

6837 SEQUENCE NO. (DENY USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

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

COUNTY NUMBER **103122**

ST/CO USE ONLY
 DATE RECEIVED [] [] [] [] [] []

DATE WELL COMPLETED **07/17/77**

Depth of Well **300**
 (TO NEAREST FOOT)

PERMIT NO. FROM PERMIT TO DRILL WELL
HA-92-10/107

OWNER **Collin Corvelle**

STREET OR RFD **1000 27th St** TOWN **Cooksville**

SUBDIVISION _____ SECTION _____ LOT _____

WELL LOG
 Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Other water bearing
	FROM	TO	
Top soil	0	2	
Clay	2	5	
Shaley	5	15	
Sandstone	15	25	
Shale	25	30	
Sandstone	30	36	
Mica	36	60	
Sandstone	60	65	
Mica	65	85	
Mica + mixed	85	95	
Mica	95	200	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **12** NO. OF POUNDS **200**

GALLONS OF WATER _____

DEPTH OF GROUT SEAL (to nearest foot)
 from [] [] [] [] [] [] ft. to **30** ft.

CASING RECORD
 casing types insert appropriate code below

ST **CO**
 STEEL CONCRETE

PL **OT**
 PLASTIC OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of casing casing (nearest foot) **99**

SCREEN RECORD
 screen type or open hole insert appropriate code below

ST **BR** **HO**
 STEEL BRASS OPEN HOLE

PL **OT**
 PLASTIC OTHER

C2

DEPTH (nearest ft.)
40 **92** **200**

SLOT SIZE _____ DIAMETER OF SCREEN _____ (NEAREST INCH)

C3

PUMPING TEST

HOURS PUMPED (nearest hour) **3**

PUMPING RATE (gal. per min. to nearest gal.) [] [] [] [] [] []

METHOD USED TO MEASURE PUMPING RATE **Reel**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **54**

WHEN PUMPING **209**

TYPE OF PUMP USED (for test)
A **P** **T**
 AIR PLAIN TURBINE

C **R** **O**
 CENTRIFUGAL ROTARY OTHER (describe below)

J **S**
 JET SUBMERSIBLE

PUMP INSTALLER

DRILLER WILL INSTALL PUMP (circle YES or NO) **NO**

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,A,S,T,O) IN BOX - SEE ABOVE: []

CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] [] []

PUMP HORSE POWER [] [] [] [] [] []

PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] []

DEPTH HEIGHT (circle appropriate box and enter casing height)
+ above **-** below

LAND SURFACE **2** (nearest foot)

CIRCLE APPROPRIATE LETTER

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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT NO. **40**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Charles P. Feller

SITE SUPERVISOR (sign of driller or journeyman responsible for stetwork if different from permittee)

GRAVEL PACK _____

IF WELL DRILLED WAS FLOWING WELL INSERT IN BOX 68 []

REP USE ONLY NOT TO BE FILLED IN BY DRILLER!

T (EROSI) **WQ** (74 75 76)

FILE SCOPE LOG OTHER DATA

