

C 1 1342

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)

COUNTY NUMBER A 31185

Date Received (OEP use only)

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

OWNER Pugh last name, Edgar C. first name

STREET OR RFD McKendree Rd TOWN Cooksville

SUBDIVISION SECTION LOT

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Brown Shale, Brown Slate, Brown Mica, Blue Mica, and another Brown Mica layer.

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N. TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC. NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD. Casing types: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER). MAIN CASING TYPE: S (STEEL), 6" diameter, 21' depth.

OTHER CASING (if used) diameter and depth.

SCREEN RECORD. Screen type or openhole: ST (STEEL), BR (BRASS BRONZE), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER). DEPTH (nearest ft.) 1: 140, 20, 165.

SCREEN RECORD. SLOT SIZE 1, 2, 3. DIAMETER OF SCREEN (NEAREST INCH) from to.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F. OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER).

CIRCLE APPROPRIATE BOX: A (WELL ABANDONED AND SEALED), 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...

DRILLERS IDENT. NO. 308. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION).

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

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). Includes a diagram of the well location on the lot.

C 3 (seq no)

PUMPING TEST. HOURS PUMPED (nearest hour) 2. PUMPING RATE (gal. per min. to nearest gal.) 60. METHOD USED TO MEASURE PUMPING RATE Bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 165. WHEN PUMPING 165. TYPE OF PUMP USED (for test) J (jet), S (submersible).

PUMP INSTALLED. DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N.

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE. TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)). CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH (nearest ft.).

CASING HEIGHT (circle appropriate box and enter casing height) above, below 2 (nearest foot).

7306 SEQUENCE NO. WRA USE ONLY
(THIS NUMBER IS TRANSFERRED IN COLS. 3-6 ON ALL WRA'S)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
40-73-4058
fill in this form completely

DATE RECEIVED 4/30/82
8 (WRA USE ONLY) 13
OWNER INFORMATION
Pugh Edy
LAST NAME OWNER FIRST NAME
12026 Scary Rd.
STREET OR RFD
Fulton Md. Md. STATE ZIP

B 3 LOCATION OF WELL
COUNTY Howard
SUBDIVISION
SECTION 44 LOT 48
NEAREST TOWN Cooksville
MILES FROM TOWN (enter 0 if in town) ?

B 1 CONTINUED DRILLER INFORMATION
Stanley W. Bollinger Jr 308
DRILLER'S NAME 77 LICENSE NO. 80
Stanley W. Bollinger Jr. 11/9/81
SIGNATURE DATE

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
McKendree Rd.
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
800
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)

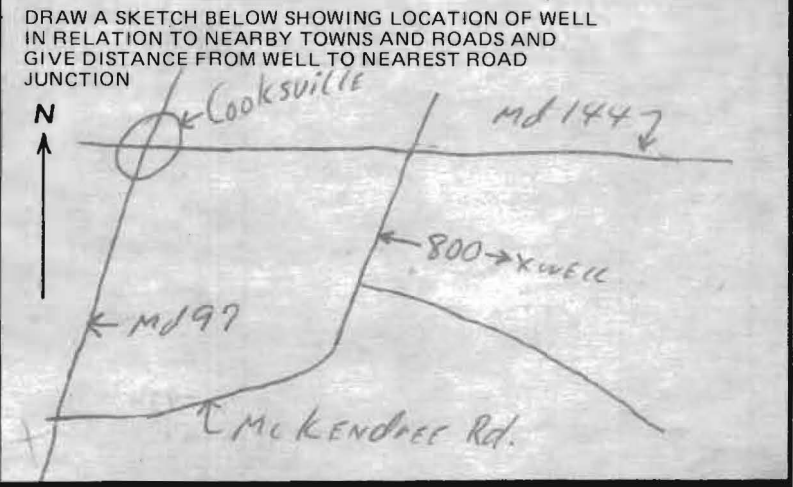
B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX
Location of 21' casing, 2' annular space, 18' open, 8' bags cement
4/30/82 JS
WRITE THE BOX NUMBER FROM THE MAP HERE
E 790 7
N 530 7

