WR • W-4 9/70

C 1 7218 (SEQ. NO.) — SEQUENCE NO. (DWR USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY)

DATE WELL COMPLETED

DEPTH OF WELL 65 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-7V-0159

DRILLERS IDENTIFICATION NO.

OWNER Chiciolio (Chirchiolo) Michael
LAST NAME FIRST NAME

STREET OR RFD

POST OFFICE

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Shale	0	18	
flint rock	18	65	

good 19' open
20' casing
5 bags cement
RAF 7-6-71

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [C M] BENTONITE CLAY [B C]

NO. OF BAGS 5 NO. OF POUNDS 470

GALLONS OF WATER 20

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 18 FT.
(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES — INSERT APPROPRIATE CODE BELOW: [S T] STEEL, [C O] CONCRETE, [P L] PLASTIC, [O T] OTHER

MAIN CASING TYPE [S T]

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 5 5/8

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 20

OTHER CASING (IF USED) — EACH CASING: DIAMETER (INCH), DEPTH (FEET) FROM, TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW: [S T] STEEL, [B R] BRASS OR BRONZE, [H O] OPEN HOLE, [P L] PLASTIC, [O T] OTHER

C 2 (SEQ. NO.)

EACH SCREEN — DEPTH (NEAREST WHOLE FOOT) FROM / TO

SLOT SIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

GRAVEL PACK FROM ____ TO ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX [F]

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T — TELESCOPE CASING; (E.P.O.S.) — LOG INDICATOR; W O — OTHER DATA AVAILABLE

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1 1/2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 5

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
BEFORE PUMPING 35 (NEAREST FOOT)
WHEN PUMPING 0 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX): [A] AIR, [P] PISTON, [T] TURBINE, [C] CENTRIFUGAL, [R] ROTARY, [O] OTHER (DESCRIBE BELOW), [J] JET, [S] SUBMERSIBLE

PUMP INSTALLED

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

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

CAPACITY:
GALLONS PER MINUTE (TO NEAREST GALLON)
PUMP HORSE POWER
PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

[+] ABOVE / [−] BELOW LAND SURFACE (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

N

CIRCLE APPROPRIATE BOXES

[A] A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

[E] ELECTRIC LOG OBTAINED

[C] COPY OF ELECTRIC LOG ATTACHED

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME (PLEASE PRINT)

SIGNATURE Joseph Magna

HEALTH