

B 1 <b>6373</b> THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS	SEQUENCE NO. WRA USE ONLY	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> please print or type	WRA PERMIT NUMBER <b>HO-73-3958</b> fill in this form completely
DATE RECEIVED <b>7-13-81</b> B 1 WRA USE ONLY 53 OWNER INFORMATION		B 3 <b>LOCATION OF WELL</b> COUNTY <u>Howard</u> SUBDIVISION _____ SECTION _____ LOT _____ NEAREST TOWN <u>Bladensburg</u> MILES FROM TOWN <u>2.74</u> <b>MI</b>	
LAST NAME <u>Learning</u> OWNER <u>James</u> FIRST NAME _____ <u>15491</u> <u>Robberson Rd</u> STREET OR R.F.D. _____ TOWN <u>Adelphi</u> STATE <u>MD</u> ZIP <u>21735</u>		B 4 <b>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</b> 	
B 1 CONTINUED <b>DRILLER INFORMATION</b> DRILLER'S NAME <u>Joseph L. Wagner</u> LICENSE NO. <u>2138</u> SIGNATURE <u>Joseph L. Wagner</u> DATE <u>July 14, 81</u>		<u>Robberson Rd</u> NEAR WHAT ROAD _____ ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 	
B 2 <b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>250</u>		DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) <u>200</u>	
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING MAY REQUIRE APPROPRIATION PERMIT		SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX <div style="border: 1px solid black; width: 100px; height: 100px; text-align: center; margin: 20px auto;">X</div>	
APPROXIMATE DEPTH OF WELL <u>140</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCHES		WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <u>7805</u>  <u>5107</u> </div>	
<b>Method of Drilling</b> circle one BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> JETTED & DRIVEN <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE ROTARY <input type="checkbox"/> DR. FE-POINT <input type="checkbox"/> ROTARY <input type="checkbox"/> other <u>AIR-ROT</u>		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
<b>REPLACEMENT OR DEEPEENED WELLS</b> Circle Appropriate Box <input 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 <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) _____		B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>A31493</u> STATE HEALTH CIRCLE BOX <u>5</u>	
Not to be filled in by driller (WRA USE ONLY) APPROX. PERMIT NUMBER _____ WRITE INITIALS IN BOX <u>HS</u> CONDITIONS <u>H.O-73-3958</u>		EHA SIGNATURE <u>Frank Skinner</u> DATE <u>7/14/81</u> NORTH <u>517</u> EAST <u>0785</u> ELEV. (FT.) _____ GRID _____	
SPECIAL CONDITIONS _____ (WRA USE ONLY)			

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<b>C1</b>	<b>8134</b>	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED
Date Received (WRA use only) <b>JUL 30 1981</b>		DATE WELL COMPLETED <b>07/23/81</b>		Depth of Well <b>145</b> (TO NEAREST FOOT)	COUNTY NUMBER <b>A 31493</b>
OWNER <b>Lanning</b>		FIRST NAME <b>James</b>		PERMIT NO. FROM "PERMIT TO DRILL WELL" <b>H0-73-3958</b>	
STREET OR RFD <b>15491 Roxbury Road</b>		TOWN <b>Glenwood</b>			
SURDIVISION		SECTION		LOT	

  