APPROXIMATE DEPTH OF WELL 150 FEET
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

Method of Drilling (circle one)
BORED (OR AUGERED) JETTED JETTED & DRIVEN
AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC)
CABLE REVERSE ROTARY DRIVE POINT ROTARY
other

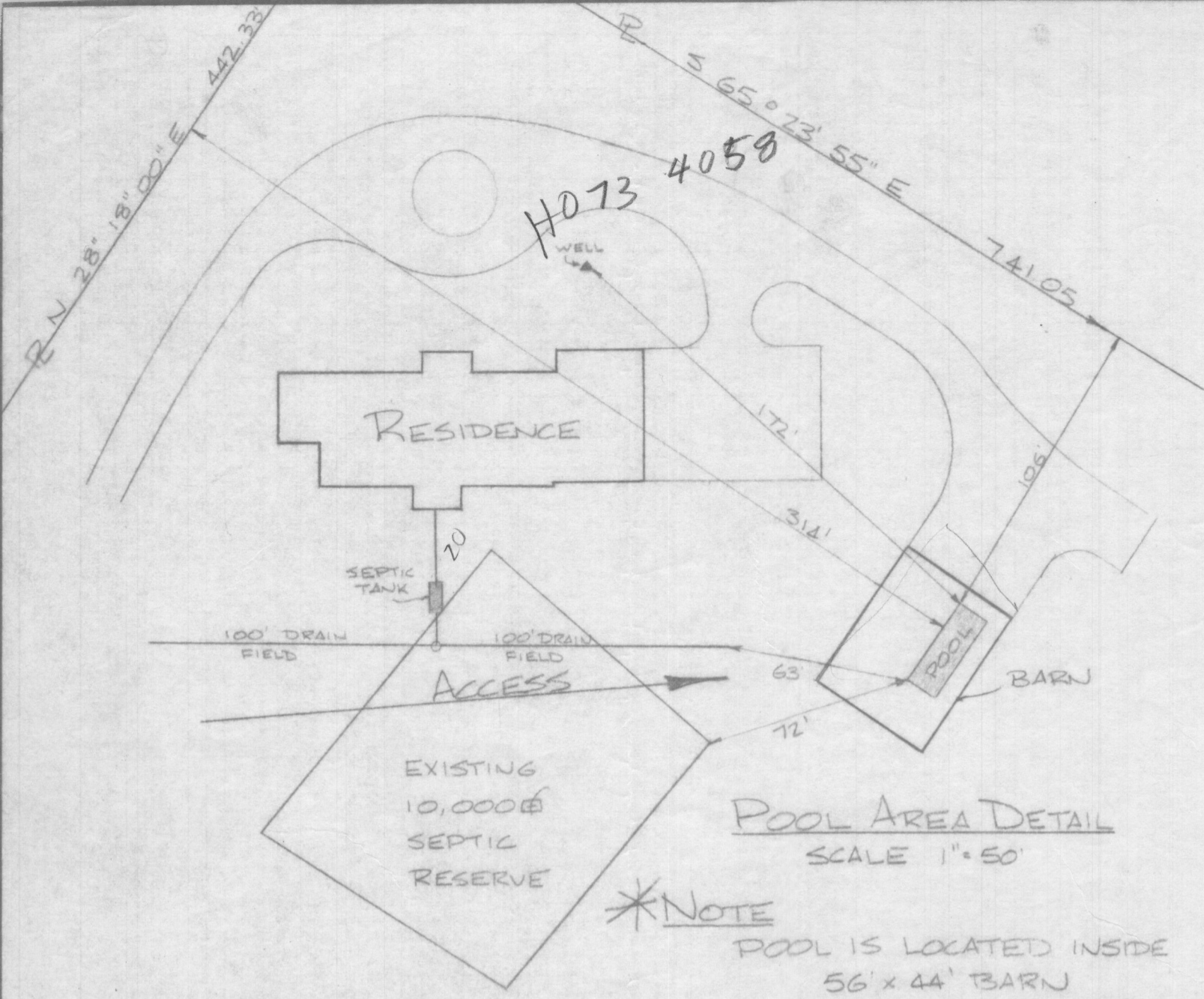


REPLACEMENT OR DEEPEMED WELLS (Circle Appropriate Box)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME A31185 COUNTY NO.
EHA SIGNATURE STATE HEALTH CIRCLE BOX
MO DAY YR 11/20/81 CO SIGNATURE DATE
NORTH 537 300 EAST 0799 300 ELEV. (FT.)
GRID 50 55 GRID 57 63 65 68

