

7680

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 28410

Date received (OEP use only)

DATE WELL COMPLETED

8/2/83

Depth of Well

164 (TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

HC-87-002C

OWNER Manspeaker last name Joseph F first name

STREET OR RFD Farside Road TOWN Elioak

SUBDIVISION Farside SECTION LOT 15

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. Rows: SAND (0-63), SANDSTONE (63-164).

WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 13 NO. OF POUNDS 1222 GALLONS OF WATER 78 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 50 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE (ST) Nominal diameter top(main)casing (nearest inch) 6 Total depth of main casing (nearest foot) 69

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

SCREEN RECORD screen type or openhole insert appropriate code below (ST) STEEL (BR) BRASS BRONZE (PL) PLASTIC (HO) OPEN HOLE (OT) OTHER

DEPTH (nearest ft.) (A) 67 164

- CIRCLE APPROPRIATE BOX [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 10.17.13 "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 Joseph A. Marino

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

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F)

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

C 3 (seq. no.)

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 9 METHOD USED TO MEASURE PUMPING RATE submersible

WATER LEVEL (distance from land surface) BEFORE PUMPING 34

WHEN PUMPING 36 TYPE OF PUMP USED (for test)

- [A] air [P] piston [T] turbine [C] centrifugal [R] rotary [O] other (describe below) [J] jet [S] submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) (Y) (N)

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

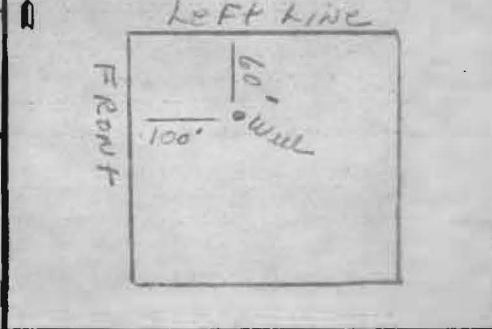
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))

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)



0271

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

70 10-81-0026 79

fill in this form completely

Date Received

03/17/83

OWNER INFORMATION

MANSPERKER, E. JOSEPH

8369 RESEPUK RD

FULTON MD 20739

B 3

LOCATION OF WELL

HOWARD

FARSIDE

SECTION 44 46 LOT 48 50

ELTDAK

MILES FROM TOWN (enter 0 if in town) 73 76 77 78

DRILLER INFORMATION

Joseph L. Mayne 238

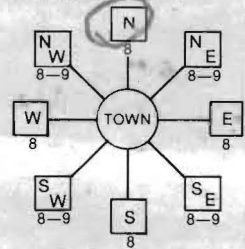
Joseph L. Mayne Well Drilling

5512 Ridge Rd. Mt. Airy MD

Joseph L. Mayne March 83

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



FARSIDE DRIVE

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 100 37

DISTANCE FROM ROAD

ENTER FT or MI 7 7

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 550

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

HOWARD

COUNTY NAME COUNTY NO. STATE HEALTH INSERT S

DATE ISSUED Frank Skinner

NORTH GRID 516000 EAST GRID 0823000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 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)

- [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 DEEPEM AN EXISTING WELL

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

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE FS PERMIT No. 10-81-0026

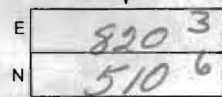
SPECIAL CONDITIONS

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



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

