
 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

DATE WELL ABANDONED: 11/7/01 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL (Drilled Well in pit)

* PERSON ABANDONING WELL: Ricky Colson

WELL DRILLERS LICENSE NUMBER: NA
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Jeanne Goodman & Dave Fogle

* WELL LOCATION: 10718 Hunting Lane

COUNTY: Howard
 NEAREST TOWN: Columbia-Simpsonville
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: Holiday Hills
 SECTION: _____ LOT: 69

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SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES

E 832
 BOX NUMBER N 490 ←

* 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) Stone

* SIZE OF CASING: 3 feet INCHES IN DIAMETER

* DEPTH OF WELL: 13 1/2 FEET DEEP

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

* WAS CASING RIPPED OR PERFORATED? _____ YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Concrete</u>	<u>13.5</u>	<u>0</u>

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN [Signature] LICENSE # 0937(51) MWD/MSD/MGD [X] DATE 11/7/01