
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

OK
12/18/15 SC

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

HO - 95 - 0890

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL:

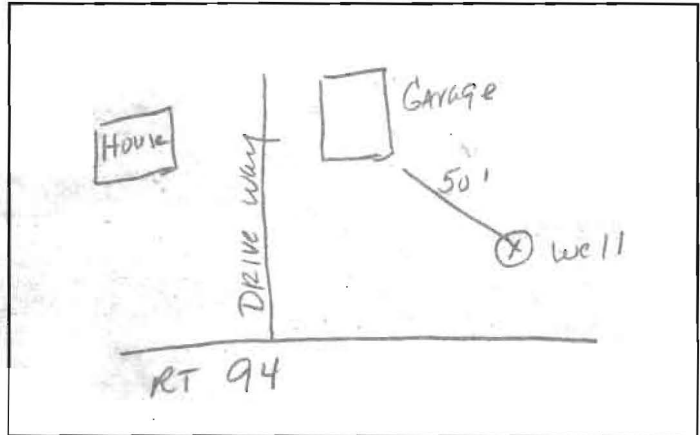
* PERSON ABANDONING WELL: Jerry Hennig WELL DRILLER'S LICENSE NUMBER: WRO 064

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: LARRILAND FARMS

* WELL LOCATION:
COUNTY: HOWARD
NEAREST TOWN: LISBON
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: 1990 LOT: _____
STREET ADDRESS: ~~1990~~ WOODBINE RD

SITE LOCATION MAP



LATITUDE 3 9.324186

LONGITUDE 7 1.091220

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

LOG OF SEALING MATERIAL

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

MATERIAL	FEET	
	FROM	TO
Perforated pipe / cement Bentonite	at base 0	100M 40

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

SIZE OF CASING: 2" INCHES IN DIAMETER

DEPTH OF WELL: 40' 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

50 # Bentonite

George F. Eusterman 640
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

MWD MSD / MGS

CIRCLE ONE

4-28-15

DATE