8982

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

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER: AH6625

DATE RECEIVED (WRA USE ONLY): 8-19

DATE WELL COMPLETED: June 2 1975

DEPTH OF WELL: 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": H21-173-17075

DRILLERS IDENTIFICATION NO.: 42

OWNER (LAST NAME): K & E Construction

STREET OR RFD: Box 175

POST OFFICE (PLACE NAME): Hampstead

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CIRCLE IF WATER BEARING

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX): YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS: 6 NO. OF POUNDS: 600

GALLONS OF WATER: 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT): FROM 0 FT. TO 21 FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW): STEEL (ST), CONCRETE (CO), PLASTIC (PL), OTHER (OT)

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
T		

OTHER CASING (IF USED)

EACH CASING

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW): STEEL (ST), BRASS OR BRONZE (BR), OPEN HOLE (HO), PLASTIC (PL), OTHER (OT)

C 2 (SEQ. NO.)

EACH SCREEN

		DEPTH (NEAREST WHOLE FOOT) FROM	TO
1	HO	27	380
2			
3			

SLOTSIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

GRAVEL PACK: FROM ____ TO ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX: F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.): TELESCOPE CASING (T), LOG INDICATOR, OTHER DATA AVAILABLE (W Q)

C 2 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR): ____

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON): ____

METHOD USED TO MEASURE PUMPING RATE: ____

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING: ____ (NEAREST FOOT)

WHEN PUMPING: 37 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST): AIR (A), PISTON (P), TURBINE (T), CENTRIFUGAL (C), ROTARY (R), OTHER (DESCRIBE BELOW), JET (J), SUBMERSIBLE (S)

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 (Y) NO (N)

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 (+) / BELOW (–) LAND SURFACE (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).

N

well

60'

Hwy 2

CIRCLE APPROPRIATE BOXES

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 NAME (PLEASE PRINT): L F Easterday

SIGNATURE: L F Easterday

HEALTH