
 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: 7/6/15 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL: _____

* PERSON ABANDONING WELL: ROBERT COPSEY WELL DRILLER'S LICENSE NUMBER: 161

CIRCLE: MWD / ~~MSD~~ / ~~MGD~~

* OWNER'S NAME: John Dally Hebner

* WELL LOCATION:
 COUNTY: Howard
 NEAREST TOWN: Marriotts ville
 TAX MAP 0010 BLOCK _____ PARCEL 0297
 SUBDIVISION: 0000
 SECTION: _____ LOT: 4
 STREET ADDRESS: 12050 OLD FREDERICK RD

SITE LOCATION MAP



LATITUDE 3 9 . 1 9 1 8 3 4

LONGITUDE 7 6 . 5 5 5 3 4 3

* 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: 161 FEET DEEP

WAS ANY CASING REMOVED? YES NO

If yes, length removed, in feet: 5

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Bentonite clay</u>	<u>161</u>	<u>5</u>

VOLUME OF MATERIAL USED

180 lbs Bentonite clay

Robert Copsey
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# 161

MWD / MSD / MGS

CIRCLE ONE

7/6/15
 DATE

