

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

DATE WELL ABANDONED: 02-23-07 (month/day/year)

OK
9/14/16SC

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: RSIB SK

* OWNER'S NAME: HOWARD COUNTY

* WELL LOCATION:

COUNTY: HOWARD
NEAREST TOWN: SYKESVILLE
TAX MAP 4 BLOCK 15 PARCEL 48
SUBDIVISION: N/A
SECTION: N/A LOT: N/A

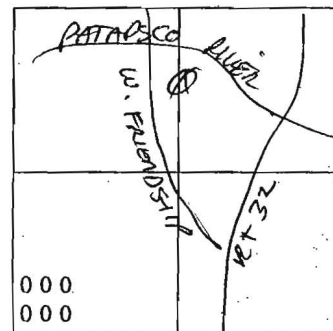
MARYLAND GRID COORDINATES

BOX NUMBER E 800
N 550

4 0 8 8 2 2 2 5

WELL DRILLERS LICENSE NUMBER: 028

CIRCLE: MWD/MSD/MGD



SHOW WELL LOCATION
BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

☒ DRILLED ☐ JETTED
☐ BORED/AUGURED ☐ HAND DUG
☐ OTHER (specify) _____

* USE CODE:

☐ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION

* TYPE OF CASING:

☐ STEEL ☒ PLASTIC
☐ CONCRETE ☐ OTHER (specify) _____

* SIZE OF CASING: 4 INCHES IN DIAMETER

* DEPTH OF WELL: 20 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 20

* WAS CASING RIPPED OR PERFORATED? ☒ YES ☐ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
3 bags (90 lbs) of Portland cement	20 feet	

Richard D. Dine Jr.

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

MWD/MSD/MGD

CIRCLE ONE

DATE