

05017

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER Howard 13 48987

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" OK BY D.K.S. 6/8/98 HU 94 1503

OWNER Kreischer, Mike STREET OR RFD RT 144 (Frederick Rd) TOWN Lisbon MD 22 SUBDIVISION Stanley Miller Prop SECTION LOT 22

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, FEET (FROM, TO), check if water bearing. Includes entries for BROWN SHALE, BLUE SLATE, and WATER AT 92-275.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE, Nominal diameter, Total depth, OTHER CASING (if used)

SCREEN RECORD

DEPTH (nearest ft.) table with columns 1-21 and rows A-N. Includes screen diameter and slot size information.

C 3

PUMPING TEST

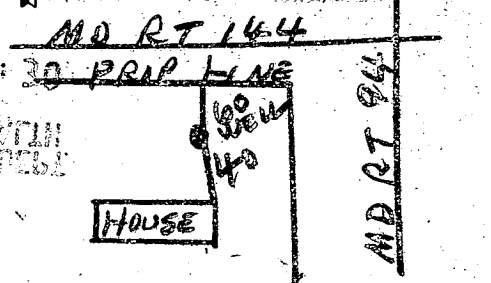
HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES/NO), TYPE OF PUMP INSTALLED, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT

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)



DRILLERS LIC. NO. M D 139 Robert C. Line DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. M D 470 Gary Harley SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

B 6896

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-1563 fill in this form completely

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

Date Received (APA) 5-21-98

OWNER INFORMATION

Kreischer, Mike and Sheree Mysocki 16333 Frederick Road Woodbine Md. 21797

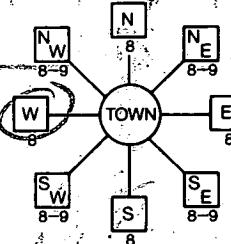
LOCATION OF WELL

Howard COUNTY Stanley Miller Prop. SECTION 44 LOT 22 LISBON NEAREST TOWN

DRILLER INFORMATION

Robert L. Cline M WD139 Cline & Duvall, Inc. 8093 Hillmark Ct. Frederick 21704

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



16333 Woodbine Road NEAR WHAT ROAD ON WHICH SIDE OF ROAD 100 DISTANCE FROM ROAD ENTER FT OR MI

WELL INFORMATION APPROX. PUMPING RATE 5 AVERAGE DAILY QUANTITY NEEDED 300

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 APPROVAL) TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY P 48987 STATE SIGNATURE Kim Maisto DATE ISSUED 6-1-98 CO SIGNATURE EXP. DATE 6-1-99 NORTH GRID 547 EAST GRID 775

APPROXIMATE DEPTH OF WELL 250 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 54 FORCE KM PERMIT No. HO-94-1563

