

C1-1307
 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 **A31664**

Date Received (OEP use only) _____ DATE WELL COMPLETED

15	16	17	18	19	20
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 Depth of Well 160 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL"

28	29	30	31	32	33	34	35	36	37
10	73	40	7						

OWNER Molesworth last name Millard first name
 STREET OR RFD 12366 Fredrick Rd. TOWN West Friendship
 SUBDIVISION _____ SECTION _____ LOT _____

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	
TOP SOIL	0	2	
SHALES	2	10	
BROWN SLATE	10	35	
FLINT	35	40	
BLUESLATE	40	60	
BROWN SLATE	60	70	
BLUE SLATE	70	160	

GROUTING RECORD
 WELL HAS BEEN GROUTED Y N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 6 NO. OF POUNDS 600
 GALLONS OF WATER 30
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 14 ft.
 (enter 0 if from surface) BOTTOM 58 ft.

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE ST
 Nominal diameter top(main) casing (nearest inch) 6
 Total depth of main casing (nearest foot) 21

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

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

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	

 Slot size 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

CIRCLE APPROPRIATE BOX
 A 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. 70
 DRILLERS SIGNATURE Don P. Winters
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR sign of driller or journeyman responsible for sitework if different from permittee

GRAVEL PACK _____
 IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

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

C 3 (seq no)
PUMPING TEST
 HOURS PUMPED (nearest hour) 2
 PUMPING RATE (gal. per min. to nearest gal.) 3
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 35
 WHEN PUMPING 160
 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 (CIRCLE APPROPRIATE BOX) Y N
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) 29
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____
 PUMP HORSE POWER _____
 PUMP COLUMN LENGTH (nearest ft.) 2
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above LAND SURFACE
 - below _____ (nearest foot)

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)
 35' WELL
 50'
 FREDERICK RD.

HO-73-4024

10/13/81 { EMERGENCY - NO TAG AT SITE C.R.D. }

B 1	0035	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL <i>please print or type</i>	OEP PERMIT NUMBER HO-73-4024 <i>fill in this form completely</i>
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Date Received 10/13/81
8 (OEP Use Only) 13

OWNER INFORMATION

Last Name 15 125600416 Owner 34 Name 125600416

36 3667 Frederick Rd Street or RFD 55

Town 57 15 State MD 76 Zip 21154

B 3 LOCATION OF WELL

COUNTY Howard 8 21

SUBDIVISION _____ 23 42

SECTION 44 44 46 LOT 48 48 50

NEAREST TOWN West Friendship 52 71

MILES FROM TOWN (enter 0 if in town) 0 73 76 77 78 **M I**

B 1 Continued **DRILLER INFORMATION**

Driller's Name George Easterday 77 License No. 80

Firm Name Easterday, Inc

Address 65 Howard Church Rd

Signature George Easterday Date 10/13/81

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD Frederick Rd 11 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST EAST SOUTH NORTH **W E S N**

DISTANCE FROM ROAD 50 34 37 **F T**

(CIRCLE APPROPRIATE BOX) **M I** 38 39

B 2 **WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 5 2 3 6 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 5000 8 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 6 Bags of Cement P.W.D.
- 21' casing P.W.D.
- 19' vent

WRITE THE BOX NUMBER FROM THE MAP HERE

E 810 6

N 530 4

000 000 (1' casing out of ground)

APPROXIMATE DEPTH OF WELL 150 24 FEET 28

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (OR AUGERED) JETTED JETTED & DRIVEN

30- AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC ROTARY)

37 CABLE REVERSE ROTARY DRIVE POINT

other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

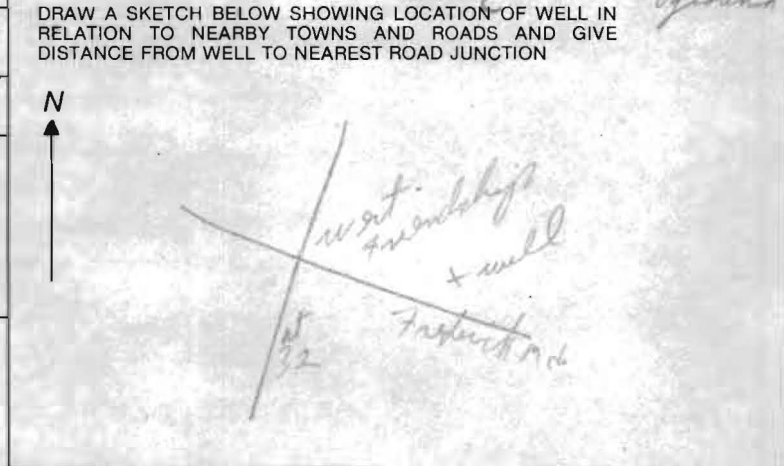
THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GA P 54 63

