C1 3477 SEQUENCE NO. (DENV USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER 1 12691

STACO USE ONLY DATE Received

DATE WELL COMPLETED 09 17 91

Depth of Well 400 (TO NEAREST FOOT)

OK HR 9/17/91

PERMIT NO. FROM "PERMIT TO DRILL WELL" WO-88-1176

OWNER [illegible] last name [illegible] first name

STREET OR RFD 1965 [illegible] TOWN

SUBDIVISION SECTION LOT WELL #2

WELL LOG

Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
Top Soil	0	3	
Shaley	3	8	
[illegible]	8	60	
[illegible]	60	400	✓

NOTE: 3/4 GPM

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

DRILLERS IDENT NO. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 5 NO. OF POUNDS 500

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 70 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: ST | Nominal diameter top (main) casing (nearest inch): 6 | Total depth of main casing (nearest foot): 70

OTHER CASING (if used): diameter inch, depth (feet) from, to

SCREEN RECORD

screen type or open hole insert appropriate code below: ST STEEL, BR BRASS BRONZE, HO OPEN HOLE, PL PLASTIC, OT OTHER

C2

EACH SCREEN: HO | DEPTH (nearest ft.) 70 | 400

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK from to

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

T TELESCOPE CASING | (E.R.O.S.) LOG INDICATOR | WQ OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 1

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 60

WHEN PUMPING 400

TYPE OF PUMP USED (for test)

A air, P piston, T turbine, C centrifugal, R rotary, O other (describe below), J jet, S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above / − below LAND SURFACE 2 (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

[illegible] well

COUNTY

WELL ABANDONMENT REPORT

Date: 9-11-91

PERMIT NUMBER OF ABANDONED WELL (if any) | MO | TKG | | - | | | | |

DRILLER'S NAME Wuschner [illegible], Joseph
LAST FIRST

OWNER'S NAME Schneider, Karl
LAST FIRST

WELL LOCATION:

COUNTY: Howard

SUBDIVISON: ______

SECTION: ______ LOT: ______

NEAREST TOWN: SYKESVILLE

ADDRESS: 1765 Rt 32

MARYLAND GRID LOCATION:

E 810

N 540

0/5	5/5
X	
0/0	5/0

SHOW WELL LOCATION BY (X) WITHIN BOX

TYPE OF WELL

- [x] DRILLED
- [ ] JETTED
- [ ] BORED OR AUGERED
- [ ] OTHER, SPECIFY

DEPTH OF WELL 200 FT.

TYPE OF CASING

- [x] STEEL
- [ ] PLASTIC
- [ ] CONCRETE
- [ ] OTHER, SPECIFY

SIZE OF CASING 6" IN.

WAS ANY CASING REMOVED [x] YES [ ] NO

IF YES, AMOUNT REMOVED 4 FT.

WAS CASING RIPPED OR PERFORATED [ ] YES [x] NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	TO
Gravel	200	25
Cement	25	3
Back Fill	3	0

DRILLER [signature]
SIGNATURE

LICENSE# [illegible]