
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 (SD)

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

* PERMIT NUMBER OF ABANDONED WELL (if any)

H0-81-0440

* PERMIT NUMBER OF REPLACEMENT WELL:

* PERSON ABANDONING WELL: John Hess

WELL DRILLER'S LICENSE NUMBER: 553

* OWNER'S NAME: SHA

CIRCLE MWD / MSD / MGD

SITE LOCATION MAP

* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: West Friendship

TAX MAP 15 BLOCK

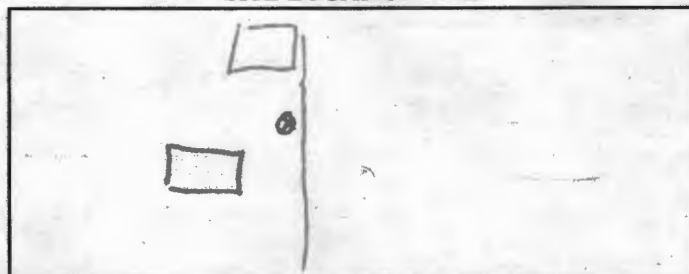
PARCEL 255

SUBDIVISION:

SECTION:

LOT: 30

STREET ADDRESS: 2615 Louanne Ct.



LATITUDE 39.186164

LONGITUDE 76.578134

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Quick Grout	260	20
Hblc Plus	20	0

* TYPE OF WELL BEING ABANDONED:

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

* USE CODE:

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

VOLUME OF MATERIAL USED

14 bags OG 8 bags HP

* TYPE OF CASING:

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

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 260 FEET DEEP

WAS ANY CASING REMOVED? YES ☒ NO

If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES ☐ NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

553 MWD / MSD / MGS
CIRCLE ONE

1/21/21 DATE

COUNTY

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