



HAND DELIVERED

March 29, 2019
Kleinfelder Project No.: 20193752.001A

Mr. Andrew Miller
Maryland Department of the Environment
1800 Washington Boulevard
Baltimore, Maryland 21230

SUBJECT: REQUEST FOR ENHANCED MONITORING, POTABLE WELL SAMPLING, AND HALF-MILE SURVEY

Dear Mr. Miller:

Kleinfelder Inc. (Kleinfelder), on behalf of Sunoco, Inc. (Sunoco), herein responds to the Maryland Department of the Environment's (MDE) letter¹ requesting a half-mile sensitive receptor survey around the Urbana Fuel and Treat located at 8816 Fingerboard Road, Urbana, Maryland (Figure 1).

The letter requested completion of the following by March 15, 2019 (subsequently extended to March 29, 2019 by email²):

1. A summary table including property address, owner name and address, well tag ID, depth of well, casing depth, screen depth and current status of well usage;
2. Review well completion reports and evaluate whether on-site conditions could potentially impact any off-site drinking water wells in the area;
3. Perform field reconnaissance and provide documentation regarding verification of the presence or absence of the identified wells within 1,000 feet of the Site; and
4. Provide a map that includes the location of all identified wells within 1,000 feet of the Site.

Half-Mile Receptor Survey

1. Summary Table: Kleinfelder reviewed online sources to establish a list of addresses within a half-mile of the Site. Following review of a water service area figure³ available on the Frederick County Department of Health (DOH) website and in direct consultation with DOH, 33 properties are considered likely served by private supply wells within a half-mile

¹ MDE, *Request for Enhanced Monitoring, Potable Well Sampling, and Half-Mile Survey*, February 15, 2019.

² MDE email Re: 8816 Fingerboard (Urban Church Road), February 27, 2019.

³ Frederick County, MD – Community Development Division, *Water Service Areas – Frederick County, Maryland*, July 26, 2016.

of the Site. Table 1 lists available information for the 33 private supply wells including addresses, along with current owner, mailing address, well tag ID (where available) and well construction information.

2. Offsite Impact Evaluation: Kleinfelder reviewed well completion reports for properties within a half-mile of the Site. Unfortunately, the majority of the well completion reports (Attachment 1) are illegible, or do not provide sufficient information to match the completion report with a specific address. Results of the supply well sampling conducted in response to MDE's letter (see next section), indicates onsite impact is not migrating to offsite supply wells at this time.
3. Field Reconnaissance: Kleinfelder staff performed field reconnaissance on February 28, 2019 and March 2, 2019 within 1,000 feet of the site to identify the presence or absence of private supply wells. Nineteen properties were identified with known or suspected supply wells within 1,000 of the property (Figure 2). Of these properties, the following three have wells observed/reported to be disconnected/inactive:

8995A Urbana Church Road (see photo log at Attachment 2)
8995B Urbana Church Road (see photo log at Attachment 2)
8832 Urbana Church Road – vacant property, out-of-service

4. 1,000-Foot Supply Well Map: A map showing the location of all known and suspected supply wells within 1,000 feet of the Site is provided at Figure 2.

Private Supply Well Sampling

The MDE's 2/15/19 letter also required sampling of the private supply wells at the following addresses:

- 8826 Urbana Church Road (sampled 3/5/19)
- 8994 Urbana Church Road (sampled 2/28/19)
- 8995A Urbana Church Road (out of service)
- 8995B Urbana Church Road (out of service)
- 3514 Urbana Pike (connected to public water)
- 3526 Urbana Pike (sampled 2/28/19)
- 3528 Urbana Pike (sampled 2/28/19)

On February 28 and March 5, 2019, Kleinfelder collected samples from the private supply wells at the following addresses:

- 8826 Urbana Church Road
- 8994 Urbana Pike
- 3526 Urbana Pike
- 3528 Urbana Pike

Analytical reports were provided to the MDE by email on March 11, 2019 and March 14, 2019 and are included in Attachment 3.

All samples were submitted to Eurofins Lancaster Laboratories, Inc. for analysis of volatile organic compounds (VOCs), naphthalene, and five fuel oxygenates by EPA method 524.2. Results from all four properties were below the detection limit for all constituents analyzed (Attachment 3).

Samples were not collected from 8995A and 8995B Urbana Church Road as the supply wells for these properties are not in service (Attachment 2). The property at 3514 Urbana Pike has been connected to public water for some time (supply well abandonment report provided as Attachment 4).

LIMITATIONS

This work was performed in a manner consistent with that level of care and skill ordinarily exercised by other members of Kleinfelder's profession practicing in the same locality, under similar conditions and at the date the services are provided. Our conclusions, opinions and recommendations are based on a limited number of observations and data. It is possible that conditions could vary between or beyond the data evaluated. Kleinfelder makes no other representation, guarantee or warranty, express or implied, regarding the services, communication (oral or written), report, opinion, or instrument of service provided.

Mr. Andrew Miller
Maryland Department of the Environment
Oil Control Program
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Please contact the undersigned with any questions or requests for additional information.

Sincerely,

KLEINFELDER



Mark J. Schaaf, C.P.G.
Project Manager

cc: ENFOS

FIGURES

- 1 Regional Area Map
- 2 Local Area Map

TABLES

- 1 Supply Wells within One-Half Mile of Site

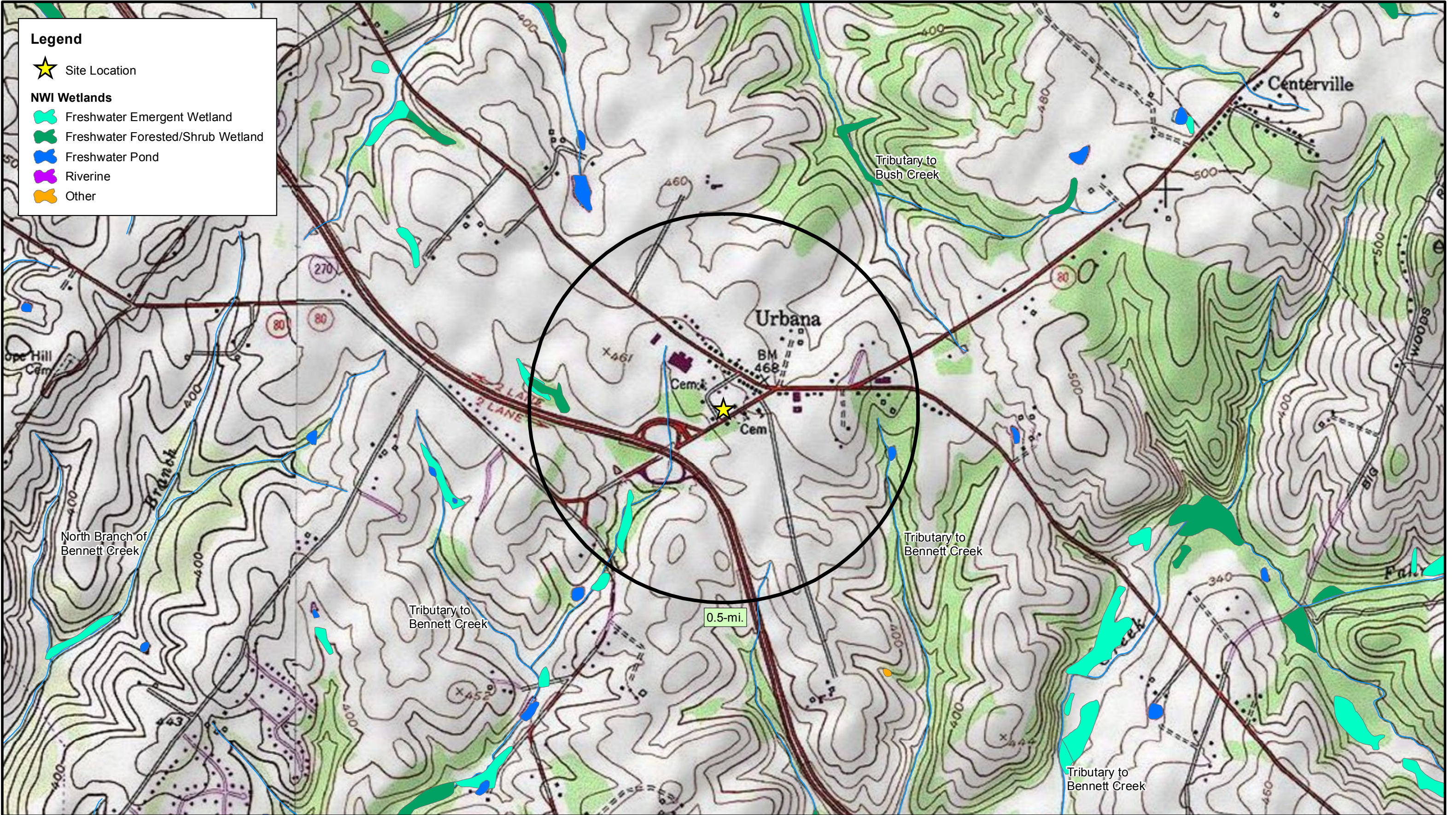
ATTACHMENTS

- 1 Supply Well Completion Reports
- 2 Photo Log
- 3 Analytical Laboratory Reports
- 4 3514 Urbana Pike – Supply Well Abandonment Report

FIGURES

FIGURE 1

Regional Area Map




Legend

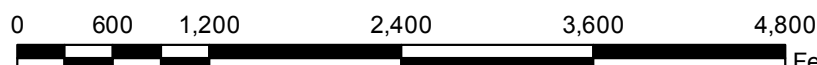
★ Site Location

NWI Wetlands

- Freshwater Emergent Wetland
- Freshwater Forested/Shrub Wetland
- Freshwater Pond
- Riverine
- Other



Topography mapped in 1953
by U.S. Army Corps of Engineers.
Revised/Inspected in 1986 by USGS.



0 600 1,200 2,400 3,600 4,800 Feet

G:\Projects\0506606\26463_RAM_NWI_032211.mxd

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KLEINFELDER
Bright People. Right Solutions.
www.kleinfelder.com

Cartography By: B. Myers

Date: 04/07/11

Regional Area Map

SOUTHSIDE FACILITY #26463
8816 FINGERBOARD ROAD
FREDERICK, MD
FREDERICK COUNTY

Figure
1

Project Number: 113847

File Name: RAM

FIGURE 2

Local Area Map

TABLES

TABLE 1

Private Supply Wells Within 1/2 Mile of Site

Table 1
Private Supply Wells Within 1/2 Mile of Site
8816 Fingerboard Road
Urbana, MD

Property Address	Property Owner	Mailing Address	Well Tag ID	Well Depth	Casing Depth	Screen Depth	Current Usage Status
8816 Fingerboard Road	Southside Oil, LLC	c/o K.E. Andrews Company 1900 Dalrock Road Rowlett, TX 75088	FR-73-8958	161	100	unknown	
8994 Urbana Church Road	Mary B. Richeimer	8994 Urbana Church Rd. Frederick, MD 21704	unknown	unknown	unknown	unknown	
8995A Urbana Church Road	Outlook, Inc.	c/o Knight Kiplinger 16801 River Road Poolesville, MD 20837	FR-73-2819	44	6	unknown	
8995B Urbana Church Road	Outlook, Inc.	c/o Knight Kiplinger 16801 River Road Poolesville, MD 20837	FR-73-2819	44	6	unknown	
8826 Urbana Church Road	Judith Taylor & Maureen Wood	2704 Cedar Drive Riva, MD 21140	unknown	unknown	unknown	unknown	
8832 Urbana Church Road	Thomas DeFrees & Esperanza Mullican	3020 SW 78th Ct. Miami, FL 33155	unknown	unknown	unknown	unknown	
3504 Urbana Pike	Outlook, Inc.	c/o Knight Kiplinger 16801 River Road Poolesville, MD 20837	unknown	unknown	unknown	unknown	Property owner indicates no well on the premises
3528 Urbana Pike	Core Wealth Strategies LLC	3528 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3526 Urbana Pike	Urbana Knight Properties, LLC	c/o Knight Kiplinger 16801 River Road Poolesville, MD 20837	unknown	unknown	unknown	unknown	
3532A Urbana Pike	Casa Bella, LLC	c/o Paul A. Hynes 3322 Knolls Pkwy Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3532B Urbana Pike	Casa Bella, LLC	c/o Paul A. Hynes 3322 Knolls Pkwy Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3534 Urbana Pike	Casa Bella, LLC	c/o Paul A. Hynes 3322 Knolls Pkwy Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3536 Urbana Pike	Casa Bella, LLC	c/o Paul A. Hynes 3322 Knolls Pkwy Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3538 Urbana Pike	Casa Bella, LLC	c/o Paul A. Hynes 3322 Knolls Pkwy Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3509 Urbana Pike	Edwin L. and Jeah H. Wood Trustees	3509 Urbana Pike Road Frederick, MD 21704	unknown	unknown	unknown	unknown	
3505 Urbana Pike	No entry in SDAT		unknown	unknown	unknown	unknown	

Table 1
Private Supply Wells Within 1/2 Mile of Site
8816 Fingerboard Road
Urbana, MD

Property Address	Property Owner	Mailing Address	Well Tag ID	Well Depth	Casing Depth	Screen Depth	Current Usage Status
3527 Urbana Pike	Urbana Two LLC	c/o TCD Investments 3280 Urbana Pike, Ste. 105 Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3535 Urbana Pike	Urbana One LLC	3535 Urbana Pike Frederick MD 21704	unknown	unknown	unknown	unknown	
3539 Urbana Pike	Krupakar Thadikonda	8102 Ball Road Frederick, MD 21704	unknown	unknown	unknown	unknown	
3543 Urbana Pike	Thomas A. & Hazel C. Reid et al	c/o Howard I Rubin 16 Observation Court #201 Germantown, MD 20876	unknown	unknown	unknown	unknown	
3553 Urbana Pike	Dolly Staley et al	3553 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3557 Urbana Pike	Harriet & Calvin Wachter	3557 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3561 Urbana Pike	Peter George Chaconas Trustee & Katherine Ann Chaconas Trustee	7069 Lily Pons Rd. Adamstown, MD 21710	unknown	unknown	unknown	unknown	
3565 Urbana Pike	Betty Katherine & Sandra L. Lawson, and Joanna B. Lawson Stone	3565 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3569 Urbana Pike	Urbana Hospital Property LLC	3012 Price Distillery Rd. Ijamsville, MD 21754	unknown	unknown	unknown	unknown	
3513 Urbana Pike	No entry in SDAT		unknown	unknown	unknown	unknown	
3515 Urbana Pike	No entry in SDAT		unknown	unknown	unknown	unknown	
3519 Urbana Pike	Urbana Methodist Church	3519 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3521 Urbana Pike	No entry in SDAT		unknown	unknown	unknown	unknown	
3524 Urbana Pike	John & Karen Main	3524 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
3526 Urbana Pike	Outlook, Inc.	c/o Knight Kiplinger 16801 River Road Poolesville, MD 20837	unknown	unknown	unknown	unknown	
3549 Urbana Pike	3549 Urbana Pike LLC	3549 Urbana Pike Frederick, MD 21704	unknown	unknown	unknown	unknown	
8817 Urbana Church Rd	St. Ignatius Loyola Urbana Roman Catholic Congregation, Inc.	4103 Price Distillery Rd. Ijamsville, MD 21754	unknown	unknown	unknown	unknown	



ATTACHMENTS



ATTACHMENT 1

Supply Well Completion Reports

STATE OF MARYLAND
DEPARTMENT OF GEOLOGY, MINES AND WATER RESOURCES
The Johns Hopkins University
BALTIMORE 18, MARYLAND

FR 036146

APPLICATION FOR PERMIT TO DRILL WELL

An application must be submitted and permit received before drilling a well

Owner Frederick County School Board Driller A. R. Ryan, Inc.
Street or R. F. D. Urbana Elementary School Street or R. F. D. Frederick
Post Office Urbana, Md. Date 9-1-59
Quantity of Water Needed (G. P. M.) 15 Location of Well
Use for Water School County Frederick
Approximate Depth of Well (feet) 100 Nearest Town Urbana
Type of Drilling to be used Auger Name of Drilling Firm A. R. Ryan, Inc.
Name of Drilling Firm Frederick

PERMIT TO DRILL WELL

(To be returned to D. G. M.)

APPROVED BY THE BOARD OF GEOLOGY

Name of Applicant

Name of Drilling Firm

Location of Location of Well

This information should be definite enough to permit locating well on a county map

Sheet Road Md 355Side of Road SDistance from Road 100 ft

Sketch below showing location of well to be drilled, showing road and stream, etc.

(DUPLICATED)

STATE OF MARYLAND
DEPARTMENT OF GEOLOGY, MINES AND WATER RESOURCES

The Johns Hopkins University
BALTIMORE 18, MARYLAND

FR 36146

WELL COMPLETION REPORT

This report must be submitted within 30 days after completion of the well

254

65 WELL DESCRIPTION

WELL LOG

State the kind of formations penetrated, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD

State the kind and size of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well)

Permit Number 36146

Name of Owner

Final City Bd of Edu.

PUMPING TEST

Hours Pumped 24

Type of Pump Used Rod

Pumping Rate

Gallons per Minute 30

WATER LEVEL

Distance from land surface to water

Before Pumping 35 ft

When Pumping 35 ft

APPEARANCE OF WATER

Clear ☒

Cloudy ☐

Taste ☒

Odor ☒

Height of Casing Above Land

Surface 41 ft

PUMP INSTALLED

Type ☒

Capacity ☒

Gallons per Minute ☒

Gallons per Hour ☒

Pump Column Length ☒

REMARKS

Well Was Completed

Date 10-22-58

Well Driller 3381

A R. L. Ryan, Jr.

Signature

APPLICATION FOR PERMIT TO DRILL WELL
WATER RESOURCES

FR690444
Owner Peter Pan Inn
Richard Baumgardner
Street or R. F. D. _____
Post Office Urbana, Md.
Quantity of Water to be Produced 20 Gallons Per Minute
Total Quantity Needed For Use 6,000 Gallons Per Day
Use for Water Restaurant I
Approximate Depth of Well (feet) 400
Method of Drilling to be used Rotary R
Is this a Replacement Well? Yes - No S
If YES, indicate date abandoned well is to be sealed: will keep as Reserve
and by whom: _____

License Number 34
Driller Robert Cline
Street or R. F. D. 7
Post Office Frederick
Date May 12, 1969
Location of Well _____ County Frederick
Subdivision _____
Section _____ Lot _____
Nearest Town Urbana
Distance from Town in town
Direction from Town East
Description of Location of Well
(This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).
Near what road MD Rt. 355
On which side of road North
(North, East, South, West)
Distance from road 50 ft.

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with NORTH in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch. Distances may be approximate, but must be indicated.

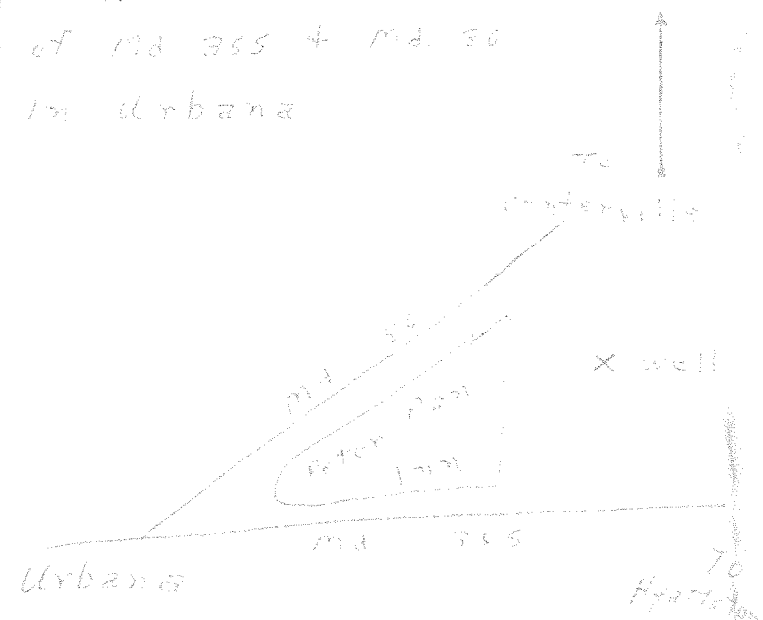
Well at intersection NORTH
of Md 355 + Md. 30
in Urbana

Well Permit No. FR 690444
Samples of Cuttings Required by Department: ☒ Yes ☐ No
Owner Requires Permit to Appropriate Water: ☒ Yes ☐ No
Owner Has Permit to Appropriate Water: ☒ Yes ☐ No
Appropriation Permit No. FR69CAPC24
The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.

Paul W. H. H. 6/15/69
Director Date

THIS PERMIT IS NOT TRANSFERRABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT
Special conditions that must be observed:

County Permit No. 69-272
Health Department Approval of Application
Frederick County Department of Health
or ☐ State Department of Health
Approved by R. T. Dubrow
Title Superintendent
Date 05/12/69



THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT RECEIVED 05/14/69

WELL DESCRIPTION

A

WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

Brown shale

Blue slate

Water at 215' & 385'

FEET
from 0 to 35

35-400

B CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

Steel

DIAM.
(inches)

6 1/4

FEET
from 0 to 41DATE
WELL WAS
COMPLETED

I hereby affirm that this report contains no willful misrepresentation or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Robert L. Clive, Well Driller

5/14/69

Well Driller License No.: 34

Permit Number FR 690444
Owner Richard Baumgardner
Address Urbana, Md.
Subdivision _____
Section _____ Lot _____
County Permit Number 69-272
PUMPING TEST
Hours Pumped 1
Type of Pump Used Air A
Pumping Rate 2
Gallons per Minute 2

WATER LEVEL

(Distance from land surface to water)

Before Pumping 40 Ft.

When Pumping 400 Ft.

APPEARANCE OF WATER

Clear ☒ Cloudy ☐

Taste NONE

Odor NONE

Height of Casing Above Land

Surface _____ Ft.

PUMP INSTALLED

Type _____

Capacity _____

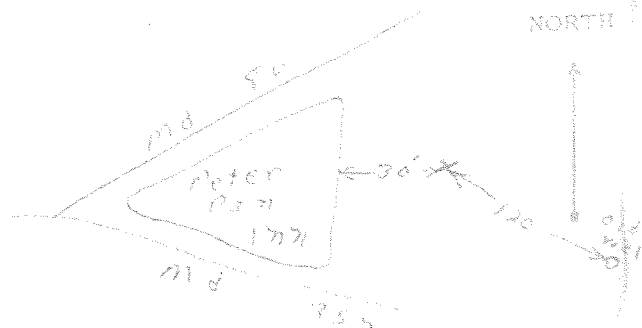
Gallons per Minute _____

Gallons per Hour _____

Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



ORIGINAL

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

APPLICATION FOR PERMIT TO DRILL WELL FOR
WATER RESOURCES

Owner Peter Pan Inn
Richard Baumgardner
Street or R. F. D. _____
Post Office Urbana, Md.
Quantity of Water to be Produced 20 Gallons Per Minute
Total Quantity Needed For Use 6,000 Gallons Per Day
Use for Water Restaurant I
Approximate Depth of Well (feet) 400
Method of Drilling to be used Rotary R
Is this a Replacement Well? (Yes) - No S
If YES, indicate date abandoned well is to be sealed: Keep and Abandon
and by whom: _____

Driller Robert Cline License Number 34
~~Street~~ R. F. D. 7
 Post Office Frederick, Md
 Date May 20, 1969
 Location of Well County Frederick
 Subdivision _____
 Section _____ Lot _____
 Nearest Town Urbana
 Distance from Town In town
 Direction from Town East
 Description of Location of Well
 (This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).
 Near what road MD Rt. 355
 On which side of road North
 (North, East, South, West)
 Distance from road 50 ft.

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with NORTH in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch. Distances may be approximate, but must be indicated.

100

PERMIT TO DRILL WELL
Not To Be Filled in By Driller

Well Permit No. FR 690464

Samples of Cuttings Required by Department: ☒ Yes ☐ No

Owner Requires Permit to Appropriate Water: ☒ Yes ☐ No

Owner Has Permit to Appropriate Water: ☒ Yes ☐ No

Appropriation Permit No. FR 690464

The applicant is herewith granted a permit to drill this well
subject to the conditions stipulated.

Carl W. Allen 6/19/69

Director Date

THIS PERMIT IS NOT TRANSFERRABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT

Special conditions that must be observed:

County Permit No. 09-291
Health Department Approval of Application
by Fordwick County Department of Health
or ☐ State Department of Health
Approved by Carl Watson
Title Assistant
Date 10/15/11

ORIGINAL

**THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL**

WELL COMPLETION REPORT RECEIVED 05/16/69

FR690464

6 20

WELL DESCRIPTION

JUL 3 AM 9:26 370

A WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

Brown Shale
Blue Slate
Water at 215' + 230'FEET
from 0 to 15

15 - 370

B CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

Steel

DIAM.
(inches)

6 1/4

FEET
from 0 to 20

Permit Number FR690464

Owner Richard Baumgardner

Address Urbana, Md

Subdivision

Section Lot

County Permit Number 69-291

PUMPING TEST

Hours Pumped 2

Type of Pump Used Air Lift

Pumping Rate 20

Gallons per Minute 20

WATER LEVEL

(Distance from land surface to water)

Before Pumping 40 Ft.

When Pumping 370 Ft.

APPEARANCE OF WATER

Clear ☒ Cloudy

Taste NONE

Odor NONE

Height of Casing Above Land

Surface + 2 Ft.

PUMP INSTALLED

Type Submersible

Capacity

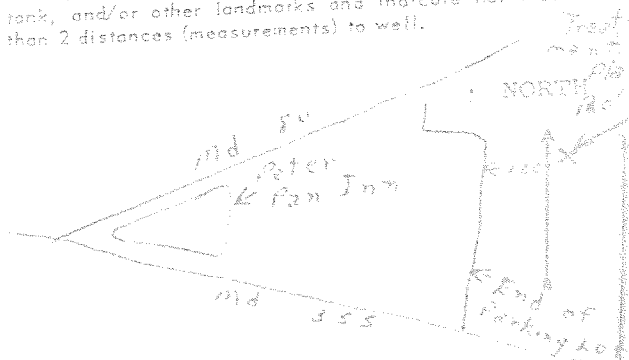
Gallons per Minute 20

Gallons per Hour 1200

Pump Column Length 356 ft.

LOCATION OF WELL ON LOT

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.

DATE
WELL WAS
COMPLETED

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Robert L. Chinn, Well Driller

5/16/69

Well Driller License No.: 34

ORIGINAL

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-71-0434
FILL IN THIS FORM COMPLETELY

FILE 0108
THIS FORM IS TO BE SUBMITTED TO THE STATE DEPARTMENT OF WATER RESOURCES, ANNAPOLIS, MARYLAND 21401.
DATE RECEIVED
MAY 1971

OWNER: Quisenberry, F. James FIRST NAME: James COL. 34
LAST NAME: Quisenberry COL. 35
STREET OR RFD: 13 COL. 36
POST OFFICE: Fredrick, Maryland COL. 37

DATE: March 25, 1971 LICENSE NUMBER: 74
DRILLER: W. B. Williams FIRST NAME: William LAST NAME: Williams
SIGNATURE: W. B. Williams

WELL INFORMATION
MAXIMUM PERMITTED RATE (GALLONS PER MINUTE): 3
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 700
USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ DOMESTIC, HOME, ISUAL AND DOUBLE HOMEHOLD USE ONLY
☐ FLOODING, INDUSTRIAL, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ OTHER

LOCATION OF WELL
COUNTY: Fredrick
SUBDIVISION: 13
SECTION: 14 LOT: 1
NEAREST TOWN: Lincolnton
MILES FROM TOWN (ENTER IF IN TOWN): 1
DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
NORTH EAST NE NEAST S E SOUTHEAST
SOUTH WEST NW NORTHWEST S W SOUTHWEST
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH SOUTH EAST WEST
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)
50 40

APPROXIMATE DEPTH OF WELL: 100 FEET
APPROXIMATE DIAMETER OF WELL: 6 INCHES
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
BORED OR AUGERED ☐ DRIVEN ☐
SOFT ☐ HARD ☐
CANNED ☐ OTHER ☐

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)
☐ YES ☐ NO
REASON FOR REPLACEMENT OR DEEPENING (CIRCLE APPROPRIATE BOX)
☐ DRY ☐ CLOGGED ☐ OTHER

NOT TO BE FILLED IN BY DRILLER
APPROPRIATE BOXES
APPROVED BY: 71-121

HEALTH DEPARTMENT APPROVAL
COUNTY NAME: Fredrick COUNTY NO.: 71-121
APPROVED BY: PR

COX NUMBER: 290
NUMBER: 540
NORTH COORDINATE: 540000
EAST COORDINATE: 069000
ELEVATION AT WELL HEAD (FEET): 100

FILE 0108
DATE: 1031 401

WELL NO. **4254**

DATE RECEIVED **06/14/77**

DATE WELL COMPLETED **4/3/77**

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

PERMIT NO. FROM "PERMIT TO DRILL WELL"

PA-171-01434

DRILLERS IDENTIFICATION NO. **111**

OWNER **Qiesler**

STREET OR RFD **Rt 2**

POST OFFICE **Fairfax Md**

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, TEXTURE, INFERENCE AND IF WATER BEARING

DEPTH OF WELL **145**

(TO NEAREST FOOT)

DESCRIPTION OF FORMATIONS

Earth

Unconsolidated

Subsist

FEET

FROM TO

0 36

36 145

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT **SC**

NO. OF BAGS **9** NO. OF POUNDS **90**

GALLONS OF WATER **54**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM **0** FT. TO **37** FT.

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **1**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **3**

METHOD USED TO MEASURE PUMPING RATE **10 min**

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **43** NEAREST FOOT

WHEN PUMPING **138** NEAREST FOOT

CASING RECORD

INSERT APPROPRIATE CODE

MAIN CASING TYPE **ST**

NOMINAL DIAMETER OF MAIN CASING (NEAREST INCH) **6"**

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **40**

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)

AIR **PISTON** **T**

E **ROTARY** **O**

J **SUBMERSIBLE**

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET)

FROM TO

SCREEN RECORD

SCREEN TYPE (CIRCLE BOX)

ST **VR** **HS**

UL **OT**

DEPTH OF SCREEN (TO NEAREST WHOLE FOOT)

FROM **0** TO **21**

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR OTHER LAND MARKS. INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL.

CIRCLE APPROPRIATE BOXES

☐ WELL HAS BEEN ABANDONED AND APPLIED WITH THIS WELL HAS COMPLETED

☐ SCREEN LOG ATTACHED

☐ COPY OF ELECTRIC LOG ATTACHED

WELL NAME

W.C. Hillman

W.C. Hillman

WELL NAME

W.C. Hillman

W.C. Hillman

WELL NAME

W.C. Hillman

W.C. Hillman

WELL NAME

W.C. Hillman

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W.C. Hillman

WELL NAME

W.C. Hillman

W.C. Hillman

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-71-0545
FILL IN THIS FORM COMPLETELY

2952
THIS NUMBER IS TO BE PLACED IN COLS. 3-6 OF THE PERMIT
DATE RECEIVED
1 MAR 2004 04:11

OWNER: Madison, Robert A.
COL 15 LAST NAME

FIRST NAME COL 24

STREET OR RD: Rt. 1
COL 30

COL 31

POST OFFICE: Gettysburg, Md.
COL 37

COL 38

B 1 CONTINUED
1 2 3 1960, NO. 1 0

DRILLER INFORMATION

DATE: 5/19/77
LICENSE NUMBER: 147
77 80

Robert R. Kennedy Inc.
FIRST NAME DRILLER LAST NAME

SIGNATURE: Robert R. Kennedy

B 2
1 2 3 1960, NO. 1 0

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 900

USE FOR WATER (CHECK APPROPRIATE BOX)

☒ DOMESTIC, HOME USE ONLY (DO NOT CHECK IF USED FOR OTHER PURPOSES)

☐ FARMING, AGRICULTURE, IRRIGATION

☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT

☐ MUNICIPAL WATER SUPPLY

☐ PRIVATE WATER COMPANY

☐ OTHER

MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL: 100 FEET

APPROXIMATE DIAMETER OF WELL: 6 (INCHES)

METHOD OF DRILLING USED (CHECK APPROPRIATE METHOD)

TYPE OF CASING: ☒ STEEL ☐ CONCRETE ☐ OTHER
TYPE OF DRIVE: ☒ CABLE TOOL ☐ AIR ☐ OTHER
TYPE OF POINT: ☒ BIT ☐ OTHER

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

REPLACEMENT OF CASING OR WELL: (CHECK APPROPRIATE BOX)

☐ YES ☐ NO

☐ YES ☐ NO

☐ YES ☐ NO

☐ YES ☐ NO

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

NOT TO BE FILLED IN BY DRILLER (SEE INSTRUCTIONS)

APPROXIMATE DEPTH OF WELL: 100 FEET

APPROXIMATE DIAMETER OF WELL: 6 (INCHES)

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

B 3
1 2 3 1960, NO. 1 0

LOCATION OF WELL

COUNTY: Frederick

SUBDIVISION: North Carroll Estates

SECTION: 45 LOT: 2

NEAREST TOWN: Centerville

MILES FROM TOWN (ENTER CITY/TOWN): 1

B 4
1 2 3 1960, NO. 1 0

DIRECTION FROM TOWN

(CHECK APPROPRIATE BOX)

☐ NORTH ☐ EAST ☒ NORTHEAST ☐ SOUTHEAST

☐ SOUTH ☐ WEST ☒ SOUTHWEST ☐ NORTHWEST

NEAR ROAD: Fingerboard Rd.

ON WHICH SIDE OF ROAD (CHECK APPROPRIATE BOX): ☒ NORTH ☐ SOUTH

DISTANCE FROM ROAD (ENTER DISTANCE AND CHECK APPROPRIATE BOX): 50

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

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REMARKS: (SEE INSTRUCTIONS ON REVERSE SIDE OF PERMIT)

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

4R-71-2559
FILL IN THIS FORM COMPLETELY

0637

IS THIS WELL TO BE FINISHED
BY 12-31-74? YES ☒ NO ☐
IF YES, BY WHAT DATE?
YES RECEIVED
10:00 AM 12-31-74

OWNER Walter Elbert
COL. 12 LAST NAME

FIRST NAME COL. 34

ADDRESS
OR RFD COL. 36

POST
OFFICE COL. 37

Brockville MD. 20729

DATE May 20, 1974

DRILLER INFORMATION

LICENSE NUMBER 42
DATE May 20, 1974

SIGNATURE L. F. Eastman
FIRST NAME L. F. DRILLER LAST NAME Eastman

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 600
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600

- USE FOR WATER (CIRCLE APPROPRIATE BOX)
- ☒ DOMESTIC, HOME SINKS OR DOUBLE HOLE SINKS ONLY
 - ☐ FARMUSE, INDUSTRIAL, IRRIGATION
 - ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
 - ☐ MUNICIPAL WATER SUPPLY
 - ☐ PRIVATE WATER SUPPLY
 - ☐ TEST
- MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL 125 FEET

APPROXIMATE DIAMETER OF WELL 6 INCHES (INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

- ☒ AUGER
- ☐ HAND DRILL
- ☐ ROTARY
- ☐ OTHER

REPLACEMENT OR REFINISHED WELL (CIRCLE APPROPRIATE BOX)

REASON FOR REPLACEMENT OR REFINISHING (CIRCLE APPROPRIATE BOX)

REASON FOR REPLACEMENT OR REFINISHING (CIRCLE APPROPRIATE BOX)

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REASON FOR REPLACEMENT OR REFINISHING (CIRCLE APPROPRIATE BOX)

LOCATION OF WELL

COUNTY Frederick

SUBDIVISION 23

SECTION 44 LOT 1

NEAREST TOWN Dumfries

MILES FROM TOWN CENTER (IN TOWN) 2

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

- ☐ NORTH
- ☐ EAST
- ☐ NORTHWEST
- ☐ SOUTHWEST
- ☐ SOUTH
- ☐ WEST
- ☐ NORTHEAST
- ☐ SOUTHWEST

HEAD WHAT ROAD 60th Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX) 100

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

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FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

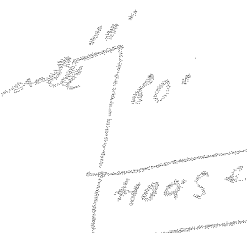
FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

FEET FROM ROAD (CIRCLE APPROPRIATE BOX)

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401		PERMIT NO. FROM "PERMIT TO DRILL WELL" ED-71-0559 10 20 30 40 50 60 70 80 90 100																					
WELL COMPLETION REPORT		FILL IN THIS FORM COMPLETELY																					
WELL NO. 7045 DATE WELL COMPLETED Jan 12-71 DEPTH OF WELL 300 ITS NEAREST FOOT: 22 25		DRILLERS IDENTIFICATION NO. 32																					
OWNER Welsh LAST NAME		POST OFFICE Chesapeake																					
STREET OR RFD _____		WELL DESCRIPTION																					
WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		GROUTING RECORD WELL HAS BEEN GRouted (CIRCLE APPROPRIATE BOX) TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 5 NO. OF POUNDS 500 GALLONS OF WATER 30 DEPTH OF GROUT SEAL (ITS NEAREST FOOT) FROM 0 FT. TO 18 FT. ENTER 0 IF FROM SURFACE																					
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>FEET</th> <th>FROM</th> <th>TO</th> <th>CHECK IF WATER BEARING</th> </tr> <tr> <td>3</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td></td> <td></td> <td></td> </tr> <tr> <td>60</td> <td></td> <td></td> <td></td> </tr> <tr> <td>300</td> <td></td> <td></td> <td></td> </tr> </table>		FEET	FROM	TO	CHECK IF WATER BEARING	3				15				60				300				CASING RECORD CASING TYPE <input checked="" type="checkbox"/> INSERT <input type="checkbox"/> CEMENT <input type="checkbox"/> APPROPRIATE CODE <input type="checkbox"/> BELOW <input type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER MAIN CASING TYPE <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 14 <input type="checkbox"/> 16 <input type="checkbox"/> 18 <input type="checkbox"/> 20 NOMINAL DIAMETER TOP (MAIN BEARING WEAREST INCH) TOTAL DEPTH OF MAIN CASING (WEAREST FEET) OTHER CASING (IF USED) DIAMETER (INCH) _____ DEPTH (FEET) _____ FROM _____ TO _____	
FEET	FROM	TO	CHECK IF WATER BEARING																				
3																							
15																							
60																							
300																							
SCREEN TYPE OR SCREEN HOLE <input checked="" type="checkbox"/> INSERT <input type="checkbox"/> CEMENT <input type="checkbox"/> APPROPRIATE CODE <input type="checkbox"/> BELOW <input type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER		PUMPING TEST HOURS PUMPED (ITS NEAREST HOUR) 1 PUMPING RATE GALLONS PER MINUTE TO NEAREST GALLON 1 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 20 INCHES WHEN PUMPING 300 INCHES TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> AIR <input type="checkbox"/> PISTON <input type="checkbox"/> TURBINE <input type="checkbox"/> CENTRIFUGAL <input type="checkbox"/> ROTARY <input type="checkbox"/> OTHER <input type="checkbox"/> JET <input type="checkbox"/> SUBMERSIBLE																					
PUMP INITIALIZED 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) CAPACITY: GALLONS PER MINUTE (ITS NEAREST GALLON) _____ PUMP HORSE POWER _____ PUMP COLUMN LENGTH (WEAREST FEET) _____ CASING HEIGHT? (CIRCLE APPROPRIATE BOX) AND ENTER CASING HEIGHT <input checked="" type="checkbox"/> PISTON <input type="checkbox"/> BELOW LAND SURFACE _____ HOLE DEPTH _____		LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, HEATING TANKS, AND FOR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANT MEASUREMENTS TO WELL. 																					
CIRCLE APPROPRIATE BOXES <input type="checkbox"/> A WELL NOT DRILLED AND ABANDONED WHEN THIS WELL WAS COMPLETED <input type="checkbox"/> B ELECTRIC LOG OBTAINED <input type="checkbox"/> C COPY OF ELECTRIC LOG ATTACHED I HEREBY CERTIFY THAT I HAVE COMPLETED WITH ALL INFORMATION STATED ON THE APPLICATIONS (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. DRILLER'S NAME J. F. Hesterday ADDRESS (WRITE) J. F. Hesterday LICENSE NO. _____		GRAVEL PACK <input type="checkbox"/> IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX <input type="checkbox"/> DATA USE ONLY (DO NOT FILL IN IF DATA NOT AVAILABLE) TELEPHONE CORDING <input type="checkbox"/> LOG MATCH <input type="checkbox"/> DATA DATA AVAILABLE <input type="checkbox"/>																					

ORIGINAL

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR 72-0055
FILL IN THIS FORM COMPLETELY

Dickinson, Robert D.

OWNER
COT IN LISTED

FIRST NAME
COT. 34

STREET OR RFD
Rd. 2

COT. 34

POST OFFICE
Frederick, Md. 21701

COT. 34

8-11 CONTINUED

DRILLER INFORMATION

8-13

LOCATION OF WELL

COUNTY

Frederick

SUBDIVISION

SEE MAP & PREVIOUS COUNTY NAME

SECTION

Urban

NEAREST TOWN

MILES FROM TOWN (ENTER IF IN TOWN)

8-14

DIRECTION FROM TOWN

☐ NORTH ☐ EAST ☐ NORTHEAST ☐ SE SOUTH, ETC.
☐ SOUTH ☐ WEST ☐ SOUTHWEST ☐ SW SOUTHWEST

NEAR WHAT ROAD

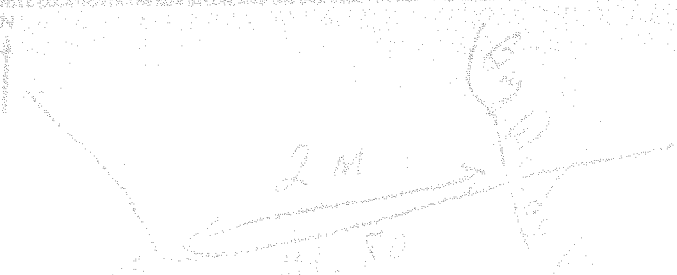
MD. 80

ON WHICH SIDE OF ROAD

MILES FROM TOWN

35 MI

DRAW A SKETCH OF THE LOCATION OF WELL IN RELATION TO NEAREST TOWN, ROAD OR RAILROAD WITH DIRECTION OF THE ROAD AND RAILROAD. SHOW THE ROAD OR RAILROAD ON EITHER SIDE OF THE WELL. ON THE OTHER SIDE OF THE ROAD OR RAILROAD, THE WELL LOCATION IS THE SAME AS THE ONE SHOWN ON THE MAP. THE WELL LOCATION IS THE SAME AS THE ONE SHOWN ON THE MAP.



DATE
1/16/71

LICENSE NUMBER
747

ARTHUR W. KEMMER, INC.

FIRST NAME

DRILLER

LAST NAME

SIGNATURE

WELL INFORMATION

8-15

MAXIMUM DEPTH OF WELL (FEET)

1,000

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)

USE FOR WATER WHICH APPROXIMATELY

☐ DOMESTIC, HOUSE, BATH, TO BATH, HOUSEHOLD USE ONLY
☐ AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MINERAL WATER QUANTITY
☐ PRIVATE WATER COMPANY
☐ TEST

APPROXIMATE DEPTH OF WELL

FEET

APPROXIMATE DIAMETER OF WELL

INCHES

REASON FOR DRILLING WELL (PLEASE PRINT)

☐ WATER FOR AGRICULTURE
☐ WATER FOR INDUSTRIAL USE
☐ WATER FOR DOMESTIC USE
☐ WATER FOR MINERAL USE
☐ WATER FOR TEST

REASON FOR DRILLING WELL (PLEASE PRINT)

REASON FOR DRILLING WELL (PLEASE PRINT)

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REASON FOR DRILLING WELL (PLEASE PRINT)

REASON FOR DRILLING WELL (PLEASE PRINT)

FOR

NUMBER

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NORTH

COORDINATE

747

EAST

COORDINATE

747

SECTION

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HEALTH DEPARTMENT APPROVAL

Frederick

COUNTY NAME

COUNTY NO

Robert Dickinson

APPROVED BY

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STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		DWR PERMIT NUMBER FR-72-0411 FILL IN THIS FORM COMPLETELY
1 2 3 (SEQ. NO.) 4 DATE RECEIVED (DWR USE ONLY)		
OWNER <u>Humble Oil & Refining Co.</u> FIRST NAME COL. 54		
STREET OR RFD <u>3601 Boston Street</u> COL. 55		
POST OFFICE <u>Baltimore Md.</u> COL. 73		
2-12		
B 1 CONTINUED 1 2 3 (SEQ. NO.) 4		B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 4
DATE <u>Jan 17 1972</u> LICENSE NUMBER <u>77</u> 80		COUNTY <u>Frederick</u> (DO NOT ABBREVIATE COUNTY NAME) 21
FIRST NAME <u>Robert L. Cline</u> DRILLER LAST NAME		SUBDIVISION <u>23</u> 42
SIGNATURE <u>Robert L. Cline</u>		SECTION <u>44</u> 46 LOT <u>42</u> 50
WELL INFORMATION 1 2 3 (SEQ. NO.) 4		NEAREST TOWN <u>Urbana</u> 53
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>10</u> 10		MILES FROM TOWN CENTER 0 IF IN TOWN <u>7</u> 75 76 77 78
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>2000</u> 10		B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 4
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT <input type="checkbox"/> MUNICIPAL WATER SUPPLY <input type="checkbox"/> PRIVATE WATER COMPANY <input type="checkbox"/> TEST		NEAR WHAT ROAD <u>Route 20</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH EAST WEST DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>100</u> 34 35 36
APPROXIMATE DEPTH OF WELL <u>200</u> FEET		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST TOWNS, ROADS AND STREAMS WITH NO. 1 IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW. ADD THE BOX NUMBER FROM THE WELL LOCATION MAP.
APPROXIMATE DIAMETER OF WELL <u>6</u> INCHES (NEAREST INCH)		N E S W BOX NUMBER
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (ON AUGER) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN <input type="checkbox"/> AIR-ROTOR <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC ROVER) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> PIPE-POLE <input type="checkbox"/>		1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND DELETED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STAGING <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER ON WELL TO BE REPLACED OR DEEPENED (IF APPLICABLE)		NORTH COORDINATE EAST COORDINATE ELEVATION AT WELL HEAD (FEET)
NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY) APPROPRIATION PERMIT NUMBER <u>FR72GAP009</u> ENGINEER REVIEW DISTRICT NO.		FORCE <input type="checkbox"/> WRITE INITIALS IN BOX CONDITIONS
B 4 CONTINUED 1 2 3 (SEQ. NO.) 4		HEALTH DEPARTMENT APPROVAL 1 2 3 (SEQ. NO.) 4
STATE HEALTH (CIRCLE BOX) NO. DAY YR. DATE		COUNTY NAME COUNTY NO.
APPROVED BY		SPECIAL CONDITIONS (DWR USE ONLY)
B 5 CONTINUED 1 2 3 (SEQ. NO.) 4		SURVEY

C 11-56313
 1-2-60
 (7-10) 10-10-60
 IN CORR 3-5 ON ALL LISTS
 DATE RECEIVED
 (7-10) 10-10-60
 DATE WILL COMPLETE
 1-2-60

22 196 284 251 6031 28

COMMIT NO. FROM "COMMIT TO THE WORLD"
 [Stamp: 1-12-1951-0001]
 25 26 27 28 29 30 31 32 33 34 35 36 37
 YNTREKATION NO. 139

WELL LOG

STATE THE KIND OF FORMATION PENETRATED, THEIR COLOR, TEXTURE, THE DEPTH AND IF WATER BEARING

DEPTH	FORMATION	WATER	REMARKS
0 TO 10	CLAY		
10 TO 20	CLAY		
20 TO 30	CLAY		
30 TO 40	CLAY		
40 TO 50	CLAY		
50 TO 60	CLAY		
60 TO 70	CLAY		
70 TO 80	CLAY		
80 TO 90	CLAY		
90 TO 100	CLAY		

DESCRIPTION **GROUTING RECORD**

WELL NAME **BRIDGE** DATE OF TEST **12-1-54**

(CITY OR LOCATION) **ATLANTA** COUNTY **DEKALB**

TYPE OF GROUTING MATERIAL **PORTLAND CEMENT**

CEMENT **100 M** ... AGENT/TYPE **CLAY**

TEST NO. **1** NO. **1**

DATE **12-1-54** NO. **1**

TESTER **SC**

PUMPING TEST

HOURS PUMPED TO NEAREST HOUR:

T. BROWN		
UPSTONE	0	50
DOWN SLATE	50	82 ✓

NO. OF BAGS 6 NO. OF SACKS 564
GALLONS OF WATER 6
DEPTH OF GROUT SEAL (IN HOLE) FEET 1

PUMPING RATE 100
WELLBORE PERMITS TO NEAREST GALLERY
METHODOLOGY USED TO ESTIMATE
MEASURE PUMPING RATE
WATER LEVEL: DISTANCE FROM LAND SURFACE

SECRET
REFLECTS PAPER SURFACE!
CIPHERS
FRODO
INSET
SYMBOLICALLY
CODE
RELON

PT. TO
80
98

CASING RELAY

S T
CYCL.

S O
SACRETS

S L
SACRED

S P
T R C S

17 82 20
 21 82 22
 TYPE OF PUMPED USED (CIRCLE APPROPRIATE) (SEE
 (A) (B) (C)
 23 24 25
 26 27 28

姓名: 王 强
 性别: 男
 年龄: 25
 职业: 教师
 籍贯: 山东烟台
 民族: 汉族
 婚姻状况: 已婚
 教育程度: 本科
 工作单位: 烟台市第一中学
 联系电话: 13812345678
 电子邮箱: wangqiang123@163.com
 身份证号: 370602199805151234

PUMP INSTALLED

OTHER ROOMS 1st 12000
2nd 12000
3rd 12000
4th 12000
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6th 12000
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100th 12000

[illegible][illegible][illegible]

1. 姓名: 李强
 2. 性别: 男
 3. 年龄: 25
 4. 职业: 教师
 5. 籍贯: 湖南长沙
 6. 民族: 汉族
 7. 婚姻状况: 已婚
 8. 教育程度: 本科
 9. 兴趣爱好: 阅读, 运动
 10. 特长: 写作, 演讲
 11. 座右铭: 天道酬勤
 12. 自我评价: 积极向上, 乐于助人
 13. 未来规划: 继续深造, 提升自我
 14. 其他信息: 无

[illegible]

EMERGENCY NO. (if any)

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLOOMING, ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

DWR PERMIT NUMBER

PR-13-0390
FILL IN THIS FORM COMPLETELY

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

DATE RECEIVED
(FOR USE ONLY)

OWNER Wilcom John FIRST NAME John COL. 34

100272

STREET OR RFD Rout 9 COL. 35

POST OFFICE Fredericks COL. 36

B-1 CONTINUED DRILLER INFORMATION

DATE Sept 27 72 LICENSE NUMBER 42
FIRST NAME L. J. Eastudy LAST NAME Eastudy
SIGNATURE L. J. Eastudy

B-2 WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ DOMESTIC, RESID (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ TEST

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 4 INCHES

METHOD OF DRILLING (CIRCLE APPROPRIATE METHOD)

SCOPE (TO SUPPORT) DRILLER DRIVER
30-30 DRILLER DRIVER
10-10 DRILLER DRIVER

REMARKS (IF ANY)

REPLACEMENT OR DRILLED WELLS

REPLACEMENT OR DRILLED WELLS

REPLACEMENT OR DRILLED WELLS

REPLACEMENT OR DRILLED WELLS

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REPLACEMENT OR DRILLED WELLS

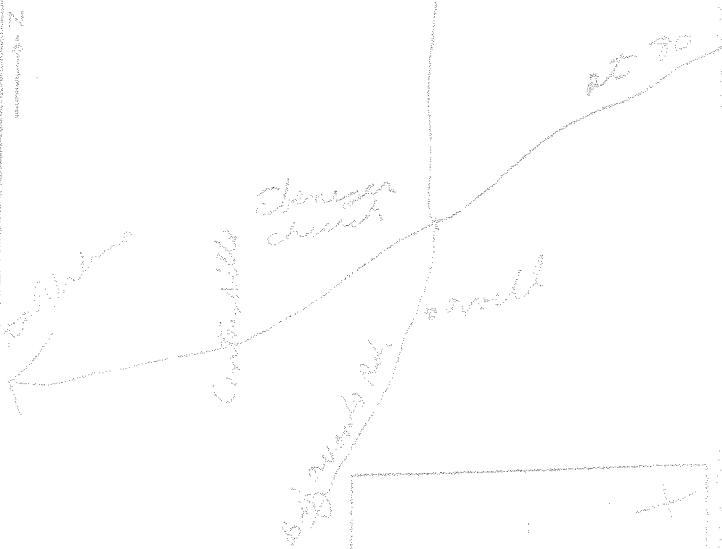
B-3 LOCATION OF WELL

COUNTY Fredericks
SUBDIVISION 23
SECTION 44 LOT 48
NEAREST TOWN Centerville
MILES FROM TOWN (ENTER 0 IF IN TOWN) 2

B-4 DIRECTION FROM TOWN

(CIRCLE APPROPRIATE BOX)
N NORTH E EAST NE NORTHEAST SE SOUTHEAST
S SOUTH W WEST NW NORTHWEST SW SOUTHWEST
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 500

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY ROADS, RIVERS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



B-4 CONTINUED HEALTH DEPARTMENT APPROVAL

DATE Oct 1 72 APPROVED P. H. Huppert

DATE Oct 1 72 APPROVED P. H. Huppert

DATE Oct 1 72 APPROVED P. H. Huppert

DATE Oct 1 72 APPROVED P. H. Huppert

DATE Oct 1 72 APPROVED P. H. Huppert

BOX NUMBER 705

BOX NUMBER 540

BOX NUMBER 540

BOX NUMBER 540

BOX NUMBER 540

BOX NUMBER 540

BOX NUMBER 540

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BOX NUMBER 540

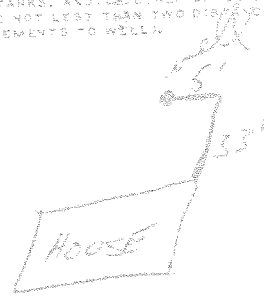
107-63

C 1 06975 (SEQ. NO.) (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-5 ON ALL CARDS)	SEQUENCE NO. OWNER USE ONLY	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 COUNTY NUMBER <u>22-357</u> PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>FR-13-0590</u> 28 29 30 31 32 33 34 35 36 37
DATE RECEIVED OWNER USE ONLY	DATE WELL COMPLETED <u>Oct. 12-78</u> <u>10/15/78</u>	DEPTH OF WELL <u>120</u> 22 (TO NEAREST FOOT) 25	DRILLERS IDENTIFICATION NO. <u>42</u>

OWNER LAST NAME <u>William</u> FIRST NAME <u>John</u>	STREET OR RFD <u>Rt. 2</u> POST OFFICE <u>Landover, Md.</u>
---	--

WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)</th> <th colspan="2">FEET</th> <th rowspan="2">CHECK IF WATER BEARING</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td><u>Topsoil</u></td> <td><u>0</u></td> <td><u>2</u></td> <td></td> </tr> <tr> <td><u>brn. slate</u></td> <td><u>2</u></td> <td><u>80</u></td> <td></td> </tr> <tr> <td><u>sh. slate</u></td> <td><u>80</u></td> <td><u>120</u></td> <td></td> </tr> </tbody> </table>	DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING	FROM	TO	<u>Topsoil</u>	<u>0</u>	<u>2</u>		<u>brn. slate</u>	<u>2</u>	<u>80</u>		<u>sh. slate</u>	<u>80</u>	<u>120</u>		GROUTING RECORD WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT <input checked="" type="checkbox"/> B BENTONITE CLAY <input type="checkbox"/> C NO. OF BAGS <u>5</u> NO. OF POUNDS <u>500</u> GALLONS OF WATER <u>30</u> DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM <u>0</u> FT. TO <u>19</u> FT. (ENTER 0 IF FROM SURFACE) CASING RECORD (INSERT APPROPRIATE CODE BELOW) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>STEEL</td> <td>CONCRETE</td> </tr> <tr> <td>PLASTIC</td> <td>OTHER</td> </tr> </table> MAIN CASING TYPE <u>ST</u> NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) <u>6</u> TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) <u>21</u> 60 61 63 64 66 70	STEEL	CONCRETE	PLASTIC	OTHER	PUMPING TEST HOURS PUMPED (TO NEAREST HOUR) <u>1</u> PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) <u>10</u> METHOD USED TO MEASURE PUMPING RATE <u>bucket</u> WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING <u>40</u> (NEAREST FOOT) WHEN PUMPING <u>120</u> (NEAREST FOOT) TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST) <input checked="" type="checkbox"/> AIR <input type="checkbox"/> PISTON <input type="checkbox"/> TURBINE <input type="checkbox"/> CENTRIFUGAL <input type="checkbox"/> ROTARY <input type="checkbox"/> OTHER (DESCRIBE BELOW) <input type="checkbox"/> JET <input type="checkbox"/> SUBMERSIBLE
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)		FEET			CHECK IF WATER BEARING																			
	FROM	TO																						
<u>Topsoil</u>	<u>0</u>	<u>2</u>																						
<u>brn. slate</u>	<u>2</u>	<u>80</u>																						
<u>sh. slate</u>	<u>80</u>	<u>120</u>																						
STEEL	CONCRETE																							
PLASTIC	OTHER																							

OTHER CASING (IF USED) DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____ SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>STEEL</td> <td>BRASS OR BRONZE</td> <td>OPEN HOLE</td> </tr> <tr> <td>PLASTIC</td> <td>OTHER</td> <td></td> </tr> </table>	STEEL	BRASS OR BRONZE	OPEN HOLE	PLASTIC	OTHER		SCREEN RECORD <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td><u>46</u></td> <td><u>27</u></td> <td><u>150</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td>67 25 25</td> <td>25 25 32</td> <td>38</td> <td></td> <td></td> <td></td> </tr> <tr> <td>38 23 41</td> <td>45 47</td> <td>51</td> <td></td> <td></td> <td></td> </tr> </table> SLOT SIZE 1: _____ 2: _____ 3: _____ DIAMETER OF SCREEN _____ (NEAREST INCH) FROM _____ TO _____ GRAVEL PACK _____ IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX <input type="checkbox"/> F	1	2	3	4	5	6	<u>46</u>	<u>27</u>	<u>150</u>				67 25 25	25 25 32	38				38 23 41	45 47	51				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) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) <u>31</u> <u>35</u> PUMP HORSE POWER <u>37</u> <u>41</u> PUMP COLUMN LENGTH (NEAREST FOOT) <u>43</u> <u>47</u> CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) <input type="checkbox"/> ABOVE <input checked="" type="checkbox"/> BELOW LAND SURFACE <u>2</u> (NEAREST FOOT) 45 50 51
STEEL	BRASS OR BRONZE	OPEN HOLE																														
PLASTIC	OTHER																															
1	2	3	4	5	6																											
<u>46</u>	<u>27</u>	<u>150</u>																														
67 25 25	25 25 32	38																														
38 23 41	45 47	51																														

CIRCLE APPROPRIATE BOXES <input type="checkbox"/> A WELL WAS REAMERED AND SEALED WHEN THIS WELL WAS COMPLETED <input type="checkbox"/> B ELECTRIC LOG OBTAINED <input type="checkbox"/> C TEST WELL CONVERTED TO PRODUCTION WELL I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED IN 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. DRILLER'S NAME <u>A. Bratton</u> PLEASE PRINT: <u>A. Bratton</u> SIGNATURE: <u>A. Bratton</u>	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LOTS, DITCHES AND INDICATE NOT LESS THAN TWO DISCRETE MEASUREMENTS TO WELL. 
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STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		FR-73-1210 FILL IN THIS FORM COMPLETELY	
B 1 0551 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)			
DATE RECEIVED (OWNER USE ONLY) 081578		OWNER <u>Peter Pan Inn</u> FIRST NAME COL. 54 COL. 15 LAST NAME	
STREET OR RFD <u>Route #2</u> COL. 36		POST OFFICE <u>Frederick</u> COL. 75	
B 13 CONTINUED 1 2 3 (SEQ. NO.) 5		DRILLER INFORMATION DATE <u>August 8</u> LICENSE NUMBER <u>139</u> COL. 77 COL. 60 <u>Robert L. Cline</u> FIRST NAME DRILLER LAST NAME SIGNATURE <u>Robert L. Cline</u>	
B 2 WELL INFORMATION 1 2 3 (SEQ. NO.) 5 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>20</u> COL. 8 COL. 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>6000</u> COL. 14 COL. 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING, AGRICULTURE, IRRIGATION <input checked="" type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> M MUNICIPAL WATER SUPPLY <input type="checkbox"/> P PRIVATE WATER COMPANY <input type="checkbox"/> T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL		B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 5 COUNTY <u>Frederick</u> COL. 6 COL. 21 SUBDIVISION <u>Urban</u> COL. 23 COL. 42 SECTION <u>44</u> COL. 44 COL. 46 LOT <u>48</u> COL. 50 NEAREST TOWN <u>Urban</u> COL. 52 COL. 71 MILES FROM TOWN (ENTER 0 IF IN TOWN) <u>0</u> COL. 73 COL. 75 77 78	
B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 5 <input checked="" type="checkbox"/> N NORTH <input checked="" type="checkbox"/> E EAST <input type="checkbox"/> NE NORTHEAST <input type="checkbox"/> SE SOUTHEAST <input type="checkbox"/> S SOUTH <input type="checkbox"/> W WEST <input type="checkbox"/> NW NORTHWEST <input type="checkbox"/> SW SOUTHWEST NEAR WHAT ROAD <u>MD 355</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>300</u> COL. 34 COL. 37 COL. 38 39		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET COL. 24 COL. 28 APPROXIMATE DIAMETER OF WELL <u>6</u> (NEAREST INCH) COL. 30 COL. 32		METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input checked="" type="checkbox"/> STARY (HYDRAULIC ROTARY) CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT OTHER (DESCRIBE) _____	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input checked="" type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		NOT TO BE FILLED IN BY DRILLER (OWNER USE ONLY) APPROPRIATION PERMIT NUMBER <u>FR 69 GAP 224</u> COL. 54 COL. 55 FORCE <u>CW</u> COL. 57 COL. 58 CONDITIONS <u>A</u> COL. 70 COL. 71 COL. 72 COL. 73 COL. 74 COL. 75 COL. 76 COL. 77 COL. 78	
B 4 CONTINUED 1 2 3 (SEQ. NO.) 5 DATE <u>081578</u> COL. 42 COL. 43 STATE HEALTH ENGINEER'S INITIALS <u>Carl Hargrave</u> COL. 44 COL. 45 COUNTY NAME <u>Frederick</u> COL. 46 COL. 47 COUNTY NO. <u>13917</u> COL. 48 COL. 49 APPROVED BY _____ COL. 50 COL. 51		BOX NUMBER <u>700</u> COL. 52 COL. 53 NORTH COORDINATE <u>5410000</u> COL. 54 COL. 55 COL. 56 COL. 57 COL. 58 COL. 59 EAST COORDINATE <u>0700000</u> COL. 60 COL. 61 COL. 62 COL. 63 COL. 64 COL. 65 ELEVATION AT WELL HEAD (FEET) <u>700</u> COL. 66 COL. 67 COL. 68 COL. 69 COL. 70 COL. 71	
B 5 SPECIAL CONDITIONS (OWNER USE ONLY) 1 2 3 (SEQ. NO.) 5		ORIGINAL CONDITIONS (OWNER USE ONLY) 1 2 3 (SEQ. NO.) 5	

ORIGINAL

ENTERED 1 09 42

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAMES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

WELL NO. 8856

DATE RECEIVED (OWNER USE ONLY)
09-19-73

DATE WELL COMPLETED
SEPT 6 1973

DEPTH OF WELL
320 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"
AR-73-1210

COUNTY NUMBER
139

DRILLER'S IDENTIFICATION NO. 139

OWNER PETER PAN INN

STREET OR RFD RT 2

POST OFFICE FIREDEKICK MD

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)

FEET FROM TO CHECK IF WATER BEARING

BROWN SHALE 0 15
BLUE SLATE 15 320 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)
☒ YES ☐ NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)
CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 5 NO. OF POUNDS 470

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
FROM 0 FT. TO 22 FT.

CASING RECORD

CASING TYPES
INSERT (CIRCLE APPROPRIATE CODE BELOW)
☒ S ☐ T ☐ C ☐ O
STEEL CONCRETE
☐ P ☐ L ☐ O ☐ T
PLASTIC OTHER

MAIN CASING TYPE S T NOMINAL DIAMETER TOP MAIN CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 23

OTHER CASING (IF USED)
DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW
☒ S ☐ T ☐ C ☐ O
STEEL BENTONITE OPEN HOLE
☐ P ☐ L ☐ O ☐ T
PLASTIC OTHER

WATER COLUMN

WATER LEVEL (FEET) FROM TO

WATER LEVEL (FEET) FROM TO

WATER LEVEL (FEET) FROM TO

WATER COLUMN

WATER LEVEL (FEET) FROM TO

WATER LEVEL (FEET) FROM TO

WATER LEVEL (FEET) FROM TO

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 12

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL (DISTANCE FROM LAND SURFACE)
BEFORE PUMPING 60 (NEAREST FOOT)
WHEN PUMPING 320 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
☒ A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ G ☐ H ☐ I ☐ J ☐ K ☐ L ☐ M ☐ N ☐ O ☐ P ☐ Q ☐ R ☐ S ☐ T ☐ U ☐ V ☐ W ☐ X ☐ Y ☐ Z ☐ AA ☐ AB ☐ AC ☐ AD ☐ AE ☐ AF ☐ AG ☐ AH ☐ AI ☐ AJ ☐ AK ☐ AL ☐ AM ☐ AN ☐ AO ☐ AP ☐ AQ ☐ AR ☐ AS ☐ AT ☐ AU ☐ AV ☐ AW ☐ AX ☐ AY ☐ AZ ☐ BA ☐ BB ☐ BC ☐ BD ☐ BE ☐ BF ☐ BG ☐ BH ☐ BI ☐ BJ ☐ BK ☐ BL ☐ BM ☐ BN ☐ BO ☐ BP ☐ BQ ☐ BR ☐ BS ☐ BT ☐ BU ☐ BV ☐ BW ☐ BX ☐ BY ☐ BZ ☐ CA ☐ CB ☐ CC ☐ CD ☐ CE ☐ CF ☐ CG ☐ CH ☐ CI ☐ CJ ☐ CK ☐ CL ☐ CM ☐ CN ☐ CO ☐ CP ☐ CQ ☐ CR ☐ CS ☐ CT ☐ CU ☐ CV ☐ CW ☐ CX ☐ CY ☐ CZ ☐ DA ☐ DB ☐ DC ☐ DD ☐ DE ☐ DF ☐ DG ☐ DH ☐ DI ☐ DJ ☐ DK ☐ DL ☐ DM ☐ DN ☐ DO ☐ DP ☐ DQ ☐ DR ☐ DS ☐ DT ☐ DU ☐ DV ☐ DW ☐ DX ☐ DY ☐ DZ ☐ EA ☐ EB ☐ EC ☐ ED ☐ EE ☐ EF ☐ EG ☐ EH ☐ EI ☐ EJ ☐ EK ☐ EL ☐ EM ☐ EN ☐ EO ☐ EP ☐ EQ ☐ ER ☐ ES ☐ ET ☐ EU ☐ EV ☐ EW ☐ EX ☐ EY ☐ EZ ☐ FA ☐ FB ☐ FC ☐ FD ☐ FE ☐ FF ☐ FG ☐ FH ☐ FI ☐ FJ ☐ FK ☐ FL ☐ FM ☐ FN ☐ FO ☐ FP ☐ FQ ☐ FR ☐ FS ☐ FT ☐ FU ☐ FV ☐ FW ☐ FX ☐ FY ☐ FZ ☐ GA ☐ GB ☐ GC ☐ GD ☐ GE ☐ GF ☐ GG ☐ GH ☐ GI ☐ GJ ☐ GK ☐ GL ☐ GM ☐ GN ☐ GO ☐ GP ☐ GQ ☐ GR ☐ GS ☐ GT ☐ GU ☐ GV ☐ GW ☐ GX ☐ GY ☐ GZ ☐ HA ☐ HB ☐ HC ☐ HD ☐ HE ☐ HF ☐ HG ☐ HH ☐ HI ☐ HJ ☐ HK ☐ HL ☐ HM ☐ HN ☐ HO ☐ HP ☐ HQ ☐ HR ☐ HS ☐ HT ☐ HU ☐ HV ☐ HW ☐ HX ☐ HY ☐ HZ ☐ IA ☐ IB ☐ IC ☐ ID ☐ IE ☐ IF ☐ IG ☐ IH ☐ II ☐ IJ ☐ IK ☐ IL ☐ IM ☐ IN ☐ IO ☐ IP ☐ IQ ☐ IR ☐ IS ☐ IT ☐ IU ☐ IV ☐ IW ☐ IX ☐ IY ☐ IZ ☐ JA ☐ JB ☐ JC ☐ JD ☐ JE ☐ JF ☐ JG ☐ JH ☐ JI ☐ JJ ☐ JK ☐ JL ☐ JM ☐ JN ☐ JO ☐ JP ☐ JQ ☐ JR ☐ JS ☐ JT ☐ JU ☐ JV ☐ JW ☐ JX ☐ JY ☐ JZ ☐ KA ☐ KB ☐ KC ☐ KD ☐ KE ☐ KF ☐ KG ☐ KH ☐ KI ☐ KJ ☐ KK ☐ KL ☐ KM ☐ KN ☐ KO ☐ KP ☐ KQ ☐ KR ☐ KS ☐ KT ☐ KU ☐ KV ☐ KW ☐ KX ☐ KY ☐ KZ ☐ LA ☐ LB ☐ LC ☐ LD ☐ LE ☐ LF ☐ LG ☐ LH ☐ LI ☐ LJ ☐ LK ☐ LL ☐ LM ☐ LN ☐ LO ☐ LP ☐ LQ ☐ LR ☐ LS ☐ LT ☐ LU ☐ LV ☐ LW ☐ LX ☐ LY ☐ LZ ☐ MA ☐ MB ☐ MC ☐ MD ☐ ME ☐ MF ☐ MG ☐ MH ☐ MI ☐ MJ ☐ MK ☐ ML ☐ MM ☐ MN ☐ MO ☐ MP ☐ MQ ☐ MR ☐ MS ☐ MT ☐ MU ☐ MV ☐ MW ☐ MX ☐ MY ☐ MZ ☐ NA ☐ NB ☐ NC ☐ ND ☐ NE ☐ NF ☐ NG ☐ NH ☐ NI ☐ NJ ☐ NK ☐ NL ☐ NM ☐ NN ☐ NO ☐ NP ☐ NQ ☐ NR ☐ NS ☐ NT ☐ NU ☐ NV ☐ NW ☐ NX ☐ NY ☐ NZ ☐ OA ☐ OB ☐ OC ☐ OD ☐ OE ☐ OF ☐ OG ☐ OH ☐ OI ☐ OJ ☐ OK ☐ OL ☐ OM ☐ ON ☐ OO ☐ OP ☐ OQ ☐ OR ☐ OS ☐ OT ☐ OU ☐ OV ☐ OW ☐ OX ☐ OY ☐ OZ ☐ PA ☐ PB ☐ PC ☐ PD ☐ PE ☐ PF ☐ PG ☐ PH ☐ PI ☐ PJ ☐ PK ☐ PL ☐ PM ☐ PN ☐ PO ☐ PP ☐ PQ ☐ PR ☐ PS ☐ PT ☐ PU ☐ PV ☐ PW ☐ PX ☐ PY ☐ PZ ☐ QA ☐ QB ☐ QC ☐ QD ☐ QE ☐ QF ☐ QG ☐ QH ☐ QI ☐ QJ ☐ QK ☐ QL ☐ QM ☐ QN ☐ QO ☐ QP ☐ QQ ☐ QR ☐ QS ☐ QT ☐ QU ☐ QV ☐ QW ☐ QX ☐ QY ☐ QZ ☐ RA ☐ RB ☐ RC ☐ RD ☐ RE ☐ RF ☐ RG ☐ RH ☐ RI ☐ RJ ☐ RK ☐ RL ☐ RM ☐ RN ☐ RO ☐ RP ☐ RQ ☐ RR ☐ RS ☐ RT ☐ RU ☐ RV ☐ RW ☐ RX ☐ RY ☐ RZ ☐ SA ☐ SB ☐ SC ☐ SD ☐ SE ☐ SF ☐ SG ☐ SH ☐ SI ☐ SJ ☐ SK ☐ SL ☐ SM ☐ SN ☐ SO ☐ SP ☐ SQ ☐ SR ☐ SS ☐ ST ☐ SU ☐ SV ☐ SW ☐ SX ☐ SY ☐ SZ ☐ TA ☐ TB ☐ TC ☐ TD ☐ TE ☐ TF ☐ TG ☐ TH ☐ TI ☐ TJ ☐ TK ☐ TL ☐ TM ☐ TN ☐ TO ☐ TP ☐ TQ ☐ TR ☐ TS ☐ TU ☐ TV ☐ TW ☐ TX ☐ TY ☐ TZ ☐ UA ☐ UB ☐ UC ☐ UD ☐ UE ☐ UF ☐ UG ☐ UH ☐ UI ☐ UJ ☐ UK ☐ UL ☐ UM ☐ UN ☐ UO ☐ UP ☐ UQ ☐ UR ☐ US ☐ UT ☐ UU ☐ UV ☐ UW ☐ UX ☐ UY ☐ UZ ☐ VA ☐ VB ☐ VC ☐ VD ☐ VE ☐ VF ☐ VG ☐ VH ☐ VI ☐ VJ ☐ VK ☐ VL ☐ VM ☐ VN ☐ VO ☐ VP ☐ VQ ☐ VR ☐ VS ☐ VT ☐ VU ☐ VV ☐ VW ☐ VX ☐ VY ☐ VZ ☐ WA ☐ WB ☐ WC ☐ WD ☐ WE ☐ WF ☐ WG ☐ WH ☐ WI ☐ WJ ☐ WK ☐ WL ☐ WM ☐ WN ☐ WO ☐ WP ☐ WQ ☐ WR ☐ WS ☐ WT ☐ WU ☐ WV ☐ WW ☐ WX ☐ WY ☐ WZ ☐ XA ☐ XB ☐ XC ☐ XD ☐ XE ☐ XF ☐ XG ☐ XH ☐ XI ☐ XJ ☐ XK ☐ XL ☐ XM ☐ XN ☐ XO ☐ XP ☐ XQ ☐ XR ☐ XS ☐ XT ☐ XU ☐ XV ☐ XW ☐ XX ☐ XY ☐ XZ ☐ YA ☐ YB ☐ YC ☐ YD ☐ YE ☐ YF ☐ YG ☐ YH ☐ YI ☐ YJ ☐ YK ☐ YL ☐ YM ☐ YN ☐ YO ☐ YP ☐ YQ ☐ YR ☐ YS ☐ YT ☐ YU ☐ YV ☐ YW ☐ YX ☐ YY ☐ YZ ☐ ZA ☐ ZB ☐ ZC ☐ ZD ☐ ZE ☐ ZF ☐ ZG ☐ ZH ☐ ZI ☐ ZJ ☐ ZK ☐ ZL ☐ ZM ☐ ZN ☐ ZO ☐ ZP ☐ ZQ ☐ ZR ☐ ZS ☐ ZT ☐ ZU ☐ ZV ☐ ZW ☐ ZX ☐ ZY ☐ ZZ

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 ☐ NO

CAPACITY:
GALLONS PER MINUTE (TO NEAREST GALLON) 12

PUMP HORSE POWER 1

PUMP COLUMN LENGTH (NEAREST FOOT) 43

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
☒ ABOVE ☐ BELOW 1 (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANK, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL.

