

Howard
NEW GENESEY COUNTY
DEPARTMENT OF PUBLIC HEALTH
County Office Building
Rockville, Maryland

A 09119

Health Department
Permit No.

65-W-274

WELL COMPLETION REPORT

This report must be submitted within 10 days after completion of the well.

WELL DESCRIPTION				Dept. Geology Permit Number	
WELL LOG		CASING AND SCREEN RECORD		Name of Owner	
State the kind of formations penetrated, their depth, their thickness, and if water-bearing		State the kind and size of casing, liner, shoe, screen, and other accessories including casing weight.			
Top Soil & Clay	FEET from 0 to 5	Black Sand	DIAM. (inches) 5 7/8	FEET from 0 to 86	PUMPING TEST Hours Pumped <u>Butter</u> Type of Pump Used <u>10</u> Pumping Rate Gallons per Minute
Sand & Clay	5-70				WATER LEVEL Distance from land surface to water: <u>50</u> Before Pumping <u>80</u> Ft. When Pumping <u>80</u> Ft.
Shale yellow	70-80				APPEARANCE OF WATER Clear Cloudy Taste Odor
Blue Rock.	86-117	First water 80 Second " 110			Height of Casing Above Land Surface <u>6 in</u> Ft.
		Grouted from surface to <u>0-10</u> ft. with <u>1</u> bags cement.			PUMP INSTALLED Type Capacity Gallons per Minute Gallons per Hour Pump Column Length
					REMARKS Subdivision: <u>Cabin River Farm</u> Lot <u>3</u> Block <u>A</u> Street: <u>Hopshug Mill</u> <u>CRD</u>

I hereby certify that I have drilled, cased and grouted this well in accordance with applicable State and County regulations and that the entries on this sheet constitute a true record of the installation.

Well Was Completed

Date Nov 15 1964

Well Driller

Harry Green
Signature