

B 1 1769 SEQUENCE NO. (OEP USE ONLY)  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

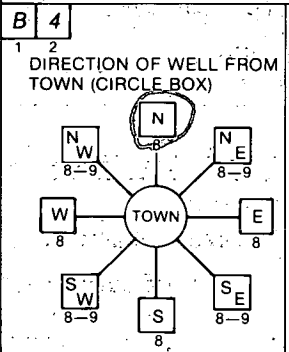
STATE OF MARYLAND PERMIT TO DRILL WELL  
please print or type

OEP PERMIT NUMBER  
40-81-2649  
fill in this form completely

Date Received  
OWNER INFORMATION  
Austerfer Bruce  
Last Name Owner First Name  
15790 Old Fred rd  
Street or RFD  
Woodbine Md 21797  
Town State Zip

LOCATION OF WELL  
UNWAPD  
8 COUNTY  
23 SUBDIVISION  
SECTION 44 LOT 48 MAP 3 Parcel 29  
Lishon  
52 NEAREST TOWN  
MILES FROM TOWN (enter 0 if in town) 1 MI

DRILLER INFORMATION  
Harry Edmondson  
Driller's Name License No. 252  
Edmondson Well Drilling  
Firm Name  
741 Klee Mill rd Westminster 21157  
Address  
Harry Edmondson 4-4-88  
Signature Date



Old Frederick rd.  
NEAR WHAT ROAD  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
DISTANCE FROM ROAD 1500 FT  
ENTER FT or MI FT

WELL INFORMATION  
APPROX. PUMPING RATE (GAL. PER MIN.) 5  
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)

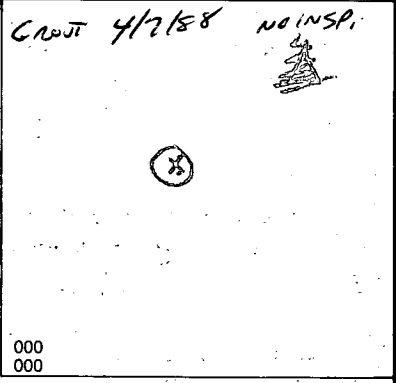
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
Howard COUNTY NAME COUNTY NO. W-46201  
OEP SIGNATURE STATE HEALTH INSERT S  
DATE ISSUED 04 05 88  
CO'SIGNATURE [Signature] EXP. DATE 10/1/88  
NORTH GRID 555000 EAST GRID 0784000

APPROXIMATE DEPTH OF WELL 200 FEET

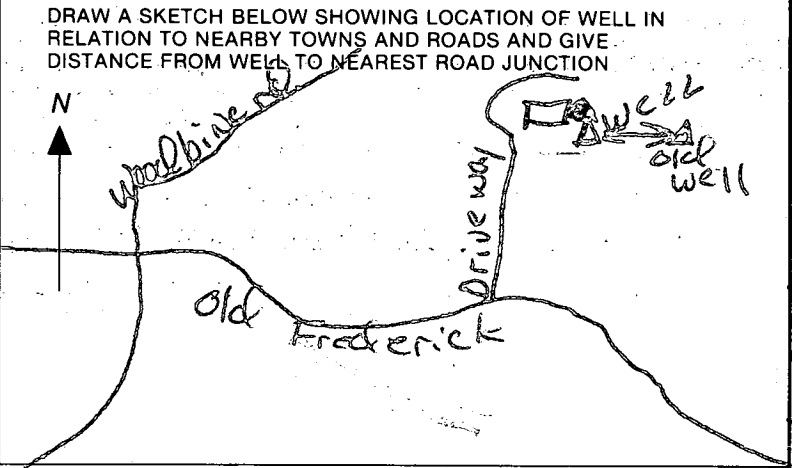
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & Driven  
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVERSE-ROTARY  Drive-POINT  
other \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
SOURCES OF DRILLING WATER  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
WRITE THE BOX NUMBER FROM THE MAP HERE



REPLACEMENT OR DEEPEINED 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 DEEPEN AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) \_\_\_\_\_



