C1 3282 .	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PUNCHE		WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY	COUNTY
Date Received		PLEASE PRINT OR TYPE	NUMBER A 04/60
(OEP use only)	TE WELL COMPLET	Depth of Well	PERMIT NO. FROM "PERMIT TO DRILL WELL"
	THE RESERVENCE OF THE PERSON O	270	HOT-1931-14341
8-13	15 20	22 (TO NEAREST FOOT) 20	78 29 30 3 ¹ 37 33 34 35 36 37
OWNER last name	V	Som first name	
STREET OR RFD	Suns		ikesville
SUBDIVISION	set Valley	SECTION	LOT
Not required for	driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF PENETRATED, THEIR	COLOR, DEPTH,	(Circle Appropriate Box) TYPE OF GROUTING MATERIAL	1 2 3 (seq no) 6
THICKNESS AND IF W	FFFT Chec	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
	FROM TO bearing	NO. OF BAGS NO OF POUNDS	9
Tra Said	0 2	GALLONS OF WATER	PUMPING RATE (gal. per min. to nearest gal.)
101		DEPTH OF GROUT SEAL (to nearest foot) from ### TOP (enter \$2 if from 54 foot) # OTTOM 58 ft.	METHOD USED TO MEASURE PUMPING RATE
Romen Strate	2 35	(enter on from surface)	WATER LEVEL (distance from land surface)
OPDING SOME		casing CASING RECORD	BEFORE PUMPING 40
SUNDSTONE !	35 80	insert STEEL CONCRETE	WHEN PUMPING
F .+	21 80	code below PL OT	TYPE OF PUMP USED (for test)
G-WHINE	10 01	PLASTIC OTHER	A air P piston T turbine
Granite	87 89 11	MAIN Nominal diameter Total depth CASING top(main)casing of main casing	C centrifugal R rotary O other (describe
STANITE !	89 250	TYPE (nearest inch) (nearest foot)	J jet S submersible
GrANITE :	250 252 16	60 61 62 64 66 70	27 27
C 42	252 270	E OTHER CASING (if used) A diameter depth (feet) inch from to	
SPANITE :	252 200	H C	PUMP INSTALLED YES NO
		Š — — — — — — — — — — — — — — — — — — —	DRILLER WILL INSTALL PUMP
		Z	IF DRILLER INSTALLS PUMP, THIS SECTION
		screen type SCHEEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
		or openhole	TYPE OF PUMP (WRITE APPROPRIATE
		appropriate STEEL BRASS OPEN	LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)
		below BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
		PLASTIC OTHER	(to nearest gallon)
Tan metal		C[2]	PUMP HORSE POWER
PELLET COMPANY		DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft)
		E	CASING HEIGHT (circle appropriate box and enter casing height)
		H	+ above
		S 2 2 23 24 26 30 32 36	LAND SURFACE
CIRCLE APPROP	PRIATE BOX	E	below (nearest foot)
A WELL WAS ABANDO	ONED AND SEALED	N 3	LOCATION OF WELL ON LOT
WHEN THIS WELL WA	S COMPLETED	38 39 41 45 47 51	A SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTA		SLOT SIZE 1 2 3	BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS
P TEST WELL CONVERT		OF SCREEN INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
I HEREBY CERTIFY THAT THIS WELL IN ACCORDANCE WITH COMAR 1 TION" AND IN CONFORMANCE WIT	L HAS BEEN CONSTRUCTE 10.17.13 "WELL CONSTRUCTE H ALL CONDITIONS STATE	from to	N .
IN THE ABOVE CAPTIONED PERMIT TION PRESENTED HEREIN IS ACC THE BEST OF MY KNOWLEDGE.	I AND THAT THE INFORM	IF WELL DRILLED WAS	10 146
DRILLERS IDENT. NO.	308	FLOWING WELL CIRCLE BOX	45"
80 kg	allis 1	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	4
DRILLERS SIGNATURE		T (EROS)	2
(MUST MATCH SIGNATURE OF	N APPLICATION	W Q	2
SITE SUPERVISOR (sign, of dri	iller or journeyman	_ 70 _ 72 TELESCOPE LOG OTHER DATA	100
responsible for sitework if diff	erent from permittee	TELESCOPE LOG OTHER DATA CASING INDICATOR	

