W.W.-4 3/69

C 1	8307	SEQUENCE NO. (DWR USE ONLY)

THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER COMPLETION OF THE WELL

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY) 8-13

DATE WELL COMPLETED: June 9-70

DEPTH OF WELL (TO NEAREST FOOT): 180

PERMIT NO. FROM PERMIT TO DRILL WELL: 40-70-0170

DRILLERS IDENTIFICATION NO. 42

OWNER: Caddie Holmes (LAST NAME) A09295 FIRST NAME

STREET OR RFD ______ POST OFFICE Belair Md

WELL DESCRIPTION

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Top Soil	0	3	
Sandy	3	40	
Sand Rock	40	90	
Gray Rock	90	180	✓

Casing 49'
grout 11' by tape
Water at 4' — hit sand
Cement gotten in to 20'

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX): YES [Y circled] NO [N]

DEPTH OF GROUT SEAL (TO NEAREST FOOT): FROM 0 FT. TO 47 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW): ST STEEL; CO CONCRETE; PL PLASTIC; OT OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
ST	6	49

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW): ST STEEL; BR BRASS OR BRONZE; HO OPEN HOLE; PL PLASTIC; OT OTHER

C 2 (SEQ. NO.)

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT) FROM	TO
1		
2		
3		
4		

SLOT SIZE 1. ____ 2. ____ 3. ____ 4. ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX [F]

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.): TELESCOPE CASING; LOG INDICATOR; OTHER DATA AVAILABLE

C 3 — Lot 47

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR): 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON): 6

METHOD USED TO MEASURE PUMPING RATE: bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING: 30 (NEAREST FOOT)

WHEN PUMPING: 180 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX): A AIR; P PISTON; T TURBINE; C CENTRIFUGAL; R ROTARY [circled]; O OTHER (DESCRIBE BELOW); J JET; S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O):

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON): ____

PUMP HORSE POWER: ____

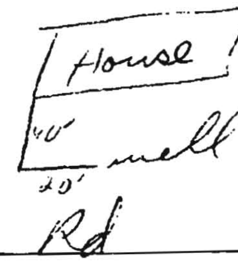
PUMP COLUMN LENGTH (NEAREST FOOT): ____

CASING HEIGHT

(CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT): [+ circled] ABOVE / [−] BELOW LAND SURFACE: 2 (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



CIRCLE APPROPRIATE BOXES

- [A] A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
- [E] ELECTRIC LOG OBTAINED
- [C] COPY OF ELECTRIC LOG ATTACHED

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME ____

SIGNATURE: L. F. Eastertay

#27

WR-W-3 3-69

B 1 | 9316 | SEQUENCE NO. (DWR USE ONLY) | (SEQ. NO.) 6

THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY) A09295

OWNER [illegible] COL 15 LAST NAME FIRST NAME COL 34

STREET OR RFD [illegible] COL 36 COL 55

POST OFFICE [illegible] HO-70-0170 COL 57 COL 80

8-13

B 2 DRILLER INFORMATION

1 2 3 (SEQ. NO.) 6

[illegible] 8 FIRST NAME DRILLER LAST NAME 27 IDENTITY NUMBER 42 29 32

[illegible] 34 STREET OR RFD 53

[illegible] 55 POST OFFICE ZIP CODE 80

DATE OF APPLICATION May 15-70

B 3 WELL INFORMATION

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. 22

M MUNICIPAL WATER SUPPLY

P PRIVATE WATER COMPANY

} MUST HAVE STATE HEALTH DEPT. APPROVAL

T TEST

APPROXIMATE DEPTH OF WELL 100 FEET 24 28

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE ROTARY

OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39

S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) 41 52

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY)

APPROPRIATION PERMIT NUMBER G A P 54 63

ENGINEER REVIEW (WRITE DISTRICT NO. IN BOX) 65

FORCE WRITE INITIALS IN BOX 67 68

CONDITIONS A E N S G W O 70 71 72 73 74 75 76 77 78 79

B 4 LOCATION OF WELL

1 2 3 (SEQ. NO.) 6

COUNTY [illegible] 8 (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION [illegible] 23 42