<p>Not required for driven wells</p> <p>STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">Check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td><b>Brown Shale</b></td> <td><b>0</b></td> <td><b>46</b></td> <td></td> </tr> <tr> <td><b>Blue Rock</b></td> <td><b>46</b></td> <td><b>145</b></td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table>	DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing	FROM	TO	<b>Brown Shale</b>	<b>0</b>	<b>46</b>		<b>Blue Rock</b>	<b>46</b>	<b>145</b>	<input checked="" type="checkbox"/>	<p>WELL HAS BEEN GROUTED (Circle Appropriate Box)</p> <p>TYPE OF GROUTING MATERIAL CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input checked="" type="checkbox"/></p> <p>NO. OF BAGS <b>16</b> NO. OF POUNDS <b>1504</b></p> <p>GALLONS OF WATER <b>46</b></p> <p>DEPTH OF GROUT SEAL (to nearest foot) from <b>0</b> ft to <b>145</b> ft</p> <p>CASING RECORD</p> <p>Insert appropriate code below</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> STEEL</td> <td><input checked="" type="checkbox"/> CONCRETE</td> </tr> <tr> <td><input checked="" type="checkbox"/> PLASTIC</td> <td><input checked="" type="checkbox"/> OTHER</td> </tr> </table> <p>MAIN CASING TYPE <b>S</b></p> <p>Normal diameter top/main casing (nearest inch) <b>6</b></p> <p>Total depth of main casing (nearest foot) <b>145</b></p> <p>OTHER CASING (if used) diameter inch _____ depth feet from _____ to _____</p> <p>SCREEN RECORD</p> <p>Insert appropriate code below</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> STEEL</td> <td><input checked="" type="checkbox"/> BRASS</td> <td><input checked="" type="checkbox"/> OPEN HOLE</td> </tr> <tr> <td><input checked="" type="checkbox"/> PLASTIC</td> <td><input checked="" type="checkbox"/> BRONZE</td> <td><input checked="" type="checkbox"/> OTHER</td> </tr> </table> <p><b>C2</b></p> <p>DEPTH (nearest ft.) <b>48</b> <b>145</b></p> <p>SLOT SIZE _____</p> <p>DIAMETER OF SCREEN _____ (NEAREST INCH)</p> <p>GRAVEL PACK _____</p> <p>IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX <input checked="" type="checkbox"/></p>	<input checked="" type="checkbox"/> STEEL	<input checked="" type="checkbox"/> CONCRETE	<input checked="" type="checkbox"/> PLASTIC	<input checked="" type="checkbox"/> OTHER	<input checked="" type="checkbox"/> STEEL	<input checked="" type="checkbox"/> BRASS	<input checked="" type="checkbox"/> OPEN HOLE	<input checked="" type="checkbox"/> PLASTIC	<input checked="" type="checkbox"/> BRONZE	<input checked="" type="checkbox"/> OTHER	<p><b>C3</b></p> <p>PUMPING TEST</p> <p>HOURS PUMPED (nearest hour) <b>3</b></p> <p>PUMPING RATE (gal. per min. to nearest gal.) <b>9</b></p> <p>METHOD USED TO MEASURE PUMPING RATE <b>110</b></p> <p>WATER LEVEL (distance from land surface)</p> <p>BEFORE PUMPING <b>30</b></p> <p>WHEN PUMPING <b>90</b></p> <p>TYPE OF PUMP USED (for test)</p> <p><input checked="" type="checkbox"/> A centrifugal <input checked="" type="checkbox"/> P piston <input checked="" type="checkbox"/> T turbine</p> <p><input checked="" type="checkbox"/> C centrifugal <input checked="" type="checkbox"/> R rotary <input checked="" type="checkbox"/> O other (describe below)</p> <p><input checked="" type="checkbox"/> J jet <input checked="" type="checkbox"/> S submersible</p> <p>PUMP INSTALLED YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE</p> <p>TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) <input type="checkbox"/></p> <p>CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____</p> <p>PUMP HORSE POWER _____</p> <p>PUMP COLUMN LENGTH (nearest ft.) _____</p> <p>CASING HEIGHT (circle appropriate box and enter casing height)</p> <p><input checked="" type="checkbox"/> above <b>2</b></p> <p><input type="checkbox"/> below</p> <p>LAND SURFACE (nearest foot)</p> <p>LOCATION OF WELL ON LOT</p> <p>SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)</p>
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<p>CIRCLE APPROPRIATE BOX</p> <p><input checked="" type="checkbox"/> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED</p> <p><input checked="" type="checkbox"/> ELECTRIC LOG OBTAINED</p> <p><input checked="" type="checkbox"/> TEST WELL CONVERTED TO PRODUCTION WELL</p> <p>I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL REQUIREMENTS OF THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED HEREIN IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.</p> <p>DRILLER'S IDENT. NO. <b>238</b></p> <p>DRILLER'S SIGNATURE <b>James L. Lanning</b></p> <p>DRILLER'S MATCH SIGNATURE ON APPLICATION</p> <p>E SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)</p>	<p>WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)</p> <p>T _____ (E.R.O.S.)</p> <p>TELESCOPE CASING <input type="checkbox"/></p> <p>LOG INDICATOR <input type="checkbox"/></p> <p>OTHER DATA <input type="checkbox"/></p>
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