

## **Water Resources Program Notice of Intent Refund Request**

For Ecology Use	
(Date Stamp)	

Refunds are only issued to the remitter (the person who paid the fee). Complete, sign, and return this form to: Department of Ecology, Water Resources Program Well Construction & Licensing Office, P.O. Box 47600, Olympia, WA 98504-7600

Refund Requests without a copy of the NOI attached will be returned.

Remitter Information					
Name:	Phone No:				
Address:			/		
City:		State:	Zip:		
		1			
Drilling Company (if different from above	ve)				
			Phone No:		
			,		
Well Information					
NOI#:	Amount	Amount to be refunded:			
Number of wells originally submitted to drill:  Number of w			ells actually drilled:		
Reason for refund:					
			_		
I certify that there are no misrepresentation I am aware that any misstatements or incomplete					
		, .,	1		
Signature	-	 Date	<u> </u>		