

THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT

WELL DESCRIPTION

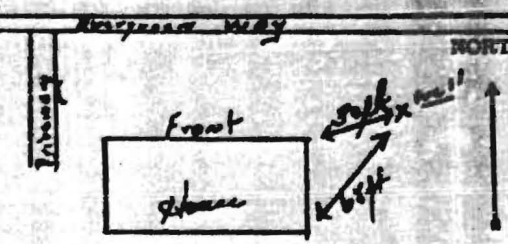
Permit Number MD 10113
 Owner Edgar Jones
 Address Edgar Jones
 Subdivision Edgar Jones
 Section 4 Lot 3
 County Permit Number _____
PUMPING TEST
 Hours Pumped 4
 Type of Pump Used Hand
 Pumping Rate _____
 Gallons per Minute 10
WATER LEVEL
 (Distance from land surface to water)
 Before Pumping 20 Ft.
 When Pumping 75 Ft.
APPEARANCE OF WATER
 Clear yes Cloudy _____
 Taste _____
 Odor _____
 Height of Casing Above Land
 Surface 7 Ft.
PUMP INSTALLED
 Type _____
 Capacity _____
 Gallons per Minute _____
 Gallons per Hour _____
 Pump Column Length _____ Ft.

A WELL LOG
 State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

B CASING AND SCREEN RECORD
 State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

	FEET from ___ to ___		DIAM. (inches)	FEET from ___ to ___
Overburden	0-4'	Black Steel	3"	26 ft.
Soft Gray Shale	4-24'			
Gray Rock	24-80 ft.			

LOCATION OF WELL ON LOT
 Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE WELL WAS COMPLETED

3-3-68

I hereby affirm that this report contains no willful misrepresentation or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Edgar Jones Well Driller
 Well Driller License No.: 215