PETER PAN INN

280

15

MD RT 355

CIRCLE APPROPRIATE BOXES

☐ A WELL HAS ABANDONED AND CANCELED WHEN THIS WELL WAS COMPLETED

☐ B EXCESS LOGS OBTAINED

☐ C WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CANCELLED 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.

DRILLER'S NAME ROBERT CLINE

ADDRESS 101st Cline

ORIGINAL

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BUILDING
ANNAPOLIS, MARYLAND 21401

PERMIT TO DRILL WELL

ISSUE DATE- 10/17/73
MO DA YR

* PERMIT NUMBER- FR-73-1414 *

ISSUED TO DRILLER-

KEYSER, AUSTIN R INC
RFD 7
FREDERICK MD 21701

DRILLER
ID. NUMBER- 144

THE ABOVE NAMED DRILLER IS HEREBY AUTHORIZED TO DRILL A WELL
TO BE OWNED BY-

TOWNES, FRANK
RT 2
FREDERICK

THIS WELL IS TO BE LOCATED IN FREDERICK COUNTY,
NEAR THE TOWN OF REELS MILL

THE WATER IS TO BE USED FOR A DOMESTIC SUPPLY.

THIS WELL WILL REPLACE A WELL WHICH WILL BE ABANDONED & SEALED.

SPECIAL CONDITIONS

THIS PERMIT IS SUBJECT TO THE FOLLOWING SPECIAL CONDITIONS-
NONE.

THIS PERMIT IS VALID UNTIL
04/17/74. A WELL COMPLETION
REPORT MUST BE SUBMITTED TO
THE DEPARTMENT WITHIN 30 DAYS
AFTER COMPLETION OF THE WELL

PAUL W. MCKEE
DIRECTOR, MARYLAND
DEPARTMENT OF WATER
RESOURCES

CANCELLED

7-3-74 ENTERED 111 64 !

ORIGINAL

ENTERED 109 94

DWR COPY
STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BUILDING
ANNAPOLIS, MARYLAND 21401

PERMIT TO DRILL WELL

ISSUE DATE- 11/05/73
MO DA YR

* PERMIT NUMBER- FR-73-1475 *

ISSUED TO DRILLER-

KEYSER, AUSTIN R INC
RFD 7
FREDERICK MD 21701

DRILLER
IC. NUMBER- 144

THE ABOVE NAMED DRILLER IS HEREBY AUTHORIZED TO DRILL A WELL
TO BE OWNED BY-

DAVIS, PETER A
P O BX 1080
SPRINGFIELD VA

THIS WELL IS TO BE LOCATED IN FREDERICK COUNTY,
NEAR THE TOWN OF URBANA

THE WATER IS TO BE USED FOR TEST PURPOSES.

THIS WELL WILL NOT REPLACE ANOTHER WELL.

****SPECIAL CONDITIONS****

THIS PERMIT IS SUBJECT TO THE FOLLOWING SPECIAL CONDITIONS-

1. DEPARTMENT REPRESENTATIVES SHALL HAVE ACCESS TO THE WELL TO
CONDUCT SCIENTIFIC TESTS AND MEASUREMENTS DURING DRILLING.
2. WELL MUST BE LEASED OR CONVERTED TO PRODUCTION STATUS

THIS PERMIT IS VALID UNTIL
05/05/74. A WELL COMPLETION
REPORT MUST BE SUBMITTED TO
THE DEPARTMENT WITHIN 30 DAYS
AFTER COMPLETION OF THE WELL

PAUL W. MCKEE
DIRECTOR, MARYLAND
DEPARTMENT OF WATER
RESOURCES

CANCELLED
ENTERED 112 16

8-6 74

DWR COPY

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		DWR PERMIT NUMBER FR-73-1495 FILL IN THIS FORM COMPLETELY
B 1 9669 (SEQ. NO.) 6 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 5-6 ON ALL CARDS)</small>		
DATE RECEIVED (DWR USE ONLY): 110178		
OWNER: DAVIS, PETER A FIRST NAME COL. 34 COL. 13 LAST NAME STREET OR RFD: P.O. Box 1080 COL. 55 COL. 36 POST OFFICE: SPRINGFIELD, VA COL. 75 COL. 57		
B 1 CONTINUED (SEQ. NO.) 6 DRILLER INFORMATION DATE: 8-9-73 LICENSE NUMBER: 144 AUSTIN R KEYSER INC DRILLER LAST NAME SIGNATURE: <i>Austin R Keyser</i>		
B 2 (SEQ. NO.) 6 WELL INFORMATION MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL <input type="checkbox"/> PRIVATE WATER COMPANY <input checked="" type="checkbox"/> TEST		
APPROXIMATE DEPTH OF WELL: 300 FEET APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH) METHOD OF DRILLING USED (CIRCLE / APPROPRIATE METHOD) BORED (OR AUGERED) JETTED DRIVEN 30-37 AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) CABLE REVERSE-ROTARY DRIVE-POINT OTHER (DESCRIBE):		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND CEASED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):		
NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY) APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 65 FORCE: <input checked="" type="checkbox"/> WRITE INITIALS IN BOX CONDITIONS: A S B 4 CONTINUED (SEQ. NO.) 6 HEALTH DEPARTMENT APPROVAL: 493 STATE HEALTH (CIRCLE BOX) 33-967 DATE: 4/17/73 APPROVED BY: <i>D. Russell King</i> SPECIAL CONDITIONS (DWR USE ONLY):		
B 3 (SEQ. NO.) 6 LOCATION OF WELL COUNTY: FREDERICK (DO NOT ABBREVIATE COUNTY NAME) 21 SUBDIVISION: 23 42 SECTION: 44 LOT: 48 60 NEAREST TOWN: URBANA 71 MILES FROM TOWN (ENTER 0 IF IN TOWN): 1/2 76 77 78 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) N NORTH E EAST N E NORTHEAST S E SOUTHEAST S SOUTH W WEST N W NORTHWEST S W SOUTHWEST NEAR WHAT ROAD: RT 806 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 100 37 38 39 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.		
BOX NUMBER: 690 NORTH COORDINATE: 515002 EAST COORDINATE: 0695000 ELEVATION AT WELL HEAD (FEET): 45 66 67 68 ENTERED: 102 94		

ORIGINAL

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401		WRA PERMIT NUMBER FR-73-1739
APPLICATION FOR PERMIT TO DRILL WELL (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-5 ON ALL CARDS)		FILL IN THIS FORM COMPLETELY
DATE RECEIVED (WRA USE ONLY) 0 3 2 2 7 0		OWNER FLINTKOPF Co + M. J. GROVE LINE Co Division COL 15 LAST NAME
STREET OR RFD LINE KILN, MARYLAND COL 36		FIRST NAME COL 55
POST OFFICE LINE KILN, MARYLAND COL 57		COL 76
B 1 CONTINUED 1 2 3 (SEQ. NO.) 5 DATE 3-21-74 LICENSE NUMBER 144 KEYER-CARVER Well Drilling Inc. FIRST NAME DRILLER LAST NAME SIGNATURE Charles T. Carver		B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 5 COUNTY FREDERICK (DO NOT ABBREVIATE COUNTY NAME) SUBDIVISION SECTION LOT NEAREST TOWN REELS MILL MILES FROM TOWN (ENTER 0 IF IN TOWN) 1
B 2 WELL INFORMATION 1 2 3 (SEQ. NO.) 5 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 150 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 45000 USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION <input checked="" type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> MUNICIPAL WATER SUPPLY <input type="checkbox"/> PRIVATE WATER COMPANY <input type="checkbox"/> TEST MUST HAVE STATE HEALTH DEPT. APPROVAL		B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 5 N NORTH E EAST NE NORTHEAST SE SOUTHEAST S SOUTH W WEST NW NORTHWEST SW SOUTHWEST NEAR WHAT ROAD BALL ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N NORTH S SOUTH E EAST W WEST DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 500
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH) METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN 30-57 AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input checked="" type="checkbox"/> ROTARY (HYDRAULIC ROTARY) CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT OTHER (DESCRIBE)		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW. AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)		SKETCH: A hand-drawn map showing a road labeled "BALL RD" and a location labeled "REELS MILL". A north arrow points upwards. A box labeled "a well" is marked on the map.
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER FRTAGAP10117 ENGINEER REVIEW DISTRICT NO. FORCE CIC WRITE INITIALS IN BOX CONDITIONS 1 NO		BOX NUMBER 700 550
B 4 CONTINUED 1 2 3 (SEQ. NO.) 5 HEALTH DEPARTMENT APPROVAL STATE HEALTH (CIRCLE BOX) DATE 0 7 2 4 APPROVED BY D. Russell Henry		NORTH COORDINATE 5500000 EAST COORDINATE 0700000 ELEVATION AT WELL HEAD (FEET)
B 5 SPECIAL CONDITIONS (WRA USE ONLY) 1 2 3 (SEQ. NO.) 5		X

ENTRUSTED 1 10 77

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 74-169

PERMIT NO. FROM "PERMIT TO DRILL WELL"

FR-53-11539

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 144

C 1 2936
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

DATE RECEIVED (WPA USE ONLY)

080074

B-13

4/17/74
DATE WELL COMPLETED

04/17/74

DEPTH OF WELL

300

22 (TO NEAREST FOOT) 26

OWNER FLINKHOFF CO + M.J. GROHE LIME CO.

LAST NAME

FIRST NAME

LIME KILN, MD

STREET OR RFD

POST OFFICE

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)

FEET FROM TO

CHECK IF WATER BEARING

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES

NO

Y

N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT

CM

BENTONITE CLAY

BC

45 46

45 46

NO. OF BAGS 8 NO. OF POUNDS 800

GALLONS OF WATER 40

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 26 FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL

CONCRETE

ST

CO

PLASTIC

OTHER

PL

OT

MAIN CASING TYPE

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

ST

6

26

50 61 52 63 54 65 56 67 58 69 60 70

OTHER CASING (IF USED)

DIAMETER (INCH)

DEPTH (FEET)

FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL

BRASS OR BRONZE

OPEN HOLE

ST

SP

HO

PLASTIC

OTHER

PL

OT

C 2

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)

FROM

40

26

300

11 12 13 14 15 16 17 18 19 20 21

22 23 24 25 26 27 28 29 30 31 32

33 34 35 36 37 38 39 40 41 42 43

44 45 46 47 48 49 50 51 52 53 54

55 56 57 58 59 60 61 62 63 64 65

66 67 68 69 70 71 72 73 74 75 76

77 78 79 80 81 82 83 84 85 86 87

88 89 90 91 92 93 94 95 96 97 98

99 100

LOT SIZE 1. 2. 3.

DIAMETER OF SCREEN 30 IN. (NEAREST INCH)

FROM

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

58

F

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

T

(S.R.O.S.)

W O

70

72

74 75 76

TALL SCOT CATING

LOG INDICATOR

OTHER DATA AVAILABLE

CIRCLE APPROPRIATE BOXES

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 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.

DRILLER'S NAME

KEYSER-CARVER

(PLEASE PRINT) WELL DRILLING INC.

SIGNATURE Dr. J. H. Carver

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

NO

Y

N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

3

35

PUMP HORSE POWER

37

41

PUMP COLUMN LENGTH (NEAREST FOOT)

43

47

CASING HEIGHT

(CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE

LAND SURFACE

- BELOW

2

NEAREST FOOT

LOCATION OF WELL ON LOT

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

creek
150'
well
300'
Bath house
Park Drive

ORIGINAL

B 1	7653	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL	FR-73-1930 FILL IN THIS FORM COMPLETELY
-----	------	--------------------------------	--	--

DATE RECEIVED (WRA USE ONLY)	OWNER COL 15 LAST NAME	PETER PAN INN	FIRST NAME	COL 34
	STREET OR RFD	Route 2		COL 35
	POST OFFICE	Frederick, Md.		COL 76

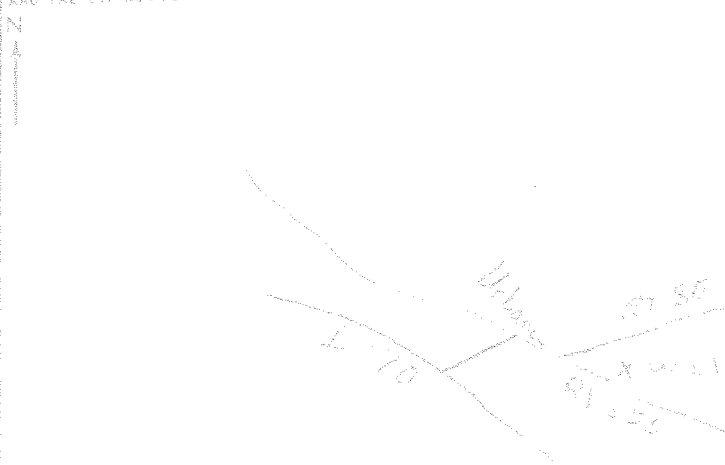
B 1 CONTINUED DRILLER INFORMATION				
DATE	May 23, 1974	LICENSE NUMBER	139	COL 77
FIRST NAME	Robert L. Cline	DRILLER	LAST NAME	
SIGNATURE	Robert L. Cline			

B 3 LOCATION OF WELL				
COUNTY	Frederick	COL 21	(DO NOT ABBREVIATE COUNTY NAME)	
SUBDIVISION		COL 42		
SECTION		COL 44	LOT	COL 48
NEAREST TOWN	Urban	COL 52	COL 71	
MILES FROM TOWN (ENTER 0 IF IN TOWN)	0	COL 73	COL 77 78	

B 2 WELL INFORMATION				
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)	20	COL 12		
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)	6000	COL 16	COL 20	
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION <input checked="" type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> MUNICIPAL WATER SUPPLY <input type="checkbox"/> PRIVATE WATER COMPANY <input type="checkbox"/> TEST				
APPROXIMATE DEPTH OF WELL				
300 FEET				
APPROXIMATE DIAMETER OF WELL				
6 INCHES				
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)				
<input checked="" type="checkbox"/> BORING (OR AUGER) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN <input type="checkbox"/> AIRLIFT <input checked="" type="checkbox"/> AIRLIFT/ROTARY <input type="checkbox"/> ROTARY (HYDRAULIC ROTARY) <input type="checkbox"/> CABLE <input type="checkbox"/> TRIP-ROD/ROTARY <input type="checkbox"/> GRINDER/DRILL OTHER (DESCRIBE):				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL. <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED FOR A STANDBY <input type="checkbox"/> THIS WELL WILL OCCUPY AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):				

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)				
NORTH	EAST	NE NORTHEAST	SE SOUTHEAST	COL 21
SOUTH	WEST	NW NORTHWEST	SW SOUTHWEST	COL 42
NEAR WHAT ROAD				
Route 355				
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> NORTH <input type="checkbox"/> SOUTH <input type="checkbox"/> EAST <input type="checkbox"/> WEST <input type="checkbox"/> COL 32 <input type="checkbox"/> COL 32 <input type="checkbox"/> COL 32 <input type="checkbox"/> COL 32				
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)				
200 FEET				

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)				
APPROPRIATION PERMIT NUMBER	FR 69630 0224	ENGINEER REVIEW DISTRICT NO.	42	COL 42
WDRP	WRITE INITIALS IN BOX	CONDITIONS	WQ	COL 77 78 79

HEALTH DEPARTMENT APPROVAL				
DATE	052274	COUNTY NAME	Frederick	COUNTY NO.
				74-372

BOX NUMBER	700	COL 50	540	COL 54
NORTH COORDINATE	5700000	COL 50	5700000	COL 54
EAST COORDINATE	0700000	COL 57	0700000	COL 61
ELEVATION AT WELL HEAD (FEET)	45 56 67 68	COL 65	67 68	COL 70

B 5 SPECIAL CONDITIONS (WRA USE ONLY)				
1	2	3	4	5

ORIGINAL

ENTERED 111 22

C 11 5168

SEQUENCE NO. (INKA USE ONLY)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

THIS NUMBER IS TO BE FURNISHED IN COPIES 3-5 ON ALL CARDS

DATE RECEIVED (INKA USE ONLY)

061074

MAY 30 1974

DATE WELL COMPLETED

DEPTH OF WELL

300

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"

FR-73-11930

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

139

OWNER

LAST NAME

PETER PAN INN

FIRST NAME

FREDERICK MD

STREET OR RPO

RT 2

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	TO	CHECK # VIA T.M. BEARING
BROWN SHALE	0	15	
GREENSLATE	15	300	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 5 NO. OF POUNDS 470

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 23 FT.

(ENTER 0 IF FROM SURFACE)

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)

ST 6 24

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

SCREEN TYPE OR OPEN HOLE (CIRCLE APPROPRIATE BOX)

STEEL ☒ BRASS ☐ OPEN HOLE ☐
PLASTIC ☐ OTHER ☐

SCREEN TYPE OR OPEN HOLE (CIRCLE APPROPRIATE BOX)

STEEL ☒ BRASS ☐ OPEN HOLE ☐
PLASTIC ☐ OTHER ☐

C 21

DEPTH (NEAREST WHOLE FOOT)

1 11 23 300

2 23 25 26 30 32 36

3 38 39 41 42 47 51

SLOT SIZE 1. 2. 3.

DIAMETER OF SCREEN (NEAREST INCH)

FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

YES ☐ NO ☒

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

78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99

TELESCOPE CASING LOG INDICATOR

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR)

1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON)

30

METHOD USED TO MEASURE PUMPING RATE

TIME

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 40

WHEN PUMPING 300

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A AIR ☒ B 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, R, P, S, T, J, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

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))

MD RT 2

104 73

104 73

104 73

104 73

104 73

104 73

104 73

104 73

104 73

104 73

CIRCLE APPROPRIATE BOXES

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

E ELECTRIC LOG OBTAINED

D TEST WELL CONVERTED TO PRODUCTION WELL

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.

DRILLER'S NAME

ROBERT CHINE

SIGNATURE

Robert China

EMERGENCY NO. 1-800-752-1234

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401

WRA PERMIT NUMBER
FR-73-2027

88880
SEQUENCE NO. (WRA USE ONLY)

THIS NUMBER IS TO BE PUNCHED IN COLUMNS ON ALL CARDS

DATE RECEIVED (WRA USE ONLY)

OWNER: Thompson Frank
COL 15 LAST NAME

FIRST NAME COL. 34

STREET OR RD. COL 26
Liamsville, Md.

POST OFFICE COL 57

DRILLER INFORMATION

DATE: 7-8-74
LICENSE NUMBER: 42
77 80

FIRST NAME: [Signature]
LAST NAME: [Signature]

SIGNATURE: [Signature]

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5
6 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 200
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

☐ FARMING, AGRICULTURE, IRRIGATION

☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT

☐ MUNICIPAL WATER SUPPLY

☐ PRIVATE WATER COMPANY

☐ TEST

MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL: 200
24 28 FEET

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

RODERS (DR. AUGER): ☒ JETTER ☐ DRIVEN

AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY)

CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT

OTHER (DESCRIBE):

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL

☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AT ONCE

☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

☐ THIS WELL WILL DEEPEN AN EXISTING WELL

DEPT. NO. OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE):

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

APPROPRIATION PERMIT NUMBER: [Blank]

ENGINEER REVIEW DISTRICT NO.: [Blank]

WELL NUMBER: 700
540

BOX NUMBER: 700
540

WELL COORDINATES: NORTH 450000
EAST 470000

ELEVATION AT WELL HEAD (FEET): 50 51 52 53 54 55

HEALTH DEPARTMENT APPROVAL

DATE: 7-8-74
STATE HEALTH DEPT. NO.: 74-496
COUNTY NAME: [Blank]

WRA USE ONLY

ORIGINAL ENTERED 111 48

C 1 6848

SEQUENCE NO.
(WRA USE ONLY)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE-OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION.

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBERDATE RECEIVED
(WRA USE ONLY)

191074

DEPTH OF WELL

7 29-74 85

PERMIT NO. FROM "PERMIT TO DRILL WELL"

AR-713-2027

28 29 30 31 32 33 34 35 36 37

072954

DRILLERS IDENTIFICATION NO.

42

OWNER Thompson Frank

FIRST NAME

STREET OR RFD IjamsvillePOST OFFICE Ijamsville Md.

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM TO	CHECK IF WATER BEARING
Top Soil	0 1	
Shale	1 5	
Slate	5 85	

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)
☒ Y ☐ N
24 25

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

☒ CEMENT ☐ BENTONITE CLAY
45 46 45 46
NO. OF BAGS 5 NO. OF POUNDS 500GALLONS OF WATER 25

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM	FT.	TO	FT.
0	52	19	58

CASING RECORD

☐ INSERT
APPROPRIATE
CODE
BELOW

<input checked="" type="checkbox"/> S T	<input type="checkbox"/> C O
STEEL	CONCRETE
<input type="checkbox"/> P L	<input type="checkbox"/> O T
PLASTIC	OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN CASING INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
<input checked="" type="checkbox"/> S T	<u>6</u>	<u>21</u>

OTHER CASING (IF USED)

DIA.	INCH	DEPTH (FEET)	FROM TO

SCREEN RECORD

☐ INSERT
APPROPRIATE
CODE
BELOW

<input checked="" type="checkbox"/> S T	<input type="checkbox"/> B R	<input type="checkbox"/> U O
STEEL	BRASS	OPEN HOLE
<input type="checkbox"/> P L	<input type="checkbox"/> O T	
PLASTIC	OTHER	

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20

DEPTH (NEAREST WHOLE FOOT)

1	2	3	4	5	6	7	8	9	10
21	22	23	24	25	26	27	28	29	30

DIA. OF SCREEN 5 INCHESGRAVEL PACK 5 INCHESIF WELL DRILLED WAS A FLOWING WELL, CIRCLE BOX ☐

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

<input type="checkbox"/> TELEPHONE CABLES	<input type="checkbox"/> LOG INDICATOR	<input type="checkbox"/> OTHER DATA AVAILABLE
---	--	---

C 3

1 2 3 (SEQ. NO.) 4

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 3METHOD USED TO MEASURE PUMPING RATE POCKET

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 70 (NEAREST FOOT)WHEN PUMPING 85 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

<input checked="" type="checkbox"/> A AIR	<input type="checkbox"/> P PISTON	<input type="checkbox"/> T TURBINE
<input type="checkbox"/> C CENTRIFUGAL	<input type="checkbox"/> R ROTARY	<input type="checkbox"/> O OTHER (DESCRIBE BELOW)
<input type="checkbox"/> J JET	<input type="checkbox"/> S SUBMERSIBLE	

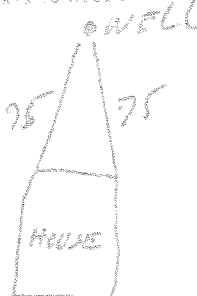
PUMP INSTALLED

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) ☐CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31PUMP HORSE POWER 37PUMP COLUMN LENGTH (NEAREST FOOT) 22

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

<input checked="" type="checkbox"/> ABOVE	LAND SURFACE	NEAREST FOOT
<input type="checkbox"/> BELOW	<u>2</u>	

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

CIRCLE APPROPRIATE BOXES

☐ WELL WAS ABANDONED AND DELETED FROM THE WELL LOG

☐ WELL WAS DELETED FROM THE WELL LOG

☐ WELL WAS CONVERTED TO PRODUCTION WELL

WHEREBY I CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS OF THE ANNEAPOLIS "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.

DRILLER'S NAME

DATE

SIGNATURE

ORIGINAL

6020
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
 APPLICATION FOR PERMIT TO DRILL WELL

FR-73-2206
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
 OWNER: COL 15 LAST NAME Wilkins FIRST NAME John COL. 34
 STREET OR RFD: COL 35 Rt 2 COL. 55
 POST OFFICE: COL 57 Frederick Md. COL. 78

8-13
 B 1 CONTINUED
 1 2 3 (SEQ. NO.) 6
 DATE: Sept 3 '74 LICENSE NUMBER: 42 COL. 60
 FIRST NAME: L. F. Eastwood LAST NAME: L. F. Eastwood
 SIGNATURE: L. F. Eastwood

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 COL. 12
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 600 COL. 20
 USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
☐ MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
☐ PRIVATE WATER COMPANY
☐ TEST

APPROXIMATE DEPTH OF WELL: 150 FEET
 APPROXIMATE DIAMETER OF WELL: 6" (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGURED): JETTED DRIVEN
 20-27 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE):
 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 DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

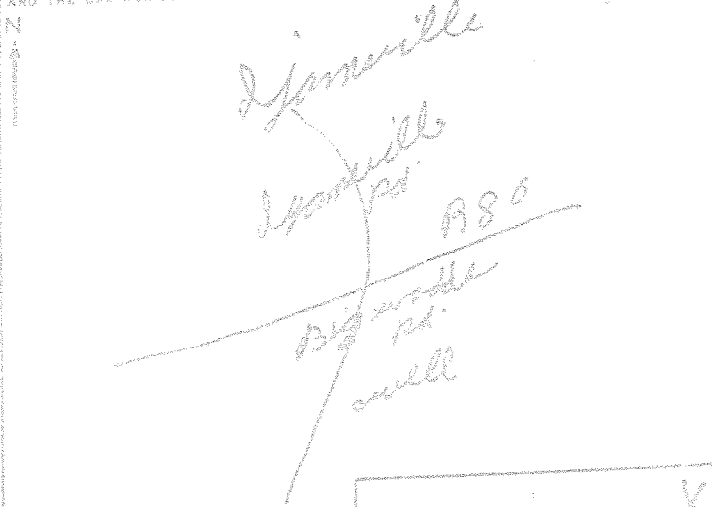
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
 APPROPRIATION PERMIT NUMBER: 766
 ENGINEER REVIEW DISTRICT NO.: 540
 FORCE: 57 63 65 67 69 71 73 75 77 79

HEALTH DEPARTMENT APPROVAL
 45 50 55 60 65 70 75 80 85 90 95
 DATE: 08-29-74 APPROVED BY: Frederick 74-679
 COUNTY NAME: Frederick COUNTY NO.: 74-679

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6
 COUNTY: Frederick COL. 21
 SUBDIVISION: 23 COL. 42
 SECTION: 44 LOT: 48 COL. 50
 NEAREST TOWN: Gamsville COL. 71
 MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 COL. 75 77 79

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
 1 2 3 (SEQ. NO.) 6
☒ N NORTH ☐ E EAST ☐ NE NORTHEAST ☐ SE SOUTHEAST
☐ S SOUTH ☐ W WEST ☐ NW NORTHWEST ☐ SW SOUTHWEST
 BEAR WHAT ROAD: Big Woods Rd
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): ☒ N ☐ S ☐ E ☐ W
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 200 COL. 34 37 39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON YOUR SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER: 766
 NORTH COORDINATE: 545000
 EAST COORDINATE: 0705000
 ELEVATION AT WELL HEAD (FEET): 45 52 57 68

5-15 SPECIAL CONDITIONS 5-85 (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 6

DR 214 9/71

SEQUENCE NO. 7752
 DATE RECEIVED (WPA USE ONLY) 8-29-74
 DATE WELL COMPLETED 08/29/74

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
 WELL-COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 1951

PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-93-2706
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 42

OWNER Wilson John
 STREET OR RFD Mt. 2
 FIRST NAME Fredrick W
 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 TO CHECK IF WATER BEARING

Top Soil 0 3
 Brown Shale 3 80
 Blue Shale 80 240

GROUTING RECORD
 WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)
 TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT 45 46
 BENTONITE CLAY 35 46
 NO. OF BAGS 6 NO. OF POUNDS 600
 GALLONS OF WATER 30
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 21 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD
 INSERT APPROPRIATE CODE BELOW
 STEEL 51
 CONCRETE 60
 PLASTIC 61
 OTHER 62

MAIN CASING TYPE
 NOMINAL DIAMETER TOP (MAIN CASING) (NEAREST INCH) 6
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 23

OTHER CASING (IF USED)
 DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD
 INSERT APPROPRIATE CODE BELOW
 STEEL 63
 BRASS 64
 OPEN HOLE 65
 PLASTIC 66
 OTHER 67

DEPTH (NEAREST WHOLE FOOT)
 FROM 21 TO 240

SLOT SIZE 1. 2. 3.

DIAMETER OF SCREEN (NEAREST INCH)
 GRAVEL PACK
 IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX) F

WPA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 TELEPHONE CATALOG INDICATOR

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 50
 WHEN PUMPING 240

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 A CENTRIFUGAL
 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)
 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

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).

Bar
 2 ft
 2 ft
 2 ft

CIRCLE APPROPRIATE BOXES
 1. WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
 2. ELECTRIC LOG OBTAINED
 3. TEST WELL CONVERTED TO PRODUCTION WELL
 (I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-MENTIONED "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)
 DRILLER'S NAME L. F. Eastard
 SIGNATURE J. F. Eastard

ORIGINAL

B 1	0149	SEQUENCE NO. (WRA USE ONLY)
1	2	3
(THIS NUMBER IS TO BE PUNCHED IN COLS. 2-3 ON ALL CARDS)		

DATE RECEIVED
(WRA USE ONLY)

OWNER

COL 15 LAST NAME

STREET
OR RFD

COL 26

POST
OFFICE

COL 57

Paul M.
FIRST NAME

COL. 34

COL. 55

COL. 76

B-13

B 1 CONTINUED

DRILLER INFORMATION

1	2	3	(SEQ. NO.)	6
DATE Nov. 13, 1979				
LICENSE NUMBER 139				50
Robert L. Cline				
FIRST NAME DRILLER LAST NAME				
SIGNATURE Robert L. Cline				

B 2 WELL INFORMATION

1	2	3	(SEQ. NO.)	6
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5				
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 300				
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)				
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT				
<input type="checkbox"/> MUNICIPAL WATER SUPPLY				
<input type="checkbox"/> PRIVATE WATER COMPANY				
<input type="checkbox"/> TEST				
MUST HAVE STATE HEALTH DEPT. APPROVAL				
APPROXIMATE DEPTH OF WELL 150 FEET				
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)				
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)				
CORED (OR AUGERED) JETTED DRIVEN				
AIR-ROTARY AIR-ROTARY WITH CABLE AIR-ROTARY WITH CABLE				
OTHER (DESCRIBE)				

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
CORED (OR AUGERED) JETTED DRIVEN
AIR-ROTARY AIR-ROTARY WITH CABLE AIR-ROTARY WITH CABLE
OTHER (DESCRIBE)

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 DEEPEN AN EXISTING WELL

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

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

APPROPRIATION PERMIT NUMBER

ENGINEER REVIEW DISTRICT NO.

FORCE WHITE INITIALS TO BOX

CONDITIONS

HEALTH DEPARTMENT APPROVAL

Frederick 74-559

DATE 08/08/79

APPROVED BY

SPECIAL CONDITIONS (SEE)

WRA USE ONLY

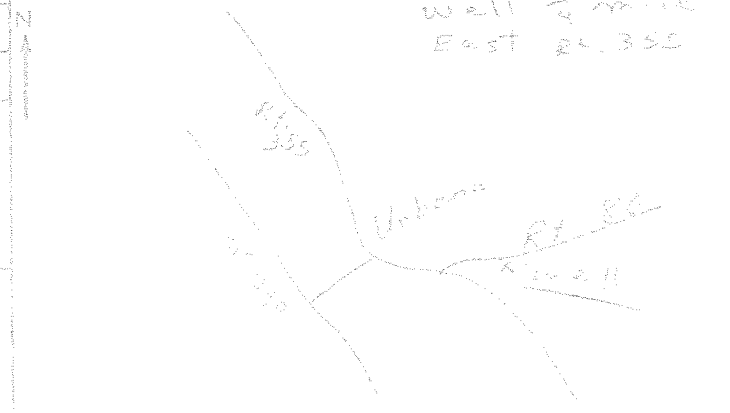
B 3

1	2	3	(SEQ. NO.)	6
COUNTY Frederick				
SUBDIVISION Geisbert-Rodger Sub				
SECTION A I LOT 1				
NEAREST TOWN Urbana				
MILES FROM TOWN (ENTER 0 IF IN TOWN) 1				

B 4 LOCATION OF WELL (CIRCLE APPROPRIATE BOX)

1	2	3	(SEQ. NO.)	6
DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)				
N E NORTH EAST S E SOUTHEAST				
S W SOUTHWEST				
N W NORTHWEST				
S S				
NEAR WHAT ROAD Route 80				
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)				
N S E W				
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 500				

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON YOUR SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



WELL LOCATION MAP

WELL LOCATION MAP

WELL LOCATION MAP

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WELL LOCATION MAP

WELL LOCATION MAP

WELL LOCATION MAP

WELL LOCATION MAP

C 1 2260

SEQUENCE NO.
(WRA USE ONLY)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBER1 2 3 (SEQ. NO.) 4
(THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)DATE RECEIVED
(WRA USE ONLY)

NOV 27 1974

DATE WELL COMPLETED

DEPTH OF WELL

175

22 (TO NEAREST FOOT) 36

PERMIT NO. FROM "PERMIT TO DRILL WELL"

FR-73-62360

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

139

OWNER
LAST NAME

GEISBERT

PAUL M

FIRST NAME

POST OFFICE

FREDERICK MD

STREET OR RD

RT 7

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION
(USE ADDITIONAL SHEETS IF NECESSARY)FEET
FROM TOCHECK IF
WATER BEARING

BROWN SHALE

0 15

BLUE SLATE

15 175 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES

NO

☒☐

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT

☒

BENTONITE CLAY

☐

NO. OF BAGS

6

NO. OF POUNDS

564

GALLONS OF WATER

36

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM

0

FT. TO

22

FT.

(ENTER 0 IF FROM SURFACE)

CASING

TYPES

INSERT

APPROPRIATE

CODE

BELOW

CASING RECORD

S T

C O

S I L E

C O N C R E T E

P L

O T

P L A S T I C

O T H E R

MAIN

CASING

TYPE

S T

NOMINAL DIAMETER

TOP (MAIN) CASING

NEAREST INCH

6

TOTAL DEPTH

OF MAIN CASING

NEAREST FOOT

23

OTHER CASING (IF USED)

DIAMETER

(INCH)

DEPTH (FEET)

FROM TO

SCREEN RECORD

SCREEN TYPE

OR OTHER WORK

(CIRCLE APPROPRIATE BOX)

WELDED

S T

B F

W O

S T E E L

B R A S S

W O O D

S T E E L

B R A S S

W O O D

S T E E L

B R A S S

W O O D

S T E E L

B R A S S

W O O D

S T E E L

B R A S S

W O O D

C 2

1 2 3 (SEQ. NO.) 4

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

DEPTH (NEAREST WHOLE FOOT)

FROM TO

22 175

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

2 3 4 5 6 7 8 9 10 11 12 13

B 1 **3050**
 1 2 3 (SEQ. NO.) 4
 (THIS NUMBER IS TO BE PUNCHED
 IN COLS. 3-4 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-2491
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED
 (WRA USE ONLY)
012875

OWNER **Rice**
 COL 12 LAST NAME
403 South Market Street
 COL 36
Frederick
 COL 57
Gary
 COL 54
Frederick
 COL 55
Frederick
 COL 76

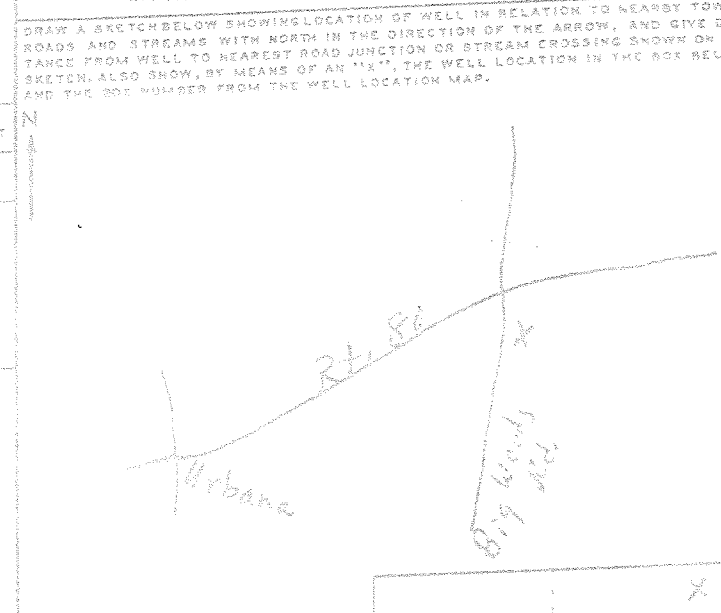
B-13
B 1 **CONTINUED**
 1 2 3 (SEQ. NO.) 4
DATE **Jan 28, 1975**
LICENSE **139**
NUMBER **77**
DRILLER **Robert L. Cline**
FIRST NAME **DRILLER** **LAST NAME**
SIGNATURE **Robert L. Cline**

B 3
 1 2 3 (SEQ. NO.) 4
LOCATION OF WELL
Frederick
COUNTY **Frederick**
SUBDIVISION **Wilcom Sub.**
SECTION **2** **LOT** **1**
NEAREST TOWN **Urbana**
MILES FROM TOWN **3**
75 77 78

B 12
 1 2 3 (SEQ. NO.) 4
WELL INFORMATION
MAXIMUM PUMPING RATE **5**
(GALLONS PER MINUTE) **300**
AVERAGE DAILY QUANTITY NEEDED **12**
(GALLONS PER DAY)
USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ TEST
 MUST HAVE STATE HEALTH DEPT. APPROVAL

B 4
 1 2 3 (SEQ. NO.) 4
DIRECTION FROM TOWN
 (CIRCLE APPROPRIATE BOX)
☒ NORTH ☐ EAST ☐ SOUTHEAST ☐ SOUTHWEST
☐ SOUTH ☐ WEST ☐ NORTHWEST
NEAR WHAT ROAD **Big Woods Rd.**
ON WHICH SIDE OF ROAD **NORTH**
(CIRCLE APPROPRIATE BOX) **32**
DISTANCE FROM ROAD **50**
(ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) **34**
75 77 78

APPROXIMATE DEPTH OF WELL **200**
FEET
APPROXIMATE DIAMETER OF WELL **6**
(NEAREST INCH)
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
BORED (OR AUGERED) **JETTED** **DRIVEN**
30-37 AIR-ROTARY **PERCUSSION** **ROTARY (HYDRAULIC ROTARY)**
CABLE **REVERSE-ROTARY** **DRIFT-DRIFT**
OTHER DESCRIBE
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 DEEPMED AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPMED (IF AVAILABLE)



NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION **PERMIT NUMBER** **34**
ENGINEER REVIEW **DISTRICT NO.** **65**
FORCE **WRITE INITIALS IN BOX** **CONDITIONS** **70 71 72 73 74 75 76 77 78 79**

BOX NUMBER **700**
540
70 71 72 73 74 75 76 77 78 79

B 4
 1 2 3 (SEQ. NO.) 4
HEALTH DEPARTMENT APPROVAL
Frederick **74-710**
STATE HEALTH **COUNTY NAME** **COUNTY NO.**
DATE **09/25/74**
APPROVED BY

NORTH COORDINATE **545000**
EAST COORDINATE **0705000**
ELEVATION AT WELL HEAD (FEET) **65 66 67 68**
70 71 72 73 74 75 76 77 78 79

B 5
 1 2 3 (SEQ. NO.) 4
SPECIAL CONDITIONS **7-93**
WRA USE ONLY

C 1 1481

SEQUENCE NO.
(WRA USE ONLY)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBER

RESULT NO. FROM "PERMIT TO DRILL WELL"

FR-73-2491

DRILLERS IDENTIFICATION NO. 139

DATE RECEIVED
(WRA USE ONLY)

FEB 17 1975

DEPTH OF WELL

125

22 (TO NEAREST FOOT) 26

DATE WELL COMPLETED

APR 17 1975

33 1275

B-13

OWNER

RICE

FIRST NAME

GARY

STREET OR RFD

403 S MARKET ST

POST OFFICE

FREDERICK MD

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION
(USE ADDITIONAL SHEETS IF NECESSARY)FEET
FROM TOCHECK IF
WATER BEARING

BROWN SHALE 0 45
BLUE SLATE 45 125 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES

NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT

BENTONITE CLAY

BC

NO. OF BAGS 13 NO. OF POUNDS 1223

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 52 FT.
ENTER 0 IF FROM SURFACE

CASING RECORD

CASING TYPE

INSERT APPROPRIATE CODE BELOW

ST STEEL

CO CONCRETE

PL PLASTIC

OT OTHER

MAIN CASING TYPE

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

ST 6 53

OTHER CASING (IF USED)

DIAMETER (INCH)

DEPTH (FEET) FROM TO

SCREEN TYPE OR OPEN HOLE

SCREEN TYPE

ST STEEL

WP WOOD

WO OPEN HOLE

SCREEN TYPE

ST STEEL

WP WOOD

WO OPEN HOLE

C 2

DEPT. NO. 5

DEPTH (NEAREST WHOLE FOOT)

140 53 125

CIRCUIT APPROPRIATE BOXES

1 A WELL WAS ABANDONED AND CANCELED WHEN THIS WELL WAS COMPLETED

2 ELECTRIC LOG OBTAINED

3 TEST WELL CONVERTED TO PRODUCTION WELL

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.

DRILLER'S NAME

ROBERT CLINE

SIGNATURE Robert Cline

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL BACK

IF WELL DRILLED WITH A FLOWING WELL CIRCLE BOX

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

14 78 78 OTHER DATA AVAILABLE

TELEPHONE CORD INDICATOR

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)

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX)

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 DISTANCE MEASUREMENTS TO WELL.

MD RT 80

40
14
DRIVE WAY
BLG WOODS RD

ORIGINAL

B 1 8445
SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 4
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-2529
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
030676

OWNER COL 15 LAST NAME Block
STREET OR RFD COL 38 RT #5
POST OFFICE COL 57 Hagerstown, Md.

B 1 CONTINUED
1 2 3 (SEQ. NO.) 4
DATE March 4, 1975 LICENSE NUMBER 103
77 90
FIRST NAME William H. Hankerson DRILLER LAST NAME
SIGNATURE William H. Hankerson

B 2
1 2 3 (SEQ. NO.) 4
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 10
3 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500
14 20
USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ TEST
MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL 200 FEET
24 28
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
BORED (OR AUGERED) ☒ JETTED ☐ DRIVEN
50-57 AIR-ROTARY ☐ AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY)
CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT
OTHER (DESCRIBE):

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 DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER 54
ENGINEER REVIEW DISTRICT NO. 53
FORCE 57 58
CONDITIONS 70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED
1 2 3 (SEQ. NO.) 4
STATE HEALTH (CIRCLE BOX)
DATE 12/1/74
APPROVED BY Thomas H. Purdy

B 3 LOCATION OF WELL
1 2 3 (SEQ. NO.) 4
COUNTY Frederick 21
SUBDIVISION Sugarloaf Estates 42
23
SECTION 1 48
LOT 37 50
NEAREST TOWN JABES 71
MILES FROM TOWN (ENTER 0 IF IN TOWN) 3 72 77 78
B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
1 2 3 (SEQ. NO.) 4
N NORTH E EAST NE NORTHEAST S E SOUTHEAST
S SOUTH W WEST NW NORTHWEST S W SOUTHWEST
HEAR WHAT Frederick Rd. 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 45 34 37 38 39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

Sketch area with handwritten notes: Frederick Rd., 1/4 mi., 1/2 mi.
N
BOX NUMBER 696
NORTH COORDINATE 540000
EAST COORDINATE 0695000
ELEVATION AT WELL HEAD (FEET) 57 58 59 60 61 62 63
WELL HEAD (FEET) 57 58 59 60 61 62 63

B 1 5122 (SEQ. NO.) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-9 ON ALL CARDS)		STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER FR-23-2596 FILL IN THIS FORM COMPLETELY	
DATE RECEIVED (WRA USE ONLY) 1475		OWNER COL 15 LAST NAME Fisher		FIRST NAME David R.	
STREET OR RFD COL 38 Route # 1 - Box 116		POST OFFICE COL 67 Hamsville, Md.			
B 1 CONTINUED (SEQ. NO.) DATE 4/11/75 C.A. CROMWELL FIRST NAME DRILLER LAST NAME SIGNATURE C.A. Cromwell		DRILLER INFORMATION LICENSE NUMBER 217 77 80		B 3 LOCATION OF WELL (SEQ. NO.) COUNTY Frederick (DO NOT ABBREVIATE COUNTY NAME) SUBDIVISION England Hills 23 42 SECTION 1 LOT 2 44 48 50 NEAREST TOWN URBANA 52 71 MILES FROM TOWN (ENTER 0 IF IN TOWN) 3 73 75 77 79	
B 2 WELL INFORMATION (SEQ. NO.) MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 500 8 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500 18 26		B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 8 N NORTH E EAST NE NORTHEAST SE SOUTHEAST S SOUTH W WEST NW NORTHWEST SW SOUTHWEST NEAR WHAT ROAD Big Woods Rd. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH EAST WEST 11 20 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 135 34 37 38 39			
USE FOR WATER (CIRCLE APPROPRIATE BOX) D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) F FARMING, AGRICULTURE, IRRIGATION I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. M MUNICIPAL WATER SUPPLY P PRIVATE WATER COMPANY T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.			
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)		METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORER (OR AUGER) JETTER DRIVEN AIR-ROTOR AIR-ROTOR AIR-ROTOR REVERSE-ROTOR DRIVE-POINT OTHER (SPECIFY)			
REPLACEMENT OR DEEPENED WELL (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 DEEPENED (IF AVAILABLE)		NOT TO BE FILLED IN BY DRILLER. (WRA USE ONLY) APPROPRIATION PERMIT NUMBER FORCE WRITE INITIALS IN BOX CONDITIONS HEALTH DEPARTMENT APPROVAL COUNTY NAME Frederick COUNTY NO. 75-127 DATE 03-24-75 APPROVED BY			
B 4 CONTINUED (SEQ. NO.) STATE HEALTH (CIRCLE BOX) MD. DAY TP. DATE 03-24-75		BOX NUMBER 700 540 NORTH COORDINATE 640000 80 81 82 83 84 85 EAST COORDINATE 0706000 87 88 89 90 91 92 93 ELEVATION AT WELL HEAD (FEET) 88 89 90 91 92 93 94 95 96 97 98 99 0/0 5/0			

C 1 5401 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)		STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 WELL COMPLETION REPORT		THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION FILL IN THIS FORM COMPLETELY COUNTY NUMBER _____	
DATE RECEIVED (WRA USE ONLY) <u>052675</u> DATE WELL COMPLETED <u>May 9-75</u>		DEPTH OF WELL <u>125</u> 22 (TO NEAREST FOOT) 25		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>FR-73-2596</u> 28 29 30 31 32 33 34 35 36 37	
OWNER <u>Fisher</u> LAST NAME <u>Rt 1 Box 116</u>		FIRST NAME <u>Harold R</u> POST OFFICE <u>St Jamesville MD</u>			
STREET OR RD. _____		DRILLERS IDENTIFICATION NO. <u>217</u>			
WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)		GROUTING RECORD WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TYPE OF GROUTING MATERIAL (CIRCLE BOX) <input checked="" type="checkbox"/> CEMENT <input type="checkbox"/> BENTONITE CLAY NO. OF BAGS <u>7</u> NO. OF POUNDS <u>658</u> GALLONS OF WATER <u>42</u> DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM <u>0</u> FT. TO <u>40</u> FT. (ENTER 0 IF FROM SURFACE)		PUMPING TEST HOURS PUMPED (TO NEAREST HOUR) <u>1</u> PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) <u>10</u> METHOD USED TO MEASURE PUMPING RATE <u>ROTARY</u> WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING <u>30</u> INCHES WHEN PUMPING <u>120</u> INCHES TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST) <input type="checkbox"/> AIR <input type="checkbox"/> PISTON <input type="checkbox"/> TURBINE <input checked="" type="checkbox"/> CENTRIFUGAL <input checked="" type="checkbox"/> ROTARY <input type="checkbox"/> OTHER (DESCRIBE BELOW) <input type="checkbox"/> JET <input type="checkbox"/> SUBMERSIBLE	
BROWN SHALE 0 30 BLUE SLATE 30 125 Well 125 ft		CASING RECORD INSERT APPROPRIATE CODE BELOW <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> CONCRETE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER MAIN CASING TYPE <u>ST</u> NOMINAL DIAMETER TOP MAIN CASING (NEAREST INCH) <u>6</u> TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) <u>42</u> OTHER CASING (IF USED) DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____		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) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) _____ PUMP HORSE POWER _____ PUMP COLUMN LENGTH (NEAREST FOOT) _____	
SCREEN RECORD INSERT APPROPRIATE CODE BELOW <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> BENTONITE <input type="checkbox"/> CEMENT <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER SCREEN TYPE OR OPEN HOLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DEPTH (NEAREST WHOLE FOOT) <u>125</u> 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100		CASING HEIGHT (CIRCLE SURFACE LET BOX AND ENTER CASING HEIGHT) <input checked="" type="checkbox"/> ABOVE <input type="checkbox"/> BELOW LAND SURFACE _____ FEET "NEAREST" FOOT _____			
CIRCLE APPROPRIATE BOXES <input type="checkbox"/> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <input type="checkbox"/> E ELECTRIC LOG OBTAINED <input type="checkbox"/> TEST WELL CONVERTED TO PRODUCTION WELL 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 _____		LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND FOR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL. 			
DRILLERS NAME <u>W. S. Greenwell</u> SIGNATURE <u>W. S. Greenwell</u>		WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (CIRCLE BOX) <input type="checkbox"/> YES <input type="checkbox"/> NO 74 75 76 OTHER DATA AVAILABLE			

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER FR-73-2684 FILL IN THIS FORM COMPLETELY
B 1 0509 1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		
DATE RECEIVED (WRA USE ONLY) 052675		
OWNER <u>Keys, Arthur</u> COL 15 LAST NAME		FIRST NAME COL. 34
STREET OR RFD <u>Wash. D.C.</u> COL 36		COL. 55
POST OFFICE <u>Wash. D.C.</u> COL 37		COL. 75
B 1 CONTINUED 1 2 3 (SEQ. NO.) 6 DATE <u>5/23/75</u> LICENSE NUMBER <u>144</u> 77 80 <u>Keyes - Garner, Inc.</u> FIRST NAME DRILLER LAST NAME SIGNATURE <u>Arthur W. Garner</u>		B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 6 COUNTY <u>Frederick</u> DO NOT ABBREVIATE COUNTY NAME! 21 SUBDIVISION 25 42 SECTION 44 LOT 48 50 NEAREST TOWN <u>Urbana</u> 52 MILES FROM TOWN (ENTER 0 IF IN TOWN) <u>1/2</u> 75 76 77 78
B 2 WELL INFORMATION 1 2 3 (SEQ. NO.) 6 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>05</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>1000</u> 18 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input checked="" type="checkbox"/> F FARMING, AGRICULTURE, IRRIGATION <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> M MUNICIPAL WATER SUPPLY <input type="checkbox"/> P PRIVATE WATER COMPANY <input type="checkbox"/> T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL		B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) 1 2 3 (SEQ. NO.) 6 <input type="checkbox"/> N NORTH <input type="checkbox"/> E EAST <input checked="" type="checkbox"/> NE NORTHEAST <input type="checkbox"/> SE SOUTHEAST <input type="checkbox"/> S SOUTH <input type="checkbox"/> W WEST <input type="checkbox"/> NW NORTHWEST <input type="checkbox"/> SW SOUTHWEST NEAR WHAT ROAD <u>MD 355</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N NORTH <input type="checkbox"/> S SOUTH <input type="checkbox"/> E EAST <input type="checkbox"/> W WEST DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>1/8</u> MI 34 35 36
APPROXIMATE DEPTH OF WELL <u>150</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> (NEAREST INCH) METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) JETTED DRIVEN AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) CABLE REV. AIR-ROTARY DRIVE-POINT OTHER (DESCRIBE) _____ REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEN AN EXISTING WELL DENOT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER _____ TARGET <input checked="" type="checkbox"/> GC WRITE INITIALS IN BOX CONDITIONS _____ B 4 CONTINUED 1 2 3 (SEQ. NO.) 6 STATE HEALTH DEPT. APPROVAL COUNTY NAME <u>Frederick</u> COUNTY NO. _____ MD. DAY FR. <u>4 17 75</u> APPROVED BY <u>J. Russell Henry</u> EMERGENCY		BOX NUMBER <u>690</u> <u>540</u> NORTH COORDINATE <u>540000</u> EAST COORDINATE <u>0695000</u> ELEVATION AT WELL HEAD (FEET) _____ SPECIAL CONDITIONS 5-93 _____ WRA USE ONLY

C 1 3075

SEQUENCE NO.
(WRA USE ONLY)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION.

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBERDATE RECEIVED
(WRA USE ONLY)

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

000275

04/18/75

22 (TO NEAREST FOOT) 25

DRILLER'S IDENTIFICATION NO. 144

OWNER, KEYS, ARTHUR

FIRST NAME

STREET OR RFD WASHINGTON, DC

POST OFFICE

WELL LOG

WELL DESCRIPTION

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)

FEET
FROM TO CHECK IF WATER BEARING

Sand
Soap Stone
Mud & Chalk Shales
Slate

0 2

2 71

71 280 ✓

Streams:

46 ft.
120 ft.
251 ft.

Casing: 6 1/4" ID

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES NO

(Y) (N)

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT (C) M BENTONITE CLAY (B) C

NO. OF BAGS 21 NO. OF POUNDS 2100

GALLONS OF WATER 105

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 84 FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES
(INSERT APPROPRIATE CODE BELOW)

STEEL (S) T CONCRETE (C) O
PLASTIC (P) L OTHER (O) T

MAIN CASING TYPE (S) T 6 84

60 61 62 63 64 65 66 67

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET)

FROM TO

SCREEN TYPE OR OPEN HOLE

(INSERT APPROPRIATE CODE BELOW)

STEEL (S) T IRON (I) T WOOD (W) O
PLASTIC (P) L OTHER (O) T

DEPTH (NEAREST WHOLE FOOT)

FROM 0 TO 280

22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

SLOT SIZE 1. 2. 3.

DIAMETER OF SCREEN (NEAREST INCH)

FROM TO

GRAVEL BACK

IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX)

YES NO

WRA USE ONLY (DO NOT TO BE FILLED IN BY DRILLER)

W O

TELEPHONE CORDING

LPG INDICATOR

IS HE TO OTHER DATA AVAILABLE

PUMP INSTALLED

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

YES NO

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COIL WIND LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE SPACING AND BOX AND ENTER CASING HEIGHT)

ABOVE BELOW

LAND SURFACE

NEAREST FOOT

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC TANKS, AND OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO FEET DISTANCE FROM POINTS TO WELL.

DAIRY

25

WELL

CIRCLE APPROPRIATE BOXES

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 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.

DRILLER'S NAME

KEYS, ARTHUR

JERRY HADLEY

B 1 0534
 1 2 3 (SEQ. NO.) 4
 THIS NUMBER IS TO BE PUNCHED
 IN COLUMNS 3-5 ON ALL CARDS

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-279
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) **9/3/75**
 OWNER **Porter, Wm. H.** FIRST NAME **COL. 24**
 COL. 15 LAST NAME
 STREET OR RFD **Rt. 1 Box 162** COL. 25
 COL. 35
 POST OFFICE **Springdale, Md. 21754** COL. 75
 COL. 87

B 1 CONTINUED
 1 2 3 (SEQ. NO.) 4
DRILLER INFORMATION
 DATE **7/1/75** LICENSE NUMBER **144**
 COL. 77 COL. 80
Kayser-Haver, Inc.
 FIRST NAME DRILLER LAST NAME
 SIGNATURE **Wm. H. Haver**

B 2
 1 2 3 (SEQ. NO.) 4
WELL INFORMATION
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) **3**
 COL. 8 COL. 12
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) **800**
 COL. 16 COL. 20
USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ FARMERS, A. CULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ TEST
 MUST HAVE STATE HEALTH DEPT. APPROVAL

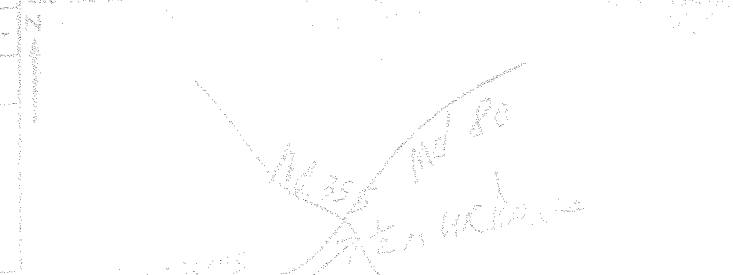
APPROXIMATE DEPTH OF WELL **150** FEET
 APPROXIMATE DIAMETER OF WELL **6** INCHES (MAX)
 METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (SEE ABOVE) ☒ DRIVEN
 AUGER (SEE ABOVE) ☒ ROTARY (SEE ABOVE)
 OTHER ☐ OTHER (SEE ABOVE)

LOCATION OF WELL (SEE INSTRUCTIONS)
 LOCATION OF WELL (SEE INSTRUCTIONS)
 LOCATION OF WELL (SEE INSTRUCTIONS)
 LOCATION OF WELL (SEE INSTRUCTIONS)
 LOCATION OF WELL (SEE INSTRUCTIONS)

B 3
 1 2 3 (SEQ. NO.) 4
LOCATION OF WELL
 COUNTY **Frederick** COL. 21
 (DO NOT ABBREVIATE COUNTY NAME)
 SUBDIVISION **28** COL. 43
 SECTION **44** COL. 49
 LOT **48** COL. 50
 NEAREST TOWN **Urbana** COL. 52
 MILES FROM TOWN (ENTER 0 IF IN TOWN) **1/4** COL. 75

B 4
 1 2 3 (SEQ. NO.) 4
DIRECTION FROM TOWN
 (CIRCLE APPROPRIATE BOX)
☒ NORTH ☐ EAST ☐ NE ☐ SE
☐ SOUTH ☐ WEST ☐ SW ☐ NW
 BEAR WHAT **Y 80**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH ☐ SOUTH ☒ EAST ☐ WEST
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)
50 FEET

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE SKETCH AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



NOT TO BE FILLED IN BY DRILLER
 APPROXIMATE DEPTH OF WELL (SEE ABOVE)
 APPROXIMATE DIAMETER OF WELL (SEE ABOVE)
 METHOD OF DRILLING USED (SEE ABOVE)

HEALTH DEPARTMENT APPROVAL
 APPROVED BY **Wm. H. Haver**
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**
 APPROVED BY **Wm. H. Haver**
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**

WRA USE ONLY
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**
 APPROVED BY **Wm. H. Haver**
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**

WRA USE ONLY
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**
 APPROVED BY **Wm. H. Haver**
 DATE **9/3/75**
 COUNTY **Frederick**
 TOWN **Urbana**

C 1 **8194**

1 2 3 (REQ. NO.) 4
(THIS NUMBER IS TO BE CIRCLED IN COLS. 3-4 ON ALL CARDS)

DATE RECEIVED (MMA USE ONLY) **7/7/75**

DATE WELL COMPLETED **070975**

8-13

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **75-455**

PERMIT NO. FROM "PERMIT TO DRILL WELLS" **PR-175-2790**

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. **144**

OWNER **PAULIUS, WM G** FIRST NAME **PAULIUS** LAST NAME **MD**

STREET OR RFD **RT 1 BOX 162** POST OFFICE **FRAMSVILLE MD**

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)

FROM TO

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) **YES** **NO**

TYPE OF GROUTING MATERIAL (CIRCLE ADD.)

CEMENT **CM** PORTLAND CEMENT **PC**

NO. OF BAGS **8** NO. OF POUNDS **900**

GALLONS OF WATER **40**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM **0** FT. TO **4 1/2** FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPE (CIRCLE APPROPRIATE)

INSERT **ST** CONCRETE **CD**

PIPE **PL** OTHER **OT**

MAIN CASING TYPE **ST** NOMINAL DIAMETER **6** TOTAL DEPTH **4 1/2**

OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED)

DIAMETER DEPTH (FEET)

INCHES FROM TO

SCREEN RECORD

SCREEN TYPE (CIRCLE APPROPRIATE)

WIRE **W** TUBULAR **TR** OTHER **OT**

APPROPRIATE

DEPTH (FEET)

FROM TO

WATER LEVEL

DEPTH (FEET)

FROM TO

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **8**

METHOD USED TO MEASURE PUMPING RATE **AIR**

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **25** FEET

WHEN PUMPING **35** FEET

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX FOR PUMPING TEST)

A AIR **B** BIRTON **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, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) **YES** **NO**

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) **8**

PIPE COLUMN LENGTH (NEAREST FOOT) **10**

WELLING HEIGHT

FEET ABOVE GROUND SURFACE AND ENTER IN COL. 37

LOCATION OF WELL ON LOT

AND PERMANENT ELEVATION (NEAREST FOOT) INDICATE NOT LESS THAN TWO DISTANCES (HORIZONTAL AND VERTICAL) TO CORNER

CIRCLE APPROPRIATE BOXES:

☐ WELL HAS BEEN ABANDONED AND IS NOT TO BE USED

☐ WELL IS NOT TO BE USED

☐ WELL IS TO BE USED FOR PRODUCTION WELL

WELLER'S SIGNATURE **PAULIUS, WM G**

DATE **7/7/75**

WELLER'S SIGNATURE

DATE

WELLER'S SIGNATURE

DATE

WELLER'S SIGNATURE

DATE

WELLER'S SIGNATURE

DATE

<p>STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TOWER STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL</p>		<p>WRA PERMIT NUMBER FR-73 3/04 FILL IN THIS FORM COMPLETELY</p>	
<p>1 0563 (THIS NUMBER IS TO BE PUNCHED IN COILS, 2-5 ON ALL CARDS)</p>		<p>DATE RECEIVED (WRA USE ONLY)</p>	
<p>OWNER <u>Proctor, Dorothy</u> COL 12 LAST NAME</p>		<p>FIRST NAME COL. 34</p>	
<p>STREET OR RFD COL. 36</p>		<p>POST OFFICE <u>Hammonds, Maryland</u> COL. 78</p>	
<p>DRILLER INFORMATION</p>			
<p>DATE <u>9/15/75</u> LICENSE NUMBER <u>144</u></p>		<p>COUNTY <u>Frederick</u> (DO NOT ABBREVIATE COUNTY NAME)</p>	
<p>SUBDIVISION <u>23</u></p>		<p>SECTION <u>44</u> LOT <u>45</u></p>	
<p>NEAREST TOWN <u>Conowingo</u></p>		<p>MILES FROM TOWN (ENTER 0 IF IN TOWN) <u>1/2</u></p>	
<p>WELL INFORMATION</p>			
<p>MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>3</u></p>		<p>AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>300</u></p>	
<p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> HOME SINGLE OR DOUBLE HOUSEHOLD (WELL ONLY)</p> <p><input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION</p> <p><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT</p> <p><input type="checkbox"/> MUNICIPAL WATER SUPPLY</p> <p><input type="checkbox"/> PRIVATE WATER COMPANY</p> <p><input type="checkbox"/> TEST</p>			
<p>APPROXIMATE DEPTH OF WELL <u>170</u> FEET</p>			
<p>APPROXIMATE DIAMETER OF WELL <u>6</u> INCHES (LARGEST INCH)</p>			
<p>METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)</p> <p>ROD AND AUGER <input type="checkbox"/> JETTER <input type="checkbox"/> DRIVEN</p> <p>SOFT AIR-ROTARY <input type="checkbox"/> AIR PERCUSSION <input checked="" type="checkbox"/> ROTARY HYDRAULIC ROTARY</p> <p>PILE <input type="checkbox"/> OTHER <input type="checkbox"/></p>			
<p>APPLICANT'S ADDRESS (PRINTED NAME)</p> <p>_____ _____ _____</p>			
<p>APPLICANT'S SIGNATURE (PRINTED NAME)</p> <p>_____ _____ _____</p>			
<p>HEALTH DEPARTMENT APPROVAL</p> <p>_____ _____ _____</p>			
<p>WRA USE ONLY</p> <p>WELL NO. <u>545006</u></p> <p>ELEVATION AT WELL HEAD (FEET) <u>070500</u></p>			

EMERGENCY NO. (If any) -

WRA PERMIT NUMBER

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATIONTAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELLFR-73-3308
FILL IN THIS FORM COMPLETELYB 1 9220
SEQUENCE NO.
(THIS NUMBER IS TO BE PURCHASED IN SECTIONS A-E ON ALL CARDS)DATE RECEIVED
(WRA USE ONLY)

OWNER

COL 15 LAST NAME

STREET
OR RFD

COL 30

POST
OFFICE

COL 57

FIRST NAME

COL 34

COL 35

COL 36

COL 76

B 1 CONTINUED
DATE 1-6-77
LICENSE NUMBER 144
DRILLER
FIRST NAME LAST NAME
SIGNATURE Austin T. LernerB 2 WELL INFORMATION
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 30
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 5000
USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☒ TEST
APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 4 INCHES
METHOD OF DRILLING USED (CIRCLE APPROPRIATE BOX)
CURED
APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 4 INCHESB 3 LOCATION OF WELL
COUNTY Frederick
SUBDIVISION 23
SECTION 44 LOT 45
NEAREST TOWN Urbana
MILES FROM TOWN CENTER (IF IN TOWN) 7.5B 4 DIRECTION FROM TOWN
(CIRCLE APPROPRIATE BOX)
NORTH EAST NE NORTHEAST SE SOUTHEAST
SOUTH WEST SW SOUTHWEST
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 54

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN IN SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE SKETCH AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

B 3 HEALTH DEPARTMENT APPROVAL
B 4 HEALTH DEPARTMENT APPROVALB 5 HEALTH DEPARTMENT APPROVAL
B 6 HEALTH DEPARTMENT APPROVAL

B 7 HEALTH DEPARTMENT APPROVAL

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAYES STATE OFFICE BLDG., ANNAPOLIS, MD. 21403
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 75-154

PERMIT NO. FROM "PERMIT TO DRILL WELL" PR-133-1978

DATE RECEIVED (FURNISH DATE) JUNE 23 1978

DATE WELL COMPLETED 95

DEPTH OF WELL (TO NEAREST FOOT) 95

DRILLER'S IDENTIFICATION NO. 139

OWNER THOMPSON

POST OFFICE GEORGETOWN MD

STREET OR RD. BOX 174

BROWN SHALE 0 56
BLUE SLATE 56 95

WELL LOG

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

DESCRIPTION	FEET	WATER BEARING
BROWN SHALE	0 56	
BLUE SLATE	56 95	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 18 NO. OF POUNDS 1692

GALLONS OF WATER 108

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 63 FT.

CASING RECORD

INSERT APPROPRIATE CIRCLE

STEEL ☒ CONCRETE ☐

PLASTIC ☐ OTHER ☐

MAIN CASING TYPE ST

NOMINAL DIAMETER TOP (INCH) 6

DEPTH OF MAIN CASING (NEAREST FOOT) 64

OTHER CASING (IF USED)

DIAMETER (INCH) 4 DEPTH (FEET) 1

WATER TYPE

WELL TYPE

WELL DEPTH

WELL DEPTH

WELL DEPTH

PUMPING TEST

1 2 3 (REQ. NO.)

HOUSING PUMPED (TO NEAREST HOUR) 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 10

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 30 INCHES

WHEN PUMPING 95 INCHES

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

FOR PUMPING TEST

A. AIR ☒ B. PISTON ☐ C. TURBINE ☐

D. CENTRIFUGAL ☐ E. ROTARY ☐ F. OTHER (DESCRIBE BELOW) ☐

J. JET ☐ K. SUBMERSIBLE ☐

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

CAPACITY

GALLONS PER MINUTE (TO NEAREST GALLON) 10

WELL DEPTH (TO NEAREST FOOT) 95

LOCATION OF WELL ON LOT

SHOW OWNERS' STRUCTURE AND ALL BUILDINGS, CEMENT TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANT MEASUREMENTS TO WELL.

CIRCLE APPROPRIATE BOXES

IF WELL WAS ABANDONED AND RESEALED WHEN THIS WELL WAS COMPLETED

IF ELECTRIC OR GAS DRIVEN

IF WELL CONVERTED TO PRODUCTION WELL

DRILLER'S NAME

PLEASE ROBERT CLINE

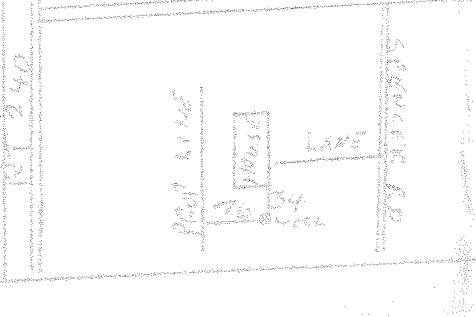
SIGNATURE Robert Cline

WELL DEPTH

WELL DEPTH

WELL DEPTH

WELL DEPTH



C 1 8285

SEQUENCE NO.
BUREAU (USE ONLY)

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAKES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBER

76-711

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HA-773-19478

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

144

DATE RECEIVED
(BUREAU USE ONLY)

7-26-76

DEPTH OF WELL

85'

DATE WELL COMPLETED

22 (TO NEAREST FOOT) 25

080876

072676

OWNER

Doig, Clayton E.

POST OFFICE

Libertytown, Md.