FORCE 15 WRITE INITIALS IN BOX 64 68

PERMIT No. HO-73-4024 70 71 72 73 74 75 76 77 78 79

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME HOWARD COUNTY NO. A31664

OEP SIGNATURE _____ STATE HEALTH CIRCLE BOX 41

DATE ISSUED 10/13/81

CO SIGNATURE Frank Shuman

NORTH GRID 534 43 48 50 55 EAST GRID 0816 57 63 EXPIRES 04/13/82

B 5 SPECIAL CONDITIONS 8-63

1 2 3 6

10/13/81 1st
9:30

FILE Emergency Well Site Check DATE REPORTED 10/13/81

PROPERTY OWNER WILLARD Molesworth

P.O. ADDRESS 12366 Fredrick Rd. TELEPHONE # 489-4621 per Telephone Book

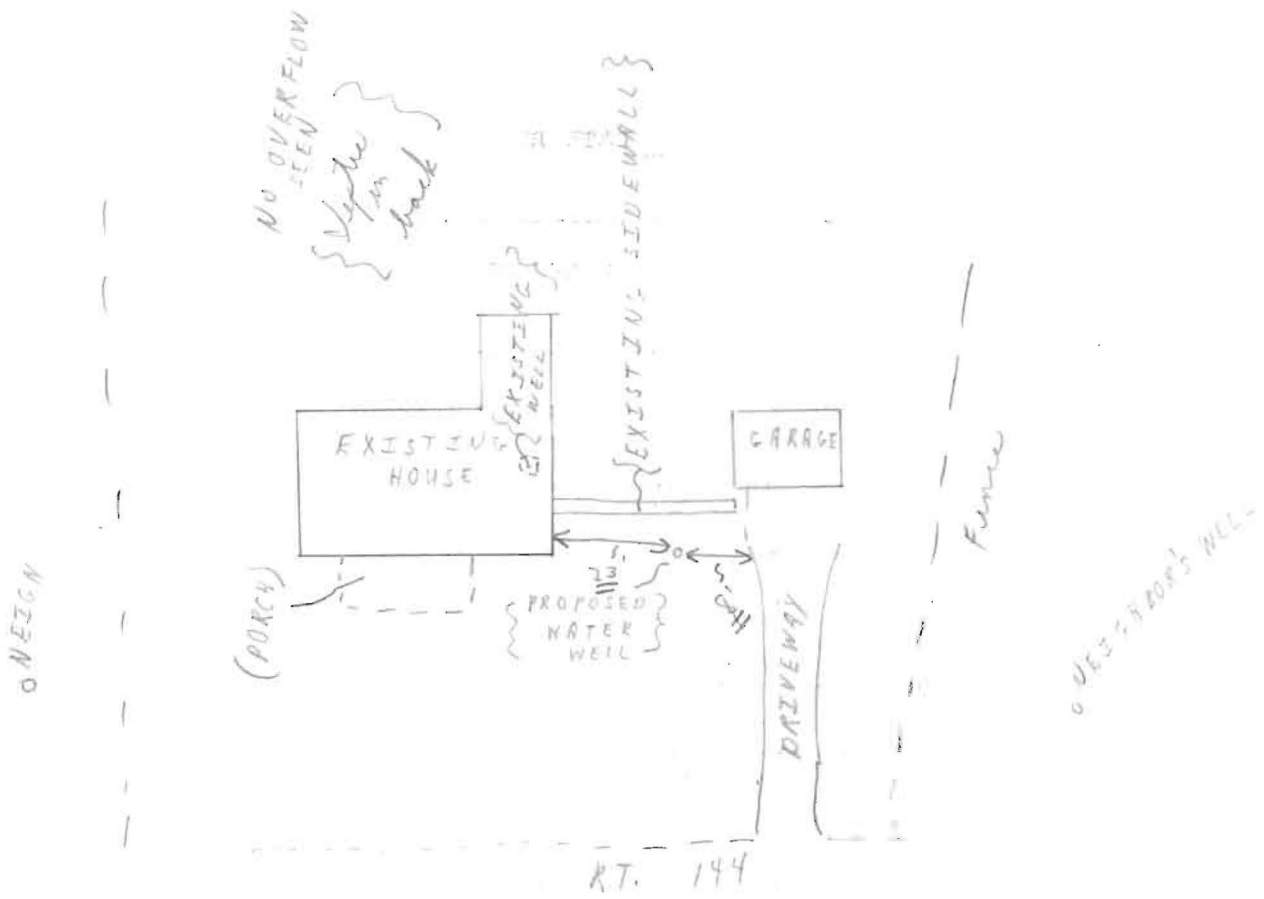
DIRECTIONS TO PROPERTY West Friendship, 4th house East of Fivehouse
5th
out of water - possibly hand dig well

INFORMANT Easterday Drillers

CONDITION FOUND 10/13/81 SITE TENTATIVELY APPROVED DUE TO
LOCATION OF EXISTING SEPTIC SYSTEMS + HOUSES. (SEE
BACK) ATTEMPTED CALL BUSY!! TO OFFICE FROM SITE.
HO-73-4024