2/23/82

OEP PERMIT NUMBER 895 SEQUENCE NO. STATE OF MARYLAND (OEP USE ONLY) PERMIT TO DRILL WELL (THIS NUMBER S TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) fill in this form completely please print or type LOCATION OF WELL B 3 **Date Received** (OEP Use Only) COUNTY L OWNER INFORMATION SUBDIVISION L 42 LOT SECTION L 50 NEAREST TOWN L 55 Street or RFD MI MILES FROM TOWN (enter oil in town) 76 Zip State B 4 B 1 Continued DRILLER INFORMATION DIRECTION OF WELL FROM 30 NEAR WHAT ROAD TOWN (CIRCLE BOX) NORTH 77 License No. 80 Driller's Name N ON WHICH SIDE OF ROAD 32 EAST Firm Name (CIRCLE APPROPRIATE BOX) WEST 5 SQUIH Address Date Signature FT DISTANCE FROM ROAD MI B 2 WELL INFORMATION 5 (CIRCLE APPROPRIATE BOX) APPROX. PUMPING RATE (GAL. PER MIN.) 12 SHOW MAJOR FEATURES OF AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **BOX & LOCATE WELL -**20 USE FOR WATER (CIRCLE APPROPRIATE BOX) SOURCES OF DRILLING WATER 14x E (C HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) FARMING (LIVESTOCK WATERING & AGRICULTURAL F IRRIGATION) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. WRITE THE BOX NUMBER 22 [] OTHER (REQUIRES APPROPRIATION PERMIT) FROM THE MAP HERE PUBLIC OR PRIVATE WATER COMPANY (REQUIRES P APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) TEST, OBSERVATION, MONITORING (MAY REQUIRE I APPROPRIATION PERMIT) DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION APPROXIMATE DEPTH OF WELL NEAREST INCH APPROXIMATE DIAMETER OF WELL METHOD OF DRILLING (circle one) **JETTED & DRIVEN** BORED (OR AUGERED) JETTED AIR PERCUSSION ROTARY (HYDRAULIC ROTARY) AIR ROTARY 37 CABLE REVERSE ROTARY DRIVE POINT other REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE N Y ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED 39 S AS A STANDBY 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED DINIARI (IF AVAILABLE) 41 COUNTY NAME COUNTY NO OEP SIGNATURE Not to be filled in by driller (OEP USE ONLY) STATE HEALTH S CIRCLE BOX GA DATE ISSUED APPROP. PERMIT NUMBER L SIGNATURE WRITE EAST GRID 000 INITIALS IN BOX NORTH FORCE PERMIT No. EXPIRES 55 B 5 SPECIAL CONDITIONS 8-63 1 2 3 6

Page 1 of 1 Date 12/21/82

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

		HOWARD COOKIT WEEL	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Location of	No. HO - 73 - property (road)	Sonse + Uq	Hey Drive	
Subdivisio:	Sonset Vall	ev Lot	2 Block - Plat	Sec. /
Well Drille	r Stanley Bollin	ger Owne	r Sam Ecker	
Dep:	h of well 2	70' point (M.P.) above gr	n /	
Time	pump started OSC time /hr: to	10	Pumping rate /0 (SPM below M.P.
II. Recove	ry pump test data -	observations to be	recorded every 15 minu	tes
TIME (in . minute in tervals		PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 5	(if used)	(gallons per
tervals 0900	191'	gallon bucket 40.25 Sec.		minute) 7.05 GPM
0915	191'	40,25		7.05
0970	191	40.25		7.05
0945	191	40,25		2.05
1000	191	40.25		7.05
1015	191	40,25		2,05
1030	191	40.25		7.05
1045	191	40.25		7.05
1160	191	40.25		7.05
1105	191	40.25		7,05
1130	191	40,25		7,05
1148	191	40.25		7,05
1200	191	40,25		7,05
	141			
1				
		40.00		

. ,	12/23/82 - Pu	ing test to	begin at 8:00 A.	n. (3 tre.)		
hate.			harien _	H9174		
12/23/8.	2_	FIELD DATA S	HEET	H 7/14		
Location of pro	Ermet Val	Lot		Sec.		
Depth of well Distance of measuring point (M.P.) above ground Static water level (S.W.L.) below M.P. I. High rate pumping reservoir drawdown						
	Time pump started 8 P AM Pumping rate Total time to reach pumping water level ft. below M.P. II. Recovery pump test data - observations to be recorded every 15 minutes					
TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)		
10:00	185	8 sec		フナニ		
10:15	190'	8,5		7.05		
10:30	1.91	8.5		7.05		
		,				
,		-				
	•					