STREET OR RFD

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION
(USE ADDITIONAL SHEETS
IF NECESSARY)

FEET

FROM TO

CHECK IF
WATER BEARING

OB 0 20
Slate 20 85
Streams 65 ft
Casing: 6 1/4" DC

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES

NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT

BENTONITE CLAY

C

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 39 FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

WATER TYPES

ST

CO

INSERT

STEEL

CONCRETE

APPROPRIATE

CL

OT

CODE

PLASTIC

OTHER

RELIN

WATER

NOMINAL DIAMETER

TOTAL DEPTH

CASING

TOP (MAIN) CASING

OF MAIN CASING

TYPE

(NEAREST INCH)

(NEAREST FOOT)

ST 6 39

OTHER CASING (IF USED)

DIAMETER

DEPTH (FEET)

(INCH)

FROM TO

1 2 3 4 5 6 7 8 9 10 11 12

13 14 15 16 17 18 19 20 21 22 23 24

25 26 27 28 29 30 31 32 33 34 35 36

37 38 39 40 41 42 43 44 45 46 47 48

49 50 51 52 53 54 55 56 57 58 59 60

61 62 63 64 65 66 67 68 69 70 71 72

73 74 75 76 77 78 79 80 81 82 83 84

85 86 87 88 89 90 91 92 93 94 95 96

97 98 99 100 101 102 103 104 105 106 107 108

109 110 111 112 113 114 115 116 117 118 119 120

121 122 123 124 125 126 127 128 129 130 131 132

133 134 135 136 137 138 139 140 141 142 143 144

145 146 147 148 149 150 151 152 153 154 155 156

157 158 159 160 161 162 163 164 165 166 167 168

169 170 171 172 173 174 175 176 177 178 179 180

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205 206 207 208 209 210 211 212 213 214 215 216

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625 626 627 628 629 630 631 632 633 634 635 636

637 638 639 640 641 642 643 644 645 646 647 648

649 650 651 652 653 654 655 656 657 658 659 660

661 662 663 664 665 666 667 668 669 670 671 672

673 674 675 676 677 678 679 680 681 682 683 684

685 686 687 688 689 690 691 692 693 694 695 696

697 698 699 700 701 702 703 704 705 706 707 708

709 710 711 712 713 714 715 716 717 718 719 720

721 722 723 724 725 726 727 728 729 730 731 732

733 734 735 736 737 738 739 740 741 742 743 744

745 746 747 748 749 750 751 752 753 754 755 756

757 758 759 760 761 762 763 764 765 766 767 768

769 770 771 772 773 774 775 776 777 778 779 780

781 782 783 784 785 786 787 788 789 790 791 792

793 794 795 796 797 798 799 800 801 802 803 804

805 806 807 808 809 810 811 812 813 814 815 816

817 818 819 820 821 822 823 824 825 826 827 828

829 830 831 832 833 834 835 836 837 838 839 840

841 842 843 844 845 846 847 848 849 850 851 852

853 854 855 856 857 858 859 860 861 862 863 864

865 866 867 868 869 870 871 872 873 874 875 876

877 878 879 880 881 882 883 884 885 886 887 888

889 890 891 892 893 894 895 896 897 898 899 900

901 902 903 904 905 906 907 908 909 910 911 912

913 914 915 916 917 918 919 920 921 922 923 924

925 926 927 928 929 930 931 932 933 934 935 936

937 938 939 940 941 942 943 944 945 946 947 948

949 950 951 952 953 954 955 956 957 958 959 960

961 962 963 964 965 966 967 968 969 970 971 972

973 974 975 976 977 978 979 980 981 982 983 984

985 986 987 988 989 990 991 992 993 994 995 996

997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008

1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020

1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032

1033 1034 1035 1036 1037 1038 1039 1040 1041 1042 1043 1044

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1081 1082 1083 1084 1085 1086 1087 1088 1089 1090 1091 1092

1093 1094 1095 1096 1097 1098 1099 1100 1101 1102 1103 1104

1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 1116

1117 1118 1119 1120 1121 1122 1123 1124 1125 1126 1127 1128

1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140

1141 1142 1143 1144 1145 1146 1147 1148 1149 1150 1151 1152

1153 1154 1155 1156 1157 1158 1159 1160 1161 1162 1163 1164

1165 1166 1167 1168 1169 1170 1171 1172 1173 1174 1175 1176

1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188

1189 1190 1191 1192 1193 1194 1195 1196 1197 1198 1199 1200

1201 1202 1203 1204 1205 1206 1207 1208 1209 1210 1211 1212

1213 1214 1215 1216 1217 1218 1219 1220 1221 1222 1223 1224

1225 1226 1227 1228 1229 1230 1231 1232 1233 1234 1235 1236

1237 1238 1239 1240 1241 1242 1243 1244 1245 1246 1247 1248

1249 1250 1251 1252 1253 1254 1255 1256 1257 1258 1259 1260

1261 1262 1263 1264 1265 1266 1267 1268 1269 1270 1271 1272

1273 1274 1275 1276 1277 1278 1279 1280 1281 1282 1283 1284

1285 1286 1287 1288 1289 1290 1291 1292 1293 1294 1295 1296

1297 1298 1299 1300 1301 1302 1303 1304 1305 1306 1307 1308

1309 1310 1311 1312 1313 1314 1315 1316 1317 1318 1319 1320

DATE RECEIVED (MWA USE ONLY) 070676
OWNER: GANLEY, Timothy B
STREET OR RFD: 1599 East Street
POST OFFICE: Frederick, Md.
WRA PERMIT NUMBER: FR-76-3819
FILL IN THIS FORM COMPLETELY

DRILLER INFORMATION
B-11 CONTINUED
DATE: 6-30-76
LICENSE NUMBER: 144
FIRST NAME: KAYSER, GAVIN, JR.
SIGNATURE: Gavin N. Kaiser

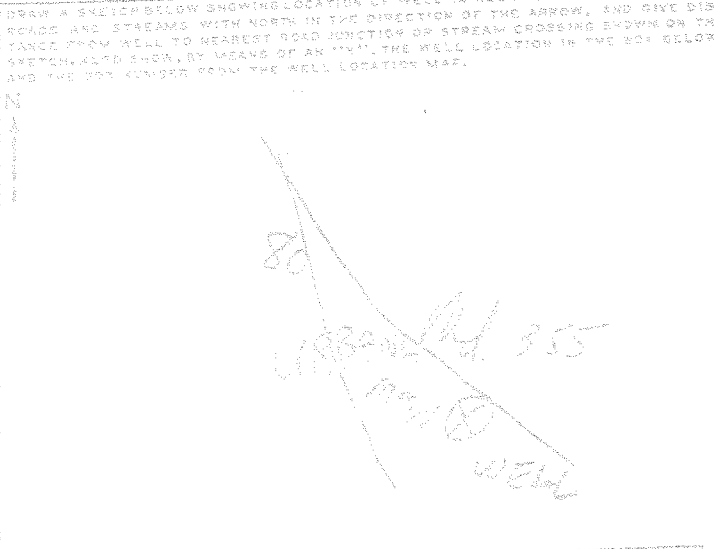
WELL INFORMATION
B-12
MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 3
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 900
USE FOR WATER (CIRCLE APPROPRIATE BOX):
☒ HOME, WIRELESS OR CABLE TELEPHONE UNIT ONLY
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
☐ MUNICIPAL WATER SUPPLY
☐ PRIVATE WATER COMPANY
☐ TEST
APPROXIMATE DEPTH OF WELL: 300 FEET
APPROXIMATE DIAMETER OF WELL: 6 INCHES
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD):
ACREAGE OF AQUIFER: 100 ACRES
CITY: ANNAPOLIS
COUNTY: ST. MARY'S

NOT TO BE FILLED IN BY DRILLER (MWA USE ONLY)
APPROPRIATION PERMIT REQUIRED: []
ENGINEER REVIEW: []
FORCE: []
WRITE INITIALS IN BOX: []
CONDITIONS: []
HEALTH DEPARTMENT APPROVAL: []
SIGNED BY: []
DATE: []

HEALTH DEPARTMENT APPROVAL
B-14 CONTINUED
STATE DEPT. HEALTH: []
COUNTY HEALTH: []
SIGNED BY: []
DATE: []
APPROVED: []

LOCATION OF WELL
B-13
COUNTY: Frederick
SUBDIVISION: Urbana
SECTION: B-15
LOT: 10
NEAREST TOWN: Urbana
MILES FROM TOWN CENTER OR IF IN TOWN: 0

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
B-14
NORTH, SOUTH, EAST, WEST, NORTHEAST, SOUTHWEST, NORTHWEST, SOUTHWEST
NEARBY ROAD: Main St
DISTANCE FROM ROAD: 20
DIRECTION FROM ROAD: []



BOX NUMBER: 690, 540
ELEVATION AT DRILL HEAD (FEET): 5100000
ELEVATION AT DRILL HEAD (FEET): 5675000
SIGNED BY: []
DATE: []

C 1 8286
 1 2 3 1522 400 5
 THIS NUMBER IS TO BE PUNCHED
 IN COLS. 3-5 ON ALL CARDS
 DATE RECEIVED
 080370
 DATE WELL COMPLETED
 7-26-76
 DEPTH OF WELL
 85'
 22 (TO NEAREST FOOT) 25
 PERMIT NO. FROM "PERMIT TO DRILL WELL"
 76-710
 COUNTY NUMBER
 76-710
 DRILLERS IDENTIFICATION NO.
 144

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAVES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

OWNER
 LAST NAME
 STREET OR RFD
 1599 East St. POST OFFICE
 Frederick, Md.

FIRST NAME
 Frederick, Md.

WELL LOG
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR
 COLOR, DEPTH, THICKNESS AND IF WATER BEARING
 DESCRIPTION
 (USE ADDITIONAL SHEETS
 IF NECESSARY)

GROUTING RECORD
 WELL HAS BEEN GROUTED
 (CIRCLE APPROPRIATE BOX)
 YES ☒ NO ☐
 TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT ☒ BENTONITE CLAY ☐
 NO. OF BAGS 9 NO. OF POUNDS 900
 GALLONS OF WATER 45
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 TO 49 FT.
 (ENTER 0 IF FROM SURFACE)

PUMPING TEST
 HOURS PUMPED (TO NEAREST HOUR) 2
 PUMPING RATE
 GALLONS PER MINUTE TO NEAREST GALLON 20
 METHOD USED TO
 MEASURE PUMPING RATE AIR
 WATER LEVEL (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 40 (NEAREST FOOT)
 WHEN PUMPING 50 (NEAREST FOOT)
 TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX
 FOR PUMPING TEST)
 A AIR ☒ B PISTON ☐ T TURBINE
 C CENTRIFUGAL ☐ R ROTARY ☐ OTHER DESCRIBE BELOW
 J JET ☐ S SUBMERSIBLE

OB C 80
 Slate 20 85'
 STRENGTH
 60 ft
 Casing 2 6 1/4" ID

CASING RECORD
 INSERT
 APPROPRIATE
 CODE
 RELOC
 MAIN CASING
 TYPE
 NOMINAL DIAMETER
 TOP MAIN CASING
 (NEAREST INCH)
 TOTAL DEPTH
 OF MAIN CASING
 (NEAREST FOOT)
 S T 6 49

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 ☒ NO ☐
 CAPACITY
 GALLONS PER MINUTE
 (TO NEAREST GALLON) 20
 PUMP HORSE POWER 20
 PUMP COUNTRY LENGTH
 (NEAREST FOOT) 42

OTHER CASING (IF USED)
 DIAMETER (INCH) DEPTH (FEET)
 FROM TO
 SCREEN RECORD
 FILTER TYPE
 APPROPRIATE
 CODE
 S T 6 49

CASING HEIGHT
 CIRCLE A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z
 LAND SURFACE
 (NEAREST FOOT)

CIRCLE APPROPRIATE BOXES
 A WELL WAS ABANDONED AND SEALED WHEN THIS
 WELL WAS COMPLETED
 B ELECTRIC LOG OBTAINED
 C THIS WELL CONVERTED TO PRODUCTION WELL
 I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL
 CONDITIONS STATED BY THE ABOVE-CITATIONED "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
 Robert Hocking
 SIGNATURE

DEPTH (NEAREST FOOT)
 85'
 DIAMETER AT DEPTH (NEAREST INCH)
 6 1/4"
 TRAVEL PACE
 IF WELL DRILLED WITH
 FLOWING WELL CIRCLE NO.
 88 F
 WEA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 70 75 80 85 90 95 100 105 110 115 120 125 130 135 140 145 150 155 160 165 170 175 180 185 190 195 200

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, IS,
 SEPTIC TANKS, AND/OR OTHER LAND MARKS AND
 INDICATE NOT LESS THAN TWO DISTANCES
 NEAREST TO WELL.
 well 10' House

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

FR-73-3978
FILL IN THIS FORM COMPLETELY

B 1 2583

SEQUENCE NO.
(FOR USE ONLY)1 2 3 (REQ. NO.) 4
THIS NUMBER IS TO BE PUNCHED
IN COLUMNS 3-4 ON ALL CARDSDATE RECEIVED
(WRA USE ONLY)

882978

072176

OWNER

FPL IS LAST NAME

FIRST NAME

COL. 34

STREET
OR RFD

COL. 35

POST
OFFICE

COL. 37

DRILLER INFORMATION

B 1 3

(REQ. NO.)

LOCATION OF WELL

COUNTY

DO NOT ABBREVIATE COUNTY NAMES

21

SUGGOVISION

42

SECTION

LOT

30

NEAREST TOWN

21

MILES FROM TOWN (ENTER 0 IF IN TOWN)

76 73 72

B 1 4

DIRECTION FROM TOWN

(CIRCLE APPROPRIATE BOX)

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

NEAR

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

ON WHICH END OF ROAD

WELL APPROXIMATE BOX

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

DISTANCE FROM ROAD

ENTER DISTANCE AND CIRCLE

APPROPRIATE BOX

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

DRAW A SKETCH ON SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS,

ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DIS-

TANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE

SKETCH, ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE SET BELOW

AND THE ROAD NUMBER FROM THE WELL LOCATION MAP.

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

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E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

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SE SOUTHEAST

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1 2 3 (REQ. NO.) 4

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NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

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NE NORTHEAST

SE SOUTHEAST

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SW SOUTHWEST

1 2 3 (REQ. NO.) 4

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1 2 3 (REQ. NO.) 4

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SE SOUTHEAST

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1 2 3 (REQ. NO.) 4

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1 2 3 (REQ. NO.) 4

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1 2 3 (REQ. NO.) 4

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NE NORTHEAST

SE SOUTHEAST

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SW SOUTHWEST

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1 2 3 (REQ. NO.) 4

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NE NORTHEAST

SE SOUTHEAST

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W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

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E EAST

NE NORTHEAST

SE SOUTHEAST

S SOUTH

W WEST

NW NORTHWEST

SW SOUTHWEST

1 2 3 (REQ. NO.) 4

N NORTH

E EAST

DATE 214 9/77

C 1 3543

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAVES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 76-543

PERMIT NO. FROM "PERMIT TO DRILL WELL"
AD-103-139718

DRILLERS IDENTIFICATION NO. 72

DATE RECEIVED (FOR USE ONLY)

DATE WELL COMPLETED 1/24/77

DEPTH OF WELL 40.5

22 TO NEAREST FOOT 25

OWNER

LAST NAME

POST OFFICE

STREET OR RFD

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT C M BENTONITE CLAY B C

NO. OF PASSES 10 WT. OF GROUTS 100

GALLONS OF WATER 50

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 38 FT.

ENTERED IF FROM SURFACE

CASING RECORD

CASING TYPES

INSERT

APPROPRIATE

CODE

BELOW

STEEL

CONCRETE

PLASTIC

OTHER

MAIN CASING TYPE

STEEL

NOMINAL DIAMETER TO MAIN CASING (NEAREST INCH)

6

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

59

OTHER CASING (IF USED)

DIAMETER (INCH)

DEPTH (FEET)

RETURN TYPE

INSERT

APPROPRIATE

CODE

BELOW

STEEL

CONCRETE

PLASTIC

OTHER

WATER SOURCE

WELL

WELL

WELL

WELL

WELL

WELL

WELL

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WELL

CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS REPORT WAS COMPLETED

B WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

C WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

D WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

E WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

F WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

G WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

H WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

I WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

J WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

K WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

L WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

M WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

N WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

O WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

P WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

Q WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

R WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

S WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

T WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

U WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

V WELL WAS COMPLETED AND SEALED WHEN THIS REPORT WAS COMPLETED

DIAMETER OF TAP (NEAREST INCH)

10

TRAVEL PACK

IF WELL DRILLED WAS A

BLOWING WELL, CIRCLE BOX

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

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WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

WELL WAS ONLY (NOT TO BE FILLED IN BY DRILLER)

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

50

PUMP HORSE POWER

10

PUMP SHAFT LENGTH (NEAREST FOOT)

20

CASING WEIGHT (CIRCLE APPROPRIATE BOX)

WELL CANNOT BE USED FOR

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANK, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANT MEASUREMENTS TO WELL.

House

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

Ed

100'

30' well

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION

JAMES BOWEN OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-4067
FILL IN THIS FORM COMPLETELY

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

OWNER: **Harris Paul E Sr**
STREET OR RFD: **517 E Market Street**
CITY: **Federick, Md**
COUNTY: **Garret**

DATE: **7-10-76** LICENSE NUMBER: **144**
FIRST NAME: **Kenneth** LAST NAME: **Stanton**
SIGNATURE: **Kenneth Stanton**

WELL INFORMATION
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

LOCATION OF WELL
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

DIRECTION FROM TOWN
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STATE OF MARYLAND
DEPARTMENT OF NATURAL RESOURCES
WATER RESOURCES ADMINISTRATION
TAWES OFFICE BUILDING, ANNAPOLIS, MARYLAND



PERMIT TO DRILL WELL

ISSUE DATE- 11/05/76
MD DAY

PERMIT NUMBER- FR-73-4222

ISSUED TO DRILLER-

CLINE & DUVALL INC
RT 7 BOX 176
FREDERICK MD 21701

DRILLER
ID. NUMBER- 139

THE ABOVE NAMED DRILLER IS HEREBY AUTHORIZED TO DRILL A WELL
TO BE OWNED BY-

PETER PAN INN
C-O R BAUMGARDNER
URBANA MD

THIS WELL IS TO BE LOCATED IN FREDERICK COUNTY,
NEAR THE TOWN OF URBANA

THE WATER IS TO BE USED FOR A COMMERCIAL/INDUSTRIAL SUPPLY.

THIS WELL WILL NOT REPLACE ANOTHER WELL.

SPECIAL CONDITIONS

MONITOR DRILLING FOR GASES, FLOUORIDES, AND WATER LEVELS WITH
INSIDE TANKS OF THE-ONE-THIRD TON, SEALS BY RESONABLE CAP/PLUG
WATER SAMPLES MUST BE OBTAINED BEFORE WATER
ENTERS A TANK OR FACILITY, OR LOADED IN STORAGE TANK.

THE ABOVE CONDITIONS APPLY TO ALL APPLICATIONS

THIS PERMIT IS VALID UNTIL
05/05/77. A WELL COMPLETION
REPORT MUST BE SUBMITTED TO
THE ADMINISTRATION WITHIN 30 DAYS
AFTER COMPLETION OF THE WELL

GROUNDWATER APPROPRIATION
PERMIT NUMBER- FR69GA024

HERBERT M. SACHS
DIRECTOR, MARYLAND
WATER RESOURCES
ADMINISTRATION

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TOWNSHIP OFFICE Bldg., ANNAPOLIS, MARYLAND 21403
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-4222
FILL IN THIS FORM COMPLETELY

DATE RECEIVED
APR 15 1976

OWNER

Peter Pan Inn

FIRST NAME

LAST NAME

000578

STREET

96 Richard Bannister Dr

CITY

COUNTY

Urban, Maryland

STATE

DATE

CONTINUED

DRILLER INFORMATION

DATE

1/3

LOCATION OF WELL

COUNTY

Frederick

SUBDIVISION

SECTION

LOT

NEAREST TOWN

Urban

MILES FROM TOWN (SCALE 0.1 IN TOWN)

0

DATE

WELL INFORMATION

DATE

1/3

DIRECTION FROM TOWN

MAXIMUM PUMPING RATE (GALLONS PER MINUTE)

26

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)

6000

USE FOR WATER (CHECK APPROPRIATE BOX)

1. AGRICULTURE (CROPS OR LIVESTOCK)

2. DOMESTIC USE (RESIDENTIAL)

3. INDUSTRIAL OR COMMERCIAL (MANUFACTURING, PROCESSING, etc.)

4. MINING OR QUARRYING

5. OTHER (SPECIFY)

6. FLOOD CONTROL

7. RECREATION

8. OTHER (SPECIFY)

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STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
FR-13-4631
FILL IN THIS FORM COMPLETELY

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DATE RECEIVED
042677
CONTINUED
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OWNER: **Maffett, Wayne R.**
STREET OR RFD: **Rt. 13, Box 139**
CITY: **Frederick, Md. 21701**

DRILLER INFORMATION
DATE: **7-25-77**
LICENSE NUMBER: **144**
DRILLER: **Koyser - Carver, Inc.**
SIGNATURE: **Anton A. Koyser**

WELL INFORMATION
WELL DEPTH: **3**
WELL TYPE: **905**
WELL USE: **USE FOR WATER**

WELL LOCATION
WELL DEPTH: **3**
WELL TYPE: **905**
WELL USE: **USE FOR WATER**

HEALTH DEPARTMENT APPROVAL
DATE: **7-25-77**
SIGNATURE: **D. Russell**

LOCATION OF WELL
COUNTY: **Frederick**
SUBDIVISION: **13**
SECTION: **14**
NEAREST TOWN: **13**
MILES FROM TOWN: **13**
DIRECTION FROM TOWN: **13**

WELL LOCATION
WELL DEPTH: **3**
WELL TYPE: **905**
WELL USE: **USE FOR WATER**

HEALTH DEPARTMENT APPROVAL
DATE: **7-25-77**
SIGNATURE: **D. Russell**

EM 4004

EMERGENCY NO. (If any)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAVES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
FR-73-4806

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)

OWNER
LAWSON DONALD

STREET OR RFD
Box 158

POST OFFICE
Spinnville Md.

DRILLER INFORMATION
DATE 4/1/77
LICENSE NUMBER 42

DRILLER
L. A. CARTER

WELL INFORMATION
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)
USE FOR WATER (WRA USE ONLY)

APPROXIMATE DEPTH OF WELL
APPROXIMATE DIAMETER OF WELL

HEALTH DEPARTMENT APPROVAL
FREDERICK 77-1817

LOCATION OF WELL
COUNTY
SUBDIVISION
SECTION
NEAREST TOWN
MILES FROM TOWN (ENTER 0 IF IN TOWN)
DIRECTION FROM TOWN
WELL WHAT
ON WHICH SIDE OF ROAD
DISTANCE FROM ROAD

FR-77-1-26

700
640
540000
0700000

EMERGENCY NO. (410) 327-1111

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION

TAVERNS STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WHA PERMIT NUMBER

FR-73-4954

FILL IN THIS FORM COMPLETELY

DATE RECEIVED
NOVA USE ONLY

OWNER

COL 13 LAST

Exxon Company

FIRST NAME

COL 13

ADDRESS

COL 13

Urbana Md.

POST OFFICE

COL 13

LOCATION OF WELL

COUNTY

COL 13

Calvert

SUBDIVISION

COL 13

SECTION

COL 13

LOT

COL 13

NEAREST TOWN

COL 13

Urbana

MILES FROM TOWN WATER 0 IF IN TOWN

COL 13

DIRECTION FROM TOWN

CIRCLE APPROPRIATE CODE

1

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EMERGENCY NO. (If any)

WRA PERMIT NUMBER

FR 73-5130

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FILL IN THIS FORM COMPLETELY

DATE RECEIVED
DATE OF PERMIT
DATE OF EXPIRATION

OWNER
COL IS LAST NAME

STREET
OR RFD

CITY
OR TOWNSHIP

DRILLER INFORMATION

LICENSE
NUMBER

SIGNATURE
DATE

WELL INFORMATION

APPROXIMATE DEPTH OF WELL IN FEET

APPROXIMATE DEPTH OF WATER IN FEET

APPROXIMATE DEPTH OF WATER IN FEET

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COUNTY

SUBDIVISION

SECTION

NEAREST TOWN

MILES FROM TOWN

DIRECTION FROM TOWN

APPROXIMATE DEPTH OF WATER IN FEET

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STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAVES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 77-1652

PERMIT NO. FROM "PERMIT TO DRILL WELL"
FR-73-5130

DRILLER'S IDENTIFICATION NO. 217

William F. Adamson

POST OFFICE

OWNER

LAST NAME

STREET OR RD.

Rt 1 - Box 110

WELL DEPTH

GRouting RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CIRCLE TYPE)

DEPTH 4 FEET

NO. OF BAGS 25

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 TO 20 FEET

(ENTER 0 IF GROUT SURFACE)

PISTON RECORD

PISTON TYPE: 37, 4, 21

MAIN CASING TYPE: 37, 4, 21

NOMINAL DIAMETER OF MAIN CASING (NEAREST INCH)

TESTING METHOD (NEAREST FOOT)

37, 4, 21

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON)

METHOD USED TO MEASURE PUMPING RATE

ROTARY

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 20 FEET

WHEN PUMPING 99 FEET

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

1. CENTRIFUGAL 2. ROTARY 3. OTHER (DESCRIBE BELOW)

4. JET 5. SUBMERSIBLE

PUMP INSTALLED

NAME OF PUMP (CIRCLE APPROPRIATE BOX)

1. 1/2" 2. 1" 3. 1 1/2" 4. 2" 5. 2 1/2" 6. 3" 7. 4" 8. 6" 9. 8" 10. 10" 11. 12" 12. 14" 13. 16" 14. 18" 15. 20" 16. 24" 17. 30" 18. 36" 19. 42" 20. 48" 21. 54" 22. 60" 23. 72" 24. 84" 25. 96" 26. 108" 27. 120" 28. 144" 29. 168" 30. 192" 31. 216" 32. 240" 33. 264" 34. 288" 35. 312" 36. 336" 37. 360" 38. 384" 39. 408" 40. 432" 41. 456" 42. 480" 43. 504" 44. 528" 45. 552" 46. 576" 47. 600" 48. 624" 49. 648" 50. 672" 51. 696" 52. 720" 53. 744" 54. 768" 55. 792" 56. 816" 57. 840" 58. 864" 59. 888" 60. 912" 61. 936" 62. 960" 63. 984" 64. 1008" 65. 1032" 66. 1056" 67. 1080" 68. 1104" 69. 1128" 70. 1152" 71. 1176" 72. 1200" 73. 1224" 74. 1248" 75. 1272" 76. 1296" 77. 1320" 78. 1344" 79. 1368" 80. 1392" 81. 1416" 82. 1440" 83. 1464" 84. 1488" 85. 1512" 86. 1536" 87. 1560" 88. 1584" 89. 1608" 90. 1632" 91. 1656" 92. 1680" 93. 1704" 94. 1728" 95. 1752" 96. 1776" 97. 1800" 98. 1824" 99. 1848" 100. 1872" 101. 1896" 102. 1920" 103. 1944" 104. 1968" 105. 1992" 106. 2016" 107. 2040" 108. 2064" 109. 2088" 110. 2112" 111. 2136" 112. 2160" 113. 2184" 114. 2208" 115. 2232" 116. 2256" 117. 2280" 118. 2304" 119. 2328" 120. 2352" 121. 2376" 122. 2400" 123. 2424" 124. 2448" 125. 2472" 126. 2496" 127. 2520" 128. 2544" 129. 2568" 130. 2592" 131. 2616" 132. 2640" 133. 2664" 134. 2688" 135. 2712" 136. 2736" 137. 2760" 138. 2784" 139. 2808" 140. 2832" 141. 2856" 142. 2880" 143. 2904" 144. 2928" 145. 2952" 146. 2976" 147. 3000" 148. 3024" 149. 3048" 150. 3072" 151. 3096" 152. 3120" 153. 3144" 154. 3168" 155. 3192" 156. 3216" 157. 3240" 158. 3264" 159. 3288" 160. 3312" 161. 3336" 162. 3360" 163. 3384" 164. 3408" 165. 3432" 166. 3456" 167. 3480" 168. 3504" 169. 3528" 170. 3552" 171. 3576" 172. 3600" 173. 3624" 174. 3648" 175. 3672" 176. 3696" 177. 3720" 178. 3744" 179. 3768" 180. 3792" 181. 3816" 182. 3840" 183. 3864" 184. 3888" 185. 3912" 186. 3936" 187. 3960" 188. 3984" 189. 4008" 190. 4032" 191. 4056" 192. 4080" 193. 4104" 194. 4128" 195. 4152" 196. 4176" 197. 4200" 198. 4224" 199. 4248" 200. 4272" 201. 4296" 202. 4320" 203. 4344" 204. 4368" 205. 4392" 206. 4416" 207. 4440" 208. 4464" 209. 4488" 210. 4512" 211. 4536" 212. 4560" 213. 4584" 214. 4608" 215. 4632" 216. 4656" 217. 4680" 218. 4704" 219. 4728" 220. 4752" 221. 4776" 222. 4800" 223. 4824" 224. 4848" 225. 4872" 226. 4896" 227. 4920" 228. 4944" 229. 4968" 230. 4992" 231. 5016" 232. 5040" 233. 5064" 234. 5088" 235. 5112" 236. 5136" 237. 5160" 238. 5184" 239. 5208" 240. 5232" 241. 5256" 242. 5280" 243. 5304" 244. 5328" 245. 5352" 246. 5376" 247. 5400" 248. 5424" 249. 5448" 250. 5472" 251. 5496" 252. 5520" 253. 5544" 254. 5568" 255. 5592" 256. 5616" 257. 5640" 258. 5664" 259. 5688" 260. 5712" 261. 5736" 262. 5760" 263. 5784" 264. 5808" 265. 5832" 266. 5856" 267. 5880" 268. 5904" 269. 5928" 270. 5952" 271. 5976" 272. 6000" 273. 6024" 274. 6048" 275. 6072" 276. 6096" 277. 6120" 278. 6144" 279. 6168" 280. 6192" 281. 6216" 282. 6240" 283. 6264" 284. 6288" 285. 6312" 286. 6336" 287. 6360" 288. 6384" 289. 6408" 290. 6432" 291. 6456" 292. 6480" 293. 6504" 294. 6528" 295. 6552" 296. 6576" 297. 6600" 298. 6624" 299. 6648" 300. 6672" 301. 6696" 302. 6720" 303. 6744" 304. 6768" 305. 6792" 306. 6816" 307. 6840" 308. 6864" 309. 6888" 310. 6912" 311. 6936" 312. 6960" 313. 6984" 314. 7008" 315. 7032" 316. 7056" 317. 7080" 318. 7104" 319. 7128" 320. 7152" 321. 7176" 322. 7200" 323. 7224" 324. 7248" 325. 7272" 326. 7296" 327. 7320" 328. 7344" 329. 7368" 330. 7392" 331. 7416" 332. 7440" 333. 7464" 334. 7488" 335. 7512" 336. 7536" 337. 7560" 338. 7584" 339. 7608" 340. 7632" 341. 7656" 342. 7680" 343. 7704" 344. 7728" 345. 7752" 346. 7776" 347. 7800" 348. 7824" 349. 7848" 350. 7872" 351. 7896" 352. 7920" 353. 7944" 354. 7968" 355. 7992" 356. 8016" 357. 8040" 358. 8064" 359. 8088" 360. 8112" 361. 8136" 362. 8160" 363. 8184" 364. 8208" 365. 8232" 366. 8256" 367. 8280" 368. 8304" 369. 8328" 370. 8352" 371. 8376" 372. 8400" 373. 8424" 374. 8448" 375. 8472" 376. 8496" 377. 8520" 378. 8544" 379. 8568" 380. 8592" 381. 8616" 382. 8640" 383. 8664" 384. 8688" 385. 8712" 386. 8736" 387. 8760" 388. 8784" 389. 8808" 390. 8832" 391. 8856" 392. 8880" 393. 8904" 394. 8928" 395. 8952" 396. 8976" 397. 9000" 398. 9024" 399. 9048" 400. 9072" 401. 9096" 402. 9120" 403. 9144" 404. 9168" 405. 9192" 406. 9216" 407. 9240" 408. 9264" 409. 9288" 410. 9312" 411. 9336" 412. 9360" 413. 9384" 414. 9408" 415. 9432" 416. 9456" 417. 9480" 418. 9504" 419. 9528" 420. 9552" 421. 9576" 422. 9600" 423. 9624" 424. 9648" 425. 9672" 426. 9696" 427. 9720" 428. 9744" 429. 9768" 430. 9792" 431. 9816" 432. 9840" 433. 9864" 434. 9888" 435. 9912" 436. 9936" 437. 9960" 438. 9984" 439. 10000

UNCERTAIN APPROPRIATE BOXES

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EMERGENCY NO. 11 (MD)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAKES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

FR-73-5167

FILL IN THIS FORM COMPLETELY

0111082

DATE RECEIVED
OFFICE USE ONLY

0811777

OWNER

COL TO LAST NAME

STREET
OR RFD

COL CO

POST
OFFICE

COL CO

DRILLER INFORMATION

DATE Aug 9, 1977

LICENSE
NUMBER

139

Robert L. Cline
FIRST NAME LAST NAME

Robert L. Cline
SIGNATURE

WELL INFORMATION

MEASURING PUMPING RATE (GALLONS PER MINUTE)

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)

USE FOR WATER SUPPLY (CIRCLE APPROPRIATE BOX)

FOR IRRIGATION (CIRCLE APPROPRIATE BOX)

FOR OTHER (CIRCLE APPROPRIATE BOX)

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FOR OTHER (CIRCLE APPROPRIATE BOX)

COUNTY Frederick

SUBDIVISION

SECTION

NEAREST TOWN Urbana

MILES FROM TOWN CENTER 0 IN IN TOWN 73

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

FOR OTHER (CIRCLE APPROPRIATE BOX)

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FOR OTHER (CIRCLE APPROPRIATE BOX)

FR69GAPO24

WELL NUMBER 700

WELL DEPTH 540

WELL TYPE 1

WELL STATUS 1

WELL LOCATION 1

WELL OWNER 1

WELL DATE 1

7841

THIS NUMBER IS TO BE PUNCHED IN COLUMNS 1-2 ON ALL CARDS

DATE RECEIVED (PRA USE ONLY)

120577

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

PERMIT NO. FROM "PERMIT TO DRILL WELLS"

FR-73-5343

223

OWNER: GRAY FRANCES

STREET OR RD: Box 118 Big Woods Rd.

DEPTH OF WELL: 165'

DATE WELL COMPLETED: Nov 1, 1977

TRILLERY IDENTIFICATION NO.:

WELL LOG

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

DESCRIPTION	FEET	WATER BEARING
Top Soil	0 - 2	
Brown Shale	2 - 11	
Brown Slate	11 - 30	
Blue Slate	30 - 35	
Brown Slate	35 - 40	
Blue Slate	40 - 165	

WELL DESCRIPTION

GRouting RECORD

WELL HAD BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT ☒ PORTLAND CEMENT ☐

NO. OF BAGS: 5 NO. OF CUBIC YD: 500

SALLONS OF WATER: 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 21 FT.

PUMPING TEST

HOURS PUMPED IN NEAREST HOUR: 4

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON): 2

METHOD USED TO MEASURE PUMPING RATE: Bucket

CASING RECORD

CASING TYPE: INSERT ☒ JOINTED ☐ SPOUT ☐

MIN. CASING TYPE: 5

MIN. CASING TYPE: 6

MIN. CASING TYPE: 23

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING: 40

WHEN PUMPING: 165

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

PERMANENT ☐ PORTABLE ☐ SUBMERSIBLE ☐

WELL CAP ☐ WELL COVER ☐ WELL HEAD ☐

OTHER CLOSING DEVICES

WELL HEAD ☐ WELL COVER ☐ WELL HEAD ☐

WELL CAP ☐ WELL COVER ☐ WELL HEAD ☐

WELL LOCATION

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION

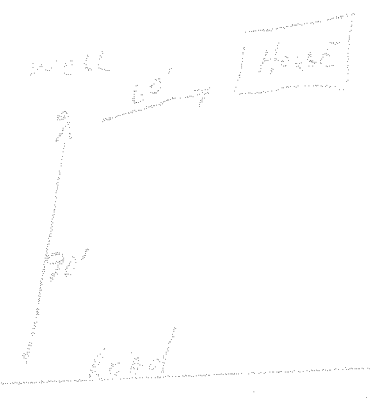
WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)

WELL LOCATION (DISTANCE FROM NEAREST CORNER OF LOT)



STATE OF MARYLAND
DEPARTMENT OF NATURAL RESOURCES
WATER RESOURCES ADMINISTRATION
TAWES OFFICE BUILDING, ANNAPOLIS, MARYLAND



PERMIT TO DRILL WELL

ISSUE DATE- 05/03/78
NO. 04-78

PERMIT NUMBER- FR 73-5874

ISSUED TO DRILLER-

CLINE & DUVALL INC
PT 7 BOX 176
FREDERICK MD 21701

DRILLER
ID. NUMBER- 139

THE ABOVE NAMED DRILLER IS HEREBY AUTHORIZED TO DRILL A WELL
TO BE OWNED BY-

GRAY, CHARLES
BX 117A BIG WOODS RD
IJAMSVILLE MD 21754

THIS WELL IS TO BE LOCATED IN FREDERICK COUNTY,
NEAR THE TOWN OF URBANA

THE WATER IS TO BE USED FOR DOMESTIC PURPOSES.

THIS WELL WILL REPLACE AN OLD WELL WHICH SHALL BE ABANDONED & SEALED.

CANCELLED

SPECIAL CONDITIONS

ALL CONDITIONS OF THE PERMIT SHALL BE STRICTLY OBSERVED AND VIOLATION SHALL BE CAUSE FOR REVOCATION OF THIS PERMIT TO DRILLING WELL AND VOID.

HERBERT W. TACUS
DIRECTOR, MARYLAND
WATER RESOURCES
ADMINISTRATION

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TOWNSHIP OFFICE BLDG., ANNAPOLIS, MARYLAND 21403
APPLICATION FOR PERMIT TO DRILL WELL

FR 73 5874
FILL IN THIS FORM COMPLETELY

DATE RECEIVED
(BY AGENCY ONLY)

DATE

OWNER'S NAME

1301 17th St

Rockwood, Md

Charles

FIRST NAME

LAST

DATE

ADDRESS

CITY

STATE

ZIP

DRILLER INFORMATION

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

139

WELL INFORMATION

DATE

TIME

102

102

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EMERGENCY NO. (IF ANY)

WRA PERMIT NUMBER

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR-73-6223
FILL IN THIS FORM COMPLETELY

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(WRA USE ONLY)

OWNER: EITLE
COL 15 LAST NAME
STREET OR RFD: RTE 2
COL 25
POST OFFICE: FREDERICK MD.
COL 35

DRILLER INFORMATION
LICENSE NUMBER: 217
COL 35
FIRST NAME: C.A. CROMWELL
LAST NAME: C.A. Cromwell
SIGNATURE: C.A. Cromwell

WELL INFORMATION
MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5
COL 15
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500
COL 15

USE FOR WATER (CIRCLE APPROPRIATE BOX)
☒ HOME WATER (HOUSEHOLD USE ONLY)
☐ FARMING, AGRICULTURE, IRRIGATION
☐ INDUSTRIAL, COMMERCIAL, FACTORY AND OTHER, DEVELOPMENT
☐ MUNICIPAL WATER SUPPLY
☐ OTHER (SPECIFY):

DEPT. OF HEALTH APPROVAL
DATE: 07/28/73
SIGNATURE: James D. Mc...

WATER RESOURCES ADMINISTRATION
DATE: 07/28/73
SIGNATURE: James D. Mc...

WATER RESOURCES ADMINISTRATION
DATE: 07/28/73
SIGNATURE: James D. Mc...

LOCATION OF WELL
COUNTY: FREDERICK
COL 45
SUBDIVISION: X
COL 50
SECTION: X
COL 55
NEAREST TOWN: URBANA
COL 60
MILES FROM TOWN (ENTER 0 IF IN TOWN): 1
COL 65
DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX): SE
COL 70
DISTANCE FROM ROAD: 400
COL 75

WATER RESOURCES ADMINISTRATION
DATE: 07/28/73
SIGNATURE: James D. Mc...

WATER RESOURCES ADMINISTRATION
DATE: 07/28/73
SIGNATURE: James D. Mc...

WATER RESOURCES ADMINISTRATION
DATE: 07/28/73
SIGNATURE: James D. Mc...

DATE RECEIVED
MAY 01 1979

DATE WELL COMPLETED
APRIL 25 1979

WELL NO. 10425779

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TANES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 78-2736

PERMIT NO. FROM PERMIT TO DRILL WELL 11R-120-16851

DRILLERS IDENTIFICATION NO. 139

OWNER RAYMOND RT 13 BX 840

POST OFFICE WILLIAM FREDERICK MD

STREET OR RD.

WELL LOG

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

DESCRIPTION DEPTH CHECKED IN

BROWN SHALE 0 80
GREEN SLATE 80 120

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (CIRCLE APPROPRIATE)

CEMENT (C) MORTAR (M) PORTLAND CEMENT (P) OTHER (O)

NO. OF BAGS 18 NO. OF POUNDS 1692

DEPTHS OF WATER 108

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 TO 87

CASING RECORD

INNER (C) OUTER (O)

TYPE OF CASING (CIRCLE APPROPRIATE)

STEEL (S) IRON (I) ALUMINUM (A) OTHER (O)

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

OTHER CASING (IF USED)

DIAMETER DEPTH

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

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W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1

PUMPING RATE GALLONS PER MINUTE TO NEAREST GALLON 30

METHOD USED TO MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 30

WHEN PUMPING 120

TYPE OF PUMP USED (CIRCLE APPROPRIATE)

(A) PERISTALTIC (B) DIAPHRAGM (C) PISTON (D) OTHER

(A) PERISTALTIC (B) DIAPHRAGM (C) PISTON (D) OTHER

PUMP INSTALLED

TYPE OF PUMP (CIRCLE APPROPRIATE)

(A) PERISTALTIC (B) DIAPHRAGM (C) PISTON (D) OTHER

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

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W. CASING TYPE S I A O

W. CASING TYPE S I A O

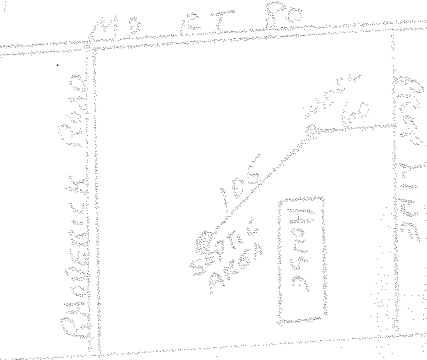
W. CASING TYPE S I A O

W. CASING TYPE S I A O

W. CASING TYPE S I A O

CIRCLE APPROPRIATE POWER

1/2 HP (A) 1 HP (B) 1 1/2 HP (C) 2 HP (D) 3 HP (E) 4 HP (F) 5 HP (G) 6 HP (H) 7 HP (I) 8 HP (J) 9 HP (K) 10 HP (L) 11 HP (M) 12 HP (N) 13 HP (O) 14 HP (P) 15 HP (Q) 16 HP (R) 17 HP (S) 18 HP (T) 19 HP (U) 20 HP (V) 21 HP (W) 22 HP (X) 23 HP (Y) 24 HP (Z) 25 HP (AA) 26 HP (AB) 27 HP (AC) 28 HP (AD) 29 HP (AE) 30 HP (AF) 31 HP (AG) 32 HP (AH) 33 HP (AI) 34 HP (AJ) 35 HP (AK) 36 HP (AL) 37 HP (AM) 38 HP (AN) 39 HP (AO) 40 HP (AP) 41 HP (AQ) 42 HP (AR) 43 HP (AS) 44 HP (AT) 45 HP (AU) 46 HP (AV) 47 HP (AW) 48 HP (AX) 49 HP (AY) 50 HP (AZ) 51 HP (BA) 52 HP (BB) 53 HP (BC) 54 HP (BD) 55 HP (BE) 56 HP (BF) 57 HP (BG) 58 HP (BH) 59 HP (BI) 60 HP (BJ) 61 HP (BK) 62 HP (BL) 63 HP (BM) 64 HP (BN) 65 HP (BO) 66 HP (BP) 67 HP (BQ) 68 HP (BR) 69 HP (BS) 70 HP (BT) 71 HP (BU) 72 HP (BV) 73 HP (BW) 74 HP (BX) 75 HP (BY) 76 HP (BZ) 77 HP (CA) 78 HP (CB) 79 HP (CC) 80 HP (CD) 81 HP (CE) 82 HP (CF) 83 HP (CG) 84 HP (CH) 85 HP (CI) 86 HP (CJ) 87 HP (CK) 88 HP (CL) 89 HP (CM) 90 HP (CN) 91 HP (CO) 92 HP (CP) 93 HP (CQ) 94 HP (CR) 95 HP (CS) 96 HP (CT) 97 HP (CU) 98 HP (CV) 99 HP (CW) 100 HP (CX) 101 HP (CY) 102 HP (CZ) 103 HP (DA) 104 HP (DB) 105 HP (DC) 106 HP (DD) 107 HP (DE) 108 HP (DF) 109 HP (DG) 110 HP (DH) 111 HP (DI) 112 HP (DJ) 113 HP (DK) 114 HP (DL) 115 HP (DM) 116 HP (DN) 117 HP (DO) 118 HP (DP) 119 HP (DQ) 120 HP (DR) 121 HP (DS) 122 HP (DT) 123 HP (DU) 124 HP (DV) 125 HP (DW) 126 HP (DX) 127 HP (DY) 128 HP (DZ) 129 HP (EA) 130 HP (EB) 131 HP (EC) 132 HP (ED) 133 HP (EE) 134 HP (EF) 135 HP (EG) 136 HP (EH) 137 HP (EI) 138 HP (EJ) 139 HP (EK) 140 HP (EL) 141 HP (EM) 142 HP (EN) 143 HP (EO) 144 HP (EP) 145 HP (EQ) 146 HP (ER) 147 HP (ES) 148 HP (ET) 149 HP (EU) 150 HP (EV) 151 HP (EW) 152 HP (EX) 153 HP (EY) 154 HP (EZ) 155 HP (FA) 156 HP (FB) 157 HP (FC) 158 HP (FD) 159 HP (FE) 160 HP (FF) 161 HP (FG) 162 HP (FH) 163 HP (FI) 164 HP (FJ) 165 HP (FK) 166 HP (FL) 167 HP (FM) 168 HP (FN) 169 HP (FO) 170 HP (FP) 171 HP (FQ) 172 HP (FR) 173 HP (FS) 174 HP (FT) 175 HP (FU) 176 HP (FV) 177 HP (FW) 178 HP (FX) 179 HP (FY) 180 HP (FZ) 181 HP (GA) 182 HP (GB) 183 HP (GC) 184 HP (GD) 185 HP (GE) 186 HP (GF) 187 HP (GG) 188 HP (GH) 189 HP (GI) 190 HP (GJ) 191 HP (GK) 192 HP (GL) 193 HP (GM) 194 HP (GN) 195 HP (GO) 196 HP (GP) 197 HP (GQ) 198 HP (GR) 199 HP (GS) 200 HP (GT) 201 HP (GU) 202 HP (GV) 203 HP (GW) 204 HP (GX) 205 HP (GY) 206 HP (GZ) 207 HP (HA) 208 HP (HB) 209 HP (HC) 210 HP (HD) 211 HP (HE) 212 HP (HF) 213 HP (HG) 214 HP (HH) 215 HP (HI) 216 HP (HJ) 217 HP (HK) 218 HP (HL) 219 HP (HM) 220 HP (HN) 221 HP (HO) 222 HP (HP) 223 HP (HQ) 224 HP (HR) 225 HP (HS) 226 HP (HT) 227 HP (HU) 228 HP (HV) 229 HP (HW) 230 HP (HX) 231 HP (HY) 232 HP (HZ) 233 HP (IA) 234 HP (IB) 235 HP (IC) 236 HP (ID) 237 HP (IE) 238 HP (IF) 239 HP (IG) 240 HP (IH) 241 HP (II) 242 HP (IJ) 243 HP (IK) 244 HP (IL) 245 HP (IM) 246 HP (IN) 247 HP (IO) 248 HP (IP) 249 HP (IQ) 250 HP (IR) 251 HP (IS) 252 HP (IT) 253 HP (IU) 254 HP (IV) 255 HP (IW) 256 HP (IX) 257 HP (IY) 258 HP (IZ) 259 HP (JA) 260 HP (JB) 261 HP (JC) 262 HP (JD) 263 HP (JE) 264 HP (JF) 265 HP (JG) 266 HP (JH) 267 HP (JI) 268 HP (JJ) 269 HP (JK) 270 HP (JL) 271 HP (JM) 272 HP (JN) 273 HP (JO) 274 HP (JP) 275 HP (JQ) 276 HP (JR) 277 HP (JS) 278 HP (JT) 279 HP (JU) 280 HP (JV) 281 HP (JW) 282 HP (JX) 283 HP (JY) 284 HP (JZ) 285 HP (KA) 286 HP (KB) 287 HP (KC) 288 HP (KD) 289 HP (KE) 290 HP (KF) 291 HP (KG) 292 HP (KH) 293 HP (KI) 294 HP (KJ) 295 HP (KK) 296 HP (KL) 297 HP (KM) 298 HP (KN) 299 HP (KO) 300 HP (KP) 301 HP (KQ) 302 HP (KR) 303 HP (KS) 304 HP (KT) 305 HP (KU) 306 HP (KV) 307 HP (KW) 308 HP (KX) 309 HP (KY) 310 HP (KZ) 311 HP (LA) 312 HP (LB) 313 HP (LC) 314 HP (LD) 315 HP (LE) 316 HP (LF) 317 HP (LG) 318 HP (LH) 319 HP (LI) 320 HP (LJ) 321 HP (LK) 322 HP (LL) 323 HP (LM) 324 HP (LN) 325 HP (LO) 326 HP (LP) 327 HP (LQ) 328 HP (LR) 329 HP (LS) 330 HP (LT) 331 HP (LU) 332 HP (LV) 333 HP (LW) 334 HP (LX) 335 HP (LY) 336 HP (LZ) 337 HP (MA) 338 HP (MB) 339 HP (MC) 340 HP (MD) 341 HP (ME) 342 HP (MF) 343 HP (MG) 344 HP (MH) 345 HP (MI) 346 HP (MJ) 347 HP (MK) 348 HP (ML) 349 HP (MM) 350 HP (MN) 351 HP (MO) 352 HP (MP) 353 HP (MQ) 354 HP (MR) 355 HP (MS) 356 HP (MT) 357 HP (MU) 358 HP (MV) 359 HP (MW) 360 HP (MX) 361 HP (MY) 362 HP (MZ) 363 HP (NA) 364 HP (NB) 365 HP (NC) 366 HP (ND) 367 HP (NE) 368 HP (NF) 369 HP (NG) 370 HP (NH) 371 HP (NI) 372 HP (NJ) 373 HP (NK) 374 HP (NL) 375 HP (NM) 376 HP (NN) 377 HP (NO) 378 HP (NP) 379 HP (NQ) 380 HP (NR) 381 HP (NS) 382 HP (NT) 383 HP (NU) 384 HP (NV) 385 HP (NW) 386 HP (NX) 387 HP (NY) 388 HP (NZ) 389 HP (OA) 390 HP (OB) 391 HP (OC) 392 HP (OD) 393 HP (OE) 394 HP (OF) 395 HP (OG) 396 HP (OH) 397 HP (OI) 398 HP (OJ) 399 HP (OK) 400 HP (OL) 401 HP (OM) 402 HP (ON) 403 HP (OO) 404 HP (OP) 405 HP (OQ) 406 HP (OR) 407 HP (OS) 408 HP (OT) 409 HP (OU) 410 HP (OV) 411 HP (OW) 412 HP (OX) 413 HP (OY) 414 HP (OZ) 415 HP (PA) 416 HP (PB) 417 HP (PC) 418 HP (PD) 419 HP (PE) 420 HP (PF) 421 HP (PG) 422 HP (PH) 423 HP (PI) 424 HP (PJ) 425 HP (PK) 426 HP (PL) 427 HP (PM) 428 HP (PN) 429 HP (PO) 430 HP (PP) 431 HP (PQ) 432 HP (PR) 433 HP (PS) 434 HP (PT) 435 HP (PU) 436 HP (PV) 437 HP (PW) 438 HP (PX) 439 HP (PY) 440 HP (PZ) 441 HP (QA) 442 HP (QB) 443 HP (QC) 444 HP (QD) 445 HP (QE) 446 HP (QF) 447 HP (QG) 448 HP (QH) 449 HP (QI) 450 HP (QJ) 451 HP (QK) 452 HP (QL) 453 HP (QM) 454 HP (QN) 455 HP (QO) 456 HP (QP) 457 HP (QQ) 458 HP (QR) 459 HP (QS) 460 HP (QT) 461 HP (QU) 462 HP (QV) 463 HP (QW) 464 HP (QX) 465 HP (QY) 466 HP (QZ) 467 HP (RA) 468 HP (RB) 469 HP (RC) 470 HP (RD) 471 HP (RE) 472 HP (RF) 473 HP (RG) 474 HP (RH) 475 HP (RI) 476 HP (RJ) 477 HP (RK) 478 HP (RL) 479 HP (RM) 480 HP (RN) 481 HP (RO) 482 HP (RP) 483 HP (RQ) 484 HP (RR) 485 HP (RS) 486 HP (RT) 487 HP (RU) 488 HP (RV) 489 HP (RW) 490 HP (RX) 491 HP (RY) 492 HP (RZ) 493 HP (SA) 494 HP (SB) 495 HP (SC) 496 HP (SD) 497 HP (SE) 498 HP (SF) 499 HP (SG) 500 HP (SH) 501 HP (SI) 502 HP (SJ) 503 HP (SK) 504 HP (SL) 505 HP (SM) 506 HP (SN) 507 HP (SO) 508 HP (SP) 509 HP (SQ) 510 HP (SR) 511 HP (SS) 512 HP (ST) 513 HP (SU) 514 HP (SV) 515 HP (SW) 516 HP (SX) 517 HP (SY) 518 HP (SZ) 519 HP (TA) 520 HP (TB) 521 HP (TC) 522 HP (TD) 523 HP (TE) 524 HP (TF) 525 HP (TG) 526 HP (TH) 527 HP (TI) 528 HP (TJ) 529 HP (TK) 530 HP (TL) 531 HP (TM) 532 HP (TN) 533 HP (TO) 534 HP (TP) 535 HP (TQ) 536 HP (TR) 537 HP (TS) 538 HP (TT) 539 HP (TU) 540 HP (TV) 541 HP (TW) 542 HP (TX) 543 HP (TY) 544 HP (TZ) 545 HP (UA) 546 HP (UB) 547 HP (UC) 548 HP (UD) 549 HP (UE) 550 HP (UF) 551 HP (UG) 552 HP (UH) 553 HP (UI) 554 HP (UJ) 555 HP (UK) 556 HP (UL) 557 HP (UM) 558 HP (UN) 559 HP (UO) 560 HP (UP) 561 HP (UQ) 562 HP (UR) 563 HP (US) 564 HP (UT) 565 HP (UU) 566 HP (UV) 567 HP (UW) 568 HP (UX) 569 HP (UY) 570 HP (UZ) 571 HP (VA) 572 HP (VB) 573 HP (VC) 574 HP (VD) 575 HP (VE) 576 HP (VF) 577 HP (VG) 578 HP (VH) 579 HP (VI) 580 HP (VJ) 581 HP (VK) 582 HP (VL) 583 HP (VM) 584 HP (VN) 585 HP (VO) 586 HP (VP) 587 HP (VQ) 588 HP (VR) 589 HP (VS) 590 HP (VT) 591 HP (VU) 592 HP (VV) 593 HP (VW) 594 HP (VX) 595 HP (VY) 596 HP (VZ) 597 HP (WA) 598 HP (WB) 599 HP (WC) 600 HP (WD) 601 HP (WE) 602 HP (WF) 603 HP (WG) 604 HP (WH) 605 HP (WI) 606 HP (WJ) 607 HP (WK) 608 HP (WL) 609 HP (WM) 610 HP (WN) 611 HP (WO) 612 HP (WP) 613 HP (WQ) 614 HP (WR) 615 HP (WS) 616 HP (WT) 617 HP (WU) 618 HP (WV) 619 HP (WW) 620 HP (WX) 621 HP (WY) 622 HP (WZ) 623 HP (XA) 624 HP (XB) 625 HP (XC) 626 HP (XD) 627 HP (XE) 628 HP (XF) 629 HP (XG) 630 HP (XH) 631 HP (XI) 632 HP (XJ) 633 HP (XK) 634 HP (XL) 635 HP (XM) 636 HP (XN) 637 HP (XO) 638 HP (XP) 639 HP (XQ) 640 HP (XR) 641 HP (XS) 642 HP (XT) 643 HP (XU) 644 HP (XV) 645 HP (XW) 646 HP (XX) 647 HP (XY) 648 HP (XZ) 649 HP (YA) 650 HP (YB) 651 HP (YC) 652 HP (YD) 653 HP (YE) 654 HP (YF) 655 HP (YG) 656 HP (YH) 657 HP (YI) 658 HP (YJ) 659 HP (YK) 660 HP (YL) 661 HP (YM) 662 HP (YN) 663 HP (YO) 664 HP (YP) 665 HP (YQ) 666 HP (YR) 667 HP (YS) 668 HP (YT) 669 HP (YU) 670 HP (YV) 671 HP (YW) 672 HP (YX) 673 HP (YY) 674 HP (YZ) 675 HP (ZA) 676 HP (ZB) 677 HP (ZC) 678 HP (ZD) 679 HP (ZE) 680 HP (ZF) 681 HP (ZG) 682 HP (ZH) 683 HP (ZI) 684 HP (ZJ) 685 HP (ZK) 686 HP (ZL) 687 HP (ZM) 688 HP (ZN) 689 HP (ZO) 690 HP (ZP) 691 HP (ZQ) 692 HP (ZR) 693 HP (ZS) 694 HP (ZT) 695 HP (ZU) 696 HP (ZV) 697 HP (ZW) 698 HP (ZX) 699 HP (ZY) 700 HP (ZZ)



ORIGINAL

0223

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TIMES STATE OFFICE, 1000 ANNAPOLIS MARLBOROUGH
APPLICATION FOR PERMIT TO DRILL WELL

WPA PERMIT NUMBER

FR 73-7059

FILL IN THIS FORM COMPLETELY

McKenzie

Wayne A.

OWNER

CITY OR TOWN

STREET

Route 2

POST OFFICE

Frederick, Md. 21701

DRILLER INFORMATION

DATE: July 5, 1979

LICENSE NUMBER

135

ADDRESS

City

State

PHONE NUMBER

DRILLER

CITY NAME

SIGNATURE

Robert L. Cline

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE)

APPROXIMATE DAILY QUANTITY NEEDED (GALLONS PER DAY)

USE FOR WATER (CHECK APPROPRIATE BOX)

☒ D DOMESTIC (FOR DRINKING AND DOMESTIC PURPOSES ONLY)

☐ I IRRIGATION (FOR AGRICULTURE OR OTHER PURPOSES)

☐ C INDUSTRIAL OR COMMERCIAL (FOR MANUFACTURING OR OTHER PURPOSES)

☐ E OTHER (SPECIFY IN REMARKS)

☐ F FLOOD CONTROL (FOR FLOOD CONTROL PURPOSES)

☐ G GROUNDWATER MONITORING (FOR RESEARCH OR MONITORING PURPOSES)

☐ H OTHER (SPECIFY IN REMARKS)

☐ I IRRIGATION (FOR AGRICULTURE OR OTHER PURPOSES)

☐ J OTHER (SPECIFY IN REMARKS)

☐ K OTHER (SPECIFY IN REMARKS)

☐ L OTHER (SPECIFY IN REMARKS)

☐ M OTHER (SPECIFY IN REMARKS)

☐ N OTHER (SPECIFY IN REMARKS)

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☐ AA OTHER (SPECIFY IN REMARKS)

☐ AB OTHER (SPECIFY IN REMARKS)

☐ AC OTHER (SPECIFY IN REMARKS)

☐ AD OTHER (SPECIFY IN REMARKS)

☐ AE OTHER (SPECIFY IN REMARKS)

☐ AF OTHER (SPECIFY IN REMARKS)

☐ AG OTHER (SPECIFY IN REMARKS)

LOCATION OF WELL

COUNTY

Frederick

SUBDIVISION

Inwood Park

SECTION

46

LOT

3

NEAREST TOWN

Urbana

MILES FROM TOWN (ENTER 0 IF IN TOWN)

1

DIRECTION FROM TOWN

DIRECTION FROM TOWN

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STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAKES STATE OFFICE BLDG ANNEAPOLIS MD. 21401
 WELL COMPLETION REPORT

COUNTY: **79-395**
 DEPTH OF WELL: **125**
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **79-73-1701519**
 DRILLER IDENTIFICATION NO.: **139**

DATE RECEIVED: **JUL 3 1978**
 DATE OF WELL: **070378**
 OWNER: **MCKENZIE**
 ADDRESS: **RT 2**
 POST OFFICE: **WAYNE FREDERICK MD**

WELL LOG
 TYPE OF FORMATION EXPOSED, THICKNESS, GRAIN, SLOPE, INCLINATION AND IF WATER BEARING

DESCRIPTION: **BROWN SHALE 0 76**
BLUE SLATE 76 125

GRouting RECORD
 WELL HAS BEEN GRouted (CIRCLE APPROPRIATE BOX)
 TYPE OF GRouting MATERIAL (CIRCLE BOX): **CIM**
 CEMENT: **24** NO. OF BAGS: **2256**
 DRAINING OF WATER: **144**
 DEPTH OF GROUT SEAL TO NEAREST FOOT: FROM **0** TO **30**

PUMPING TEST
 HOURS PUMPED (TO NEAREST HOUR): **1**
 PUMPING RATE: **8** GALLONS PER MINUTE TO NEAREST GALLON
 METHOD USED TO MEASURE PUMPING RATE: **TIME**
 WATER LEVEL (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING: **45**
 WHEN PUMPING: **125**
 TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)
 PUMP INSTALLED: **1**

OTHER RECORDS
 TYPE OF PUMP: **1**
 PUMPING RATE: **8**
 WATER LEVEL: **125**
 LOCATION OF WELL ON LOT: **MD RT 80**

SIGNATURE: **ROBERT CLINE**
Robert Cline

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TOWNSHIP OFFICE IN DISTRICT OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

PR-73-1140
FILL IN THIS FORM COMPLETELY

OWNER: *James Thomas*
ADDRESS: *107 2nd*
CITY: *Frederick MD*

DATE: *9/9/73*
SIGNATURE: *[Signature]*
FIRST NAME: *James*
LAST NAME: *Thomas*

WELL INFORMATION
APPROXIMATE DEPTH IN FEET: *100*
APPROXIMATE DAILY OUTPUT IN GALLONS PER MINUTE: *100*

USE OF WATER: *Domestic*
WELL TYPE: *Hand-dug*

LOCATION OF WELL: *107 2nd*

NEAREST TOWN: *Frederick*

MILES FROM TOWN: *2*

HEALTH DEPARTMENT APPROVAL
DATE: *9/11/73*

LOCATION OF WELL
COUNTY: *Frederick*
SUBDIVISION: *107 2nd*
SECTION: *44* LOT: *1*
NEAREST TOWN: *Frederick*
MILES FROM TOWN: *2*
DIRECTION FROM TOWN: *North*

WELL TYPE: *Hand-dug*

WELL DEPTH: *100*

WELL OUTPUT: *100*

WELL TYPE: *Hand-dug*

WELL TYPE: *Hand-dug*

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAPES STATE ISSUED IN DEL. APPROACH TO BALTIMORE AND WASH.
APPLICATION FOR PERMIT TO DRILL WELL

WPA PERMIT NUMBER
PR-73-1140
FILL IN THIS FORM COMPLETELY

DATE RECEIVED
AUG 13 1975

OWNER
CITY
COUNTY
PORT OFFICE

BRILLER INFORMATION
DATE
LICENSE
FIRST NAME
LAST NAME
SIGNATURE

WELL INFORMATION
1. DEPTH
2. DIRECTION
3. DIRECTION FROM TOWN
4. DIRECTION FROM TOWN

5. DIRECTION FROM TOWN
6. DIRECTION FROM TOWN
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15. DIRECTION FROM TOWN
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LOCATION OF WELL
COUNTY
DIVISION
SECTION
NEAREST TOWN
MILES FROM TOWN

DIRECTION FROM TOWN
NORTH
EAST
SOUTH
WEST
NORTHEAST
SOUTHWEST
SOUTHEAST
NORTHWEST

17. DIRECTION FROM TOWN
18. DIRECTION FROM TOWN
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CH 17012

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG. ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED TO THE
M.D. STATE DEPT. OF NATURAL RESOURCES

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 79-243

DATE RECEIVED
OCT 17 1979

DATE WELL COMPLETED
9/2/79

DEPTH OF WELL
200

PERMIT NO. FROM DEPT. OF NATURAL RESOURCES
EA-73-17190

DRILLERS IDENTIFICATION NO. 40

OWNER
Farm Thomas

FIRST NAME
Frederick M.

WELL LOG

WELL DESCRIPTION

THIS LOG SHOWS ALL FORMATIONS PENETRATED, THEIR
C.O.B., GRAIN, IMPURITIES AND IF WATER BEARING

FORMATION (AND ADDITIONAL SUFFIXES IF NECESSARY)	FEET FROM	TO	WATER BEARING
Top Soil	0	2	
Shale	2	8	
Brown Silt	8	80	
Blue Silt	80	90	
Brown Silt	90	95	
Blue Silt	95	200	

GROUTING RECORD
WELL HAS BEEN GRouted (CIRCLE APPROPRIATE TYPE)
TYPE OF GROUTING MATERIAL (CIRCLE ONE)
CEMENT ☒ C M BENTONITE CLAY ☐ B C
NO. OF BAGS 5 NO. OF POUNDS 300
GALLONS OF WATER 25
DEPTH OF GROUT SEAL TO NEAREST FOOT
FROM 0 TO 19

PUMPING TEST
HOURS PUMPED (TO NEAREST HOUR) 2
PUMPING RATE
GALLONS PER MINUTE TO NEAREST GALLON 4
METHOD USED TO MEASURE PUMPING RATE Outlet
WATER LEVEL (DISTANCE FROM LAND SURFACE)
BEFORE PUMPING 50
WHEN PUMPING 200

CASING RECORD
CASING TYPE ☒ C I O
INSERT ☐ E I
ADJUSTMENT ☐ A D
TYPE ☐ W I L
REASON ☐ O T H E R

TYPE OF PUMPED USED (CIRCLE APPROPRIATE ONE)
☒ A 1/2" ☐ D 1/2" ☐ W 1/2" ☐ O T H E R
☐ 1" ☐ 2" ☐ 3" ☐ 4" ☐ 5" ☐ 6" ☐ 8" ☐ 10" ☐ 12" ☐ 14" ☐ 16" ☐ 18" ☐ 20" ☐ 22" ☐ 24" ☐ 26" ☐ 28" ☐ 30" ☐ 32" ☐ 34" ☐ 36" ☐ 38" ☐ 40" ☐ 42" ☐ 44" ☐ 46" ☐ 48" ☐ 50"

OTHER CASING
CASING TYPE ☐ C I O
CASING SIZE ☐ 1/2" ☐ 1" ☐ 1 1/2" ☐ 2" ☐ 2 1/2" ☐ 3" ☐ 3 1/2" ☐ 4" ☐ 4 1/2" ☐ 5" ☐ 5 1/2" ☐ 6" ☐ 6 1/2" ☐ 7" ☐ 7 1/2" ☐ 8" ☐ 8 1/2" ☐ 9" ☐ 9 1/2" ☐ 10" ☐ 10 1/2" ☐ 11" ☐ 11 1/2" ☐ 12" ☐ 12 1/2" ☐ 13" ☐ 13 1/2" ☐ 14" ☐ 14 1/2" ☐ 15" ☐ 15 1/2" ☐ 16" ☐ 16 1/2" ☐ 17" ☐ 17 1/2" ☐ 18" ☐ 18 1/2" ☐ 19" ☐ 19 1/2" ☐ 20" ☐ 20 1/2" ☐ 21" ☐ 21 1/2" ☐ 22" ☐ 22 1/2" ☐ 23" ☐ 23 1/2" ☐ 24" ☐ 24 1/2" ☐ 25" ☐ 25 1/2" ☐ 26" ☐ 26 1/2" ☐ 27" ☐ 27 1/2" ☐ 28" ☐ 28 1/2" ☐ 29" ☐ 29 1/2" ☐ 30" ☐ 30 1/2" ☐ 31" ☐ 31 1/2" ☐ 32" ☐ 32 1/2" ☐ 33" ☐ 33 1/2" ☐ 34" ☐ 34 1/2" ☐ 35" ☐ 35 1/2" ☐ 36" ☐ 36 1/2" ☐ 37" ☐ 37 1/2" ☐ 38" ☐ 38 1/2" ☐ 39" ☐ 39 1/2" ☐ 40" ☐ 40 1/2" ☐ 41" ☐ 41 1/2" ☐ 42" ☐ 42 1/2" ☐ 43" ☐ 43 1/2" ☐ 44" ☐ 44 1/2" ☐ 45" ☐ 45 1/2" ☐ 46" ☐ 46 1/2" ☐ 47" ☐ 47 1/2" ☐ 48" ☐ 48 1/2" ☐ 49" ☐ 49 1/2" ☐ 50"

PUMP INSTALLED
TYPE OF PUMP (WRITE APPROPRIATE LETTER)
PUMP NO. (WRITE APPROPRIATE LETTER)
PUMP SIZE (WRITE APPROPRIATE LETTER)

WATER ANALYSIS
WATER ANALYSIS
WATER ANALYSIS

WATER ANALYSIS
WATER ANALYSIS
WATER ANALYSIS

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WATER ANALYSIS

George F. Corcoran
Shirley J. Corcoran

WELL NO. 20

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
THREE STATE OFFICE BUILDING, ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FR 73-7310
FILL IN THIS FORM COMPLETELY

ALBERT
FIRST NAME

BENDIG

RT. 1 BOX 104A

ADAMSTOWN MD 21710

DRILLER INFORMATION

LICENSE NUMBER 303

WALLMAN

OWN

W33 Wym

WELL INFORMATION

5
520

ONE FOOT WATER TABLE AT DEPTH OF 520

LOCATION OF WELL

SECTION 44

NEAREST TOWN WRENSA

MILES FROM TOWN CENTER OR IN TOWN 2

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

<input type="checkbox"/> NORTH	<input type="checkbox"/> EAST	<input type="checkbox"/> SOUTHWEST	<input type="checkbox"/> SOUTHEAST
<input type="checkbox"/> SOUTH	<input type="checkbox"/> WEST	<input type="checkbox"/> NORTHWEST	<input type="checkbox"/> NORTHEAST

36 WOODS ROAD

150

HEALTH DEPARTMENT APPROVAL

79-131

79-181

1078
NOV 09 1979

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAKES STATE OFFICE BLDG. ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED TO THE STATE OF MARYLAND
IN 30 DAYS AFTER WELL COMPLETION
FILL IN THIS FORM COMPLETELY
COUNTY **73-181**
PERMIT NO. FROM "PERMIT TO DRILL WELL"
EA-73-7310
20 29 30 31 32 33 34 35 36 37
DRILLER'S IDENTIFICATION NO. **303**

OWNER **MENDIS**
STREET NO. **RT 1 BOX 106A**

POST OFFICE **ALBERT**
ADAMSTOWN, MD.

BROWN SHALE 0 10
GREEN SLATE 10 140 ✓

WELL DESCRIPTION

GRouting RECORD

WELL HAS BEEN GRouted (CIRCLE APPROPRIATE BOX)

TYPE OF GRouting MATERIAL (CIRCLE BOX)

CEMENT ☒ BENTONITE CLAY ☒

NO. OF BAGS **2** NO. OF BORDS **276**

GALLONS OF WATER **24**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM **0** FT. TO **20** FT.

ENTER 0 IF FROM SURFACE

CASING RECORD

CASING TYPE

INNER ☒ OUTER ☒

MAIN CASING TYPE **ST** MAIN CASING DIAMETER **6** TOTAL LENGTH OF MAIN CASING **22**

OTHER CASING (IF USED)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **15**

METHOD USED TO MEASURE PUMPING RATE **AIR**

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **30** INCHES

WHEN PUMPING **130** INCHES

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX FOR PUMPING TEST)

☒ AIR ☐ DIAPHRAGM ☐ TURBINE

☐ CENTRIFUGAL ☐ ROTARY ☐ OTHER (DESCRIBE IN COMMENTS)

☐ JET ☐ SUBMERSIBLE

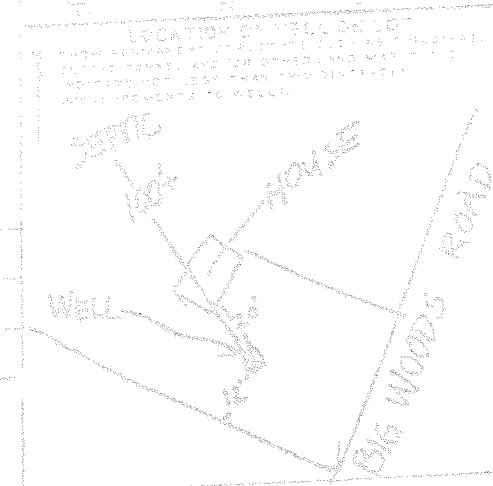
PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTERS)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

LOCATION OF WELL ON LOT

FROM SURVEYOR'S PLAT, THE WELL IS **10** FEET FROM THE HOUSE AND **10** FEET FROM THE ROAD.



CIRCLE APPROPRIATE BOXES

☐ WELL WAS INSPECTED AND FOUND TO BE IN COMPLIANCE WITH THE WELL CONSTRUCTION ACT

☐ WELL WAS NOT INSPECTED

☐ WELL WAS STOPPED BY ORDER OF THE STATE

NAME OF THE WELL **WILLIAM B. QUINN**

WELL NO. **W3X1000**

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION

FR 73 7325

TARRANT STATE OFFICE BUREAU, ANNE ARBOR, MARYLAND 21201
APPLICATION FOR PERMIT TO DRILL WELL

FILL IN THIS FORM COMPLETELY

DATE RECEIVED
FEB 20 1973

OWNER **Roderick** FIRST NAME **Carol**

STREET OR RD **Route 2**

POST OFFICE **Fredrick, Maryland 21701**

DRILLER INFORMATION
CONTINUED

DATE **January 20, 1973** LICENSE NUMBER **77**

SIGNATURE **Robert E. Cline**

WELL INFORMATION

MAXIMUM DRAINING AREA ALLOWED FOR MINUTE

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

FOR IRRIGATION (CIRCLE APPROPRIATE BOX)

FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

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FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

FOR OTHER PURPOSES (CIRCLE APPROPRIATE BOX)

LOCATION OF WELL

COUNTY **Frederick**

SUBDIVISION **Lower Glen Run**

SECTION **4**

NEAREST TOWN **Fredrick**

MILES FROM TOWN CENTER OR IF IN TOWN

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

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IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

IN WITHIN SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

2024

THIS FORM IS TO BE COMPLETED BY THE WELL DRILLER OR HIS EMPLOYEE.