ACTION TAKEN

FINAL DISPOSITION

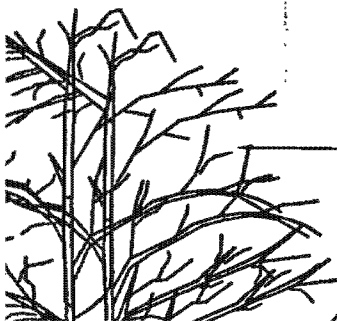
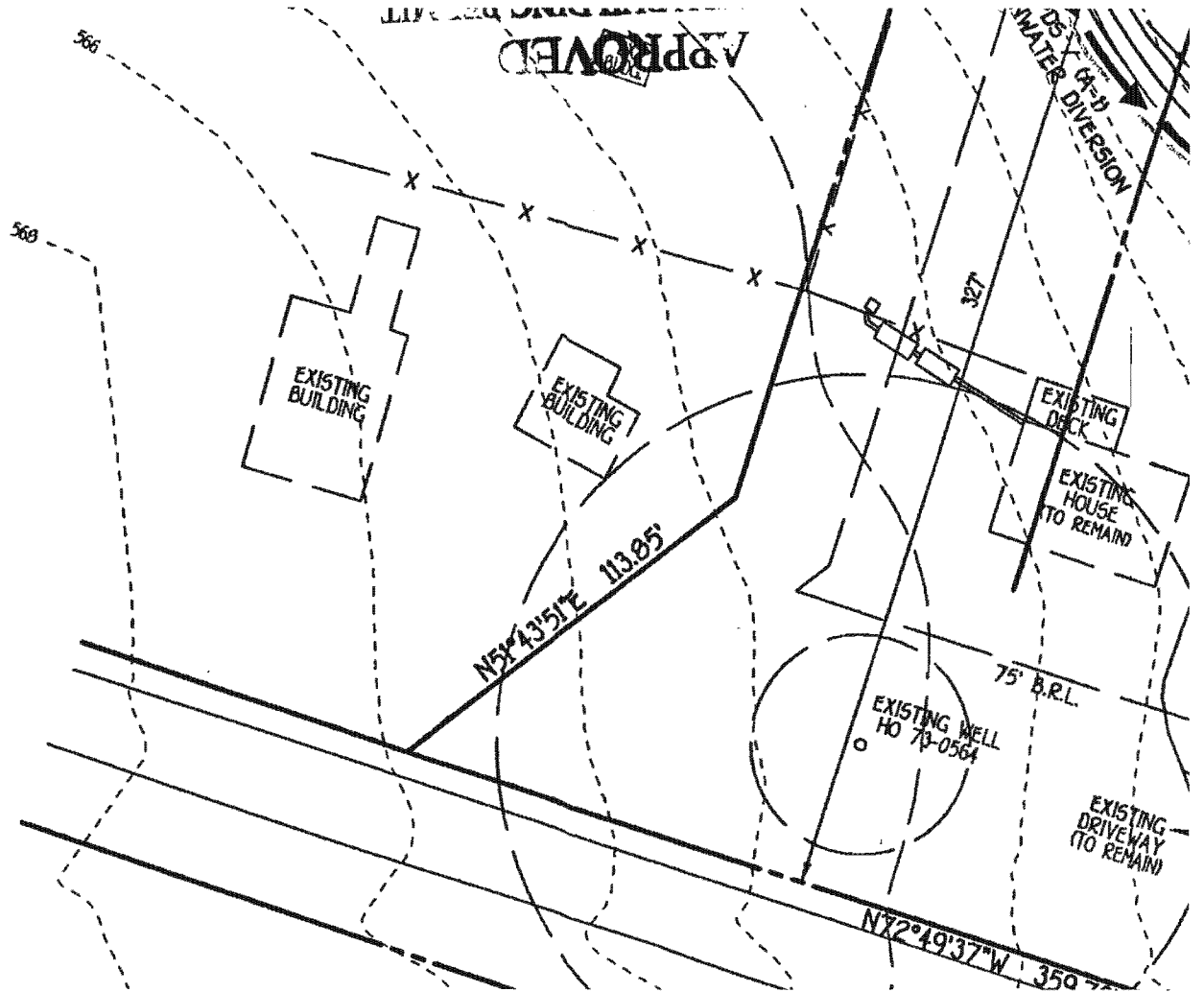


9/13/81 } NOTE - ONLY APPARENT WATER WELL SITE DUE TO HOUSE LOCATION
 + ROADS + NEIGHBORS SEPTIC SYSTEMS. MR VAN SANT, MR. DAUVY
 EASTEKDAY PRESENT AND MRS. MOLESWORTH.

In an undisturbed area shall outlet into an
 d area at a non-erosive velocity.
 excavated or shaped to line, grade, and
 required to meet the criteria specified in the standard
 ted by earth moving equipment.
 sed and mulch or as specified of the area
 ce and swale shall be completed within 7 days upon removal.
 ired maintenance shall be provided after each rain event.
 drainage area for this practice is 2 acres.

10 METER DIKE/SWALE

NOT TO SCALE



* 107

EXISTING TREES
TO REMAIN

2" ORANGE STREAMERS
3' O.C.

FENCE WIRE