

C1 1292 SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 33664

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

ST/CO USE ONLY DATE Received DATE WELL COMPLETED

Depth of Well 22 200 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-7799

OWNER Fletcher Dwyght last name first name TOWN Elkridge City SUBDIVISION BUCKSKIN LAKE SECTION LOT 37

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Sand, Sandstone, MICA.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 19 NO. OF POUNDS 1700

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE (PL) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 20

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT)

DEPTH (nearest ft.) 1 40 18 300 2 3 4

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 273

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

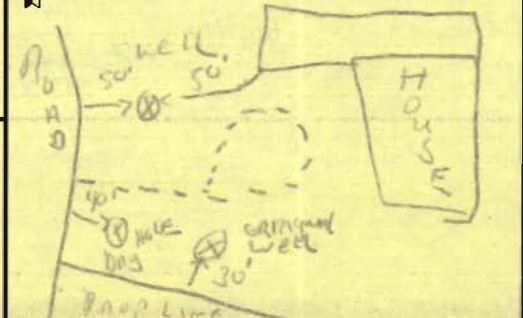
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE Ruck WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 27 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

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)



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-1149
 Location of property (road) Buckskin Lake Dr
 Subdivision BUCKSKIN LAKE Lot 37 Block Plat Sec.
 Well Driller R Mayne Owner Dwight Fletcher

Depth of well 200 ft
 Distance of measuring point (M.P.) above ground 2 ft
 Static water level (S.W.L.) below M.P. 25 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 10 GPM
 Total time 15 min to reach pumping water level 27 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket <u>5</u>	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)	
8:15	27 ft	30 Sec	Flow meter reading column is crossed out with a large X.	10 GPM	
8:30	27 ft	30 Sec		10 GPM	
8:45	27 ft	30 Sec		10 GPM	
9:00	27 "	30 "		10 "	
9:15	27 "	30 "		10 "	
9:30	27 "	30 "		10 "	
9:45	27 ft	30 Sec		10 GPM	
10:00	27 ft	30 Sec		10 GPM	
10:15	27 ft	30 Sec		10 GPM	
10:30	27 "	30 "		10 "	
10:45	27 "	30 "		10 "	
11:00	27 ft	30 Sec		10 GPM	
11:15	27 ft	30 Sec		10 GPM	

1/16/90

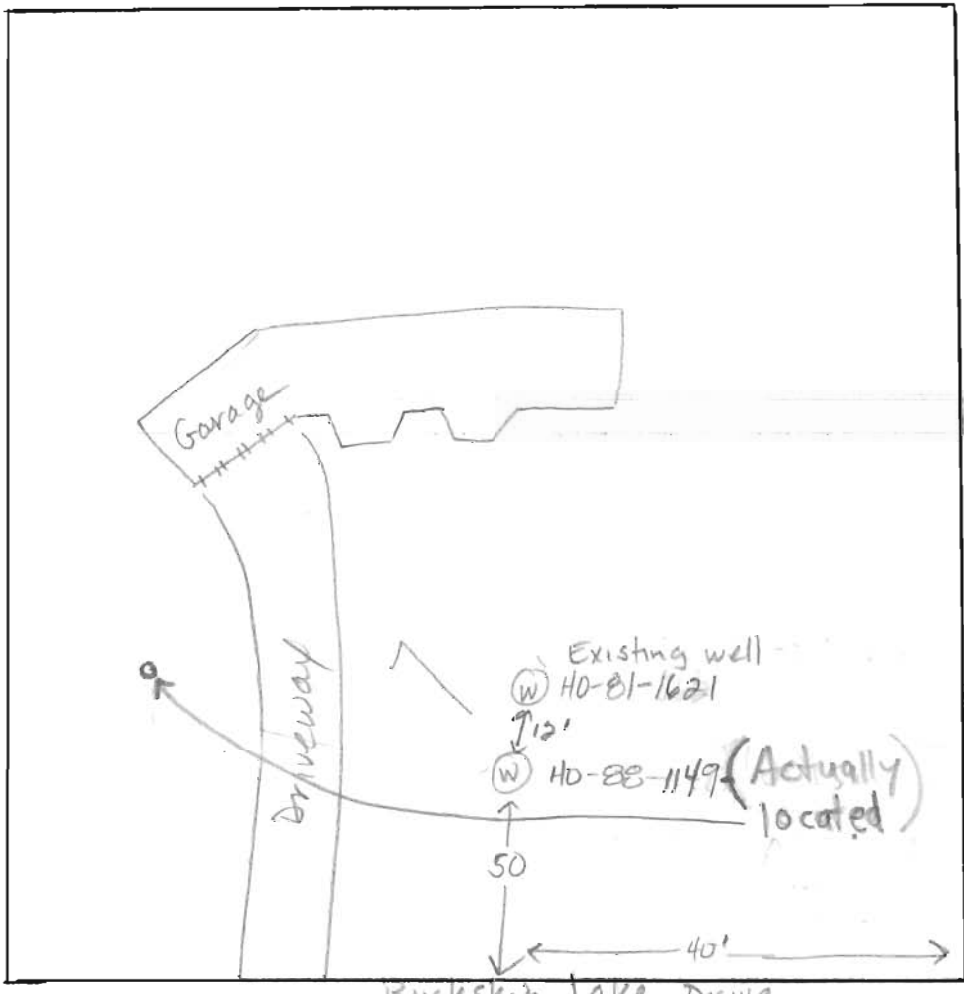
REPLACEMENT WELL SITE INSPECTION

OWNER Dwight Fletcher
ADDRESS 4205 Buckskin Lake Dr
Lot - 38 Buckskin Lake
Map 22, Grid 22, Parcel 535

DATE REQUESTED 1-16-90
DRILLER Ralph Mayne
WELL TAG# HO-88-1149
COUNTY# A 33664

Replacement well for
HO-81-1621
Completed 8-21-86

LOCATION DIAGRAM



COMMENTS: Old permit HO-81-1621 for Dwight Fletcher Lot-37 Buckskin Lake.
New well is higher in elevation than existing well. 1-16-90 DEN
1-18-90 see back.

1-18-90. to locate well to left downhill of existing
approved site $\approx 50'$ elevation permitting $\approx 2.7'$

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 10/27/99 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

Ho - 88 - 1149

* PERMIT NUMBER OF REPLACEMENT WELL

Ho - 94 - 2459

* PERSON ABANDONING WELL: Joseph Mayne

WELL DRILLERS LICENSE NUMBER: 024
CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Dwight Fletcher

* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: Duxton

TAX MAP _____ BLOCK _____ PARCEL _____

SUBDIVISION: Buckskin Woods

SECTION: _____ LOT: 38

NEAREST ROAD: 4205 Buckskin Lake Dr.

	x
0 0 0	
0 0 0	

SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES

BOX NUMBER
E 500
N 510

* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGURED HAND DUG
- OTHER (specify) _____

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

* SIZE OF CASING: 6 3/8 INCHES IN DIAMETER

* DEPTH OF WELL: 55 FEET DEEP

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

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Cement</u>	<u>0</u>	<u>40</u>
<u>Washed gravel</u>	<u>40</u>	<u>55</u>

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN: Joseph P. Mayne LICENSE #: MSD024 MWD/MSD/MGD CIRCLE ONE DATE: 10/27/99