DATE OF WELL COMPLETION

NOV 26 1979

DEPTH OF WELL

120

PERMIT NO. FROM "PERMIT TO DRILL WELL"

MD-123-173215

20 25 30 35 40 45 50 55 60 65 70

DRILLER'S IDENTIFICATION NO. 139

NOV 17 1979

11/13/79

OWNER: RADERICK

FIRST NAME: CAROL
POST OFFICE: FREDERICK MD

STREET OR RD: RT 2

POST OFFICE

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOUR, GRAIN, THICKNESS AND IF WATER BEARING

DESCRIPTION OF FORMATIONS PENETRATED

BROWN SAND 0 57
GREEN SLATE 57 120

GRouting RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT 18 AGENTONITE CLAY 1642

NO. OF BAGS 18

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (in nearest foot)

FROM 12 TO 63

INFEEDER FROM SURFACE

CASING TYPE: 5" 10" 12" 14" 16" 18" 20" 22" 24" 26" 28" 30" 32" 34" 36" 38" 40" 42" 44" 46" 48" 50" 52" 54" 56" 58" 60" 62" 64" 66" 68" 70" 72" 74" 76" 78" 80" 82" 84" 86" 88" 90" 92" 94" 96" 98" 100"

TYPE OF CASING: 5" 10" 12" 14" 16" 18" 20" 22" 24" 26" 28" 30" 32" 34" 36" 38" 40" 42" 44" 46" 48" 50" 52" 54" 56" 58" 60" 62" 64" 66" 68" 70" 72" 74" 76" 78" 80" 82" 84" 86" 88" 90" 92" 94" 96" 98" 100"

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C 3

PUMPING TEST

HOURS PUMPED (in nearest hour)

PUMPING RATE

GALLONS PER MINUTE TO NEAREST GALLON

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (INFEEDER FROM LAND SURFACE)

SCOPES PUMPING

WHEN PUMPING

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)

TYPE OF PUMPED USED

TYPE OF PUMPED USED

TYPE OF PUMPED USED

TYPE OF PUMPED USED

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TYPE OF PUMPED USED

NAME: ROBERT CLINE

Robert Cline

Robert Cline

THURSTON ROAD

PROP LINE

100 ft

**Beebe
Beche**

C

Richard

FIRST NAME

STREET OR RST **419 Woodland Rd.**
CITY OR TOWNSHIP **Heathensburg Md.**

DATE **April 1979** WELL NO. **43E**
OWNER **Joseph L. Mayra**
OPERATOR **Joseph L. Mayra**

WELL INFORMATION
WELL NO. **43E**

WELL DEPTH **100** FEET
WELL TYPE **Hand-dug**

WELL PURPOSE **Hand-dug**

WELL LOCATION **Hand-dug**

WELL CONSTRUCTION **Hand-dug**

WELL EQUIPMENT **Hand-dug**

WELL RECORD **Hand-dug**

WELL NOTES **Hand-dug**

LOCATION OF WELL
SECTION **Hand-dug**

SECTION **Hand-dug**

NEAREST TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

DIRECTION FROM TOWN
WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

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WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

WELL FROM TOWN ENTER 0 IF IN TOWN **Hand-dug**

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAYES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

WELL NO. 2221
DATE RECEIVED (WRA USE ONLY) DEC 19 1979
DATE WELL COMPLETED DEC 19 1979
DEPTH OF WELL 145
COUNT NUMBER 79-626
PERMIT NO. 79-626
DRILLER'S IDENTIFICATION NO. 238

OWNER: Barker
LAST NAME: Barker
ADDRESS: 499 Woodlawn Rd.
CITY: Pothung Md.
POST OFFICE: Pothung Md.

WELL DESCRIPTION
WELL LOG
WELL HAS BEEN SEQUESTERED (CIRCLE APPROPRIATE BOX)
TYPE OF SEQUESTERING MATERIAL (CIRCLE BOX)
NO. OF PAGES 10
GALLONS OF WATER 60
DEPTH OF GROUT SEAL (IN FEET)
FROM 0 TO 145
CASING RECORD
OTHER CASING DETAILS

PUMPING TEST
HOURS PUMPED (TO NEAREST HOUR) 2
PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 12
METHOD USED TO MEASURE PUMPING RATE Air
WATER LEVEL (DISTANCE FROM LAND SURFACE)
DEEPEST PUMPING 40
WHEN PUMPING 145
TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX FOR PUMPING TEST)
PUMP INSTALLED
DATE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - 1 = 1980, 2 = 1981, 3 = 1982, 4 = 1983, 5 = 1984, 6 = 1985, 7 = 1986, 8 = 1987, 9 = 1988, 0 = 1989)

LOCATE THE WELL ON LOT
WELL LOCATION STRUCTURE (CIRCLE BOX)
STORM DRAIN AND OTHER LINES (CIRCLE BOX)
WELL LOCATION (CIRCLE BOX)

LOCATED BY: Joseph L. Hays
DATE: 1/1/80

81 8065 SEQUENCE NO. WPA USE ONLY
THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-4 ON ALL CARDS

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

WPA PERMIT NUMBER
FR-73-8657
fill in this form completely

DATE RECEIVED 7-2-81
8 (WPA USE ONLY) 13
OWNER INFORMATION

Payne Rex
LAST NAME FIRST NAME
3534 Urbana Pike
STREET OR RD
Frederick MD 21701
TOWN STATE ZIP

3 (1) CONTINUED DRILLER INFORMATION
Keyser-Hansen 144
DRILLER'S NAME LICENSE NO.
Signature 9-2-81
DATE

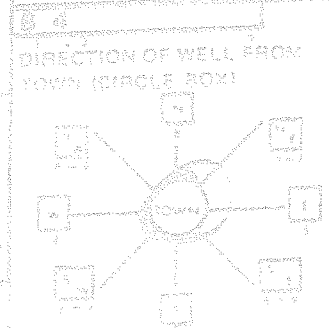
WELL INFORMATION
APPROX PUMPING RATE (GAL PER MIN) 800
AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY) 800
USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. BODIES (REQUIRES APPROPRIATION PERMIT)
- ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- ☐ TEST, OBSERVATION, HYDROLOGICAL DATA ACQUISITION (REQUIRES APPROPRIATION PERMIT)

REPLACEMENT OR DEEPENING WELL
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 DEEPENED (IF AVAILABLE)

Not to be filled in by driller (WPA USE ONLY)
APPROX PERMIT NUMBER
DATE
CONDITIONS
SPECIAL CONDITIONS (WPA USE ONLY)

LOCATION OF WELL
COUNTY Frederick
SUBDIVISION
SECTION
NEAREST TOWN Urbana
MILES FROM TOWN 0.0



NEAR WHAT ROAD 3534
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 1
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 50

SHOW LOCATION OF WELL WITH APPROXIMATE BOX
WRITE THE BOX NUMBER BEHIND THE MAP HERE
630
630

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD AND TOWN
Sketch showing location of well in relation to nearby towns and roads, with distance from well to nearest road and town.

NOT TO BE FILLED IN BY DRILLER (HEALTH DEPARTMENT APPROVAL)
COUNTY NAME Frederick COUNTY NO. 41-485
EHA SIGNATURE
STATE HEALTH (CIRCLE BOX) 5
NORTH EAST WEST SOUTH
ELEV. (FT.)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAMES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **81-485**

WELL NO. FROM "PERMIT TO DRILL WELL"
FR-73-8657

DRILLER'S IDENTIFICATION NO. **144**

DATE RECEIVED
IMPA USE ONLY
SEP. 16 1981

DATE WELL COMPLETED
9-2-81

DEPTH OF WELL
105

OWNER **Pouze, Rex Allen**
STREET OR RD **3534 Urbana Pike** POST OFFICE **Frederick, Md 21701**

WELL LOG

STATE THE KIND OF FORMATION PENETRATED, THE COLOR, GRAIN, MINERALS AND IF WATER BEARING

DESCRIPTION	FEET	CHANGES
USE APPROPRIATE TERMS IF NECESSARY	FROM TO	DATE

dirt 0 3
soap 3 10
stone 3 10
+
slate

GROUTING RECORD

WELL MAY BEER ADJUSTED
WHILE ADJUSTING TEST

TYPE OF GROUTING WATER AL. CONC. **SC**
CEMENT **CN** QUANTITY **1600**

NO. OF BAGS **16** VOLUME **96**

GALLONS OF WATER **96**

DEPTH OF GROUT SEAL TO DEEPEST FOOT

FROM **0** FT. TO **61** FT.
ENTER 0 IF FROM SURFACE

CASING RECORD

INCHES	FEET	FEET
APPROXIMATE	51	61
CODE	51	61
BELOW	51	61

MAIN CASING TYPE **51** NOMINAL DIAMETER **61** TOTAL DEPTH **61**
IF WELL CAVING DEEPEST FOOT

OTHER CASING TYPE **51** DEEPEST FOOT **61**

C 3
1 2 3 4 5 6 7 8 9 10 11 12

PUMPING TEST

HOURS PUMPED TO NEAREST HOLE: **3X**

PUMPING RATE
GALLONS PER MINUTE TO NEAREST GALLON: **20**

METHOD USED TO MEASURE PUMPING RATE **air**

WATER LEVEL DISTANCE FROM LAND SURFACE

REPORT PUMPING **42** DEEPEST FOOT

WHEN PUMPING **80** NEAREST FOOT

TYPE OF PUMP USED (CIRCLE APPROPRIATE AND PUMPING TEST)

<input checked="" type="checkbox"/> A AIR	<input type="checkbox"/> B PISTON	<input type="checkbox"/> C TURBINE
<input type="checkbox"/> D CENTRIFUGAL	<input type="checkbox"/> E ROTARY	<input type="checkbox"/> F OTHER (SPECIFY BELOW)
<input type="checkbox"/> G JET	<input type="checkbox"/> H SUBMERSIBLE	

PUMP INSTALLED

NAME OF PUMP OR IF APPROPRIATE LETTER IN BOX 111 ABOVE A, B, C, D, E, F, G, H

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

DATE OF PUMP INSTALLATION **9-2-81**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

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WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

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WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

CIRCLE APPROPRIATE BOXES

☐ A WELL WAS ABANDONED AND SEALED WHEN TEST WELL WAS COMPLETED
☐ B TEST WELL LOG OBTAINED
☐ C TEST WELL CONVERTED TO PRODUCTION WELL

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.

DRILLER'S NAME

SIGNATURE **Jerry Harley**
Gerry Harley

DATE **9-2-81**

DIAMETER OF SCREEN **20** INCHES (FEET)

GRAVEL PACK **20**

IF WELL BILLED WAS A FLOWING WELL CIRCLE BOX **20**

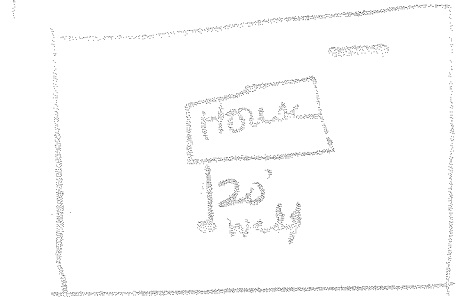
WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**



LOCATION OF WELL ON LOT

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

WELL NO. FROM "PERMIT TO DRILL WELL" **FR-73-8657**

ORIGINAL

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

DEP PERMIT NUMBER
FR-81-0365
fill in this form completely

8653 SEQUENCE NO
(DEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED
IN COLUMNS 3-5 ON ALL CARDS)

Date Received

OWNER INFORMATION

KICKAPOO
R#12 BOX 1397
FREDERICK MD 21701

B(1) Continued

DRILLER INFORMATION

ROBERT K. ARDINGER
HARLEY WELLS DRILLING INC.
104 W. FREDERICK ST.
FREDERICK MD 21701

WELL INFORMATION

APPROX. DRILLING RATE (GAL. PER MIN.) **800**
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. (SOME REQUIRE APPROPRIATION PERMIT)
- ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROVATION FROM STATE HEALTH DEPARTMENT)
- ☐ THERMO-OXYGENATION, HYDRO-PNEUMATIC OR OTHER WATER TREATMENT PLANT

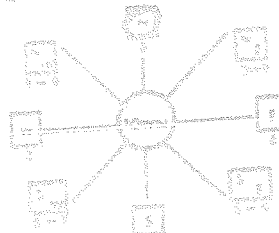
B(3)

LOCATION OF WELL

COUNTY **FREDERICK**
SUBDIVISION
SECTION
NEAREST TOWN **URBANA MD**
MILES FROM TOWN (enter 0 if in town) **0**

B(4)

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



R#355

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
100
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN 'X'

SOURCES OF DRILLING WATER
1. **COMMUNITY WATER**
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE
698
540

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



B(5)

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

FR-81-0365
8653
8653

C1 153 SEQUENCE NO. JOEP USE ONLY

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

45 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER 82-254
PERMIT NO.

THIS NUMBER IS TO BE PUNCHED
IN HOLES 15 ON ALL CARDS

Date Received
(JOEP use only)

DATE WELL COMPLETED

Depth of Well

FROM PERMIT TO DRILL WELL

FR-11-03193

OWNER

STREET OR RD

SUBDIVISION

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

Top Soil 0 5

Brown Sand 5 35

Blk. Silt 35 150

Got water at 95-125

Well is 150 ft

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CEMENTITE CLAY BIC

NO. OF BAGS 8 NO. OF POUNDS 902

GALLONS OF WATER 40

DEPTH OF GROUT SEAL (to nearest foot)

from 0 to 40

(enter 0 if from surface)

CASING RECORD

Casing Type (insert appropriate code below)

STEEL CONCRETE

PLASTIC OTHER

MAJOR CASING TYPE

PL 9 40

SMALLER CASING TYPE

PL 9 40

OTHER CASING TYPE

OTHER CASING TYPE

OTHER CASING TYPE

OTHER CASING TYPE

OTHER CASING TYPE

OTHER CASING TYPE

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OTHER CASING TYPE

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 12

METHOD USED TO MEASURE PUMPING RATE Rotary

WATER LEVEL (distance from land surface)

BEFORE PUMPING 20

WHEN PUMPING 70

TYPE OF PUMP USED (see test)

A air P piston T turbine

C centrifugal D rotary E other

J jet S submersible

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

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, D, E, J, P, S, T, O)

CAPACITY: GALLONS PER MINUTE

DRIVER HORSE POWER

PUMP COLUMN LENGTH (feet)

SCREEN HEIGHT (feet) (circle appropriate box)

SCREEN HEIGHT (feet) (circle appropriate box)

SCREEN HEIGHT (feet) (circle appropriate box)

SCREEN HEIGHT (feet) (circle appropriate box)

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SCREEN HEIGHT (feet) (circle appropriate box)

SCREEN HEIGHT (feet) (circle appropriate box)

8 1 7409 SEQUENCE NO. (DEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

FR-871-11115
fill in this form completely

THIS NUMBER IS TO BE PUNCHED
IN COLS. 26 ON ALL CARDS

Date Received

03/11/83

OWNER INFORMATION

SANDBAR CONSTRUCTION

4400 EUBA AUNT CT

WALKERSVILLE MD 21793

DRILLER INFORMATION

WM E GYNN

GYNN-CAMMELL DRILLING CO.

6030 KEYSTONE LN. - FREDERICK, MD

8-12-83

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ HOME SINGLE OR DOUBLE HOUSEHOLD USE ONLY
- ☐ FARMER'S LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (SPECIFY APPROXIMATION PERMIT)
- ☐ PUBLIC OR PRIVATE WATER SUPPLY SYSTEMS
- ☐ OTHER (SPECIFY APPROXIMATION PERMIT)

1. PURPOSE OF WELL (CIRCLE APPROPRIATE BOX)

2. NUMBER OF WELLS TO BE DRILLED OR DEPENDENT

3. APPROX. DEPTH (FEET)

4. THIS WELL WILL BE USED FOR ALL PURPOSES

5. THIS WELL WILL REPLACE AN EXISTING WELL

6. THIS WELL WILL BE USED AS A BACKUP

7. THIS WELL WILL BE USED IN AN EXISTING WELL

8. NUMBER OF WELLS TO BE REPLACED OR DEPENDENT

9. APPROX. DEPTH (FEET)

10. FORCE MAJEURE PERMIT NO. FR-871-11115

8 3

LOCATION OF WELL

FREDERICK

URBANA OVERLOOK

SECTION 11

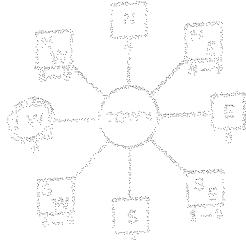
LOT 26

URBANA

MILES FROM TOWN (enter 0 if in town)

8 4

DIRECTION OF WELL FROM TOWN (CIRCLE CORN)



GUESTIN COURT

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE CORN)



DISTANCE FROM ROAD

ENTER FEET MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

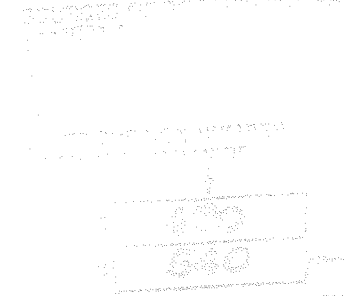
FREDERICK

DATE ISSUED 03/11/83

STATE HEALTH DEPARTMENT

82-453

SHOW MAJOR FEATURES OF ECV & LOCATE WELL WITH IN



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



211 2952

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

45 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER 82-459

PERMIT NO.

THIS NUMBER IS TO BE PUNCHED
IN COLS. 32 ON ALL CARDSDATE RECEIVED
(OEP USE ONLY)

DATE WELL COMPLETED

Depth of Well

FROM PERMIT TO DRILL WELL

DATE RECEIVED
(OEP USE ONLY)

DATE WELL COMPLETED

TO NEAREST FOOT

OWNER SANDBAR CONST.
STREET OR RD. 2400 CUB HUNT CT
SUBDIVISION URBANA OVERLOOK SECTION 1 LOT 26STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARING

DESCRIPTION (Type additional details if needed)	FEET FROM	TO	Depth of water bearing
BROWN SHALE	0	20	
GREEN SLATE	20	140	✓

WELL HAS BEEN DRILLED
(Circle Appropriate Box)
TYPE OF GRouting MATERIAL
CEMENT (C) BENTONITE CLAY (B)NO. OF BAGS 6 NO. OF POUNDS 26
GALLONS OF WATER 26
DEPTH OF ABOUT SEAL (to nearest foot)
from 1' to 14' (enter 14' if from surface)Casing
Type
Insert
Appropriate
code
below
STEEL (S) CONCRETE (C)
PLASTIC (P) OTHER (O)MAIN CASING TYPE
STEEL (S) 6 30OTHER CASING TYPE
STEEL (S) 6 30OTHER CASING TYPE
STEEL (S) 6 30PUMPING TEST
HOURS PUMPED (interest hour) 3PUMPING RATE (gal. per min.
to nearest gal.) 8
METHOD USED TO
MEASURE PUMPING RATE SUBMERWATER LEVEL (distance from land surface)
BEFORE PUMPING 26
WHEN PUMPING 56TYPE OF PUMP USED (see list)
A air B piston C centrifugal D rotary E other (describe in box)
F submersiblePUMP INSTALLED YES NO
DRILLER WILL INSTALL PUMP (circle appropriate box) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USETYPE OF PUMP WRITE APPROPRIATE
LETTER IN BOX - SEE ABOVE:
(A, C, D, P, R, S, T, O)
CAPACITY
GALLONS PER MINUTE
(to nearest gallon)PUMP MOTOR POWER
GALLONS PER MINUTE (circle appropriate box)
LAND SURFACELOCATION 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)

WELL

A WELL WAS DECONTAMINATED AND SEAL
WHEN THE WELL WAS COMPLETED
ELECTRIC LOG OBTAINED
TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL WAS DRILLED
IN ACCORDANCE WITH COMAR 10.17.02 "WELL CONSTRUCTION
AND COMPLETION" AND THAT THE RECORD
OF THIS WELL IS ACCURATE AND COMPLETE TO
THE BEST OF MY KNOWLEDGEDATE RECEIVED
FILL IN DATE
DRILLER SIGNATURE ON APPLICATION
DATE RECEIVED
FILL IN DATE
DRILLER SIGNATURE ON APPLICATIONDIAMETER
OF SCREEN 6 (IN NEAREST
INCH)

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING FILL CIRCLE BOXOEP USE ONLY
NOT TO BE FILLED IN BY DRILLER
TELESCOPE
CASING LOG
OTHER DATA

C1 1498 SEQUENCE NO. (OEP 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 TO THE STATE DEPARTMENT OF ENVIRONMENTAL AND NATURAL RESOURCES
45 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER 84-251

DATE RECEIVED SEP 17 1984 DATE WELL COMPLETED 050684
Depth of Well 22 180 (TO NEAREST FOOT)
PERMIT NO. FR-B1-1381

OWNER PRETE STREET OR RFD 2400 EUB HUNT CT. TOWN WATERSVILLE, MD.
SUBDIVISION URBANA OVERLOOKS SECTION 1 LOT 23

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
BROWN SHALE 0 29
GREEN ROCK 29 180

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N
TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 7 NO. OF BOUNDS 45
GALLONS OF WATER 45
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 62 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL CONCRETE PL OT
PLASTIC OTHER
MAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)
3 1/2 4 34

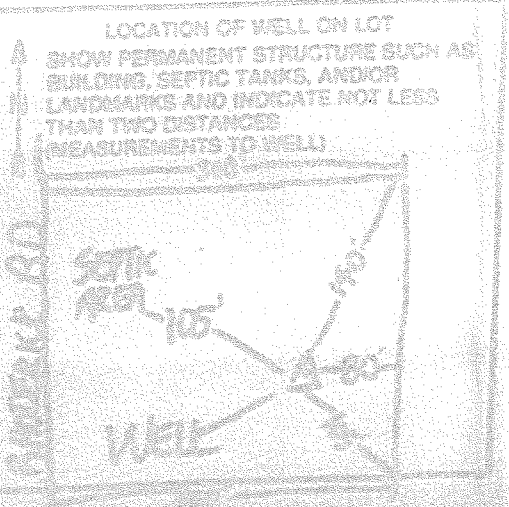
OTHER CASING (if used)
diameter inch depth (feet) from to
SCREEN RECORD
STEEL BRASS WOOD
SLOT SIZE 1 2 3
DIAMETER OF SCREEN 4 5 6 (NEAREST INCH)
from to

PUMPING TEST
HOURS PUMPED (nearest hour) 2
PUMPING RATE (gal. per min. to nearest gal.) 0
METHOD USED TO MEASURE PUMPING RATE AIR
WATER LEVEL (distance from land surface) BEFORE PUMPING 37 WHEN PUMPING 165
TYPE OF PUMP USED (for test) A 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,R,S,T,O) IN BOX - SEE ABOVE.
CAPACITY: GALLONS PER MINUTE
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (circle appropriate box and enter casing height) + above - below
LAND SURFACE (nearest foot) 2

CIRCLE A: APPROPRIATE LETTER IF A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
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 ACCORDANCE WITH ALL REQUIREMENTS STATED IN THE WELL COMPLETION REPORT AND THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE
WELL NO. 303
DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
DATE 09/23/84

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX OF OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CASING LOG INDICATOR OTHER DATA



(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

OWNER

STREET OR RD

SUBDIVISION

first name

TOWN

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

Check if water bearing

Topsoil 0 2

Br. slate 2 26

Br. slate 26 44

Blue slate 44 58

Br. slate 58 60

Blue slate 60 90

Br. slate 90 94

Blue slate 94 200

GRouting RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from

ft. to

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)

OTHER CASING (if used)

diameter inch

depth (feet) from to

SCREEN RECORD

screen type or code hole

STEEL

BRASS

HO

IRON

OPEN

PL

OT

OTHER

WELL DIAMETER

DEPTH (feet)

from to

slot size

DIAMETER OF SCREEN

from to

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

Piston

turbine

centrifugal

rotary

jet

submersible

other (describe below)

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)

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

TYPE OF PUMP INSTALLED

PLACE (A.C.I.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 WEIGHT (circle appropriate box and enter casing weight)

LAND SURFACE

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 REGS. 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.

DRILLER'S SIGNATURE

DRILLER'S SIGNATURE MUST MATCH SIGNATURE ON APPLICATION

TELESCOPE

LOG

OTHER DATA

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT E IN BOX

DEPTH (feet)

from to

TELESCOPE

LOG

OTHER DATA

SEQUENCE NO. (OEP 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

COUNTY NUMBER 84-474

DATE RECEIVED
5/1/84

DATE WELL COMPLETED
01/21/84

Depth of Well
100 (TO NEAREST FOOT)

PERMIT NO
FROM "PERMIT TO DRILL WELL"
FW-81-1684

OWNER Snyder
STREET OR RFD 443 Millwood Rd
SUBDIVISION URBANA OVERLOOK
SECTION 1 TOWN Mt. Airy LOT 1

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)

Brown shale 0 57

Green slate 57 100

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 7 NO. OF POUNDS 638

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)
from 0 to 58

(enter 0 if from surface)

CASING RECORD

Casing types insert appropriate code below

STEEL CONCRETE PLASTIC OTHER

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

ST 6 58

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

SCREEN RECORD

screen type or open hole insert appropriate code below

DEPTH OF WELL

0 100

SCREEN SIZE

DIAMETER OF SCREEN (NEAREST INCH)

from 0 to 10

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOXES

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

T (E.R.C.S.)

TELESCOPE CASING LOG INCHES

WG OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE Time

WATER LEVEL (distance from land surface)

BEFORE PUMPING 28

WHEN PUMPING 100

TYPE OF PUMP USED (for test)

P piston T turbine C centrifugal R rotary J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) YES (X) 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 1000)

PUMP HORSE POWER

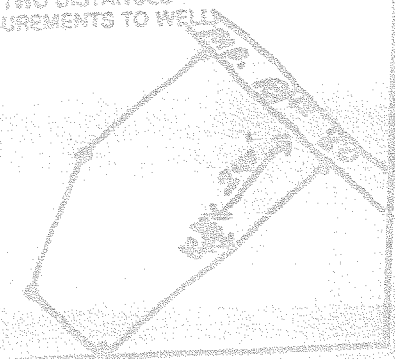
PUMP COLUMN LENGTH (nearest ft)

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 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 15.17.13 "WELL CONSTRUCTION" AND IN COMPLIANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREON IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLER'S CERT. NO. 221

DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

DATE SUBMITTED (DATE OF SIGNATURE) (MUST MATCH DATE ON PERMIT)

FOR INFORMATION: IF DIFFERENT FROM PERMIT

8657

SEQUENCE NO.
(OEP USE ONLY)

STATE OF MARYLAND

APPLICATION FOR PERMIT TO DRILL WELL

please print or type

FR-81-1919

Fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COLS. 1-8 ON ALL CARDS)

Date Received
120784

OWNER INFORMATION

SIMONS GARY

2713 WITMER COURT

FREDERICK

DRILLER INFORMATION

Robert Cline

Cline + Durrell, Inc.

2017 Hillmark Ct, Frederick, Md.

Robert Cline

12/7/84

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

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)

APPROXIMATE DEPTH OF WELL

APPROXIMATE DIAMETER OF WELL

METHOD OF DRILLING

REPLACEMENT OR DEEPENDING WELL?

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

FOUR-BOX PERMIT NUMBER

FOUR-BOX PERMIT NUMBER

SPECIAL CONDITIONS

LOCATION OF WELL

FREDERICK

WASHINGTON OVERLOOK

SECTION 21

LOT 11

NEEDHAM

MILES FROM TOWN (enter 0 if in town)

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

64-805

COUNTY NO.

STATE HEALTH

INSERT S

DATE ISSUED

SIGNATURE

NORTH GRID

EAST GRID

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

COORDINATES OF DRILLING WATER

LOCATE THE BOX NUMBER

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

C1 6891 SEQUENCE NO. (KEEP USE ONLY)

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

45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER

84-805

PERMIT NO
FROM "PERMIT TO DRILL WELL"

ER-81-1919

(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-5 ON ALL CARDS)

DATE RECEIVED

DATE WELL COMPLETED

MAR 18 1975

022375

Depth of Well

250
(TO NEAREST FOOT)

OWNER

Simons

first name

GARY

TOWN

FREDERICK MD

STREET OR RFD

7913 WINTER CT

LOT

41

SUBDIVISION

WIRIANA OVERLOOK

SECTION

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

BROWN SHALE 0 30
BLUE SLATE 30 250 ✓

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☒

NO. OF BAGS 0 NO. OF POUNDS 346

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 41 ft.

(enter 0 if from surface)

Casing types
insert
appropriate
code
below

CASING RECORD

STEEL CONCRETE
PLASTIC OTHER

MAIN CASING TYPE

ST 4 42

OTHER CASING (if used)

diameter depth (feet)

screen type or open hole

SCREEN RECORD

insert appropriate code below

slot size

diameter of screen

from to

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 21

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

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 land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

centrifugal rotary other (describe below)

submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)

IF DRILLER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS

EXCEPT HOME USE TYPE OF PUMP INSTALLED

PLACE (A,C,I,P,R,S,T,O) IN BOX 33-38 ABOVE:

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

FLUX HORSE POWER

WELL COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE

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)

ENCLOSURE

CIRCLE APPROPRIATE LETTER

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

E ELECTRIC LOG OBTAINED

F TEST WELL CONVERTED TO PRODUCTION WELL

I I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 13.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PROVIDED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

DRILLER SIGNATURE (ON APPLICATION)

DATE OF SIGNATURE (sign. of driller or journeyman)

1 9491
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)

SEQUENCE NO.
(DEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

FR-KI-2098
Fill in this form completely

Date Received

07/01/85

OWNER INFORMATION

MARMET ROBERT

2932 THURSTON RD

FREDERICK MD 21701

DRILLER INFORMATION

WILLIAM GUNN

GUNN-CROMWELL WELL DRILLING

6030 KEYSER LN - FREDERICK, MD

WJG/gun 3-30-85

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)

APPROXIMATE DEPTH OF WELL 200

APPROXIMATE DIAMETER OF WELL 6

METHOD OF DRILLING

AIR-DRILL

REPLACEMENT OR DEEPEND 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 DEEPEEN AN EXISTING WELL

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

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

APPROX. PERMIT NUMBER

FORCE 20

PERMIT NUMBER

1

LOCATION OF WELL

FREDERICK

21

25 SUBDIVISION

SECTION 10 LOT 10

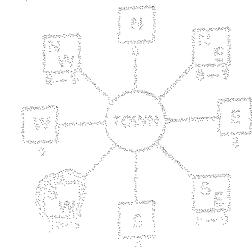
URBANA

25 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 1

1

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



THURSTON ROAD

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

700

DISTANCE FROM ROAD

ENTER FT. or MI.

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

FREDERICK

COUNTY NAME

DEP SIGNATURE

DATE ISSUED

07/01/85

NORTH GRID

EAST GRID

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF SURFACE WATER

NAME THE BOX NUMBER

620

530

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



C1 1801
SEQUENCE NO (OEP USE ONLY)
DATE RECEIVED MAY 16 1985
DATE WELL COMPLETED 05/12/85

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

THIS REPORT DUE 45 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER 85-176
PERMIT NO. FROM "PERMIT TO DRILL WELL" BR-81-2098

OWNER MARMET
STREET OR RFD 2932 THURSTON RD
SUBDIVISION
SECTION
TOWN FREDERICK, MD
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		Check if water bearing
	FROM	TO	
BROWN SHALE	0	85	✓
GREEN SLATE	85	198	✓
BLUE SLATE	198	260	✓

GRouting RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☒
NO. OF BAGS 19 NO. OF BOUNDS 1310
GALLONS OF WATER
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 24 ft.
(enter 0 if from surface)

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)
17 12 26

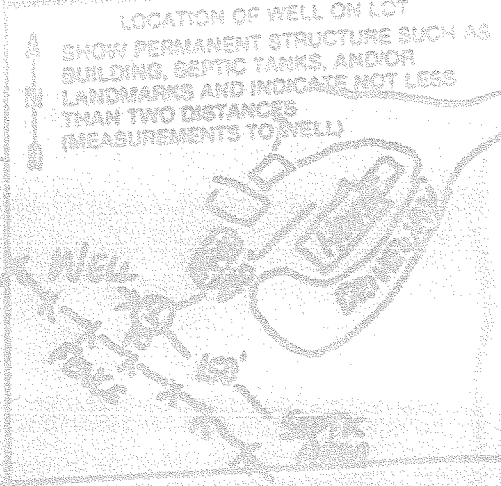
OTHER CASING (if used)
diameter depth (feet)
12 12 12

SCREEN RECORD
screen type
NO. 10 ☒ NO. 20 ☒ NO. 40 ☒
slot size
DIAMETER OF SCREEN 6 (NEAREST INCH)
from 0 to 12

GRAVEL PACK
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX ES
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CANNON ☐ LOG INDICATOR ☐ OTHER DATA ☐

PUMPING TEST
HOURS PUMPED (nearest hour) 2
PUMPING RATE (gal. per min. to nearest gal.) 9
METHOD USED TO MEASURE PUMPING RATE AIR
WATER LEVEL (distance from land surface)
BEFORE PUMPING 70
WHEN PUMPING 230
TYPE OF PUMP USED (for test)
A ☒ piston ☐ turbine ☐
C ☐ centrifugal ☐ rotary ☐ other (describe below)
J ☐ jet ☐ submersible ☐

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) 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 255 ABOVE
CAPACITY GALLONS PER MINUTE (at normal power)
MAXIMUM HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (single and double casing height)
LAND SURFACE ☒ ground level ☐



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
I ILLUSTRATION OF WELL CONSTRUCTION AND IS CONFORMANT WITH ALL CONDITIONS STATED IN THE PERMIT TO DRILL WELL, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE
DRILLER'S IDENT. NO. 302
WELL MATCHING IDENTIFICATION ON APPLICATION
DATE OF COMPLETION 05/12/85

B 1 **5319** SEQUENCE NO.
(OEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

PA-81-2147
fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COLS. 1-4 ON ALL CARDS)

Date Received

01/22/85

OWNER INFORMATION

WATKINS **JOAN**

11214 AMELBERGER RD

THURMAN CT **MD 21228**

DRILLER INFORMATION

Robert L. Cline

1137

Cline & Duvall, Inc.

8033 Hillmark Court Frederick

Robert L. Cline

4-24-85

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED
(GAL. PER DAY) **300**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ DOMESTIC (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)

APPROXIMATE DEPTH OF WELL **50** FT

WATER SOURCE (CIRCLE APPROPRIATE BOX)

☒ SURFACE WATER (RIVER, LAKE, STREAM, POND, etc.)
☐ GROUNDWATER (ARTESIAN, NON-ARTESIAN, etc.)
☐ OTHER (CIRCLE APPROPRIATE BOX)

WATER SOURCE (CIRCLE APPROPRIATE BOX)

AR-858

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

WELL NUMBER (CIRCLE APPROPRIATE BOX)

WELL NUMBER (CIRCLE APPROPRIATE BOX)

WELL NUMBER (CIRCLE APPROPRIATE BOX)

WELL NUMBER (CIRCLE APPROPRIATE BOX)

WELL NUMBER (CIRCLE APPROPRIATE BOX)

LOCATION OF WELL

B 3

FREDERICK

URBANA OVERLOOK

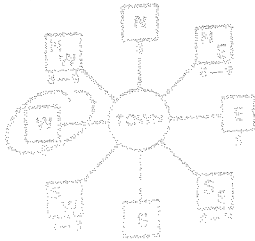
SECTION **6** LOT **49**

URBANA

MILES FROM TOWN (enter 0 if in town) **1.9** MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Route 80
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)



1/500
DISTANCE FROM ROAD

ENTER FT. OR MI **1.9**

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME

DEP. SIGNATURE

DATE ISSUED

01/22/85

NORTH GRID

544000

EAST GRID

0695000

SHOW MAJOR FEATURES OF
BOX & LOCATE WELL
WITH AN X

TOPOGRAPHY OF SURROUNDING WATERS

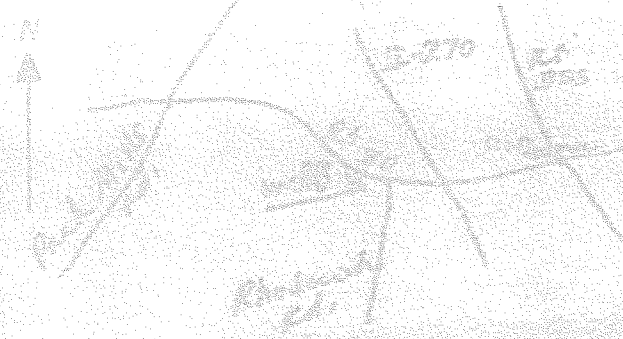
WELL NO. BOX NUMBER

390

540

3-270

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



DATE RECEIVED

DATE WELL COMPLETED

032985

Depth of Well

200

(TO NEAREST FOOT)

OWNER

WATKINS

STREET OR RFD

11214 ANGLETON RD

TOWN

TOWSON MD 21286

SUBDIVISION

WISDOM CREEK

SECTION

6

LOT

49

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	
BROWN SHALE	0	56	
BLUE SLATE	56	200	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

18

NO. OF POUNDS

1082

GALLONS OF WATER

10.7

DEPTH OF GROUT SEAL (to nearest foot)

from

0

ft. to

63

ft.

(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STEEL

CONCRETE

PL

OT

PLASTIC

OTHER

MAIN
CASING
TYPE

ST

Nominal diameter
too (main) casing
(nearest inch)

6

Total depth
of main casing
(nearest foot)

200

OTHER CASING (if used)

diameter

depth (feet)

from

to

SCREEN RECORD

screen type

slot size

diameter

depth (feet)

from

to

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOXES

TELESCOPE
CASING

LOG
INDICATION

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

1

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

20

METHOD USED TO
MEASURE PUMPING RATE

TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING

40

WHEN PUMPING

200

TYPE OF PUMP USED (for test)

centrifugal

rotary

submersible

turbine

other (describe below)

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 IN BOX SET 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

below

LAND SURFACE

50

ft.

100

ft.

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDINGS, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
MEASUREMENTS TO WELL

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

DRILLER'S SIGNATURE

MUST MATCH SIGNATURE ON APPLICATION

TELESCOPE
CASING

LOG
INDICATION

OTHER DATA

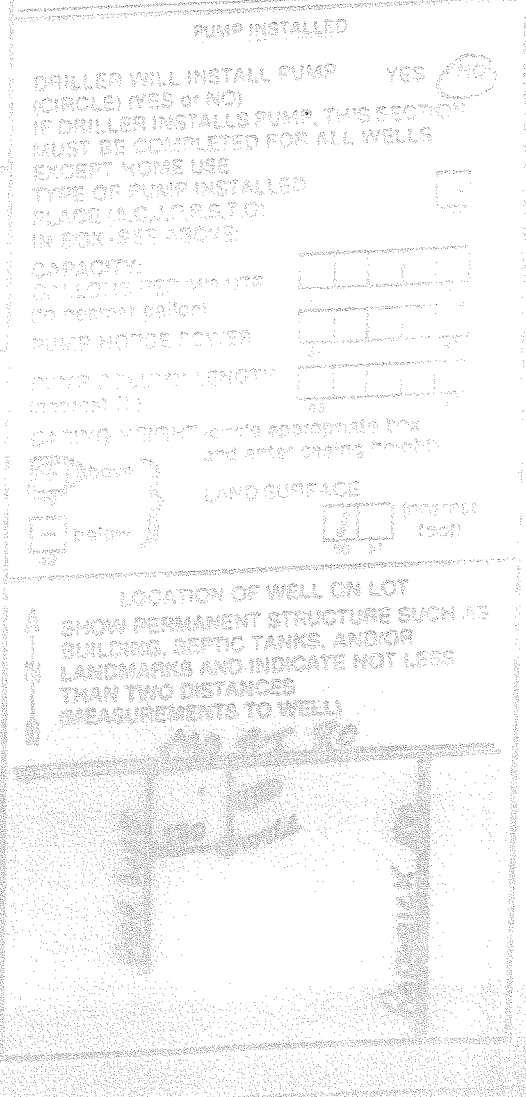
GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOXES

TELESCOPE
CASING

LOG
INDICATION

OTHER DATA



3 8825 SEQUENCE NO. (DEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

FR-871-2833
Fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COLUMNS ON ALL CARDS)

Date Received
2/3/75

OWNER INFORMATION

SANDHILL CONSTRUCTION
8400 CLUB HUNT COURT
WALKERSVILLE MD 21793

DRILLER INFORMATION

W.H. GUNN
GUNN-CROMWELL WELL DRILLING
6030 KEYSER LN - FREDERICK, MD.
5-28-85

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

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)
- ☐ TAPED TO PRIVATE WATER COMPANY REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL
- ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 200

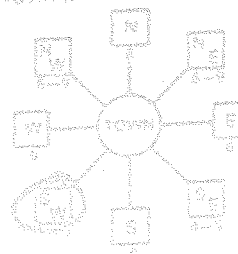
REPLACEMENT OF DISCARDED WELLS (CIRCLE APPROPRIATE BOX)
☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
☐ THIS WELL WILL DEEPEN AN EXISTING WELL
TOTAL NUMBER OF WELLS TO BE REPLACED OR DEEPENED

REPLACEMENT OF DISCARDED WELLS (CIRCLE APPROPRIATE BOX)
TOTAL NUMBER OF WELLS TO BE REPLACED OR DEEPENED
WELL NUMBER 1131040111
PERMIT NUMBER FR-871-2833

LOCATION OF WELL

FREDERICK
URBANA OVERLOOK
SECTION 2 LOT 21
URBANA
MILES FROM TOWN (enter 0 if in town) 4.7 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



GUERTIN CT
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



60
DISTANCE FROM ROAD
ENTER FT. OR MI 60

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Frederick
COUNTY NAME
DEP SIGNATURE
DATE ISSUED 05-29-85
NORTH GRID 548000 EAST GRID 2695000

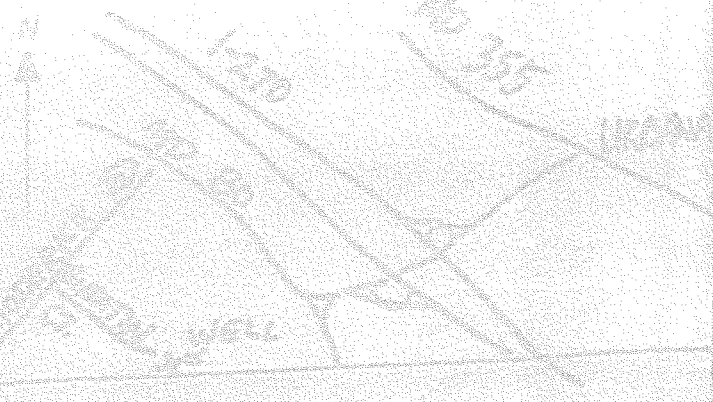
SHOW MAJOR FEATURES OF TOWN & LOCATE WELL WITH AN X

SOURCES OF DRINKING WATER

WELL NUMBER 1131040111

650
550

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



1816 (SEE USE ONLY)

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

WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

COUNTY
NUMBER

84-770

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

FR-B/1-223

DATE RECEIVED

JUL 18 1965

DATE WELL COMPLETED

06/10/65

Depth of Well

160
(TO NEAREST FEET)

OWNER SANDBAR CONSTRUCTION
STREET OR RFD 2855 S. CUB HUNT CT. TOWN WALKERSVILLE, MD
SUBDIVISION URBANA OVERLOOK SECTION 4 LOT 21

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	
BROWN SHALE	0	13	
GREEN SLATE	13	32	
BROWN SHALE	32	39	
GREEN SLATE	39	44	
BROWN SHALE	44	52	
BLUE SLATE	52	59	✓
BROWN SHALE	59	73	✓
BLUE ROCK	73	140	
GREEN ROCK	140	160	

GROUNDING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☒

NO. OF BAGS 7 NO. OF POUNDS 635

GALLONS OF WATER 45

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

STEEL ☒ CONCRETE ☒
PLASTIC ☒ OTHER ☐

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

ST 5 42

OTHER CASING (if used)

diameter (nearest inch) depth (feet) from to

5 5 42

SCREEN RECORD

Screen type or mesh size insert appropriate code below

STEEL ☒ WIRE ☒ WOOD ☒
ROCK ☒ HOLES ☒

5 5 42

5 5 42

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5 5 42

HOURS PUMPED (nearest hour)

3

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

METHOD USED TO MEASURE PUMPING RATE AIR

WATER LEVEL (distance from land surface)

BEFORE PUMPING 55

WHEN PUMPING 160

TYPE OF PUMP USED (for test)

☒ Air ☐ piston ☐ turbine

☒ centrifugal ☐ rotary ☐ other (describe below)

☐ jet ☐ submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒

(CIRCLE YES OR 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, S, T, O) IN BOX SEE ABOVE:

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP MOTOR POWER

PUMP COLUMN LENGTH (feet)

CASING WEIGHT (circle appropriate box and enter casing weight)

LAND SURFACE

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

WELL

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 THE WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 15.71.15 "WELL CONSTRUCTION" AND IN ACCORDANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREON IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLER'S SIGNATURE

DATE

WELL MATCH SIGNATURE ON APPLICATION

SITE SUPERVISOR (sign of driller or journeyman)

DATE

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX

SEE USE ONLY NOT TO BE FILLED IN BY DRILLER

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

2208

(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

COUNTY
NUMBER

85-381

PERMIT NO.

FROM "PERMIT TO DRILL WELL"
85-381-2254

DATE RECEIVED

01 26 85

DATE WELL COMPLETED

06 29 85

Depth of Well

20.0
(TO NEAREST FOOT)

OWNER

last name

STREET OR RFD

first name

TOWN

SUBDIVISION

SECTION

LOT 24

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

BLUISH SHALE 0 40

BLUE SLATE 40 200

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 12 NO. OF POUNDS 128

GALLONS OF WATER 22

DEPTH OF GROUT SEAL (to nearest foot)

from 0 IL to 48 IL

(enter 0 if from surface)

Casing
types
insert
appropriate
code
below

CASING RECORD

ST ☒ CO ☐

STEEL CONCRETE

PL ☐ OT ☐

PLASTIC OTHER

MAIN

Nominal diameter

Total depth

CASING

top (main) casing

of main casing

TYPE

(nearest inch)

(nearest foot)

ST ☒

6 1/2

26

OTHER CASING (if used)

diameter

depth (feet)

inch

from

to

screen type

SCREEN RECORD

ST ☒ BR ☐ NO ☐

STEEL BRONZE PLASTIC

PER FOR OTHER

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PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

TYPE OF PUMP USED (for test)

TYPE OF PUMP USED (for test)

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TYPE OF PUMP USED (for test)

CIRCLE APPROPRIATE LETTER
A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

TEST WELL CONVERTED TO PRODUCTION
WELL

I HEREBY CERTIFY THAT THIS WELL WAS BEING CONSTRUCTED IN
ACCORDANCE WITH COMAR 10.11.02 "WELL CONSTRUCTION"
AND IN ACCORDANCE WITH ALL CONDITIONS STATED IN THE
PERMIT. I FURTHER CERTIFY THAT THE INFORMATION
CONTAINED HEREON IS TRUE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE.

DRILLER'S SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

DRILLER'S SIGNATURE

GRAVEL PACK

IF WELL DRILLED WAS

TO BE FILLED WITH

IF IN BOX 61

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

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(NOT TO BE FILLED IN BY DRILLER)

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CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(E.R.O.S.)

WG

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

CEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

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)

81 8928

SEQUENCE NO.
(OEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

Fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COILS 34 ON ALL CARDS)

Date Received

07/28/03

OWNER INFORMATION

FRANCIS

BLANK

14/11/18

BLANK

07/28/03

BLANK

DRILLER INFORMATION

Ralph Mayne

2173

Ralph Mayne (well owner)

9120 Bayview Road, El My, Maryland

Ralph Mayne

WELL INFORMATION

APPROXIMATE DRAINAGE RATE (GPM) PER MINUTE

AVERAGE DAILY QUANTITY USED (GAL) PER DAY

2173

2173

LOCATION OF WELL

FRANCIS

FRANCIS OVERLOOK

SECTION 11

LOT 451

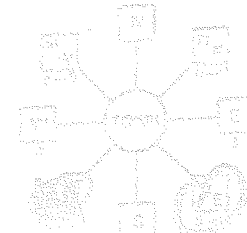
FRANCIS

WILET APOIN TOWN (WILET) IS 10 MI

MI

2173

DIRECTION OF WELL FROM
OWNING POLE BOX



FRANCIS

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
CIRCLE APPROPRIATE SIDE

260

260

DISTANCE FROM ROAD

ENTER FT. OR MI

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

2173

COUNT

STATE HEALTH DEPARTMENT

DATE ISSUED

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CH 1846
SEQUENCE NO.
(USE ONLY)
(THIS NUMBER IS TO BE PUNCHED
IN C.O.L.S. 33 ON ALL CARDS)

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

45 DAYS AFTER WELL IS COMPLETED.
COUNTY
NUMBER 85-397

DATE RECEIVED
DATE WELL COMPLETED

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
FR-81-2400

OWNER
STREET OR RD.
SUBDIVISION
SECTION
LOT

WELL LOG
No. required for drilled wells
STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET	FOOT	WATER BEARING
Top Soil	0	2	
Brown Shell	2	40	✓
Brown Sand	10	45	
Light Sand	15	45	

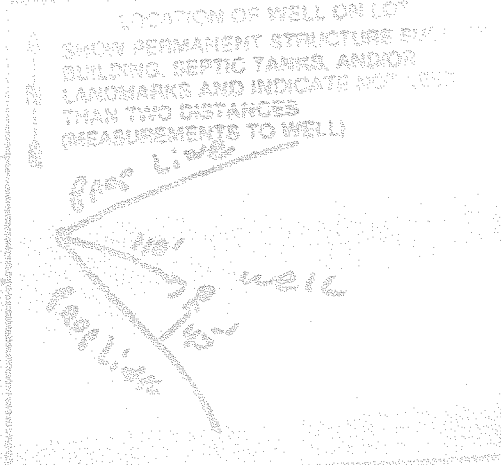
WELL HAS BEEN
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT
NO. OF BAGS
GALLONS OF WATER
DEPTH OF ABOUT 55 LBS. - 1000
from

center of well from surface
Casing Record
casing
types
insert
appropriate

PUMPING TEST
HOURS PUMPED (nearest hour)
PUMPING RATE (gal. per min.
to nearest gal.)
METHOD USED TO
MEASURE PUMPING RATE
WATER LEVEL (distance from land surface)
GROSS PUMPING
WHEN PUMPING
TYPE OF PUMP USED (for test)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP
IF DRILLER INSTALLS PUMP, THIS SECTION
MAY BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
PUMPING RATE DATA USE
PUMPING RATE DATA USE

CAPACITY
WELLHEAD WATER
IN NEAREST GALLON
WELLHEAD WATER
IN NEAREST GALLON
WELLHEAD WATER
IN NEAREST GALLON
WELLHEAD WATER
IN NEAREST GALLON



WELL LOG
A. WELL HAS BEEN COMPLETED
B. ELECTRIC LOG OBTAINED
C. TEST WELL CONVERTED TO PRODUCTION
WELL

LOT SIZE
DIAMETER
OF SCREEN
INCH

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL REPORT
P IN BOX

USE ONLY
NOT TO BE FILLED IN BY DRILLER
(EROS)
W.C.
H.E.R.
OTHER DATA

WELLING SIGNATURE
TEST SIGNATURE ON APPLICATION
DATE OF COMPLETION OF WELL IN MARYLAND
DATE OF COMPLETION OF WELL IN MARYLAND

SEQUENCE NO. 4186
(KEEP USE ONLY)
THIS NUMBER IS TO BE PUNCHED
IN COLS. 34 ON ALL CARDS

WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT ON THIS

COUNTY NUMBER 85-331
PERMIT NO. 114-811-2345

DATE WELL COMPLETED 08/07/63
DATE OF WELL 08/07/63
OWNER Connelley, Ronald
STREET OR RFD 125 30
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		WATER BEARING
	FROM	TO	
Top Soil	0	2	
Clay	2	8	
Shale	8	40	
Clay	40	50	
Line Stone	50	63	
Line Stone	63	65	

WELL HAS BEEN BROUGHT
(Circle Appropriate Box)
TYPE OF CEMENTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☒
NO. OF BAGS 30 NO. OF POUNDS 3000
GALLONS OF WATER 160
DEPTH OF GROUT SEAL (to nearest foot)
from 0 to 47
(enter 0 if from surface)
Casing Record
Casing types insert appropriate code below
STEEL CONCRETE
TUB OTHER

PUMPING TEST
HOURS PUMPED (nearest hour) 2
PUMPING RATE (gal. per min. to nearest gal.) 100
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 50
WHEN PUMPING 78
TYPE OF PUMP USED (for test)
☒ hand ☐ piston ☐ other
☐ centrifugal ☐ rotary ☐ other

WELL LOG OBTAINED
THIS WELL QUALIFIED TO PERFORM
WELL
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH OREGON 1973 "WELL CONSTRUCTION"
AND IN ACCORDANCE WITH ALL CONDITIONS STATED IN THE
APPROPRIATE PERMIT. AND THAT THE INFORMATION
FURNISHED HEREON IS TRUE AND CORRECT TO THE BEST
OF MY KNOWLEDGE.
DATE 08/07/63
SIGNATURE [Signature]
TITLE [Title]

MAIN Normal diameter Total Acid
Diameter to 10 feet below bottom of casing
Diameter to 20 feet below bottom of casing
Diameter to 30 feet below bottom of casing
Diameter to 40 feet below bottom of casing
Diameter to 50 feet below bottom of casing
Diameter to 60 feet below bottom of casing
Diameter to 70 feet below bottom of casing
Diameter to 80 feet below bottom of casing
Diameter to 90 feet below bottom of casing
Diameter to 100 feet below bottom of casing
CRACKS
LEAKAGE
OR SEEPAGE
FROM TO
CRACKS
IF WELL INSTALLED WAS
FLOWING WELL INSTALLED
IN BOX 23
KEEP USE ONLY
DO NOT TO BE FILLED IN BY DRILLER
T (CRACKS) W (OTHER DATA)
TELEPHONE
CITY

PUMP INSTALLED
DRILLER WILL INSTALL PUMP
(Circle YES or NO)
DRILLER INSTALLS PUMP. THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PUMP LOCATION
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

8 1 8046 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

EM-RU-2418
Fill in this form completely

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

Date Received
01/01/81

OWNER INFORMATION

SANDRA L. CONE WICK
5400 EVO WARR
WALBERTVILLE 4021203

DRILLER INFORMATION

W. B. GUYNN
GUYNN-CORNWELL WELL DRILLING
6030 HOKER LN - FREDERICK MD
7-22-85

WELL INFORMATION

APPROX. MINING RATE (GAL. PER MIN.)
AVERAGE DAILY QUANTITY REQUIRED (GAL. PER DAY)

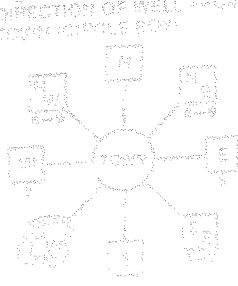
USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- ☐ FARMING (LIVESTOCK WATERING, F. AGRICULTURAL IRRIGATION)
- ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (OBTAIN APPROPRIATE PERMIT)
- ☐ PUBLIC OR PRIVATE WATER SUPPLY (OBTAIN PERMIT)

LOCATION OF WELL

SECTION 1 LOT 19
MILES FROM TOWN (ENTER 0 IF IN TOWN)

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



GUYNN COURT
NEAR WHAT ROAD

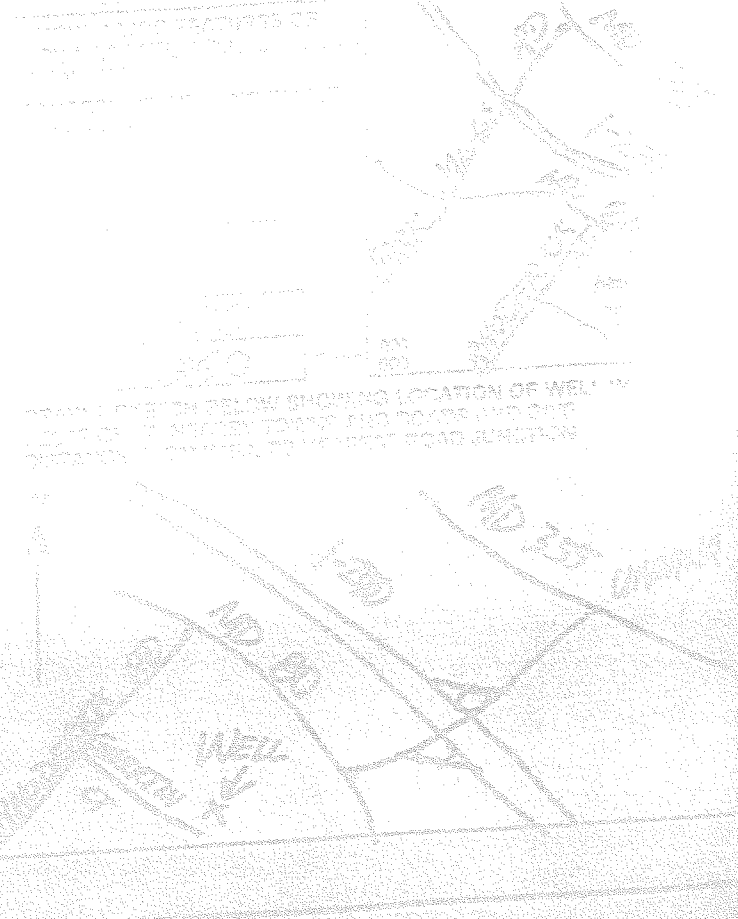
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD
ENTER FT. OR MI.

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

DATE ISSUED
01/01/81
W. B. GUYNN



- ☐ THIS WELL WILL BE USED FOR THE FOLLOWING PURPOSES:
- ☐ THIS WELL WILL BE USED FOR THE FOLLOWING PURPOSES:
- ☐ THIS WELL WILL BE USED FOR THE FOLLOWING PURPOSES:

PERMIT NUMBER OF WELL TO BE REPLACED OR REDESIGNED IF AVAILABLE
APPROX. PERMIT NUMBER
WELL PERMIT NO. EM-RU-2418

8045
SEQUENCE NO.
DEP USE ONLY
(THIS NUMBER IS TO BE PUNCHED
IN COLUMNS ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

ER-211-21420
fill in this form completely

Date Received

OK 10/1/74

OWNER INFORMATION

SCHLOSSER, E. E. JR.
2101 PLEASANT WOOD DRIVE
JUMMERSVILLE, MD 21113

DRILLER INFORMATION

W. B. GUYAN
GUYAN-CORNWELL WELL DRILLING
6030 MYERS LN - FREDERICK
MD 21701 7-23-05

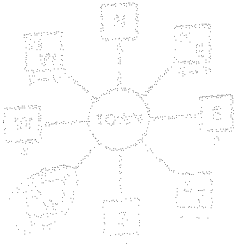
WELL INFORMATION

APPROX PUMPING RATE (GAL. PER MIN.)
AVERAGE DAILY QUANTITY NEEDED
GAL. PER DAY

LOCATION OF WELL

FREDERICK
SECTION 11 LOT 16
MILES FROM TOWN (only fill in town)

DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)



GUESTIN CREST
NEAR ROUTE 30

ON WHICH SIDE OF ROAD
ARTICLE APPROPRIATE BOX



30' AT
DISTANCE FROM ROAD

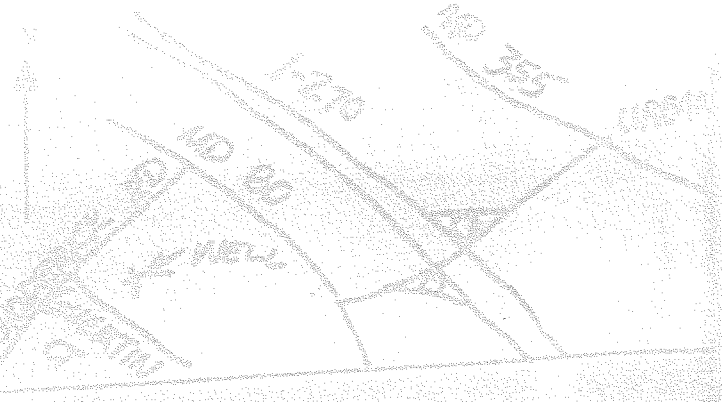
ENTER AT 10

NOT TO BE FILLED IN BY DRILLER
DEPARTMENT APPROVAL

DATE ISSUED
3-17-06
J. E. Galt

STATE OF MARYLAND
DEPARTMENT OF THE ENVIRONMENT

OR BY A SKETCH BELOW SHOWING LOCATION OF WELL
RELATIVE TO NEAREST TOWNS AND ROADS AND ONE
MILE FROM WELL TO NEAREST ROAD JUNCTION



REPLACEMENT OF EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WILL BE
REMOVED AND SEALED
THIS WELL WILL REPLACE A WELL THAT WILL BE LEFT
AS A CISTERN
THIS WELL WILL BECOME AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEPENDENT
ON AVAILABLE

PERMIT NUMBER

FORWARD TO STATE DEPARTMENT OF THE ENVIRONMENT

2633

SEQUENCE NO.
(DEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

PR-811-2552

(THIS NUMBER IS TO BE PUNCHED
IN GOLD INK ON ALL CARDS)

(Please print or type)

Fill in this form completely

Date Received

06/18/83

OWNER INFORMATION

John S. Cline, Jr. 14015

2001 TOWN OF TOWNSHIP 14040

DICKERSON 13020542

DRILLER INFORMATION

Robert L. Cline

11817

Cline and Son, Inc.

8593 Hillman Road, Frederick

Robert L. Cline 9-12-82

Driller

B-2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 3

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 200

USE FOR WATER SUPPLY APPROPRIATE BOX

☒ DRONE SHAFT OR DOUBLE MOUNTED ON THE DRILL

☐ DRONE SHAFT OR DOUBLE MOUNTED ON THE DRILL

☐ DRONE SHAFT OR DOUBLE MOUNTED ON THE DRILL

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B-3

LOCATION OF WELL

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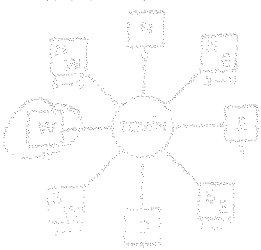
FRICKLECK

FRICKLECK

FRICKLECK

B-4

DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)



Roderick Road

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NOT TO BE FILLED IN BY DRILLER
DEPT. OF TRANSPORTATION

85-652

85-652

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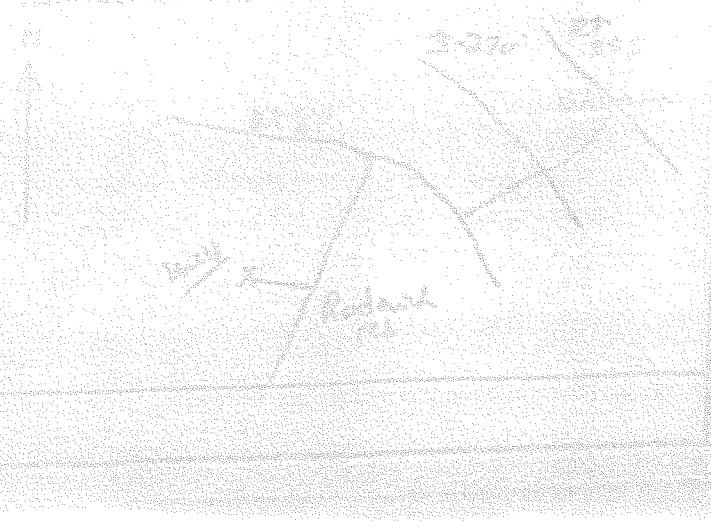
85-652

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85-652

DRAW A FIVE FOOT BELOW ENGINEERING LOCATION OF WELL IN
RELATION TO NEARBY TOWNS AND ROADS AND ONE
DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



CH 2037

SEQUENCE NO
(IDEP USE ONLY)

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

THIS REPORT MUST BE FILED
45 DAYS AFTER WELL IS COMPLETED

COUNTY
NUMBER

85-659

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

DATE RECEIVED

DATE WELL COMPLETED

0071 12 1988

09 23 1985

Depth of Well
130
(TO NEAREST FOOT)

PERMIT NO
FROM "PERMIT TO DRILL WELL"
AR-811-21534

OWNER

BENSON

STREET OR RFD

201 THURSTON ROAD

SUBDIVISION

URBANA OVERLOOK

SECTION

TOWN

DICKERSON MD 20842

LOT 37

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	Water bearing?
BROWN SHALE	0	26	
BLUE SLATE	26	100	

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☒

NO OF BAGS 9 NO OF POUNDS 846
GALLONS OF WATER 54
DEPTH OF GROUT SEAL (to nearest foot)

from 0 to 41
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN CASING NO. 1 CASING NO. 2 CASING NO. 3
DEPTH (to nearest foot) 130 130 130
LENGTH (to nearest foot) 130 130 130

SMALLER CASING NO. 1 CASING NO. 2 CASING NO. 3
DEPTH (to nearest foot) 130 130 130
LENGTH (to nearest foot) 130 130 130

SMALLER CASING NO. 1 CASING NO. 2 CASING NO. 3
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DEPTH (to nearest foot) 130 130 130
LENGTH (to nearest foot) 130 130 130

SMALLER CASING NO. 1 CASING NO. 2 CASING NO. 3
DEPTH (to nearest foot) 130 130 130
LENGTH (to nearest foot) 130 130 130

PUMPING TEST

HOURS PUMPED (nearest hour) 11

PUMPING RATE (gal per min to nearest gal) 50

METHOD USED TO MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30

WHEN PUMPING 100

TYPE OF PUMP USED (for test)

AM piston T turbine

C centrifugal R rotary Q other (describe below)

D jet S submersible

WELL INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) YES or NO

IF DRILLER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS

INSERT HOME USE TYPE OF PUMP INSTALLED

TYPE OF PUMP INSTALLED

TYPE OF PUMP INSTALLED

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TYPE OF PUMP INSTALLED

A WELL WAS ABANDONED AND CAPPED WHEN THIS WELL WAS COMPLETED

E ABANDONED LOG CONTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

THESEY CERTIFY THAT THIS WELL HAS BEEN COMPLETED IN ACCORDANCE WITH COMAR 10.17.02 "WELL CONSTRUCTION AND ABANDONMENT" WITH ALL CONDITIONS STATED IN THE PERMIT TO DRILL WELL, AND THAT THE INFORMATION PROVIDED HEREON IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE.

DRILLER'S SIGNATURE NO. 139

DRILLER'S SIGNATURE

DRILLER'S SIGNATURE (ON APPLICATION)

DRILLER'S SIGNATURE

DRILLER'S SIGNATURE

DRILLER'S SIGNATURE

GRAVEL BACK

IF WELL EQUIPPED WITH

PUMPING WELL INSERT

PUMPING WELL INSERT

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PUMPING WELL INSERT

(E.F.C.A.)

WD

OTHER DATA

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) YES or NO

IF DRILLER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS

INSERT HOME USE TYPE OF PUMP INSTALLED

TYPE OF PUMP INSTALLED

TYPE OF PUMP INSTALLED

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TYPE OF PUMP INSTALLED

TYPE OF PUMP INSTALLED

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SHOW TO

BUILDING, SEPTIC TANKS, AND/OR

LANDMARKS AND INDICATE NOT LESS

THAN TWO DISTANCES

(MEASUREMENTS TO WELL)

MD FT 80

MD FT 80

MD FT 80

MD FT 80

MD FT 80

MD FT 80

MD FT 80

MD FT 80

1 7087 (FOR USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

RI-311-25812
fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COLUMNS 34 ON ALL CARDS)

Date Received

09/25/75

OWNER INFORMATION

Heather Abdo (DND)

11/20/75

DRILLER INFORMATION

George E. Easterday

L. Franklin Easterday, Inc.

9265 Bacon Church Bl. N. + R.R. MD 207

Phone: 1 Easterday 9/24/75

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

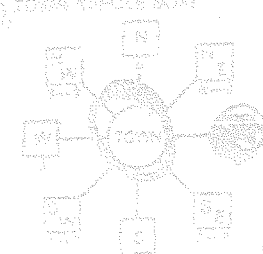
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

8.1

LOCATION OF WELL

8.4

DIRECTION OF WELL FROM TOWN (CIRCLE ONE)



RI 335

NEAR WHAT ROAD

NOT TO BE FILLED IN BY DRILLER

QUALITY MAJOR FEATURES OF THE LOCALITY

TO BE FILLED IN BY DRILLER SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE THE NAME OF THE WELL, AS NEAREST ROAD, RAILROAD



(THIS NUMBER IS TO BE PUNCHED IN COLUMNS 34 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER

PERMIT NO FROM "PERMIT TO DRILL WELL"

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

NOV 20 1983

000333

15 FEET FROM

FR-811-258

OWNER

last name

first name

TOWN

LOT

STREET OR RFD

SUBDIVISION

SECTION

WELL LOG

Not required for driven wells

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

WELL HAS BEEN GROUNDED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

PENTONITE CLAY

NO OF BAGS

NO OF CUBICS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 to 10 (enter 0 if from surface)

Casing types insert appropriate code below

GASING RECORD

STEEL CONCRETE PLASTIC OTHER

MAIN Casing Nominal diameter Top internal casing depth of main casing (nearest foot)

TYPE

1/2" 3/4" 1" 1 1/4" 1 1/2" 2" 2 1/2" 3" 3 1/2" 4" 4 1/2" 5" 6" 8" 10" 12" 14" 16" 18" 20" 24" 30" 36" 42" 48" 54" 60" 72" 84" 96" 108" 120" 144" 168" 192" 216" 240" 264" 288" 312" 336" 360" 384" 408" 432" 456" 480" 504" 528" 552" 576" 600" 624" 648" 672" 696" 720" 744" 768" 792" 816" 840" 864" 888" 912" 936" 960" 984" 1008" 1032" 1056" 1080" 1104" 1128" 1152" 1176" 1200" 1224" 1248" 1272" 1296" 1320" 1344" 1368" 1392" 1416" 1440" 1464" 1488" 1512" 1536" 1560" 1584" 1608" 1632" 1656" 1680" 1704" 1728" 1752" 1776" 1800" 1824" 1848" 1872" 1896" 1920" 1944" 1968" 1992" 2016" 2040" 2064" 2088" 2112" 2136" 2160" 2184" 2208" 2232" 2256" 2280" 2304" 2328" 2352" 2376" 2400" 2424" 2448" 2472" 2496" 2520" 2544" 2568" 2592" 2616" 2640" 2664" 2688" 2712" 2736" 2760" 2784" 2808" 2832" 2856" 2880" 2904" 2928" 2952" 2976" 3000" 3024" 3048" 3072" 3096" 3120" 3144" 3168" 3192" 3216" 3240" 3264" 3288" 3312" 3336" 3360" 3384" 3408" 3432" 3456" 3480" 3504" 3528" 3552" 3576" 3600" 3624" 3648" 3672" 3696" 3720" 3744" 3768" 3792" 3816" 3840" 3864" 3888" 3912" 3936" 3960" 3984" 4008" 4032" 4056" 4080" 4104" 4128" 4152" 4176" 4200" 4224" 4248" 4272" 4296" 4320" 4344" 4368" 4392" 4416" 4440" 4464" 4488" 4512" 4536" 4560" 4584" 4608" 4632" 4656" 4680" 4704" 4728" 4752" 4776" 4800" 4824" 4848" 4872" 4896" 4920" 4944" 4968" 4992" 5016" 5040" 5064" 5088" 5112" 5136" 5160" 5184" 5208" 5232" 5256" 5280" 5304" 5328" 5352" 5376" 5400" 5424" 5448" 5472" 5496" 5520" 5544" 5568" 5592" 5616" 5640" 5664" 5688" 5712" 5736" 5760" 5784" 5808" 5832" 5856" 5880" 5904" 5928" 5952" 5976" 6000" 6024" 6048" 6072" 6096" 6120" 6144" 6168" 6192" 6216" 6240" 6264" 6288" 6312" 6336" 6360" 6384" 6408" 6432" 6456" 6480" 6504" 6528" 6552" 6576" 6600" 6624" 6648" 6672" 6696" 6720" 6744" 6768" 6792" 6816" 6840" 6864" 6888" 6912" 6936" 6960" 6984" 7008" 7032" 7056" 7080" 7104" 7128" 7152" 7176" 7200" 7224" 7248" 7272" 7296" 7320" 7344" 7368" 7392" 7416" 7440" 7464" 7488" 7512" 7536" 7560" 7584" 7608" 7632" 7656" 7680" 7704" 7728" 7752" 7776" 7800" 7824" 7848" 7872" 7896" 7920" 7944" 7968" 7992" 8016" 8040" 8064" 8088" 8112" 8136" 8160" 8184" 8208" 8232" 8256" 8280" 8304" 8328" 8352" 8376" 8400" 8424" 8448" 8472" 8496" 8520" 8544" 8568" 8592" 8616" 8640" 8664" 8688" 8712" 8736" 8760" 8784" 8808" 8832" 8856" 8880" 8904" 8928" 8952" 8976" 9000" 9024" 9048" 9072" 9096" 9120" 9144" 9168" 9192" 9216" 9240" 9264" 9288" 9312" 9336" 9360" 9384" 9408" 9432" 9456" 9480" 9504" 9528" 9552" 9576" 9600" 9624" 9648" 9672" 9696" 9720" 9744" 9768" 9792" 9816" 9840" 9864" 9888" 9912" 9936" 9960" 9984" 10000

Topsoil	0	2
Br. Slt	2	12
Tan Slt	12	48
Br. Slt	48	55
Tan Slt	55	60
Bl. Slt	60	210
Gravel	210	212
Bl. Slt	212	500

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal per min. to nearest gal)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

1 piston 7 turbine

2 centrifugal 8 rotary 9 other (specify)

3 jet 5 submersible

PUMP INSTALLED

DEALER WILL INSTALL PUMP (circle YES or NO) IF DEALER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED PLACE (A,B,C,P,R,S,T,O) IN BOXES ABOVE

CAPACITY GALLONS PER MINUTE (at nearest gallon)

HP MOTOR POWER

TYPE POLYMER LENGTH (nearest ft)

DATE WHEN PUMP WAS REPAIRED FOR (circle YES or NO)

LAND SURFACE

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE OR ROAD BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE DISTANCES (MEASUREMENTS TO WELL)

IF WELL WAS CONSTRUCTED IN ACCORDANCE WITH CODES 12111 WELL CONSTRUCTION AND PERFORMANCE WITH ALL CONDITIONS STATED IN THE PERMIT TO DRILL WELL, AND THAT THE INFORMATION IS TRUE AND CORRECT AND COMPLETE TO THE BEST OF HIS KNOWLEDGE

IF TEST WELL CONVERTED TO PRODUCTION

TESTER CERT. NO.

