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.

SEQUENCE NO. (DENV USE ONLY): 4536
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER: RW 46811

ST/CO USE ONLY DATE Received:

DATE WELL COMPLETED: 02 26 91

Depth of Well: 227 (TO NEAREST FOOT)

R66166W OK 5/13/91 CW

PERMIT NO. FROM "PERMIT TO DRILL WELL": AO-88-1665

OWNER: VENEZA, Tom (last name, first name)
STREET OR RFD: 2920 Sharp Rd TOWN: Glenwood
SUBDIVISION: BILL SUBDIVISION 1 SECTION: LOT: 1

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
Dirt	0	9	
Soft Br. mica	9	40	
Soft Br. Mica	40	41	X
Soft Br. Mica	41	84	
Blue & Br. Sand-stone	84	96	
Br. Sandstone	96	97	X
Blue Sandstone	97	190	
Br. Sandstone	190	191	X
Blue Sandstone	191	227	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): Yes Y / No N
TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 14 NO. OF POUNDS 1,316
GALLONS OF WATER 84
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. (TOP) to 85 ft. (BOTTOM) (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL ST CONCRETE CO PLASTIC PL OTHER OT

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	87

OTHER CASING (if used)
EACH CASING

diameter inch	depth (feet) from	to

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

C 2
EACH SCREEN

	DEPTH (nearest ft.)	
1	RO 8 9	87 11 15 — 227 17 21
2	23 24	26 30 — 32 36
3	38 39	41 45 — 47 51

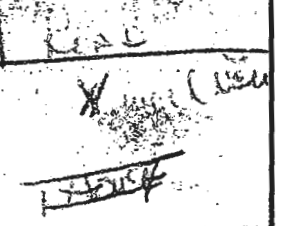
SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN ____ (NEAREST INCH) (56 60)

GRAVEL PACK from ____ to ____
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

C 3
PUMPING TEST
HOURS PUMPED (nearest hour): 3 (8 9)
PUMPING RATE (gal. per min. to nearest gal.): 7 (11 15)
METHOD USED TO MEASURE PUMPING RATE: Flowmeter
WATER LEVEL (distance from land surface)
BEFORE PUMPING: 36 (17 20)
WHEN PUMPING: 227 (22 25)
TYPE OF PUMP USED (for test)
A air (27) P piston (27) T turbine (27)
C centrifugal (27) R rotary (27) O other (describe below) (27)
J jet (27) S submersible (27)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO): YES
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED: HO
PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: (29)
CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31 35)
PUMP HORSE POWER (37 41)
PUMP COLUMN LENGTH (nearest ft.) (43 47)
CASING HEIGHT (circle appropriate box and enter casing height)
+ above / – below (49) LAND SURFACE
2 (nearest foot) (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)



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 IDENT. NO. 256
DANA KYKER JR. II

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Dana Kyker II 093

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) (E.R.O.S.) (72) W Q (74 75 76)
TELESCOPE CASING / LOG INDICATOR / OTHER DATA

STATE OF MARYLAND
PERMIT TO DRILL WELL

please print or type

B 1	8587
SEQUENCE NO. (DP USE ONLY)	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	
STATE PERMIT NUMBER	HO-88-1665

fill in this form completely

OWNER INFORMATION

Date Received (APA): 021191

Field	Value
Last Name / Owner / First Name	VENEZA TOM
Street or RFD	3920 SHARP ROAD
Town / State / Zip	GLENWOOD MD

DRILLER INFORMATION

Field	Value
Driller's Name	Dana Kyker Jr II
License No.	256
Firm Name	Westminster Rotary Well Drilling
Address	P.O. Box 861 Westminster MD 21157
Signature	Dana Kyker Jr II
Date	3/7/91

B 3 LOCATION OF WELL

Field	Value
COUNTY	HOWARD
SUBDIVISION	DILL
SECTION	
LOT	4
NEAREST TOWN	GLENWOOD
MILES FROM TOWN (enter 0 if in town)	2 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N, NE, E, SE, S, SW, W, NW — S circled

NEAR WHAT ROAD: SHARP ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH N, WEST W, 32, EAST E, SOUTH S — S circled

DISTANCE FROM ROAD: 30

ENTER FT or MI: FT

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 400

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- **D** HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) — circled
- **F** FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- **I** INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- **P** PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- **T** TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN