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

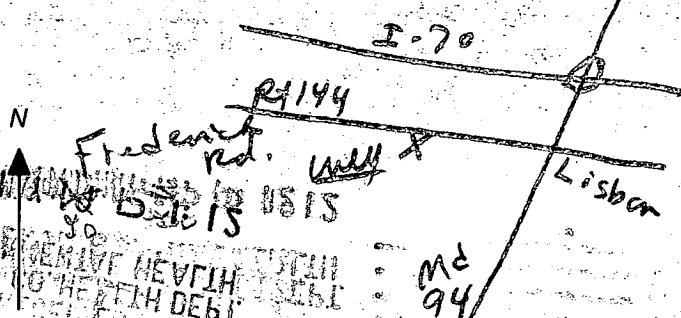
SOURCES OF DRILLING WATER

- 1. Well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

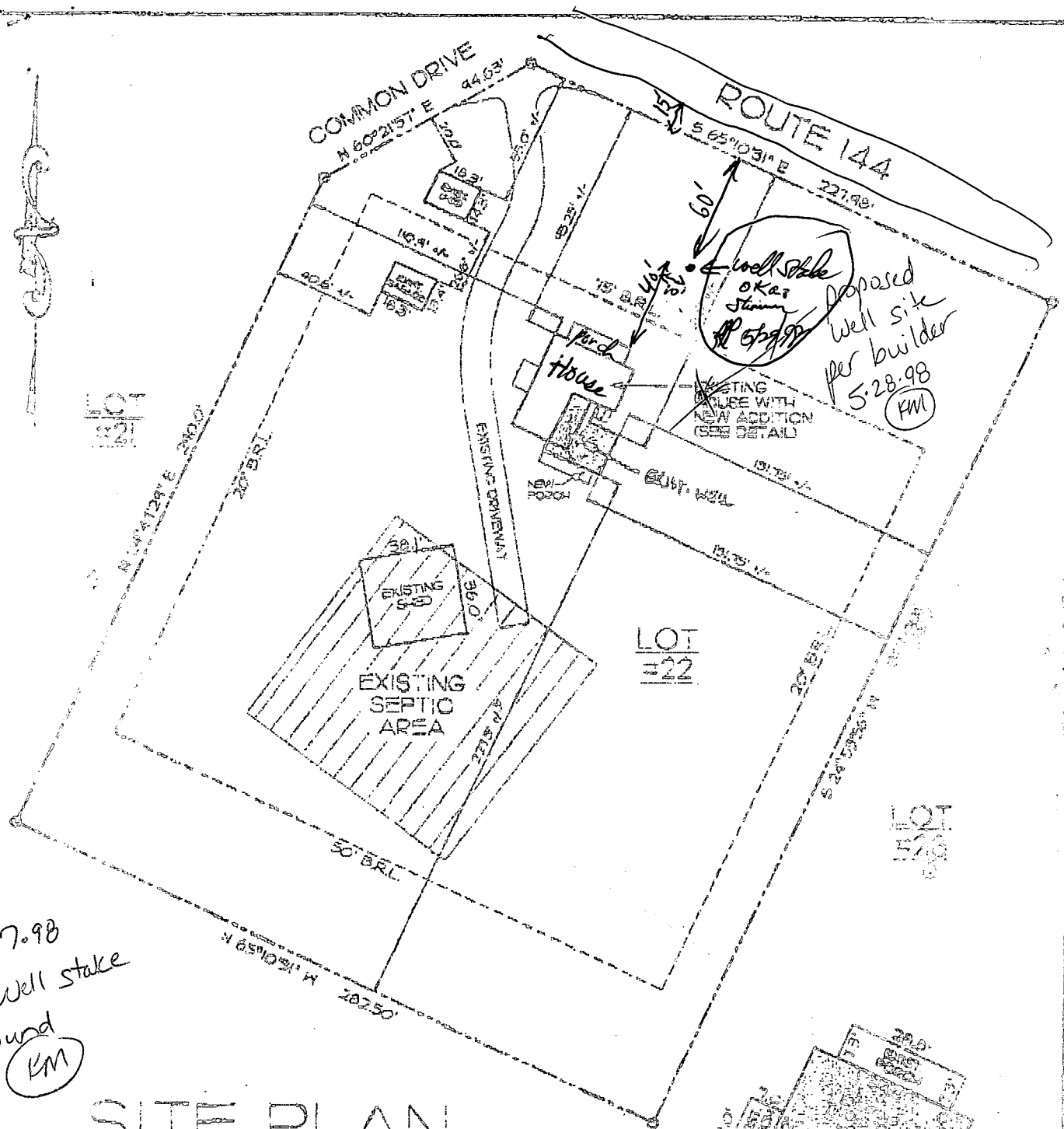
E 7705 N 5407

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



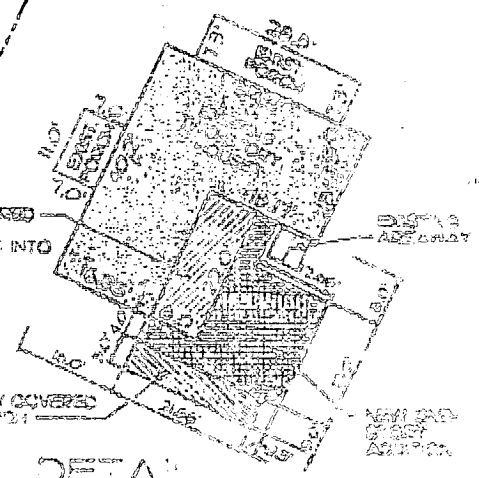
5-27-98
 No well stake
 found
 (KM)

SITE PLAN

1" = 60'

2.934 AC. +/-

LOT 22, PLAT #3840
 4TH ELECTION DISTRICT, HOWARD COUNTY, MD



DETAIL

1" = 30'

INFORMATION DERIVED FROM PLOT PLAN PREPARED BY ANTON H. WAGEN, LAND SURVEYOR, DATED 5/8/82.

JOSEPH F. DEVILBISS CONSTRUCTION CO 7730-B SUNDAYS LANE FREDERICK, MARYLAND 21702 (301) 698-8344	DATE: 5/18/98 DRAWN BY: [illegible] CHECKED BY: [illegible]	ADDITION/RENOVATION MIKE KRE-SCHER AND SHERIE WYCOCK 10133 FREDERICK ROAD WOODBINE, MARYLAND 21783	SHEET 1 OF 1
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 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

16333 Frederick Rd.

DATE WELL ABANDONED: 7/8/98 (month/day/year)

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* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

H	0	9	4	1	5	6	3
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* PERSON ABANDONING WELL: Robert Cline Jr

WELL DRILLERS LICENSE NUMBER: 536
 CIRCLE MWD MSD/MGD

* OWNER'S NAME: KREISCHER MIKE/SHEREE

* WELL LOCATION:

COUNTY: Howard
 NEAREST TOWN: Lisbon
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: STANLEY MILLER DRDP.
 SECTION: _____ LOT: 22

X	
0 0 0	
0 0 0	

MARYLAND GRID COORDINATES

E 775
 BOX NUMBER N 547 ←

SHOW WELL LOCATION BY X WITHIN BOX

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>3/4 stone</u>	<u>75</u>	<u>40</u>
<u>TYPE II CEMENT</u>	<u>40</u>	<u>0</u>

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

* USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL

* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 75 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? YES NO

Robert P. Cline Jr
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

536 7-8-98
 LICENSE # _____ CIRCLE ONE _____ DATE