

DRILLER: COMPLETE THIS APPLICATION AND RETURN ALL PARTS OF THIS FORM INTACT TO THE ENVIRONMENTAL AGENCY IN THE COUNTY IN WHICH THE WELL IS TO BE DRILLED. PRESS FIRMLY FOR FOURTH COPY.

EMERGENCY/TEMP NO. IF ANY

B 1	5869	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER 70 _____ 79 <i>fill in this form completely</i>
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OWNER INFORMATION **10954**

Date Received (APA) _____

8 MM DD YY 13

ATKINSON JENNIFER

15 Last Name Owner First Name 34

5080 GREENBRIDGE ROAD

36 Street or RFD 55

DAYTON, MD 21036

57 Town 70 State 72 Zip 76

B 3 **Howard** **LOCATION OF WELL** **CC#**

8 COUNTY 21

23 SUBDIVISION 42

SECTION _____ LOT _____

44 46 48 50

Dayton

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M 73 76 77 78

DRILLER INFORMATION

George F. Easterday **M WD** **040**

Driller's Name 76 License No. 81

L. Franklin Easterday, Inc.

Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771

Address

George F. Easterday **10/23/2008**

Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

5080 Greenbridge Road

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 **SO** 37

DISTANCE FROM ROAD 38 39

ENTER FT OR MI

TAX MAP: _____ BLK: _____ PARCEL _____

B 2 **WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 5

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22 **I** INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME _____ COUNTY NO. _____

STATE SIGNATURE _____ INSERT S → 41

DATE ISSUED _____

43 MM DD YY 48 CO SIGNATURE _____ EXP. DATE _____

NORTH GRID 000 EAST GRID 000

50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET

24 28

APPROXIMATE DIAMETER OF WELL 6 INCH

NEAREST TOWN

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)

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

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

39 **S** THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEM AN EXISTING WELL

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. _____

2. **wells**

3. _____

WRITE THE BOX NUMBER FROM THE MAP HERE

800

E _____ 000

500 ← 000

N _____

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER _____ **G** _____

PERMIT No. _____

70 71 72 73 74 75 76 77 78 79

