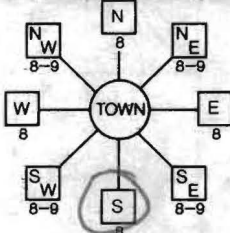
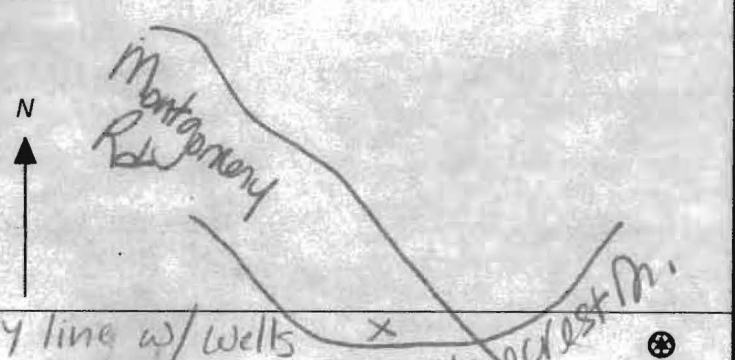


B 1 1 2 3 6 <b>2174</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b> please type <b>W525194</b>	STATE PERMIT NUMBER <b>HO - 95 - 0500</b> 70 <b>fill in this form completely</b> 79
Date Received (APA) 8 MM DD YY 13 <b>Bruiuglio John</b> 15 Last Name Owner First Name 34 <b>4467 Stonecrest Dr.</b> 36 Street or RFD 55 <b>Ellicott City, MD</b> 57 Town 70 State 72 Zip 76		B 3 <b>Howard</b> LOCATION OF WELL 8 COUNTY 21 23 SUBDIVISION 42 SECTION 44 46 LOT <b>3</b> 48 50 <b>Ellicott City</b> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <b>3</b> M I 73 76 77 78	
DRILLER INFORMATION <b>Michael Barlow</b> MW D. 355 Driller's Name 76 License No. 81 <b>Michael Barlow Well Drilling Svc Inc.</b> Firm Name <b>522 Underwood Ln Bel Air, MD 21034</b> Address <b>Michael Barlow</b> 7/1/06 Signature Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD 30 <b>4467 Stonecrest Dr.</b> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 50 37 DISTANCE FROM ROAD 38 39 ENTER FT OR MI <b>FT</b> TAX MAP: <b>31</b> BLK: <b>1</b> PARCEL <b>445</b>	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 <b>0</b> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20 <b>000</b>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <b>HOWARD</b> (13) <b>W525194</b> COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S → DATE ISSUED <b>8/10/06</b> <b>Delia A. Ly</b> <b>8/10/07</b> 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <b>515</b> 0 0 0 EAST GRID <b>855</b> 0 0 0 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input checked="" type="checkbox"/> GEO-THERMAL <b>3 bores @ 225'ea</b>		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <b>8545</b> N <b>550 515</b> 000 000 513	
APPROXIMATE DEPTH OF WELL <b>225</b> FEET 24 28 APPROXIMATE DIAMETER OF WELL <b>6</b> INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTary <b>AIR-PERCussion</b> ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTary DRIVE-POINT other	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <b>G</b> PERMIT No. <b>HO-95-0500</b> 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS <b>Maintain 10' from property line w/ wells</b> NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

C1 8938

SEQUENCE NO.  
(MDE USE ONLY)STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)COUNTY  
NUMBER

W 525194

ST/CO USE ONLY  
DATE Received  
MM DD YY

DATE WELL COMPLETED

Depth of Well

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

8 13

MM DD YY  
10/2/0422 225 26  
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER Bruiguglio John  
STREET OR RFD 4461 Stonecrest Dr TOWN Ellicott City  
SUBDIVISION \_\_\_\_\_ SECTION \_\_\_\_\_ LOT 3

## WELL LOG

Not required for driven wells

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)yes no  
Y N  
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BCNO. OF BAGS 10 NO. OF POUNDS 200GALLONS OF WATER 260

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
below  
MAIN CASING TYPE  
Nominal diameter  
top (main) casing  
(nearest inch)  
Total depth  
of main casing  
(nearest foot)ST CO  
STEEL CONCRETE  
PL OT  
PLASTIC OTHER

