |
| | | COPPLY | |
| HEREBY AFFIRM THE INFORMATION I HAVE SUBMITTED IS ACCURATE AND CORRECT | | | |
| Signature of Well Driller In Charge | License# | Date 3 | 20-00 |