

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

APPROVED
 07/16/2021

DATE WELL ABANDONED: APRIL 16, 2020 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any): _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

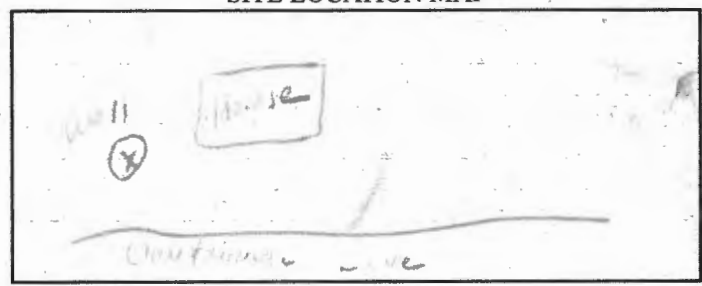
* PERSON ABANDONING WELL: Brace Thompson WELL DRILLER'S LICENSE NUMBER: JD 0380

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Monticello Reserve LLC

SITE LOCATION MAP

* WELL LOCATION:
 COUNTY: HOWARD
 NEAREST TOWN: COLUMBIA
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: _____ LOT: _____
 STREET ADDRESS: 4489 CENTENNIAL LANE



LATITUDE 39.247933

LONGITUDE 76.867027

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Bestonite</u>	<u>30</u>	<u>2</u>
<u>DIRT</u>	<u>2</u>	<u>0</u>
VOLUME OF MATERIAL USED		
<u>150# concrete mixed for slurry</u>		

* TYPE OF WELL BEING ABANDONED:
 DRILLED _____ JETTED _____
 BORED _____ HAND DUG _____
 OTHER (specify) _____

* USE CODE:
 DOMESTIC _____ MUNICIPAL/PUBLIC _____
 IRRIGATION _____ INDUSTRIAL _____
 TEST/OBSERVATION _____ GEOTHERMAL _____

* TYPE OF CASING:
 STEEL _____ PLASTIC _____
 CONCRETE _____ OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 30 FEET DEEP

WAS ANY CASING REMOVED? YES NO
 If yes, length removed, in feet: 2

WAS CASING RIPPED OR PERFORATED? YES NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# 040

MWD / MSD / MGS
 CIRCLE ONE

4-16-20
 DATE

OWNER

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