60 61 63 64 66 70

## OTHER CASING (if used)

EACH CASING  
diameter depth (feet)  
inch from to

## SCREEN RECORD

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

## C 2 DEPTH (nearest ft.)

1 2  
E 8 9 11 15 17 21  
A 23 24 26 30 32 36  
H 38 39 41 45 47 51  
S  
C 3  
R  
E  
E  
N  
SLOT SIZE 1 2 3DIAMETER  
OF SCREEN (NEAREST  
INCH)  
56 60  
from toGRAVEL PACK  
IF WELL DRILLED  
WAS FLOWING WELL  
INSERT F IN BOX 68 68MDE USE ONLY  
(NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q70 72 74 75 76  
TELESCOPE LOG  
CASING INDICATOR OTHER DATA

C 3

## PUMPING TEST

HOURS PUMPED (nearest hour) 8 9

PUMPING RATE (gal. per min.) 11 15

METHOD USED TO  
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20 ft.

WHEN PUMPING 22 25 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine  
C centrifugal R rotary O other  
J jet S submersible

## PUMP INSTALLED

DRILLER INSTALLED PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION  
MUST BE COMPLETED FOR ALL WELLS.TYPE OF PUMP INSTALLED  
PLACE (A,C,J,P,R,S,T,O)  
IN BOX 29 29CAPACITY:  
GALLONS PER MINUTE  
(to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH  
(nearest ft.) 43 47CASING HEIGHT (circle appropriate box  
and enter casing height)  
+ above LAND SURFACE (nearest  
foot)  
- below 49 50 51

## 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)

House

47' 20'

NUMBER OF UNSUCCESSFUL WELLS

WELL HYDROFRACTURED yes no  
Y N

## 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 LIC. NO. 1 M D 355

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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



C1 8932

SEQUENCE NO.  
(MDE USE ONLY)STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN  
5 DAYS AFTER WELL IS COMPLETED.1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)COUNTY  
NUMBER

W525194

ST/CO USE ONLY

DATE Received  
MM DD YY  
8 13

DATE WELL COMPLETED

MM DD YY  
10 2 06  
15 20

Depth of Well

22 225 26  
(TO NEAREST FOOT)PERMIT NO.  
FROM "PERMIT TO DRILL WELL"H0 - 95 - 0500  
28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

SUBDIVISION

Brylguilio, John  
4401 Stonecrest Dr

first name

TOWN

Ellicott City

SECTION

LOT

3

## WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR  
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use  
additional sheets if needed)

FEET

FROM TO

check  
if water  
bearingDig  
Hard Brown 3 68  
Hard Grey 68 225

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

yes no

Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT

CM

BENTONITE CLAY

BC

NO. OF BAGS 10 NO. OF POUNDS 20

GALLONS OF WATER 20

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
below

ST

STEEL

CO

CONCRETE

PL

PLASTIC

OT

OTHER

MAIN  
CASING  
TYPENominal diameter  
top (main) casing  
(nearest inch)Total depth  
of main casing  
(nearest foot)

60 61 63 64 66 70

E  
A  
C  
H  
C  
A  
S  
I  
N  
G

OTHER CASING (if used)

diameter

depth (feet)

inch

from to

screen type  
or open hole(insert  
appropriate  
code  
below)

## SCREEN RECORD

ST

STEEL

BR

BRASS

PL

PLASTIC

HO

OPEN

OT

OTHER

C 2

DEPTH (nearest ft.)

