

6379

PERMIT NO. (WPA USE ONLY)

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 A18347

(SEQ. NO.) NUMBER IS TO BE PUNCHED 3-8 ON ALL CARDS

DATE RECEIVED (WPA USE ONLY)

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE WELL COMPLETED

22 (TO NEAREST FOOT) 20

40-73-0780

DRILLERS IDENTIFICATION NO. 47

LAST NAME

FIRST NAME

OR RFD

POST OFFICE

WELL DESCRIPTION

WELL LOG KIND OF FORMATIONS PENETRATED, THEIR DEPTH, THICKNESS AND IF WATER BEARING

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [X] NO []

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT [X] BENTONITE CLAY []

NO. OF BAGS NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 48 FT. TO 54 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW STEEL [X] CONCRETE [] PLASTIC [] OTHER []

MAIN CASING TYPES NOMINAL DIAMETER TOP (IN) CASING DEPTH OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED) DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE STEEL [X] BRASS OR BRONZE [] PLASTIC [] OTHER []

DEPTH (NEAREST WHOLE FOOT) FROM TO

EACH SCREEN 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

WPA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

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 WHEN PUMPING

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

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).

Lot well 45' x 30'

Health

Signature

DATE

DRILLER'S NAME

ADDRESS

CITY

STATE

ZIP

PHONE

TELETYPE

FAX

EMAIL

WEBSITE

MOBILE

INTERNET

OTHER

REMARKS

DATE

TIME

DRILLER'S SIGNATURE

DATE

TIME

DRILLER'S NAME

ADDRESS

CITY

STATE

ZIP

PHONE

TELETYPE

FAX

EMAIL

WEBSITE

MOBILE

INTERNET

OTHER

REMARKS

DATE

TIME

DRILLER'S SIGNATURE

DATE

TIME