

B 1		SEQUENCE NO. (WRA USE ONLY)		STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER HC 73-1917	
1 2 3 (SEQ. NO.) 4 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				DATE RECEIVED (WRA USE ONLY) 4/25/77 2:00 P.M.			
OWNER		COL 15 LAST NAME		FIRST NAME		COL 34	
STREET OR RFD		COL 36		COL 55			
POST OFFICE		COL 57		COL 76			

B 1 CONTINUED 1 2 3 (SEQ. NO.) 4 DATE LICENSE NUMBER FIRST NAME DRILLER LAST NAME SIGNATURE				B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 4 COUNTY SUBDIVISION SECTION LOT NEAREST TOWN MILES FROM TOWN (ENTER 0 IF IN TOWN) M I			
B 2 WELL INFORMATION 1 2 3 (SEQ. NO.) 4 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) USE FOR WATER (CIRCLE APPROPRIATE BOX) ☐ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING, AGRICULTURE, IRRIGATION ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. ☐ MUNICIPAL WATER SUPPLY ☐ PRIVATE WATER COMPANY ☐ TEST MUST HAVE STATE HEALTH DEPT. APPROVAL				B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 4 N NORTH E EAST NE NORTHEAST SE SOUTHEAST S SOUTH W WEST NW NORTHWEST SW SOUTHWEST NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) FT M I			

APPROXIMATE DEPTH OF WELL APPROXIMATE DIAMETER OF WELL METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) JETTED DRIVEN 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) CABLE REVERSE-ROTARY DRIVE-POINT OTHER (DESCRIBE)		REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) ☐ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE)	
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER FORCE WRITE INITIALS IN BOX CONDITIONS		ENGINEER REVIEW DISTRICT NO. A E N S G W Q C L U APPROVED BY SPECIAL CONDITIONS 8-63 (WRA USE ONLY)	

B 4 CONTINUED 1 2 3 (SEQ. NO.) 4 STATE HEALTH (CIRCLE BOX) MO. DAY YR. DATE HEALTH DEPARTMENT APPROVAL				NORTH COORDINATE EAST COORDINATE ELEVATION AT WELL HEAD (FEET) O/S			
B 5 1 2 3 (SEQ. NO.) 4 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)				HEALTH			

6/3/77
 Lot 11
 53' casing
 > 35' open hole (string caught & broke)
 15 bags cement.
 great OK.
 W.W.E.

6/3/77
 Lot 11
 53' casing
 > 35' open hole (string caught & broke)
 15 bags cement.
 great OK.
 W.W.E.

C 1 3286

SEQUENCE NO.
(WRA USE ONLY)
LOT1 2 3 (SEQ. NO.)
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-5 ON ALL CARDS)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITH-
IN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBERDATE RECEIVED
(WRA USE ONLY)

DATE WELL COMPLETED

DEPTH OF WELL

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

OWNER

LAST NAME

FIRST NAME

STREET OR RFD

POST OFFICE

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
40 70			

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES	NO
☒ Y	☐ N
44	44

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT	BENTONITE CLAY
☒ CM	☒ BC
45 46	45 46

NO. OF BAGS 15 NO. OF POUNDS 1500

GALLONS OF WATER 65

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM	FT.	TO	FT.
48	52	54	58

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CIRCLING TYPES INSERT APPROPRIATE CODE BELOW	STEEL	CONCRETE
	☒ ST	☐ CO
	PLASTIC	OTHER
	☐ PL	☐ OT

MAIN
CASING
TYPENOMINAL DIAMETER
TOP (MAIN) CASING
(NEAREST INCH)TOTAL DEPTH
OF MAIN CASING
(NEAREST FOOT)

60	61	63	64	66	70
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OTHER CASING (IF USED)

DIAMETER (INCH)

DEPTH (FEET)

SCREEN TYPE OR OPEN HOLE

SCREEN RECORD

CIRCLING TYPES INSERT APPROPRIATE CODE BELOW	STEEL	BRASS	OPEN HOLE
	☒ ST	☐ BR	☐ HO
	PLASTIC	OTHER	
	☐ PL	☐ OT	

C 2

1 2 3 (SEQ. NO.) 5

DEPTH (NEAREST WHOLE FOOT)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

DIAMETER OF SCREEN 56 (NEAREST INCH)

FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A
FLOWING WELL CIRCLE BOX

68 F

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

T	E.P.O.S.	W D
☐ 70	☐ 72	☐ 74 75 76
TELESCOPE CASING	LOG INDICATOR	OTHER DATA AVAILABLE

C 3

1 2 3 (SEQ. NO.) 5

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR)

PUMPING RATE
GALLONS PER MINUTE TO NEAREST GALLONMETHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 17 (NEAREST FOOT)

WHEN PUMPING 22 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)

AIR	PISTON	TURBINE
☐ A	☐ P	☐ T
27	27	27
CENTRIFUGAL	ROTARY	OTHER (DESCRIBE BELOW)
☐ C	☐ R	☐ O
27	27	27
JET	SUBMERSIBLE	
☐ J	☐ S	
27	27	

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN
BOX - SEE ABOVE: A, C, J, P, R, S, T, O)DRILLER WILL INSTALL PUMP
(CIRCLE APPROPRIATE BOX)

CAPACITY:

GALLONS PER MINUTE
(TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(NEAREST FOOT)

CASING HEIGHT

(CIRCLE APPROPRIATE BOX
AND ENTER CASING HEIGHT)

+	ABOVE	LAND SURFACE	(NEAREST FOOT)
-	BELOW		
49	50	51	

LOCATION OF WELL ON LOT

N 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 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 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

(PLEASE
PRINT)

SIGNATURE

7/8

228 ft deep:

7 gpm

40' casing

38' open hole (1' casing
above ground)

15 bags cement.

OK

WWZ
