

FEDERAL BUREAU OF INVESTIGATION
 UNITED STATES OFFICE BLDG., BALTIMORE, MD. 21201
WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY
 COUNTY NUMBER _____
 PERMIT NO. FROM "PERMIT TO DRILL WELLS"
MD-15-17471
 20 25 30 35 40 45 50 55

DATE RECEIVED (PLEASE PRINT) _____
 DATE WELL COMPLETED _____
 DEPTH OF WELL **305**
 (TO NEAREST FOOT) 20 _____

DRILLER IDENTIFICATION NO. **42**

OWNER **Buschman David**
 LAST NAME _____ FIRST NAME _____
 STREET OR RFD **12170 Champlain Dr** POST OFFICE **Baltimore Md.**

WELL LOG

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

DESCRIPTION (USE 17 MESSAGES)	FEET	
	FROM	TO
Top Soil	0	2
Shale	2	8
Brown Slate	8	60
Blue Slate	60	75
M.C.A.	75	305

GRouting RECORD

WELLS HAS BEEN GROUTED (CHECK APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CHECK ONE) CM BC

NO. OF BAGS **5** NO. OF POUNDS **2500**

DEPTH OF WATER **2'**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **18** FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES (CHECK APPROPRIATE CODE BELOW)

<input type="checkbox"/> ST	<input type="checkbox"/> CO
STEEL	CONCRETE
<input type="checkbox"/> PL	<input type="checkbox"/> ST
PLASTIC	OTHER

MAIN CASING TYPE **ST** NOMINAL DIAMETER (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **21**

OTHER CASING (IF USED)
 DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____

SCREEN RECORD

(CHECK APPROPRIATE CODE BELOW)

<input type="checkbox"/> ST	<input type="checkbox"/> BR	<input type="checkbox"/> HO
STEEL	BRASS OR BRONZE	WOOD HOLE
<input type="checkbox"/> PL	<input type="checkbox"/> OT	
PLASTIC	OTHER	

DEPTH (NEAREST WHOLE FOOT) **40** **17** **305**

DIAMETER OF SCREEN _____ (NEAREST INCH) FROM _____ TO _____

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **2**

METHOD USED TO MEASURE PUMPING RATE **DUCKET**

WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING **45** (NEAREST FOOT)

WHEN PUMPING **305** (NEAREST FOOT)

TYPE OF PUMP USED (CHECK APPROPRIATE BOX) (FOR PUMPING TEST)

<input checked="" type="checkbox"/> NO	<input type="checkbox"/> D	<input type="checkbox"/> T
NO	PISTON	TURBINE
<input type="checkbox"/> C	<input type="checkbox"/> R	<input type="checkbox"/> O
CENTRIFUGAL	ROTARY	OTHER (DESCRIBE BELOW)
<input type="checkbox"/> J	<input type="checkbox"/> B	
JET	SUBMERSIBLE	

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CHECK APPROPRIATE BOX) Y N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) _____

PUMP HORSE POWER _____

PUMP COLUMN LENGTH (NEAREST FOOT) _____

CASING HEIGHT (CHECK APPROPRIATE BOX AND COVER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT) **2**

BELOW }

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLER'S NAME _____

(PLEASE PRINT) _____

SIGNATURE _____

DEPTH (NEAREST WHOLE FOOT) **40** **17** **305**

DIAMETER OF SCREEN _____ (NEAREST INCH) FROM _____ TO _____

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL, CHECK BOX Y N

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

TELESCOPE CHIMNEY LOG INDICATOR TO TO TO OTHER DATA AVAILABLE

