

C 1 **6600** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED IN 30 DAYS AFTER WELL COMPLET

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **A25715**

DATE RECEIVED (WRA USE ONLY) **August 20, 1979** DEPTH OF WELL **302** PERMIT NO. FROM "PERMIT TO DRILL WELL" **40-73-3397**

DATE WELL COMPLETED **082079** 22 (TO NEAREST FOOT) 26

8-13 15 20 DRILLERS IDENTIFICATION NO. **296**

OWNER **Nu-Homes, Inc** LAST NAME FIRST NAME

STREET OR RFD **6655 N. Dobbin Road** POST OFFICE **Columbia, Md. 21044**

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Dirt	0	6	
Soft Brown Mica	6	30	X
Soft Brown Mica, Sand, Isinglass	30	73	X
Hard Black Sandstone	73	97	
Brown Sandstone	97	98	X
Hard Blue Sandstone	98	173	
Opening	173	174	X
Blue Sandstone	174	220	
Blue Sandstone, Opening	220	223	X
Blue Sandstone	223	253	
Blue Sandstone & Opening	253	256	X
Blue Mica, Blk Mica	256	302	

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 C M CEMENT B C BENTONITE CLAY

NO. OF BAGS **39** NO. OF POUNDS **3,666**

GALLONS OF WATER **234**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **83** FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T C O CONCRETE

PLASTIC P L O T OTHER

MAIN CASING TYPE S T **6** **85**

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **85**

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
			FROM	TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T B R H O BRASS OR BRONZE OPEN HOLE

PLASTIC P L O T OTHER

SCREEN

DEPTH (NEAREST WHOLE FOOT) FROM TO

1	8	9	11	15	17	302	21
2	23	24	26	30	32	36	
3	38	39	41	45	47	51	

SLOTSIZE 1, 2, 3

DIAMETER OF SCREEN **56** (NEAREST INCH) FROM **60** TO

GRAVEL PACK IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **5**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **10**

METHOD USED TO MEASURE PUMPING RATE **Flowmeter**

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING **50** (NEAREST FOOT) WHEN PUMPING **256** (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 A AIR P PISTON T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) **31** **35**

PUMP HORSE POWER **37** **41**

PUMP COLUMN LENGTH (NEAREST FOOT) **43** **47**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 + ABOVE - BELOW **2** (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

Meadow Wood

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME (PLEASE PRINT) **Ronald Lee Kyker**

SIGNATURE *Ronald Lee Kyker*

B 1: 1261 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SER. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-9 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
HO-73-3391
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
8/20/79
1:30 p.m.

OWNER Nu-Homes, Inc.
 COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD 6655 H. Dobbin Road
 COL 36 COL. 55

POST OFFICE Columbia, Maryland 21044
 COL 57 COL. 76

B 1 CONTINUED DRILLER INFORMATION
 1 2 3 (SEQ. NO.) 6

DATE July 23, 1979 LICENSE NUMBER 296
 77 80

Ronald Lee Kyker
 FIRST NAME DRILLER LAST NAME

SIGNATURE [Signature]

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6

COUNTY Howard (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION "Simpson Woods" 42

SECTION 2 LOT 16
 44 46 48 50

NEAREST TOWN Clarksville 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 3 76 77 78

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 6 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600
 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL

PRIVATE WATER COMPANY

TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

N NORTH E EAST NE NORTHEAST SE SOUTHEAST

S SOUTH W WEST NW NORTHWEST SW SOUTHWEST

NEAR WHAT ROAD 7225 Meadow Wood Way

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 34 37 38 39

APPROXIMATE DEPTH OF WELL 300' FEET
 24 26

APPROXIMATE DIAMETER OF WELL 6" (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE) _____

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

7225 Meadow Wood Way

85' CASING
70' OPEN
2' ABOVE GROUND
38 BAGS CEMENT

8/20/79 R.W.
XW 11

BOX NUMBER
 E 320
 N 430

0/5 5/5

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

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 (WRA USE ONLY)

APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63

FORCE 67 WRITE INITIALS IN BOX 68 CONDITIONS 70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
 1 2 3 (SEQ. NO.) 6

Howard COUNTY NAME A25715 COUNTY NO.

STATE HEALTH (CIRCLE BOX)

MO. DAY YR. 9 7 26 79

DATE 9 7 26 79 APPROVED BY Donald W. Monaghan, Sanitarian

NORTH COORDINATE 50 51 52 53 54 55

EAST COORDINATE 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 65 66 67 68

0/0 5/0

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 6

A25715 HEALTH