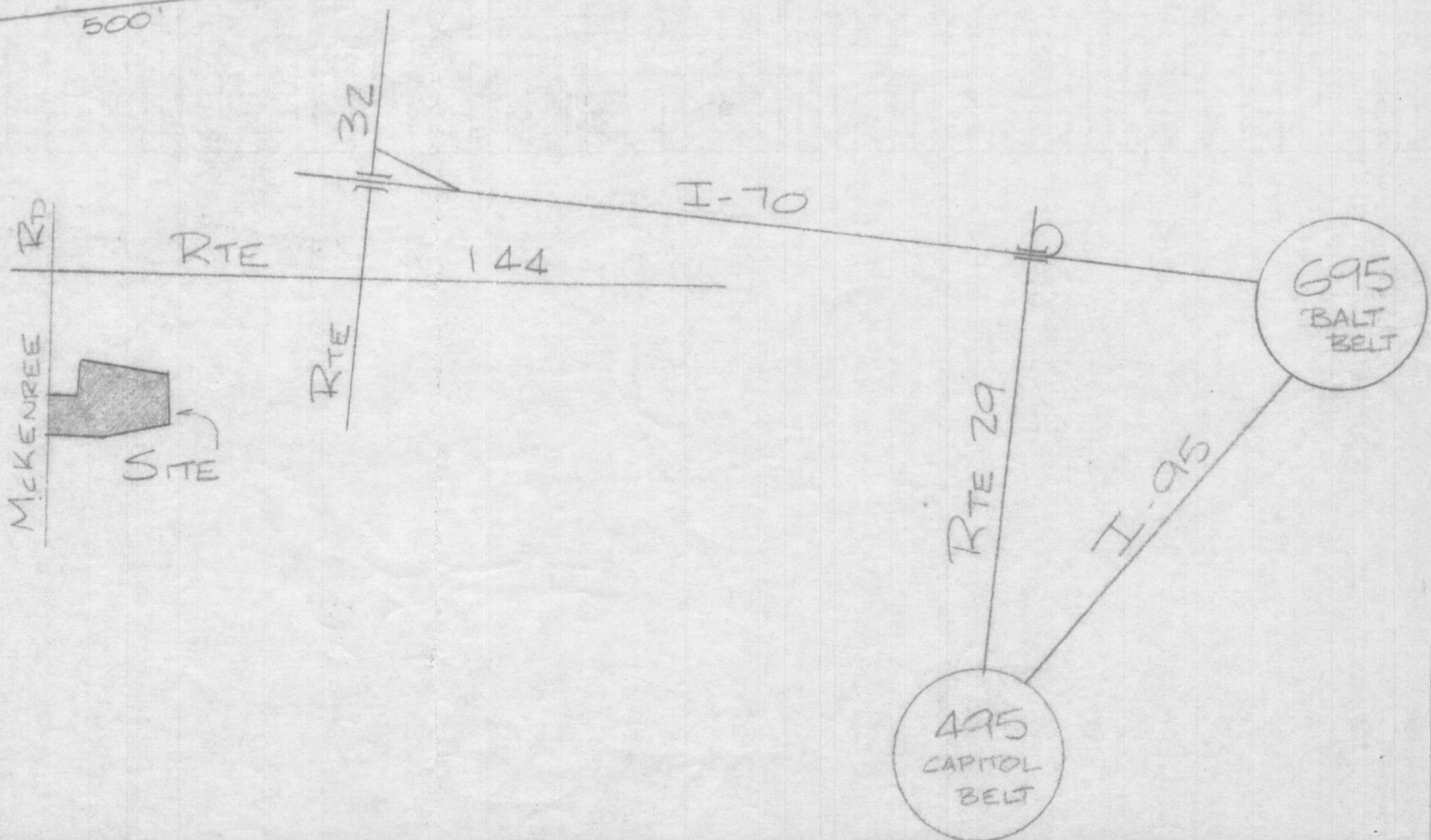
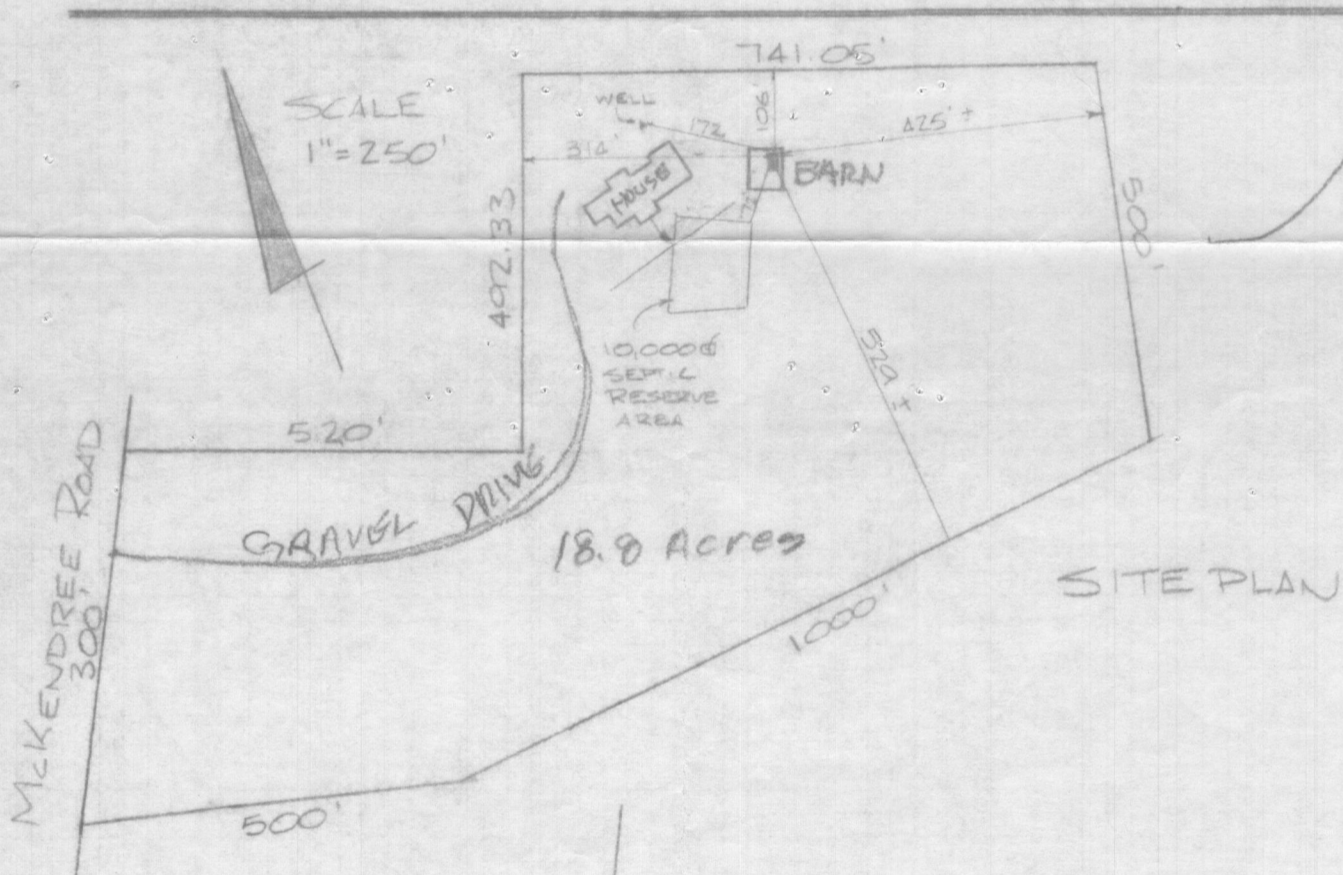
Not to be filled in by driller (WRA USE ONLY)
APPROX. PERMIT NUMBER GAP
WRITE INITIALS IN BOX FORCE ES
CONDITIONS 40-73-4058

