

C 1 **9129** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

DATE RECEIVED (WRA USE ONLY) _____

DATE WELL COMPLETED 8/16/77

8-12 15 20

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER _____

PERMIT NO. FROM "PERMIT TO DRILL WELL"
70-73-3149
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 872

OWNER Collins Roy LAST NAME FIRST NAME

STREET OR RFD Box 142 POST OFFICE Simpsonville, Md. 21150

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<u>Top Soil</u>	<u>0</u>	<u>2</u>	
<u>Slaley</u>	<u>2</u>	<u>20</u>	
<u>clay</u>	<u>20</u>	<u>35</u>	
<u>SAND STONE</u>	<u>35</u>	<u>50</u>	
<u>MCA</u>	<u>50</u>	<u>60</u>	
<u>SAND STONE</u>	<u>60</u>	<u>85</u>	<input checked="" type="checkbox"/>
<u>MCA</u>	<u>85</u>	<u>140</u>	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT BENTONITE CLAY

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 1 NO. OF POUNDS 400

GALLONS OF WATER 45

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 30 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

(INSERT APPROPRIATE CODE BELOW)

STEEL CONCRETE

PLASTIC OTHER

MAIN CASING TYPE BT NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 45

OTHER CASING (IF USED)

DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____

SCREEN RECORD

(INSERT APPROPRIATE CODE BELOW)

STEEL BRASS OR BRONZE OPEN HOLE

PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM 10 TO 140

EACH SCREEN _____

SLOT SIZE 1. _____ 2. _____ 3. _____

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM _____ TO _____

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 12

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 30 (NEAREST FOOT)
 WHEN PUMPING 140 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) _____

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) _____
 PUMP HORSE POWER _____
 PUMP COLUMN LENGTH (NEAREST FOOT) _____

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE
 BELOW } 3 (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

Handwritten notes and arrows: "1st level", "11' 0" 0", "OSI"

CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

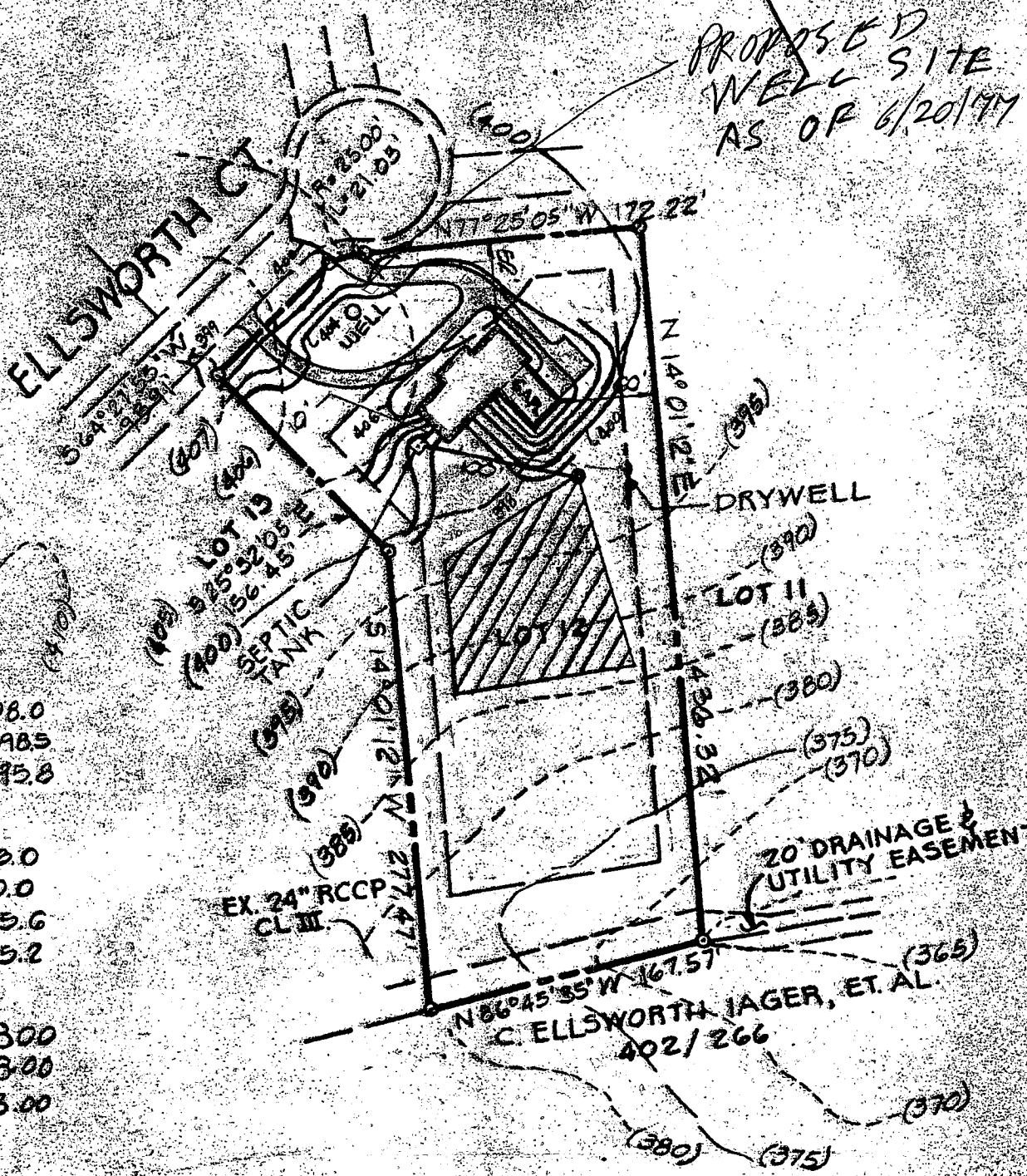
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME _____

(PLEASE PRINT) L. F. Bosterman

SIGNATURE L. F. Bosterman

MW. Collins
995-0060



HOUSE:
FF ELEV. 408.0
BENT ELEV. 398.9
INV. OUT. 395.8

SEPTIC TANK:
EX. GR. 402.0
FIN. GR. 400.0
INV. IN. 395.6
INV. OUT. 395.2

DRYWELL:
EX. GR. 398.00
FIN. GR. 398.00
INV. IN. 393.00

WELL:
EX. GR. 404.00
FIN. GR. 404.00

6/20/77
Plan 2/2

TITLE		GRADING STUDY		ENGINEERING PLANNING SURVEYING BY	
PROJECT		LOT 12 WILLIAMS CONTRIVANCE ESTATES - SECTION 2		BOENDER ASSOCIATES INC.	
LOCATION		5TH ELECTION DISTRICT, HOWARD CO., MD.		ELLICOTT CITY, MD. 21043 SALISBURY, MD. 21801 301-485-7777	
DATE: 6/7/77	DES. BY: W.N.	DRAWN BY: W.N.	CHKD BY: R.M.		
SCALE: 1" = 100'	JOB NO.: 77128	DRWG. NO.: 1 OF 1			