

C1 5980 SEQUENCE NO. (OEP USE ONLY)  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED IN COLUMNS 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 **A-39177**

DATE RECEIVED  DATE WELL COMPLETED **07/14/87** Depth of Well **145** (TO NEAREST FOOT)  
PERMIT NO. **HO-81-218**

OWNER **SHERMAN ROWALI**  
STREET OR RFD **14700 TRIADSLPHIA ROAD** TOWN **GLENELG**  
SUBDIVISION **MAP 27 P.43** 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	
SAND	0	45	
CONYMICHA Rock	45	145	

**WELL DAMAGED BY CORROSION AND REPLACED HO-94-1303**

**GROUTING RECORD**  
WELL HAS BEEN GROUTED (Circle appropriate box) **Y** **N**  
TYPE OF GROUTING MATERIAL  
CEMENT **CM** BENTONITE CLAY **BC**  
NO. OF BAGS **11** NO. OF POUNDS **1034**  
GALLONS OF WATER **66**  
DEPTH OF GROUT SEAL (to nearest foot)  
from **0** ft. to **49** ft.  
(enter 0 if from surface)

**CASING RECORD**  
casing types insert appropriate code below  
**ST CO** STEEL CONCRETE  
**PE OT** PLASTIC OTHER  
MAIN CASING TYPE Nominal diameter (nearest inch) Total depth (nearest foot)  
**4** **6** **51**

**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

**DEPTH (nearest ft.)**  
EACH SCREEN  
**49** **145**

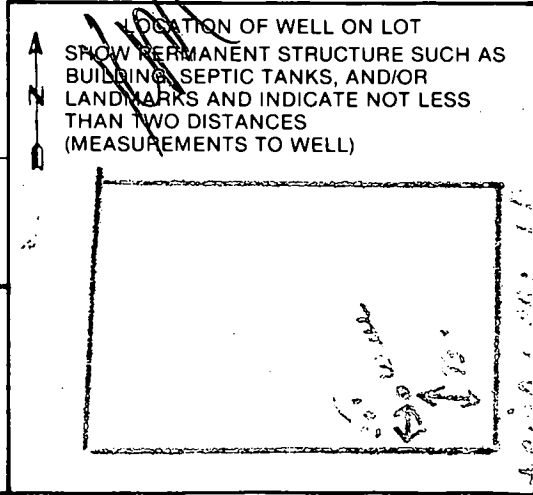
SLOT SIZE 1 2 3  
DIAMETER OF SCREEN (NEAREST INCH)  
from to

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

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

**C 3**  
**PUMPING TEST**  
HOURS PUMPED (nearest hour) **3**  
PUMPING RATE (gal. per min. to nearest gal.) **13**  
METHOD USED TO MEASURE PUMPING RATE **bucket**  
WATER LEVEL (distance from land surface) BEFORE PUMPING **30** WHEN PUMPING **30**  
TYPE OF PUMP USED (for test) **S** submersible

**PUMP INSTALLED**  
DRILLER WILL INSTALL PUMP YES **NO**  
IF DRILLER INSTALS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
TYPE OF PUMP INSTALLED **S** PLACE (A, C, P, R, S, T, O) IN BOX - SEE ABOVE:  
CAPACITY (GALLONS PER MINUTE (to nearest gallon)) **130**  
PUMP HORSE POWER **1/2**  
PUMP COLUMN LENGTH (nearest ft.) **145**  
CASING HEIGHT (circle appropriate box and enter casing height) **+** above **2** below LAND SURFACE (nearest foot)



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. **238**  
DRILLERS SIGNATURE **Walter J. M...**  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 7 **3306** SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

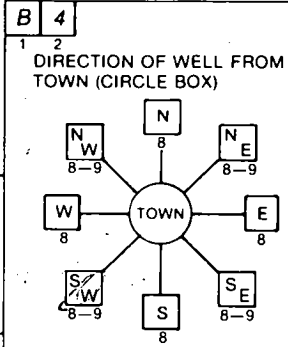
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

OEP PERMIT NUMBER  
**40-81-2181**  
 fill in this form completely

Date Received  
 OWNER INFORMATION  
 8 **SHERMAN** 13 **RONALD**  
 15 Last Name Owner First Name 34  
 36 **1309 PARKS RIDGE DR** 55  
 Street or RFD  
 57 **SPENCERVILLE** 70 **MD** 72 **20868** 76  
 Town State Zip

