STATE OF MARYLAND
WELL COMPLETION REPORT

C1 5991 — SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

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

COUNTY NUMBER: A 16427

DATE Received: ______

DATE WELL COMPLETED: 071887

Depth of Well: 324 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-81-2170

OWNER: MOERI (last name) HUBERT (first name)

STREET OR RFD: MULLINEX — TOWN: WOODBINE

SUBDIVISION: CHARLES SLAGLE PROP — SECTION ______ — LOT 7

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 FROM	FEET TO	Check if water bearing
Brown soil	0	15	
Light Brown	15	30	
Dark Brown	30	33	
Light Brown soil & Shell	33	46	✓
gray rock	46	210	✓ OK
gray & white rock	210	215	✓
gray slate	215	325	✓

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): yes (Y) circled / no N

TYPE OF GROUTING MATERIAL: CEMENT (CM) circled — BENTONITE CLAY BC

NO. OF BAGS 16 — NO. OF POUNDS 1504

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (to nearest foot): from 0 ft. (TOP) to 50 ft. (BOTTOM) (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)	Total depth of main casing (nearest foot)
ST	6	51

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 BRONZE, HO OPEN HOLE, PL PLASTIC, OT OTHER

C2

	Type	DEPTH (nearest ft.) from	to
1	HO	49	325
2			
3			

SLOT SIZE 1______ 2______ 3______

DIAMETER OF SCREEN ______ (NEAREST INCH)

GRAVEL PACK from ______ to ______

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 ☐

C3 PUMPING TEST
HOURS PUMPED (nearest hour) 08

PUMPING RATE (gal. per min. to nearest gal.) 12

METHOD USED TO MEASURE PUMPING RATE: 1 gal.

WATER LEVEL (distance from land surface)
BEFORE PUMPING 43
WHEN PUMPING 285

TYPE OF PUMP USED (for test): A air, P piston, T turbine, C centrifugal, R rotary, O other (describe below), J jet, S submersible (circled)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO): YES / NO (circled)

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: ☐

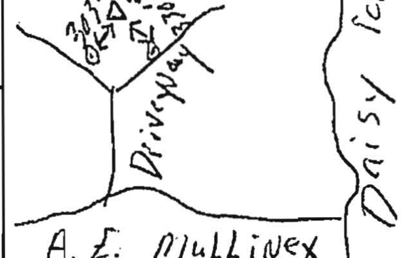
CAPACITY: GALLONS PER MINUTE (to nearest gallon) ______

PUMP HORSE POWER ______

PUMP COLUMN LENGTH (nearest ft.) ______

CASING HEIGHT (circle appropriate box and enter casing height): + above (circled) / − below — LAND SURFACE: 2 (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)



A. E. MULLINEX

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 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. 410

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) [signature]

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

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

HEALTH