

1 **5677** SEQUENCE NO. (DENV 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 **13**

ST/CO USE ONLY
 DATE RECEIVED

DATE WELL COMPLETED **08 30 95**

INDEXED

Depth of Well **200**
 (TO NEAREST FOOT)

OK 10/2/95
 DNG

PERMIT NO. FROM "PERMIT TO DRILL WELL"
40-98A-0666

OWNER **WALTZ PEGGY** last name first name
 STREET OR RFD **15021 RED RD** TOWN **LISPEN**
 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	
red clay	2	6	
brown shale	6	25	
Sand Stone	25	35	
brown slate	35	40	
gray slate	40	46	
brown slate	46	48	
gray slate	48	70	
brown slate	70	80	✓
gray slate	80	120	
brown slate	120	125	
gray slate	125	200	

GROUTING RECORD
 WELL HAS BEEN GROUTED YES NO
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **8** NO. OF POUNDS **800**
 GALLONS OF WATER **40**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **39** ft.
(enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch) **6**
 Total depth of main casing (nearest foot) **44**

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

C2
 DEPTH (nearest ft.)
 1 **170** **42** **200**
 2
 3
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

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

TELESCOPE CASING
 LOG INDICATOR
 OTHER DATA

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **15**
 METHOD USED TO MEASURE PUMPING RATE **bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **75**
 WHEN PUMPING **200**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

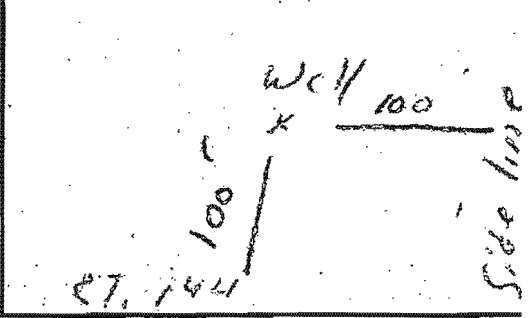
PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES NO
 (CIRCLE) (YES or NO)
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon)
 PUMP HORSE POWER
 PUMP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

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

HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "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. **40**
 DRILLERS SIGNATURE
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



15021 Frederick Road
Woodbine, MD. 21797
March 6, 2007

Howard County Health Department
7178 Columbia Gateway Drive
Columbia, MD.

Dear Mr. Davis,

At the end of our phone conversation today, you suggested that I write you to request that I be allowed to keep my existing well on my property for potential farm use in the future. I feel I do not need to include any details since you already know them. Therefore, here is the letter of request. Please respond with your denial so that I can move forward. Also, please outline what needs to be done both to fill it in, if I choose that option, or to bring it up to current standards, if I choose that option.

I will thank you in advance for your immediate response. I have been trying to begin a very minor addition to my house since October, 2006 and have been held up by county regulations since that time and I need to begin this project..

Sincerely,

Margaret E. Schultz

Margaret E. Schultz

3/13/07

Bob met with Peggy Schulte to address her concerns. Well has been abandoned and we are waiting for the abandonment report. No need to respond

M. Davis

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

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

1/18/2011
O.K. (BB)

DATE WELL ABANDONED: 3-20-2007 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) none

* PERMIT NUMBER OF REPLACEMENT WELL HO-94-0606

* PERSON ABANDONING WELL: Joseph Mays

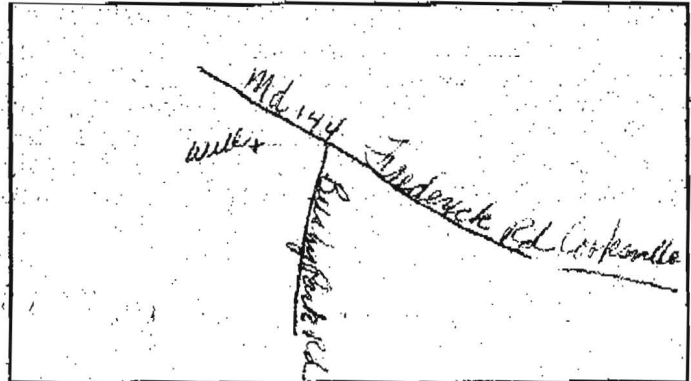
WELL DRILLERS LICENSE NUMBER: MSD024

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Marion Schultz

SITE LOCATION MAP

* WELL LOCATION:
 COUNTY: Hovarsade
 NEAREST TOWN: Woodbine
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: _____ LOT: _____
 NEAREST ROAD: 25011 Frederick Rd



* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGERED HAND DUG
- OTHER (specify) _____

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) terra cotta

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 65 FEET DEEP

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

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement	0	5.5
VOLUME OF MATERIAL USED		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN Joseph Mays

024
LICENSE #

MWD/MSD/MGD

CIRCLE ONE

3-20-07
DATE



SITE INSPECTION SHEET

~~No application Made at this time~~
Application located 8/2/95

OWNER: MARGARET SCHULTZ

DATE REQUESTED: 5/2/95

ADDRESS: 15021 FREDENICK R.D.

