
WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 10-06-17 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

* PERSON ABANDONING WELL: Lester Summons Sr. WELL DRILLER'S LICENSE NUMBER: 307

CIRCLE: MWD / MSD / MGD

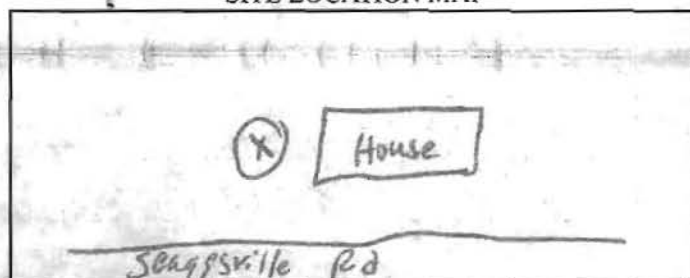
* OWNER'S NAME: Brian Henders

SITE LOCATION MAP

* WELL LOCATION:
COUNTY: Howard
NEAREST TOWN: COLUMBIA
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
STREET ADDRESS: 10973 Seaggsville Rd.

LATITUDE 39.143611

LONGITUDE 77.892832



LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement	39	4
Backfill	4	0

* TYPE OF WELL BEING ABANDONED:

_____☐ DRILLED _____☐ JETTED
_____☐ BORED _____☒ HAND DUG
_____☐ OTHER (specify) _____

* USE CODE:

_____☒ DOMESTIC _____☐ MUNICIPAL/PUBLIC
_____☐ IRRIGATION _____☐ INDUSTRIAL
_____☐ TEST/OBSERVATION _____☐ GEOTHERMAL

* TYPE OF CASING:

_____☐ STEEL _____☐ PLASTIC
_____☐ CONCRETE _____☐ OTHER (specify) _____

SIZE OF CASING: 36 INCHES IN DIAMETER

DEPTH OF WELL: 39 FEET DEEP

WAS ANY CASING REMOVED? _____ YES ☒ NO

If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? _____ YES ☒ NO

Lester C Summons Sr.

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

307

MWD / MSD / MGS

CIRCLE ONE

10-6-17

DATE

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