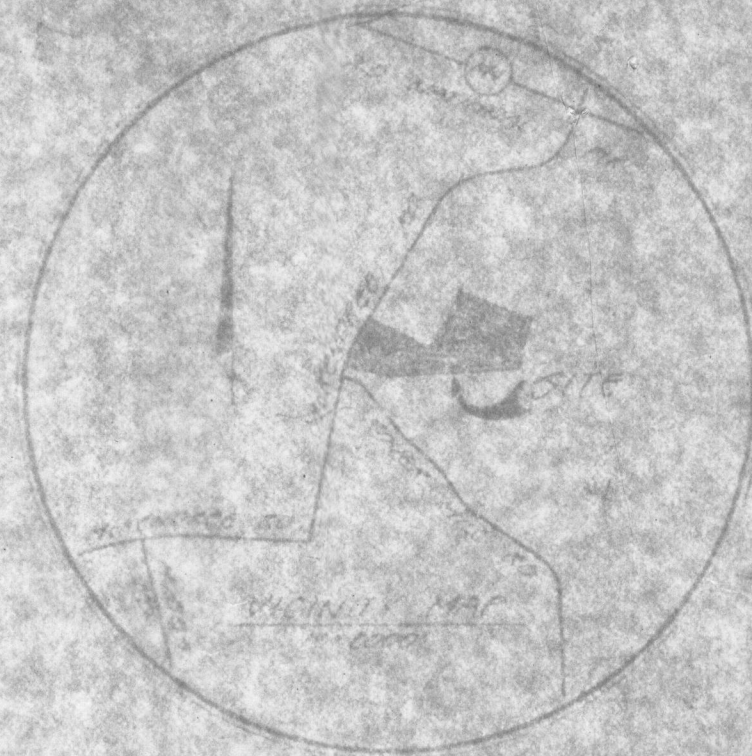
B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)