B 3 LOCATION OF WELL  
 1 **HOWARD** 21  
 8 COUNTY  
 23 **STEWART MAP 27 P. 43** 42  
 SUBDIVISION  
 SECTION **44** 46 LOT **48** 50  
 52 **GLENELG** 71  
 NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **2** 73 **MI** 76 77 78

DRILLER INFORMATION  
 Driller's Name **Wendy L. Mayne** 77 License No. **238** 80  
 Firm Name **Wendy L. Mayne WELL DRILLING**  
 Address **5512 Ridge Rd. Mt. Airy md 21771**  
 Signature **Wendy L. Mayne** Date **6/9/87**



11 **Triadelphia Road** 30  
 NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH **N**  
 WEST **W** 32 EAST **E**  
 SOUTH **S**

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)  
 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)

NOT TO BE FILLED IN BY DRILLER  
 HEALTH DEPARTMENT APPROVAL  
**HOWARD** COUNTY NAME COUNTY NO. **17-39177**  
 OEP SIGNATURE **B. N. Upton** STATE HEALTH INSERT S  41  
 DATE ISSUED **07/07/87** CO SIGNATURE **B. N. Upton** EXP. DATE **01/09/88**  
 NORTH GRID **514000** 50 55 EAST GRID **0792000** 57 63

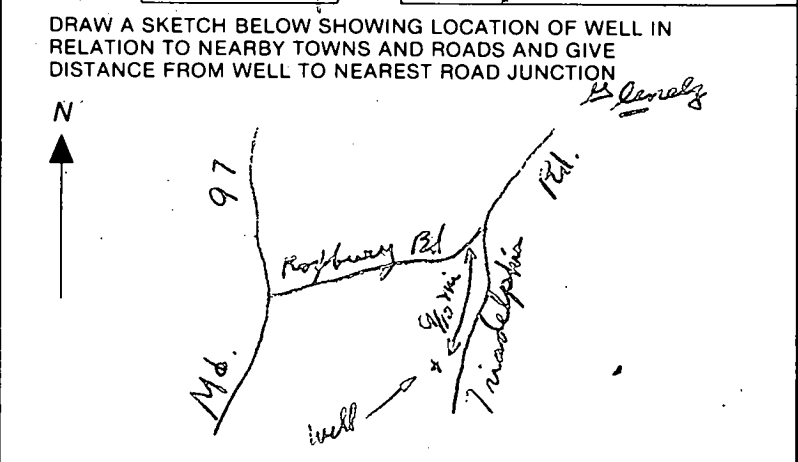
APPROXIMATE DEPTH OF WELL **300** 24 28 FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & DRIVEN  
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVerse-ROTary  Drive-POINT  
 other \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. WELL  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
  
 71487 Not present for grout.  
 2 ft casing  
 10 bags cement  
 JEN  
 WELL

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  
 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)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ 54 **GAP** 63  
 FORCE **AAA** WRITE INITIALS IN BOX PERMIT No. **40-81-2181** 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

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

DATE WELL ABANDONED: 3/16/98 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 81 - 2181

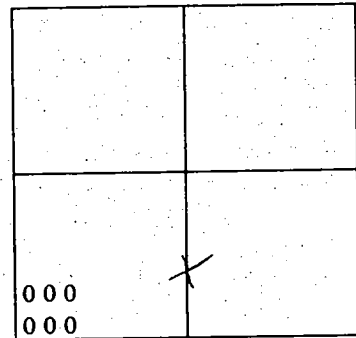
\* PERMIT NUMBER OF REPLACEMENT WELL

HO - 94 - 1303

\* PERSON ABANDONING WELL: Joseph Mayne  
 \* OWNER'S NAME: Selbridge Builders

WELL DRILLERS LICENSE NUMBER: 024  
 CIRCLE: MWD/MSD/**MGD**

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: Greenleaf  
 TAX MAP \_\_\_\_\_ BLOCK \_\_\_\_\_ PARCEL \_\_\_\_\_  
 SUBDIVISION: Tridelpia Rd. Prop.  
 SECTION: \_\_\_\_\_ LOT: 1  
 NEAREST ROAD: Tridelpia Rd.



SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES  
 E 790  
 BOX NUMBER  
 N 520

\* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) \_\_\_\_\_
- JETTED
- HAND DUG

\* USE CODE:

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

\* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 6 5/8 INCHES IN DIAMETER

\* DEPTH OF WELL: 145 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	30
Washed gravel	30	145'

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN: Joseph E. Mayne LICENSE # 024 CIRCLE ONE: MWD/MSD/**MGD** DATE: 3/19/98  
 DENV 828 JULY 1993 2) COUNTY ENVIRONMENTAL AGENCY