

C 1 **4168** SEQUENCE NO. (MDE USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)  
 DATE RECEIVED **092796**  
 DATE WELL COMPLETED **092096**

**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.  
 COUNTY NUMBER **A 50385-F**  
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-94-0729**

OWNER **HOUGH WILLIAM**  
 STREET OR RFD **BRADFORD LANE** TOWN **MT. AIRY**  
 SUBDIVISION **STELLA'S CHOICE** SECTION **6** LOT **6**

**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	
Brown Shale	0	68	
Blue Rock	68	400	✓

3 dry wells 440, 440, 440, Filled in with cement + drilling materials

**GROUTING RECORD** (yes  no   
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT  BENTONITE CLAY   
 NO. OF BAGS **21** NO. OF POUNDS **1974**  
 GALLONS OF WATER **126**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **66** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
 ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER

**MAIN CASING TYPE**  
 Nominal diameter top (main) casing (nearest inch): **6**  
 Total depth of main casing (nearest foot): **71**

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

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

NUMBER OF UNSUCCESSFUL WELLS: **3**  
 WELL HYDROFRACTURED  YES  NO

**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.

TYPE: MWD/MSD/MGD  
 DRILLERS LIC. NO. **24**  
**Joseph L. Mayne**  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **27**  
**Larry Mayne**  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

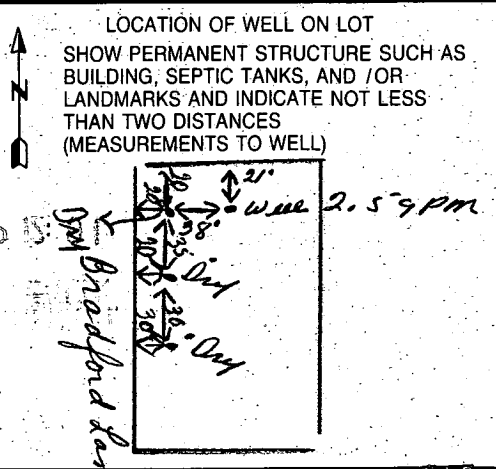
**C 2**  
 DEPTH (nearest ft.)  
 HO 70 400  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) **56** **60**

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

**MDE USE ONLY** (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)  
 T  W Q   
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest-hour) **6**  
 PUMPING RATE (gal. per min.) **002.5**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **32** ft.  
 WHEN PUMPING **327** ft.  
 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) (YES or NO) YES  NO   
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**  
 PUMP HORSE POWER **37** **41**  
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**  
 CASING HEIGHT: (circle appropriate box and enter casing height)  
 + above  - below  
 LAND SURFACE **1** (nearest foot)



B 1 **3064** SEQUENCE NO. (MDE USE ONLY)  
 THIS NUMBER IS TO BE PUNCHED IN COLS: 3-6 ON ALL CARDS

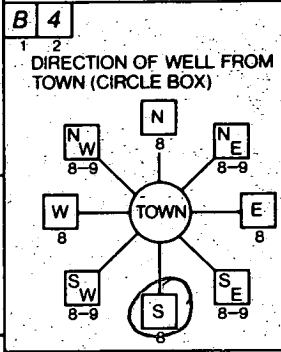
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**HO-94-0729**  
 fill in this form completely

Date Received (APA) **03/19/96**  
 OWNER INFORMATION  
**ACUGH** **WILLIAM**  
 Last Name Owner First Name  
**17383 HARDY RD**  
 Street of RFD  
**MT AIRY** **MD 21771**  
 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
**HOWARD** COUNTY  
**STELLAS CHOICE** SUBDIVISION  
 SECTION **6** LOT **6**  
**MT AIRY** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **3 1/2** MI

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD  
**Joseph L. Mayne** 24 License No. 80  
**Joseph L. Mayne Well Drilling** Firm Name  
**5512 Ridge Rd. Mt. Airy, Md. 21771** Address  
**Joseph L. Mayne 3/13/96** Signature Date