POOL AREA DETAIL
 SCALE 1" = 50'

*NOTE
 POOL IS LOCATED INSIDE
 56' x 44' BARN
 IN LIEU OF FENCE





This area indicates a private easement of approximately 10,000 square feet as required by Maryland State Department of Health and Mental Hygiene for individual sewage disposal systems. Improvements of any kind in this area are restricted until public sewage is available and serving any residential structures constructed on this site. This easement shall become null and void upon connection to a public sewage system.

Percolation test holes shown hereon have been field located and shown as "c".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

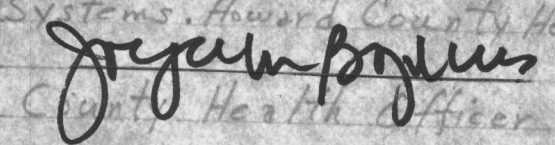
No water or sewage systems within 100ft. of the referenced lot lines.

W- Well location C.E.C. 6/9/81

OK for water well inter. application
 ok 5/12/81 (copy received)
 C.E.C.
 6/9/81
 Need more elevations before build permit checked

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL & CORRECT FOR THIS PROPERTY.

Signed: C. Edgar Dougherty 5/11/81
 Approved: For Private Water and Private Sewage Systems Howard County Health Department


 City Health Officer 5-13-81
Date

SURVEYOR'S CERTIFICATE
 I HEREBY CERTIFY THAT THE BOUNDARY SHOWN HEREON IS CORRECT AND THAT THE RESULTS OF THE SURVEY CONDUCTED BY WARREN H. DODGE, JR. AND COMPANY, INC. ON APRIL 22, 1981, ARE CORRECT AND ACCURATE. I AM A LICENSED SURVEYOR IN THE STATE OF MARYLAND AND I AM NOT PROVIDING THIS SERVICE AS AN EMPLOYEE OF ANY OTHER PERSON OR ENTITY.

