

**C1** 2344  
 SEQUENCE NO. (DENV USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND**  
**WELL COMPLETION REPORT**  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER W-43762

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 DATE WELL COMPLETED 033089  
 Depth of Well 145 (TO NEAREST FOOT)  
 PERMIT NO. FROM "PERMIT TO DRILL WELL" 100-28-0407

OWNER Willow Springs LTD  
 STREET OR RFD Willow Springs Dr. TOWN West Friendship  
 SUBDIVISION Willow Meadows SECTION 1X LOT well #4

**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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	30	✓
Sand/Stone	30	35	
MICKA	35	55	
Sand/Stone	55	60	✓
MICKA	60	145	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  YES  NO  
 TYPE OF GROUTING MATERIAL  
 CEMENT  CM BENTONITE CLAY  BC  
 NO. OF BAGS 17 NO. OF POUNDS 102  
 GALLONS OF WATER 102  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 25 ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
 ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER  
 MAIN CASING TYPE  PL  G  45  
 Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 45

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

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
 ST STEEL  BR BRASS  HO OPEN HOLE  
 PL PLASTIC  OT OTHER

**C2**  
 DEPTH (nearest ft.)  
 EACH SCREEN  
 1 HO 43 145  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) from to

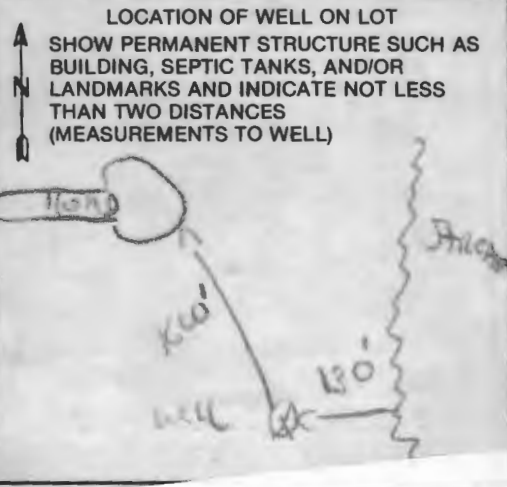
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) WQ  
 70 72 74 75 76  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3** 2666 OK 7/11/89 CW

**PUMPING TEST**  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 30  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 5  
 WHEN PUMPING 145  
 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)  
 + above } LAND SURFACE (nearest foot) 2  
 - below }



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 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. 273  
John Mays  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 **7936** SEQUENCE NO. (DP 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

STATE PERMIT NUMBER  
**40-88-0467**  
 fill in this form completely

Date Received (APA) **031389**

OWNER INFORMATION

**WILLOW SP LIMITED**  
 15 Last Name 21 Owner 27 First Name 34

**16801 McSLEY CH RD**  
 36 Street or RFD 55

**MOUNTAIN** **MD21111**  
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

**HULLARD** 8 COUNTY 21

**WILLOW HIGHLAND** 23 SUBDIVISION 42

SECTION **18** LOT **18**  
 44 46 48 50

**WEST FRIENDSHIP** 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **1** M I  
 73 76 77 78

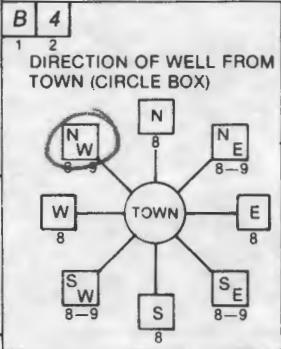
DRILLER INFORMATION

**Ralph MAYNE** 77 License No. **023**

**Ralph MAYNE well DRILLING**  
 Firm Name

**9120 Brown Church Rd. Mt Airy**  
 Address

**Ralph Mayne** **3/2/89**  
 Signature Date



**Willow Springs DR.** 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

**1600** 34 DISTANCE FROM ROAD 37  
 ENTER FT or MI **FT**  
 38 39

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **30** 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **8000** 14 20

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

**Hampden** **W-43783**  
 COUNTY NAME COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S

DATE ISSUED **031389** **John A. ...** **09-12-89**  
 43 48 CO SIGNATURE 41 EXP. DATE

NORTH GRID **539000** EAST GRID **0809000**  
 50 55 57 63

APPROXIMATE DEPTH OF WELL **150** FEET  
 24 28

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

- well**
- 
- 

WRITE THE BOX NUMBER FROM THE MAP HERE

E **8009**  
 N **54039**

000 000 (Top) (not on)