**Bradford Lane** NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  WEST  EAST  SOUTH   
 DISTANCE FROM ROAD **20** FT OR MI **FT**  
 TAX MAP: **7** BLK: **390** PARCEL

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)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

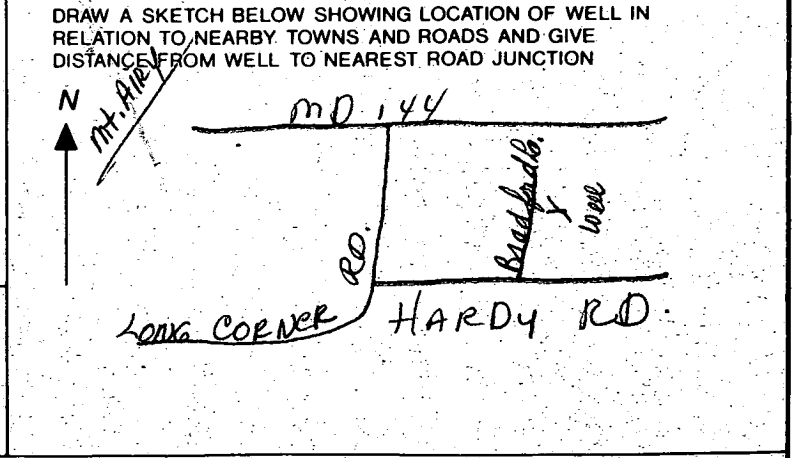
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
**HOWARD** COUNTY NAME **A-50385-F** COUNTY NO.  
 STATE SIGNATURE **Paul J. Mayne** INSERT S   
