
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

Approved
3/16/21

DATE WELL ABANDONED: 1-21-21 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

* PERSON ABANDONING WELL: John Hess

WELL DRILLER'S LICENSE NUMBER: 553

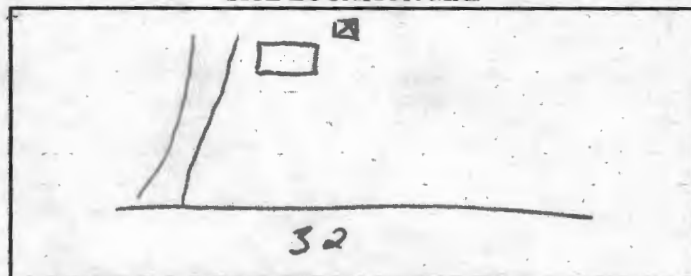
* OWNER'S NAME: SHA

CIRCLE MWD / MSD / MGD

* WELL LOCATION:

COUNTY: Howard
NEAREST TOWN: West Friendship
TAX MAP 15 BLOCK _____ PARCEL 127
SUBDIVISION: 2002
SECTION: _____ LOT: _____
STREET ADDRESS: 2871 Md Rt 32

SITE LOCATION MAP



LATITUDE 3 9.713344

LONGITUDE 7 6.579589

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Quik-Gum 1</u>	<u>70</u>	<u>5</u>
VOLUME OF MATERIAL USED		
<u>5 bags QG</u>		

* 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: 6 INCHES IN DIAMETER

DEPTH OF WELL: 70 FEET DEEP

WAS ANY CASING REMOVED? ☒ YES ☐ NO

If yes, length removed, in feet: 5

WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

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SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

CIRCLE ONE

DATE

COUNTY