Not to be filled in by driller (OEP USE ONLY)  
APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_  
FORCE  WRITE INITIALS IN BOX PERMIT No. 40-81-2649

SPECIAL CONDITIONS

REGION \_\_\_\_\_

AREA \_\_\_\_\_ RATING \_\_\_\_\_

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health  
BUREAU OF ENVIRONMENTAL HEALTH

DISPOSITION	DATE

**RECORD OF INVESTIGATION**

H0812649

LOCATION \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER  OCCUPANT  BRUCE AUSTENEN ADDRESS 15790 OLD FREDERICK PHONE \_\_\_\_\_

COMPLAINANT COMPTON - WELL DRIVEN ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

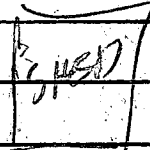
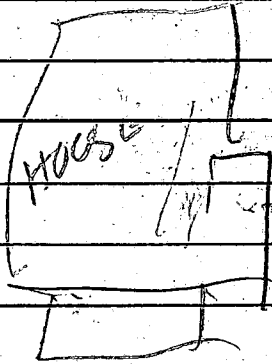
REASON FOR INVESTIGATION HAND DUG WELL COLLAPSED - REQUESTS PERMIT

AND SITE INSPECTION FOR DRILLED WELL. PROPOSED LOCATION  
IS 68' ERM 560LL. CODES \_\_\_\_\_

RECEIVED BY CWL DATE 4/5/88 ASSIGNED TO \_\_\_\_\_ DATE \_\_\_\_\_

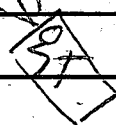
DATE OF INVESTIGATION 4/5/88 TIME 1100 WEATHER FAIR

REPORT \_\_\_\_\_



OLD HAND DUG WELL FILLED IN

OK TO PUT REPLACEMENT WELL HERE  
4/5/88 RH



TRENCI

DATE SUBMITTED \_\_\_\_\_ SANITARIAN \_\_\_\_\_

6 MAR 88

Raymond G. Dodge

8560

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER

2649

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

APR 18 1988

046788

175

40-81-2649

OWNER AUGUSTSEN BRUCE

STREET OR RFD 13790 OLD FREDERICK RD TOWN WOODBINE

SUBDIVISION SECTION LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed) FEET FROM TO Check if water bearing

Table with 3 columns: Description, Feet From, Feet To. Rows include Top Soil, Clay, Shell, white rock, Brown Shell, Light Brown Shell, gray & white, gray & Brown white rock, gray & white.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

Y N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 30 NO. OF POUNDS 1280

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 50 ft.

CASING RECORD

Casing types insert appropriate code below

ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

ST 6 75

OTHER CASING (if used)

diameter depth (feet) from to

VERTICAL DIMENSIONS

SCREEN RECORD

screen type or open hole insert appropriate code below

ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER

VERTICAL DIMENSIONS

DEPTH (nearest ft.)

40 73 175

VERTICAL DIMENSIONS

SLOT SIZE 1 2 DIAMETER OF SCREEN (NEAREST INCH)

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

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

T (E.R.O.S.) WG TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min. to nearest gal.)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from lands surface)

BEFORE PUMPING

WHEN PUMPING

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

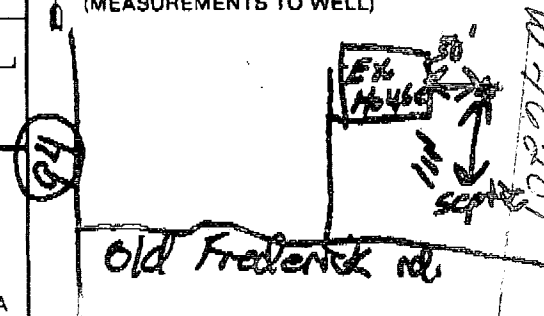
PUMP COLUMN LENGTH (nearest ft.)

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)



CIRCLE APPROPRIATE LETTER 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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 257

DRILLERS SIGNATURE

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

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

T (E.R.O.S.) WG TELESCOPE CASING LOG INDICATOR OTHER DATA