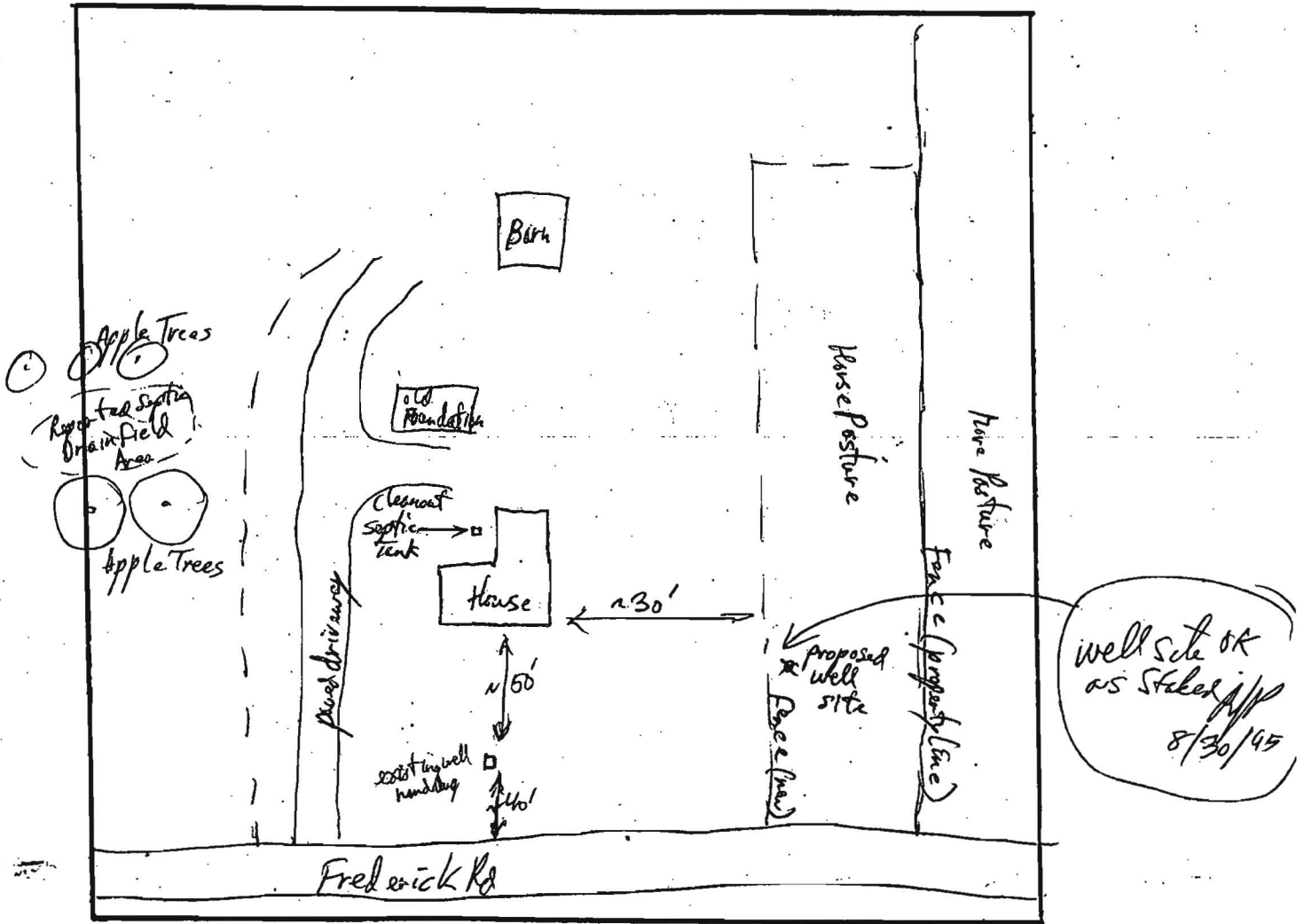
DRILLER: EASTBAY

WELL TAG # ~~HO 94-0160~~ voided 8/30/95

COUNTY # _____

PROPOSAL: REPLACEMENT WELL SITE TAX MAP 8 GN1015 P 315

LOCATION DIAGRAM



COMMENTS: Existing shallow hand dug well has experienced "muddying" problems but still delivers 5gpm.
Owner contemplates replacing this well for potable use, but would like to retain old dug well
for watering horses. Owner will get well driller to submit well application when she finally goes forward
with new well (maybe several months). Septic reportedly was repaired 3-5 yrs ago, owner will call when she locates here.

DATE: 5/2/95 well application located & issued 8/25/95 p/f
see HO-94-0666

INSPECTOR: [Signature]



LOCATION SURVEY

15021 FREDERICK ROAD
 TAX MAP #8 PARCEL 315 & 316
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

NOVEMBER 16, 2006 SCALE: 1" = 60'

MARKS AND ASSOCIATES

LAND PLANNING SURVEYING ENGINEERING
 ERIK C. MARKS, R.P.L.S. 4531 COLLEGE AVENUE
 TEL (410) 747-8738 ELLICOTT CITY, MARYLAND 20443
 FAX (410) 747-8547

I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

LEGEND

- TREE
- UTILITY POLE
- PROPERTY MONUMENTATION
- FIELD LOCATED WELL
- CLEAN OUT
- FENCE LINE
- TREE LINE