
 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 4/28/15 (month/day/year)

OK
 12/28/15 SC

* PERMIT NUMBER OF ABANDONED WELL (if any)

HO-93-0169

* PERMIT NUMBER OF REPLACEMENT WELL:

HO-91

* PERSON ABANDONING WELL: Jerry Henning

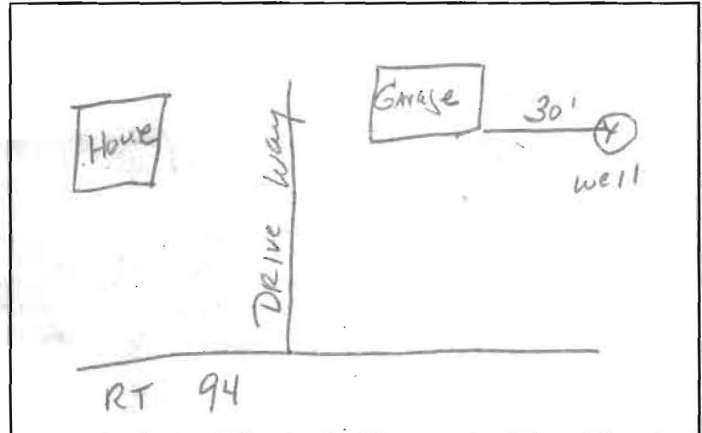
WELL DRILLER'S LICENSE NUMBER: WR0064

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: LARRILAND FARMS

* WELL LOCATION:
 COUNTY: Howard

SITE LOCATION MAP



NEAREST TOWN: LISBON
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: 1990 LOT: _____
 STREET ADDRESS: 7990 WOODBINE ROAD

LATITUDE 39.324105

LONGITUDE 77.091362

* TYPE OF WELL BEING ABANDONED:
 DRILLED JETTED
 BORED HAND DUG
 OTHER (specify) _____

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Bentonite</u>	<u>0</u>	<u>50</u>

* USE CODE:
 DOMESTIC MUNICIPAL/PUBLIC
 IRRIGATION INDUSTRIAL
 TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:
 STEEL PLASTIC
 CONCRETE OTHER (specify) _____

SIZE OF CASING: 4" INCHES IN DIAMETER

DEPTH OF WELL: 50' FEET DEEP

WAS ANY CASING REMOVED? YES NO
 If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES NO

VOLUME OF MATERIAL USED

125 # Bentonite

George F. Eusterman 040
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

MWD / MSD / MGS 4-28-15
 CIRCLE ONE DATE