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

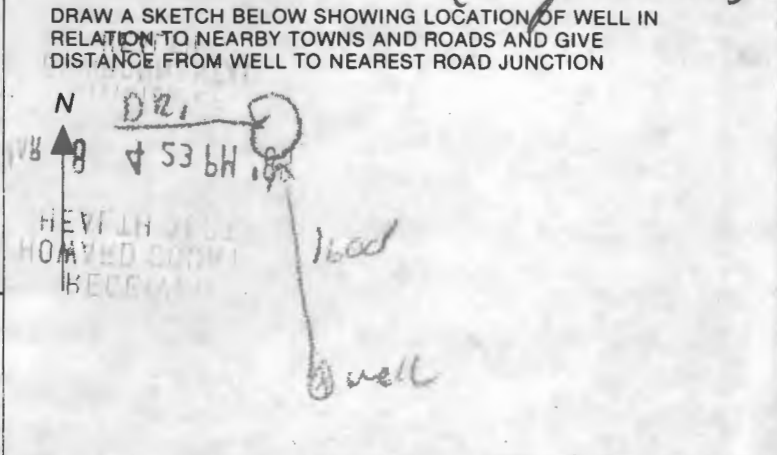
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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) \_\_\_\_\_



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

APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_

FORCE **SA** WRITE INITIALS IN BOX PERMIT NO. **40-88-0467**  
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS **brod well 4**

**Pump Test as specified by WRA**

**C1** 2342 SEQUENCE NO. (DENY USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND WELL COMPLETION REPORT**  
 FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER W-43785

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED 032589 Depth of Well 205 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" W-43785-0465

OWNER William Springs LTD last name William Springs Dr. first name TOWN West Friendship  
 STREET OR RFD SUBDIVISION William Highlands SECTION LOT 18 Well #2

**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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	15	✓
Sand/Stone	15	20	
MICKA	20	40	
Sand/Stone	40	45	✓
MICKA	45	205	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS 6 NO. OF POUNDS 600  
 GALLONS OF WATER 36  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from [ ] [ ] [ ] [ ] ft. to 23 ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN CASING TYPE **PL** Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 25

**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**  
 STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

**C2**  
 DEPTH (nearest ft.)  
 EACH SCREEN 1 **HO** 13 205  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN [ ] [ ] [ ] (NEAREST INCH)

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 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. 273  
John Mays  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

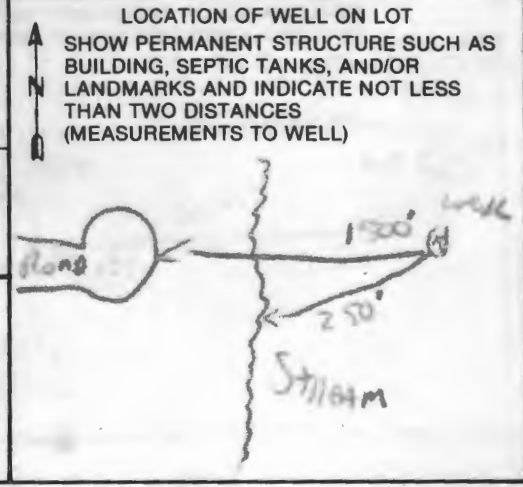
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.Q.S.) WQ  
 70 [ ] 72 [ ] 74 [ ] 75 [ ] 76 [ ]  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3** 26016 OK 7/3/89 CW  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 40  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 5  
 WHEN PUMPING 30.5  
 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)  
**+** above } LAND SURFACE (nearest foot) 2  
**-** below }



**C1** 2345 SEQUENCE NO. (DENY USE ONLY)  
 1 2 3 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND**  
**WELL COMPLETION REPORT**  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER W-43782

DATE RECEIVED  
 8     13

DATE WELL COMPLETED  
 15 03 30 89 20

Depth of Well  
 22 20 5 26  
 (TO NEAREST FOOT)

PERMIT NO.  
 FROM "PERMIT TO DRILL WELL"  
 28 40 28 0467 37

OWNER Willow Springs LTD  
 STREET OR RFD Willow Springs Dr last name first name TOWN West Friendship  
 SUBDIVISION Willow Hillland SECTION 1B LOT Will #5

**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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
sandy	2	20	✓
sandstone	20	25	
MICKA	25	45	
sandstone	45	50	✓
MICKA	50	205	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  Y  N  
 TYPE OF GROUTING MATERIAL  
 CEMENT  CM  BC BENTONITE CLAY  
 NO. OF BAGS 17 NO. OF POUNDS 1200  
 GALLONS OF WATER 102  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 25 ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
 ST  CO STEEL CONCRETE  
 PL  OT PLASTIC OTHER  
 MAIN CASING TYPE (nearest inch) PL 4 Nominal diameter  
 Total depth of main casing (nearest foot) 35 0 0 0 0