E 1 8 9 11 15 17 21  
A 2 23 24 26 30 32 36  
C 3 38 39 41 45 47 51  
H 49 50 51  
S 52 53 54 55 56 57 58  
C 59 60 61 62 63 64 65  
R 66 67 68 69 70 71 72  
E 73 74 75 76 77 78 79  
S 80 81 82 83 84 85 86  
C 87 88 89 90 91 92 93  
H 94 95 96 97 98 99 100  
S 101 102 103 104 105 106 107  
C 108 109 110 111 112 113 114  
H 115 116 117 118 119 120 121  
S 122 123 124 125 126 127 128  
C 129 130 131 132 133 134 135  
H 136 137 138 139 140 141 142  
S 143 144 145 146 147 148 149  
C 150 151 152 153 154 155 156  
H 157 158 159 160 161 162 163  
S 164 165 166 167 168 169 170  
C 171 172 173 174 175 176 177  
H 178 179 180 181 182 183 184  
S 185 186 187 188 189 190 191  
C 192 193 194 195 196 197 198  
H 199 200 201 202 203 204 205  
S 206 207 208 209 210 211 212  
C 213 214 215 216 217 218 219  
H 220 221 222 223 224 225 226  
S 227 228 229 230 231 232 233  
C 234 235 236 237 238 239 240  
H 241 242 243 244 245 246 247  
S 248 249 250 251 252 253 254  
C 255 256 257 258 259 260 261  
H 262 263 264 265 266 267 268  
S 269 270 271 272 273 274 275  
C 276 277 278 279 280 281 282  
H 283 284 285 286 287 288 289  
S 290 291 292 293 294 295 296  
C 297 298 299 300 301 302 303  
H 304 305 306 307 308 309 310  
S 311 312 313 314 315 316 317  
C 318 319 320 321 322 323 324  
H 325 326 327 328 329 330 331  
S 332 333 334 335 336 337 338  
C 339 340 341 342 343 344 345  
H 346 347 348 349 350 351 352  
S 353 354 355 356 357 358 359  
C 360 361 362 363 364 365 366  
H 367 368 369 370 371 372 373  
S 374 375 376 377 378 379 380  
C 381 382 383 384 385 386 387  
H 388 389 390 391 392 393 394  
S 395 396 397 398 399 400 401  
C 402 403 404 405 406 407 408  
H 409 410 411 412 413 414 415  
S 416 417 418 419 420 421 422  
C 423 424 425 426 427 428 429  
H 430 431 432 433 434 435 436  
S 437 438 439 440 441 442 443  
C 444 445 446 447 448 449 450  
H 451 452 453 454 455 456 457  
S 458 459 460 461 462 463 464  
C 465 466 467 468 469 470 471  
H 472 473 474 475 476 477 478  
S 479 480 481 482 483 484 485  
C 486 487 488 489 490 491 492  
H 493 494 495 496 497 498 499  
S 500 501 502 503 504 505 506  
C 507 508 509 510 511 512 513  
H 514 515 516 517 518 519 520  
S 521 522 523 524 525 526 527  
C 528 529 530 531 532 533 534  
H 535 536 537 538 539 540 541  
S 542 543 544 545 546 547 548  
C 549 550 551 552 553 554 555  
H 556 557 558 559 560 561 562  
S 563 564 565 566 567 568 569  
C 570 571 572 573 574 575 576  
H 577 578 579 580 581 582 583  
S 584 585 586 587 588 589 590  
C 591 592 593 594 595 596 597  
H 598 599 600 601 602 603 604  
S 605 606 607 608 609 610 611  
C 612 613 614 615 616 617 618  
H 619 620 621 622 623 624 625  
S 626 627 628 629 630 631 632  
C 633 634 635 636 637 638 639  
H 640 641 642 643 644 645 646  
S 647 648 649 650 651 652 653  
C 654 655 656 657 658 659 660  
H 661 662 663 664 665 666 667  
S 668 669 670 671 672 673 674  
C 675 676 677 678 679 680 681  
H 682 683 684 685 686 687 688  
S 689 690 691 692 693 694 695  
C 696 697 698 699 700 701 702  
H 703 704 705 706 707 708 709  
S 710 711 712 713 714 715 716  
C 717 718 719 720 721 722 723  
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C 738 739 740 741 742 743 744  
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C 759 760 761 762 763 764 765  
H 766 767 768 769 770 771 772  
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C 801 802 803 804 805 806 807  
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C 885 886 887 888 889 890 891  
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C 906 907 908 909 910 911 912  
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H 976 977 978 979 980 981 982  
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C 1116 1117 1118 1119 1120 1121 1122  
H 1123 1124 1125 1126 1127 1128 1129  
S 1130 1131 1132 1133 1134 1135 1136  
C 1137 1138 1139 1140 1141 1142 1143  
H 1144 1145 1146 1147 1148 1149 1150  
S 1151 1152 1153 1154 1155 1156 1157  
C 1158 1159 1160 1161 1162 1163 1164  
H 1165 1166 1167 1168 1169 1170 1171  
S 1172 1173 1174 1175 1176 1177 1178  
C 1179 1180 1181 1182 1183 1184 1185  
H 1186 1187 1188 1189 1190 1191 1192  
S 1193 1194 1195 1196 1197 1198 1199  
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C 1767 1768 1769 1770 1771 1772 1773  
H 1774 1775 1776 1777 1778 1779 1780  
S 1781 1782 1783 1784 1785 1786 1787  
C 1788 1789 1790 1791 1792 1793 1794  
H 1795 1796 1797 1798 1799 1800 1801  
S 1802 1803 1804 1805 1806 1807 1808  
C 1809 1810 1811 1812 1813 1814 1815  
H 1816 1817 1818 1819 1820 1821 1822  
S 1823 1824 1825 1826 1827 1828 1829  
C 1830 1831 1832 1833 1834 1835 1836  
H 1837 1838 1839 1840 1841 1842 1843  
S 1844 1845 1846 1847 1848 1849 1850  
C 1851 1852 1853 1854 1855 1856 1857  
H 1858 1859 1860 1861 1862 1863 1864  
S 1865 1866 1867 1868 1869 1870 1871  
C 1872 1873 1874 1875 1876 1877 1878  
H 1879 1880 1881 1882 1883 1884 1885  
S 1886 1887 1888 1889 1890 1891 1892  
C 1893 1894 1895 1896 1897 1898 1899  
H 1900 1901 1902 1903 1904 1905 1906  
S 1907 1908 1909 1910 1911 1912 1913  
C 1914 1915 1916 1917 1918 1919 1920  
H 1921 1922 1923 1924 1925 1926 1927  
S 1928 1929 1930 1931 1932 1933 1934  
C 1935 1936 1937 1938 1939 1940 1941  
H 1942 1943 1944 1945 1946 1947 1948  
S 1949 1950 1951 1952 1953 1954 1955  
C 1956 1957

