

STATE OF MARYLAND  
DEPARTMENT OF WATER RESOURCES

State Office Building  
ANNAPOLIS, MARYLAND 21401

WELL COMPLETION REPORT — *This report must be submitted within 30 days after completion of the well*

WELL DESCRIPTION

WELL LOG		CASING AND SCREEN RECORD		
State the kind of formations penetrated, their depth, their thickness, and if water-bearing		State the kind and size of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).		
FEEET		DIAM. (inches)	FEEET	
from	to		from	to
slit	0-14	Steel	6 1/4	0-74
rotten rock	14-40			
quartz sand	40-71			
sandstone	71-96			
water enters 85-89 ft.				

Permit Number *HO.65W.356*

Name of Owner  
*W. F. Walker*

PUMPING TEST  
Hours Pumped... *2*  
Type of Pump Used... *Bailer*  
Pumping Rate  
Gallons per Minute... *7*

WATER LEVEL  
Distance from land surface to water:  
Before Pumping... *31* Ft.  
When Pumping... *70* Ft.

APPEARANCE OF WATER  
Clear...   
Cloudy...  
Taste... *good*  
Odor... *none*

Height of Casing Above Land Surface... *2* Ft.

PUMP INSTALLED  
Type... *none*  
Capacity  
Gallons per Minute...  
Gallons per Hour...  
Pump Column Length... Ft.

REMARKS  
*7 in. Valley*  
*Lot 11 B*  
  
Well Was Completed  
Date... *10 March 65*  
Well Driller... *Russell*  
*Feister*  
Signature

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RECEIVED  
FEB 23 AM 9:11  
DEPARTMENT OF  
WATER RESOURCES

No. 188

APPLICATION FOR PERMIT TO DRILL WELL

An application must be submitted and permit received before drilling a well

Owner Wm F Walker Driller Small License Number 25  
 Street or R. F. D. 7urf Valley Street or R. F. D. 22100  
 Post Office Ellicott City, Md Post Office Ellicott City, Md  
 Date 12-23-65

Quantity of Water to be Produced 5 G.P.M.  
 Total Quantity Needed For Use 300 G.P.D.  
 Use for Water Home House  
 Approximate Depth of Well (feet) 60  
 Method of Drilling to be used cable

Location of Well  
 County Howard  
 Nearest Town Ellicott City  
 Distance from Town 5  
 Direction from Town West

PERMIT TO DRILL WELL  
 (Permit to be returned to Driller)

NOT TO BE FILLED IN BY DRILLER

Permit No. HO-65-W-356

Samples of Cuttings Required by Department  Yes  No

Owner Requires Permit to Appropriate Water  Yes  No

Owner Has Permit to Appropriate Water  Yes  No

The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.

Paul W. McKee Director

Date 2-23-65

Special conditions that may apply:

Health Department Approval of Application  
 \_\_\_\_\_ County Department of Health  
 or  State Department of Health  
 Approved by \_\_\_\_\_  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_

Description of Location of Well  
 (This information should be definite enough to permit locating well on a county map).

Near what road RT 40  
 On which side of road North  
 (North, East, South, West)  
 Distance from road 1000 ft

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with north in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch.