SECTION 3 44 46 LOT 47 48 50

NEAREST TOWN [illegible] 52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 73 M I 76 77 78

B 5 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

1 2 3 (SEQ. NO.) 6

N NORTH E EAST NE NORTHEAST SE SOUTHEAST

S SOUTH W WEST NW NORTHWEST SW SOUTHWEST

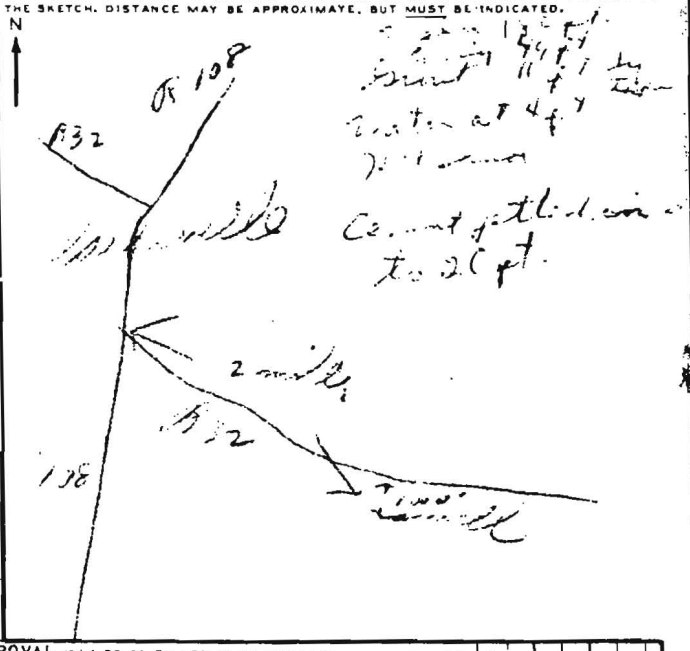
8 8 8 9 8 9

NEAR WHAT ROAD 32 11 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N 32 SOUTH S 32 EAST E 32 WEST W 32

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 1000 34 37 F T M I 38 39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. DISTANCE MAY BE APPROXIMATE, BUT MUST BE INDICATED.



E 5 CONTINUED

2 3 (SEQ. NO.) 6

S STATE DEPARTMENT OF HEALTH (CIRCLE BOX IF STATE HEALTH)

DATE MO. 5 DAY 1 YR. 70 43 48

HEALTH DEPARTMENT APPROVAL (NOT TO BE FILLED IN BY DRILLER)

Howard COUNTY DEPT. OF HEALTH

APPROVED BY [illegible] TITLE Director, Environmental Health

LATITUDE 3 50 DEG 51 52 MIN 53 54 SEC 55

LONGITUDE 0 7 57 58 DEG 59 60 MIN 61 62 SEC 63

ELEVATION AT WELL HEAD (FEET) 0 4 0 64 66 67 68

E 6

2 3 (SEQ. NO.) 6 SPECIAL CONDITIONS E-63 (DWR USE ONLY) 63

WR-W-3 3-69

70-2484

B	1	0416	SEQUENCE NO. (DWR USE ONLY)
1	2 3	(SEQ. NO.)	6

THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401

APPLICATION FOR PERMIT TO DRILL WELL

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY)

OWNER Tolson A 092-95 William E. (COL 5 LAST NAME / FIRST NAME COL 34)

(? a 2nd Well)

STREET OR RFD (COL 36) 40-70-0155 (COL 55)

POST OFFICE Clarksville, Maryland (COL 57 / COL 80)

B 2 DRILLER INFORMATION

1 2 3 (SEQ. NO.) 6

Dewey Brown (6 FIRST NAME DRILLER LAST NAME 27) IDENTITY NUMBER 163 (29–32)

Route 3 (34 STREET OR RFD 53)

Mt. Airy, Maryland 21771 (55 POST OFFICE ZIP CODE 80)

DATE OF APPLICATION April 28, 1970

B 4 LOCATION OF WELL

1 2 3 (SEQ. NO.) 6

COUNTY Howard (DO NOT ABBREVIATE COUNTY NAME) (8–21)

