
 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 2-29-2016 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any): none

* PERMIT NUMBER OF REPLACEMENT WELL: Ho-15-0049

* PERSON ABANDONING WELL: Joseph L. Mayne WELL DRILLER'S LICENSE NUMBER: MSD 024

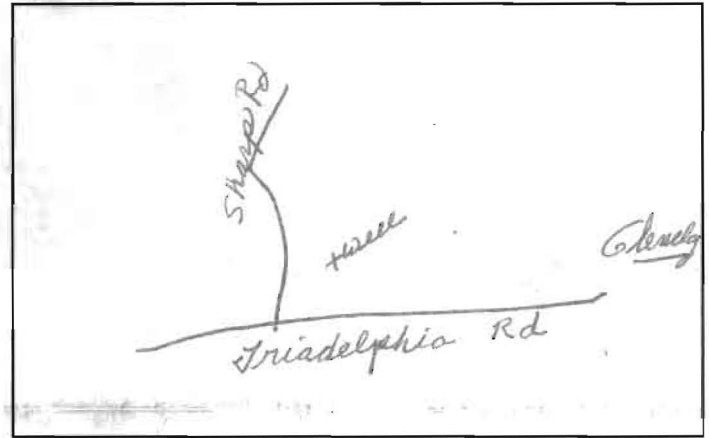
CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Jeffrey + Marianne Pettis

* WELL LOCATION:

SITE LOCATION MAP

COUNTY: Howard
 NEAREST TOWN: Blensly
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: _____ LOT: _____
 STREET ADDRESS: 14254 Triadelphia Rd



LATITUDE 3 9.260378

LONGITUDE 7 7.008571

OK (initials)
 3/7/16

* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED HAND DUG
- OTHER (specify) _____

LOG OF SEALING MATERIAL

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

MATERIAL	FEET	
	FROM	TO
<u>Cement & gravel mixed</u>	<u>0</u>	<u>72</u>

SIZE OF CASING: 5 1/2 INCHES IN DIAMETER

DEPTH OF WELL: 72 FEET DEEP

WAS ANY CASING REMOVED? YES NO

If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES NO

VOLUME OF MATERIAL USED

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#
Joseph L. Mayne

MSD 024 MWD / MSD / MGS

CIRCLE ONE

3-1-2016

DATE

COUNTY