TESTER SIGNATURE

TESTER NAME

TESTER ADDRESS

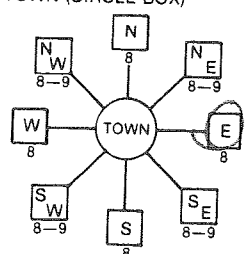
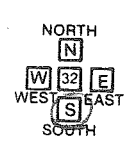
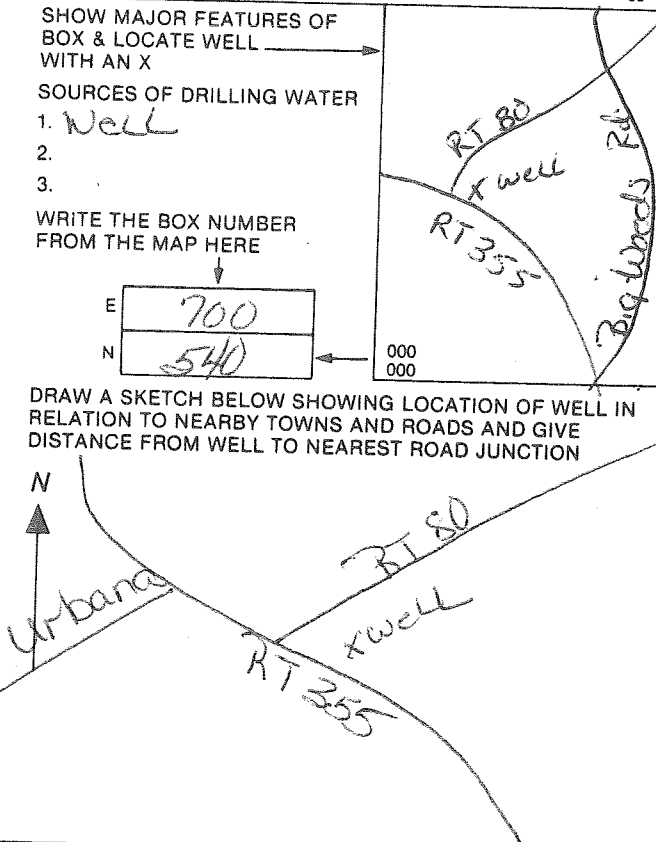
TESTER PHONE

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT P IN BOXES

DO NOT USE ONLY NOT TO BE FILLED IN BY DEALER

7 (EROS) W2 TELEPHONE LOG OTHER DATA

ORIGINAL

<p>B 1 4541</p> <p>SEQUENCE NO. (OEP USE ONLY)</p>	<p>STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL <i>please print or type</i></p>	<p>OEP PERMIT NUMBER</p> <p>FR-81-2661</p> <p><small>70 fill in this form completely 79</small></p>
<p>Date Received 10/5/85</p>		
<p>OWNER INFORMATION</p> <p>Peter Pan INN</p> <p><small>15 Last Name 13 Owner 34 First Name</small></p> <p>RT 355</p> <p><small>36 Street or RFD 55</small></p> <p>JAMESVILLE MD 21754</p> <p><small>57 Town 70 State 72 Zip 76</small></p>		
<p>DRILLER INFORMATION</p> <p>George F. Easterday 30</p> <p><small>Driller's Name 77 License No. 80</small></p> <p>L. Frank Easterday, Inc.</p> <p><small>Firm Name</small></p> <p>9265 Brown Church Rd, Mt Airy, MD</p> <p><small>Address</small></p> <p>George F. Easterday 10/9/85</p> <p><small>Signature Date</small></p>		
<p>B 2 WELL INFORMATION</p> <p>APPROX. PUMPING RATE (GAL. PER MIN.) 6</p> <p><small>8 12</small></p> <p>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 600</p> <p><small>14 20</small></p>		
<p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</p> <p><input checked="" type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</p> <p><input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p>		
<p>APPROXIMATE DEPTH OF WELL 200 FEET</p> <p><small>24 28</small></p>		
<p>APPROXIMATE DIAMETER OF WELL 6 INCH</p> <p><small>NEAREST INCH</small></p>		
<p>METHOD OF DRILLING (circle one)</p> <p><input checked="" type="checkbox"/> BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN</p> <p><input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)</p> <p><input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT</p> <p>other _____</p>		
<p>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p><input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY</p> <p><input type="checkbox"/> D THIS WELL WILL DEEPEIN AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) </p> <p><small>41 52</small></p>		
<p><small>Not to be filled in by driller (OEP USE ONLY)</small></p> <p>APPROP. PERMIT NUMBER FR69GAP024</p> <p><small>54 63</small></p> <p>FORCE 3C WRITE INITIALS IN BOX PERMIT No. FR-81-2661</p> <p><small>67 68 70 71 72 73 74 75 76 77 78 79</small></p>		
<p>B 3 LOCATION OF WELL</p> <p>Frederick</p> <p><small>8 COUNTY 21</small></p> <p> </p> <p><small>23 SUBDIVISION 42</small></p> <p>SECTION LOT </p> <p><small>44 46 48 50</small></p> <p>Urbana</p> <p><small>52 NEAREST TOWN 71</small></p> <p>MILES FROM TOWN (enter 0 if in town) 0 MI</p> <p><small>73 76 77 78</small></p>		
<p>B 4</p> <p>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</p> <p></p> <p>NEAR WHAT ROAD RT 355</p> <p><small>11 30</small></p> <p>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</p> <p></p> <p>DISTANCE FROM ROAD 50 FT</p> <p><small>34 37</small></p> <p>ENTER FT or MI FT</p> <p><small>38 39</small></p>		
<p>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</p> <p>Frederick 85-727</p> <p><small>COUNTY NAME COUNTY NO.</small></p> <p>OEP SIGNATURE Susan E. Corbett 4-30-86</p> <p><small>DATE ISSUED CO SIGNATURE EXP. DATE</small></p> <p>NORTH GRID 543000 EAST GRID 0702000</p> <p><small>50 55 57 63</small></p>		
<p>SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X</p> <p>SOURCES OF DRILLING WATER</p> <p>1. WELL</p> <p>2. _____</p> <p>3. _____</p> <p>WRITE THE BOX NUMBER FROM THE MAP HERE</p> <p>700</p> <p>540</p> <p><small>000 000</small></p> <p>DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION</p> <p></p>		
<p>SPECIAL CONDITIONS</p> <p>3</p>		

06432
SEQUENCE NO. (OEP 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

DATE Received

11/20/85

DATE WELL COMPLETED

10/03/85

Depth of Well

22 300 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

FR-81-2661

OWNER

STREET OR RFD

SUBDIVISION

last name Peter
RT 335

first name Jan
Inn

TOWN

Urbana

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

Check
if water
bearing

FROM TO

Topsoil

0 2

Br. Slate

2 26

Bl. slate

26 38

Br. slate

38 40

Bl. slate

40 300

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

YES Y NO N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 6 NO. OF POUNDS 600

GALLONS OF WATER 35

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

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

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

ST 6 20
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from to

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

ST BR HO
STEEL BRASS OPEN
BRONZE HOLE
PL OT
PLASTIC OTHER

C 2

DEPTH (nearest ft.)
1 18 300
8 9 11 15 17 21
23 24 26 30 32 36
38 39 41 45 47 51

SLOT SIZE 1 2 3

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.) WQ
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 4

PUMPING RATE (gal. per min. to nearest gal.) 3

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 55

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

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE YES or NO) 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
- below (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)

Pump House

Approx. 500'

well
15

ORIGINAL

3251

SEQUENCE NO.
DO NOT USE ONLY

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

PR-811-2710
fill in this form completely

THIS NUMBER IS TO BE PUNCHED
IN COLD 35 ON ALL CARDS

Date Received

7/14/55

OWNER INFORMATION

GUYMAN, RICHARD

517 E. ECKHART ST. BALTIMORE

FREDERICK

DRILLER INFORMATION

SHELDON L. HARLEY

3211

WICK'S WELL DRILLING

133 Yellow Springs Rd. Falls Rd. ALCO

Sheldon L. Harley 1-2-55

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

AVERAGE DAILY QUANTITY NEEDED
(GAL. PER DAY)

USE FOR

DOMESTIC OR INDUSTRIAL PURPOSES ONLY
FARMING PURPOSES, MINING AND MINERAL
EXPLORATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL, OR
OTHER PURPOSES APPROPRIATE PERMIT

PURPOSE OF WELL (SEE COMPANY RECORDS)

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

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FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

FOR OTHER PURPOSES, SEE COMPANY RECORDS

8 2

LOCATION OF WELL

FREDERICK

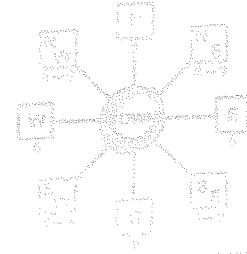
SECTION

LOT

MILES FROM TOWN (enter 0 if in town)

8 4

DIRECTION OF WELL FROM
TOWN (CIRCLE TOWN)



MD. ROUTE 355

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD

ENTER FT. OR MI.

SEE IF FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

DATE

STATE HEALTH
INSERT 5

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

01 5148

SEQUENCE NO
(DO NOT USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

FD-811-34310
Fill in this form completely

(THIS NUMBER IS TO BE PUNCHED
IN COLUMNS 30 ON ALL CARDS)

Date Received

7-1-78

OWNER INFORMATION

SURNAME FIRST MIDDLE NAME LAST

SMITH JOHN MICHAEL

ADDRESS

1234567890

DRILLER INFORMATION

Robert A. Cline

Cline and Donald Co

1023 Hillman Road, Baltimore

Robert A. Cline 6-30-78

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

100

AVERAGE DAILY QUANTITY USED (GAL. PER DAY)

100

USE FOR WATER (CHECK APPROPRIATE BOX)

1. SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY

2. FARMING & LIVESTOCK WATERING - AGRICULTURAL IRRIGATION

3. INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT PURPOSES

4. PUBLIC OR PRIVATE WATER SUPPLY SYSTEMS

5. OTHER (SPECIFY)

6. OTHER (SPECIFY)

7. OTHER (SPECIFY)

8. OTHER (SPECIFY)

9. OTHER (SPECIFY)

10. OTHER (SPECIFY)

11. OTHER (SPECIFY)

12. OTHER (SPECIFY)

13. OTHER (SPECIFY)

14. OTHER (SPECIFY)

15. OTHER (SPECIFY)

16. OTHER (SPECIFY)

17. OTHER (SPECIFY)

03

LOCATION OF WELL

SECTION 1 LOT 1

SECTION 2 LOT 2

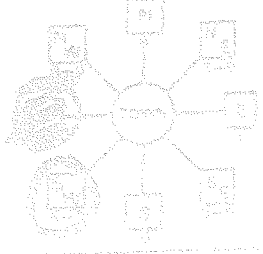
SECTION 3 LOT 3

SECTION 4 LOT 4

SECTION 5 LOT 5

04

DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)



Direction Court
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
CIRCLE APPROPRIATE BOX

266

ENTERED BY

DATE

NOT TO BE FILLED IN BY DRILLER
UNTIL AFTER INSPECTION APPROVAL

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

Signature

DATE

C1 2442 SEQUENCE NO (FOR 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 86-640

DATE RECEIVED 10/13/1986
DATE WELL COMPLETED 09/18/86

Depth of Well 36.0 ft

PERMIT NO. FROM "PERMIT TO DRILL WELL"
FR-871-3486

OWNER SHARP MICHAEL
STREET OR RD. 2084 332
SUBDIVISION WYBANA SUBS. LOT 25 SECTION 1

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

DESCRIPTION (ft)	FEET	WATER BEARING
BROWN CLAY	0	56
LMF SLATE	56	300 ft

WELL HAS BEEN GRouted (Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☒

NO. OF BAGS 26 NO. OF STUNGS 2 PR
GALLONS OF WATER 120
DEPTH OF GROUT SEAL (ft) 10
Enter 0 if from surface

CASING (Type) ☒ STEEL ☒ CONCRETE
Casing Size 6" ID

SCREEN (Type) ☒ WIRE ☒ OTHER
Screen Size 1/2" x 1/2"

PUMPING TEST
HOLES PUMPED (nearest hour) 1
PUMPING RATE (gal. per min. to nearest gal.) 100
METHOD USED TO MEASURE PUMPING RATE 7.1 MC
WATER LEVEL (distance from land surface) BEFORE PUMPING 2.4 ft
AFTER PUMPING 3.0 ft
TYPE OF PUMP USED (for test) ☒ PISTON ☒ OTHER

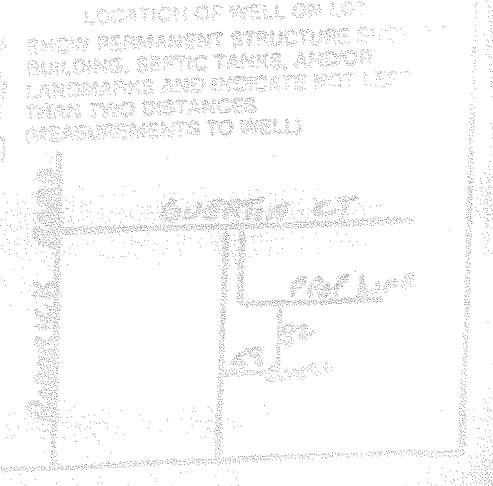
IF A WELL HAS BEEN COMPLETED AND THE WELL HAS NOT BEEN COMPLETED
IF A WELL HAS BEEN COMPLETED AND THE WELL HAS NOT BEEN COMPLETED

WELL INSTALLER
DRILLER WILL INSTALL PUMP YES ☒
IF DRILLER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS
TYPE OF PUMP INSTALLED
CAPACITY
LAND SURFACE

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE DISTANCES (MEASUREMENTS TO WELL)

WELLER'S SIGNATURE
PRINT NAME AND ADDRESS
DATE OF COMPLETION

GRANULAR PACK
IF WELL DRILLER HAS PLACED GRANULAR PACK IN WELL, IT MUST BE FILLED IN BY DRILLER



8775
SEQUENCE NO (USE ONLY)
THIS NUMBER IS TO BE PLACED IN COLD 33 ON ALL CAPS

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

FR-RII-3857
fill in this form completely

Date Received
OWNER INFORMATION
ADAM'S CONSTRUCTION
17 MILL ST NEW HALL CORRET
ADAM'S CONSTRUCTION
10/17/10

DRILLER INFORMATION
Robert L. Cline
Cline and Durrill Inc
8093 Hillbrook Ln, Frederick
Robert L. Cline 10-14-86

WELL INFORMATION
APPROX PUMPING RATE GAL PER MIN
AVERAGE DAILY QUANTITY NEEDED GAL PER DAY

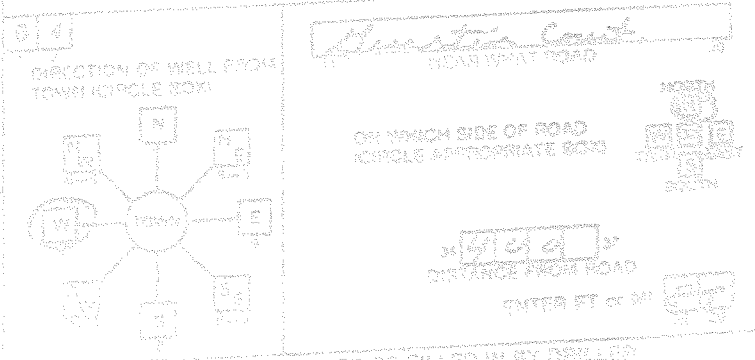
- USE FOR WATER (CIRCLE APPROPRIATE BOX)
- ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD USE ONLY)
 - ☐ FARMING (LIVESTOCK, WATERING & AGRICULTURAL IRRIGATION)
 - ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL USE
 - ☐ OTHER (INCLUDES APPROPRIATE EXPLANATION)
 - ☐ PUBLIC OR PRIVATE WATER COMPANY (SPECIFY AGENCY, ADDRESS, PHONE AND STATE AGENCY IN CHARGE)
 - ☐ THERMAL (GEO THERMAL, GEOTHERMAL, GEOTHERMAL)
 - ☐ OTHER (SPECIFY)

REPLACEMENT OF EXISTING WELL?
(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

THIS NUMBER OF WELL TO BE DRILLED OR DEEPENED
NOT TO BE FILLED IN BY DRILLER
APPROX PERMIT NUMBER
PERMIT NUMBER
FR-RII-3857

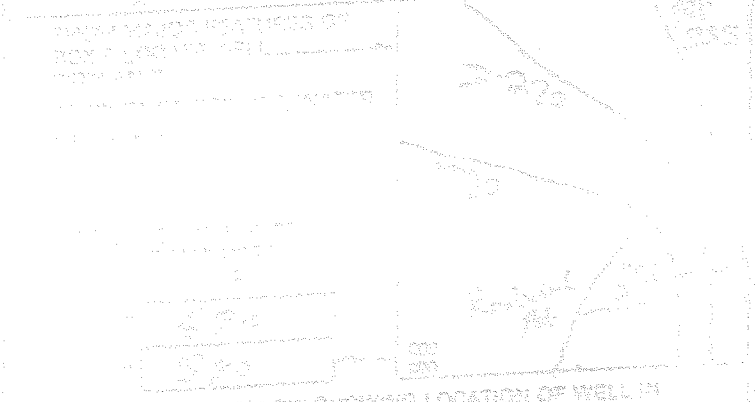
LOCATION OF WELL
SECTION LOT
MILES FROM TOWN (ONLY 0.1 IN TOWN)



NOT TO BE FILLED IN BY DRILLER
NEAREST TOWN (PRINT NAME)

DATE ISSUED
10/16/10
COUNTY
HARRIS

STATE HEALTH REPORT #



C1 1865

SEQUENCE NO
(DO NOT USE ONLY)

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

76-1029

PERMIT NO

FROM "PERMIT TO DRILL WELL"

FR-811-3857

(THIS NUMBER IS TO BE PUNCHED
IN COLS. 36 ON ALL CARDS)

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

42.5

OWNER

ARNAR CONST.

STREET OR RD

1615TH ST NW

CITY

SECTION

TOWN

FREDERICK MD 21701

SUBDIVISION

WILSON OVERLOOK

LOT

1

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	Color (if water bearing)
Brown sand	0	60	
Blue clay	60	42.5	

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒

BENTONITE CLAY ☒

NO OF BAGS

NO OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 to 11

center 0 ft from surface)

Casing types

insert

appropriate

code

below

CASING RECORD

STEEL

CONCRETE

PL

OT

ELASTIC

OTHER

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

WELL LOG

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

A air

B piston

C centrifugal

D rotary

E other

F

G

H

I

J

K

L

M

N

O

P

Q

R

S

T

U

V

W

X

Y

Z

AA

AB

AC

AD

AE

AF

AG

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

(CHECK YES OR NO)

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

TYPE OF PUMP INSTALLED

PLUG ADJUSTION

IN FEET ABOVE

CAPACITY

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

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WELL HEAD PUMP

WELL HEAD PUMP

WELL HEAD PUMP

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SURROUNDING BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

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MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

MEASUREMENTS TO WELL

B 1 4764 SEQUENCE NO
IDEP USE ONLY

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
(Make print or type)

DEP PERMIT NUMBER
HA-811-485K
fill in this form completely

THIS NUMBER IS TO BE PUNCHED
IN COLD 34 ON ALL CARDS

Date Received

11/1/80

OWNER INFORMATION

ADAMS CONSTRUCTION Co.

6791 Stoneview Rd. Court

ADAMS TOWNSHIP MD 21216

DRILLER INFORMATION

Robert A. Cline 11391

Cline and Duval Inc.

8093 Hillmark Ind. Frederick

Robert L. Cline 10-4-86

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL PER MIN.) 15

AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY) 200

USE FOR MULTIPLE UNITS APPROPRIATE BOX

☒ HOME, ON THE ON BOARD'S HOME/OLD UNIT ONLY

☐ FARMING LIVESTOCK WATER AND AGRICULTURAL
LOCATION

☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV
OTHER USES (SEE APPROVAL)

☐ PUBLIC OR PRIVATE WATER COMPANY REQUIRES
PLATIFICATION, PERMIT AND STATE HEALTH DEPT. APPROVAL

☐ TEST, OBSERVATION, MONITORING AND RESERVE
APPROPRIATE REPORT

B 3

LOCATION OF WELL

FREDERICK

REBAMA OVERLOOK

SECTION 1

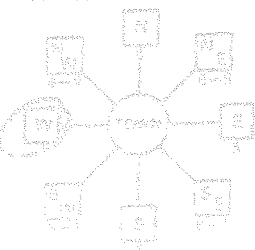
LOT 20

REBAMA

MILES FROM TOWN (ENTER 0 IF IN TOWN) 1 MI

B 4

DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)



Quarter Creek
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 50

ENTER FT OR MI 50

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Frederick

86-030

DATE ISSUED

STATE HEALTH
DEPT.

DATE RECEIVED

James D. Hines 7-20-80

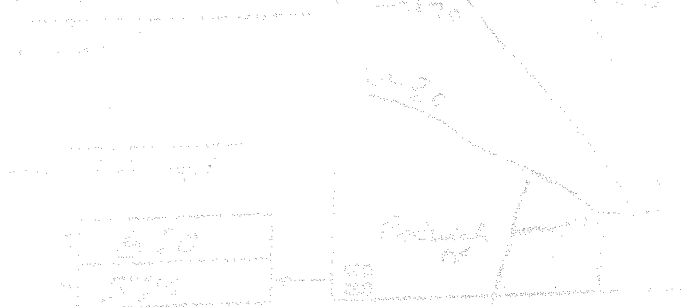
DATE RECEIVED

DATE RECEIVED

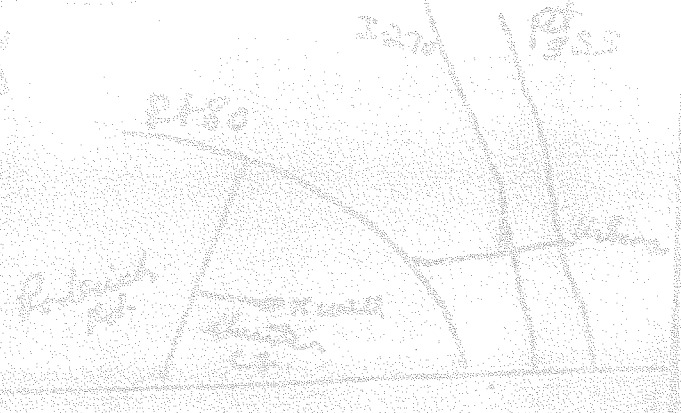
DATE RECEIVED

DATE RECEIVED

SHOW MAP OF LOCATION OF
WELL, LOCATE WELL
WITHIN 1/2



STAY A SHORT BELOW SURVEY LOCATION OF WELL
RELATION TO NEAREST TOWN AND ROAD AND GIVE
TOWN OR CITY WELL TO NEAREST ROAD LOCATION



THE LOCATION OF DETERMINED WELL
WILL BE APPROXIMATE TO

☐ 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 STATION

☐ THIS WELL WILL BE AN EXISTING WELL

APPROXIMATE LOCATION OF WELL

APPROXIMATE LOCATION OF WELL

APPROXIMATE LOCATION OF WELL

APPROXIMATE LOCATION OF WELL

APPROXIMATE LOCATION OF WELL

APPROXIMATE LOCATION OF WELL

SEQUENCE NO. (FOR USE ONLY)
THIS IS TO BE PUNCHED ON ALL CARDS

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

45 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER
PERMIT NO.

DATE WELL COMPLETED

Depth of Well

FROM "PERMIT TO DRILL WELL"

OWNER

ADDRESS

STREET OR RD

CITY

TOWN

ADDRESS

SUBDIVISION

SECTION

LOT

WELL LOG

Not required for driven wells

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

PERCENTAGE (Also additional details if needed)

FROM TO

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT PORTLAND CEMENT

NO. OF BAGS NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (in feet)

from to (enter 0 if from surface)

CASING RECORD

STEEL CONCRETE

OTHER

OTHER

OTHER

OTHER

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PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

OTHER

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0041 SEQUENCE NO (FOR USE ONLY)

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

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

45 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER 86-1243

PERMIT NO. FROM "PERMIT TO DRILL WELL"

FR-311-41410

DATE RECEIVED 12-1-1980

DATE WELL COMPLETED 12/1/79

Depth of Well 17.51
FEET (NEAREST TENTH)

OWNER AD MAR CONST.
STREET OR RD 1751
SUBDIVISION 162422 Charles K SECTION 15 LOT 15

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)

TYPE OF GROUTING MATERIAL

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 17 NO. OF POUNDS 1593

GALLONS OF WATER 102

DEPTH OF GROUT SEAL TO (nearest foot)

from 0 to 17.51

(enter 0 if from surface)

CASING TYPES (circle)

STEEL CONCRETE

PL OF OTHER

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PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (GAL PER MIN TO nearest GPM) 10

METHOD USED TO MEASURE PUMPING RATE 17.51

WATER LEVEL (distance from land surface)

BEFORE PUMPING 3.21

DURING PUMPING 17.51

TYPE OF PUMP USED (for test)

(A) piston

(B) centrifugal

(C) other

(D) other

(E) other

(F) other

(G) other

(H) other

(I) other

(J) other

(K) other

(L) other

(M) other

(N) other

(O) other

(P) other

(Q) other

(R) other

(S) other

(T) other

(U) other

(V) other

(W) other

(X) other

(Y) other

(Z) other

(AA) other

(AB) other

(AC) other

(AD) other

(AE) other

(AF) other

(AG) other

COULD AN APPROPRIATE LETTER A WELL THAT ABANDONED AND SEALS WHEN THE WELL WAS COMPLETED

FLOWED OR CHANGED

WELL WILL BE CLOSED TO FURTHER USE

WELL WILL BE CLOSED TO FURTHER USE

WELL WILL BE CLOSED TO FURTHER USE

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FEET

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE YES OR NO)

IF DRILLER INSTALLS PUMP THIS TEST MUST BE COMPLETED FOR ALL WELLS

TEST HOME USE

TYPE OF PUMP INSTALLED

PLACE (A.C. J.P. TEST)

WELL-TEST PUMP

WELL-TEST PUMP

WELL-TEST PUMP

WELL-TEST PUMP

WELL-TEST PUMP

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WELL-TEST PUMP

WELL-TEST PUMP

WELL NUMBER IS TO BE RECORDED
ON COAST AND ON ALL CARDS

DATE RECEIVED
02291787

OWNER INFORMATION

LOCATION OF WELL

DATE RECEIVED
02291787

OWNER INFORMATION
NORRIS ABELL
6931 NARRHUSVILLE RD
ATLANTA MD 21077

LOCATION OF WELL
FRIEDERICK
URBANA OVERLOOK
SECTION 17 LOT 17
URBANA
MILES FROM TOWN (IN OR OUT OF TOWN)

DRILLER INFORMATION
William B. GUYAR
Guyar-Grinnell Well Drillers
6050 Newcar Ln. Frederick, MD 21701
2-23-87

WELL INFORMATION
APPROX. DRILLING RATE (GAL PER MIN)
AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY)

SECTION 814
DIRECTION OF WELL FROM TOWN (CIRCLE ONE)
ON WHICH SIDE OF ROAD CIRCLE APPROPRIATE BOX
DISTANCE FROM ROAD
ENTER FT. OR MI.

USE FOR WATER (CIRCLE APPROPRIATE BOX)
HOME (CIRCLE ONE OF DOUBLE HOUSEHOLD UNIT ONLY)
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL
FACILITIES, RESEARCH, AGRICULTURE
FACILITIES TO IRRIGATE WATER COMPANY ACQUISITION
WATER SUPPLY FOR AGRICULTURE, RESEARCH, AGRICULTURE
WATER SUPPLY FOR AGRICULTURE, RESEARCH, AGRICULTURE
WATER SUPPLY FOR AGRICULTURE, RESEARCH, AGRICULTURE

SECTION 815
DATE ISSUED
7-26-87
EAST 06195000
WEST 06120000

SECTION 816
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL
RELATION TO NEAREST TOWNS AND ROADS AND GIVE
DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

SECTION 817
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 818
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 819
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 820
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 821
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 822
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 823
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 824
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 825
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 826
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

SECTION 827
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 STAFF
THIS WELL WILL SUPERSEDE AN EXISTING WELL

01 282
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 36 ON ALL CARDS)

SEQUENCE NO
(USE ONLY)

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

87-95

PERMIT NO
FROM "PERMIT TO DRILL WELL"

FR-811-4240

DATE RECEIVED
MAR 11 1987

DATE WELL COMPLETED
03 01 87

Depth of Well

340
TO NEAREST FOOT

OWNER Norris

Abell

First name

TOWN

Mc. Airy

LOT 17

STREET OR RD 304 Harrisville Rd.
SUBDIVISION Urbana (overlook)

SECTION

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	Water bearing
Brown shale	0	27	
Green slate	27	240	

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT (CM)

PORTLAND CEMENT

NO OF BAGS

NO OF POUNDS

GALLONS OF WATER
DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft from surface

Casing
Type
Insert
Androsph's
Code
Union

STEEL
CONCRETE
PIPE
OTHER

WELL TYPE
Casing
Type
Insert
Androsph's
Code
Union

WELL TYPE

OTHER COMMENTS (If any)

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for term)

TYPE OF PUMP USED (for term)

TYPE OF PUMP USED (for term)

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TYPE OF PUMP USED (for term)

1 7839

SEQUENCE NO.
(KEEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
Please print or type

FR-811-4351
fill in this form completely

ONCE NUMBER IS TO BE PUNCHED
IN CIRCLE 11 ON ALL CARDS

Date Received

10-27-82

OWNER INFORMATION

CHARLES T. THOMAS
RICHARD HAWKINS CIRCULAR
HAWKINS CIRCULAR

LOCATION OF WELL

SECTION 11 LOT 11
RICHARD HAWKINS CIRCULAR

DRILLER INFORMATION

Robert A. Cline
8093 Hallmarks Court, Frederick
Robert A. Cline 3-10-82

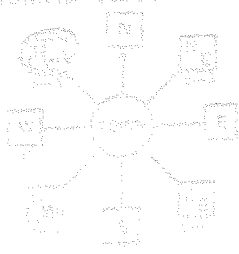
MINES FROM TOWN (ROW 01 in town)

MD

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

SECTION OF WELL FROM
TOWN (CIRCLE BOX)



ON WHICH SIDE OF ROAD
CIRCLE APPROPRIATE BOX



DISTANCE FROM ROAD

ENTER FT. OR MI.

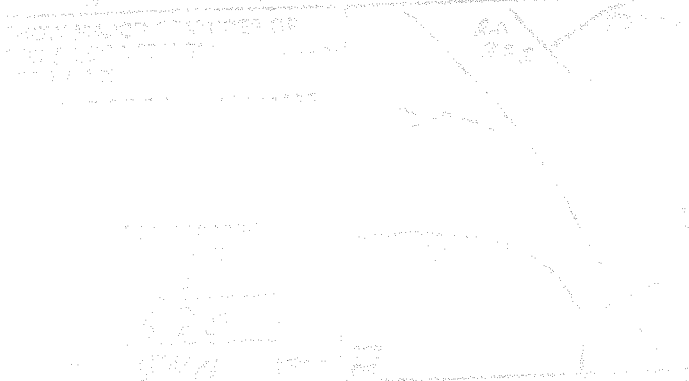
NOT TO BE FILLED IN BY DRILLER
QUALITY INSPECTION APPROVAL

Signature

87-284

STATE HEALTH
DEPARTMENT

DATE 9-2-82
Signature



LOCATE AND CIRCLE LOCATION OF WELL OF
RELATION TO NEAREST TOWNS AND ROADS AND GIVE
DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

THIS WELL IS NOT A REPLACEMENT FOR EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WILL BE
REMOVED AND REPLACED
THIS WELL WILL REPLACE A WELL THAT WILL BE USED
FOR A DIFFERENT PURPOSE

WATER

C1 1759 SEQUENCE NO. (OFF USE ONLY)

STATE OF MICHIGAN WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

COUNTY NUMBER

87-204

(THIS NUMBER IS TO BE PUNCHED
IN COLS 3-8 ON ALL CARDS)

DATE RECEIVED

SEP 10 1987

DATE WELL COMPLETED

092287

Depth of Well

61.5' TO
NEAREST FOOT

PERMIT NO.
FROM PERMIT TO DRILL WELL

87-204-4351

OWNER

last name

STREET OR RD

SUBDIVISION

LIBBANA MANOR

SECTION

17

LOT 1

WELL LOG

Not required for driven wells

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

DESCRIPTION (Use

FEET

Check
if water
bearing

additional sheets if needed

FROM TO

BROWN SHALE 0 32

BLUE SLATE 32 414

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ PORTLAND CEMENT

PORTLAND CEMENT

NO OF BAGS / NO OF BOWLS

GALLONS OF WATER

DEPTH OF GROUT SEAL TO TOP OF WELL

from 0 32 414

(enter 0 if from surface)

CASING RECORD

Casing

type

material

approximately

depth

ST

CO

STEEL

CONCRETE

PL

OT

PLASTIC

OTHER

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (see list)

PERISTALTIC

DIAPHRAGM

OTHER

WATER PUMP

WATER PUMP

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

(CIRCLE YES or NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL OTHER

EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLATE A, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z

WATER PUMP

WATER PUMP

WATER PUMP

WATER PUMP

WATER PUMP

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WATER PUMP

WATER PUMP

WATER PUMP

SLOT SIZE

DIALECTER OF SCREEN

from to

NEAREST INCH

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT

IN BOX

OFF USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

TELEPHONE

ADDRESS

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

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

ONE LINE

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 WAS PROPERLY CONSTRUCTED IN ACCORDANCE WITH CHAPTER 107.11 "WELL CONSTRUCTION" AND IN COMPLIANCE WITH ALL OTHER REQUIREMENTS IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION FURNISHED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

DRILLER IDENT. NO. 132

Robert C. Cline

DRILLER SIGNATURE

DRILLER SIGNATURE ON APPLICATION

Robert C. Cline

DRILLER SIGNATURE

DRILLER SIGNATURE

DRILLER SIGNATURE

7853

SEQUENCE NO.
(FOR USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

FR-811-43814
fill in this form completely

(THIS NUMBER IS TO BE PLACED IN 2015 ON ALL COPIES)

Date Received
11/11/13

OWNER INFORMATION

ADAM C. WISNIEWSKI
P.O. Box 1234
FARMERSVILLE MD 21042

DRILLER INFORMATION

Robert L. Oliver
Oliver and Duval Inc.
1093 Hillman Blvd, Frederick
Robert L. Oliver 22632

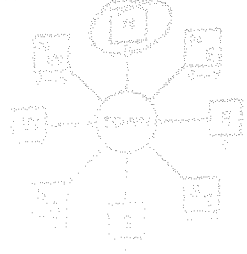
WELL INFORMATION

APPROX. PUMPING RATE (GAL PER MIN) 3.0
AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY) 200

LOCATION OF WELL

FIELDER LUCK
WILLIAM ALMOR
SECTION 2 LOT 2
MILES FROM TOWN (1000 to 10000) 1.0

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Tabler Rd.
TOWN WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



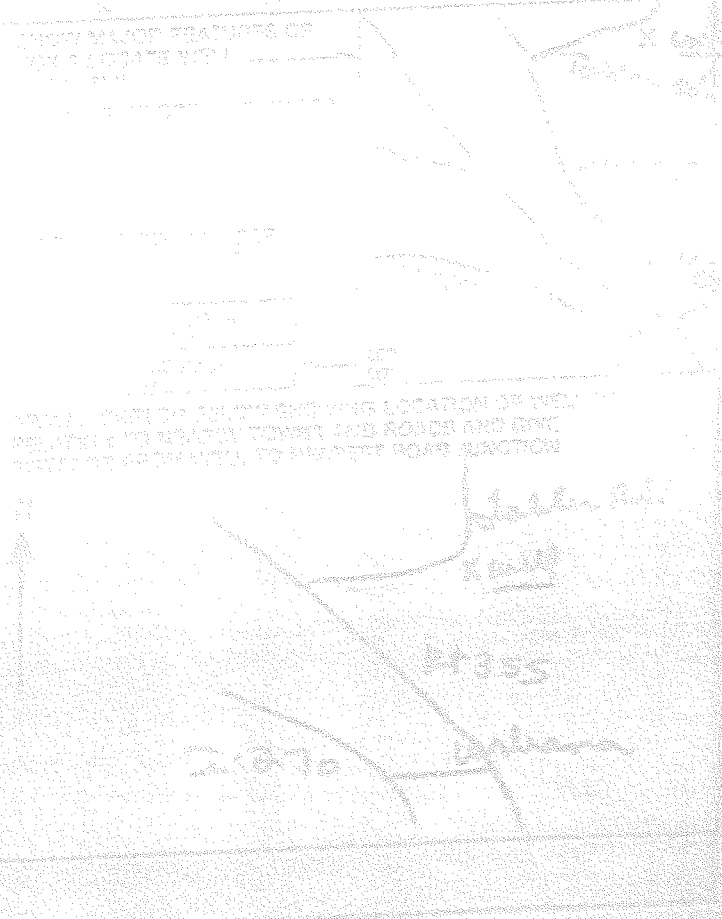
7.0
DISTANCE FROM ROAD

DEPT OF TRAN

NOT TO BE FILLED IN BY DRILLER
WELLER'S SIGNATURE APPROVAL

Signature
STATE HEALTH
INSPECTOR
DATE ISSUED
11/11/13
11/11/13

LOCAL MAP FEATURES OF
WELL LOCATION



USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ DOMESTIC WATER SUPPLY
- ☐ FARMING AND/OR OTHER AGRICULTURAL PURPOSES
- ☐ INDUSTRIAL, COMMERCIAL, MINING, OR OTHER PURPOSES
- ☐ OTHER (SPECIFY):

- ☐ THIS WELL WILL REPLACE AN EXISTING WELL
- ☐ THIS WELL WILL REPLACE A WELL THAT HAS BEEN ABANDONED AND SEALED
- ☐ THIS WELL WILL REPLACE A WELL THAT HAS BEEN ABANDONED AND SEALED
- ☐ THIS WELL WILL REPLACE A WELL THAT HAS BEEN ABANDONED AND SEALED

OTHER REASON FOR WELL TO BE DRILLED OR RESEALED

REASON FOR WELL TO BE DRILLED OR RESEALED

REASON FOR WELL TO BE DRILLED OR RESEALED

REASON FOR WELL TO BE DRILLED OR RESEALED

CI 1767 SEQUENCE NO. (DEP USE ONLY)

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

45 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER 87-278
PERMIT NO. FR-81-4124

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

DATE RECEIVED
JUN 1 1980

DATE WELL COMPLETED
6/12/80

Depth of Well
20.0 ft
TO NEAREST FOOT

FROM "PERMIT TO DRILL WELL"
FR-81-4124

OWNER ROMAN CONSTRUCTION TOWN GERMANTOWN MD 20875
STREET OR RD PO BOX 234 LOT 2
SUBDIVISION URBANA MANOR SECTION 1

WELL LOG

Not required for driven wells

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

DESCRIPTION (USE FEET) LENS
AND TOTAL DEPTH if different FEET TO

BROWN SHALE 0 5m
BLUE SLATE 5m

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ PORTLAND CEMENT ☒

NO OF BAGS 14 NO OF POUNDS 1316

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft to 20 ft

Water Ditch from surface

CASING
Type ☒ Insert ☒
Additional Code Only
STEEL CONCRETE
PIL OT
AST 6 OTHER

TYPE OF PUMP USED (for test)

5.7

PUMPING TEST

HOURS PUMPED (nearest hour) 11

PUMPING RATE (gpm) per min 25

METHOD USED TO MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42

WHEN PUMPING 200

TYPE OF PUMP USED (for test)
☒ Piston ☐ Turbine
☐ Centrifugal ☐ Rotary ☐ Other

PUMP INSTALLED

DRILLER WILL INSTALL PUMP
(CIRCLE YES OR NO)
IF DRILLER INSTALLS PUMP THIS SECTION
MUST BE COMPLETED FOR ALL DWELLING
THAT HOME USE
TYPE OF PUMP INSTALLED
CLASS (CLASS 1 TO 10)
LOCATION OF PUMP

CLASS 1 CLASS 2 CLASS 3 CLASS 4 CLASS 5 CLASS 6 CLASS 7 CLASS 8 CLASS 9 CLASS 10

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE (HOUSE OR
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE (HOUSE OR
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

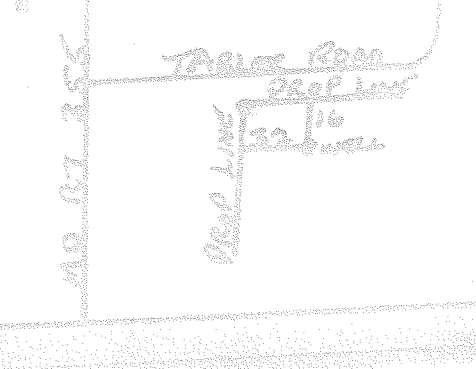
IF THE INFORMATION IS NOT
RECORDED IN THE WELL LOG
AND IS IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE
ABOVE MENTIONED PERMIT, AND THAT THE INFORMATION
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE

DRILLER'S IDENT. NO. 139

DRILLER'S SIGNATURE
MUST MATCH SIGNATURE ON APPLICATION
WELL LOG

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
P IN BOX ☐

DEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.A.S.) WO
TELESCOPE LOG OTHER DATA
CASES



7851 SEQUENCE NO (DEP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

DEP PERMIT NUMBER
FR-811-101815
fill in this form completely

THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-5 ON ALL CARDS

212230 0001 01 1979

OWNER INFORMATION
ADRIAN K. KENNEL
P.O. BOX 230
Germantown, MD 20876

OWNER INFORMATION
Robert A. Cline
Cline and Duxall, Inc.
3093 Hillman Court, Frederick
Robert A. Cline 3-21-87

WELL INFORMATION
APPROX. DRILLING DATE (CAL PER MIN)
AVERAGE DAILY QUANTITY NEEDED
GAL. PER DAY

LOCATION OF WELL
SECTION 1 LOT 1
MILES FROM TOWN (water 0 if in town)

DIRECTION OF WELL FROM TOWN (HOLE ROAD)
ON WHICH SIDE OF ROAD (HOLE APPROPRIATE BOX)
ENTER FT. or IN

NOT TO BE FILLED IN BY DRILLER
DATE ISSUED
STATE HEALTH DEPT.

Sketch of location of well showing location of well in relation to nearby towns and roads and ONE MILE FROM TOWN WELL TO NEAREST ROAD JUNCTION

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 CISTERN
THIS WELL WILL BE USED AS AN EXISTING WELL

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3 & 4 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER

87-269

PERMIT NO

FROM "PERMIT TO DRILL WELL"

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

17.5
(TO NEAREST FOOT)

FR-81-433

OWNER

ADAM CONSTRUCTION

STREET OR RD

PO BOX 234

TOWN

GERMANTOWN MO 2088

SUBDIVISION

US SANA MAJOR 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

FEET

Check if water bearing

additional sheets if needed

FROM TO

BROWN SHALE 0 55

BLUE SLATE 55 175

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO OF BAGS 14 NO OF BOUNDS 13 1/2

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 17.5 (enter 0-4 from surface)

CASING RECORD

casing types insert appropriate code below

ST CO STEEL CONCRETE PL OT OTHER

MEAN Casing type nearest well

ST CO

MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

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MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

MEAN Casing type nearest well

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal per min to nearest gal)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

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TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

TYPE OF PUMP USED (for test)

1 2 3 4 5 6 7 8 9 10

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THE WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH CODES 1917 IS "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION FURNISHED HEREON IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

DRILLERS IDENT. NO. 139

Robert Cline

DRILLERS SIGNATURE

DRILLER'S SIGNATURE ON APPLICATION

DRILLER'S SIGNATURE ON APPLICATION

DRILLER'S SIGNATURE ON APPLICATION

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WILL INSERT IN BOX

USE ONLY NOT TO BE FILLED IN BY DRILLER

TELESCOPE LOG OTHER DATA

TELESCOPE LOG OTHER DATA

TELESCOPE LOG OTHER DATA

TELESCOPE LOG OTHER DATA

TELESCOPE LOG OTHER DATA

TELESCOPE LOG OTHER DATA

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) YES OR NO

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

TYPE OF PUMP INSTALLED

PLACE TAG ABOVE

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

DATE OF PUMP

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES, BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES MEASUREMENTS TO WELL

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

LOCATION OF WELL ON LOT

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

WELL COUNTY SHEET NO. 1
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

COUNTY
NUMBER

87-269

PERMIT NO.

FROM PERMIT TO DRILL WELL

FR-81-43

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

175
(TO NEAREST FOOT)

OWNER

ADAM CONSTRUCTION

STREET OR RD

Box 234

TOWN

HERMANTOWN MO 208

SUBDIVISION

UGBANA MAJOR SECTION

LOT

1

Not required for driven wells

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

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

BROWN SHALE 0 55
BLUE SLATE 55 75

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☒

NO OF BAGS 14 NO OF POUNDS 216

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)

0 63
(enter 0 if from surface)

Casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL DT
PLASTIC OTHER

MAIN CASING TYPE

ST CO

1 1/2 1 1/2 1 1/2
diameter depth feet

PUMPING TEST

HOURS PUMPED (nearest hour) 11

PUMPING RATE (gal per min. to nearest gal) 210

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING 48

WHEN PUMPING 175

TYPE OF PUMP USED (for test)

☒ Electric ☐ Turbine
☐ Other ☐ Other

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO
(CIRCLE YES or NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
MAKE (A.C. J.P. S.T.O.)
IN SEE ABOVE

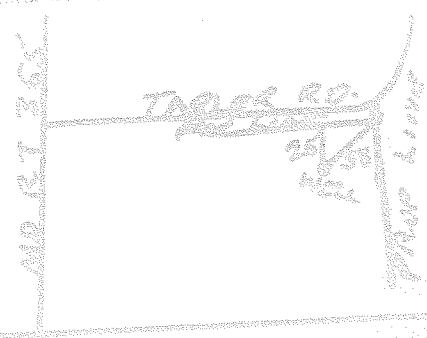
CAPACITY
GALLONS PER MINUTE
MAXIMUM CAPACITY
PUMP MAKE MODEL

POWER TO PUMP LENGTH

GROUND SURFACE

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



A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

TEST WELL CONVERTED TO PRODUCTION
WELL

I HEREBY CERTIFY THAT THE WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH CODES 15.17.13 - WELL CONSTRUCTION
AND IN ACCORDANCE WITH ALL CONDITIONS STATED IN THE
APPROPRIATE ORDINANCE, AND THAT THE INFORMATION
PRESENTED HEREON IS ACCURATE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE

DRILLING IDENT. NO. 139

Robert Cline

DRILLER'S SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

DATE AND SIGNATURE OF OWNER OR PROPERTY
MANAGER FOR SIGNATURE IF DIFFERENT FROM DRILLER

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

DEP USE ONLY
NOT TO BE FILLED IN BY DRILLER

TELESCOPE CASING LOG INDICATOR OTHER DATA

ORIGINAL

1792
SEQUENCE NO
THIS NUMBER IS TO BE PUNCHED
COLS. 3-6 ON ALL CARDS

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

45 DAYS AFTER WELL IS COMPLETED
COUNTY
NUMBER 87-328

DATE RECEIVED
JUN 1 1987
DATE WELL COMPLETED
05/12/87

Depth of Well
200
TO DEEPEST FOOT

PERMIT NO.
FR-81-4446

OWNER
JAMES J. STINEBAUGH
STATION
2075 REDWOOD BLVD
SECTION
LOT 6
TOWNSHIP
GERMANTOWN MD

WELL LOG
Not required for driven wells
STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARING
DESCRIPTION USE FEET
Additional sheets if needed FROM TO

BROWN SHALE 0 40
BLUE SLATE 40 200

GROUTING RECORDS
WELL HAS BEEN GROUTED
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☐
NO OF BAGS 10 NO OF POUNDS 60
GALLONS OF WATER 60
DEPTH OF GROUT SEAL IN DEEPEST FOOT
from 0 to 200

CASING REQUIRED
Casing types insert appropriate code
STEEL CONCRETE
SL PLASTIC
TYPE
15.7 4.2 4.2

PUMPING TEST
HOURS PUMPED (nearest hour) 11
PUMPING RATE (gal per min) 8
METHOD USED TO MEASURE PUMPING RATE TIME
WATER LEVEL (distance from land surface) BEFORE PUMPING 30
WHEN PUMPING 200
TYPE OF PUMP USED (for test) ☒ piston ☐ turbine ☐ other

PUMP INSTALLED
DRILLER WILL INSTALL PUMP YES ☒
(CIRCLE YES OR NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE IN CIRCLE
CAPACITY
GPM
LAND SURFACE

WELL HAS BEEN ABANDONED AND DEEP NO
WHY THIS WELL WAS ABANDONED
ELECTRIC LOG OBTAINED
TEST WELL CONVERTED TO PRODUCTION
WELL

SLOT SIZE
DIAMETER OF SCREEN
TEST TEST

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
P IN BOX 63

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



DRILLER'S IDENT. NO. 139
Signature
MUST MATCH SIGNATURE ON APPLICATION
Signature
DATE OF SIGNATURE

CEP USE ONLY
INSTR TO BE FILLED IN BY DRILLER
TELESCOPE
INDICATOR
OTHER DATA

DATE RECEIVED
JUN 11 1988

DATE WELL COMPLETED
05/12/87

OWNER
WILL T

LOCATION OF WELL
266 NORTH 4TH AVE

DIVISION
WISCONSIN DEPT OF NATURAL RESOURCES

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

DESCRIPTION OF LOG
266 NORTH 4TH AVE
266 NORTH 4TH AVE

WELL COMPLETION RETURN
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

Depth of Well
10.0

SECTION
RIPALD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT **PORTLAND CEMENT**

NO. OF BAGS **10** NO. OF POUNDS **940**
GALLONS OF WATER **60**
DEPTH OF GROUT SEAL TO SURFACE
0.0

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

DESCRIPTION OF LOG
266 NORTH 4TH AVE
266 NORTH 4TH AVE

COUNTY NUMBER
87-370

PERMIT NO.
FR-81-4015

FROM PERMIT TO DRILL WELL
ROCKVILLE MO 64080

LOT **2**

PUMPING TEST
HOURS PUMPED (nearest hour) **10**
PUMPING RATE (GPM per min)
(to nearest GPM) **12**
METHOD USED TO MEASURE PUMPING RATE **TIME**
WATER LEVEL (distance from land surface)
BEFORE PUMPING **4.0**
WHEN PUMPING **10.0**

TYPE OF PUMP USED (if any)
A **P** **T**
C **R** **O**

IF PUMP INSTALLED
DRILLER WILL INSTALL PUMP
(circle YES or NO) **YES**
IF DRILLER INSTALLS PUMP THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PUMP ADJUSTED
PUMP SET ABOVE

LOCATION OF WELL ON LOT
BUILDING PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO INSTANCES
INDEPENDENTS TO WELL

THREE

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

IF WELL COMPLETED TO PROVISIONAL
WELL

7345 SEQUENCE NO. (SEE LIST ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

FILED-KILL-44694
fill in this form completely

THIS NUMBER IS TO BE PUNCHED
IN COLD 36 ON ALL TAPES

PLANT CODE OF 1960

LOCATION OF WELL

DATE RECEIVED

OWNER INFORMATION

WILLIAM H. KUTNER
6010 KAYSER LN
FREDERICK, MD
6-12-67

DRILLER INFORMATION

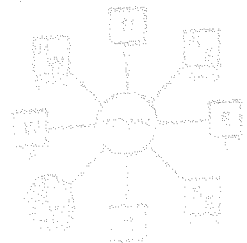
WILLIAM H. KUTNER
6010 KAYSER LN
FREDERICK, MD
6-12-67

WELL INFORMATION

WILLIAM H. KUTNER
6010 KAYSER LN
FREDERICK, MD
6-12-67

WILLIAM H. KUTNER
6010 KAYSER LN
FREDERICK, MD
6-12-67

DIRECTION OF WELL FROM
TOWN (CIRCLE ONE)



ON WHICH SIDE OF ROAD
CIRCLE APPROPRIATE BOX



ENTER PT OF W

NOT TO BE FILLED IN BY DRILLER
DATE OF COMPLETION APPROVAL

FREDERICK

6-12-67

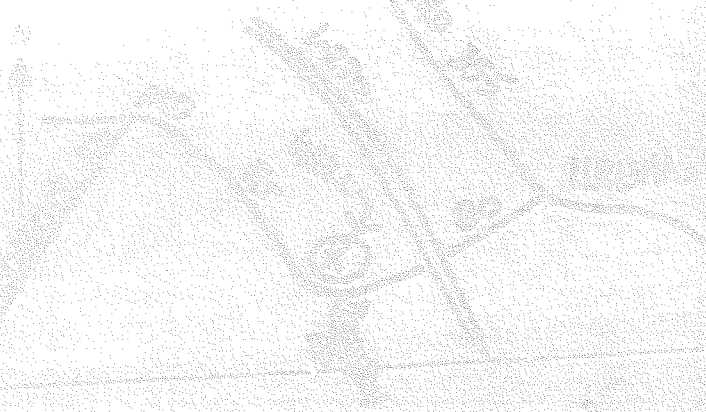
STATE HEALTH
DEPT 2

WILLIAM H. KUTNER
6010 KAYSER LN
FREDERICK, MD
6-12-67

WELL INFORMATION



WELL INFORMATION



THIS WELL WILL NOT REPLACE AN EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WAS
ABANDONED AND DECAVED
THIS WELL WILL PRODUCE A WELL THAT WILL BE
AS A TANK

THIS NUMBER IS TO BE PUNCHED IN COLUMNS ON ALL CARDS

PERMIT NO. FROM PERMIT TO DRILL WELL

27-522-1A1A101

DATE DRILLED

DATE WELL COMPLETED

DEPTH OF WELL

21.0

PERMANENT

OWNER

STREET OR RD

SUBDIVISION

SECTION

LOT

WELL LOG

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

DEPOSITED CLAY

NO. OF BAGS

NO. OF CUBIC YARDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from

to

DESCRIPTION (use)

WATER LEVEL (distance from land surface)

RECORDS PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

DISCHARGE

INTAKE

OTHER

OTHER CAPACITY OF WELL

DIAMETER

DEPTH

GRILLER WILL INSTALL PUMP

YES

NO

IF GRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS

EXCEPT HOME USE

IF GRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS

IF GRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SURROUNDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES MEASUREMENTS TO WELL

LOT SIZE

DIAMETER OF SCREEN

NEAREST INCH

GRAVEL PACK

IF WELL DRILLED W/IN FLOWING WELL INSERT

6 IN BOX ES

GRILLER USE ONLY

NOT TO BE FILLED IN BY GRILLER

TELEPHONE

LOG

OTHER DATA

TELEPHONE

LOG

OTHER DATA

TELEPHONE

LOG

OTHER DATA

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LOG

OTHER DATA

7353

SEQUENCE NO.
(OFF THE CARD)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

FORM 207 (1-1-67)

OLD PERMIT NUMBER

EN-R11-14675

Fill in this form completely

(THIS NUMBER IS TO BE FURNISHED
IN CONNECTION WITH THE CARD)

DATE

OWNER INFORMATION

SPONSOR
FEDERAL BUREAU OF INVESTIGATION
FEDERAL BUREAU OF INVESTIGATION
FEDERAL BUREAU OF INVESTIGATION

DRILLER INFORMATION

WM. G. GINN
GINN-CORPORATE WELL DRILLING
610 N. JEFFERSON ST. - FREDERICK
MD 21701

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

AVERAGE DAILY QUANTITY USED
(GAL. PER DAY)

USE ONLY ONE OF FOLLOWING PURPOSES ONLY
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

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AGRICULTURE, RECREATION, MINING, OTHER

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AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.
AGRICULTURE, RECREATION, MINING, OTHER

SECTION

SECTION

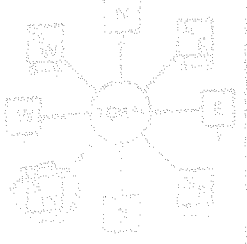
LOT

QUAD

MILES FROM TOWN (or 0.1 in town)

SECTION

DIRECTION OF WELL FROM
TOWN CENTER



MD RT 80

ON WHICH SIDE OF ROAD
(MARKS APPROPRIATE SIGN)



250'

ENTER AT W. W.

DATE TO BE FILLED IN BY DRILLER
AND ALL INTERESTED APPROVAL

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

DATE

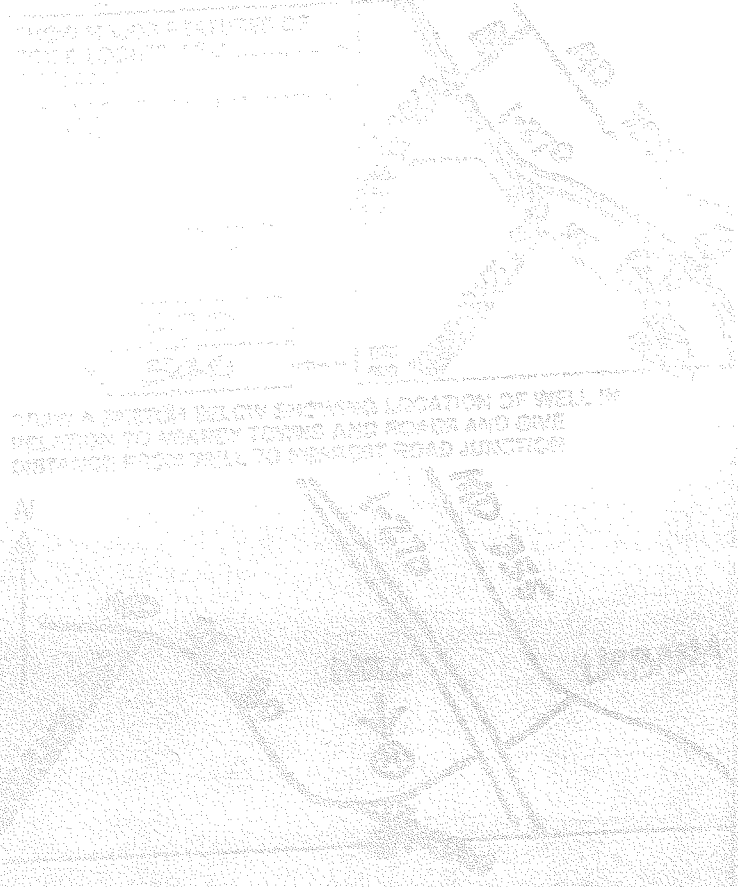
DATE

DATE

37-52

STATE HEALTH

INSERT 5



B 1	1749	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-81-5870 <small>fill in this form completely</small>
Date Received (APA) 062188		OWNER INFORMATION		
15 Last Name MAKELA		Owner HOMES		
36 Street or RFD FREDERICK		55 MD21701		
57 Town FREDERICK		70 State 72 Zip 76 MD21701		
DRILLER INFORMATION				
Driller's Name William B. Quynn		303 77 License No. 80		
Firm Name Quynn-Cromwell Well Drilling				
Address 6030 Keyser Lane, Frederick, MD				
Signature <i>W. B. Quynn</i> Date 6-20-88				
WELL INFORMATION				
APPROX. PUMPING RATE (GAL. PER MIN.) 5				
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 300				
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)				
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)				
<input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL 300 FEET				
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH				
METHOD OF DRILLING (circle one)				
<input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN				
<input checked="" type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)				
<input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT				
other _____				
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY				
<input type="checkbox"/> THIS WELL WILL DEEPEIN 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 AT WRITE INITIALS IN BOX PERMIT NO. FR-81-5870				
SPECIAL CONDITIONS				

LOCATION OF WELL

8 COUNTY **FREDERICK**

23 SUBDIVISION **URBANA OVERLOOK**

SECTION **6** LOT **47**

52 NEAREST TOWN **URBANA**

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

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH ☐ WEST ☒ EAST ☐ SOUTH ☐

NEAR WHAT ROAD **MD RT 80**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 **450** 37
DISTANCE FROM ROAD
ENTER FT or MI **FT**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME **FREDERICK** COUNTY NO. **88-453**

STATE SIGNATURE _____ DATE ISSUED **062188** EXP. DATE **12-31-88**

CO-SIGNATURE *Qua* EXP. DATE **12-31-88**

NORTH GRID **543000** EAST GRID **0694000**

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 **690**
N **540**

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

C1 2514 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER 88-453

DATE Received

AUG 26 1981

DATE WELL COMPLETED

080588

Depth of Well

22 280 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

FR-81-5870

OWNER Makela Homes Corporation

STREET OR RFD 219 Thames Drive

first name

TOWN

Frederick

SUBDIVISION Urbana Overlook

SECTION 6

LOT 47

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	
Clay	0	5	
Brownshale	5	55	X
Greenrock	55	280	X

Water @ 49
65
79
270

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ Y no ☐ N

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 13 NO. OF POUNDS 1222

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 58 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below☒ ST ☐ CO
STEEL CONCRETE
☐ PL ☐ OT
PLASTIC OTHERMAIN CASING TYPE Nominal diameter
top (main) casing
(nearest inch) Total depth
of main casing
(nearest foot)☒ ST ☐ 6 ☐ 60
60 61 63 64 66 70

EACH CASING

OTHER CASING (if used)

diameter depth (feet)
inch from to screen type
or open hole

SCREEN RECORD

insert
appropriate
code
below☒ ST ☐ BR ☐ HO
STEEL BRASS OPEN
BRONZE HOLE
☐ PL ☐ OT
PLASTIC OTHER

C2

EACH SCREEN

DEPTH (nearest ft.)

☒ HO 58 280
8 9 11 15 17 21

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN 6 (NEAREST INCH)

GRAVEL PACK from to

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour) 2

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE air

WATER LEVEL (distance from land surface)

BEFORE PUMPING 34

WHEN PUMPING 280

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

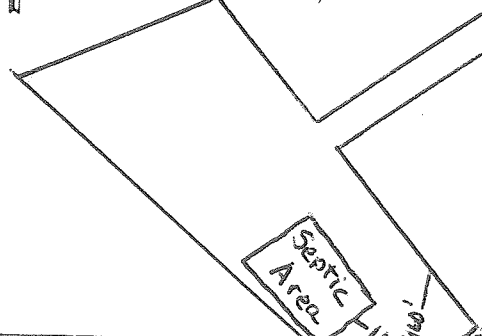
DRILLER WILL INSTALL PUMP YES ☐ NO ☒
(CIRCLE) (YES OR NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX-SEE ABOVE: 29CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box
and enter casing height)☒ + above ☐ - below
LAND SURFACE 2 (nearest foot)
49 50 51

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 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. 303

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

B 1		1188		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type				STATE PERMIT NUMBER FK-88-0499 <small>fill in this form completely</small>									
Date Received (APA) 03 22 89 OWNER INFORMATION PETER PAN LMT ATR 7258 MUNCASTER MILLS ROCKVILLE MD 20855										B 3 LOCATION OF WELL FREDERICK SUBDIVISION SECTION LOT URBANA MILES FROM TOWN (enter 0 if in town) MI									
DRILLER INFORMATION George F. Easterday L. Franklin Easterday, Inc. 9265 Brown Church Rd., Mt. Airy, Md. 21771 George F. Easterday 3/20/89										B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) TOWN NEAR WHAT ROAD Md. Rt 355 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 95 FT ENTER FT or MI FT									
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500										B 5 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Fred. 89-171 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 03 22 89 6. van buren 9-30-89 NORTH GRID 544000 EAST GRID 0701000									
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. WELL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE 701 544 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION URBANA RT 80 355									
APPROXIMATE DEPTH OF WELL 200 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 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) Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER FK69 GAP 024 FORCE 16 WRITE INITIALS IN BOX PERMIT No. FK-88-0499 SPECIAL CONDITIONS									

C1 6830
SEQUENCE NO.
(DENY USE ONLY)
1 2 3 4 5 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

DATE Received

MAY 22 1983

DATE WELL COMPLETED

04/14/89

Depth of Well

22 70 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

FR-88-0499

OWNER PETER PAN
STREET OR RFD last name RT 355 first name TOWN URBANA
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

Topsoil	0	2	
Br. slate	2	5	
Gray slate	5	105	
Flint	105	120	✓4
Gray slate	120	320	
Flint	320	340	✓8
Gray slate	340	400	
Flint	400	550	
Gray slate	550	700	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 6 NO. OF POUNDS 600

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 18 ft.
(enter 0 if from surface)

casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

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

5 6 21
60 61 63 64 66 70

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type
or open hole

SCREEN RECORD

insert
appropriate
code
below

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

1 HO 17 700
2 23 24 26 30 32 36
3 38 39 41 45 47 51

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 LOG OTHER DATA
CASING INDICATOR

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 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH
(nearest ft.) 43 47

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
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

DRILLERS IDENT. NO. 40

DRILLERS SIGNATURE
MATCH SIGNATURE ON APPLICATION
SUPERVISOR (sign. of driller or journeyman
for sitework if different from permittee)

Parking lot
Well
47'
98'
Rear Porch

B 1		5213		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FN-88-0640 fill in this form completely	
1		2		3		4		5	
6		7		8		9		10	
11		12		13		14		15	
16		17		18		19		20	
21		22		23		24		25	
26		27		28		29		30	
31		32		33		34		35	
36		37		38		39		40	
41		42		43		44		45	
46		47		48		49		50	
51		52		53		54		55	
56		57		58		59		60	
61		62		63		64		65	
66		67		68		69		70	
71		72		73		74		75	
76		77		78		79		80	
81		82		83		84		85	
86		87		88		89		90	
91		92		93		94		95	
96		97		98		99		100	

Date Received (APA)
052289

OWNER INFORMATION
OLD URBANA Schoolhouse
30 W PATRICK STREET
Frederick MD 21701

DRILLER INFORMATION
Robert L. Cline
Cline & Duvall, Inc.
8093 Hillmark Court, Frederick
Robert L. Cline 5/19/89

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800

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)

APPROXIMATE DEPTH OF WELL 200 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
other

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 DEEPEIN 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 16 WRITE INITIALS IN BOX PERMIT No. FN-88-0640

SPECIAL CONDITIONS

LOCATION OF WELL
Frederick
8 COUNTY
23 SUBDIVISION
SECTION LOT
Urbana
52 NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 0 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
N NE E W S SW SE
TOWN

NEAR WHAT ROAD
Route 80
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH SOUTH
DISTANCE FROM ROAD 59 FT

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
Fred 89-354
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 052289 6.000 6.000 11/30/89
NORTH GRID 543000 EAST GRID 0699000
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
690
540
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
I-270
Rt 355
Rt 80
Urbana
X well
Rt 80

011 5512 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

89-354

ST/CO USE ONLY
DATE Received

JUN - 6 1989

DATE WELL COMPLETED

033189

Depth of Well

22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
FR-88-0640

OWNER OLD URBANA SCHOOLHOUSE
STREET OR RFD last name 30 W. PATRICK ST first name TOWN FREDERICK MD 21701
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		Check if water bearing
	FROM	TO	
BROWN SHALE	0	77	✓
BLUE SLATE	77	200	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes no
44 44
☒ Y ☐ N

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BC
NO. OF BAGS 25 NO. OF POUNDS 2350
GALLONS OF WATER 150

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 84 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
Nominal diameter top (main) casing (nearest inch)
Total depth of main casing (nearest foot)
ST 6 85

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

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

DEPTH (nearest ft.)
H O 84 200
EACH SCREEN

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.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

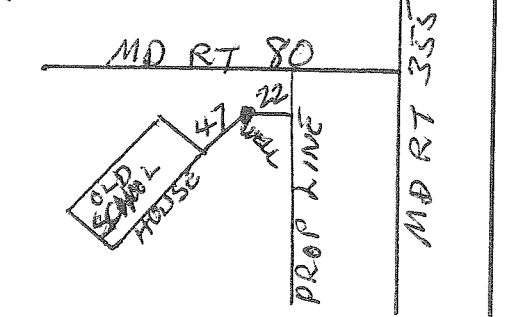
PUMPING TEST

HOURS PUMPED (nearest hour) 1
PUMPING RATE (gal. per min. to nearest gal.) 25
METHOD USED TO MEASURE PUMPING RATE ESTIMATE
WATER LEVEL (distance from land surface)
BEFORE PUMPING 54
WHEN PUMPING 200
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
(CIRCLE) (YES or 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 below
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 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 139
Robert C. Elme
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Robert C. Elme Jr.
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 1		4606		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-88-11710	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)									
Date Received (APA) 081690					OWNER INFORMATION KNOTT, II JOE 10322 OLD NATIONAL PIKE IYAMSVILLE MD 21754				
DRILLER INFORMATION Robert L. Cline Cline and Duvall Inc 8093 Hillmark Court, Frederick Robert L. Cline 8-15-90					LOCATION OF WELL FREDERICK URBANA OVERLOOK SECTION II LOT 28 URBANA MILES FROM TOWN (enter 0 if in town) 1.5 MI				
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 300					DIRECTION OF WELL FROM TOWN (CIRCLE BOX) TOWN ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 200 DISTANCE FROM ROAD ENTER FT or MI 47				
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 Frederick 90-320 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 081690 CO SIGNATURE Donald Becker 2-16-90 EXP. DATE NORTH GRID 541000 EAST GRID 0694000				
APPROXIMATE DEPTH OF WELL 200 FEET APPROXIMATE DIAMETER OF WELL 6 INCH					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 690 540 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 Rt 270 Rt 355 Urban Rt 80 Rhoderick Rd x well				
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 52				
Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER 54 GAP 63 FORCE D B WRITE INITIALS IN BOX PERMIT No. FR-88-11710 67 68 70 71 72 73 74 75 76 77 78 79					SPECIAL CONDITIONS				

C1 1852 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 91-503

ST/CO USE ONLY
DATE Received

DOT 1 1991

DATE WELL COMPLETED

1003911

Depth of Well

22 275 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-88-2527

OWNER McDANIEL Erlinda
STREET OR RFD 8403 Williams Drive first name TOWN Frederick, MD 21701
SUBDIVISION Urbana Overlook SECTION LOT 40

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

BROWN SHALE 0 60
BLUE SHALE 60 225

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 18 NO. OF POUNDS 1692

GALLONS OF WATER 108

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 67 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 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

ST 6 68

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

screen type or open hole insert appropriate code below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN HOLE
PL OT
PLASTIC OTHER

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80

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.) W Q
70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 1

PUMPING RATE (gal. per min. to nearest gal.) 50

METHOD USED TO MEASURE PUMPING RATE Time

WATER LEVEL (distance from land surface)

BEFORE PUMPING 35

WHEN PUMPING 275

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.)