AIR-ROTary (circled) — AIR-PERcussion — ROTARY (Hydraulic Rotary)

CABLE — REVerse-ROTary — DRive-POINT

other ______

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- **N** THIS WELL WILL NOT REPLACE AN EXISTING WELL
- **Y** THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED — circled
- **S** THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY — crossed out
- **D** THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE): ______

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: HR (WRITE INITIALS IN BOX) — PERMIT No.: HO-88-1665

SPECIAL CONDITIONS: Tom Veneza H-442-1447

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Field	Value
COUNTY NAME	Howard
COUNTY NO.	RW 46811
STATE SIGNATURE	
INSERT S	
DATE ISSUED	021291
CO SIGNATURE	Mark E. Rifkin
EXP. DATE	8/12/91
NORTH GRID	521000
EAST GRID	0796000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X →

SOURCES OF DRILLING WATER

1. City
2.
3.

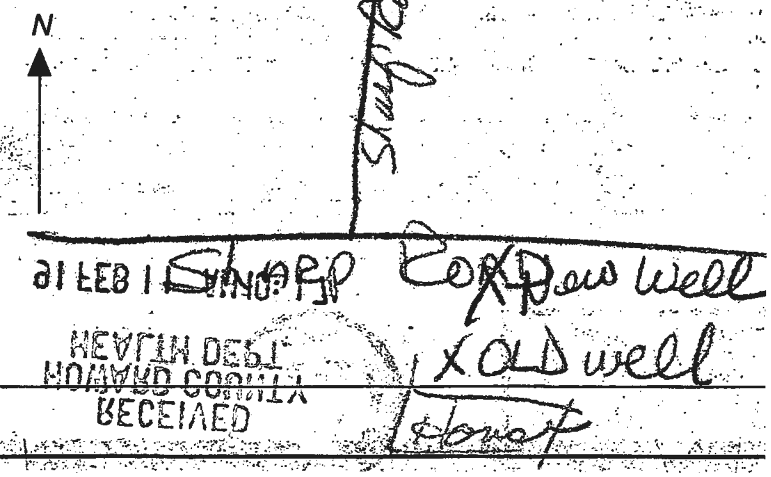
WRITE THE BOX NUMBER FROM THE MAP HERE

E: 7986

N: 5221

2/26/91 9:30-10:00
14 BAGS
87' CASING
85' GROUT
1½' CASING
LOC. OK
VTAG OK
MR 2/26/91
GROUT NOT OBS'D
A.G.
(X) well

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION.



RECEIVED HOWARD COUNTY HEALTH DEPT 91 FEB 11

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

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

DATE WELL ABANDONED: 4/4/01 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL: HO-88-1665

* PERSON ABANDONING WELL: Tom Venezia

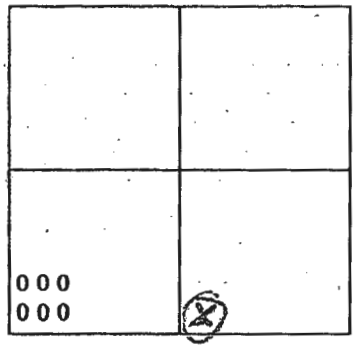
WELL DRILLERS LICENSE NUMBER: _____
CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Tom Venezia

* WELL LOCATION: 3920 Sharp Road

COUNTY: Howard
NEAREST TOWN: Glenwood
TAX MAP 21 BLOCK _____ PARCEL 107
SUBDIVISION: Dill
SECTION: _____ LOT: 4

MARYLAND GRID COORDINATES
BOX NUMBER E 116 N 521 ←



SHOW WELL LOCATION BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

X DRILLED _____ JETTED
_____ BORED/AUGUERED _____ HAND DUG
_____ OTHER (specify) _____

* USE CODE:

X DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
_____ TEST/OBSERVATION

* TYPE OF CASING:

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

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 60± FEET DEEP

* WAS ANY CASING REMOVED? ___ YES X NO
if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? ___ YES X NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
clean brick	60	40
6000 psi concrete mix	40	5
Pit to remain	5	0

Mark E. Griffin 989 San MWD/MSD/MGD 4/4/01
SIGNATURE ~~MASTER WELL DRILLER~~ OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

