

**B 1** 11832 SEQUENCE NO. WRA USE ONLY  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
please print or type

WRA PERMIT NUMBER  
**HO-73-3927**  
fill in this form completely

DATE RECEIVED 6-11-81  
OWNER INFORMATION  
Ludwick E. Robert  
LAST NAME OWNER FIRST NAME  
3931 Wood Run Rd.  
STREET OR RFD  
Ellicott City Md. 21043  
TOWN STATE ZIP

**B 3** LOCATION OF WELL  
COUNTY Howard  
SUBDIVISION  
SECTION LOT  
NEAREST TOWN Blensie  
MILES FROM TOWN enter o if in town 1 MI

**B 1** CONTINUED DRILLER INFORMATION  
Joseph L. Wagner 238  
DRILLER'S NAME LICENSE NO.  
Joseph L. Wagner May 28, 81  
SIGNATURE DATE

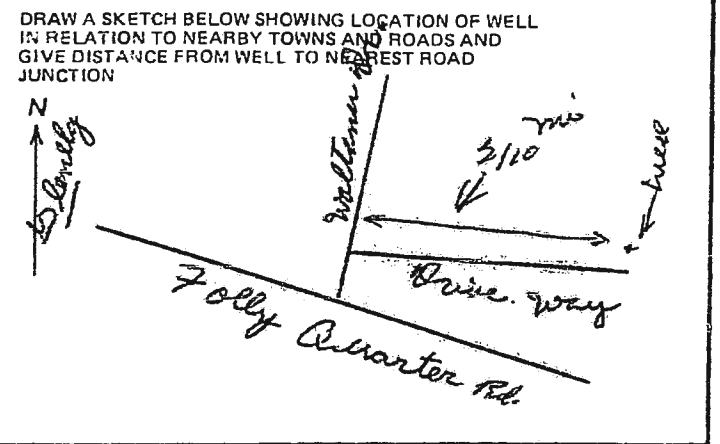
**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
  
NEAR WHAT ROAD Waltann Drive  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) W  
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 3/10

**B 2** WELL INFORMATION  
APPROX. PUMPING RATE (GAL. PER MIN.) 5  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

- 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)

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX  
WRITE THE BOX NUMBER FROM THE MAP HERE

APPROXIMATE DEPTH OF WELL 190 FEET  
APPROXIMATE DIAMETER OF WELL 6 INCH



Method of Drilling circle one  
 BORED (OR AUGERED)  JETTED  JETTED & DRIVEN  
 AIR-PERCUSSION  ROTARY (HYDRAULIC)  
 CABLE REVERSE ROTARY  DRIVE-POINT ROTARY  
other AIR-ROT

REPLACEMENT OR DEEPEMED WELLS  
Circle Appropriate Bcx  
 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 DEEPEN AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

**B 4** NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
COUNTY NAME Howard COUNTY NO. A31449  
DRILLER SIGNATURE A. Trummel STATE HEALTH CIRCLE BOX 5  
DATE 062281  
NORTH GRID 520 EAST GRID 0907 ELEV. (FT.)  
GRID 50 55 GRID 57 63 65 68

Not to be filled in by driller (WRA USE ONLY)  
APPROX. PERMIT NUMBER GAP  
FORCE INITIALS IN BOX FF WRITE INITIALS IN BOX  
CONDITIONS 40-73-3927

**B 5** SPECIAL CONDITIONS (WRA USE ONLY)

C 1 8101 SEQUENCE NO. (WRA USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER AS/4/9

(THIS NUMBER IS TO BE PUNCHED IN COLS. 2-8 ON ALL CARDS)

Date Received (WRA use only) JUN 20 1981 DATE WELL COMPLETED 06 01 81

Depth of Well 305 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-3927

OWNER Ludicke P. Robert last name first name STREET OR RFD 3921 Walt Anne Lisa TOWN Ellicott City Md. 21031 SUBDIVISION Shepherds Glen SECTION LOT

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: Brown Sand c 40, Gray mica rock 40 305 ✓

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N TYPE OF GROUTING MATERIAL CEMENT CM BE-TO-WITE CLAY BC NO. OF BAGS 11 NO. OF POUNDS 1234 GALLONS OF WATER 5.1 DEPTH OF GROUT SEAL to nearest foot from 48 TOP (enter 0 if from surface) BOTTOM 18

CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE Normal diameter top/main casing (nearest inch) Total depth of main casing (nearest foot) SF 6 45

