

SEQUENCE NO. (DENV 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.

1 2 3  
4 5 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLUMN ON ALL CARDS)

COUNTY NUMBER A09917

STATE USE ONLY  
DATE RECEIVED

DATE WELL COMPLETED

Depth of Well  
(TO NEAREST FOOT)

REC'D.  
+NOTED  
1/26/93

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

OWNER: Robert F. Edelman last name first name  
STREET, OR RFD: Edelman Court TOWN: Fulton  
SUBDIVISION: Beaufort Park SECTION: \_\_\_\_\_ LOT: 8

**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		Check if water bearing
	FROM	TO	
<i>9 dry wells filled in with sand &amp; drilling materials</i>			
<i>400', 320', 320', 300', 300', 200', 200', 200', 200'</i>			

**GROUTING RECORD**  
WELL HAS BEEN GROUTED (Circle appropriate box)  Y  N  
TYPE OF GROUTING MATERIAL  
CEMENT  CM BENTONITE CLAY  BC  
NO. OF BAGS 63 NO. OF POUNDS 5229  
GALLONS OF WATER 375  
DEPTH OF GROUT SEAL (to nearest foot)  
from \_\_\_\_\_ ft. to \_\_\_\_\_ 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) \_\_\_\_\_

**OTHER CASING (if used)**  
diameter inch \_\_\_\_\_ depth (feet) from \_\_\_\_\_ to \_\_\_\_\_

**SCREEN RECORD**  
screen type or open hole insert appropriate code below  
STEEL  ST BRASS  BR  
BRONZE  BR PLASTIC  PL  
OPEN HOLE  HO OTHER  OT

**DEPTH (nearest ft.)**

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	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51
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SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)

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. 238  
DRILLERS SIGNATURE David P. Mayne  
(MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.)  70  72   
WQ  74  75  76  
TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3**  
**PUMPING TEST**  
HOURS PUMPED (nearest hour) \_\_\_\_\_  
PUMPING RATE (gal. per min. to nearest gal.) \_\_\_\_\_  
METHOD USED TO MEASURE PUMPING RATE \_\_\_\_\_  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING \_\_\_\_\_  
WHEN PUMPING \_\_\_\_\_  
TYPE OF PUMP USED (for test)  
A air  P piston  T turbine  other (describe below)  
C centrifugal  R rotary  O other (describe below)  
J jet  S submersible

**PUMP INSTALLED**  
DRILLER WILL INSTALL PUMP YES  NO   
(CIRCLE) (YES or 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,R,S,T,O) IN BOX - SEE ABOVE:  29  
CAPACITY: GALLONS PER MINUTE (to nearest gallon) \_\_\_\_\_  
PUMP HORSE POWER \_\_\_\_\_  
PUMP COLUMN LENGTH (nearest ft.) \_\_\_\_\_  
CASING HEIGHT (circle appropriate box and enter casing height)  
+ above } LAND SURFACE  
- below } (nearest foot)

**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)  
*see Attached*  
*Dry well locations*

B 1 00732 SEQUENCE NO. (DP USE ONLY)  
1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED IN C.G.S. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER  
70 40-92-0181 79  
fill in this form completely

Date Received (APA) 072792  
OWNER INFORMATION  
8 13  
15 Last Name Owner First Name 34  
COMLEY E ROBERT  
36 Street or RFD 55  
9001SAVNDERS LANE  
57 town 70 State 72 Zip 76  
Bethesda MD 20817

B 3 LOCATION OF WELL  
1 2  
8 COUNTY 21  
HOWARD  
23 SUBDIVISION 42  
BEAUFORT PARK  
SECTION 44 46 LOT 8 48 50  
52 NEAREST TOWN 71  
FULTON  
MILES FROM TOWN (enter 0 if in town) 73 76 77 78  
2.4 MI

DRILLER INFORMATION  
Driller's Name 77 License No. 80  
Joseph L. Mayne 238  
Firm Name  
Joseph L. Mayne Well Drilling  
Address  
5512 Ridge Rd. Mt. Airy, Md. 21771  
Signature Date  
Joseph L. Mayne 7/23/92

B 4  
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
11 NEAR WHAT ROAD 30  
Edenton Court  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH N  
WEST W 32 EAST E  
SOUTH S  
34 225 37 DISTANCE FROM ROAD  
ENTER FT or MI 38 39  
FT

B 2 WELL INFORMATION  
APPROX. PUMPING RATE (GAL. PER MIN.) 5  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
COUNTY NAME 40  
Howard COUNTY NO. A09917  
STATE SIGNATURE 41  
DATE ISSUED  
CO SIGNATURE 48  
NORTH GRID 474000 50 55  
EAST GRID 0817000 57 63  
EXP. DATE 41

APPROXIMATE DEPTH OF WELL 300 FEET  
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
SOURCES OF DRILLING WATER  
WRITE THE BOX NUMBER FROM THE MAP HERE  
E 816  
N 474  
000 000

METHOD OF DRILLING (circle one)  
BORED (or Augered) JETTED Jetted & DRIVEN  
AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)  
CABLE REVerse-ROtary Drive-POINT  
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
N THIS WELL WILL NOT REPLACE AN EXISTING WELL  
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
D THIS WELL WILL DEEPEMED AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
N  
Howard Rd.  
Edenton Ct.  
Fulton  
+ -> well

Not to be filled in by driller (OEP USE ONLY)  
APPROP. PERMIT NUMBER 54 GAP 63  
FORCE INITIALS IN BOX 67 68 PERMIT No. 70 71 72 73 74 75 76 77 78 79  
40-92-0181

SPECIAL CONDITIONS

NO DRY HAYES ATTEMPT  
NO PERMIT FOR FURTHER CAUSE  
NO