 DATE ISSUED **03/26/96** EXP. DATE **3/26/97**  
 NORTH GRID **550000** EAST GRID **765000**

APPROXIMATE DEPTH OF WELL **260** FEET  
 APPROXIMATE DIAMETER OF WELL **6** INCH

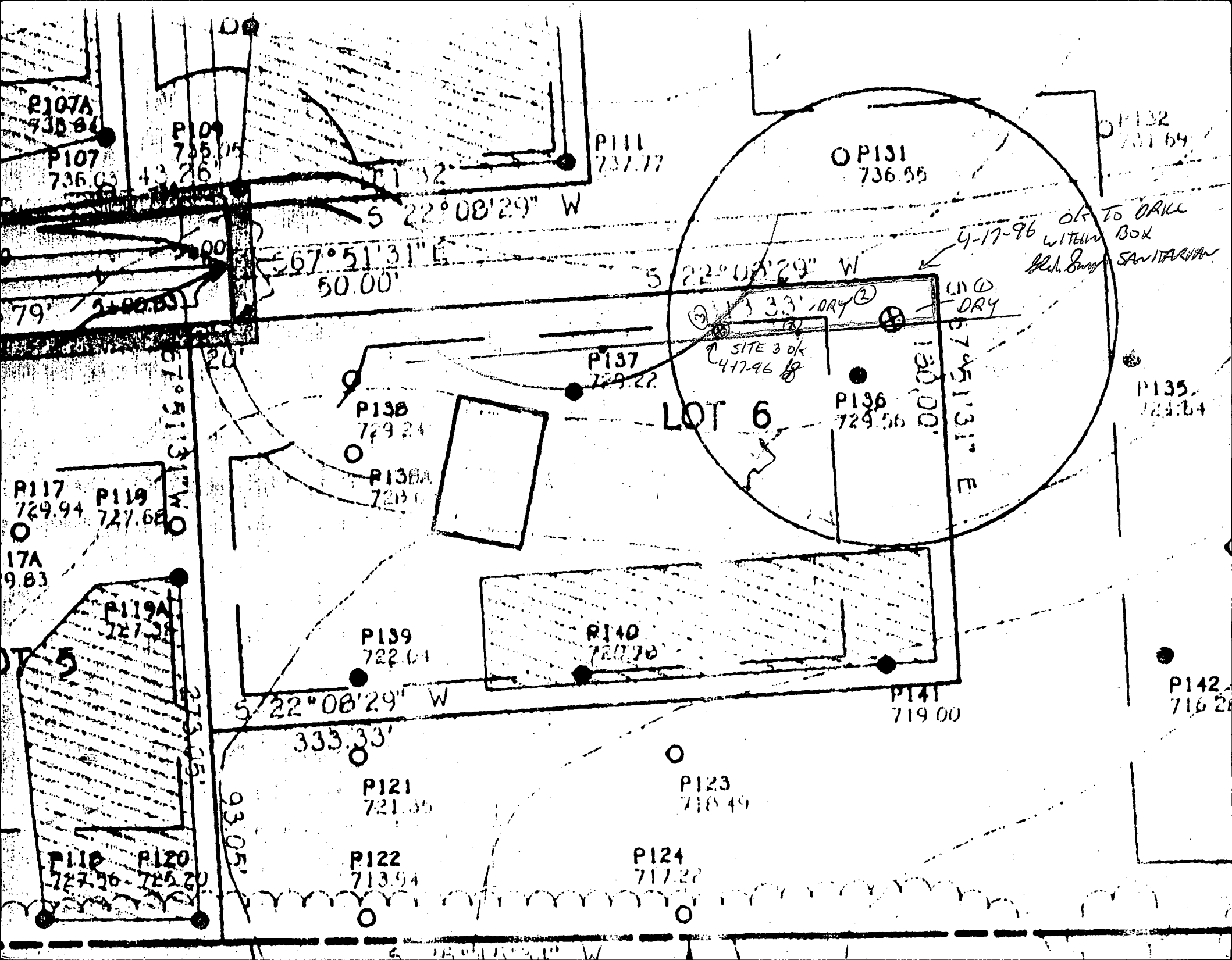
METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & DRIVEN   
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)   
 CABLE  REVerse-ROTary  Drive-POINT   
 other \_\_\_\_\_