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS BZ BRONZE HO OPEN HOLE PL PLASTIC OT OTHER

DEPTH (nearest ft.) H 0 43 305

- CIRCLE APPROPRIATE BOX [A] A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED [E] ELECTRIC LOG OBTAINED [P] TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS IDENT NO 238 DRILLERS SIGNATURE Joseph L. Mayne (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR sign of driller or journeyman responsible for sitework if different from permittee

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH) from to

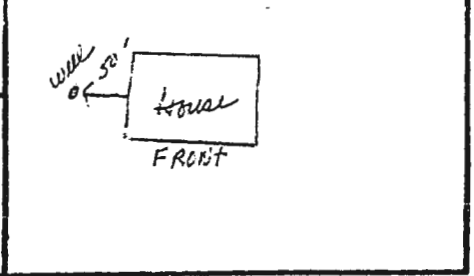
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W O 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 4 PUMPING RATE (gal. per min. to nearest gal.) 3 METHOD USED TO MEASURE PUMPING RATE Wi WATER LEVEL distance from land surface: BEFORE PUMPING 70 WHEN PUMPING 260 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

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

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



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  
 2/4/2008

DATE WELL ABANDONED: 8-12-20 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

\* PERMIT NUMBER OF REPLACEMENT WELL: \_\_\_\_\_

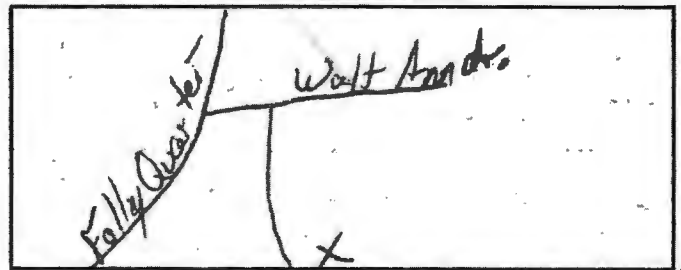
\* PERSON ABANDONING WELL: Andrew Housman WELL DRILLER'S LICENSE NUMBER: 224

CIRCLE: MWD/MSD MGD

\* OWNER'S NAME: Tori Paule

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: Ellicott City  
 TAX MAP 0032-BLOCK 0015 PARCEL 0115  
 SUBDIVISION: \_\_\_\_\_  
 SECTION: \_\_\_\_\_ LOT: 2  
 STREET ADDRESS: 3921 Walt Ann Dr



LATITUDE 39.261478

LONGITUDE 76.968425

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement	7	5
AB: PERMIT FOR POOLHOUSE 820003718 PREVIOUSLY FILLED w/ STONE - DRILLER VOLUME OF MATERIAL USED CAPPED Cement 470/65 w/ CEMENT 5 BAGS		