DENV 828 JULY 1993

4) WELL DRILLER/SUPERVISING SANITARIAN

Meet Driller 2/7/91 10AM

REPLACEMENT WELL SITE INSPECTION

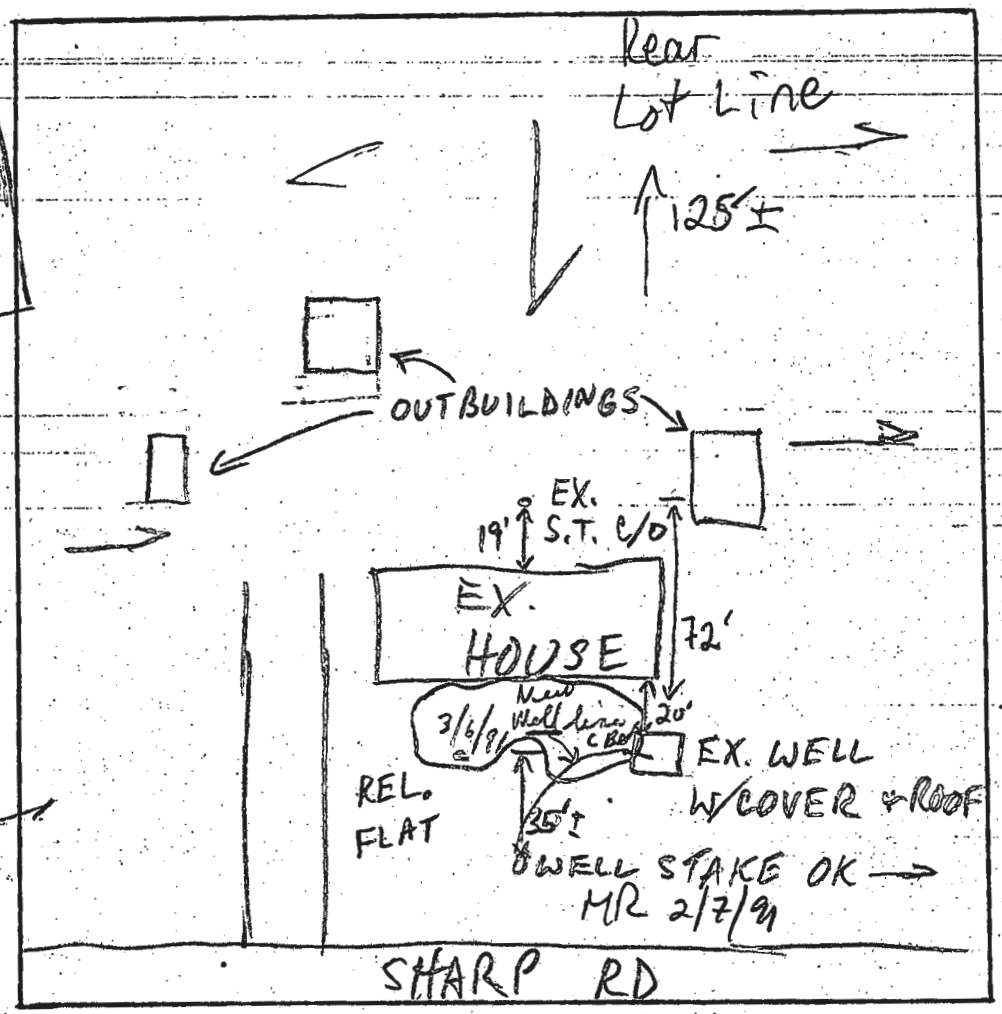
OWNER Tom Veneza / 442-1447 / 766-7444 DATE REQUESTED 2/6/91

ADDRESS 3920 Sharp Rd DRILLER Kyker

Dill Subdivision Lot 4 WELL TAG#

COUNTY#

LOCATION DIAGRAM



COMMENTS: 2/6/91 ##CONTAMINATION - NEEDS REPLACEMENT MR 2/7/91 OWNER NOT PRESENT, T/C w/OWNER-FECAL CONTAM, SAMPLED TWICE BY CEHS 12/11/90 & 1/17/91; CONTAM. CONFIRMED; WELL IS 67'± DEEP, CONTAM. POSS DUE TO PROXIMITY OF WELL TO S.T.; NEW SITE IN FRONT DUE TO NEED FOR REPAIR AREA IN REAR, AND OWNER'S DESIRE TO MINIMIZE WELL LINE COST. MR