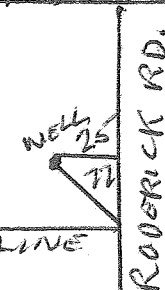
CASING HEIGHT (circle appropriate box and enter casing height)

above } LAND SURFACE (nearest foot)
below }

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)

MD RT 80



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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 139

DRILLERS SIGNATURE Robert Cline
(MUST MATCH SIGNATURE ON APPLICATION)

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

B 1		6064		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-88-2601 fill in this form completely	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)									
Date Received (APA) 10/5/91					OWNER INFORMATION				
FR CO. BD of Education					15 Last Name Owner First Name 34				
7446 Hayward Road					36 Street or RFD 55				
Frederick					MD 21701				
57 Town 70 State 72 Zip 76									
DRILLER INFORMATION									
Robert L. Cline					139				
Cline & Duvall, Inc.					77 License No. 80				
8093 Hillmark Court, Frederick									
Robert L. Cline					9/17/91				
Signature Date									
B 2					WELL INFORMATION				
APPROX. PUMPING RATE (GAL. PER MIN.)					20				
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)					10000				
USE FOR WATER (CIRCLE APPROPRIATE BOX)									
<input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)									
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)									
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)									
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)									
<input checked="" type="checkbox"/> TEST OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)									
APPROXIMATE DEPTH OF WELL					300 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									
other									
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)									
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL									
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED									
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY									
<input type="checkbox"/> THIS WELL WILL DEEPEIN 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					G A P				
FORCE U6					PERMIT No. FR-88-2601				
SPECIAL CONDITIONS									
B 3					LOCATION OF WELL				
Frederick					8 COUNTY 21				
23 SUBDIVISION					42				
SECTION 44 46 LOT 48 50					Site # 2				
Urbana					52 NEAREST TOWN 71				
MILES FROM TOWN (enter 0 if in town)					1 MI				
B 4					DIRECTION OF WELL FROM TOWN (CIRCLE BOX)				
N W N E W TOWN E S S W S									
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)									
Route 355					11 NEAR WHAT ROAD 30				
750					34 DISTANCE FROM ROAD 37				
ENTER FT or MI					FT				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL									
Frederick					91-538				
COUNTY NAME					COUNTY NO.				
STATE SIGNATURE					INSERT S				
DATE ISSUED					5/31/92				
10/5/91					6. on back				
CO SIGNATURE					EXP. DATE				
5440000					0704000				
NORTH GRID 50 55					EAST GRID 57 63				
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									
700									
540									
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									
I-270									
Rt. 355									
MD 80									
Big Woods Rd.									

1012
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

91-538

ST/CO USE ONLY
DATE Received

DEC 1 1991

DATE WELL COMPLETED

101591

Depth of Well

22 550 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

FR-88-2601

OWNER FREDERICK COL BOARD OF EDUCATION

STREET OR RFD last name 7446 HAYWARD ROAD first name

TOWN FREDERICK MD 21701

SUBDIVISION

SECTION

SITE 2

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

BROWN SHALE

0

50

GREEN SLATE

50

550 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes ☒ Y ☐ N no
44 44

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 14 NO. OF POUNDS 1316

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 60 ft.
48 TOP 52 54 BOTTOM 58
(enter 0 if from surface)

casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN
CASING
TYPE

Nominal diameter
top (main) casing
(nearest inch)

Total depth
of main casing
(nearest foot)

ST 6 60
60 61 63 64 66 67 70

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type or open hole
insert appropriate code below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
BRONZE HOLE
PL OT
PLASTIC OTHER

EACH
SCREEN

DEPTH (nearest ft.)

1 H O 60 550
8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51

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.) W Q
70 72 74 75 76

TELESCOPE
CASING

LOG
INDICATOR

OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour)

1

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

9

METHOD USED TO
MEASURE PUMPING RATE

TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING

14

WHEN PUMPING

550

TYPE OF PUMP USED (for test)

A air P piston T turbine
27 27 27
C centrifugal R rotary O other (describe below)
27 27 27
J jet S submersible
27 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒ NO

(CIRCLE) (YES or 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)

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
49 49
(-) below } 1 (nearest foot)
49 50 51

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)

MD RT 353
MD RT 80
X WELL
NO MEASUREMENTS
AVAILABLE

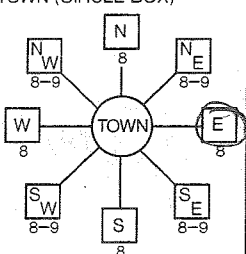
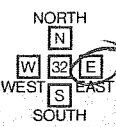
DRILLERS IDENT. NO. 139

Rabot Celine

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

Rabot Celine Jr.

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

B 1		<div style="font-size: 24pt; font-weight: bold;">6066</div> <div style="font-size: 8pt;">SEQUENCE NO. (DP USE ONLY)</div>	<div style="font-weight: bold;">STATE OF MARYLAND</div> <div style="font-weight: bold;">APPLICATION FOR PERMIT TO DRILL WELL</div> <div style="font-size: 10pt;">please print or type</div>		<div style="font-size: 10pt;">STATE PERMIT NUMBER</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">FR-88-2602</div> <div style="font-size: 8pt;">fill in this form completely</div>	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						
<div style="font-size: 10pt;">Date Received (APA)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">101591</div> <div style="font-size: 8pt;">OWNER INFORMATION</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">FR CO BO OF EDUCATION</div> <div style="font-size: 8pt;">15 Last Name Owner First Name</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">7446 HAYWARD ROAD</div> <div style="font-size: 8pt;">36 Street or RFD 55</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">FREDERICK</div> <div style="font-size: 8pt;">57 Town 70 State 72 Zip 76</div>			<div style="font-size: 10pt;">B 3</div> <div style="font-size: 10pt;">LOCATION OF WELL</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">FREDERICK</div> <div style="font-size: 8pt;">8 COUNTY 21</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">URBANA</div> <div style="font-size: 8pt;">23 SUBDIVISION 42</div> <div style="font-size: 8pt;">SECTION 44 46 LOT 48 50 site # 45</div> <div style="font-size: 8pt;">52 NEAREST TOWN 71</div> <div style="font-size: 8pt;">MILES FROM TOWN (enter 0 if in town) 1 MI</div> <div style="font-size: 8pt;">73 76 77 78</div>			
<div style="font-size: 10pt;">DRILLER INFORMATION</div> <div style="font-size: 10pt;">Driller's Name 77 License No. 80</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">Robert L. Cline 139</div> <div style="font-size: 10pt;">Firm Name</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">Cline and Duvall, Inc</div> <div style="font-size: 10pt;">Address</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">8093 Hillmark Court, Frederick</div> <div style="font-size: 10pt;">Signature Date</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">Robert L. Cline 9-18-91</div>			<div style="font-size: 10pt;">B 4</div> <div style="font-size: 10pt;">DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</div> <div style="text-align: center;"></div> <div style="font-size: 10pt;">NEAR WHAT ROAD</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">Route 355</div> <div style="font-size: 8pt;">11 30</div> <div style="font-size: 10pt;">ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</div> <div style="text-align: center;"></div> <div style="font-size: 10pt;">DISTANCE FROM ROAD</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">1000</div> <div style="font-size: 8pt;">34 37</div> <div style="font-size: 8pt;">ENTER FT or MI FT 38 39</div>			
<div style="font-size: 10pt;">B 2</div> <div style="font-size: 10pt;">WELL INFORMATION</div> <div style="font-size: 10pt;">APPROX. PUMPING RATE (GAL. PER MIN.)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">20</div> <div style="font-size: 8pt;">8 12</div> <div style="font-size: 10pt;">AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">10000</div> <div style="font-size: 8pt;">14 20</div>			<div style="font-size: 10pt;">USE FOR WATER (CIRCLE APPROPRIATE BOX)</div> <div style="font-size: 8pt;">22</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">T</div> <div style="font-size: 8pt;">HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">F</div> <div style="font-size: 8pt;">FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">I</div> <div style="font-size: 8pt;">INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">P</div> <div style="font-size: 8pt;">PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 14pt;">T</div> <div style="font-size: 8pt;">TEST OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</div>			
APPROXIMATE DEPTH OF WELL 300 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 DEEPEN AN EXISTING WELL						
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52						
Not to be filled in by driller (OEP USE ONLY)						
APPROP. PERMIT NUMBER 54 GAP 63						
FORCE U6 WRITE INITIALS IN BOX PERMIT No. FR-88-2602 70 71 72 73 74 75 76 77 78 79						
SPECIAL CONDITIONS						

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Frd. 91-538

COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 101591 6.10.00 5/31/92

43 48 CO SIGNATURE EXP. DATE

NORTH GRID 544000 EAST GRID 0704000

50 55 57 63

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

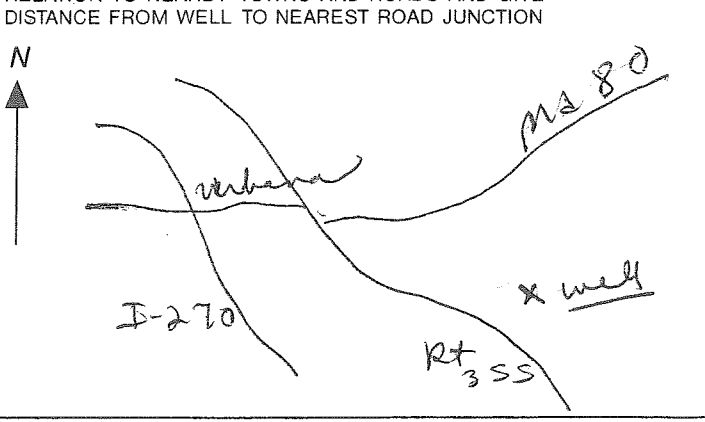
700

540

E N

000 000

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



1871		SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT		45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE		COUNTY NUMBER		
ST/CO USE ONLY DATE Received		DATE WELL COMPLETED		PERMIT NO. FROM "PERMIT TO DRILL WELL"		
DEC 16 1991		101591		FR-88-2602		
OWNER		FREDERICK CO. BOARD OF EDUCATION		TOWN		
STREET OR RFD		7446 HAYWARD RD		FREDERICK MD 21701		
SUBDIVISION		SECTION		LOT		
WELL LOG		GROUTING RECORD		C 3		
Not required for driven wells		WELL HAS BEEN GROUTED		PUMPING TEST		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		(Circle Appropriate Box)		HOURS PUMPED (nearest hour)		
DESCRIPTION (Use additional sheets if needed)		TYPE OF GROUTING MATERIAL		PUMPING RATE (gal. per min. to nearest gal.)		
BROWN SHALE		CEMENT CM BENTONITE CLAY BC		METHOD USED TO MEASURE PUMPING RATE		
GREEN SLATE		NO. OF BAGS 15 NO. OF POUNDS 1410		WATER LEVEL (distance from land surface)		
FEET		GALLONS OF WATER 90		BEFORE PUMPING		
FROM TO		DEPTH OF GROUT SEAL (to nearest foot)		WHEN PUMPING		
0 44		from 6 ft. to 60 ft.		TYPE OF PUMP USED (for test)		
44 300		(enter 0 if from surface)		C centrifugal R rotary O other (describe below)		
Check if water bearing		CASING RECORD		J jet S submersible		
		casing types insert appropriate code below		PUMP INSTALLED		
		ST CO PL OT		DRILLER WILL INSTALL PUMP YES NO		
		STEEL CONCRETE PLASTIC OTHER		IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE		
		MAIN CASING TYPE		TYPE OF PUMP INSTALLED		
		Nominal diameter top (main) casing (nearest inch)		PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:		
		Total depth of main casing (nearest foot)		CAPACITY: GALLONS PER MINUTE (to nearest gallon)		
		S T G 61		PUMP HORSE POWER		
		OTHER CASING (if used) diameter inch depth (feet) from to		PUMP COLUMN LENGTH (nearest ft.)		
		SCREEN RECORD		CASING HEIGHT (circle appropriate box and enter casing height)		
		screen type or open hole		LAND SURFACE		
		ST BR HO PL OT		LOCATION OF WELL ON LOT		
		STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER		SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)		
CIRCLE APPROPRIATE LETTER		DEPTH (nearest ft.)		X WELL NO MEASUREMENTS AVAILABLE		
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED		1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100				
E ELECTRIC LOG OBTAINED		SLOT SIZE 1 2 3				
P TEST WELL CONVERTED TO PRODUCTION WELL		DIAMETER OF SCREEN (NEAREST INCH)				
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68				
DRILLERS IDENT. NO. 139		OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)				
DRILLERS SIGNATURE Robert Cline		T (E.R.O.S.) W Q				
(MUST MATCH SIGNATURE ON APPLICATION)		70 72 74 75 76				
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		TELESCOPE CASING LOG INDICATOR OTHER DATA				

B 1 00392		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-88-3329 fill in this form completely	
Date Received (APA) 0111393				OWNER INFORMATION			
MARRET				ROBERT			
2932 THURSTON ROAD				FREDERICK MD 21701			
Robert L. Cline				DRILLER INFORMATION			
Cline and Duval, Inc				139			
8093 Hillmark Court, Frederick				77 License No. 40			
Robert L. Cline				1-12-93			
B 2				WELL INFORMATION			
APPROX. PUMPING RATE (GAL. PER MIN.) 5							
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 300							
USE FOR WATER (CIRCLE APPROPRIATE BOX)							
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)							
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)							
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)							
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)							
<input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)							
APPROXIMATE DEPTH OF WELL 200 FEET							
APPROXIMATE DIAMETER OF WELL 6 INCH							
METHOD OF DRILLING (circle one)							
<input checked="" type="checkbox"/> BORED (or Augered)				JETTED			
<input checked="" type="checkbox"/> AIR-ROTARY				ROTARY (Hydraulic Rotary)			
<input type="checkbox"/> CABLE				REVERSE-ROTARY			
<input type="checkbox"/> other				DRIVE-POINT			
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)							
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL							
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED							
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY							
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL							
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)							
Not to be filled in by driller (OEP USE ONLY)							
APPROX. PERMIT NUMBER				GAP			
FORCE TM				PERMIT No. FR-88-3329			
SPECIAL CONDITIONS							
B 3				LOCATION OF WELL			
FREDERICK				8 COUNTY			
URBANA OVERLOOK				23 SUBDIVISION			
SECTION 4				LOT 22			
URBANA				52 NEAREST TOWN			
MILES FROM TOWN (enter 0 if in town) 1				MI			
B 4				DIRECTION OF WELL FROM TOWN (CIRCLE BOX)			
N				NE			
NW				SE			
W				E			
SW				S			
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)							
NEAR WHAT ROAD				Guertin Court			
DISTANCE FROM ROAD				150			
ENTER FT or MI				42			
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL							
Frederick				92-521			
COUNTY NAME				COUNTY NO.			
STATE SIGNATURE				INSERT S			
DATE ISSUED				EXP. DATE			
0111393				Jany Mitchell, R.S. 7-31-93			
NORTH GRID				EAST GRID			
541000				0695000			
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 690							
N 540							
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION							
Sketch showing location of well in relation to nearby towns and roads.							



C1 2179

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

92-521

ST/CO USE ONLY
DATE Received

8 1 9 10 11 12 13

DATE WELL COMPLETED

0 1 2 7 9 3

Depth of Well

22 100 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-88-3329

OWNER MAR MET ROBERT
last name first name
STREET OR RFD 2432 THURSTON RD. TOWN FREDERICK MD 21701
SUBDIVISION URBANA OVERLOOK SECTION 4 LOT 22

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed) FEET
FROM TO Check
if water
bearingBROWN SHALE 0 56
BROWN
SANDSTONE 56 88 ✓
GREEN SLATE 88 100

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
☒ ☐
44 44

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐NO. OF BAGS 16 NO. OF POUNDS 1504GALLONS OF WATER 96
DEPTH OF GROUT SEAL (to nearest foot)from 0 ft. to 63 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)ST 6 64
60 61 63 64 66 67 70OTHER CASING (if used)
diameter depth (feet)
inch from toscreen type or open hole
insert appropriate code belowST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHERC2
DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 1PUMPING RATE (gal. per min. to nearest gal.) 30METHOD USED TO MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 28WHEN PUMPING 100

TYPE OF PUMP USED (for test)

☒ air ☐ piston ☐ turbine
☐ centrifugal ☐ rotary ☐ other (describe below)
☐ jet ☐ submersible

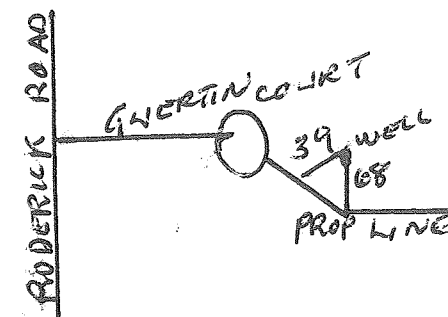
PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒ NOIF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USETYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE:CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35PUMP HORSE POWER 37 41PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

☒ above ☐ below
LAND SURFACE 1 (nearest foot)

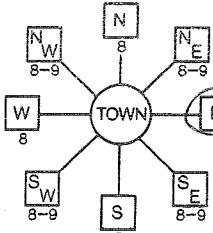

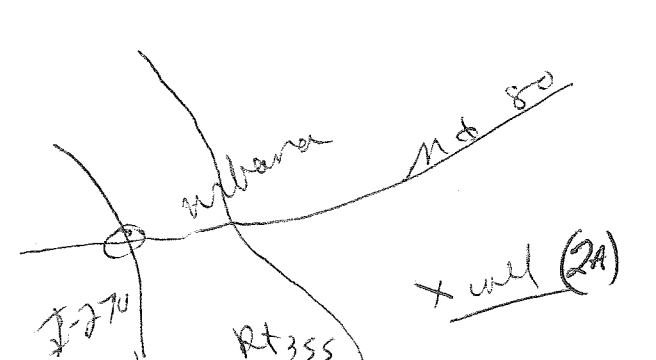
LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)DRILLERS IDENT. NO. 139DRILLERS SIGNATURE Robert Chline

(MUST MATCH SIGNATURE ON APPLICATION)

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

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

B 1	01457 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. <small>(DP USE ONLY)</small>	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-88-3562 <small>fill in this form completely</small>
OWNER INFORMATION Date Received (APA) 070693 8 13 FRED. CO. BD. OF ED 15 Last Name 34 Owner First Name 7630 NAYWARD ROAD 36 Street or RFD 55 FREDERICK MD 21702 57 Town 70 State 72 Zip 76			LOCATION OF WELL 1 2 FREDERICK 8 COUNTY 21 URBANA High School 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 Site # 2A URBANA 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 73 1 76 1 77 1 78	
DRILLER INFORMATION Robert L. Cline MWD Driller's Name 77 License No. 80 1139 Cline and Duvall, Inc. Firm Name 8093 Hillmark Ct, Frederick Address Robert L. Cline 6-18-93 Signature Date			4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 Route 355 30 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 250 37 DISTANCE FROM ROAD ENTER FT or MI 1 38 1 39	
WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 20 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 10000 14 20			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Frederick 93-174 COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S _____ 41 DATE ISSUED 070693 6. on water 1/31/94 43 48 CO SIGNATURE EXP. DATE NORTH GRID 543000 50 55 EAST GRID 0704000 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input checked="" type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)			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 700 N 540 000 000	
APPROXIMATE DEPTH OF WELL 300 24 28 FEET APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH			DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
METHOD OF DRILLING (circle one) 30 <u>BORED</u> (or Augered) <u>JETTED</u> Jetted & <u>DRIVEN</u> 37 <u>AIR-ROTARY</u> <u>AIR-PERCussion</u> <u>ROTARY</u> (Hydraulic Rotary) <u>CABLE</u> <u>REVERSE-ROTARY</u> <u>Drive-POINT</u> other _____			REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER FR93GAP015 54 63 FORCE V6 67 68 WRITE INITIALS IN BOX PERMIT No. FR-88-3562 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS				

C1 3761 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 TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

93-174

ST/CO USE ONLY
DATE Received

JUL 2 1993

DATE WELL COMPLETED

072093

Depth of Well

22 200 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

PR-88-3562

OWNER FREDERICK CO. BOARD OF EDUCATION
STREET OR RFD last name 7630 HAYWARD RD first name TOWN FREDERICK MD 21702
SUBDIVISION SECTION SITE 2A LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed) FEET FROM TO Check
if water
bearingYELLOW CLAY 0 10
YELLOW CLAY 10 34
AND GRAVEL
BLUE SLATE 34 200 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
(Y) (N)
44 44

TYPE OF GROUTING MATERIAL

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 10 NO. OF POUNDS 940

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 41 ft.
48 TOP 52 54 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)S T
60 61

6 63 64

42 66 70

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from toscreen type
or open holeinsert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

1 HO 41 200

2

3

38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)

70

72

W Q

74 75 76

TELESCOPE
CASINGLOG
INDICATOR

OTHER DATA

C3

1

2

PUMPING TEST

HOURS PUMPED (nearest hour)

1

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

60

METHOD USED TO
MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

4

WHEN PUMPING

200

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)

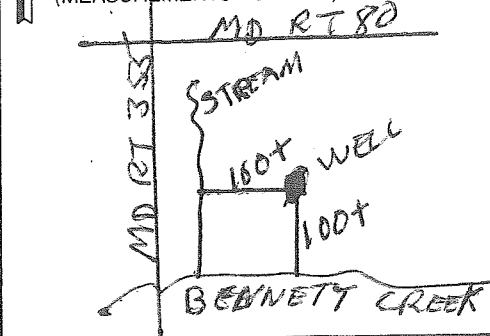
PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)CASING HEIGHT (circle appropriate box
and enter casing height)(+) above
(-) below

LAND SURFACE

1 (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 A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI 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, AND THAT THE INFORMATION PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO. 139

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

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: 4-8-04 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: Randell Alexander

WELL DRILLERS LICENSE NUMBER: 006

* OWNER'S NAME: Frederick County Water and sewer
(URBANA school)

CIRCLE: MWD ~~MSD~~ ~~MGD~~

* WELL LOCATION:
COUNTY: Frederick

NEAREST TOWN: URBANA

TAX MAP _____ BLOCK _____ PARCEL _____

SUBDIVISION: _____

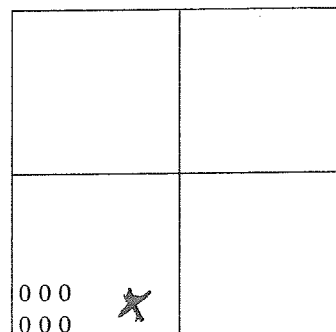
SECTION: _____ LOT: _____

NEAREST ROAD: URBANA Pkce (Rt355)

MARYLAND GRID COORDINATES

BOX NUMBER E 700

N 540



SHOW WELL LOCATION
BY X WITHIN BOX

* 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 INCHES IN DIAMETER

* DEPTH OF WELL: 200 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 4'

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Stone Pea Gravel	200	30
type II Cement Grout	30	3
Ground top soil	3	0

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

CIRCLE ONE

DATE

<div style="display: flex; justify-content: space-between;"><div>B 1 01458 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small></div><div>SEQUENCE NO. (DP USE ONLY)</div></div>		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER 7A-88-3563 <small>70 fill in this form completely 79</small>	
<div style="display: flex; justify-content: space-between;"><div>Date Received (APA) 070693 <small>8 13</small></div><div>OWNER INFORMATION <div style="display: flex; justify-content: space-between;"><div>8 FRED. <small>15 Last Name</small></div><div>CO. <small>Owner</small></div><div>BO. <small>First Name</small></div><div>OF ED <small>34</small></div></div><div style="display: flex; justify-content: space-between;"><div>7630 <small>36</small></div><div>HAYWARD ROAD <small>Street or RFD</small></div><div>55</div></div><div style="display: flex; justify-content: space-between;"><div>FREDERICK <small>57</small></div><div>MD 21202 <small>70 State 72</small></div><div>Zip 76</div></div></div></div> <div>DRILLER INFORMATION Robert L. Cline <small>Driller's Name</small> Cline and Duvall, Inc. <small>Firm Name</small> 8093 Hillmark Ct, Frederick <small>Address</small> Robert L. Cline <small>Signature</small> 6-18-93 <small>Date</small> 1139 <small>77 License No. 80</small></div>		<div style="display: flex; justify-content: space-between;"><div>B 3 LOCATION OF WELL <div style="display: flex; justify-content: space-between;"><div>1 FREDERICK <small>8 COUNTY</small></div><div>21</div></div><div style="display: flex; justify-content: space-between;"><div>23 SUBDIVISION</div><div>42</div></div><div style="display: flex; justify-content: space-between;"><div>SECTION 44 46</div><div>LOT 48 50</div><div>Size # 3A</div></div><div style="display: flex; justify-content: space-between;"><div>URBANA <small>52 NEAREST TOWN</small></div><div>71</div></div><div style="display: flex; justify-content: space-between;"><div>1 <small>73</small></div><div>M I <small>76 77 78</small></div></div><div>1 MILES FROM TOWN (enter 0 if in town)</div></div></div> <div>B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) <div style="text-align: center;"><div>N 8-9</div><div>W 8-9</div><div>SW 8-9</div><div>S 8-9</div><div>SE 8-9</div><div>E 8-9</div><div>TOWN</div></div><div style="text-align: center;">ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-around;"><div>NORTH N</div><div>WEST W</div><div>SOUTH S</div><div>EAST E</div></div></div><div style="display: flex; justify-content: space-between;"><div>11 Route 355 <small>NEAR WHAT ROAD</small></div><div>30</div></div><div style="display: flex; justify-content: space-between;"><div>34 300 <small>DISTANCE FROM ROAD</small></div><div>37</div></div><div style="display: flex; justify-content: space-between;"><div>ENTER FT or MI</div><div>11 <small>58 39</small></div></div></div>			
<div style="display: flex; justify-content: space-between;"><div>B 2 WELL INFORMATION <div style="display: flex; justify-content: space-between;"><div>APPROX. PUMPING RATE (GAL. PER MIN.) 20 <small>8 12</small></div><div>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 10000 <small>14 20</small></div></div></div><div>USE FOR WATER (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</div><div><input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</div><div><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</div><div><input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</div><div><input checked="" type="checkbox"/> TEST OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</div></div></div><div>APPROXIMATE DEPTH OF WELL 300 <small>24 28</small> FEET</div><div>APPROXIMATE DIAMETER OF WELL 6 <small>NEAREST INCH</small></div><div>METHOD OF DRILLING (circle one) <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> BORED (or Augered)</div><div><input type="checkbox"/> JETTED</div><div><input type="checkbox"/> Jettied & DRIVEN</div></div><div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> AIR-ROTARY</div><div><input type="checkbox"/> AIR-PERCussion</div><div><input type="checkbox"/> ROTARY (Hydraulic Rotary)</div></div><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> CABLE</div><div><input type="checkbox"/> REVerse-ROTary</div><div><input type="checkbox"/> Drive-POINT</div></div><div>other: _____</div></div></div> <div>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL</div><div><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</div><div><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY</div><div><input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL</div></div><div>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52</div><div style="text-align: center;"><small>Not to be filled in by driller (OEP USE ONLY)</small></div><div style="display: flex; justify-content: space-between;"><div>APPROP. PERMIT NUMBER 54 _____ 63</div><div>FORCE V6 <small>67 68</small></div><div>WRITE INITIALS IN BOX PERMIT No. 7A-88-3563 <small>70 71 72 73 74 75 76 77 78 79</small></div></div><div>SPECIAL CONDITIONS</div></div>		<div style="display: flex; justify-content: space-between;"><div>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="display: flex; justify-content: space-between;"><div>Fred <small>COUNTY NAME</small></div><div>93-174 <small>COUNTY NO.</small></div></div><div style="display: flex; justify-content: space-between;"><div>STATE SIGNATURE DATE ISSUED 070693 <small>43</small></div><div>6.18.93 <small>48 CO SIGNATURE</small></div><div>1/31/94 <small>EXP. DATE</small></div></div><div style="display: flex; justify-content: space-between;"><div>NORTH GRID 543000 <small>50 55</small></div><div>EAST GRID 0704000 <small>57 63</small></div></div><div>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 <div style="display: flex; justify-content: space-between;"><div>E 700</div><div>N 540</div></div><div>DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="text-align: center;">N ↑</div><div style="text-align: right;">X well (3A)</div></div></div></div></div>			

C1 3762 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 93-174
PERMIT NO. FROM "PERMIT TO DRILL WELL" PR-88-3563

ST/CO USE ONLY
DATE Received SEP X 2 1993
DATE WELL COMPLETED 072093

Depth of Well
22 300 26
(TO NEAREST FOOT)

OWNER FREDERICK CO. BOARD OF EDUCATION
STREET OR RFD last name 7030 HAYWARD first name ROAD TOWN FREDERICK MD 21702
SUBDIVISION SECTION SITE 3 A 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		Check if water bearing
	FROM	TO	
YELLOW CLAY	0	10	
YELLOW CLAY	10	53	
AND GRAVEL			
BLUE SLATE	53	300	✓

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES ☒ NO ☐
TYPE OF GROUTING MATERIAL CEMENT ☒ BENTONITE CLAY ☐
CEMENT ☒ BENTONITE CLAY ☐
NO. OF BAGS 25 NO. OF POUNDS 2350
GALLONS OF WATER 150
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 60 ft.

CASING RECORD
casing types insert appropriate code below
MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 61 Total depth of main casing (nearest foot) 61
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 PL PLASTIC HO OPEN HOLE OT OTHER
DEPTH (nearest ft.) 1 HO 60 300 21

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 139
Robert Cline

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Robert Cline

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

SLOT SIZE 1 2 3
DIAMETER OF SCREEN 56 60 (NEAREST INCH)
from to

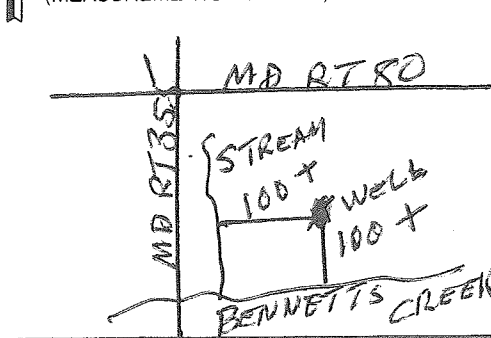
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

PUMPING TEST
HOURS PUMPED (nearest hour) 1
PUMPING RATE (gal. per min. to nearest gal.) 25
METHOD USED TO MEASURE PUMPING RATE TIME
WATER LEVEL (distance from land surface) BEFORE PUMPING 3 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

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) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE (nearest foot) 49 51

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 01479 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-88-3621 <small>fill in this form completely</small>	
B 2 082053 Date Received (APA) OWNER INFORMATION FRED. CO. BO. OF ED 7630 HAYWARD ROAD FREDERICK MD 21702				B 3 LOCATION OF WELL FREDERICK 8 COUNTY 23 SUBDIVISION SECTION 44 46 LOT 48 50 SIR 2B URBANA 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 1 MI			
DRILLER INFORMATION Robert L. Cline Cline and Duvall, Inc. 8893 Hillmark Ct Frederick Robert L. Cline 72093				B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) N W N E W S S E TOWN ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH W W E EAST SOUTH Route 355 2000 DISTANCE FROM ROAD ENTER FT or MI FT			
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 20 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 10000				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)			
APPROXIMATE DEPTH OF WELL 300 FEET				NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Faul COUNTY NAME STATE SIGNATURE DATE ISSUED 082093 CO SIGNATURE G. W. Budz NORTH GRID 543000 EAST GRID 0704000			
APPROXIMATE DIAMETER OF WELL 6 INCH				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 700 N 540			
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary DRIVE-POINT other				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 RT 80 Big woods rd RT 355 X well Hillman RD 80 X-270			
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 DEEPEN 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) APPROX. PERMIT NUMBER 54 GAP 63 FORCE V6 WRITE INITIALS IN BOX PERMIT No. FR-88-3621 SPECIAL CONDITIONS			

C1 7711

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)COUNTY
NUMBER

93-174

ST/CO USE ONLY
DATE Received

SEP 23 1993

DATE WELL COMPLETED

072493

Depth of Well

22 150 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-88-3621

OWNER FREDERICK CO. BOARD OF EDUCATION
last name 1630 HAYWARD RD first name TOWN FREDERICK MD 21702
STREET OR RFD
SUBDIVISION SECTION SITE 2 B LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

Check
if water
bearingYELLOW CLAY 0 18
AND GRAVEL
BROWN SHALE 18 34
BLUE SLATE 34 150 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
☒ ☐
44 44

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐NO. OF BAGS 9 NO. OF POUNDS 846GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 41 ft.
48 52 54 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)S T
60 616
63 64142
66 70EACH
CASING

OTHER CASING (if used)

diameter

depth (feet)
from to
 screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST
STEELBR
BRASSHO
OPEN
HOLEPL
BRONZEOT
OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

140
8 941
11 15150
17 21
23 24
26 30
32 36
38 39
41 45
47 51

SLOT SIZE 1 2 3

DIAMETER

 (NEAREST
INCH)

from to

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68
68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

70

72

W Q

74 75 76

TELESCOPE
CASINGLOG
INDICATOR

OTHER DATA

C3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour)

1
8 9PUMPING RATE (gal. per min.
to nearest gal.)12
11 15METHOD USED TO
MEASURE PUMPING RATE TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING

2
17 20

WHEN PUMPING

22 25

TYPE OF PUMP USED (for test)

☒ air ☐ piston ☐ turbine
27 27 27
☐ centrifugal ☐ rotary ☐ other
27 27 27 (describe below)
☐ jet ☐ submersible
27 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒ NO(CIRCLE) (YES or 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

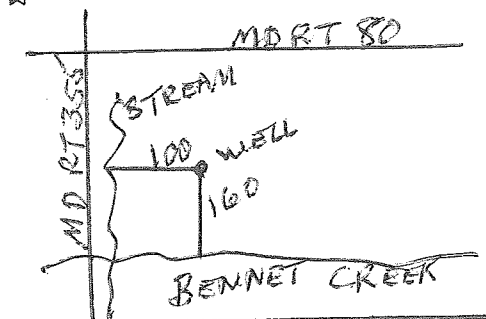
(nearest ft.)

CASING HEIGHT (circle appropriate box
and enter casing height)☒ above☐ below

LAND SURFACE

1 (nearest
foot)
50 51

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 A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI 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, AND THAT THE INFORMATION PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.DRILLERS IDENT. NO. 139Robert Cline

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

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: 4-8-04 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

FR -88 - 3621

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: Randall L. Alexander

WELL DRILLERS LICENSE NUMBER: 006

* OWNER'S NAME: Fredrick County water and sewer
URBANA (School)

CIRCLE: MWD/MSD/MGD

* WELL LOCATION:
COUNTY: Fredrick

NEAREST TOWN: URBANA

TAX MAP _____ BLOCK _____ PARCEL _____

SUBDIVISION: _____

SECTION: _____ LOT: _____

NEAREST ROAD: URBANA PIKE (RT355)

MARYLAND GRID COORDINATES

E 700

BOX NUMBER

N 540

000	X
000	

SHOW WELL LOCATION
BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

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

* USE CODE:

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

* TYPE OF CASING:

- ☒ STEEL
- ☐ CONCRETE
- ☐ PLASTIC
- ☐ OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 150 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES _____ NO
if yes, length removed, in feet: 4

* WAS CASING RIPPED OR PERFORATED? _____ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Stone Pea Gravel	150	30
type II Cement Grout	30	3
Ground top soil	3	0

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

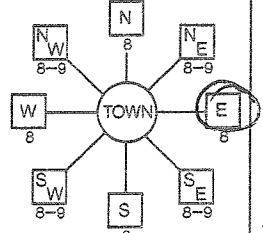
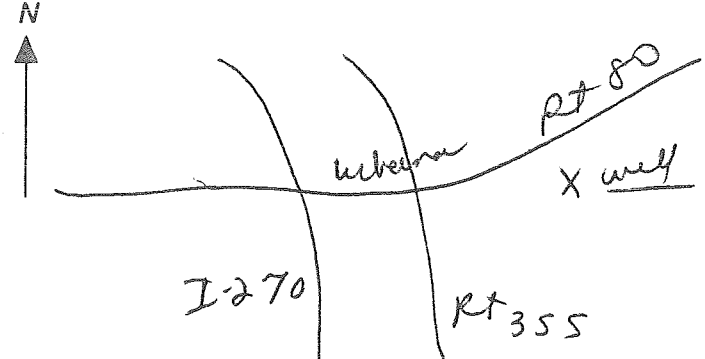
MWD/MSD/MGD
CIRCLE ONE

DATE

006

4/8/04

Randall L. Alexander

B 1 1061 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-88-H015 <small>fill in this form completely</small>
Date Received (APA) 05/10/94		B 3 LOCATION OF WELL 1 FREDERICK 8 COUNTY 23 SUBDIVISION SECTION 44 LOT 48 URBANA 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 1 MI	
OWNER INFORMATION 15 Last Name OAK Owner 35 CONTRACTING CORP. First Name 35 35101 Street or RFD 57 BALTIMORE Town 70 State MD Zip 21213		DRILLER INFORMATION Driller's Name Robert L. Cline MSD/MGD/MWD 1139 Firm Name Cline & Duvall, Inc. 77 License No. 80 Address 8093 Hillman Ct, Frederick Signature Robert L. Cline Date 5-2-94	
B 2 WELL INFORMATION 1 APPROX. PUMPING RATE (GAL. PER MIN.) 10 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 2000		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input checked="" type="checkbox"/> INDUSTRIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> STATE AND FEDERAL GOV. <input type="checkbox"/> OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		11 Route 80 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 200 37 DISTANCE FROM ROAD ENTER FT OR MI FT	
APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH		TAX MAP: 96 BLK: 23 PARCEL 49 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Fred. COUNTY NO. 94-196 STATE SIGNATURE _____ INSERT S DATE ISSUED 05/10/94 CO SIGNATURE G. A. Galt EXPI DATE 11/30/94 NORTH GRID 546000 EAST GRID 0705000	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN 30 AIR-ROTary <input checked="" type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (Hydraulic Rotary) 37 CABLE <input type="checkbox"/> REVERSE-ROTary <input type="checkbox"/> 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 700 N 540	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		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 FL93GAP015 FORCE UG WRITE INITIALS IN BOX PERMIT No. _____ SPECIAL CONDITIONS			

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

C1 1046

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)COUNTY
NUMBER

94-196

ST/CO USE ONLY
DATE Received

JUN 9 1994

DATE WELL COMPLETED

051894

Depth of Well

22 300 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
77-88-4015OWNER DAK CONTRACTING CORP
STREET OR RFD last name 3501 SINCLAIR LANE first name TOWN BALTIMORE MD 21213
SUBDIVISION SECTION LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed) FEET
FROM TO Check
if water
bearing

BROWN SHALE 0 29

BLUE SLATE 29 300 ✓

WATER AT
80'IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY
WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED

yes
Yno
N

- 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, AND THAT THE INFORMATION PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.DRILLERS IDENT. NO. 139

Robert Cline

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

Rick Fogle

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

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes
Yno
N

TYPE OF GROUTING MATERIAL

CEMENT CMBENTONITE CLAY BCNO. OF BAGS 13 NO. OF POUNDS 1222GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 39 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

ST

6

40

EACH
CASING

OTHER CASING (if used)

diameter
inch from toscreen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

1 H0 39 300
2 23 24 26 30 32 36
3 38 39 41 45 47 51

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

MDE USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

W Q

70
TELESCOPE
CASING72
LOG
INDICATOR74 75 76
OTHER DATA

C 3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour)

1

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

9

METHOD USED TO
MEASURE PUMPING RATE

TIME

WATER LEVEL (distance from land surface)

20

BEFORE PUMPING

300

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)

(CIRCLE) (YES or NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USETYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE: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)

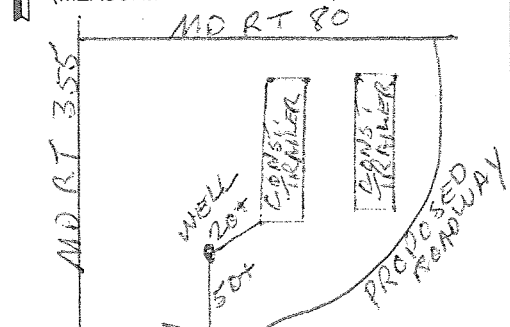
+ above

LAND SURFACE

- below

1 (nearest
foot)

LOCATION OF WELL ON LOT

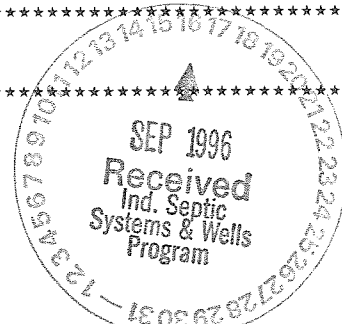
SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

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: 8-19-96 (month/day/year)



* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: JAMES MOORE

WELL DRILLERS LICENSE NUMBER: 141

* OWNER'S NAME: OAK CONTRACTING CORP

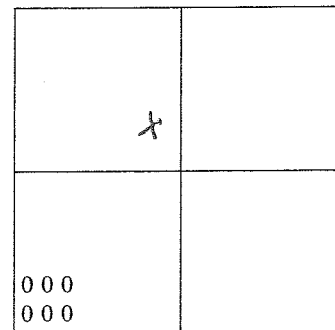
CIRCLE: MWD MSD/MGD

* WELL LOCATION:

COUNTY: FREDERICK
NEAREST TOWN: URBANA
TAX MAP 96 BLOCK 49 PARCEL 49
SUBDIVISION: URBANA SCHOOL
SECTION: _____ LOT: _____

MARYLAND GRID COORDINATES

BOX NUMBER E 700
N 540



SHOW WELL LOCATION
BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

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

* USE CODE:

☐ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION CONTRACTORS USE

* TYPE OF CASING:

☒ STEEL ☐ PLASTIC
☐ CONCRETE ☐ OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 300 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES _____ NO
if yes, length removed, in feet: 3

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
DIRT	0	3
TYPE II CEMENT	3	40
CRUSHED STONE	40	300

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

141
MWD MSD/MGD
CIRCLE ONE

DATE

8-19-96



B 1 4083		SEQUENCE NO. (DP USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-88-4365 fill in this form completely	
Date Received (APA) 11/01/94 OWNER INFORMATION GEISLER MERHL E JR 3362 URBANA PIKE JAMSVILLE MD 21754				LOCATION OF WELL FREDERICK SUBDIVISION SECTION 44 46 LOT 48 50 URBANA MILES FROM TOWN (enter 0 if in town) 1 MI			
DRILLER INFORMATION George F. Easterday L.F. Easterday Inc MT. AIRY MD 21771 Denny L. Easterday 10/29/94				MSD/MGD/MWD 40 77 License No. 80			
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500				DIRECTION OF WELL FROM TOWN (CIRCLE BOX) TOWN ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 20 DISTANCE FROM ROAD ENTER FT OR MI FT			
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 Fried COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 11/01/94 CO SIGNATURE NORTH GRID 543000 EAST GRID 0703000			
APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH				SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1 wells WRITE THE BOX NUMBER FROM THE MAP HERE 200 540			
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) 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEN 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 FORCE 116 PERMIT No.				DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION URBANA RT 80 355			
SPECIAL CONDITIONS				NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			

C11 4593 SEQUENCE NO. (DENV USE ONLY)
1 2 3 4 5 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

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37

111594

Depth of Well
22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
AR-88-4365

OWNER Geisler, MERLH E Jr.
STREET OR RFD last name 3362 URBANA FIRE TOWN URBANA
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		Check if water bearing
	FROM	TO	
TOP Soil	0	2	
Red Clay	2	5	
brown shale	5	12	
brown slate	12	22	
gray slate	22	30	
Clay	30	32	
gray slate	32	60	
brown slate	60	61	
gray slate	61	90	
gray & brown	90	95	✓
Slate Mixed	95	110	
gray slate	110	125	
gray & brown	125	200	
Slate Mixed			
gray slate			

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box) YES ☒ NO ☐
TYPE OF GROUTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☐
NO. OF BAGS 10 NO. OF POUNDS 1000
GALLONS OF WATER 50
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
STEEL ☒ CONCRETE ☐
PLASTIC ☐ OTHER ☐

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

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

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL ☒ BRASS ☐ OPEN HOLE ☐
PLASTIC ☐ OTHER ☐

DEPTH (nearest ft.)
1 40 38 200
2
3
EACH SCREEN

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.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 5
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 50
WHEN PUMPING 200
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
- below
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 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 40
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 1 1664 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-94-0303 <small>fill in this form completely</small>
Date Received (APA) 031297 OWNER INFORMATION MARMET ROBERT 2932 THURSTON RD FREDERICK MD 21704		B 3 LOCATION OF WELL FREDERICK MARMET SECTION 44 46 LOT 48 50 URBAN MILES FROM TOWN (enter 0 if in town) 1 MI	
DRILLER INFORMATION Austin Harver Keyser-Harver 9125 Bethel rd Fred. Md. 21702 Austin Harver 1-17-97		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH DISTANCE FROM ROAD ENTER FT OR MI FT	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 2 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800		USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	
APPROXIMATE DEPTH OF WELL 404 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 other		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Frederick COUNTY NO. 97-12 STATE SIGNATURE INSERT S DATE ISSUED 031297 CO SIGNATURE NORTH GRID 542000 EAST GRID 0697000 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 690 N 540 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="radio"/> THIS WELL WILL DEEPEN 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 GAP FORCE NS WRITE INITIALS IN BOX PERMIT NO. FR-94-0303 SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =	

C1 1409

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

97-12

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received

8 13

DATE WELL COMPLETED

042397

Depth of Well

22 322 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

AR-94-0303

OWNER

MARMET ROBERT

STREET OR RFD

last name 2932 THURSTON RD

first name

TOWN

FREDERICK

SUBDIVISION

MARMET SUB

SECTION

LOT

1

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

Check
if water
bearing

OVER BURDEN

0 23

SLATE

HIT WATER AT

23' 48'

48' 26pm

SLATE

HIT WATER AT

48' 190'

190' 46pm

SLATE

190' 320'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 10 NO. OF POUNDS 990

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 40 ft.

(enter 0 if from surface)

48 TOP 52 54 BOTTOM 58

CASING RECORD

casing
types
insert
appropriate
code
below

ST CO

STEEL CONCRETE

PL OT

PLASTIC OTHER

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

ST

6

90

60 61

63 64

66 67 68 69 70

EACH
CASING

OTHER CASING (if used)

diameter

inch

depth (feet)

from to

screen type
or open holeinsert
appropriate
code
below

SCREEN RECORD

ST BR HO

STEEL BRASS OPEN

BRONZE HOLE

PL OT

PLASTIC OTHER

C 2

EACH
SCREEN

DEPTH (nearest ft.)

1 H O 39 322

8 9 11 15 17 21

2 23 24 26 30 32 36

3 38 39 41 45 47 51

C 3

1

2

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 7

METHOD USED TO MEASURE PUMPING RATE BUCKET/TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING 40

WHEN PUMPING 190

TYPE OF PUMP USED (for test)

A air P piston T turbine

C centrifugal R rotary O (describe below)

J jet S submersible

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY
WHERE SATURATED FRACTURES WERE OBSERVED.

48' 190'

WELL HYDROFRACTURED

yes

Y

no

N

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
WELLI 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, AND THAT THE INFORMATION PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO.

095

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

MDE USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)

70 72

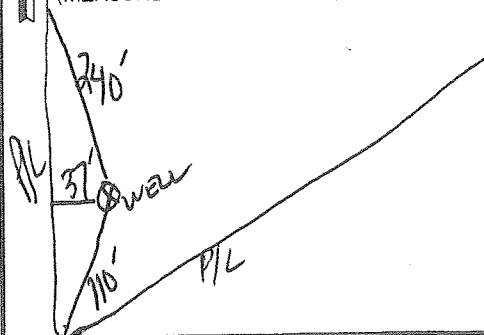
TELESCOPE CASING LOG INDICATOR

W Q

74 75 76

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 1661	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-94-0304 <small>fill in this form completely</small>
2 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) Date Received (APA) 031294		B 3 LOCATION OF WELL 1 FREDERICK 8 COUNTY MARMET 23 SUBDIVISION SECTION 44 LOT 2 URBANA 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 1 MI	
OWNER INFORMATION 15 Last Name MARMET Owner First Name ROBERT 36 Street or RFD 938 THURSTON RD 57 Town FREDERICK 70 State 72 MD Zip 76 21704		MSD/MGD/MWD 0945 77 License No. 80	
DRILLER INFORMATION Driller's Name Austin Sauer Firm Name Keyser-Sauer Address 9125 Bethel rd Fred MD 21702 Signature Austin Sauer Date 1-17-97		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 2 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800		NEAR WHAT ROAD High Hope Lane ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 40 DISTANCE FROM ROAD ENTER FT OR MI FT TAX MAP: 96 BLK: _____ PARCEL 230	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME FREDERICK COUNTY NO. 97-13 STATE SIGNATURE _____ INSERT S <input type="checkbox"/> DATE ISSUED 031297 CO SIGNATURE Noel Horner EXP. DATE 9-30-97 NORTH GRID 542000 EAST GRID 0697000	
APPROXIMATE DEPTH OF WELL 400 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST		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 690 N 540	
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN 30 AIR-ROTARY <input type="checkbox"/> 37 AIR-PERCUSION <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEANED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE NS WRITE INITIALS IN BOX PERMIT No. FR-94-0304 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			

C1 1408

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

97-13

1 2 3 6
(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

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-99-0304

OWNER MARMET ROBERT
STREET OR RFD 2932 THURSTON RD first name FREDERICK
SUBDIVISION MARMET SUB SECTION 2 LOT 2

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed) FEET
FROM TO Check
if water
bearing

OVERBURDEN

0' 32'

SOAPSTONE
HIT WATER AT 72'
16 PM

32' 72' ✓

SLATE & SOAP
STONE
HIT WATER AT
278' 46 PM

72' 278' ✓

SLATE

278' 402'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ Y no ☐ N

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BCNO. OF BAGS 15 NO. OF POUNDS 410GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 67 ft.
(enter 0 if from surface)

Casing types insert appropriate code below

STEEL ☒ ST CONCRETE ☐ CO
PLASTIC ☐ PL OTHER ☐ OT

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

ST 6 67

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

EACH CASING

screen type or open hole insert appropriate code below

STEEL ☐ ST BRASS ☐ BR BRONZE ☐ PL PLASTIC ☐ OT OTHER ☐ HO OPEN HOLE

C2

DEPTH (nearest ft.)

1 40 64 402

EACH SCREEN

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

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

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3PUMPING RATE (gal. per min. to nearest gal.) 5METHOD USED TO MEASURE PUMPING RATE BUCKET/TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING 38WHEN PUMPING 278

TYPE OF PUMP USED (for test)

A air ☒ P piston ☐ T turbineC centrifugal ☐ R rotary ☐ O other (describe below)J jet ☐ S submersible ☐

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒ NO ☐

(CIRCLE) (YES or 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

above ☒ below ☐

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)

163' 155' 315' 165'

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

72' 278'

WELL HYDROFRACTURED yes ☒ Y no ☐ N

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 095DRILLERS SIGNATURE Austin Lowe

(MUST MATCH SIGNATURE ON APPLICATION)

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

ORIGINAL STATE

B 1 1662	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER FR-94-0305 <small>70 fill in this form completely 79</small>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		B 3 LOCATION OF WELL	
Date Received (APA) 031297		1 2 FREDERICK	
OWNER INFORMATION 15 Last Name MARMET Owner First Name ROBERT		8 COUNTY MARMET	
36 2932 THURSTON RD		23 SUBDIVISION	
57 FREDERICK Town		SECTION 44 LOT 3	
70 State MD Zip 21709		52 NEAREST TOWN URBANA	
DRILLER INFORMATION Driller's Name Austin Sauer		MILES FROM TOWN (enter 0 if in town) 1 MI	
Firm Name Keyser-Sauer		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	
Address 9125 Bethel Rd Md 21709		11 High Hope Lane NEAR WHAT ROAD	
Signature Austin Sauer Date 1-17-79		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	
B 2 WELL INFORMATION		34 95 37 DISTANCE FROM ROAD	
APPROX. PUMPING RATE (GAL. PER MIN.) 2		ENTER FT OR MI FT	
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800		TAX MAP: 96 BLK: _____ PARCEL 230	
USE FOR WATER (CIRCLE APPROPRIATE BOX)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)		COUNTY NAME FREDERICK COUNTY NO.	
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)		STATE SIGNATURE _____ INSERT S	
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)		DATE ISSUED 031297	
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)		CO SIGNATURE Neil Storer EXP. DATE 9-30-97	
<input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NORTH GRID 542000 EAST GRID 0697000	
APPROXIMATE DEPTH OF WELL 400 FEET		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X	
APPROXIMATE DIAMETER OF WELL 6 INCH		SOURCES OF DRILLING WATER	
METHOD OF DRILLING (circle one)		1. well	
<input type="checkbox"/> BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN		2.	
<input type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)		3.	
<input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT		WRITE THE BOX NUMBER FROM THE MAP HERE	
other _____		E 690 N 540	
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION	
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL		N	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED		sketch showing location of well in relation to nearby towns and roads	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS		URBANA	
<input type="checkbox"/> THIS WELL WILL DEEPEAN AN EXISTING WELL		1 mi	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEANED (IF AVAILABLE)		45	
41 _____ 52		High Hope Lane	
Not to be filled in by driller (OEP USE ONLY)		FORCE NS INITIALS IN BOX	
APPROP. PERMIT NUMBER _____ GAP _____		PERMIT No. FR-94-0305	
SPECIAL CONDITIONS		NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =	

ORIGINAL STATE

B 1		1559		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER FR-94-0357 <small>fill in this form completely</small>	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)									
Date Received (APA) 04/09/97 OWNER INFORMATION STURGES FAMILY LLC STURGES ROBERT 2329 FINGERBOARD RD FREDERICK MD 21701					B 3 LOCATION OF WELL FREDERICK WORTHINGTON MANOR GOLF CLUB SECTION 44 46 LOT 48 50 URBANA 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI				
DRILLER INFORMATION NEIL C. NEGLEY NEGLEY'S WELL DRILLING 1699 CUMBERLAND HWY. NEWBURG, PA 17440 4-4-97					CIRCLE: MSD/MGD/MWD 387 77 License No. 80				
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 10 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 3000					B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD 2329 FINGERBOARD ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 300 DISTANCE FROM ROAD ENTER FT OR MI FT TAX MAP: 95.96 BLK: 8, 13 PARCEL: 21				
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input checked="" type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)					NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL FREDERICK COUNTY NAME 97-94 COUNTY NO. STATE SIGNATURE DATE ISSUED 04/16/97 CO SIGNATURE David Matrell EXP. DATE 10-31-97 NORTH GRID 544000 EAST GRID 0693000				
APPROXIMATE DEPTH OF WELL 200 FEET					SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. WELL 2. 3.				
APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST					WRITE THE BOX NUMBER FROM THE MAP HERE E 690 N 540				
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY Drive-POINT other					DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 				
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE)					Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER FR96GAP008 FORCE 12 WRITE INITIALS IN BOX PERMIT No. FR-94-0357				
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED									

C1 6364 SEQUENCE NO. (OEP 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 97-94

DATE Received
MAY 16 1997

DATE WELL COMPLETED
04 23 97

Depth of Well
22 500 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
ER-94-0357

OWNER Sturges family LLC (Bob Sturges)
STREET OR RFD S 5 23 24 Fingerboard Road first name TOWN Urbana
SUBDIVISION Worthington Manor Golf Club 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		Check if water bearing
	FROM	TO	
Clay	0	15	
Soft Brown Rock	15	35	
Hard Grey Limestone	35	117	
Soft Grey Limestone	117	121	✓
Greenstone	121	218	
Pink-white Quartz	218	219	
Grey Limestone	219	500	✓

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes (Y) no (N)
TYPE OF GROUTING MATERIAL
CEMENT (CM) BENTONITE CLAY (BC)
NO. OF BAGS 15 NO. OF POUNDS 1410
GALLONS OF WATER 90
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 59 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL (ST) CONCRETE (CO)
PLASTIC (PL) OTHER (OT)

MAIN CASING TYPE
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 60
ST 6 60

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

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

DEPTH (nearest ft.)
1 40 59 500
2
3

SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60

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

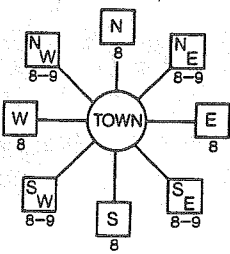
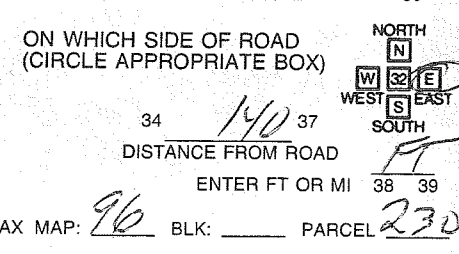
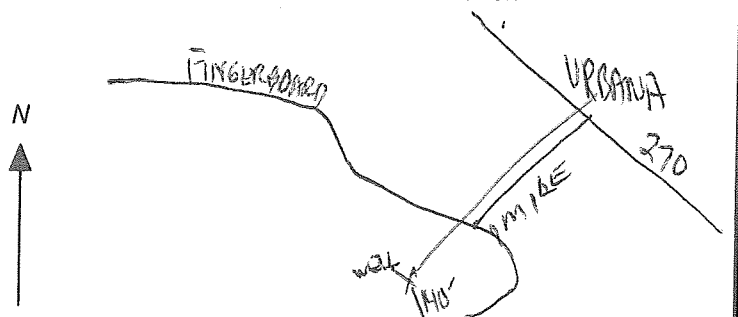
PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 17
METHOD USED TO MEASURE PUMPING RATE with a bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 45
WHEN PUMPING 300
TYPE OF PUMP USED (for test)
(A) air (P) piston (T) turbine
(C) centrifugal (R) rotary (O) other (describe below)
(J) jet (S) submersible

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 (-) below 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)
Fingerboard Road
315'
44'
farm lane
old farm house

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. MW0387
DRILLERS SIGNATURE
SITE SUPERVISOR (sign. of driller or journeyman responsible for site work if different from permittee)

B 1 <u>0487</u>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>FR - 94 - 1042</u> <small>fill in this form completely</small>
Date Received (APA) <u>8 7 98</u>		B 3 <u>FREDERICK</u> LOCATION OF WELL	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		8 COUNTY <u>FREDERICK</u> 21	
OWNER INFORMATION 15 Last Name <u>MARMET</u> Owner First Name <u>ROBERT A</u> 34 36 <u>2932 THURSTON RD</u> Street or RFD 55 57 <u>FREDERICK MD 21702</u> Town State Zip 76		23 SUBDIVISION <u>MARMET SUB</u> 42 SECTION <u>44</u> LOT <u>12</u> 46 48 50 <u>URBANA</u> 52 NEAREST TOWN 71	
DRILLER INFORMATION Driller's Name <u>AUSTIN GARVER</u> License No. <u>MS D 095</u> 81 Firm Name <u>Kayser-Lawson Well Drilling Co</u> Address <u>9125-B Bethel rd Frederick, MD 21702</u> Signature <u>Austin Garver</u> Date <u>8/6/98</u>		MILES FROM TOWN (enter 0 if in town) <u>1</u> M I 73 76 77 78	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>2</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 	
APPROXIMATE DEPTH OF WELL <u>400</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>FREDERICK</u> COUNTY NO. <u>98-219</u> STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <u>08 7 98</u> CO SIGNATURE <u>And Atton</u> EXP. DATE <u>1-31-99</u> 43 MM DD YY 48 NORTH GRID <u>541</u> 0 0 0 EAST GRID <u>0697</u> 0 0 0 50 55 57 63	
METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR PERCUSSION</u> JETTED <u>ROTARY</u> (Hydraulic Rotary) 30 AIR-ROTARY 37 CABLE <u>REVERSE-ROTARY</u> DRIVE-POINT other _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>WELL</u> 2. _____ 3. _____	
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 _____ 52		WRITE THE BOX NUMBER FROM THE MAP HERE E <u>690</u> N <u>541</u>	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <u>54</u> G A P <u>63</u> FORCE <u>NS</u> WRITE INITIALS IN BOX PERMIT No. <u>FR - 94 - 1042</u> 67 68 70 71 72 73 74 75 76 77 78 79		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	

C1	01472	SEQUENCE NO. (MDE USE ONLY)	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.	
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			COUNTY NUMBER <u>98-219</u>			
ST/CO USE ONLY DATE Received MM DD 1999 08 21 1999		DATE WELL COMPLETED MM DD 98 08 19 98		Depth of Well 22 <u>282</u> 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>FR-94-1042</u>

OWNER <u>MARINET ROBERT</u>		TOWN <u>FREDERICK</u>	
STREET OR RFD <u>2932 THURSTON RD</u>		SECTION <u>12</u>	
SUBDIVISION <u>OVERLOOK</u>		LOT <u>12</u>	

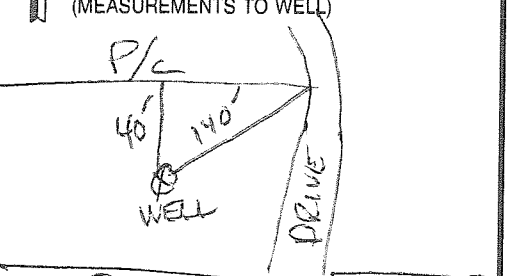
WELL LOG Not required for driven wells		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing
OVERBURDEN	0' 29'	
SLATE HIT WATER AT 70' 6 GPM	29' 70'	✓
SLATE HIT WATER AT 129' 4 GPM	70' 129'	✓
SLATE	129' 282'	

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) <u>Y</u> <u>N</u>		
TYPE OF GROUTING MATERIAL (Circle one) CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u>		
NO. OF BAGS <u>14</u> NO. OF POUNDS <u>1316</u>		
GALLONS OF WATER <u>84</u>		
DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> TOP <u>52</u> ft. to <u>63</u> BOTTOM <u>58</u> (enter 0 if from surface)		
CASING RECORD casing types insert appropriate code below <u>ST</u> <u>CO</u> STEEL CONCRETE <u>PL</u> <u>OT</u> PLASTIC OTHER		
MAIN CASING TYPE <u>ST</u>	Nominal diameter top (main) casing (nearest inch) <u>6</u>	Total depth of main casing (nearest foot) <u>63</u>
OTHER CASING (if used)	diameter inch	depth (feet) from to

C 3	
PUMPING TEST	
HOURS PUMPED (nearest hour)	<u>3</u>
PUMPING RATE (gal. per min.)	<u>10</u>
METHOD USED TO MEASURE PUMPING RATE	<u>BUCKET/TIME</u>
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	<u>52</u> ft.
WHEN PUMPING	<u>282</u> ft.
TYPE OF PUMP USED (for test)	
<u>A</u> air	<u>P</u> piston
<u>C</u> centrifugal	<u>R</u> rotary
<u>J</u> jet	<u>S</u> submersible

NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>
WELL HYDROFRACTURED <u>Y</u> <u>N</u>
CIRCLE APPROPRIATE LETTER <u>A</u> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <u>E</u> ELECTRIC LOG OBTAINED <u>P</u> 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.
DRILLERS LIC. NO. <u>M 5 D 095</u> <u>Austin Rowe</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. <u>M 5 D 034</u> <u>Danny Harley</u> SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

SCREEN RECORD screen type or open hole insert appropriate code below <u>ST</u> <u>BR</u> <u>HO</u> STEEL BRASS OPEN HOLE <u>PL</u> <u>OT</u> PLASTIC OTHER	
C 2	
DEPTH (nearest ft.)	
1 <u>40</u>	2 <u>61</u>
3 <u>282</u>	
5 <u>282</u>	
7 <u>282</u>	
9 <u>282</u>	
11 <u>282</u>	
13 <u>282</u>	
15 <u>282</u>	
17 <u>282</u>	
19 <u>282</u>	
21 <u>282</u>	
23 <u>282</u>	
25 <u>282</u>	
27 <u>282</u>	
29 <u>282</u>	
31 <u>282</u>	
33 <u>282</u>	
35 <u>282</u>	
37 <u>282</u>	
39 <u>282</u>	
41 <u>282</u>	
43 <u>282</u>	
45 <u>282</u>	
47 <u>282</u>	
49 <u>282</u>	
51 <u>282</u>	
SLOT SIZE 1 <u>1</u> 2 <u>2</u> 3 <u>3</u>	
DIAMETER OF SCREEN (NEAREST INCH) <u>56</u> <u>60</u>	
from to	
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <u>68</u>	
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	
70 <u>70</u>	72 <u>72</u>
74 <u>74</u>	75 <u>75</u>
76 <u>76</u>	
TELESCOPE CASING	LOG INDICATOR
OTHER DATA	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (YES OR NO)	YES <u>NO</u>
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 <u>29</u>	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	<u>31</u> <u>35</u>
PUMP HORSE POWER	<u>37</u> <u>41</u>
PUMP COLUMN LENGTH (nearest ft.)	<u>43</u> <u>47</u>
CASING HEIGHT (circle appropriate box and enter casing height)	<u>+</u> above
LAND SURFACE	<u>2</u> (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)	
	

B 1 <u>0488</u> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>FR - 94 - 1043</u> <small>fill in this form completely</small>
Date Received (APA) <u>08 07 98</u> <small>8 MM DD YY 13</small> OWNER INFORMATION 15 <u>Marmet Robert</u> First Name 34 2932 Thurston rd 36 <u>Frederick Md</u> Street or RFD 55 57 <u>Frederick</u> Town 70 <u>Md</u> State 72 <u>21704</u> Zip 76		B 3 <u>FREDERICK</u> LOCATION OF WELL 8 COUNTY 21 23 <u>MARMET SUB</u> SUBDIVISION 42 SECTION <u>44</u> LOT <u>11</u> 44 46 48 50 52 <u>URBANA</u> NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>1</u> M 11 73 76 77 78	
DRILLER INFORMATION <u>AUSTIN GARVER</u> M S D 095 Driller's Name 76 License No. 81 <u>Keyser-Harner Well Drilling Inc.</u> Firm Name <u>9125-B Bethel rd Frederick Md 21702</u> Address <u>Austin Garver</u> 8/6/98 Signature Date		B 4 <u>RAMSLAND WAY</u> 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 <u>40</u> 37 DISTANCE FROM ROAD ENTER FT OR MI <u>FT</u> 38 39 TAX MAP: <u>96</u> BLK: <u> </u> PARCEL <u>230</u>	
B 2 <u>2</u> WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>2</u> 14 20 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>800</u> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>FREDERICK</u> 98-218 COUNTY NAME COUNTY NO. STATE SIGNATURE <u>Neil Stoen</u> INSERT S <u>41</u> DATE ISSUED <u>1-31-99</u> 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <u>541</u> 000 EAST GRID <u>0697</u> 000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>WELL</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>690</u> N <u>540</u> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <u>400</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH 24 28		METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other <u> </u>	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 <u> </u> 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER <u>54</u> G A P <u>63</u> WRITE INITIALS IN BOX <u>MS</u> PERMIT No. <u>FR - 94 - 1043</u> 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</small>			

C1 01468 SEQUENCE NO. (MDE USE ONLY)

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

98-218

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received

MAY 21 1999

DATE WELL COMPLETED

MM 05 DD 17 YY 98

Depth of Well

22 302 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-94-1043

OWNER

MARMET ROBERT A

STREET OR RFD

last name 2932 THURSTON RD

first name

TOWN

FREDERICK

SUBDIVISION

MARMET SUB

SECTION

LOT

11

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

OVERBURDEN
SLATE HIT
WATER AT
190' 66PM
SLATE HIT
WATER AT 26PM
SLATE

0' 47'
47' 190'
190' 278'
278' 302'

✓
✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT C M BENTONITE CLAY B C

NO. OF BAGS 45 46 16 NO. OF POUNDS 45 46 1,504

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 63 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 ST
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 63

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type
or open hole

SCREEN RECORD

insert appropriate code below
ST STEEL BR BRASS HO OPEN
PL PLASTIC OT OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no
Y N

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, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. 1 M S D O 9 5

Austin Sawyer

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 M S D O 3 4

Jerry Hawley

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

DEPTH (nearest ft.)

C 2
T 2
E 1 40 61 302
A 8 9 11 15 17 21
C 2 23 24 26 30 32 36
S
C 3 38 39 41 45 47 51
R
E
E
N
SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

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

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q

70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 83

PUMPING RATE (gal. per min.) 18

METHOD USED TO
MEASURE PUMPING RATE bucket/tine

WATER LEVEL (distance from land surface)

BEFORE PUMPING 55 ft.

WHEN PUMPING 278 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other
J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO
(CIRCLE) (YES or NO)

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29.

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

PUMP HORSE POWER 37 41

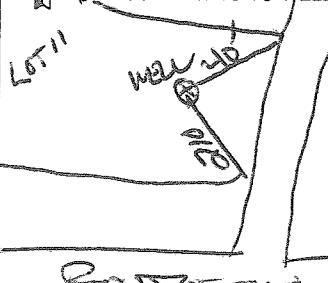
PUMP COLUMN LENGTH
(nearest ft.) 43 47

CASING HEIGHT (circle appropriate box
and enter casing height)

+ above
- below
LAND SURFACE 2 (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)



B 1		0383		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type		STATE PERMIT NUMBER <u>FR-94-1449</u> fill in this form completely	
Date Received (APA) <u>04 23 99</u> 8 MM DD YY 13				OWNER INFORMATION					
15 <u>Angleberger</u> Last Name				Owner		34 <u>Stephen & Kathy</u> First Name			
36 <u>8400 Lassie Court</u>				Street or RFD		55			
57 <u>Walkersville</u> Town				70 State		72		Zip 76 <u>21793</u>	
DRILLER INFORMATION									
Driller's Name <u>Robert L. Cline</u>				M W D		License No. <u>139</u>			
Firm Name <u>Cline and Duvall, Inc.</u>									
Address <u>8093 Hillmark Ct.</u>				Frederick		21704			
Signature <u>Robert L. Cline</u>				Date		<u>4/21/99</u>			
B 2		WELL INFORMATION							
1 2		APPROX. PUMPING RATE (GAL. PER MIN.)							
		8 <u>300</u> 12							
		AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)							
		14 <u>300</u> 20							
USE FOR WATER (CIRCLE APPROPRIATE BOX)									
<input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION									
<input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)									
<input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING									
<input type="radio"/> PUBLIC WATER SUPPLY WELL									
<input type="radio"/> TEST, OBSERVATION, MONITORING									
<input type="radio"/> GEO-THERMAL									
APPROXIMATE DEPTH OF WELL <u>250</u> FEET				NEAREST TOWN					
APPROXIMATE DIAMETER OF WELL <u>6</u> INCH									
METHOD OF DRILLING (circle one)									
BORED (or Augered) <input type="radio"/> JETTED <input type="radio"/> Jettied & DRIVEN <input type="radio"/>									
AIR-ROTARY <input type="radio"/> AIR-PERCussion <input checked="" type="radio"/> ROTARY (Hydraulic Rotary) <input type="radio"/>									
CABLE <input type="radio"/> REVerse-ROTary <input type="radio"/> Drive-POINT <input type="radio"/>									
other _____									
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)									
<input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL									
<input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED									
<input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS									
<input type="radio"/> THIS WELL WILL DEEPEIN AN EXISTING WELL									
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52									
Not to be filled in by driller (MDE OR COUNTY USE ONLY)									
APPROP. PERMIT NUMBER 54 _____ 63									
PERMIT No. <u>FR-94-1449</u> 70 71 72 73 74 75 76 77 78 79									
SPECIAL CONDITIONS									
NOTE * APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED *									

B 3		Frederick		LOCATION OF WELL	
8 COUNTY		21			
23 SUBDIVISION		42			
SECTION <u>44</u> <u>46</u>		LOT <u>3</u> <u>48</u> <u>50</u>			
52 NEAREST TOWN		<u>Urbana</u>		71	
MILES FROM TOWN (enter 0 if in town)		<u>1</u> M <u>1</u>		73 76 77 78	
B 4		1 2		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	
				URBANA PIKE	
				11 NEAR WHAT ROAD 30	
				ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	
				34 <u>300</u> 37	
				DISTANCE FROM ROAD ENTER FT OR MI 38 39	
				TAX MAP: <u>96</u> BLK: _____ PARCEL <u>223</u>	

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
<u>Frederick</u> COUNTY NAME	
<u>99-03</u> COUNTY NO.	
STATE SIGNATURE _____ INSERT S _____ 41	
DATE ISSUED <u>04 23 99</u> <u>Tom M...</u> <u>10-31-99</u>	
43 MM DD YY 48 CO SIGNATURE _____ EXP. DATE _____	
NORTH GRID <u>547</u> <u>000</u> <u>55</u>	
EAST GRID <u>0697</u> <u>000</u> <u>63</u>	
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X	
SOURCES OF DRILLING WATER	
1. <u>Well</u>	
2. _____	
3. _____	
WRITE THE BOX NUMBER FROM THE MAP HERE	
E <u>690</u>	
N <u>540</u>	
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION	

C11 6415 (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.

COUNTY
NUMBER 99-03

ST/CO USE ONLY

DATE Received

JUN 15 1998

DATE WELL COMPLETED

MM 5 DD 14 XY 99
15 20

Depth of Well

22 440 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR-94-1449
28 29 30 31 32 33 34 35 36 37

OWNER AMGLEBERGER STEPHEN & KATHY
last name first name
STREET OR RFD 8400 LASSIE COURT
SUBDIVISION URBANA MANOR SECTION 2 TOWN WALKERSVILLE MD 21793
LOT 3

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

BROWN SHALE 0 60
BLUE SLATE 60 440 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CMC BENTONITE CLAY BC

NO. OF BAGS 20 NO. OF POUNDS 1800

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 69 ft.
48 TOP 52 ft. to 54 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN
CASING
TYPE

Nominal diameter
top (main) casing
(nearest inch)

Total depth
of main casing
(nearest foot)

ST 6 70
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from to

EACH CASING

screen type
or open hole

SCREEN RECORD

insert
appropriate
code
below

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no
Y N

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, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. MW D 139

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MW D 536

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

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

T (E.R.O.S.) W Q
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 1
8 9

PUMPING RATE (gal. per min.) 50
11 15

METHOD USED TO
MEASURE PUMPING RATE ESTIMATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 70 ft.
17 20

WHEN PUMPING 440 ft.
22 25

TYPE OF PUMP USED (for test)

A air P piston T turbine
27 27 27
C centrifugal R rotary O other
27 27 27 (describe
below)
J jet S submersible
27 27

PUMP INSTALLED

DRILLER INSTALLED PUMP YES NO

(CIRCLE) (YES or NO)

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29

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

PUMP HORSE POWER 37 41

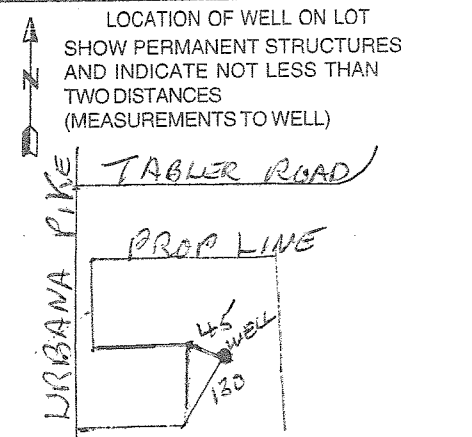
PUMP COLUMN LENGTH
(nearest ft.) 43 47

CASING HEIGHT (circle appropriate box
and enter casing height)

+ above LAND SURFACE
49
- below 1 (nearest
49 50 51 foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)



B 1 18440

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

STATE PERMIT NUMBER

FR -94-2012
70 fill in this form completely 79

Date Received (APA)

4/20/00
8 MM DD YY 13

OWNER INFORMATION

TNT Services Group, Inc.