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

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

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

SIZE OF CASING: 36 INCHES IN DIAMETER

DEPTH OF WELL: \_\_\_\_\_ FEET DEEP total depth unknown

WAS ANY CASING REMOVED? YES  NO   
 If yes, length removed, in feet: \_\_\_\_\_

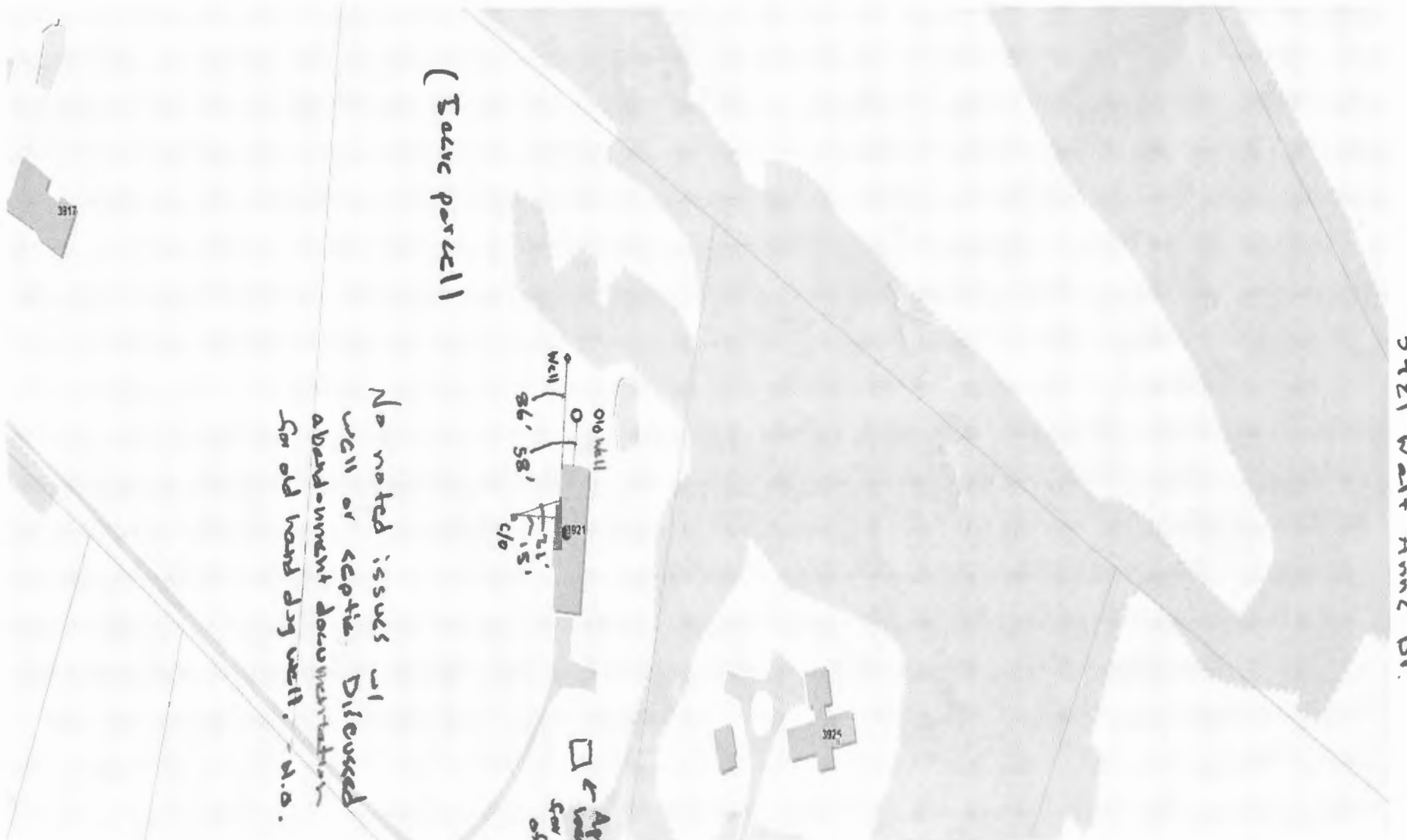
WAS CASING RIPPED OR PERFORATED? YES  NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN Andrew Housman LICENSE# 224

MWD/MSD/MGS 8-12-20  
 CIRCLE ONE DATE

COUNTY

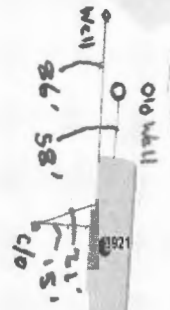
Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.



Site visit conducted on 8/5/20.  
 - M. Osinski  
 3921 Walt Anne Dr.

(Save parcel)

No noted issues w/  
 well or septic. Discussed  
 abandonment documentation  
 for old hand dug well. - n.o.



□ ← Approx  
 location  
 for proposed  
 office.

8/5/2020 – Site visit conducted. - H.O.  
3921 Walt Anne Drive

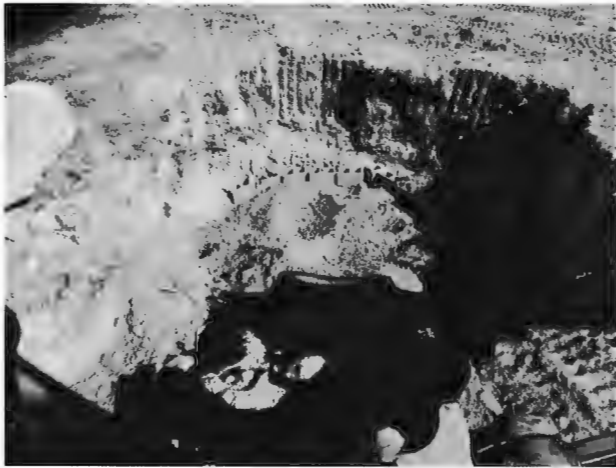


Old hand dug well in background.

8/5/2020 – Site visit conducted. - H.O.  
3921 Walt Anne Drive



Existing well. No tag. Two-piece cap and electrical conduit secured. No noted issues.



Drywell Abandoned  
10/23/2023 