SUBDIVISION Clarksville Ridge (23–42)

SECTION 3 (44–46) LOT 47 (48–50)

NEAREST TOWN Clarksville (52–71)

MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 1/2 (73–76) MI (77 78)

B 3 WELL INFORMATION

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 4 (8–12)

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 1,000 (14–20)

B 5 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

1 2 3 (SEQ. NO.) 6

N NORTH — E EAST — NE NORTHEAST — SE SOUTHEAST

(S) SOUTH (circled) — W WEST — NW NORTHWEST — SW SOUTHWEST

NEAR WHAT ROAD Whitegate Road (11–30)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH N — SOUTH (S) (circled) — EAST E — WEST W (32)

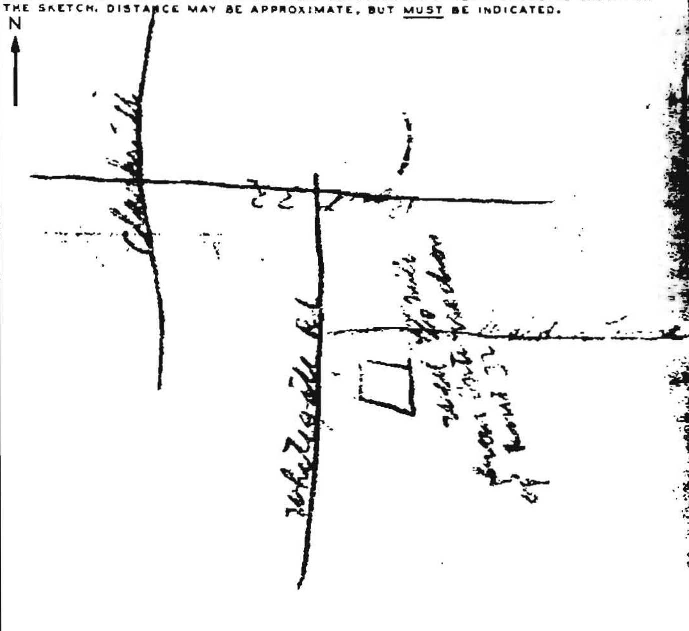
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 75 (34–37) (FT) (circled) MI (38 39)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

22

- (D) DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) (circled)
- F FARMING, AGRICULTURE, IRRIGATION
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
- M MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
- P PRIVATE WATER COMPANY }
- T TEST

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. DISTANCE MAY BE APPROXIMATE, BUT MUST BE INDICATED.



APPROXIMATE DEPTH OF WELL 75 FEET (24–28)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

30-37

BORED (OR AUGERED) — JETTED — DRIVEN

AIR-ROTARY — AIR-PERCUSSION — ROTARY (HYDRAULIC ROTARY)

(CABLE) (circled) — REVERSE ROTARY

OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

39

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled)
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) (41–52)

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY)

APPROPRIATION PERMIT NUMBER GAP (54–63)

ENGINEER REVIEW (WRITE DISTRICT NO. IN BOX) (65)

FORCE (67 68) WRITE INITIALS IN BOX

CONDITIONS A E N S G W Q (70 71 72 73 74 75 76 77 78 79)

B 5 CONTINUED — HEALTH DEPARTMENT APPROVAL (NOT TO BE FILLED IN BY DRILLER)

1 2 3 (SEQ. NO.) 6

Howard COUNTY DEPT. OF HEALTH

S STATE DEPARTMENT OF HEALTH (CIRCLE BOX IF STATE HEALTH)

DATE MO. DAY YR. 5 5 70 (43)

APPROVED BY [signature] TITLE Director, Environmental Health

A 092-95 (DWR USE ONLY)

LATITUDE 39 11 00 (50 51 52 53 54 55 DEG MIN SEC)

LONGITUDE 076 52 46 (57 58 59 60 61 62 63)

ELEVATION AT WELL HEAD (FEET) 0380 (65–68)

B 6 SPECIAL CONDITIONS 8-63

1 2 3 (SEQ. NO.) 6