

Pump test to begin at 8:00 A.M. (2 hrs.)

EMERGENCY/TEMP. NO. IF ANY

B 1 7268 SEQUENCE NO. (OEP USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

OEP PERMIT NUMBER **HO-73-4220** fill in this form completely

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) (2nd)

Date Received **9/24/82** **8 7 0 2 8 2** (OEP Use Only)

OWNER INFORMATION

MALCOLM DENNIS Last Name 15 Owner 34 Name

21011 BRIGGS CHANEY RD Street or RFD 55

SILVER SPRING MD 2109104 Town 57 State 76 Zip

B 3 LOCATION OF WELL

COUNTY **Howard**

SUBDIVISION **Tridelpha Mills Farms**

SECTION **1 Area 2** LOT **11**

NEAREST TOWN **Dayton**

MILES FROM TOWN (enter o if in town) **2** **M 1**

B T Continued DRILLER INFORMATION

George Easterday Driller's Name 77 License No. **413**

L. T. Easterday Inc. Firm Name

9265 Brown Church Rd. Address

George L. Easterday Signature **10/29/82** Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Tridelpha Mill Rd. NEARWHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

100 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) **FT**

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **150**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT-ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X.

SOURCES OF DRILLING WATER

- 63' casing
- 2' above gr.
- 60' open
- 16' trap cement

WRITE THE BOX NUMBER FROM THE MAP HERE

800 **500**

7/14/82

APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

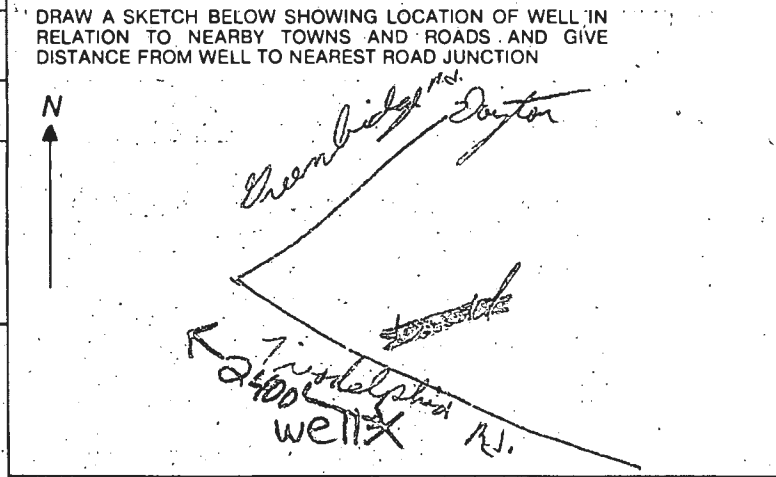
METHOD OF DRILLING (circle one)

BORED (OR AUGERED) JETTED JETTED & DRIVEN

AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE ROTARY DRIVE POINT

other _____



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) _____

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME **2205A** COUNTY NO.

OEP SIGNATURE _____ STATE HEALTH CIRCLE BOX **S** 41

DATE ISSUED **070782** CO SIGNATURE **Frank Sklar**

NORTH GRID **504** EAST GRID **0800** EXPIRES **010783**

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER _____ **G.A.P.** _____

FORCE **FS** WRITE INITIALS IN BOX **PERMIT No. HO-73-4220**

B 5 SPECIAL CONDITIONS 8-63

3215 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. 3-6 ON ALL CARDS)

COUNTY NUMBER 29058

Date Received (OEP Use only)

DATE WELL COMPLETED 7/14/12

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-4220

OWNER Malcolm Dennis Triadelphia Mill Road Dayton Triadelphia Mill Farms area 2 LOT 11

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Brown mica, Red mica, Gray mica, Blue mica.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT CM, BENTONITE CLAY BC, NO. OF BAGS 110, NO. OF POUNDS 16000.

CASING RECORD: MAIN CASING TYPE ST (STEEL), Nominal diameter 10, Total depth of main casing 163.

OTHER CASING (if used) section with empty boxes for diameter and depth.

SCREEN RECORD: screen type or open hole HO (OPEN HOLE), SLOT SIZE 2.

DEPTH (nearest ft.) 300, CASING HEIGHT (+) above LAND SURFACE.

CIRCLE APPROPRIATE BOX: A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED.

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. 410, DRILLERS SIGNATURE (Blank)

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

DIAMETER OF SCREEN (NEAREST INCH) 60, GRAVEL PACK, IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F.

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 12, METHOD USED TO MEASURE PUMPING RATE Bucket, TYPE OF PUMP USED (for test) S (submersible).

PUMP INSTALLED: DRILLER WILL INSTALL PUMP (Y), CAPACITY: GALLONS PER MINUTE.

PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (+) above LAND SURFACE.