15 Last Name Owner First Name 34

P.O. Box 451

36 Street or RFD 55

Frederick, MD 21705-0451

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Robert L. Cline M W D 139

Driller's Name 76 License No. 81

Cline & Duvall, Inc.

Firm Name

8093 Hillmark Ct., Frederick, MD 21704

Address

Robert L. Cline 4/19/00

Signature Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE
(GAL. PER MIN.)

5

8 12

AVERAGE DAILY QUANTITY NEEDED
(GAL. PER DAY)

500

14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- 22 ☒ INDUSTRIAL, COMMERCIAL, DEWATERING
- ☐ PUBLIC WATER SUPPLY WELL
- ☐ TEST, OBSERVATION, MONITORING
- ☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 250 FEET
24 28APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered)

JETTED

Jettied & DRIVEN

30 AIR-ROTary

AIR-PERCussion

ROTARY (Hydraulic Rotary)

37 CABLE

REVERSE-ROTary

DRIVE-POINT

other

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 SEALED39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS☐ THIS WELL WILL DEEPEMED AN EXISTING WELLPERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED
(IF AVAILABLE) 41

FR-94-1893 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER

FR2000 GAF 007

54 63

PERMIT No. FR-94-2012
70 71 72 73 74 75 76 77 78 79

B 3 LOCATION OF WELL

Frederick

8 COUNTY 21

Stanford Industrial Park

23 SUBDIVISION 42

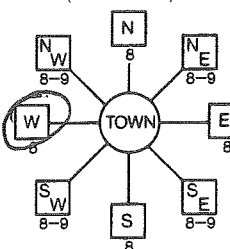
SECTION 3 LOT 5
44 46 48 50

Buckeystown

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 4
73 76 77 78

B 4

1 2
DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)

Dartmouth Court

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)34 550 37
DISTANCE FROM ROAD ft.
ENTER FT OR MI 38 39

TAX MAP: 94 BLK: PARCEL 88

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Frederick

00-117

COUNTY NAME

COUNTY NO.

STATE
SIGNATURE

INSERT S → 41

DATE ISSUED

4/20/00 711 Cline & Duvall, Inc. 10/31/05

43 MM DD YY 48

CO SIGNATURE

EXP. DATE

NORTH
GRID

549 000 55

EAST
GRID

0698 000 63

SHOW MAJOR FEATURES OF
BOX & LOCATE WELL
WITH AN X

SOURCES OF DRILLING WATER

1. well
- 2.
- 3.

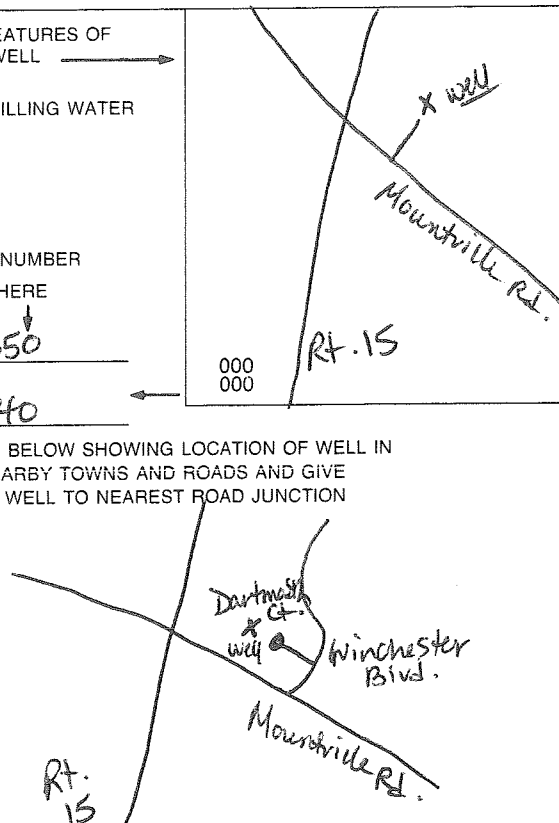
WRITE THE BOX NUMBER
FROM THE MAP HERE

E 650

N 540

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



SPECIAL CONDITIONS

NOTE * APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED *

7C1 6014

SEQUENCE NO.
(MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.

COUNTY
NUMBER

00-117

ST/CO USE ONLY

DATE Received

MAY 20 2000

DATE WELL COMPLETED

MM 4 DD 2 YY 00
15 20

Depth of Well

22 500 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

FR 94 - 2012

OWNER TNT SERVICES GROUP INC.

STREET OR RFD PO BOX 451

TOWN FREDERICK MD 21701

SUBDIVISION STANFORD IND. PARK SECTION 3

LOT 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

FROM

TO

check
if water
bearing

BROWN SHALE 0 30

BLUE SLATE 30 500 ✓

WATER AT
68-163-410

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes ☒ no ☐
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 11 NO. OF POUNDS 1034

GALLONS OF WATER 66

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 39 ft.
(enter 0 if from surface)

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)

ST 6 40
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from to

E
A
C
H
C
A
S
I
N
G

SCREEN RECORD

screen type
or open hole

(insert
appropriate
code
below)

☒ ☐ ☐
STEEL

☐ ☐ ☐
BRASS

☐ ☐ ☐
OPEN

☐ ☐ ☐
BRONZE

☐ ☐ ☐
HOLE

☐ ☐ ☐
PLASTIC

☐ ☐ ☐
OTHER

C 2

DEPTH (nearest ft.)

HO 39 500
1 8 9 11 15 17 21

2 23 24 26 30 32 36

3 38 39 41 45 47 51

4 43 44 46 50 52 56

5 58 59 61 65 67 71

6 73 74 76 80 82 86

7 88 89 91 95 97 101

8 103 104 106 110 112 116

9 118 119 121 125 127 131

10 133 134 136 140 142 146

11 151 152 154 158 160 164

12 167 168 170 174 176 180

13 183 184 186 190 192 196

14 199 200 202 206 208 212

PUMPING TEST

HOURS PUMPED (nearest hour)

1
8 9

PUMPING RATE (gal. per min.)

6
11 15

METHOD USED TO
MEASURE PUMPING RATE

TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30 ft.

WHEN PUMPING 500 ft.

TYPE OF PUMP USED (for test)

☒ air ☐ piston ☐ turbine
☐ centrifugal ☐ rotary ☐ other
☐ jet ☐ submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP YES ☒ NO ☐

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O) 29
IN BOX 29.

CAPACITY:
GALLONS PER MINUTE
(to nearest gallon)

31 35

PUMP HORSE POWER

37 41

PUMP COLUMN LENGTH
(nearest ft.)

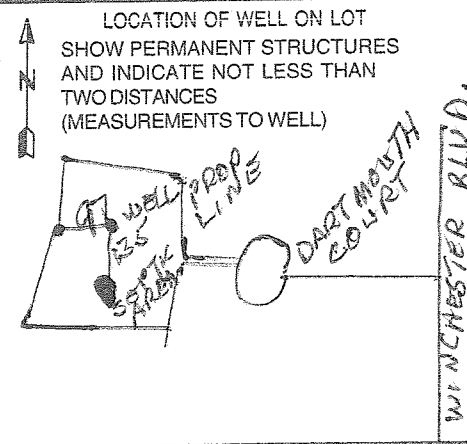
43 47

CASING HEIGHT (circle appropriate box
and enter casing height)

☒ above } LAND SURFACE
☐ below } (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes ☒ no ☐

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, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. MWD 139

Robert Cline

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MWD 536

Robert Cline

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

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

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG OTHER DATA
CASING INDICATOR

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: MAY 2, 2000 (month/day/year)



1. * PERMIT NUMBER OF ABANDONED WELL (if any)

FR - 94 - 1893

* PERMIT NUMBER OF REPLACEMENT WELL

FR - 94 - 2012

* PERSON ABANDONING WELL: JAMES MOORE

WELL DRILLERS LICENSE NUMBER: 141

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: TNT SERVICES GROUP INC

* WELL LOCATION:

COUNTY: FREDERICK

NEAREST TOWN: BUCKEYSTOWN

TAX MAP BLOCK PARCEL

SUBDIVISION: STANFORD INDUSTRIAL PARK

SECTION: 3 LOT: 5

NEAREST ROAD: DARTMOUTH COURT

MARYLAND GRID COORDINATES

E 650

BOX NUMBER

N 540

	X
000	000

SHOW WELL LOCATION
BY X WITHIN BOX

* 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 INCHES IN DIAMETER

* DEPTH OF WELL: 100 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 3

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
DIRT	0	3
TYPE II CEMENT	3	50
CRUSHED STONE	50	100

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

141
CIRCLE ONE

DATE

B 1	3599	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR - 94 - 3005 <small>fill in this form completely</small>
Date Received (APA) 04 23 02 <small>8 MM DD YY 13</small>		OWNER INFORMATION		
Last Name MARMET		Owner First Name ROBERT		
Street or RFD 2932 THURSDON RD		Town State Zip FREDERICK MD 21704		
DRILLER INFORMATION				
Driller's Name AUSTIN GARVER		License No. MS D 095		
Firm Name Super-Duper Well Drilling Inc		Address 9125-B Belld rd Fred Md 21702		
Signature <i>Austin Garver</i>		Date 4/23/02		
WELL INFORMATION				
APPROX. PUMPING RATE (GAL. PER MIN.)		2		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		800		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME FREDERICK COUNTY NO. 01-363 STATE SIGNATURE _____ INSERT S → _____ DATE ISSUED 042302 CO SIGNATURE Jon M. [Signature] EXP. DATE 10-31-02 NORTH GRID 541 000 EAST GRID 0697 000				
APPROXIMATE DEPTH OF WELL 400 FEET		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		
APPROXIMATE DIAMETER OF WELL 6 INCH		SOURCES OF DRILLING WATER		
METHOD OF DRILLING (circle one)		WRITE THE BOX NUMBER FROM THE MAP HERE		
BORED (or Augered) _____ JETTED _____ Jetted & DRIVEN _____ AIR-ROtary _____ AIR-PERcussion _____ ROTARY (Hydraulic Rotary) _____ CABLE _____ Reverse-ROtary _____ DRive-POINT _____ other _____		E 697 N 541		
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION		
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER _____ G _____				
PERMIT No. FR-94-3005				
SPECIAL CONDITIONS				

123456

Q0442

SEQUENCE NO.
(MDE USE ONLY)

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

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

123456

COUNTY
NUMBER

01-363

123456

DATE RECEIVED
MM DD YY

DATE WELL COMPLETED
MM DD YY

DEPTH OF WELL
22 400 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
FR-94-3005
28 29 30 31 32 33 34 35 36

OWNER
MARNET ROBERT

STREET OR RFD
2932 THURSTON RD

TOWN
FREDERICK

SUBDIVISION
MARNET SUB

SECTION

LOT
10

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	
SOAPSTONE	0'	45'	
SLATE	45'	90'	✓
HIT WATER AT	90'	260'	
SLATE	90'	220'	✓
HIT WATER AT	220'	360'	
SLATE	220'	405'	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 14 NO. OF POUNDS 1372

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.

(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEEL ☒ CONCRETE ☐

PLASTIC ☐ OTHER ☐

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch) 6

Total depth of main casing (nearest foot) 63

60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)

inch from to

EACH CASING

screen type or open hole

insert appropriate code below

STEEL ☒ BRASS ☐ OPEN ☐

BRONZE ☐ HOLE ☐

PLASTIC ☐ OTHER ☐

DEPTH (nearest ft.)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

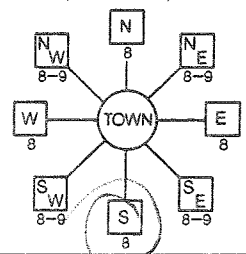
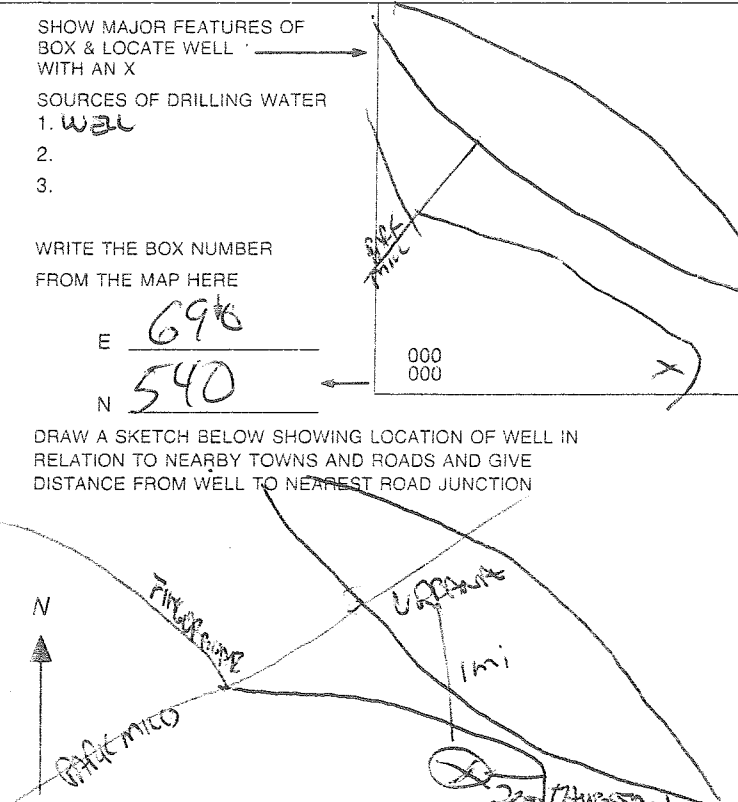
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

1 2 3 4 5 6

B 1 1 2 3 4 5 6 3565	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-3006 <small>70 fill in this form completely 79</small>
Date Received (APA) 04 23 02 <small>8 MM DD YY 13</small> OWNER INFORMATION 15 Last Name MARMET Owner First Name ROBERT 34 2932 THURSTON RD 36 FREDERICK MD 27002 57 Town 70 State 72 Zip 76		B 3 FREDERICK LOCATION OF WELL 8 COUNTY RAMSLAND WAY MARMET SUB 23 SUBDIVISION 4 42 SECTION 44 46 LOT 48 50 URBANA 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M 11 <small>73 76 77 78</small>	
DRILLER INFORMATION AUSTIN GARNER MS DO 95 Driller's Name 76 License No. 81 Keye - Banner Wells Drilling Firm Name MS-B Bells rd Frederick MD 27002 Address Austin Garner 4/23/02 Signature Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD RAMSLAND WAY 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> NE <input type="checkbox"/> E <input type="checkbox"/> SE <input type="checkbox"/> S <input type="checkbox"/> SW <input type="checkbox"/> W <input type="checkbox"/> NW SOUTH 34 200 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 105 BLK: _____ PARCEL 245 <small>25</small>	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 2 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL FREDERICK 01-362 COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED 04 23 02 Tom Mallett 10-31-02 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 541 0 0 0 EAST GRID 0697 0 0 0 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. WAL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 696 N 540 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL 400 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN 30 AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCUSION <input type="checkbox"/> ROTARY (Hydraulic Rotary) 37 CABLE <input checked="" type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT other _____	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. FR-94-3006 <small>70 71 72 73 74 75 76 77 78 79</small>	

C1	00443	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 5 (THIS NUMBER IS TO BE PUNCHED IN U.S. 3-6 ON ALL CARDS)				
/CO USE ONLY DATE Received MM JUN 12 2002 DD 13 YY 02		DATE WELL COMPLETED MM 06 DD 29 YY 02		COUNTY NUMBER 01-362

OWNER <u>MARINET ROBERT</u>		Depth of Well 22 <u>340</u> 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>FR-94-3006</u>
STREET OR RFD <u>2932 THURSTON RD</u>		TOWN <u>FREDERICK</u>		
SUBDIVISION <u>MARINET SUB</u>		SECTION <u>4</u>		

WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) YES <u>Y</u> NO <u>N</u>		C3
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		TYPE OF GROUTING MATERIAL (Circle one) CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u>		
DESCRIPTION (Use additional sheets if needed)		NO. OF BAGS <u>12</u> NO. OF POUNDS <u>176</u>		
GALLONS OF WATER <u>72</u>		DEPTH OF GROUT SEAL (to nearest foot)		
from <u>0</u> ft. to <u>64</u> ft. (enter 0 if from surface)				
casing types insert appropriate code below		CASING RECORD <u>ST</u> <u>CO</u> STEEL CONCRETE <u>PL</u> <u>OT</u> PLASTIC OTHER		
MAIN CASING TYPE <u>ST</u>		Nominal diameter top (main) casing (nearest inch) <u>6</u>		
		Total depth of main casing (nearest foot) <u>69</u>		
OTHER CASING (if used)		diameter inch from to		
EACH CASING				
screen type or open hole		SCREEN RECORD <u>ST</u> <u>BR</u> <u>HO</u> STEEL BRASS OPEN <u>PL</u> <u>OT</u> PLASTIC OTHER		
(insert appropriate code below)				

PUMPING TEST		
HOURS PUMPED (nearest hour)	<u>3</u>	
PUMPING RATE (gal. per min.)	<u>6</u>	
METHOD USED TO MEASURE PUMPING RATE	<u>Bucket</u>	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	<u>30</u> ft.	
WHEN PUMPING	<u>340</u> ft.	
TYPE OF PUMP USED (for test)		
<u>A</u> air	<u>P</u> piston	<u>T</u> turbine
<u>C</u> centrifugal	<u>R</u> rotary	<u>O</u> other (describe below)
<u>J</u> jet	<u>S</u> submersible	

PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)	YES <u>NO</u>
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	
31	35
PUMP HORSE POWER	
37	41
PUMP COLUMN LENGTH (nearest ft.)	
43	47

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

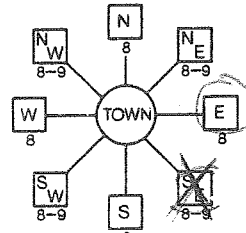

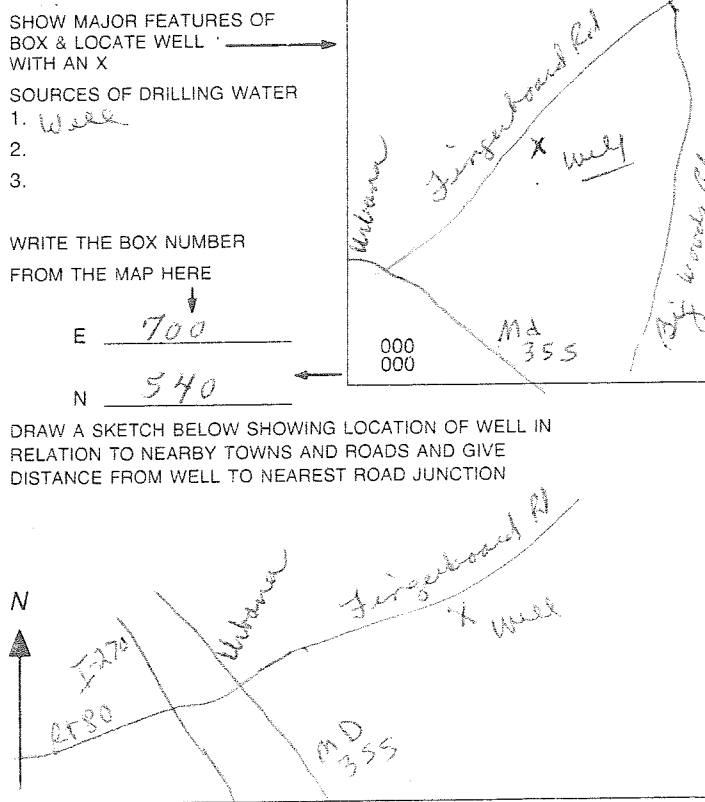
C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

C2	
DEPTH (nearest ft.)	
1	2
8	9
11	15
17	21
23	26
30	32
36	38
39	41
45	47
51	53
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from	to

B 1 1 2 3 6 <u>8276</u>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <u>FR-94-3007</u> <small>fill in this form completely</small>
Date Received (APA) <u>4-25-02</u> 8 MM DD YY 13 OWNER INFORMATION Main Madeline 15 Last Name Owner First Name 34 <u>9433-A Fingerboard Road</u> 36 Street or RFD 55 <u>Ijamsville</u> <u>Md.</u> <u>21754</u> 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL <u>Frederick</u> 8 COUNTY 21 <u>The Main Event</u> 23 SUBDIVISION 42 SECTION <u>44</u> <u>46</u> LOT <u>2</u> <u>48</u> <u>50</u> <u>Urbana</u> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>1.5</u> M I 73 76 77 78	
DRILLER INFORMATION <u>Robert L. Cline</u> <u>M W D</u> <u>139</u> Driller's Name 76 License No. 81 <u>Cline and Duvall, Inc.</u> Firm Name <u>8093 Hillmark Ct.</u> <u>Frederick</u> <u>21704</u> Address <u>Robert L. Cline</u> <u>4-23-02</u> Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE <u>5</u> (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED <u>300</u> (GAL. PER DAY) 14 20		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 600 37 DISTANCE FROM ROAD FT ENTER FT OR MI 38 39 TAX MAP: <u>96</u> BLK: _____ PARCEL <u>58</u>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="radio"/> PUBLIC WATER SUPPLY WELL <input type="radio"/> TEST, OBSERVATION, MONITORING <input type="radio"/> GEO-THERMAL		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>FREDERICK</u> <u>02-205</u> COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED <u>4-25-02</u> <u>David D. Tull</u> <u>10-31-02</u> 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <u>546</u> <u>000</u> EAST GRID <u>0709</u> <u>000</u> 50 55 57 63	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>Well</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>700</u> N <u>540</u> 000 000 Md 355 000 000	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTary DRIVE-POINT other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. <u>FR-94-3007</u> 70 71 72 73 74 75 76 77 78 79	

C1	12117	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER 02-205		

ST/CO USE ONLY DATE Received MM JUN 17 2002	DATE WELL COMPLETED MM 5 DD 16 YY 02	Depth of Well 22 175 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" FR 94-3007
---	---	---	---

OWNER MAIN	STREET OR RFD 9433 FINGERBOARD RD	TOWN 1 TOWNSVILLE MD 21253
SUBDIVISION THE MAIN EVENT SECTION	LOT 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	
BROWN SHALE	0	44	
BLUE SLATE	44	125	✓

WATER AT
95-110, 133

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED
YES ☒ NO ☐

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, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. 1 MWD 139
Robut C. Lema
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MWD 53B
Robut C. Lema
SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 12 NO. OF POUNDS 940
GALLONS OF WATER 60
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 53 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
ST 6 54
Nominal diameter
top (main) casing
(nearest inch)
Total depth
of main casing
(nearest foot)

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

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

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
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

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
70 72 74 75 76
TELESCOPE LOG OTHER DATA

C3

PUMPING TEST
HOURS PUMPED (nearest hour) 1
PUMPING RATE (gal. per min.) 25
METHOD USED TO MEASURE PUMPING RATE ESTIMATE
WATER LEVEL (distance from land surface)
BEFORE PUMPING 52 ft.
WHEN PUMPING 175 ft.
TYPE OF PUMP USED (for test)
A centrifugal P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29.
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 49 below 49
LAND SURFACE 1 (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)
NORT 355
SEPTIC TANK 165 330

B 1	3591	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL <small>please type</small>	STATE PERMIT NUMBER FR - 94 - 3013 <small>fill in this form completely</small>
Date Received (APA) 5/1/02 8 MM DD YY 13		OWNER INFORMATION		
15 Last Name MARMET		34 First Name ROBERT		
36 Street or RFD 2932 Thurston RD		55		
57 Town FREDERICK		70 State MD	76 Zip 21704	
DRILLER INFORMATION				
Driller's Name Austin Garver		76 License No. MD 095		
Firm Name Keyser Garver		81		
Address 9125 Belhel Rd Fred, MD 21702		Signature Austin Garver		
Date 5-1-02		81		
B 2		WELL INFORMATION		
1 2		APPROX. PUMPING RATE (GAL. PER MIN.)		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		14 20		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME Frederick		COUNTY NO. 02-43		
STATE SIGNATURE 5/1/02		DATE ISSUED 5/1/02		
CO SIGNATURE 5/1/02		EXP. DATE 11/30/02		
NORTH GRID 542 000		EAST GRID 0697 000		
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 690				
N 540				
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 (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER				
PERMIT NO. FR - 94 - 3013				

C1	02029	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE WELL COMPLETED MM JUN 12 2002 DD 13 YY 02		Depth of Well 22 145 26 (TO NEAREST FOOT)		
ST/CO USE ONLY DATE Received MM JUN 12 2002 DD 13 YY 02		DATE WELL COMPLETED MM 5 18 02 DD 15 YY 20		PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3013 28 29 30 31 32 33 34 35 36 3		

OWNER MARMOT ROBERT
STREET OR RFD 2932 THURSTON RD first name TOWN FREDERICK
SUBDIVISION MARMOT SUB SECTION 5 LOT 5

WELL LOG Not required for driven wells			GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> CM BENTONITE CLAY <input type="checkbox"/> BC NO. OF BAGS <u>15</u> NO. OF POUNDS <u>1470</u> GALLONS OF WATER <u>90</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> TOP <u>63</u> ft. to <u>63</u> BOTTOM <u>58</u> ft. (enter 0 if from surface)		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			CASING RECORD casing types insert appropriate code below <input checked="" type="checkbox"/> ST STEEL <input type="checkbox"/> CO CONCRETE <input type="checkbox"/> PL PLASTIC <input type="checkbox"/> OT OTHER		
DESCRIPTION (Use additional sheets if needed)			MAIN CASING TYPE <u>ST</u> Nominal diameter top (main) casing (nearest inch) <u>6</u> Total depth of main casing (nearest foot) <u>63</u>		
FEET FROM TO <u>0</u> <u>5</u> <u>5</u> <u>120</u> <u>120</u> <u>145</u>			OTHER CASING (if used) diameter depth (feet) inch from to		
check if water bearing			SCREEN RECORD screen type or open hole (insert appropriate code below) <input checked="" type="checkbox"/> ST STEEL <input type="checkbox"/> BR BRASS <input type="checkbox"/> HO OPEN HOLE <input type="checkbox"/> PL PLASTIC <input type="checkbox"/> OT OTHER		

PUMPING TEST	
HOURS PUMPED (nearest hour)	<u>3</u>
PUMPING RATE (gal. per min.)	<u>020</u>
METHOD USED TO MEASURE PUMPING RATE	<u>BLIKET</u>
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	<u>40</u> ft.
WHEN PUMPING	<u>145</u> ft.
TYPE OF PUMP USED (for test)	
<input checked="" type="checkbox"/> A air	<input type="checkbox"/> P piston
<input type="checkbox"/> C centrifugal	<input type="checkbox"/> T turbine
<input type="checkbox"/> J jet	<input type="checkbox"/> O other (describe below)
<input type="checkbox"/> R rotary	<input type="checkbox"/> S submersible

NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>		C2 DEPTH (nearest ft.)	
WELL HYDROFRACTURED <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		1 <u>145</u> 2 <u>60</u> 3 <u>145</u>	
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		4 <u>145</u> 5 <u>145</u> 6 <u>145</u>	
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		7 <u>145</u> 8 <u>145</u> 9 <u>145</u>	
DRILLERS LIC. NO. 1 <u>MSD093</u>		10 <u>145</u> 11 <u>145</u> 12 <u>145</u>	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		13 <u>145</u> 14 <u>145</u> 15 <u>145</u>	
LIC. NO. 1 <u>MSD093</u>		16 <u>145</u> 17 <u>145</u> 18 <u>145</u>	
SITE SUPERVISOR (sign. of driller or journeyman)		19 <u>145</u> 20 <u>145</u> 21 <u>145</u>	

PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29	
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)	<u>+</u> above
LAND SURFACE	<u>3</u> (nearest foot)
<input type="checkbox"/> below	49 51

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)	
70 72		W Q	
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)		TO RANGLAND well	

B 1	3592	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-3014 <small>fill in this form completely</small>
Date Received (APA) 5/1/02		OWNER INFORMATION		
8 MM DD YY 13 MARMET		15 Last Name Owner First Name 34 ROBERT		
36 Street or RFD 55 2932 Thurston RD		57 Town 70 State 72 Zip 76 FREDERICK MD 21704		
DRILLER INFORMATION				
Driller's Name 76 License No. 81 AUSTIN GARVER M 3 D 095				
Firm Name Keyser Garver				
Address 2125 Bethel Rd Fred MD 21704				
Signature Date Austin Garver 5-1-02				
B 2		WELL INFORMATION		
1 2		APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 3		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20		800		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL 24 28 FEET 400		APPROXIMATE DIAMETER OF WELL NEAREST INCH 6		
METHOD OF DRILLING (circle one)				
BORED (or Augered) JETTED Jetted & DRIVEN				
30 AIR-ROTARY AIR-PERCUSSION ROTARY (Hydraulic Rotary)				
37 CABLE REVERSE-ROTARY DRIVE-POINT				
other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROP. PERMIT NUMBER _____ G _____				
PERMIT No. FR-94-3014 70 71 72 73 74 75 76 77 78 79				
B 3		LOCATION OF WELL		
8 COUNTY 21 FREDERICK		23 SUBDIVISION 42 MARMET sub		
SECTION 44 46 LOT 48 50 URBANA		52 NEAREST TOWN 71 URBANA		
MILES FROM TOWN (enter 0 if in town) 73 76 77 78 1				
B 4		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		
1 2				
11 NEAR WHAT ROAD 30 RX 90		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)		
34 600 37 DISTANCE FROM ROAD FT				
105 ENTER FT OR MI 38 39 105		TAX MAP: 96 BLK: _____ PARCEL 23		
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
Frederick 02-44				
COUNTY NAME COUNTY NO.				
STATE SIGNATURE INSERT S → 41				
DATE ISSUED 5/1/02 CO SIGNATURE Austin Garver EXP. DATE 11/15/02				
43 MM DD YY 48		NORTH GRID 50 55 542 000 EAST GRID 57 63 0697 000		
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 690				
N 540				
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION				
SPECIAL CONDITIONS				
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.				

C1	00445	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS REPORT IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
ST/CO USE ONLY DATE Received MM DD YY 8 JUN 12 2002		DATE WELL COMPLETED MM DD YY 5 10 02		Depth of Well 22 360 26 (TO NEAREST FOOT)
		COUNTY NUMBER 02-44		PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3014

OWNER MARMET ROBERT	STREET OR RFD 2932 THURSTON RD	TOWN FREDERICK	SECTION SUBDIVISION MARMET SUB	LOT 6
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WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> CM BENTONITE CLAY <input type="checkbox"/> BC NO. OF BAGS 13 NO. OF POUNDS 274 GALLONS OF WATER 78 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 63 ft. (enter 0 if from surface)		C3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 30 ft. WHEN PUMPING 360 ft. TYPE OF PUMP USED (for test) <input checked="" type="checkbox"/> A air <input type="checkbox"/> P piston <input type="checkbox"/> T turbine <input type="checkbox"/> C centrifugal <input type="checkbox"/> R rotary <input type="checkbox"/> O other (describe below) <input type="checkbox"/> J jet <input type="checkbox"/> S submersible	
---	--	---	--	---	--

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	Casing types insert appropriate code below <input checked="" type="checkbox"/> ST STEEL <input type="checkbox"/> CO CONCRETE <input type="checkbox"/> PL PLASTIC <input type="checkbox"/> OT OTHER		MAIN CASING TYPE ST 60 61 63 64 66 70 Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 63	
--	--	--	---	--

DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing	OTHER CASING (if used) diameter depth (feet) inch from to	
--	-----------------	------------------------------	---	--

OVERBURDEN 0' 5'				
SOAPSTONE 5' 80'				
HIT WATER AT 80' 3 GPM				
SOAP SLATE 80' 110'				
HIT WATER AT 110' 2 GPM				
SLATE 110' 270'				
HIT WATER AT 270' 10 GPM				
SLATE 270' 360'				

NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED yes <input checked="" type="checkbox"/> Y no <input type="checkbox"/> N	
---------------------------------	--	--	--

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		C2 DEPTH (nearest ft.) 1 8 9 11 15 17 21 2 23 24 26 30 32 36 3 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 55 60 from to	
--	--	--	--

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		SCREEN RECORD screen type or open hole (insert appropriate code below) <input checked="" type="checkbox"/> ST STEEL <input type="checkbox"/> BR BRASS <input type="checkbox"/> HO OPEN HOLE <input type="checkbox"/> PL PLASTIC <input type="checkbox"/> OT OTHER	
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DRILLER'S LIC. NO. 1 M 5 D 095		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68	
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DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	
--	--	--	--

LIC. NO. 1 M 5 D 095		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	
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TELESCOPE		LOG	
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PUMP COLUMN LENGTH (nearest ft.) 37 41 43 47		CASING HEIGHT (circle appropriate box and enter casing height) + above } LAND SURFACE - below } 2 (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)		Diagram showing well location on lot with distances 110' and 90'.	
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DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		DRILLER'S SIGNATURE	
--	--	---------------------	--

DRILLER'S SIGNATURE		DRILLER'S SIGNATURE	
---------------------	--	---------------------	--

DRILLER'S SIGNATURE		DRILLER'S SIGNATURE	
---------------------	--	---------------------	--

B 1	3593	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-3015 <small>fill in this form completely</small>
Date Received (APA) 5/1/02 <small>8 MM DD YY 13</small>		OWNER INFORMATION		
Last Name MARMET		Owner First Name ROBERT		
Street or RFD 2932 Thurston Rd		Town State Zip Fredrick MD 21704		
DRILLER INFORMATION				
Driller's Name AUSTIN GARVER		License No. MSD 094		
Firm Name KEYSER GARVER		Address 9125 Bethel Rd Fred MD 21702		
Signature <i>Austin Garver</i>		Date 5-1-02		
B 2	WELL INFORMATION			
APPROX. PUMPING RATE (GAL. PER MIN.) 2		AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME Fredrick COUNTY NO. 02-45 STATE SIGNATURE _____ INSERT S _____ DATE ISSUED 5/1/02 CO SIGNATURE <i>[Signature]</i> EXP. DATE 11/30/02 <small>43 MM DD YY 48</small> NORTH GRID 542 000 EAST GRID 0697 000 <small>50 55 57 63</small>				
APPROXIMATE DEPTH OF WELL 400 FEET		APPROXIMATE DIAMETER OF WELL 6 INCH		
METHOD OF DRILLING (circle one)				
BORED (or Augered) <input type="checkbox"/> JETTED <input checked="" type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> 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 (MDE OR COUNTY USE ONLY)				
APPROP. PERMIT NUMBER _____ PERMIT No. FR-94-3015				
SPECIAL CONDITIONS				

B 3 LOCATION OF WELL

COUNTY **FREDERICK**

SUBDIVISION **MARMET Sub**

SECTION **44** LOT **7**

NEAREST TOWN **URBANA**

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

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

Rd 80

NORTH ☒ WEST ☐ EAST ☐ SOUTH ☐

DISTANCE FROM ROAD **700** ENTER FT OR MI

TAX MAP: **102-96** BLK: _____ PARCEL: **242-23**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well**
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E **690**

N **540**

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

C1 9101	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			COUNTY NUMBER 02-45

ST/CO USE ONLY DATE Received MM MAR 3 0 00 05	DATE WELL COMPLETED MM 5 DD 10 YY 02	Depth of Well 22 402 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3015
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OWNER MARMET	ROBERT
STREET OR RFD 2933 THURSTON RD	TOWN FREDERICK
SUBDIVISION MARMET SWB	SECTION LOT 7

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	
OB Soap Stone	0	5	
HIT H2O @ 80' (6)	5	80	✓
Slate	80	402	
6" casing changed from 59+0 65 ft			

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box) ☒ Y ☐ N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 14 NO. OF POUNDS 1700

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 64 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
ST 6 65

Nominal diameter
top (main) casing
(nearest inch) 60 61 63 64 66 67 68 69 70

Total depth
of main casing
(nearest foot)

OTHER CASING (if used)

inch depth (feet)
from to

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

☒ ST STEEL ☐ BR BRASS
☐ PL PLASTIC ☐ OT OTHER

C2 DEPTH (nearest ft.)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

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

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG

C3 **PUMPING TEST**

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 60

METHOD USED TO
MEASURE PUMPING RATE BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING 40 ft.

WHEN PUMPING 402 ft.

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 INSTALLED PUMP (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29

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)

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)

RAMSLAND WAY

225' 00" to well

120' to well

DRILLERS LIC. NO. 1 M5D095

DRILLERS SIGNATURE

LIC. NO. 1 M5D095

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

C1 00444		SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE WELL COMPLETED MM DD YY JUN 12 2002		Depth of Well 22 402 26 (TO NEAREST FOOT)		
ST/CO USE ONLY DATE Received JUN 12 2002		DATE WELL COMPLETED MM DD YY JUN 12 2002		PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3015		
OWNER ROBERT MARMET		STREET OR RFD 2932 THURSTON RD		TOWN FREDERICK		
SUBDIVISION MARMET SUB		SECTION 7		LOT 7		
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 14 NO. OF POUNDS 372 GALLONS OF WATER 84 DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP 52 ft. to 54 BOTTOM 58 ft. (enter 0 if from surface)		PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 6 METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 40 ft. WHEN PUMPING 402 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		CASING RECORD casing types insert appropriate code below MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) OTHER CASING (if used) diameter inch depth (feet) from to		PUMP INSTALLED DRILLER INSTALLED PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 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)		
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO OVERBURDEN 0 5 SOAPSTONE 5 80 HIT WATER AT 80' 6 GPM SLATE 80 402		PUMP INSTALLED DRILLER INSTALLED PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 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)		
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED yes Y no N		C2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76		
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		SCREEN RECORD screen type or open hole (insert appropriate code below) ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER		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)		
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q		
DRILLERS LIC. NO. 1 M SD 095 Austin Sauer		DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Austin Sauer		SITING SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		

B 1	3594	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR - 94 - 30116 fill in this form completely
Date Received (APA) 5/1/02		OWNER INFORMATION		
8 MM DD YY 13 MARMET		15 Last Name		
36 2932 Thurston RD		55 Street or RFD		
57 FREDERICK		70 State		
72 MD		76 Zip		
78 21704		79		
DRILLER INFORMATION		LOCATION OF WELL		
Driller's Name AUSTIN GARVER		B 3 FREDERICK		
76 License No.		8 COUNTY		
81 MS DOG		21 MARMET		
Firm Name Keyser - GARVER		23 SUBDIVISION		
Address 9125 BETHel rd Fred MD 21702		42		
Signature Austin Garver		52 NEAREST TOWN		
Date 5-1-02		71		
WELL INFORMATION		MILES FROM TOWN (enter 0 if in town)		
APPROX. PUMPING RATE (GAL. PER MIN.)		73		
8 2		76 77 78		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		79		
14 800		80		
20		81		
USE FOR WATER (CIRCLE APPROPRIATE BOX)		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		11 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 700 37 DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 109/96 BLK: FT PARCEL: 244/236		
APPROXIMATE DEPTH OF WELL 400 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30 AIR-ROTary <input type="checkbox"/> AIR-PERCUSSION <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> 37 CABLE <input type="checkbox"/> Reverse-ROTary <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Frederick 02-46 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 5/1/02 43 MM DD YY 48 CO SIGNATURE APL Stomach EXP. DATE 11/30/02 NORTH GRID 542 000 EAST GRID 0697 000 50 55 57 63		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52 _____		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 690 N 540 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 (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ PERMIT No. FR - 94 - 30116 70 71 72 73 74 75 76 77 78 79		SPECIAL CONDITIONS NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.		

C1 9102 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. COUNTY NUMBER 02-4600 ST/CO USE ONLY DATE Received MAR 30 2005 DATE WELL COMPLETED 05/02/02 Depth of Well 242 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3046

OWNER MARMET ROBERT STREET OR RFD 2932 THURSTON RD TOWN FREDERICK SUBDIVISION MARMET SUB SECTION LOT 8

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 OVERBURDEN 0' 5' SOAPSTONE HIT WATER AT 5' 50' SOAPSTONE 50' 100' SLATE 100' 245' 6" casing extended 3' or from 43' to 46'

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT BENTONITE CLAY NO. OF BAGS 11 NO. OF POUNDS 1878 GALLONS OF WATER 66 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 46 ft. CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 46 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

C3 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 20 METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 40 ft. WHEN PUMPING 242 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES NO Y N 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. DRILLERS LIC. NO. 1 MS D 095 Austin Lowe DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MS D 095 Austin Lowe SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C2 DEPTH (nearest ft.) 242 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 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 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED DRILLER INSTALLED PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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 1 (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) RAMSBURG WA 210 25 well

C1 02031 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED JUN 12 2002 DATE WELL COMPLETED MM 5 DD 10 YY 02 Depth of Well 22 242 26 (TO NEAREST FOOT)

COUNTY NUMBER 02-46 PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3016

OWNER MARMET ROBERT STREET OR RFD 2932 THURSTON TOWN FREDERICK SUBDIVISION MARMET SUB SECTION LOT 8

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	
OVERBURDEN	0	5	
SOAPSTONE	5	50	✓
HIT WATER AT 50 ZOGPM			
SOAPSTONE	50	100	
SLATE	100	242	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (Circle one) CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 45 46 11 NO. OF POUNDS 45 735 1078

GALLONS OF WATER 66

DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 43 BOTTOM 58 ft. (enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEEL ☒ CONCRETE ☐ PLASTIC ☐ OTHER ☐

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 43

OTHER CASING (if used)

inch	diameter	depth (feet)
		from to

SCREEN RECORD

screen type or open hole

insert appropriate code below

STEEL ☒ BRASS ☐ OPEN HOLE ☐ BRONZE ☐ PLASTIC ☐ OTHER ☐

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES ☒ NO ☐

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO.: M5D095

DRILLERS SIGNATURE Austin Sewer

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: M5D095

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

DEPTH (nearest ft.)

1 40 41 242

E A C H S C R E E N

8	9	11	15	17	21

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH) 56 60

from to

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

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

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 20

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 40 ft.

WHEN PUMPING 242 ft.

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 INSTALLED PUMP (CIRCLE) (YES OR NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O) IN BOX 29

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 - below

LAND SURFACE 2 (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)

210' 25' well

B 1	3595	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <u>FR-94-3017</u> fill in this form completely
Date Received (APA) <u>5/1/02</u>		OWNER INFORMATION		
8 MM DD YY 13				
<u>MARMET</u>		<u>ROBERT</u>		
15 Last Name		34 Owner First Name		
<u>2932 THURSTON RD</u>				
36 Street or RFD		55		
<u>FREDERICK</u>		<u>MD 21704</u>		
57 Town		76 State Zip		
DRILLER INFORMATION				
<u>AUSTIN GARVER</u> <u>M 5 D 0 9 5</u>				
Driller's Name License No.				
<u>Keyser-Garver</u>				
Firm Name				
<u>9125 Bethel Rd Fred MD 21702</u>				
Address				
<u>Austin Garver 5-1-02</u>				
Signature Date				
B 2 WELL INFORMATION				
APPROX. PUMPING RATE (GAL. PER MIN.) <u>2</u>				
8 12				
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>800</u>				
14 20				
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL <u>400</u> FEET				
24 28				
APPROXIMATE DIAMETER OF WELL <u>6</u> INCH				
NEAREST				
METHOD OF DRILLING (circle one)				
BORED (or Augered) JETTED Jetted & DRIVEN				
30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)				
37 CABLE REVERSE-ROTARY Drive-POINT				
other				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER _____ G _____				
PERMIT No. <u>FR-94-3017</u>				
70 71 72 73 74 75 76 77 78 79				
LOCATION OF WELL				
B 3				
<u>FREDERICK</u>				
8 COUNTY				
<u>MARMET Sub</u>				
23 SUBDIVISION				
42				
SECTION <u>9</u> LOT <u>9</u>				
44 46 48 50				
<u>URBANA</u>				
52 NEAREST TOWN				
71				
MILES FROM TOWN (enter 0 if in town) <u>1</u> M I				
73 76 77 78				
B 4				
1 2				
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)				
NEAR WHAT ROAD <u>Rt 80</u>				
11 30				
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)				
34 <u>800</u> 37				
DISTANCE FROM ROAD				
ENTER FT OR MI <u>FT</u>				
38 39				
TAX MAP <u>105/96</u> BLK: _____ PARCEL <u>241/230</u>				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
<u>Frederick</u> <u>02-47</u>				
COUNTY NAME COUNTY NO.				
STATE SIGNATURE				
DATE ISSUED <u>5/1/02</u> INSERT S <u>41</u>				
43 MM DD YY 48 CO SIGNATURE EXP. DATE				
NORTH GRID <u>542 000</u> EAST GRID <u>0697 000</u>				
50 55 57 63				
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X				
SOURCES OF DRILLING WATER				
1. <u>well</u>				
2.				
3.				
WRITE THE BOX NUMBER FROM THE MAP HERE				
E <u>690</u>				
N <u>540</u>				
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION				
SPECIAL CONDITIONS				
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.				

C1 9100		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE				THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.			
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)								COUNTY NUMBER 02-47			
ST/CO USE ONLY DATE RECEIVED MAR 3 2005		DATE WELL COMPLETED MM DD YY 5 10 02		Depth of Well 22 302 26 (TO NEAREST FOOT)				PERMIT NO. FROM "PERMIT TO DRILL WELL" FR 943017			
OWNER <u>MARNET ROBERT</u>		STREET OR RFD <u>2932 THURSTON RD</u>		TOWN <u>FREDERICK</u>							
SUBDIVISION <u>MARNET SUB</u>		SECTION		LOT <u>9</u>							
WELL LOG Not required for driven wells				GROUTING RECORD				C3			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING				WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N				PUMPING TEST			
DESCRIPTION (Use additional sheets if needed)				TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC				HOURS PUMPED (nearest hour) <u>3</u>			
FEET FROM TO				NO. OF BAGS <u>12</u> NO. OF POUNDS <u>1176</u>				PUMPING RATE (gal. per min.) <u>20</u>			
OVERBURDEN 0' 10'				GALLONS OF WATER <u>72</u>				METHOD USED TO MEASURE PUMPING RATE <u>Bucket</u>			
SOAPSTONE 10' 95' ✓				DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> TOP <u>52</u> ft. to <u>69</u> BOTTOM <u>58</u> ft. (enter 0 if from surface)				WATER LEVEL (distance from land surface)			
SOAPSTONE 95' 295' ✓				Casing types insert appropriate code below				BEFORE PUMPING <u>30</u> ft.			
SOAPSTONE 295' 106 PM				Casing RECORD ST CO STEEL CONCRETE				WHEN PUMPING <u>302</u> ft.			
SOAPSTONE 295' 302'				PL OT PLASTIC OTHER				TYPE OF PUMP USED (for test)			
6" casing extended 3' or 63' to 69'				MAIN CASING TYPE <u>ST</u> Nominal diameter top (main) casing (nearest inch) <u>6</u> Total depth of main casing (nearest foot) <u>69</u>				A P T air piston turbine			
				OTHER CASING (if used) diameter inch <u>63</u> depth (feet) from <u>63</u> to <u>69</u>				C R O centrifugal rotary other (describe below)			
				screen type or open hole (insert appropriate code below)				J S jet submersible			
				SCREEN RECORD ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER				PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES <u>NO</u>			
NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>				DEPTH (nearest ft.) <u>68</u> <u>302</u>				IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.			
WELL HYDROFRACTURED Y N				C2 <u>140</u> <u>68</u> <u>302</u>				TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 <u>29</u>			
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				E A C H S R E E N 1 8 9 11 15 17 21 2 23 24 26 30 32 36 3 38 39 41 45 47 51 SLOT SIZE 1 2 3				CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35			
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.				DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to				PUMP HORSE POWER 37 41			
DRILLERS LIC. NO. <u>M SD 095</u> <u>Austin Lane</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)				GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <u>68</u>				PUMP COLUMN LENGTH (nearest ft.) 43 47			
LIC. NO. <u>MSD 095</u> <u>Austin Lane</u>				MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q				CASING HEIGHT (circle appropriate box and enter casing height) + above <u>49</u> - below <u>49</u> LAND SURFACE (nearest foot)			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)				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)			

C 1 02030		SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE RECEIVED MM DD YY JUN 12 2002		DATE WELL COMPLETED MM DD YY 5 10 02		COUNTY NUMBER 02-47
ST/CO-USE ONLY		DATE RECEIVED		DEPTH OF WELL 22 302 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3012
OWNER MARMET ROBERT		STREET OR RFD 2932 HURSTON RD		TOWN FREDERICK		
SUBDIVISION MARMET SUB		SECTION		LOT 7		

WELL LOG Not required for driven wells			GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) yes <input checked="" type="checkbox"/> no <input type="checkbox"/> TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 12 NO. OF POUNDS 1776 GALLONS OF WATER 72 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 63 ft. (enter 0 if from surface)			C 3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 20 METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 30 ft. WHEN PUMPING 302 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 63 EACH CASING			PUMP INSTALLED DRILLER INSTALLED PUMP YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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 49 - below 49 LAND SURFACE 3 (nearest foot)		
DESCRIPTION (Use additional sheets if needed)			OTHER CASING (if used) diameter inch depth (feet) from to			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)		
NUMBER OF UNSUCCESSFUL WELLS: 0			C 2 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100			TELESCOPE CASING LOG INDICATOR OTHER DATA		
WELL HYDROFRACTURED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER			MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q		
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.			SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		
DRILLERS LIC. NO. 1 M S D 095 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 M S D 095			GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68			TELESCOPE CASING LOG INDICATOR OTHER DATA		

B 1 4542 <small>1 2 3 4 5 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <u>FR-94-3303</u> <small>70 fill in this form completely 79</small>
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Date Received (APA)

6 12 02
8 MM DD YY 13

OWNER INFORMATION

15 Last Name Kirkegaard, Owner First Name Leslie
 36 11297 Windsor Court Street or RFD 55
 57 Ijamsville, MD 21754 Town State Zip

DRILLER INFORMATION

Driller's Name Robert L. Cline M WD 139
 Firm Name Cline & Duvall, Inc.
 Address 8093 Hillmark Court, Frederick, MD 21704
 Signature Robert L. Cline Date 6/12/02

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) 10
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 9000

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 22 ☒ INDUSTRIAL, COMMERCIAL, DEWATERING
☐ PUBLIC WATER SUPPLY WELL
☐ TEST, OBSERVATION, MONITORING
☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 250 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

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

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
 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
☐ THIS WELL WILL DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

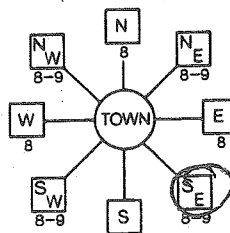
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER

FR 2001G020

PERMIT No. FR-94-3303

B 3 LOCATION OF WELL
 8 COUNTY Frederick
 23 SUBDIVISION Knowledge Farms
 SECTION 44 LOT 46
 52 NEAREST TOWN Urbana
 MILES FROM TOWN (enter 0 if in town) .50

B 4
 1 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 11 NEAR WHAT ROAD Urbana Pike
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 34 750 37
 DISTANCE FROM ROAD 75
 ENTER FT OR MI
 TAX MAP: 96 BLK: _____ PARCEL 50

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

FREDERICK 02-258
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED 9-27-02 David Matell 3-30-03
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH GRID 541 0 0 0 EAST GRID 0705 0 0 0
 50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

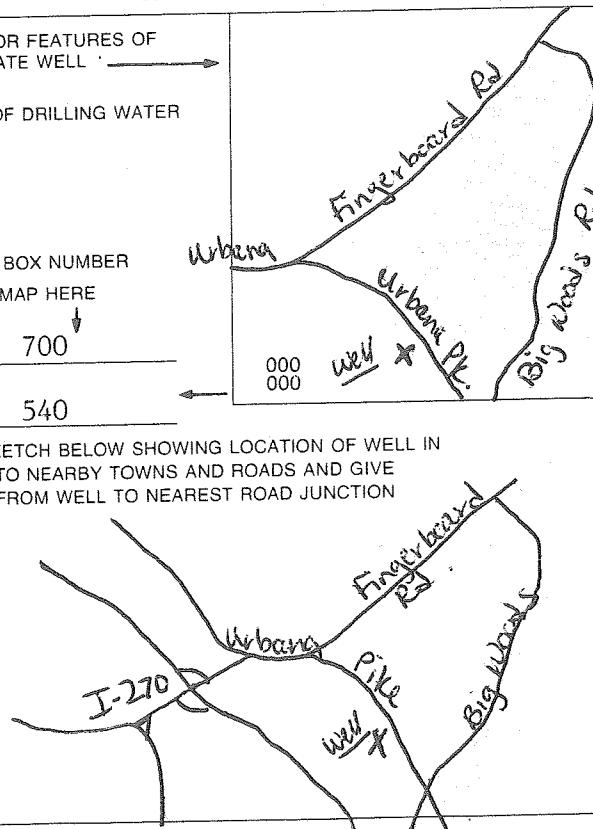
SOURCES OF DRILLING WATER

1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 700
 N 540

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



C1 8604		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.			
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						COUNTY NUMBER 02-258			
ST/CO USE ONLY DATE Received MM DD YY APR 03 2003		DATE WELL COMPLETED MM DD YY 03 31 03		Depth of Well 22 300 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" PR-94-3303 28 29 30 31 32 33 34 35 36 37			
OWNER last name first name KIRKE GAARD LESLIE		STREET OR RFD 1297 WINDSOR COURT		TOWN JANESVILLE MD 21254		LOT			
SUBDIVISION KNOWLEDGE FARMS SECTION									
WELL LOG Not required for driven wells		GROUTING RECORD							
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		WELL HAS BEEN GROUTED (Circle Appropriate Box) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N							
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		check if water bearing		TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> CM BENTONITE CLAY <input type="checkbox"/> BC			
BROWN SHALE 0 32 BLUE SLATE 32 300 ✓						NO. OF BAGS 11 NO. OF POUNDS 1034			
						GALLONS OF WATER 66			
						DEPTH OF GROUT SEAL (to nearest foot)			
						from 48 TOP 52 ft. to 54 BOTTOM 58 ft. (enter 0 if from surface)			
WATER AT 70-118						CASING RECORD			
						casing types insert appropriate code below			
						MAIN CASING TYPE <input checked="" type="checkbox"/> ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 40			
						OTHER CASING (if used) diameter inch depth (feet) from to			
NUMBER OF UNSUCCESSFUL WELLS: 0						SCREEN RECORD			
						screen type or open hole (insert appropriate code below)			
						SLOT SIZE 1 2 3			
						DIAMETER OF SCREEN (NEAREST INCH) 56 60			
WELL HYDROFRACTURED <input checked="" type="checkbox"/> Y <input type="checkbox"/> N						DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100			
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						PUMPING TEST HOURS PUMPED (nearest hour) 1 PUMPING RATE (gal. per min.) 12 METHOD USED TO MEASURE PUMPING RATE TIME WATER LEVEL (distance from land surface) BEFORE PUMPING 16 ft. WHEN PUMPING 300 ft. TYPE OF PUMP USED (for test) <input checked="" type="checkbox"/> A air <input type="checkbox"/> P piston <input type="checkbox"/> T turbine <input type="checkbox"/> C centrifugal <input type="checkbox"/> R rotary <input type="checkbox"/> O other (describe below) <input type="checkbox"/> J jet <input type="checkbox"/> S submersible			
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.						PUMP INSTALLED DRILLER INSTALLED PUMP YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (CIRCLE) (YES OR NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 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) <input checked="" type="checkbox"/> + above } LAND SURFACE <input type="checkbox"/> - below } 1 (nearest foot) 50 51			
DRILLERS LIC. NO. 1 MW D 139 Robert Cline DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MW D 536 Robert Cline						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) MD RT 80 well 360 950 MD RT 355			
DRILLERS LIC. NO. 1 MW D 139 Robert Cline DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MW D 536 Robert Cline						GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72			

B 1 6249 <small>1 2 3 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-3346 <small>70 fill in this form completely 79</small>
---	--------------------------------	--	---

Date Received (APA)

11/12/02
8 MM DD YY 13

OWNER INFORMATION

Mountain View Community Church
 15 ~~676~~ TMC Owner First Name 34
 53 E. Patrick Street
 36 Street or RFD 55
 Frederick, MD 21701
 57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Robert L. Cline M W D 139
 Driller's Name 76 License No. 81
 Cline & Duvall, Inc.
 Firm Name
 8093 Hillmark Ct., Frederick, MD 21704
 Address
 Robert L. Cline 11/7/02
 Signature Date

B 2 WELL INFORMATION 5
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
 AVERAGE DAILY QUANTITY NEEDED 300
 (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- 22 ☒ INDUSTRIAL, COMMERCIAL, DEWATERING
☐ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
☐ PUBLIC WATER SUPPLY WELL
☐ TEST, OBSERVATION, MONITORING
☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 250 FEET
24 28APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
 37 CABLE REVERSE-ROTary DRIVE-POINT
 other

REPLACEMENT OR DEEPEMED WELLS
(CIRCLE APPROPRIATE BOX)

- 39 ☒ 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
☐ THIS WELL WILL DEEPEMED AN EXISTING WELL

 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED
 (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER

FR 20 02 G 0 3 2

 PERMIT No. FR-94-3346
70 71 72 73 74 75 76 77 78 79

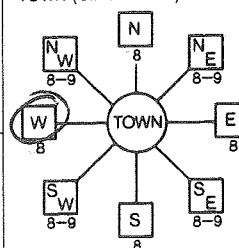
SPECIAL CONDITIONS

CHANGING STATUS FROM TEST TO ADAPTATION

LOCATION OF WELL

B 3 Frederick
 8 COUNTY 21
 23 SUBDIVISION 42
 SECTION 44 46 LOT 48 50
 Urbana
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) 1
73 76 77 78

B 4
 1 2
 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Fingerboard Road
 11 NEAR WHAT ROAD 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST EAST
 SOUTH
 34 40 37
 DISTANCE FROM ROAD ft.
 ENTER FT OR MI 38 39
 TAX MAP: 96 BLK: PARCEL 7

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

FREDERICK 02-449
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE INSERT S 41
 DATE ISSUED 11/12/02 David Matell 5-31-03
43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH 545 0 0 0 EAST GRID 0695 0 0 0
50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well
-
-

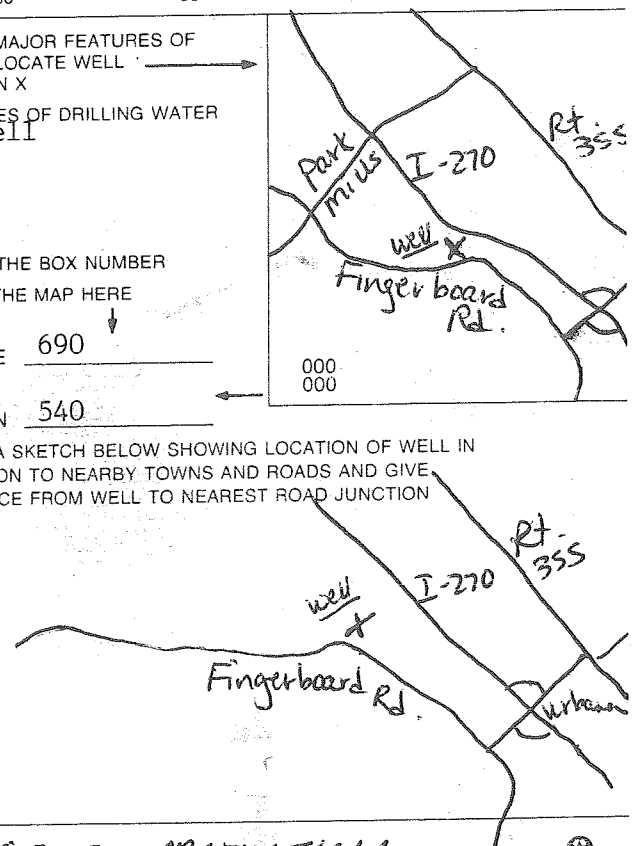
 WRITE THE BOX NUMBER
 FROM THE MAP HERE

E 690

N 540

 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



C118037

SEQUENCE NO.
(MDE USE ONLY)

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

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

1236
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COUNTY
NUMBER
02-449

ST/CO USE ONLY
DATE Received
MM DD YY
8 NOV 26 2002

DATE WELL COMPLETED
MM DD YY
11 4 02

Depth of Well
22 125 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
FR-94-3346

OWNER MOUNTAIN VIEW COMMUNITY CHURCH

STREET OR RFD 53 E. PATRICK ST TOWN FREDERICK MD 21701

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		check if water bearing
	FROM	TO	
BROWN SHALE	0	52	
BLUE SLATE	52	125	✓

WATER AT
99-117

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box) ☒ Y ☐ N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 28 NO. OF POUNDS 262

GALLONS OF WATER 168

DEPTH OF GROUT SEAL (to nearest foot)
from 0 TOP 52 ft. to 59 BOTTOM 58 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 5T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 60

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

screen type or open hole
(insert appropriate code below)

☒ ST STEEL ☐ BR BRASS ☐ HO OPEN HOLE
☐ PL PLASTIC ☐ OT OTHER

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 1

PUMPING RATE (gal. per min.) 30

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL (distance from land surface)

BEFORE PUMPING 52 ft.

WHEN PUMPING 125 ft.

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 INSTALLED PUMP YES ☒ NO ☐

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O) 29

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)

☒ 49 above } LAND SURFACE
☐ below } (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED ☒ Y ☐ N

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

C2

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	-----

SLOT SIZE 1 2 3

DIAMETER OF SCREEN 56 (NEAREST INCH) 60

from to

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, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. 1 MW D 139

Robert Cline

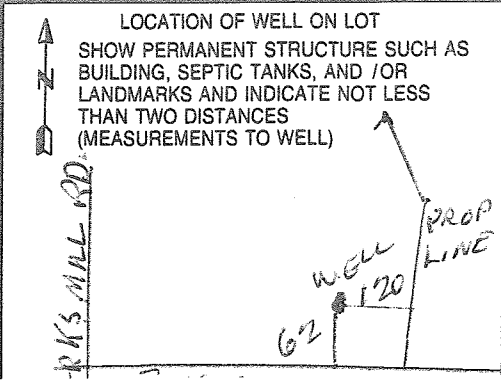
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MW D 536

Robert Cline Jr

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

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q



B 1 6239

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

STATE PERMIT NUMBER

FR - 94 - 3406
fill in this form completely

Date Received (APA)

11 25 02
8 MM DD YY 13

OWNER INFORMATION

Purcell, Jim
15 Last Name Owner First Name 343409-A Urbana Pike
36 Street or RFD 55Frederick, MD 21704
57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Robert L. Cline M W D 139
Driller's Name 76 License No. 81Cline & Duvall, Inc.
Firm Name8093 Hillmark Ct., Frederick, MD 21704
AddressRobert L. Cline 10/3/02
Signature DateB 2 WELL INFORMATION
1 2 APPROX. PUMPING RATE 5
(GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED 300
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- 22 ☐ INDUSTRIAL, COMMERCIAL, DEWATERING
- ☐ PUBLIC WATER SUPPLY WELL
- ☐ TEST, OBSERVATION, MONITORING
- ☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 250
24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
- 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
- 37 CABLE REVERSE-ROTARY DRIVE-POINT
- other

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
- 39 ☒ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- ☐ THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED
(IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G

PERMIT No. FR - 94 - 3406
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

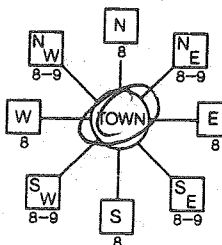
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.

B 3 Frederick LOCATION OF WELL

8 COUNTY 21

23 SUBDIVISION 42

SECTION 44 46 LOT 48 50

Urbana
52 NEAREST TOWN 71MILES FROM TOWN (enter 0 if in town) 0
73 76 77 78B 4
1 2
DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)Urbana Pike
11 NEAR WHAT ROAD 30ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)34 200 37
DISTANCE FROM ROAD ft.

ENTER FT OR MI 38 39

TAX MAP: 96 BLK: PARCEL 36

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVALFREDERICK 01-338
COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 11-25-02 5-31-03
43 MM DD YY 48 CO SIGNATURE EXP. DATENORTH GRID 544 000 EAST GRID 0700 000
50 55 57 63SHOW MAJOR FEATURES OF
BOX & LOCATE WELL
WITH AN X

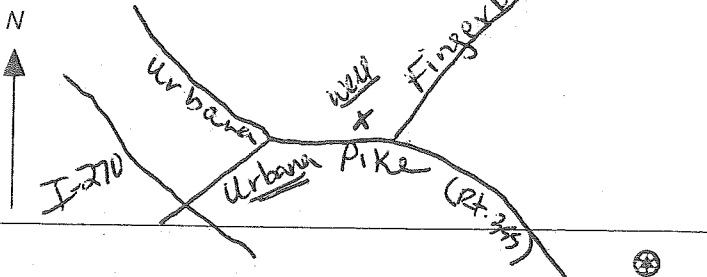
SOURCES OF DRILLING WATER

1. well
- 2.
- 3.

WRITE THE BOX NUMBER
FROM THE MAP HERE

E 700

N 540

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 5119

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

FR - 94 - 3553

fill in this form completely

please type

Date Received (APA)

04 16 03

OWNER INFORMATION

8 MM DD YY 13

Coffey, Jr James

9361 Fingerboard Rd

Farmsville Md 21754

DRILLER INFORMATION

Joseph E. Mayne MS DO 24

Joseph E. Mayne Well Drilling

5512 Ridge Rd. Mt Airy Md. 21771

Joseph E. Mayne 4/16/03

B 2 WELL INFORMATION

APPROX. PUMPING RATE 5

AVERAGE DAILY QUANTITY NEEDED 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- ☐ INDUSTRIAL, COMMERCIAL, DEWATERING
- ☐ PUBLIC WATER SUPPLY WELL
- ☐ TEST, OBSERVATION, MONITORING
- ☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 260 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
- other

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- ☐ THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G

PERMIT No. FR - 94 - 3553

SPECIAL CONDITIONS

B 3 LOCATION OF WELL

8 COUNTY Frederick 21

23 SUBDIVISION 42

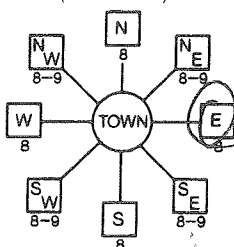
SECTION 44 46 LOT 3 48 50

52 NEAREST TOWN Urbana 71

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

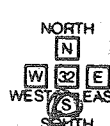
B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Fingerboard Rd. 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 192 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 FT

TAX MAP: 96 BLK: PARCEL 3721

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Frederick 03-28

COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 04 16 03 10-31-03

43 MM DD YY 48 EXP. DATE 57 546 000 55 EAST GRID 57 0705 000 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

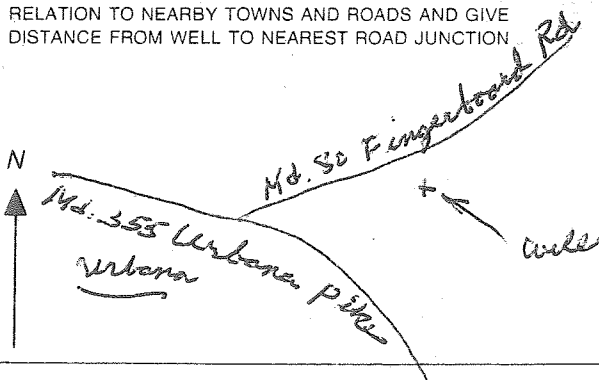
- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

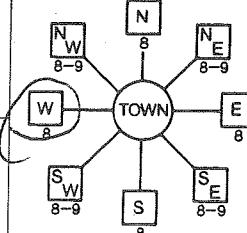
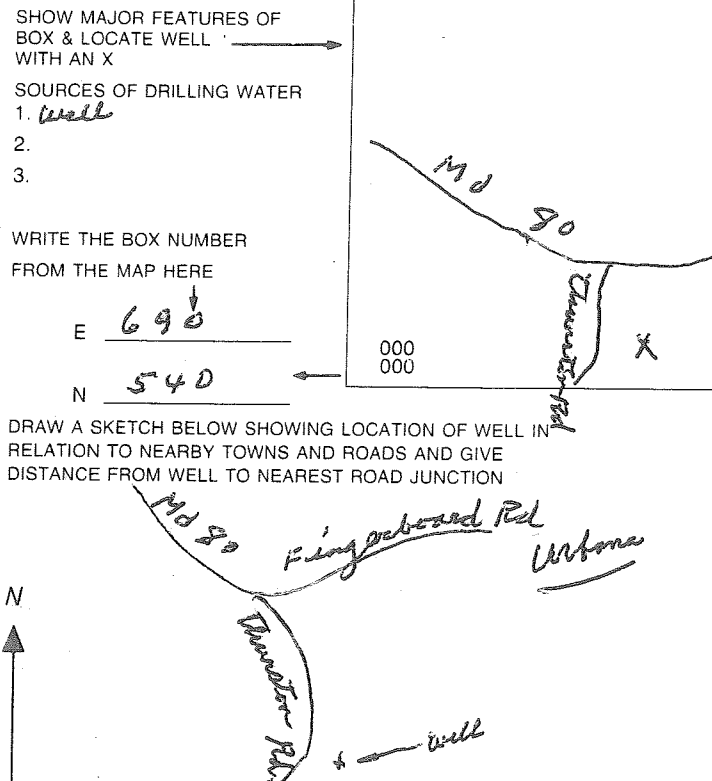
E 700

N 540

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



C1 3420		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE RECEIVED APR 23 2003		DATE WELL COMPLETED MM 4 DD 17 YY 03		Depth of Well 22 180' 26 (TO NEAREST FOOT)	
ST/CO USE ONLY		DATE RECEIVED		DATE WELL COMPLETED		PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3553	
OWNER Coffey Jr. T. James		STREET OR RFD 9361 Fingerboard Rd		TOWN Towansville		LOT 3	
SUBDIVISION		SECTION		LOT			
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) yes <input checked="" type="checkbox"/> no <input type="checkbox"/> TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 9 NO. OF POUNDS 876 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 22 ft. (enter 0 if from surface)		C3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 40 ft. WHEN PUMPING 110 ft. TYPE OF PUMP USED (for test) <input checked="" type="checkbox"/> air <input type="checkbox"/> piston <input type="checkbox"/> turbine <input type="checkbox"/> centrifugal <input type="checkbox"/> rotary <input type="checkbox"/> other (describe below) <input type="checkbox"/> jet <input type="checkbox"/> submersible			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER MAIN CASING TYPE S7 6 25 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)		PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A.C.J.P.R.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 2 (nearest foot)			
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		check if water bearing			
Brown Shale 0 21							
Blue Rock 21 180							
NUMBER OF UNSUCCESSFUL WELLS: 0		C2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100					
WELL HYDROFRACTURED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.							
DRILLERS LIC. NO. 1 MSD024							
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)							
LIC. NO. 1 M D							
SUPERVISOR (sign. of driller or journeyman for sitework if different from permittee)							
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68							
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q							
70 72 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 <u>2277</u> <small>1 2 3 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <u>FR-94-3975</u> <small>70 fill in this form completely 79</small>
Date Received (APA) <u>11504</u> <small>8 MM DD YY 13</small> OWNER INFORMATION <u>Urbana Interchange Partners</u> <small>15 Last Name Owner First Name 34</small> <u>P.O. Box 59830</u> <small>36 Street or RFD 55</small> <u>Potomac Md 20859-9830</u> <small>57 Town 70 State 72 Zip 76</small>		B 3 <u>Frederick</u> LOCATION OF WELL <small>8 COUNTY 21</small> 23 SUBDIVISION 42 SECTION <u>44</u> <small>44 46</small> LOT <u>48</u> <small>48 50</small> <u>well # 2</u> <u>Urbana</u> <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) <u>1</u> <small>73 M I 76 77 78</small>	
DRILLER INFORMATION <u>Joseph L. Mayne</u> <small>76 Driller's Name 81</small> <u>MSD024</u> <small>License No.</small> <u>Joseph L. Mayne</u> <small>76 Driller's Name 81</small> <u>well drilling</u> <u>5512 Ridge Rd Mt Airy Md. 21771</u> <small>Address</small> <u>Joseph L. Mayne</u> <small>76 Signature 81</small> <u>1/14/04</u> <small>Date</small>		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 <u>Thurston Rd</u> <small>30</small> NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input checked="" type="checkbox"/> SOUTH <input type="checkbox"/> EAST <input type="checkbox"/> 34 <u>210</u> 37 <u>141</u> DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: <u>96</u> BLK: <u> </u> PARCEL <u>232</u>	
B 2 WELL INFORMATION <small>1 2</small> APPROX. PUMPING RATE <u>4</u> <small>(GAL. PER MIN.) 8 12</small> AVERAGE DAILY QUANTITY NEEDED <u>500</u> <small>(GAL. PER DAY) 14 20</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>FREDERICK</u> <u>3-329</u> COUNTY NAME COUNTY NO. STATE SIGNATURE <u> </u> INSERT S <u> </u> 41 DATE ISSUED <u>11904</u> <u>David M. Hall</u> <u>7-31-04</u> <small>43 MM DD YY 48</small> CO SIGNATURE EXP. DATE NORTH GRID <u>542</u> <u>000</u> EAST GRID <u>0698</u> <u>000</u> <small>50 55 57 63</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input checked="" type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> 2. <u> </u> 3. <u> </u> WRITE THE BOX NUMBER FROM THE MAP HERE E <u>690</u> N <u>540</u> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <u>280</u> FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL <u>6</u> INCH METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR-ROTARY</u> JETTED <u> </u> Jetted & DRIVEN <u> </u> <small>30</small> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) <small>37</small> CABLE REVERSE-ROTARY DRIVE-POINT other <u> </u>		REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 <u> </u> 52	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)			
APPROP. PERMIT NUMBER <u>FR 2002G0100</u> PERMIT No. <u>FR-94-3975</u> <small>70 71 72 73 74 75 76 77 78 79</small>			

C1	3429	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER 03-329		

ST/CO USE ONLY DATE RECEIVED JAN 27 2004	DATE WELL COMPLETED MM 1 DD 22 YY 04	Depth of Well 22 300 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3975
--	---	---	---

OWNER <u>Urban Interchange Partners - Greenbriar Kennels</u>	STREET OR RFD <u>P.O. Box 59830</u>	TOWN <u>Potomac Md 20859-9830</u>
SUBDIVISION	SECTION	LOT <u>Well 2</u>

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	
Brown Shale	0	57	
Blue Rock	57	300	✓

GROUTING RECORD
WELL HAS BEEN GROUTED
(Circle Appropriate Box) ☒ Y ☐ N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT ☒ CM BENTONITE CLAY ☐ BC
NO. OF BAGS 20 NO. OF POUNDS 1880
GALLONS OF WATER 120
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 55 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 St
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 60

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

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

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED ☐ Y ☒ N

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. MSD024
DRILLER'S SIGNATURE Joseph R. Mayne
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M D

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

DEPTH (nearest ft.)
160 59 300
EACH CASING diameter depth (feet)
inch from to
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
70 72 74 75 76
TELESCOPE LOG

C3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 10
METHOD USED TO MEASURE PUMPING RATE bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 45 ft.
WHEN PUMPING 240 ft.
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 INSTALLED PUMP (CIRCLE) (YES or NO) YES ☐ NO ☒
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29
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 49
☐ - below 1 (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)

See attached
Well location

Driller Mayer Mail permit to - Driller _____ Applicant / County Well Permit No. 03-32

FREDERICK COUNTY HEALTH DEPARTMENT WELL PERMIT

FR-94-397

Applicant or Owner Urena Intadange Partners, LLC Phone No. 301 980-8436Mailing Address P.O. Box 59830, Potomac MD 20859-9830Street Address of Property Intersection, MD Route 80 and Thurston RoadSubdivision _____ Section or Block M 2312 Lot _____Acreage or square feet + 28 ACES Tax Map 96 Parcel 232Type of water supply now: NONEWell to furnish water to: Home _____ Farm _____ Public or Private water Co. _____ Industrial Commercial ☒ Test Well _____ Heat Pump _____

This application is made with the understanding that the well will be drilled only at the place designated by the Health Department and a shown in the sketch below. A completion certificate of this well must be filed by the driller, at the Health Department, within forty-five (45) days after completion of drilling. All drilling operations will be carried out in accordance with regulations of the Maryland Department of the Environment. Drilling at any other location, other than shown on sketch, VOIDS this approval certificate.

