

C1 1312 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 A 28138

Date Received (OEP use only)

DATE WELL COMPLETED

11 22 91

Depth of Well

345

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

10-73-4029

OWNER last name first name Schittino Sal

STREET OR RFD TOWN Triadelphia Rd. Glenelg

SUBDIVISION SECTION LOT Triadelphia Farms 2 78

WELL LOG

GROUTING RECORD

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

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP (enter 0 if from surface) to 58 BOTTOM

C 3 (seq no)

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 63

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface) BEFORE PUMPING 40

WHEN PUMPING 300

TYPE OF PUMP USED (for test) A air P piston T turbine

C centrifugal R rotary O other (describe below)

J jet S submersible

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

Table with 3 columns: DESCRIPTION, FEET FROM, FEET TO. Rows include Mica Sand (0-46) and Mica Rock (46-345).

CASING RECORD casing types insert appropriate code below STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top(main)casing (nearest inch) Total depth of main casing (nearest foot) S T 6 40

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

SCREEN RECORD screen type or openhole insert appropriate code below STEEL BRASS BRONZE OPEN HOLE PLASTIC OTHER

C 2 (seq. no) DEPTH (nearest ft.)

Table with 3 columns: E A C H S C R E E N, SLOT SIZE, DIAMETER OF SCREEN (NEAREST INCH)

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE - below (nearest foot) 2 51

CIRCLE APPROPRIATE BOX

- 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 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. 209

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

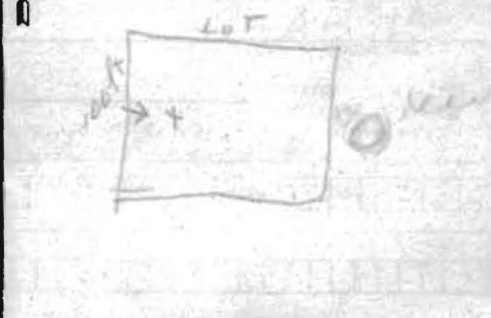
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

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)



B 1 0054 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

H0-73-4029

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

please print or type

fill in this form completely

Date Received 10 07 81
OWNER INFORMATION
Last Name 15 SCHMITTIMO Owner 34 Name LSAL
Street or RFD 36 1222 MARLBROOK RD 55
Town 57 ROLLTOWN MD State 76 Zip 21229

B 3 LOCATION OF WELL
COUNTY 8 HOWARD 21
SUBDIVISION 23 TRIDELPHIA FARMS 42
SECTION 44 2 46 LOT 48 78 50
NEAREST TOWN 52 GLENELG 71
MILES FROM TOWN (enter 0 if in town) 73 2 76 77 78

B 1 Continued DRILLER INFORMATION
Driller's Name 77 License No. 80 HOWARD DILLON 209
Firm Name DILLON BROS INC
Address 1414 Mt VERNON 21215
Signature Date 10/7/81

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NEAR WHAT ROAD 11 TRIDELPHIA 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 34 1200 37 (CIRCLE APPROPRIATE BOX) 38 39

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 8 5 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 300 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

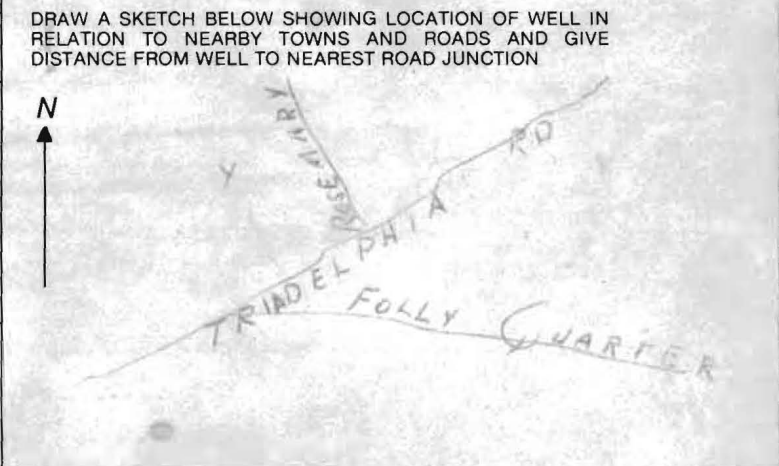
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. 45' casing
1 1/2' gravel
42' - open
13' bag cement
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800 7
N 120 3

APPROXIMATE DEPTH OF WELL 24 250 28 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)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEMED AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41



Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER 54 GAP 63

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
COUNTY NAME HOWARD COUNTY NO. A28138
OEP SIGNATURE STATE HEALTH CIRCLE BOX S 41
DATE ISSUED 10/6/81
CO SIGNATURE Frank Skinner
NORTH GRID 50 55 EAST GRID 57 63 EXPIRES 04/6/82

B 5 SPECIAL CONDITIONS 8-63

744-9261