

THIS REPORT  
MUST BE SUBMITTED  
WITHIN 30 DAYS  
AFTER COMPLETION  
OF THE WELL

WELL COMPLETION REPORT

WELL DESCRIPTION

WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

Permit Number 110-66-W-204  
Owner Walter Barnes  
Address Ellicott City  
Subdivision MD  
Section \_\_\_\_\_ Lot \_\_\_\_\_

well 113 ft

FEET  
from \_\_\_ to \_\_\_

44 ft  
well casing

DIAM.  
(inches)  
5 5/8

FEET  
from \_\_\_ to \_\_\_

PUMPING TEST

Hours Pumped 1 hr  
Type of Pump Used \_\_\_\_\_  
Pumping Rate \_\_\_\_\_  
Gallons per Minute 6

WATER LEVEL

Distance from land surface to water:  
Before Pumping 50 Ft.  
When Pumping 55 Ft.

APPEARANCE OF WATER

Clear  Cloudy \_\_\_\_\_  
Taste \_\_\_\_\_  
Odor \_\_\_\_\_

Height of Casing Above Land

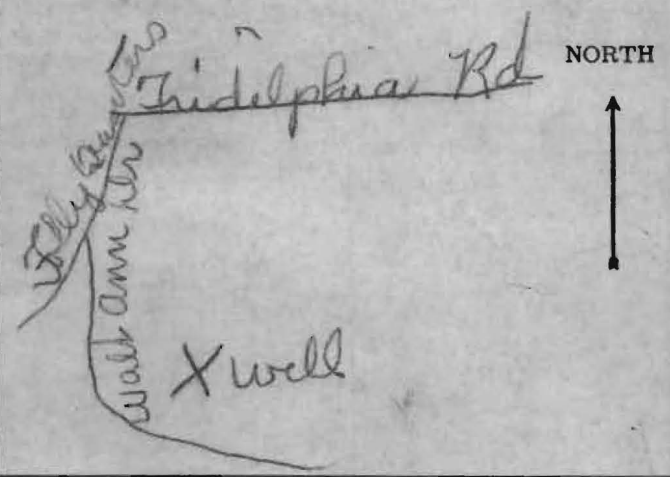
Surface \_\_\_\_\_ Ft.

PUMP INSTALLED

Type \_\_\_\_\_  
Capacity \_\_\_\_\_  
Gallons per Minute \_\_\_\_\_  
Gallons per Hour \_\_\_\_\_  
Pump Column Length \_\_\_\_\_ Ft.

LOCATION OF WELL ON LOT

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



Date Well Was Completed Jan 18 1966

Well Driller Walter Barnes  
Signature \_\_\_\_\_

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

A09615

APPLICATION FOR PERMIT TO DRILL WELL

No. 562

Owner Walter Shank  
Street or R. F. D. \_\_\_\_\_  
Post Office Essex City Md

Driller Walter Barnes License Number 314  
Street or R. F. D. \_\_\_\_\_  
Post Office Essex City Md  
Date Dec. 15-1965

Quantity of Water to be Produced 6 G.P.M.  
Total Quantity Needed For Use 150 G.P.D.  
Use for Water Household  
Approximate Depth of Well (feet) 80 ft  
Method of Drilling to be used Driller

Location of Well  
Subdivision Shepards Glen  
Section \_\_\_\_\_ Lot 13  
County Howard  
Nearest Town Glendeg  
Distance from Town South 1 Mi  
Direction from Town South

Is this a Replacement Well? Yes - No  
If YES, indicate date abandoned well is to be sealed: \_\_\_\_\_  
and by whom: \_\_\_\_\_

Description of Location of Well  
(This information should be definite enough to permit locating well on a county map).  
Near what road Walt Ann Dr  
On which side of road North East  
(North, East, South, West)

PERMIT TO DRILL WELL  
(Not To Be Filled In By Driller)

Well Permit No. 16-66-10-24

Samples of Cuttings Required by Department:  Yes  No  
Owner Requires Permit to Appropriate Water:  Yes  No  
Owner Has Permit to Appropriate Water:  Yes  No

Appropriation Permit No. \_\_\_\_\_  
The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.  
Paul W. Meier  
Director Date

**THIS PERMIT IS NOT TRANSFERABLE**  
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT  
Special conditions that must be observed:

Health Department Approval of Application  
\_\_\_\_\_ County Department of Health  
or  State Department of Health  
Approved by \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

Distance from road 200 yds  
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.

