
WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

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

APPROVED
02/16/2021 [Signature]

DATE WELL ABANDONED: May 12, 2020 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

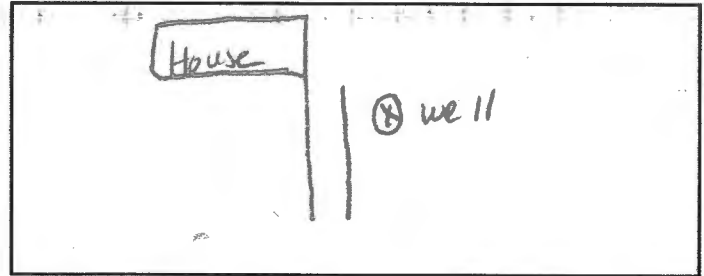
* PERSON ABANDONING WELL: Bruce Thompson WELL DRILLER'S LICENSE NUMBER: JSD 038

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Terry Tulane

SITE LOCATION MAP

* WELL LOCATION:
COUNTY: Howard
NEAREST TOWN: CLARKSVILLE
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
STREET ADDRESS: 6122 TULANE DR



LATITUDE 39.201982

LONGITUDE 76.939872

LOG OF SEALING MATERIAL

* TYPE OF WELL BEING ABANDONED:
 DRILLED _____ JETTED _____
 BORED _____ HAND DUG _____
 OTHER (specify) _____

MATERIAL	FEET	
	FROM	TO
Bentonite	47	2
DIRT	2	0

* USE CODE:
 DOMESTIC _____ MUNICIPAL/PUBLIC _____
 IRRIGATION _____ INDUSTRIAL _____
 TEST/OBSERVATION _____ GEOTHERMAL _____

VOLUME OF MATERIAL USED
200 # Bentonite mixed for slurry

* TYPE OF CASING:
 STEEL _____
 PLASTIC _____
 CONCRETE _____
 OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 47 FEET DEEP

WAS ANY CASING REMOVED? YES _____ NO
If yes, length removed, in feet: 2

WAS CASING RIPPED OR PERFORATED? _____ YES NO

Beary F. Easterday
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# 040

MWD MSD / MGS 5-13-20
CIRCLE ONE DATE

COUNTY

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