EMERGENCY/TEMP NO. IF ANY						
B 1 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL					
1 2 3 6 (THIS NUMBER'IS TO BE PUNCHED IN COLS. 36 ON ALL CARDS)	please print or type		<sup>70</sup> fill in this form completely <sup>79</sup>			
	ION	B 3	LOCATION OF WELL			
8 13		8 COUNTY				
15 Last Name Owner Fir 36 Street or RFD	rst Name 34 55	23 SUBDIVISION SECTION				
57 Town 70 State 72 Zip 76		44 46 48 50 52 NEAREST TOWN 71				
DRILLER INFORMATION		MILES FROM TOWN (ent	er 0 if in town)			
Driller's Name	77 License No. 80	<b>B</b> 4 1 2	River Clinks On P			
Firm Name	CA 19231	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30 NORTH			
Signature	Date		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WE EAST			
B 2 WELL INFORMATION	राग					
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		Sw S SE 8-9 8	34 37 DISTANCE FROM ROAD ENTER FT or MI 38 39			
USE FOR WATER (CIRCLE APPROPRIATE BOX) D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
		COUNTY NAME COUNTY NO.				
22 I INDUSTRIAL, COMMERCIAL, STATE AND OTHER (REQUIRES APPROPRIATION PER	RMIT)	OEP SIGNATURE DATE ISSUED	STATE HEALTH INSERT S			
	PUBLIC OR PRIVATE WATER COMPANY (REQUIRES P APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)		43 48 CO SIGNATURE EXP. DATE			
TEST, OBSERVATION, MONITORING (MA APPROPRIATION PERMIT)	NY REQUIRE	NORTH GRID 50	55 57 63			
APPROXIMATE DEPTH OF WELL	FEET	SHOW MAJOR FEATUR BOX & LOCATE WELL _ WITH AN X	WEL OF			
APPROXIMATE DIAMETER OF WELL	NEAREST	SOURCES OF DRILLING 1. 2.				
METHOD OF DRILLING (cire BORED (or Augered) JETTED	cle one) Jetted & <u>DRIVEN</u>	3. WRITE THE BOX NUMB	ER SIDE			
30- 37 <u>AIR-ROT</u> ary <u>AIR-PER</u> cussion <u>ROT</u> <u>CABLE</u> <u>REV</u> erse-ROTary	ARY (Hydraulic Rotary) DRive-POINT	FROM THE MAP HERE	5/23/06			
other		E	BIT 000 RIT			
REPLACEMENT OR DEEPENED (CIRCLE APPROPRIATE BOX		DRAW A SKETCH BELC	W SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVE			
N THIS WELL WILL NOT REPLACE AN EXI			TO NEAREST ROAD JUNCTION			
ABANDONED AND SEALED 39 S THIS WELL WILL REPLACE A WELL THA AS A STANDBY	AT WILL BE USED					
D THIS WELL WILL DEEPEN AN EXISTING		and the state of	Sta KI			
(IF AVAILABLE) 41		6				
Not to be filled in by driller (OEP US APPROP. PERMIT NUMBER		10	and an and a second			
FORCE WRITE INITIALS PERMIT NO	74 75 76 77 78 79	The second state	Klass de de			
SPECIAL CONDITIONS						

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HEALTH

C 1 SEQUENCE NO. (OEP USE ONLY) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 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
DATE Received DATE WELL COMPLE		PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37
OWNER last name STREET OR RFD last name SUBDIVISION		LOT 46
WELL LOG         WELL LOG         Not required for driven wells         STATE THE KIND OF FORMATIONS         PENETRATED, THEIR COLOP, DEPTH,         THICKNESS AND IF WATER BEARING         DESCRIPTION (Use         FEET         Additional sheets if needed)         FROM TO bearing	GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM 45 46 NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from ft. to ft.	C 3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min. 15 to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
brown shale 20' 46'	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface) Casing CASING RECORD types insert appropriate code below PLASTIC OTHER	BEFORE PUMPING 17 20 WHEN PUMPING 22 25 TYPE OF PUMP USED (for test) A air 27 piston 27 turbine 27 27
wate 46' w'	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O other 27 (describe 27 below) J jet S submersible 27 27
brown d gray 69' 90'	E     OTHER CASING (if used)       A     diameter       C     inch       H     inch       S     Image: Screen type       Screen type     SCREEN RECORD	PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES OF NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED
ucter losting	or open hole insert appropriate code below C 2	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER 37 41
CIRCLE APPROPRIATE LETTER	$\begin{bmatrix} 1 & 2 \\ 2 & 0 \\ 2 $	PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL IHEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED	E 3 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER (NEAREST OF SCREEN 56 60 INCH)	LOCATION OF WELL ON LOT A SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN TH ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATIC PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BE OF MY KNOWLEDGE. DRILLERS IDENT. NO.	GRAVEL PACK 10 F GRAVEL PACK 1 IF WELL DRILLED WAS FLOWING WELL INSERT 68 OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE LOG OTHER DATA	Be AT 100' an well

Page of Date <u>5/23</u>	186	·		if 13/ sc of s. Abd
		FIELD DATA . HOWARD COUNTY WEL		
	. HO - 81-11	418		
abdivision /	operty (road)	River Clyde	Dr <u>46</u> Block Plat er Oscar Schultz	Sec.
ell Driller	Um. Rece	Rart Own	or Oscar Schultz	Inc.
Depth o Distanc	f well (). e of measuring po		round surface	
. High rate	pumping rese	rvoir drawdown		
			Pumping rate 12 r level 40 ft. recorded every 15 minu	
TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:00	30'	255ec		12
10:15	40'	27500		11
10:30				
10:45				
11:00				
11:45				
12:00				
12:15				
12:30				
12:45				
				× ×
1:00		22000		11
	40'	27sec		
1:00	40'			
1:00	401			
1:00	401	,		
1:00	401	,		
1:00	401	,		
1:00	401	,		
1:00	401	,		