C1 8937

SEQUENCE NO.  
(MDE USE ONLY)STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)COUNTY  
NUMBER W525194ST/CO USE ONLY  
DATE Received  
MM DO YY

DATE WELL COMPLETED

MM DO YY  
10/2/06

Depth of Well

22 225 26  
(TO NEAREST FOOT)PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

H0 - 95 - 0500

OWNER Bruiguglio, John  
STREET OR RFD 4467 Stonercrest Dr first name TOWN Ellicott City  
SUBDIVISION 11/2/06 OK GAC SECTION 11/2/06 OK GAC LOT 13

## WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR  
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use  
additional sheets if needed)FEET  
FROM TOcheck  
if water  
bearingDist  
Soft Brown 0 3  
Hard Grey 3 60  
60 225

Geo Hole #1

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

yes no

Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM

BENTONITE CLAY BC

NO. OF BAGS 45 46 NO. OF POUNDS 45 46

GALLONS OF WATER 261

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
belowST  
STEELCO  
CONCRETEPL  
PLASTICOT  
OTHERMAIN  
CASING  
TYPENominal diameter  
top (main) casing  
(nearest inch)Total depth  
of main casing  
(nearest foot)

60 61 63 64 66 70

EACH CASING OTHER CASING (if used)  
diameter depth (feet)  
inch from toscreen type  
or open hole

## SCREEN RECORD

(insert  
appropriate  
code  
below)ST  
STEELBR  
BRASSHO  
OPEN  
HOLEPL  
BRONZEOT  
OTHERPL  
PLASTICOT  
OTHER

C 2 DEPTH (nearest ft.)

1 2  
E 1 8 9 11 15 17 21  
A 23 24 26 30 32 36  
C 38 39 41 45 47 51  
R  
E  
N

SLOT SIZE 1 2 3

DIAMETER  
OF SCREEN (NEAREST  
INCH)

from to

GRAVEL PACK IF WELL DRILLED  
WAS FLOWING WELL  
INSERT F IN BOX 68 68MDE USE ONLY  
(NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q70 72 74 75 76  
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

## PUMPING/TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO  
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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 INSTALLED PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION  
MUST BE COMPLETED FOR ALL WELLS.TYPE OF PUMP INSTALLED  
PLACE (A,C,J,P,R,S,T,O)  
IN BOX 29CAPACITY:  
GALLONS PER MINUTE  
(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH  
(nearest ft.)CASING HEIGHT (circle appropriate box  
and enter casing height)

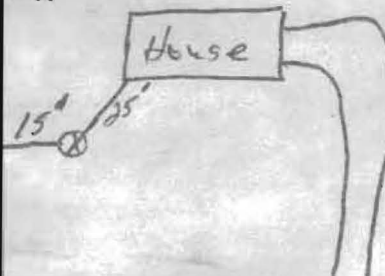
+ above

LAND SURFACE

- below

(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)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes

no

Y

N

## 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  
WELLI 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 LIC. NO. 1 M D 355

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