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

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
 ST  BR  HO STEEL BRASS OPEN  
 PL  OT PLASTIC OTHER

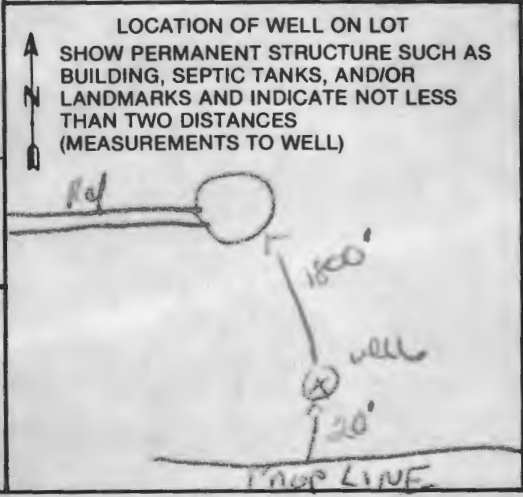
**C2**  
 DEPTH (nearest ft.)  
 1 HO 33 205  
 2                                
 3                                
 SLOT SIZE 1      2      3       
 DIAMETER OF SCREEN      (NEAREST INCH)  
 from      to     

**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.) WQ   
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3** REVISED OK 7/1/89 CW  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 4  
 METHOD USED TO MEASURE PUMPING RATE Kuckot  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 6  
 WHEN PUMPING 205  
 TYPE OF PUMP USED (for test)  
 A ar  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:  29  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon)                     35  
 PUMP HORSE POWER                     41  
 PUMP COLUMN LENGTH (nearest ft.)                     47  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 + above } LAND SURFACE 2 (nearest foot)  
 - below }



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 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. 223  
 DRILLERS SIGNATURE Wally Mayne  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

T-# 2 Well

B 1 7933

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-88-0465

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

please print or type

fill in this form completely

Date Received (APA)

031389

OWNER INFORMATION

WILLOW SP (Lim) Ted

16801 Westley CH RD

Monkton MD 21111

B 3

LOCATION OF WELL

HOWARD

WILLOW HIGHLANDS

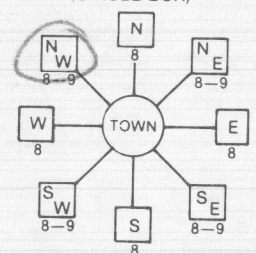
SECTION 7 LOT 18

West Friendship

MILES FROM TOWN (enter 0 if in town) 1 MI

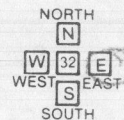
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



WILLOW SPRINGS DR.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 1500

ENTER FT or MI FT

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 10

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 1000

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard W-43785
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 031389
CO SIGNATURE EXP. DATE 09-12-89
NORTH GRID 539000 EAST GRID 0808000

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

8008
54039

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

- 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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEDED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER GAP

FORCE SA PERMIT No. 40-88-0465

SPECIAL CONDITIONS

Pond well Pump Test as Specified by WRA

T-#5 Well

7938

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

STATE PERMIT NUMBER

40-88-0468

fill in this form completely

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

Date Received (APA)

03/38/89

OWNER INFORMATION

WILLOW SPRINGS LIMIT

16801 WESTLEY CH RD

MURKTON MD 21111

DRILLER INFORMATION

Ralph Mayne 273

Ralph Mayne Well Drilling

9130 Brown Church Rd. Htting

Nash Mayne 3/2/89

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 10

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 1000

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
E 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)

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY Drive-POINT

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)

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

APPROX. PERMIT NUMBER GAP

FORCE SA PERMIT No. 40-88-0468

SPECIAL CONDITIONS pond well no 5 Pump Test as Specified by WRA

B 3

LOCATION OF WELL

HOWARD COUNTY

WILLOW HIGHLANDS

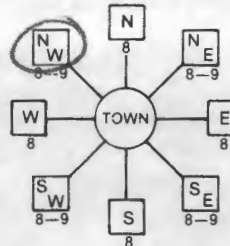
SECTION 44 46 LOT 18

WEST FRIENDSHIP

MILES FROM TOWN (enter 0 if in town) 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Willow Springs Dr. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 1800

ENTER FT or MI FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME W-43782 COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 03/38/89 July Well 09-12-89

NORTH GRID 539000 EAST GRID 0809000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

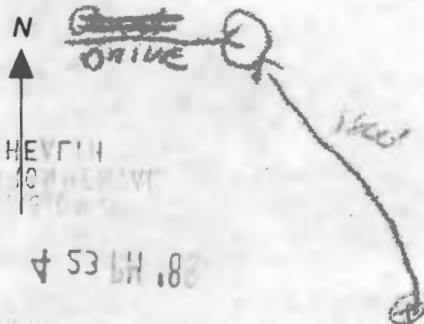
- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

8008
54039

3/30/89 Grout/Wall
12' Bags of cement.
35' casing in well.
2' casing above ground
28' Grout
Already groutd c. 80
(Top & bottom)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



