

1 2 3 4 5 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

5921

STATE OF MARYLAND  
 WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER **A**

DATE RECEIVED  
 8 13

DATE WELL COMPLETED  
 15 20

DEPTH OF WELL  
 22 26  
 (TO NEAREST FOOT)

PERMIT NO.  
 FROM "PERMIT TO DRILL WELL"  
 28 29 30 31 32 33 34 35 36 37

OWNER **MILLER** **TIMOTHY**  
 STREET OR RFD **417 WOODBINE ROAD** last name first name TOWN **WOODBINE**  
 SUBDIVISION **MAP 3 Q13 P20** SECTION **1** LOT **3**

**WELL LOG**  
 Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
rolling ground gravel	0	28'	-
brown schist	28'	46'	-
water			-
brown schist	46'	57'	-
water			-
gray schist	57'	65'	-
water			-
gray schist	65'	100'	-

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED yes  no   
 (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **15** NO. OF POUNDS **1440**  
 GALLONS OF WATER **105**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **38** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO**  
 STEEL CONCRETE  
**PL** **OT**  
 PLASTIC OTHER

**MAIN CASING TYPE**  
 Nominal diameter (nearest inch) **ST**  
 Total depth of main casing (nearest foot) **41**

**OTHER CASING (if used)**  
 diameter inch depth (feet) from to

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
**ST** **BR** **HO**  
 STEEL BRASS OPEN HOLE  
**PL** **OT**  
 PLASTIC OTHER

**C 2**  
 DEPTH (nearest ft.)  
 EACH SCREEN  
 1 **41** **41** **100**  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) **56** **60**

**C 3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **1**  
 PUMPING RATE (gal. per min. to nearest gal.) **30**  
 METHOD USED TO MEASURE PUMPING RATE **watch & bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **38**  
 WHEN PUMPING **100**  
 TYPE OF PUMP USED (for test)  
**A** air **P** piston **T** turbine  
**C** centrifugal **R** rotary **O** other (describe below)  
**J** jet **S** submersible

**PUMP INSTALLED**  
 DRILLER WILL INSTALL PUMP **YES** **NO**  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED **+**  
 PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**  
 PUMP HORSE POWER **37** **41**  
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**  
 CASING HEIGHT (circle appropriate box and enter casing height)  
**+** above } LAND SURFACE (nearest foot)  
**-** below } **1** (nearest foot)

**A** CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
**E** ELECTRIC LOG OBTAINED  
**P** TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. **353**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK from to  
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX **68**

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) **70** **72**  
 WQ **74** **75** **76**  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**LOCATION OF WELL ON LOT**  
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

