

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

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
 FILL IN THIS FORM COMPLETELY

SEQUENCE NO. (WRA USE ONLY) **5590**
 COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) **6-9-76** DEPTH OF WELL **100**
 DATE WELL COMPLETED (TO NEAREST FOOT) **100**
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **H10-13-11919**
 DRILLERS IDENTIFICATION NO. **217**

OWNER: LAST NAME **Hensler** FIRST NAME **James C**
 STREET OR RFD. **Meadow Walk Dr** POST OFFICE **Woodbine MD**

WELL DESCRIPTION

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	
GRAY SAND STONE	4	100	✓

Well 100 ft

GROUTING RECORD YES NO
 WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) (Y) (N)
 TYPE OF GROUTING MATERIAL (CIRCLE BOX) 44
 CEMENT (C) 45 46 BENTONITE CLAY (B) 45 46
 NO. OF BAGS **7** NO. OF POUNDS **658**
 GALLONS OF WATER **42**
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **39** FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD
 CASING TYPE (INSERT APPROPRIATE CODE BELOW)
 STEEL CONCRETE
 PLASTIC OTHER
 MAIN CASING TYPE NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
 ST **6** **40**

OTHER CASING (IF USED) DIAMETER (INCH) DEPTH (FEET) FROM TO
 E A C H C A S I N G

SCREEN RECORD
 SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)
 ST BR HO
 PL OT
 BRASS OR BRONZE OPEN HOLE

PUMPING TEST
 HOURS PUMPED (TO NEAREST HOUR) **1**
 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **20**
 METHOD USED TO MEASURE PUMPING RATE **ROTARY**
 WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING **25** (NEAREST FOOT)
 WHEN PUMPING **95** (NEAREST FOOT)
 TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET 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) YES NO
 CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) **31** **39**
 PUMP HORSE POWER **37** **41**
 PUMP COLUMN LENGTH (NEAREST FOOT) **43** **47**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE LAND SURFACE (NEAREST FOOT)
 BELOW **40** **51**

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).
slowing rd
residential property
well

CIRCLE APPROPRIATE BOXES
 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
 E ELECTRICAL 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 ALL INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME **J.A. KOWAN WELLS**
 SIGNATURE **P.A. Crosswell**

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (I.R.O.S.)
 T W O
 TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE