

DNR-131

EMERGENCY NO. (If any) -

B1

3516

SEQUENCE NO.
(DWR USE ONLY)

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OF FICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

DWR PERMIT NUMBER

110-73-0286

FILL IN THIS FORM COMPLETELY

123 (SEQ. NO.) 6

(THIS NUMBER IS TO BE RUNNED
IN COLS. 3-6 ON AUC CARDS)

DATE RECEIVED
(DWR USE ONLY)

9/28/73
1:30 P.M.

OWNER

COL 15 LAST NAME

Wathrell Edward

FIRST NAME

COL 34

STREET OR RFD

COL 36

14590 Philadelphia Mill Rd.

COL 55

POST OFFICE

COL 57

Ellicott, City Md.

COL 76

B1

CONTINUED

DRILLER INFORMATION

123 (SEQ. NO.) 6

DATE

May 4, 1973

LICENSE NUMBER

42

77

80

FIRST NAME

DRILLER

LAST NAME

SIGNATURE

L. F. Easterday

B2

WELL INFORMATION

123 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE)

8

12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)

14

20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

M MUNICIPAL WATER SUPPLY

P PRIVATE WATER COMPANY

T TEST

MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL

24

100

28

FEET

APPROXIMATE DIAMETER OF WELL

6

(NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED)

JETTED

DRIVEN

30-37 AIR-ROTARY

AIR-PERCUSSION

ROTARY (HYDRAULIC ROTARY)

CABLE

REVERSE-ROTARY

DRIVE-POINT

OTHER (DESCRIBE)

REPLACEMENT OR DEEPEMED 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

S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

D THIS WELL WILL DEEPM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY)

APPROPRIATION PERMIT NUMBER

54

63

65

ENGINEER REVIEW DISTRICT NO.

42

FORCE

67

68

WRITE INITIALS IN BOX

CONDITIONS

70

71

72

73

74

75

76

77

78

79

B4

CONTINUED

HEALTH DEPARTMENT APPROVAL

123 (SEQ. NO.) 6

41 S STATE HEALTH (CIRCLE BOX)

MO. DAY YR.

05 07 73

DATE

43

48

Howard

3245

COUNTY NAME

COUNTY NO.

APPROVED BY

Palmer F. Wine, Director

B3

LOCATION OF WELL

123 (SEQ. NO.) 6

COUNTY

8

(DO NOT ABBREVIATE COUNTY NAME)

21

SUBDIVISION

23

42

SECTION

44

46

LOT

19

48

50

NEAREST TOWN

52

Dayton

71

MILES FROM TOWN (ENTER 0 IF IN TOWN)

73

3

76

77

78

B4

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

123 (SEQ. NO.) 6

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

NEAR WHAT ROAD

11

30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

N

S

E

W

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)

34

300

37

38

39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER

E 790

N 500

NORTH COORDINATE

50

51

52

53

54

55

EAST COORDINATE

57

58

59

60

61

62

63

ELEVATION AT WELL HEAD (FEET)

65

66

67

68

0/5

5/5

0/0

5/0

B5

SPECIAL CONDITIONS 8-63 (DWR USE ONLY)

123 (SEQ. NO.) 6