B 1 **7939** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

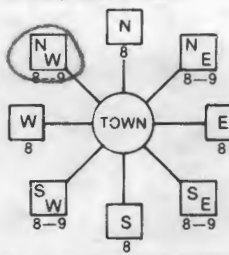
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**40-88-0469**  
 fill in this form completely

Date Received (APA) **03/13/89**  
**WILLOW SPRING LIMIT**  
**16861 WESTLEY CH RD**  
**MONKTON MD 21111**

B 3 LOCATION OF WELL  
**HOWARD** COUNTY  
**WILLOW FISHLAND** SUBDIVISION  
 SECTION **18** LOT **18**  
**WEST FRIENDSHIP** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **1** MI

DRILLER INFORMATION  
 Driller's Name **Ralph MAYNE** License No. **223**  
 Firm Name **Ralph MAYNE well drilling**  
 Address **5120 Brown Church Rd Mt Airy**  
 Signature **Ralph Mayne** Date **3/2/89**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  


**WILLOW SPRING DR.** NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 DISTANCE FROM ROAD **1900** FT OR MI **FT**

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **10**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **1000**

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  
 COUNTY NAME **Howard** COUNTY NO. **W-43781**  
 STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_  
 DATE ISSUED **03/13/89** CO SIGNATURE **Sally Allen** EXP. DATE **09-12-89**  
 NORTH GRID **539000** EAST GRID **0809000**

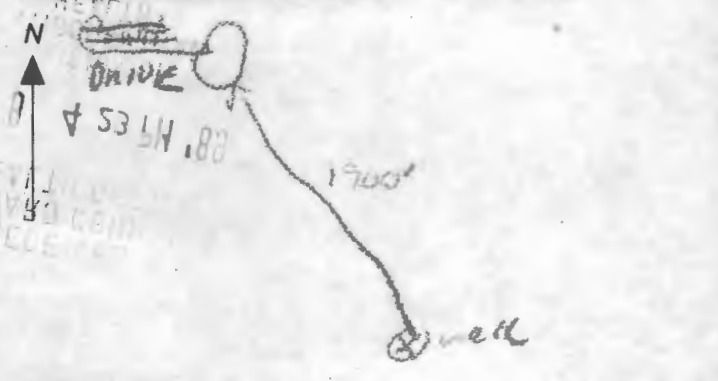
APPROXIMATE DEPTH OF WELL **150** FEET

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 \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. well  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E **8009**  
 N **57039**  
 000  
 000  
**3/30/89 Grout/Well**  
**18 # Bags of cement**  
**45' Well casing**  
**2' casing above ground**  
**30' Grout**  
**already grouted**  
**(Tag not on)**

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) \_\_\_\_\_

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  


Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_  
 FORCE **SA** WRITE INITIALS IN BOX PERMIT No. **40-88-0469**

SPECIAL CONDITIONS **well (b) Pump Test as specified by WRA**

C1 **2346** SEQUENCE NO. (DENV USE ONLY)  
 1 2 3 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND**  
**WELL COMPLETION REPORT**  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER **W-43781**

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED **033089** (15 20) Depth of Well **145** (22 26) (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **MO-87-0467** (28 29 30 31 32 33 34 35 36 37)

OWNER **William Spang (D)** last name **Spang** first name **William** TOWN **West Friendship**  
 STREET OR RFD **William Spang Dr** SUBDIVISION **William Spang** SECTION **18** LOT **Well #6**

**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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Shaly	2	30	✓
Sandstone	30	35	
MICA	35	60	
Sandstone	60	65	✓
MICA	65	115	

**GROUTING RECORD** yes  no   
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **18** NO. OF POUNDS **1800**  
 GALLONS OF WATER **108**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **30** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN CASING TYPE **PL** **G** **45**  
 Nominal diameter top (main) casing (nearest inch) **6** **45**  
 Total depth of main casing (nearest foot) **45**

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

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
**ST** **BR** **HO**  
 STEEL BRASS OPEN HOLE  
**PL** **OT**  
 PLASTIC OTHER

**C2**  
 DEPTH (nearest ft.)  
 EACH SCREEN 1 **HU** **43** **145**  
 2 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 3 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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 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. **273**  
 DRILLERS SIGNATURE **Kathy Mays**  
 (MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK from to  
 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.) WQ  
 70 [ ] 72 [ ] 74 [ ] 75 [ ] 76 [ ]  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3** **REVISION OK 7/1/89 CW**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **20**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **5**  
 WHEN PUMPING **145**  
 TYPE OF PUMP USED (for test) **A** **P** **T** **C** **R** **O** **J** **S**  
 Air piston turbine centrifugal rotary other (describe below) jet 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) **+** above } LAND SURFACE **2** (nearest foot)  
**-** below }