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  
  
**5/2/96 (NOT COMPLETE)**  
**LOCATION ok**  
**NO GRIT - FIELD ONLY**  
**3/4 GAL/MIN**  
**SAMPLE @ 3:30**  
**440 OPEN**  
**6 CASING**  
**4/20/96 11:30**

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 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 (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER **GAP**  
 FORCE **GS** WRITE INITIALS IN BOX PERMIT No. **HO-94-0729**



P107A  
730.84

P109  
735.15  
43.26

P107  
736.03

P111  
737.77

P132  
731.64

P131  
736.55

S 22° 08' 29" W

67° 51' 31" E  
50.00'

S 22° 08' 29" W

4-17-96 OK TO DRILL WITHIN BOX  
Blk. Survey SANITARIAN

79' / 2+00.83

133.33' DRY

110 DRY

SITE 3 OK  
4-17-96

P137  
729.22

P138  
729.24

LOT 6

P136  
729.56

130.00'  
735.131' E

P135  
729.64

P117  
729.94

P119  
727.68

P138A  
729.00

17A  
9.83

P119A  
727.34

P139  
722.64

P140  
727.70

S 22° 08' 29" W  
333.33'

P141  
719.00

P142  
716.28

P121  
721.35

P123  
718.49

03.05'

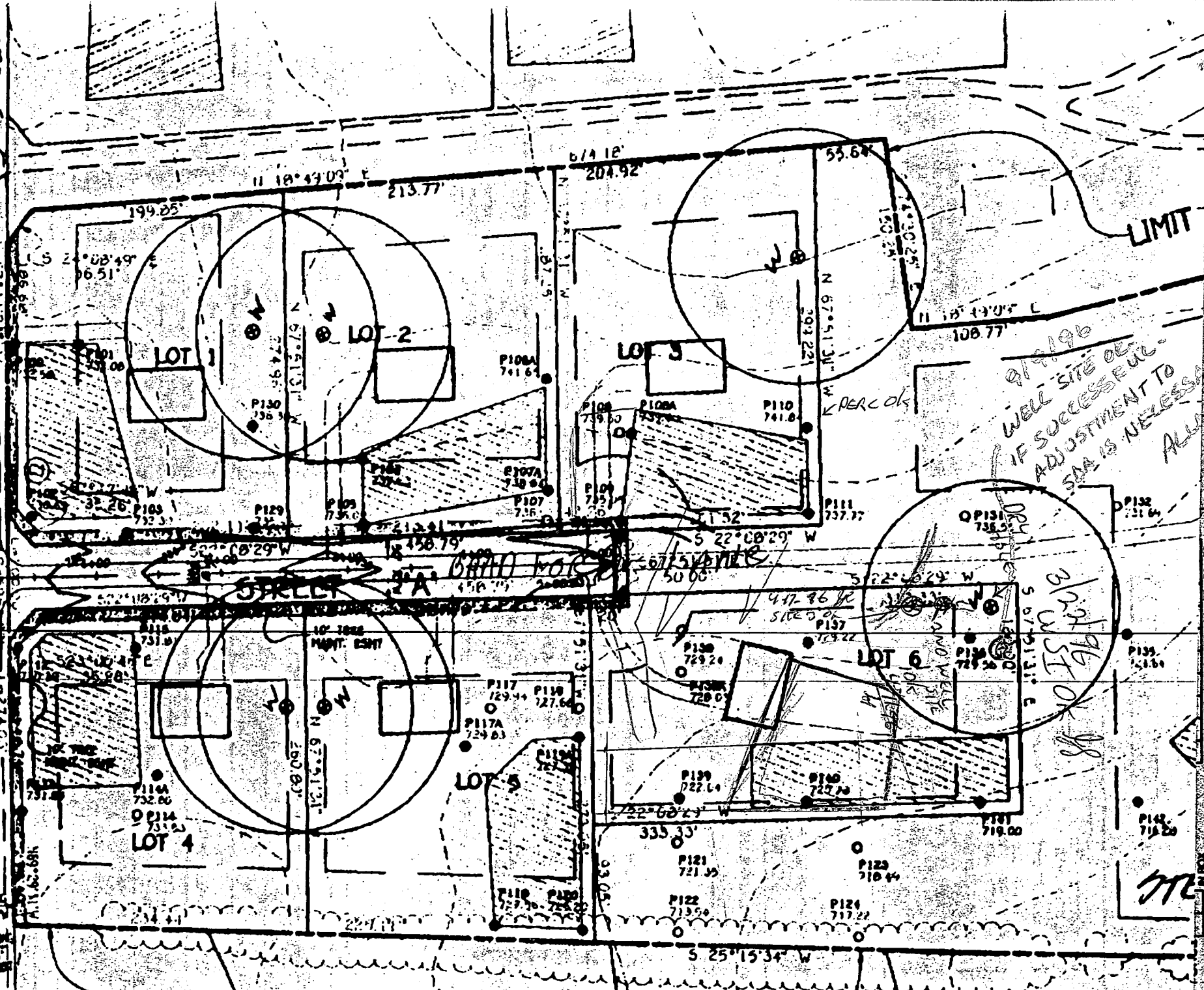
P122  
713.94

P124  
717.22

P118  
727.36

P120  
725.20

HARDY ROAD  
(LOCAL ROAD)



STREET

LIMIT

LIMIT OF SUBMISSION

9/19/96  
 WELL SITE OR  
 IF SUCCESSFUL  
 ADJUSTMENT TO  
 SAA IS NECESSARY  
 ALL

Handwritten notes and signatures:  
 P131  
 P132  
 P133  
 P134  
 P135  
 P136  
 P137  
 P138  
 P139  
 P140  
 P141  
 P142  
 P143  
 P144  
 P145  
 P146  
 P147  
 P148  
 P149  
 P150

Handwritten initials: JTC