Signature of Applicant

9/15/03

Date

Owner / Contractor _____ Well Driller _____ Agent _____

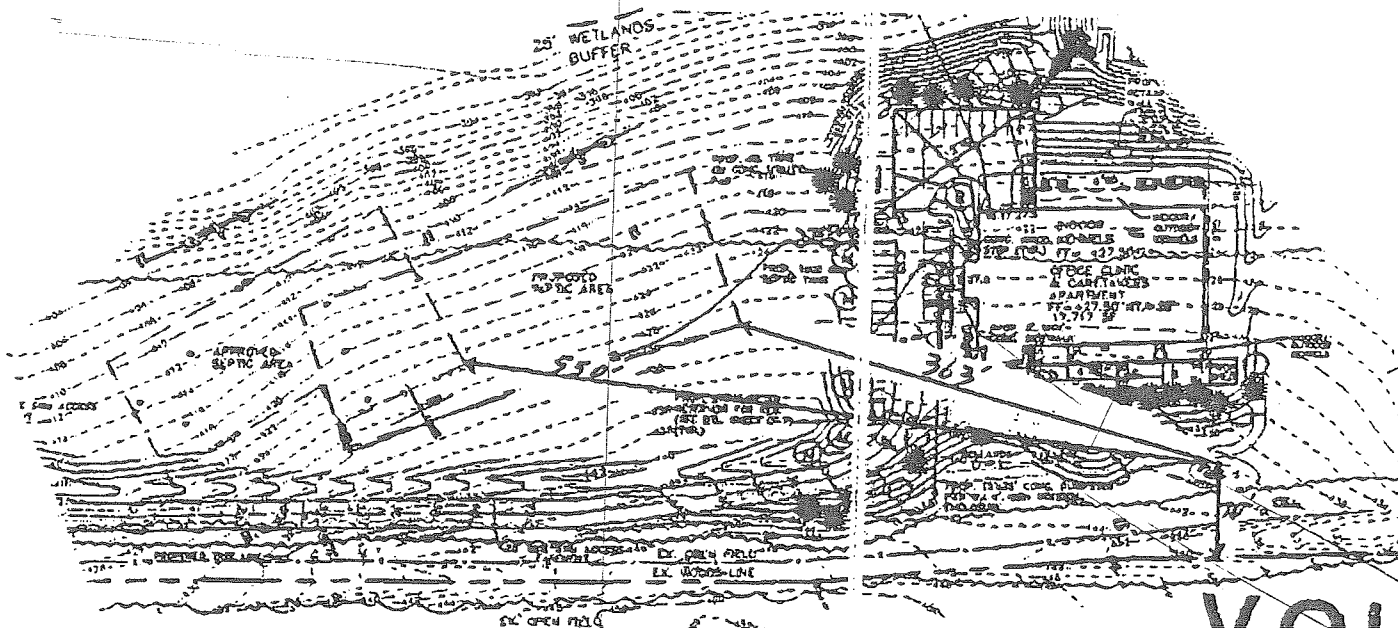
TO BE COMPLETED BY HEALTH DEPARTMENT

North Grid 542 East Grid 0698

WELL # 2

TAKEN FROM SURVEYORS PLAT

N

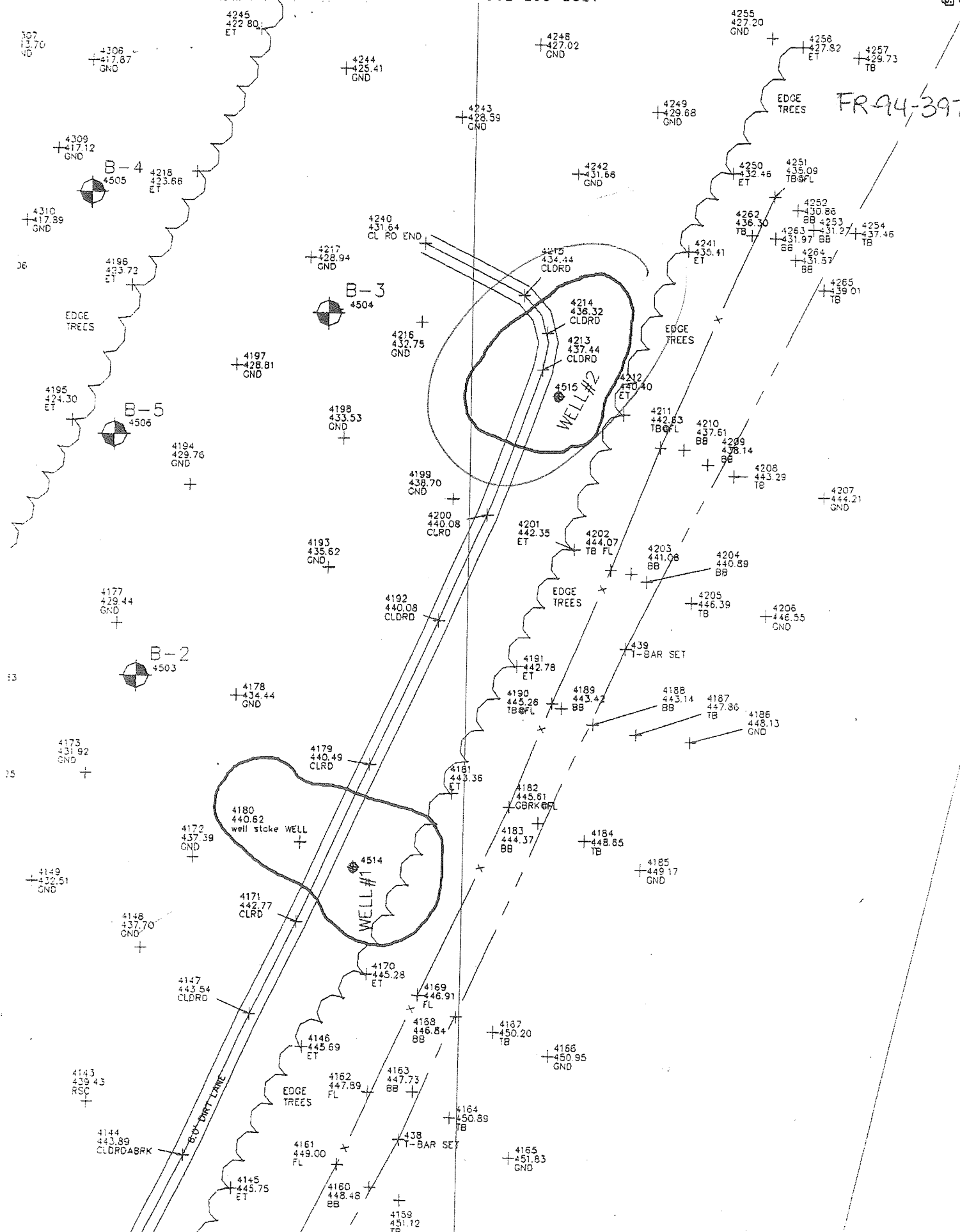
VOI
AFTER THIS DATE

4-30-04

The property described above has been inspected and the well site approved as shown.

Date of Approval 10-8-03Sanitarian Daniel M. Hall

301 299 1317



B 1 1 2 3 6 2276	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-3976 <small>fill in this form completely</small>
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OWNER INFORMATION Date Received (APA) 1/15/04 8 MM DD YY 13 Urbana Interchange Partnership 15 Last Name Owner First Name 34 P.O. Box 59830 36 Street or RFD 55 Potomac md 20859-9830 57 Town 70 State 72 Zip 76	LOCATION OF WELL B 3 Frederick 8 COUNTY 21 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 well #1 Urbana 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78
--	---

DRILLER INFORMATION Joseph L. Mayne MS D 024 76 License No. 81 Joseph L. Mayne well Drilling Form Name 5512 Ridge Rd. Mt Airy, Md 21771 Address Joseph L. Mayne 1/14/04 Signature Date	WELL INFORMATION B 2 1 2 APPROX. PUMPING RATE 4 (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY) 14 20
--	--

USE FOR WATER (CIRCLE APPROPRIATE BOX) 22 <input type="checkbox"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input checked="" type="checkbox"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> P PUBLIC WATER SUPPLY WELL <input type="checkbox"/> T TEST, OBSERVATION, MONITORING <input type="checkbox"/> G GEO-THERMAL	NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL FREDERICK 3-730 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S → 41 DATE ISSUED 1/15/04 Am. State 7-31-04 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 542 000 EAST GRID 0698 000 50 55 57 63
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APPROXIMATE DEPTH OF WELL 280 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 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 698 N 540 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
--	---

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) 39 <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52	Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER FR2002G02001 PERMIT No. FR-94-3976 70 71 72 73 74 75 76 77 78 79
--	--

SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</small>
--

C1	3428	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
ST/CO USE ONLY DATE Received JAN 27 2004		DATE WELL COMPLETED MM DD YY 1 22 04	Depth of Well 22 115 26 (TO NEAREST FOOT)	COUNTY NUMBER 03-330
PERMIT NO. FROM "PERMIT TO DRILL WELL" FR-94-3976				

OWNER Urbana Int'l Partnership - Greenbriar Kennels	STREET OR RFD p.o. Box 59830	TOWN Potomac md 20859-9830
SUBDIVISION	SECTION	LOT Well 1

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
Brown Shale	0 100	✓
Blue Rock	100 115	✓

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N	
TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC	
NO. OF BAGS 22 NO. OF POUNDS 2068	
GALLONS OF WATER 132	
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 86 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 ST	Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 105
OTHER CASING (if used) diameter depth (feet) inch from to	
SCREEN RECORD	
screen type or open hole (insert appropriate code below)	ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

C3	PUMPING TEST	
HOURS PUMPED (nearest hour) 3		
PUMPING RATE (gal. per min.) 15		
METHOD USED TO MEASURE PUMPING RATE Bucket		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING 30 ft.		
WHEN PUMPING 55 ft.		
TYPE OF PUMP USED (for test)		
A air	P piston	T turbine
C centrifugal	R rotary	O other (describe below)
J jet	S submersible	

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED Y N
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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.
DRILLERS LIC. NO. MSD024 Joseph E. Mayne DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. M D
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C2	DEPTH (nearest ft.)
1 HO 103 115	
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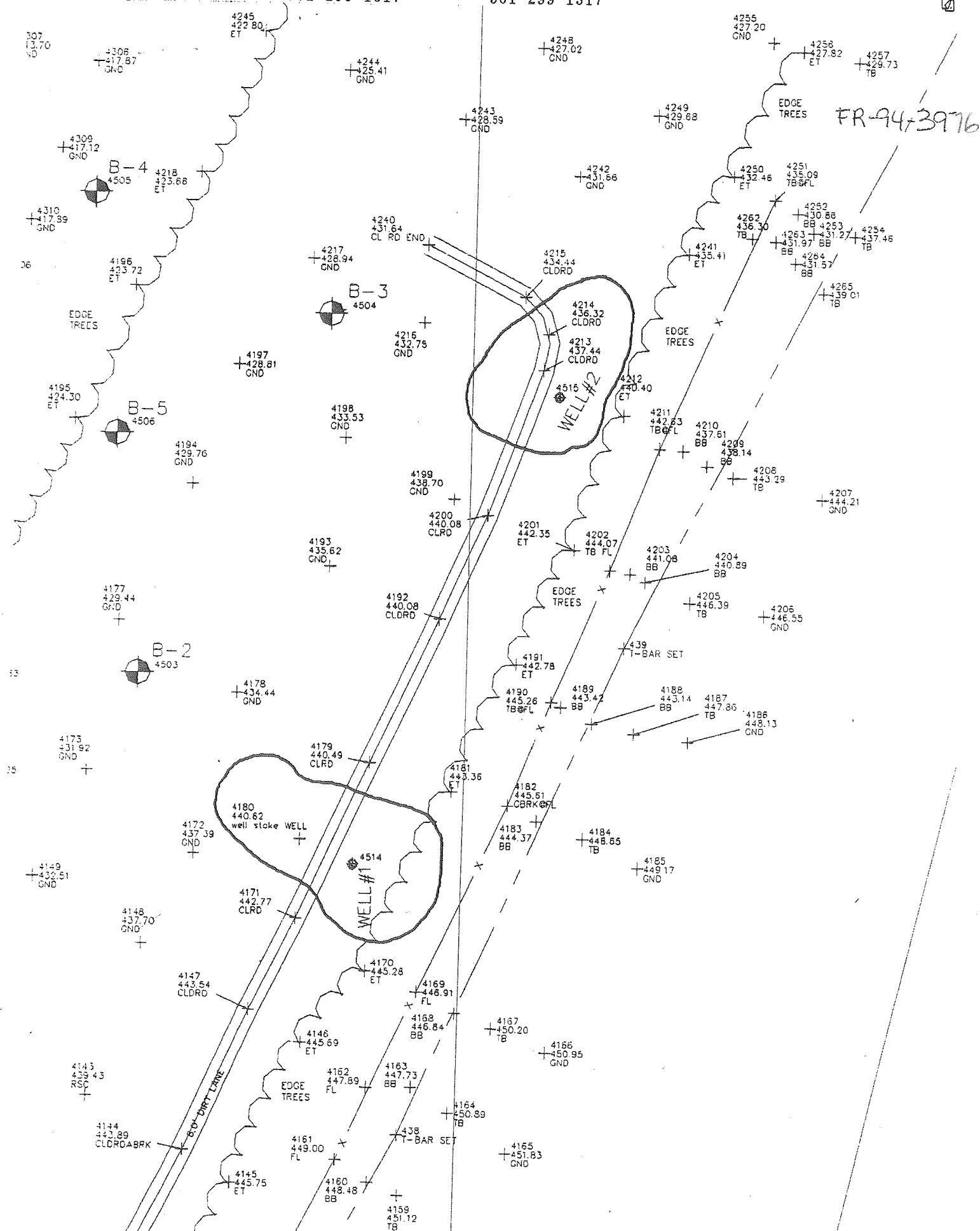
PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) NO	
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.	
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35	
PUMP HORSE POWER 37 41	
PUMP COLUMN LENGTH (nearest ft.) 43 47	
CASING HEIGHT (circle appropriate box and enter casing height)	
+ above	LAND SURFACE
- below	2 (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)	
See attached well location	

☒ (

P. 02

The property described above has been inspected and the well site approved as show

301 299 1317



B 1	5530	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-4734 <small>fill in this form completely</small>
1 2 3 6				
Date Received (APA) 6-30-05 <small>8 MM DD YY 13</small>		OWNER INFORMATION		
15 Last Name Exxon Mobil Corporation		34 First Name		
36 Street or RFD 8816 Fingerboard Rd.		55		
57 Town Frederick		70 State MD	72 Zip 21704	
DRILLER INFORMATION				
Driller's Name Robert Tingley		76 License No. MG D026		
Firm Name Certified Environmental Drilling				
Address PO Box 6538, Charlottesville, Va 22906				
Signature Robert E. Tingley		Date		
B 2	WELL INFORMATION			
1 2	APPROX. PUMPING RATE (GAL. PER MIN.)			
		8		12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		14		
		20		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL		FEET		
24		28		
APPROXIMATE DIAMETER OF WELL		NEAREST INCH		
30		2		
METHOD OF DRILLING (circle one)				
BORED (or Augered)		JETTED		Jettied & DRIVEN
<input checked="" type="checkbox"/> AIR-ROTARY		<input type="checkbox"/> AIR-PERCussion		<input type="checkbox"/> ROTARY (Hydraulic Rotary)
<input type="checkbox"/> CABLE		<input type="checkbox"/> REVerse-ROTary		<input type="checkbox"/> DRive-POINT
other				
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)				
41		52		
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER				
PERMIT No. FR-94-4734				
SPECIAL CONDITIONS				

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.

B 3	LOCATION OF WELL			
8 COUNTY Frederick		21		
23 SUBDIVISION		42		
SECTION		LOT		
44 46		48 50		
52 NEAREST TOWN Frederick		71		
MILES FROM TOWN (enter 0 if in town)				
73		76 77 78		
B 4	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)			
NEAR WHAT ROAD Fingerboard Rd.				
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)				
<div style="display: flex; justify-content: space-between;"> <div> NORTH N WEST W SOUTH S EAST E </div> <div> 34 180 37 DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 96 BLK: 15 PARCEL 166 </div> <div> NORTH N WEST W SOUTH S EAST E </div> </div>				

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME **FREDERICK** COUNTY NO. **5-229**

STATE SIGNATURE _____ INSERT S →

DATE ISSUED **7-5-05** CO SIGNATURE **David Matrell** EXP. DATE **1-31-06**

NORTH GRID **544** EAST GRID **0699**

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- NONE**
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E **700000**

N **543000**

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

Church Rd

U.S.T.

Canopy

Fingerboard Rd

C1 8668 SEQUENCE NO. (DENV USE ONLY) 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

ST/CO USE ONLY DATE Received DATE WELL COMPLETED Depth of Well PERMIT NO. FROM "PERMIT TO DRILL WITHIN 45 DAYS" FR-94-4734 OWNER EXXON MOBIL CORP STREET OR RFD 8816 FINGERBOARD RD first name TOWN CIBANA 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

clay 0 6
sandy clay 6 9
sandy clay 9 21

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 12 NO. OF POUNDS 94 GALLONS OF WATER 7 DEPTH OF GROUT SEAL (to nearest foot) from 48 ft. to 58 ft. CASING RECORD ST CO PL OT MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD ST BR HO PL OT STEEL BRASS BRONZE PLASTIC OTHER screen type or open hole insert appropriate code below C2 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. DRILLERS IDENT. NO. MCA 026 DRILLERS SIGNATURE MUST MATCH SIGNATURE ON APPLICATION SITE SUPERVISOR (sign of driller or supervisor)

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land 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 (CIRCLE) (YES or 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) CHURCH

B 1 5531

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

STATE PERMIT NUMBER

FR-94-4735
fill in this form completely

Date Received (APA)

6-30-03
8 MM DD YY 13

OWNER INFORMATION

15 Last Name Exxon Mobil Corporation 34
 36 Street or RFD 8816 Fingerboard Rd 55
 57 Town Frederick 70 State MD 72 Zip 21704 76

DRILLER INFORMATION

Driller's Name Robert Tingley 76 License No. MGD026 81
 Firm Name Certified Environmental Drilling
 Address PO Box 6538, Charlotteville MD 22906
 Signature Robert E. Tingley Date

B 2 WELL INFORMATION
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) NA 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) NA 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

22

- ☐ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
☐ INDUSTRIAL, COMMERCIAL, DEWATERING
☐ PUBLIC WATER SUPPLY WELL
☒ TEST, OBSERVATION, MONITORING
☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 30 FEET
24 28APPROXIMATE DIAMETER OF WELL 2 INCH
NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTARY JETTED Jetted & DRIVEN
 30 AIR-ROTARY
 37 CABLE REVERSE-ROTARY DRIVE-POINT
 other

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
 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
☐ THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

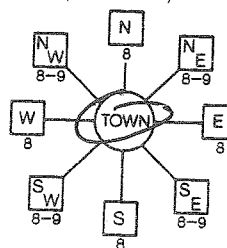
APPROX. PERMIT NUMBER GPERMIT No. FR-94-4735
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITY SHOULD USE SEPARATE SHEET IF NEEDED.

B 3 LOCATION OF WELL

8 COUNTY Frederick 21
 23 SUBDIVISION
 SECTION 44 46 LOT MW2 48 50
Frederick
 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 0 M I
73 76 77 78B 4
1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)11 Fingerboard Rd. 30
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 135 37
 DISTANCE FROM ROAD ENTER FT OR MI FT 38 39

TAX MAP: 96 BLK: 15 PARCEL 166NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

FREDERICK 5-229
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE INSERT S → 41
 DATE ISSUED 7-5-05 David Matull 1-31-06
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH GRID 544 0 0 0 EAST GRID 0699 0 0 0
 50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

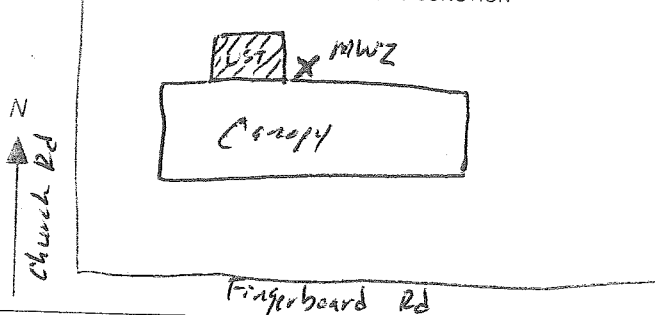
SOURCES OF DRILLING WATER

1.
 2. NONE
 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 700000N 543000

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



C1 8669 SEQUENCE NO. (DENV USE ONLY) 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

ST/CO USE ONLY DATE Received DATE WELL COMPLETED Depth of Well PERMIT NO. FROM "PERMIT TO DRILL WE FR-94-4235

OWNER EXXON MOBIL CORP STREET OR RFD last name 8816 FINGERBOARD RD first name TOWN CRBANA 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

Chy 0 20
sand Chy 20 30
sand Chy 30 35
sand Chy 35 45

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 3 NO. OF POUNDS 94 GALLONS OF WATER 21 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 20 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) PL 2 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 STEEL BRASS OPEN BRONZE HOLE PL OT PLASTIC OTHER

C2 DEPTH (nearest ft.) 25 45 SLOT SIZE 10 2 3 DIAMETER OF SCREEN 2 (NEAREST INCH) from 23 to 45

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.) W Q 70 72 74 75 76

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land 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 (CIRCLE) (YES or NO) YES 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) TANK FIELD MW 2 Canopy

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. DRILLER'S IDENT. NO. DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign of driller or owner)

B 1	5532	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FA-94-4736 <small>fill in this form completely</small>
1 2 3 6				
Date Received (APA) 6-30-05		OWNER INFORMATION		
8	MM	DD	YY	13
15	Last Name Exxon Mobil Corporation		Owner	First Name
36	Street or RFD 8816 Fingerboard Rd.		55	
57	Town Frederick		70	State
72	Zip 21704		76	
DRILLER INFORMATION				
Driller's Name Robert Tingley		License No. MG D 026		
Firm Name Certified Environmental Drilling				
Address PO Box 6538 Charlottesville Va 22906				
Signature Robert E. Tingley		Date		
B 2	WELL INFORMATION			
1 2	APPROX. PUMPING RATE (GAL. PER MIN.)			
8			12	
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)				
14			20	
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME FREDERICK		COUNTY NO. 5-229		
STATE SIGNATURE		INSERT S →		
DATE ISSUED 7-5-05		EXP. DATE 1-3-06		
CO SIGNATURE David Matull				
NORTH GRID 544		EAST GRID 0699		
50 55		57 63		
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)				
LOCATION OF WELL				
COUNTY Frederick				
SUBDIVISION				
SECTION 44 46				
LOT MW-3				
NEAREST TOWN Frederick				
MILES FROM TOWN (enter 0 if in town) 0				
NEAR WHAT ROAD Fingerboard Rd.				
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)				
DISTANCE FROM ROAD 35				
ENTER FT OR MI FT				
TAX MAP: 96 BLK: 15 PARCEL 166				
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X				
SOURCES OF DRILLING WATER				
1. NONE				
2.				
3.				
WRITE THE BOX NUMBER FROM THE MAP HERE				
E 700000				
N 543000				
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION				
METHOD OF DRILLING (circle one)				
<input checked="" type="checkbox"/> BORED (or Augered)				
<input type="checkbox"/> JETTED				
<input type="checkbox"/> Jettied & DRIVEN				
<input type="checkbox"/> AIR-PERCussion				
<input type="checkbox"/> ROTARY (Hydraulic Rotary)				
<input type="checkbox"/> CABLE				
<input type="checkbox"/> REverse-ROTary				
<input type="checkbox"/> Drive-POINT				
other				
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)				
41				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER				
PERMIT No. FA-94-4736				
70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS				

C1 8670	SEQUENCE NO. (DENV USE ONLY)	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER	

ST/CO USE ONLY DATE Received DEC 09 2005	DATE WELL COMPLETED 072105	Depth of Well 22 40 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WEI FR-94-4736
---	--------------------------------------	---	--

OWNER EXXON MOBIL CORP.	last name 8816 FINGERBOARD first name AD	TOWN CADIANA
STREET OR RFD		SECTION
SUBDIVISION		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
Ch	0 20	
Sand Ch	20 30	
Sand Ch	30 33	✓
Sand Ch	33 40	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT CM	BENTONITE CLAY BC
NO. OF BAGS 2	NO. OF POUNDS 44
GALLONS OF WATER 14	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 15 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	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
PL	2	20
60 61	63 64	66 67 68 69 70

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

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

C2	DEPTH (nearest ft.)
1 PL	20 40
8 9	11 15 17 21
2	
23 24	26 30 32 36
3	
38 39	41 45 47 51

SLOT SIZE 10 2 3
DIAMETER OF SCREEN 2 (NEAREST INCH)
56 60

GRAVEL PACK 18 40
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68
68

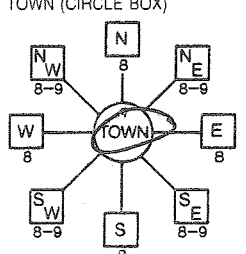
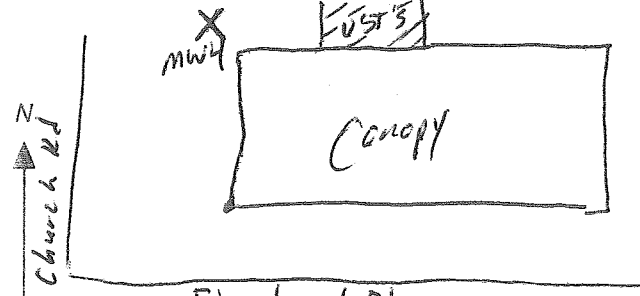
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T (E.R.O.S.)	W Q
70 72	74 75 76

C3	PUMPING TEST	
1 2	HOURS PUMPED (nearest hour)	
	8 9	
	11	
	PUMPING RATE (gal. per min. to nearest gal.)	
	METHOD USED TO MEASURE PUMPING RATE	
	WATER LEVEL (distance from land surface)	
	BEFORE PUMPING	
	17 20	
	22 25	
	WHEN PUMPING	
	TYPE OF PUMP USED (for test)	
A air	P piston	T turbine
27	27	27
C centrifugal	R rotary	O other (describe below)
27	27	27
J jet	S submersible	
27	27	

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)	
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)
49	50 51

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)	
CHERRY RD	
FRANK FIELD	
Caron	
MW3	

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, AND THAT THE INFORMATION PRE- SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	
DRILLERS IDENT NO. ME0026	
DRILLERS SIGNATURE	
(MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign. of driller or journeyman)	

B 1	5533	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER FR-94-4737 <small>fill in this form completely</small>
1 2 3 6				
Date Received (APA) 6-30-05 <small>8 MM DD YY 13</small>			B 3 LOCATION OF WELL Frederick <small>8 COUNTY 21</small>	
OWNER INFORMATION Exxon Mobil Corporation <small>15 Last Name Owner First Name 34</small> 8816 Fingerboard Rd. <small>36 Street or RFD 55</small> Frederick MD 21704 <small>57 Town 70 State 72 Zip 76</small>			23 SUBDIVISION <small>44 46</small> SECTION MW-4 <small>48 50</small> Frederick <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) 0 <small>73 76 77 78</small>	
DRILLER INFORMATION Robert Tingley <small>76 License No. 81</small> MGD 026 Certified Environmental Drilling <small>Firm Name</small> PO Box 6538, Charlottesville, VA 22906 <small>Address</small> Robert E. Tingley <small>Signature Date</small>			B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 Fingerboard Rd. 30 <small>NEAR WHAT ROAD</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <small>34 135' 37</small> DISTANCE FROM ROAD FT <small>ENTER FT OR MI 38 39</small> TAX MAP: 96 BLK: 15 PARCEL 166	
B 2 WELL INFORMATION <small>1 2</small> APPROX. PUMPING RATE NA <small>(GAL. PER MIN.) 8 12</small> AVERAGE DAILY QUANTITY NEEDED NA <small>(GAL. PER DAY) 14 20</small>			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL FREDERICK 5-229 <small>COUNTY NAME COUNTY NO.</small> STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED 7 5 05 Daniel Matfield 1-31-06 <small>43 MM DD YY 48 CO SIGNATURE EXP. DATE</small> NORTH GRID 544 0 0 0 EAST GRID 0699 0 0 0 <small>50 55 57 63</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL 30 FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL 2 INCH <small>NEAREST INCH</small>			SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. NONE 2. NONE 3. NONE WRITE THE BOX NUMBER FROM THE MAP HERE E 720000 N 543000 000 000	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> DRive-POINT <input type="checkbox"/> other _____			DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52				
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. FR-94-4737 <small>70 71 72 73 74 75 76 77 78 79</small>				
SPECIAL CONDITIONS <small>NOTE: APPROVING AUTHORITY SHOULD USE SEPARATE SHEET IF NEEDED.</small>				

1 2 3 4 5 6 (DENY USE ONLY)
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

COUNTY
NUMBER

ST/CO USE ONLY
DATE Received
DEC 09 2005

DATE WELL COMPLETED
072105

Depth of Well
22 40 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
FA-94-4737

OWNER EXXON MOBIL CORP.
STREET OR RFD 8816 FINGERBOARD RD last name first name TOWN GRABANA
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
Chy	0	20
Sand Chy	20	30
Sand Chy	30	33
Sand Chy	33	40

GROUTING RECORD
WELL HAS BEEN GROUTED ☒ YES ☐ NO
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL
CEMENT ☒ BENTONITE CLAY ☐
NO. OF BAGS 2 NO. OF POUNDS 94
GALLONS OF WATER 14
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 15 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
Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
PL 2 20
60 61 63 64 66 70

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

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

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
C2
1 PL 20 40
2
3
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SLOT SIZE 10 2 3
DIAMETER OF SCREEN 2 (NEAREST INCH)
56 60

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 146026
DRILLERS SIGNATURE Robert E. [Signature]
(MUST MATCH SIGNATURE ON APPLICATION)

GRAVEL PACK 18 to 40
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.) W Q
70 72 74 75 76
TELESCOPE LOG OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 8 9
PUMPING RATE (gal. per min. to nearest gal.) 11 15
METHOD USED TO MEASURE PUMPING RATE _____
WATER LEVEL (distance from land surface)
BEFORE PUMPING 17 20
WHEN PUMPING 22 25
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
(CIRCLE) (YES or 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) 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)
49 50 51

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)
TAMIL FIELD
Mw 4
Cmopy
CHURCH RD



ATTACHMENT 2

Photo Log

Attachment 2 – Photo Log
3318 Fingerboard Road, Frederick, MD
Inactive Wells



Disconnected supply well power
8995A Urbana Church Road



Inactive/disconnected supply well –
8995B Urbana Church Road



ATTACHMENT 3

Analytical Laboratory Reports



ANALYSIS REPORT

Prepared by:

Eurofins Lancaster Laboratories Environmental
2425 New Holland Pike
Lancaster, PA 17601

Prepared for:

Kleinfelder
550 West C Street, Suite 1200
San Diego CA 92101

Report Date: March 11, 2019 10:37

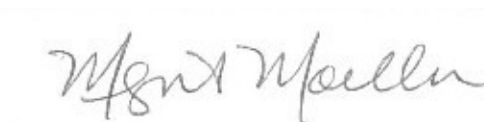
Project: Southside Oil 26463

Account #: 12152
Group Number: 2031651
PO Number: 20193752.001A
State of Sample Origin: MD

Electronic Copy To Kleinfelder
Electronic Copy To Kleinfelder
Electronic Copy To Kleinfelder
Electronic Copy To Kleinfelder
Electronic Copy To Kleinfelder

Attn: Venelda Williams
Attn: Jennifer Kozak
Attn: Mark Schaaf
Attn: Bryan Johnson
Attn: Charlie Low

Respectfully Submitted,



Megan A. Moeller
Senior Specialist

(717) 556-7261

To view our laboratory's current scopes of accreditation please go to <https://www.eurofinsus.com/environment-testing/laboratories/eurofins-lancaster-laboratories-environmental/certifications-and-accreditations-eurofins-lancaster-laboratories-environmental/> . Historical copies may be requested through your project manager.



SAMPLE INFORMATION

<u>Client Sample Description</u>	<u>Sample Collection</u> <u>Date/Time</u>	<u>ELLE#</u>
3528 Up Grab Water	02/28/2019 16:05	9996474
3526 Up Grab Water	02/28/2019 16:25	9996475
8994 UCR Grab Water	02/28/2019 16:55	9996476

The specific methodologies used in obtaining the enclosed analytical results are indicated on the Laboratory Sample Analysis Record.

Sample Description: 3528 Up Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996474
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:05

CAT No.	Analysis Name	CAS Number	Result	Limit of Quantitation	Dilution Factor
GC/MS Volatiles		EPA 524.2	ug/l	ug/l	
03648	Acetone	67-64-1	< 5.0	5.0	1
03648	Acrolein	107-02-8	< 50	50	1
03648	Acrylonitrile	107-13-1	< 10	10	1
03648	t-Amyl Methyl Ether	994-05-8	< 0.5	0.5	1
03648	Benzene	71-43-2	< 0.5	0.5	1
03648	Bromodichloromethane	75-27-4	< 0.5	0.5	1
03648	Bromoform	75-25-2	< 0.5	0.5	1
03648	Bromomethane	74-83-9	< 0.5	0.5	1
03648	2-Butanone	78-93-3	< 5.0	5.0	1
03648	t-Butyl Alcohol	75-65-0	< 25	25	1
03648	n-Butylbenzene	104-51-8	< 0.5	0.5	1
03648	sec-Butylbenzene	135-98-8	< 0.5	0.5	1
03648	tert-Butylbenzene	98-06-6	< 0.5	0.5	1
03648	Carbon Tetrachloride	56-23-5	< 0.5	0.5	1
03648	Chlorobenzene	108-90-7	< 0.5	0.5	1
03648	Chloroethane	75-00-3	< 0.5	0.5	1
03648	Chloroform	67-66-3	< 0.5	0.5	1
03648	Chloromethane	74-87-3	< 0.5	0.5	1
03648	Dibromochloromethane	124-48-1	< 0.5	0.5	1
03648	1,2-Dichlorobenzene	95-50-1	< 0.5	0.5	1
03648	1,3-Dichlorobenzene	541-73-1	< 0.5	0.5	1
03648	1,4-Dichlorobenzene	106-46-7	< 0.5	0.5	1
03648	1,1-Dichloroethane	75-34-3	< 0.5	0.5	1
03648	1,2-Dichloroethane	107-06-2	< 0.5	0.5	1
03648	1,1-Dichloroethene	75-35-4	< 0.5	0.5	1
03648	cis-1,2-Dichloroethene	156-59-2	< 0.5	0.5	1
03648	trans-1,2-Dichloroethene	156-60-5	< 0.5	0.5	1
03648	1,2-Dichloropropane	78-87-5	< 0.5	0.5	1
03648	cis-1,3-Dichloropropene	10061-01-5	< 0.5	0.5	1
03648	trans-1,3-Dichloropropene	10061-02-6	< 0.5	0.5	1
03648	Ethyl t-Butyl Ether	637-92-3	< 0.5	0.5	1
03648	Ethylbenzene	100-41-4	< 0.5	0.5	1
03648	di-Isopropyl Ether	108-20-3	< 0.5	0.5	1
03648	Isopropylbenzene	98-82-8	< 0.5	0.5	1
03648	p-Isopropyltoluene	99-87-6	< 0.5	0.5	1
03648	Methyl Tertiary Butyl Ether	1634-04-4	< 1.0	1.0	1
03648	Methylene Chloride	75-09-2	< 0.5	0.5	1
03648	Naphthalene	91-20-3	< 0.5	0.5	1
03648	n-Propylbenzene	103-65-1	< 0.5	0.5	1
03648	1,1,2,2-Tetrachloroethane	79-34-5	< 0.5	0.5	1
03648	Tetrachloroethene	127-18-4	< 0.5	0.5	1
03648	Toluene	108-88-3	< 0.5	0.5	1
03648	1,1,1-Trichloroethane	71-55-6	< 0.5	0.5	1
03648	1,1,2-Trichloroethane	79-00-5	< 0.5	0.5	1
03648	Trichloroethene	79-01-6	< 0.5	0.5	1
03648	Trichlorofluoromethane	75-69-4	< 0.5	0.5	1
03648	1,2,4-Trimethylbenzene	95-63-6	< 0.5	0.5	1
03648	1,3,5-Trimethylbenzene	108-67-8	< 0.5	0.5	1
03648	Vinyl Chloride	75-01-4	< 0.5	0.5	1
03648	Xylene (Total)	1330-20-7	< 0.5	0.5	1

Sample Description: 3528 Up Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996474
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:05

Sample Comments

Trip blank vials were not received by the laboratory for this sample group.

Laboratory Sample Analysis Record

CAT No.	Analysis Name	Method	Trial#	Batch#	Analysis Date and Time	Analyst	Dilution Factor
03648	VOCs 524.2 Kleinfelder Full	EPA 524.2	1	K190661AA	03/07/2019 23:15	Don V Viray	1

Sample Description: 3526 Up Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996475
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:25

CAT No.	Analysis Name	CAS Number	Result	Limit of Quantitation	Dilution Factor
GC/MS Volatiles		EPA 524.2	ug/l	ug/l	
03648	Acetone	67-64-1	< 5.0	5.0	1
03648	Acrolein	107-02-8	< 50	50	1
03648	Acrylonitrile	107-13-1	< 10	10	1
03648	t-Amyl Methyl Ether	994-05-8	< 0.5	0.5	1
03648	Benzene	71-43-2	< 0.5	0.5	1
03648	Bromodichloromethane	75-27-4	< 0.5	0.5	1
03648	Bromoform	75-25-2	< 0.5	0.5	1
03648	Bromomethane	74-83-9	< 0.5	0.5	1
03648	2-Butanone	78-93-3	< 5.0	5.0	1
03648	t-Butyl Alcohol	75-65-0	< 25	25	1
03648	n-Butylbenzene	104-51-8	< 0.5	0.5	1
03648	sec-Butylbenzene	135-98-8	< 0.5	0.5	1
03648	tert-Butylbenzene	98-06-6	< 0.5	0.5	1
03648	Carbon Tetrachloride	56-23-5	< 0.5	0.5	1
03648	Chlorobenzene	108-90-7	< 0.5	0.5	1
03648	Chloroethane	75-00-3	< 0.5	0.5	1
03648	Chloroform	67-66-3	< 0.5	0.5	1
03648	Chloromethane	74-87-3	< 0.5	0.5	1
03648	Dibromochloromethane	124-48-1	< 0.5	0.5	1
03648	1,2-Dichlorobenzene	95-50-1	< 0.5	0.5	1
03648	1,3-Dichlorobenzene	541-73-1	< 0.5	0.5	1
03648	1,4-Dichlorobenzene	106-46-7	< 0.5	0.5	1
03648	1,1-Dichloroethane	75-34-3	< 0.5	0.5	1
03648	1,2-Dichloroethane	107-06-2	< 0.5	0.5	1
03648	1,1-Dichloroethene	75-35-4	< 0.5	0.5	1
03648	cis-1,2-Dichloroethene	156-59-2	< 0.5	0.5	1
03648	trans-1,2-Dichloroethene	156-60-5	< 0.5	0.5	1
03648	1,2-Dichloropropane	78-87-5	< 0.5	0.5	1
03648	cis-1,3-Dichloropropene	10061-01-5	< 0.5	0.5	1
03648	trans-1,3-Dichloropropene	10061-02-6	< 0.5	0.5	1
03648	Ethyl t-Butyl Ether	637-92-3	< 0.5	0.5	1
03648	Ethylbenzene	100-41-4	< 0.5	0.5	1
03648	di-Isopropyl Ether	108-20-3	< 0.5	0.5	1
03648	Isopropylbenzene	98-82-8	< 0.5	0.5	1
03648	p-Isopropyltoluene	99-87-6	< 0.5	0.5	1
03648	Methyl Tertiary Butyl Ether	1634-04-4	< 1.0	1.0	1
03648	Methylene Chloride	75-09-2	< 0.5	0.5	1
03648	Naphthalene	91-20-3	< 0.5	0.5	1
03648	n-Propylbenzene	103-65-1	< 0.5	0.5	1
03648	1,1,2,2-Tetrachloroethane	79-34-5	< 0.5	0.5	1
03648	Tetrachloroethene	127-18-4	< 0.5	0.5	1
03648	Toluene	108-88-3	< 0.5	0.5	1
03648	1,1,1-Trichloroethane	71-55-6	< 0.5	0.5	1
03648	1,1,2-Trichloroethane	79-00-5	< 0.5	0.5	1
03648	Trichloroethene	79-01-6	< 0.5	0.5	1
03648	Trichlorofluoromethane	75-69-4	< 0.5	0.5	1
03648	1,2,4-Trimethylbenzene	95-63-6	< 0.5	0.5	1
03648	1,3,5-Trimethylbenzene	108-67-8	< 0.5	0.5	1
03648	Vinyl Chloride	75-01-4	< 0.5	0.5	1
03648	Xylene (Total)	1330-20-7	< 0.5	0.5	1

Sample Description: 3526 Up Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996475
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:25

Sample Comments

Trip blank vials were not received by the laboratory for this sample group.

Laboratory Sample Analysis Record

CAT No.	Analysis Name	Method	Trial#	Batch#	Analysis Date and Time	Analyst	Dilution Factor
03648	VOCs 524.2 Kleinfelder Full	EPA 524.2	1	K190661AA	03/07/2019 23:38	Don V Viray	1

Sample Description: 8994 UCR Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996476
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:55

CAT No.	Analysis Name	CAS Number	Result	Limit of Quantitation	Dilution Factor
GC/MS Volatiles		EPA 524.2	ug/l	ug/l	
03648	Acetone	67-64-1	< 5.0	5.0	1
03648	Acrolein	107-02-8	< 50	50	1
03648	Acrylonitrile	107-13-1	< 10	10	1
03648	t-Amyl Methyl Ether	994-05-8	< 0.5	0.5	1
03648	Benzene	71-43-2	< 0.5	0.5	1
03648	Bromodichloromethane	75-27-4	< 0.5	0.5	1
03648	Bromoform	75-25-2	< 0.5	0.5	1
03648	Bromomethane	74-83-9	< 0.5	0.5	1
03648	2-Butanone	78-93-3	< 5.0	5.0	1
03648	t-Butyl Alcohol	75-65-0	< 25	25	1
03648	n-Butylbenzene	104-51-8	< 0.5	0.5	1
03648	sec-Butylbenzene	135-98-8	< 0.5	0.5	1
03648	tert-Butylbenzene	98-06-6	< 0.5	0.5	1
03648	Carbon Tetrachloride	56-23-5	< 0.5	0.5	1
03648	Chlorobenzene	108-90-7	< 0.5	0.5	1
03648	Chloroethane	75-00-3	< 0.5	0.5	1
03648	Chloroform	67-66-3	< 0.5	0.5	1
03648	Chloromethane	74-87-3	< 0.5	0.5	1
03648	Dibromochloromethane	124-48-1	< 0.5	0.5	1
03648	1,2-Dichlorobenzene	95-50-1	< 0.5	0.5	1
03648	1,3-Dichlorobenzene	541-73-1	< 0.5	0.5	1
03648	1,4-Dichlorobenzene	106-46-7	< 0.5	0.5	1
03648	1,1-Dichloroethane	75-34-3	< 0.5	0.5	1
03648	1,2-Dichloroethane	107-06-2	< 0.5	0.5	1
03648	1,1-Dichloroethene	75-35-4	< 0.5	0.5	1
03648	cis-1,2-Dichloroethene	156-59-2	< 0.5	0.5	1
03648	trans-1,2-Dichloroethene	156-60-5	< 0.5	0.5	1
03648	1,2-Dichloropropane	78-87-5	< 0.5	0.5	1
03648	cis-1,3-Dichloropropene	10061-01-5	< 0.5	0.5	1
03648	trans-1,3-Dichloropropene	10061-02-6	< 0.5	0.5	1
03648	Ethyl t-Butyl Ether	637-92-3	< 0.5	0.5	1
03648	Ethylbenzene	100-41-4	< 0.5	0.5	1
03648	di-Isopropyl Ether	108-20-3	< 0.5	0.5	1
03648	Isopropylbenzene	98-82-8	< 0.5	0.5	1
03648	p-Isopropyltoluene	99-87-6	< 0.5	0.5	1
03648	Methyl Tertiary Butyl Ether	1634-04-4	< 1.0	1.0	1
03648	Methylene Chloride	75-09-2	< 0.5	0.5	1
03648	Naphthalene	91-20-3	< 0.5	0.5	1
03648	n-Propylbenzene	103-65-1	< 0.5	0.5	1
03648	1,1,2,2-Tetrachloroethane	79-34-5	< 0.5	0.5	1
03648	Tetrachloroethene	127-18-4	< 0.5	0.5	1
03648	Toluene	108-88-3	< 0.5	0.5	1
03648	1,1,1-Trichloroethane	71-55-6	< 0.5	0.5	1
03648	1,1,2-Trichloroethane	79-00-5	< 0.5	0.5	1
03648	Trichloroethene	79-01-6	< 0.5	0.5	1
03648	Trichlorofluoromethane	75-69-4	< 0.5	0.5	1
03648	1,2,4-Trimethylbenzene	95-63-6	< 0.5	0.5	1
03648	1,3,5-Trimethylbenzene	108-67-8	< 0.5	0.5	1
03648	Vinyl Chloride	75-01-4	< 0.5	0.5	1
03648	Xylene (Total)	1330-20-7	< 0.5	0.5	1

Sample Description: 8994 UCR Grab Water
Southside Oil 26463

Kleinfelder
ELLE Sample #: PW 9996476
ELLE Group #: 2031651
Matrix: Water

Project Name: Southside Oil 26463

Submittal Date/Time: 03/01/2019 16:55
Collection Date/Time: 02/28/2019 16:55

Sample Comments

Trip blank vials were not received by the laboratory for this sample group.

Laboratory Sample Analysis Record

CAT No.	Analysis Name	Method	Trial#	Batch#	Analysis Date and Time	Analyst	Dilution Factor
03648	VOCs 524.2 Kleinfelder Full	EPA 524.2	1	K190661AA	03/08/2019 00:02	Don V Viray	1

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/11/2019 10:37

Group Number: 2031651

Matrix QC may not be reported if insufficient sample or site-specific QC samples were not submitted. In these situations, to demonstrate precision and accuracy at a batch level, a LCS/LCSD was performed, unless otherwise specified in the method.

All Inorganic Initial Calibration and Continuing Calibration Blanks met acceptable method criteria unless otherwise noted on the Analysis Report.

Method Blank

Analysis Name	Result ug/l	LOQ ug/l
Batch number: K190661AA	Sample number(s): 9996474-9996476	
Acetone	< 5.0	5.0
Acrolein	< 50	50
Acrylonitrile	< 10	10
t-Amyl Methyl Ether	< 0.5	0.5
Benzene	< 0.5	0.5
Bromodichloromethane	< 0.5	0.5
Bromoform	< 0.5	0.5
Bromomethane	< 0.5	0.5
2-Butanone	< 5.0	5.0
t-Butyl Alcohol	< 25	25
n-Butylbenzene	< 0.5	0.5
sec-Butylbenzene	< 0.5	0.5
tert-Butylbenzene	< 0.5	0.5
Carbon Tetrachloride	< 0.5	0.5
Chlorobenzene	< 0.5	0.5
Chloroethane	< 0.5	0.5
Chloroform	< 0.5	0.5
Chloromethane	< 0.5	0.5
Dibromochloromethane	< 0.5	0.5
1,2-Dichlorobenzene	< 0.5	0.5
1,3-Dichlorobenzene	< 0.5	0.5
1,4-Dichlorobenzene	< 0.5	0.5
1,1-Dichloroethane	< 0.5	0.5
1,2-Dichloroethane	< 0.5	0.5
1,1-Dichloroethene	< 0.5	0.5
cis-1,2-Dichloroethene	< 0.5	0.5
trans-1,2-Dichloroethene	< 0.5	0.5
1,2-Dichloropropane	< 0.5	0.5
cis-1,3-Dichloropropene	< 0.5	0.5
trans-1,3-Dichloropropene	< 0.5	0.5
Ethyl t-Butyl Ether	< 0.5	0.5
Ethylbenzene	< 0.5	0.5
di-Isopropyl Ether	< 0.5	0.5
Isopropylbenzene	< 0.5	0.5
p-Isopropyltoluene	< 0.5	0.5
Methyl Tertiary Butyl Ether	< 0.5	0.5
Methylene Chloride	< 0.5	0.5
Naphthalene	< 0.5	0.5
n-Propylbenzene	< 0.5	0.5

*- Outside of specification

- (1) The result for one or both determinations was less than five times the LOQ.
- (2) The unspiked result was more than four times the spike added.

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/11/2019 10:37

Group Number: 2031651

Method Blank (continued)

Analysis Name	Result ug/l	LOQ ug/l
1,1,2,2-Tetrachloroethane	< 0.5	0.5
Tetrachloroethene	< 0.5	0.5
Toluene	< 0.5	0.5
1,1,1-Trichloroethane	< 0.5	0.5
1,1,2-Trichloroethane	< 0.5	0.5
Trichloroethene	< 0.5	0.5
Trichlorofluoromethane	< 0.5	0.5
1,2,4-Trimethylbenzene	< 0.5	0.5
1,3,5-Trimethylbenzene	< 0.5	0.5
Vinyl Chloride	< 0.5	0.5
Xylene (Total)	< 0.5	0.5

LCS/LCSD

Analysis Name	LCS Spike Added ug/l	LCS Conc ug/l	LCSD Spike Added ug/l	LCSD Conc ug/l	LCS %REC	LCSD %REC	LCS/LCSD Limits	RPD	RPD Max
Batch number: K190661AA	Sample number(s): 9996474-9996476								
Acetone	37.5	46.29			123		70-130		
Acrolein	37.5	41.22			110		70-130		
Acrylonitrile	112.5	130.59			116		70-130		
t-Amyl Methyl Ether	5.00	4.99			100		70-130		
Benzene	5.00	5.63			113		70-130		
Bromodichloromethane	5.00	5.53			111		70-130		
Bromoform	5.00	4.88			98		70-130		
Bromomethane	2.00	1.95			97		70-130		
2-Butanone	37.5	44.92			120		70-130		
t-Butyl Alcohol	50	70.57			141*		70-130		
n-Butylbenzene	5.00	6.67			133*		70-130		
sec-Butylbenzene	5.00	5.75			115		70-130		
tert-Butylbenzene	5.00	5.39			108		70-130		
Carbon Tetrachloride	5.00	5.41			108		70-130		
Chlorobenzene	5.00	5.64			113		70-130		
Chloroethane	2.00	2.10			105		70-130		
Chloroform	5.00	5.81			116		70-130		
Chloromethane	2.00	2.17			108		70-130		
Dibromochloromethane	5.00	5.32			106		70-130		
1,2-Dichlorobenzene	5.00	5.83			117		70-130		
1,3-Dichlorobenzene	5.00	5.92			118		70-130		
1,4-Dichlorobenzene	5.00	5.95			119		70-130		
1,1-Dichloroethane	5.00	5.59			112		70-130		
1,2-Dichloroethane	5.00	6.23			125		70-130		

*- Outside of specification

- (1) The result for one or both determinations was less than five times the LOQ.
- (2) The unspiked result was more than four times the spike added.

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/11/2019 10:37

Group Number: 2031651

LCS/LCSD (continued)

Analysis Name	LCS Spike Added ug/l	LCS Conc ug/l	LCSD Spike Added ug/l	LCSD Conc ug/l	LCS %REC	LCSD %REC	LCS/LCSD Limits	RPD	RPD Max
1,1-Dichloroethene	5.00	5.64			113		70-130		
cis-1,2-Dichloroethene	5.00	5.65			113		70-130		
trans-1,2-Dichloroethene	5.00	5.49			110		70-130		
1,2-Dichloropropane	5.00	5.91			118		70-130		
cis-1,3-Dichloropropene	5.00	5.25			105		70-130		
trans-1,3-Dichloropropene	5.00	5.32			106		70-130		
Ethyl t-Butyl Ether	5.00	5.10			102		70-130		
Ethylbenzene	5.00	5.55			111		70-130		
di-Isopropyl Ether	5.00	5.18			104		70-130		
Isopropylbenzene	5.00	5.55			111		70-130		
p-Isopropyltoluene	5.00	6.03			121		70-130		
Methyl Tertiary Butyl Ether	5.00	5.26			105		70-130		
Methylene Chloride	5.00	5.63			113		70-130		
Naphthalene	5.00	5.27			105		70-130		
n-Propylbenzene	5.00	5.95			119		70-130		
1,1,2,2-Tetrachloroethane	5.00	5.74			115		70-130		
Tetrachloroethene	5.00	5.42			108		70-130		
Toluene	5.00	5.59			112		70-130		
1,1,1-Trichloroethane	5.00	5.40			108		70-130		
1,1,2-Trichloroethane	5.00	6.03			121		70-130		
Trichloroethene	5.00	5.67			113		70-130		
Trichlorofluoromethane	2.00	2.02			101		70-130		
1,2,4-Trimethylbenzene	5.00	5.78			116		70-130		
1,3,5-Trimethylbenzene	5.00	5.83			117		70-130		
Vinyl Chloride	2.00	2.19			110		70-130		
Xylene (Total)	15	17.06			114		70-130		

Surrogate Quality Control

Surrogate recoveries which are outside of the QC window are confirmed unless attributed to dilution or otherwise noted on the Analysis Report.

Analysis Name: VOCs 524.2 Kleinfelder Full
Batch number: K190661AA

	4-Bromofluorobenzene	1,2-Dichlorobenzene-d4
9996474	85	96
9996475	86	98
9996476	87	99
Blank	88	99
LCS	95	98

*- Outside of specification

- (1) The result for one or both determinations was less than five times the LOQ.
- (2) The unspiked result was more than four times the spike added.

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/11/2019 10:37

Group Number: 2031651

Surrogate Quality Control

Surrogate recoveries which are outside of the QC window are confirmed unless attributed to dilution or otherwise noted on the Analysis Report.

Analysis Name: VOCs 524.2 Kleinfelder Full
Batch number: K190661AA

Limits: 80-120 80-120

*- Outside of specification

- (1) The result for one or both determinations was less than five times the LOQ.
- (2) The unspiked result was more than four times the spike added.

Client: Kleinfelder**Delivery and Receipt Information**

Delivery Method:	<u>ELLE Courier</u>	Arrival Timestamp:	<u>03/01/2019 16:55</u>
Number of Packages:	<u>1</u>	Number of Projects:	<u>1</u>
State/Province of Origin:	<u>MD</u>		

Arrival Condition Summary

Shipping Container Sealed:	Yes	Sample IDs on COC match Containers:	Yes
Custody Seal Present:	Yes	Sample Date/Times match COC:	Yes
Custody Seal Intact:	Yes	VOA Vial Headspace \geq 6mm:	No
Samples Chilled:	Yes	Total Trip Blank Qty:	0
Paperwork Enclosed:	Yes	Air Quality Samples Present:	No
Samples Intact:	Yes		
Missing Samples:	No		
Extra Samples:	No		
Discrepancy in Container Qty on COC:	No		

*Unpacked by Melvin Sanchez (8943) at 20:12 on 03/01/2019***Samples Chilled Details***Thermometer Types: DT = Digital (Temp. Bottle) IR = Infrared (Surface Temp) All Temperatures in °C.*

<u>Cooler #</u>	<u>Thermometer ID</u>	<u>Corrected Temp</u>	<u>Therm. Type</u>	<u>Ice Type</u>	<u>Ice Present?</u>	<u>Ice Container</u>	<u>Elevated Temp?</u>
1	DT146	1.8	DT	Wet	Y	Bagged	N

Explanation of Symbols and Abbreviations

The following defines common symbols and abbreviations used in reporting technical data:

BMQL	Below Minimum Quantitation Level	mL	milliliter(s)
C	degrees Celsius	MPN	Most Probable Number
cfu	colony forming units	N.D.	non-detect
CP Units	cobalt-chloroplatinate units	ng	nanogram(s)
F	degrees Fahrenheit	NTU	nephelometric turbidity units
g	gram(s)	pg/L	picogram/liter
IU	International Units	RL	Reporting Limit
kg	kilogram(s)	TNTC	Too Numerous To Count
L	liter(s)	µg	microgram(s)
lb.	pound(s)	µL	microliter(s)
m3	cubic meter(s)	umhos/cm	micromhos/cm
meq	milliequivalents	MCL	Maximum Contamination Limit
mg	milligram(s)		
<	less than		
>	greater than		
ppm	parts per million - One ppm is equivalent to one milligram per kilogram (mg/kg) or one gram per million grams. For aqueous liquids, ppm is usually taken to be equivalent to milligrams per liter (mg/l), because one liter of water has a weight very close to a kilogram. For gases or vapors, one ppm is equivalent to one microliter per liter of gas.		
ppb	parts per billion		
Dry weight basis	Results printed under this heading have been adjusted for moisture content. This increases the analyte weight concentration to approximate the value present in a similar sample without moisture. All other results are reported on an as-received basis.		

Analytical test results meet all requirements of the associated regulatory program (i.e., NELAC (TNI), DoD, and ISO 17025) unless otherwise noted under the individual analysis.

Measurement uncertainty values, as applicable, are available upon request.

Tests results relate only to the sample tested. Clients should be aware that a critical step in a chemical or microbiological analysis is the collection of the sample. Unless the sample analyzed is truly representative of the bulk of material involved, the test results will be meaningless. If you have questions regarding the proper techniques of collecting samples, please contact us. We cannot be held responsible for sample integrity, however, unless sampling has been performed by a member of our staff.

This report shall not be reproduced except in full, without the written approval of the laboratory.

Times are local to the area of activity. Parameters listed in the 40 CFR Part 136 Table II as "analyze immediately" are not performed within 15 minutes.

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Data Qualifiers

Qualifier	Definition
C	Result confirmed by reanalysis
D1	Indicates for dual column analyses that the result is reported from column 1
D2	Indicates for dual column analyses that the result is reported from column 2
E	Concentration exceeds the calibration range
K1	Initial Calibration Blank is above the QC limit and the sample result is ND
K2	Continuing Calibration Blank is above the QC limit and the sample result is ND
K3	Initial Calibration Verification is above the QC limit and the sample result is ND
K4	Continuing Calibration Verification is above the QC limit and the sample result is ND
J (or G, I, X)	Estimated value \geq the Method Detection Limit (MDL or DL) and $<$ the Limit of Quantitation (LOQ or RL)
P	Concentration difference between the primary and confirmation column $>40\%$. The lower result is reported.
P^	Concentration difference between the primary and confirmation column $>40\%$. The higher result is reported.
U	Analyte was not detected at the value indicated
V	Concentration difference between the primary and confirmation column $>100\%$. The reporting limit is raised due to this disparity and evident interference.
W	The dissolved oxygen uptake for the unseeded blank is greater than 0.20 mg/L.
Z	Laboratory Defined - see analysis report

Additional Organic and Inorganic CLP qualifiers may be used with Form 1 reports as defined by the CLP methods.

Qualifiers specific to Dioxin/Furans and PCB Congeners are detailed on the individual Analysis Report.



REVISED

ANALYSIS REPORT

Prepared by:

Eurofins Lancaster Laboratories Environmental
2425 New Holland Pike
Lancaster, PA 17601

Prepared for:

Kleinfelder
550 West C Street, Suite 1200
San Diego CA 92101

Report Date: March 19, 2019 15:31

Project: 07923998 8816 Fingerboard Road

Account #: 12153
Group Number: 2031958
PO Number: 20193752.001A
State of Sample Origin: MD

Electronic Copy To SUNOCO c/o Kleinfelder
Electronic Copy To Sunoco c/o Kleinfelder
Electronic Copy To Kleinfelder

Attn: Venelda Williams
Attn: Jennifer Kozak
Attn: Mark Schaaf

Respectfully Submitted,



Megan A. Moeller
Senior Specialist

(717) 556-7261

To view our laboratory's current scopes of accreditation please go to <https://www.eurofinsus.com/environment-testing/laboratories/eurofins-lancaster-laboratories-environmental/certifications-and-accreditations-eurofins-lancaster-laboratories-environmental/> . Historical copies may be requested through your project manager.



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SAMPLE INFORMATION

Client Sample Description

8826 UCR Grab Water

Sample Collection

Date/Time

03/04/2019 14:45

ELLE#

1001070

The specific methodologies used in obtaining the enclosed analytical results are indicated on the Laboratory Sample Analysis Record.

REVISED

Sample Description: 8826 UCR Grab Water
8819 Fingerboard Road, MD
DUNS# 07923998

Kleinfelder
ELLE Sample #: PW 1001070
ELLE Group #: 2031958
Matrix: Water

Project Name: 07923998 8816 Fingerboard Road

Submittal Date/Time: 03/05/2019 17:27

Collection Date/Time: 03/04/2019 14:45

CAT No.	Analysis Name	CAS Number	Result	Limit of Quantitation	Dilution Factor
GC/MS Volatiles		EPA 524.2	ug/l	ug/l	
03648	Acetone	67-64-1	< 5.0	5.0	1
03648	Acrolein	107-02-8	< 50	50	1
03648	Acrylonitrile	107-13-1	< 10	10	1
03648	t-Amyl Methyl Ether	994-05-8	< 0.5	0.5	1
03648	Benzene	71-43-2	< 0.5	0.5	1
03648	Bromodichloromethane	75-27-4	< 0.5	0.5	1
03648	Bromoform	75-25-2	< 0.5	0.5	1
03648	Bromomethane	74-83-9	< 0.5	0.5	1
03648	2-Butanone	78-93-3	< 5.0	5.0	1
03648	t-Butyl Alcohol	75-65-0	< 25	25	1
03648	n-Butylbenzene	104-51-8	< 0.5	0.5	1
03648	sec-Butylbenzene	135-98-8	< 0.5	0.5	1
03648	tert-Butylbenzene	98-06-6	< 0.5	0.5	1
03648	Carbon Tetrachloride	56-23-5	< 0.5	0.5	1
03648	Chlorobenzene	108-90-7	< 0.5	0.5	1
03648	Chloroethane	75-00-3	< 0.5	0.5	1
03648	Chloroform	67-66-3	< 0.5	0.5	1
03648	Chloromethane	74-87-3	< 0.5	0.5	1
03648	Dibromochloromethane	124-48-1	< 0.5	0.5	1
03648	1,2-Dichlorobenzene	95-50-1	< 0.5	0.5	1
03648	1,3-Dichlorobenzene	541-73-1	< 0.5	0.5	1
03648	1,4-Dichlorobenzene	106-46-7	< 0.5	0.5	1
03648	1,1-Dichloroethane	75-34-3	< 0.5	0.5	1
03648	1,2-Dichloroethane	107-06-2	< 0.5	0.5	1
03648	1,1-Dichloroethene	75-35-4	< 0.5	0.5	1
03648	cis-1,2-Dichloroethene	156-59-2	< 0.5	0.5	1
03648	trans-1,2-Dichloroethene	156-60-5	< 0.5	0.5	1
03648	1,2-Dichloropropane	78-87-5	< 0.5	0.5	1
03648	cis-1,3-Dichloropropene	10061-01-5	< 0.5	0.5	1
03648	trans-1,3-Dichloropropene	10061-02-6	< 0.5	0.5	1
03648	Ethyl t-Butyl Ether	637-92-3	< 0.5	0.5	1
03648	Ethylbenzene	100-41-4	< 0.5	0.5	1
03648	di-Isopropyl Ether	108-20-3	< 0.5	0.5	1
03648	Isopropylbenzene	98-82-8	< 0.5	0.5	1
03648	p-Isopropyltoluene	99-87-6	< 0.5	0.5	1
03648	Methyl Tertiary Butyl Ether	1634-04-4	< 0.5	0.5	1
03648	Methylene Chloride	75-09-2	< 0.5	0.5	1
03648	Naphthalene	91-20-3	< 0.5	0.5	1
03648	n-Propylbenzene	103-65-1	< 0.5	0.5	1
03648	1,1,2,2-Tetrachloroethane	79-34-5	< 0.5	0.5	1
03648	Tetrachloroethene	127-18-4	< 0.5	0.5	1
03648	Toluene	108-88-3	< 0.5	0.5	1
03648	1,1,1-Trichloroethane	71-55-6	< 0.5	0.5	1
03648	1,1,2-Trichloroethane	79-00-5	< 0.5	0.5	1
03648	Trichloroethene	79-01-6	< 0.5	0.5	1
03648	Trichlorofluoromethane	75-69-4	< 0.5	0.5	1
03648	1,2,4-Trimethylbenzene	95-63-6	< 0.5	0.5	1
03648	1,3,5-Trimethylbenzene	108-67-8	< 0.5	0.5	1
03648	Vinyl Chloride	75-01-4	< 0.5	0.5	1

REVISED

Sample Description: 8826 UCR Grab Water
8819 Fingerboard Road, MD
DUNS# 07923998

Kleinfelder
ELLE Sample #: PW 1001070
ELLE Group #: 2031958
Matrix: Water

Project Name: 07923998 8816 Fingerboard Road

Submittal Date/Time: 03/05/2019 17:27
Collection Date/Time: 03/04/2019 14:45

CAT No.	Analysis Name	CAS Number	Result	Limit of Quantitation	Dilution Factor
GC/MS Volatiles					
03648	Xylene (Total)	1330-20-7	< 0.5	0.5	1

Laboratory Sample Analysis Record

CAT No.	Analysis Name	Method	Trial#	Batch#	Analysis Date and Time	Analyst	Dilution Factor
03648	VOCs 524.2 Kleinfelder Full	EPA 524.2	1	K190711AA	03/12/2019 20:55	Don V Viray	1

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/19/2019 15:31

Group Number: 2031958

Matrix QC may not be reported if insufficient sample or site-specific QC samples were not submitted. In these situations, to demonstrate precision and accuracy at a batch level, a LCS/LCSD was performed, unless otherwise specified in the method.

All Inorganic Initial Calibration and Continuing Calibration Blanks met acceptable method criteria unless otherwise noted on the Analysis Report.

Method Blank

Analysis Name	Result	LOQ
	ug/l	ug/l
Batch number: K190711AA	Sample number(s): 1001070	
Acetone	< 5.0	5.0
Acrolein	< 50	50
Acrylonitrile	< 10	10
t-Amyl Methyl Ether	< 0.5	0.5
Benzene	< 0.5	0.5
Bromodichloromethane	< 0.5	0.5
Bromoform	< 0.5	0.5
Bromomethane	< 0.5	0.5
2-Butanone	< 5.0	5.0
t-Butyl Alcohol	< 25	25
n-Butylbenzene	< 0.5	0.5
sec-Butylbenzene	< 0.5	0.5
tert-Butylbenzene	< 0.5	0.5
Carbon Tetrachloride	< 0.5	0.5
Chlorobenzene	< 0.5	0.5
Chloroethane	< 0.5	0.5
Chloroform	< 0.5	0.5
Chloromethane	< 0.5	0.5
Dibromochloromethane	< 0.5	0.5
1,2-Dichlorobenzene	< 0.5	0.5
1,3-Dichlorobenzene	< 0.5	0.5
1,4-Dichlorobenzene	< 0.5	0.5
1,1-Dichloroethane	< 0.5	0.5
1,2-Dichloroethane	< 0.5	0.5
1,1-Dichloroethene	< 0.5	0.5
cis-1,2-Dichloroethene	< 0.5	0.5
trans-1,2-Dichloroethene	< 0.5	0.5
1,2-Dichloropropane	< 0.5	0.5
cis-1,3-Dichloropropene	< 0.5	0.5
trans-1,3-Dichloropropene	< 0.5	0.5
Ethyl t-Butyl Ether	< 0.5	0.5
Ethylbenzene	< 0.5	0.5
di-Isopropyl Ether	< 0.5	0.5
Isopropylbenzene	< 0.5	0.5
p-Isopropyltoluene	< 0.5	0.5
Methyl Tertiary Butyl Ether	< 0.5	0.5
Methylene Chloride	< 0.5	0.5
Naphthalene	< 0.5	0.5
n-Propylbenzene	< 0.5	0.5

*- Outside of specification

(1) The result for one or both determinations was less than five times the LOQ.

(2) The unspiked result was more than four times the spike added.

P##### is indicative of a Background or Unspiked sample that is batch matrix QC and was not performed using a sample from this submission group.

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/19/2019 15:31

Group Number: 2031958

Method Blank (continued)

Analysis Name	Result ug/l	LOQ ug/l
1,1,2,2-Tetrachloroethane	< 0.5	0.5
Tetrachloroethene	< 0.5	0.5
Toluene	< 0.5	0.5
1,1,1-Trichloroethane	< 0.5	0.5
1,1,2-Trichloroethane	< 0.5	0.5
Trichloroethene	< 0.5	0.5
Trichlorofluoromethane	< 0.5	0.5
1,2,4-Trimethylbenzene	< 0.5	0.5
1,3,5-Trimethylbenzene	< 0.5	0.5
Vinyl Chloride	< 0.5	0.5
Xylene (Total)	< 0.5	0.5

LCS/LCSD

Analysis Name	LCS Spike Added ug/l	LCS Conc ug/l	LCSD Spike Added ug/l	LCSD Conc ug/l	LCS %REC	LCSD %REC	LCS/LCSD Limits	RPD	RPD Max
Batch number: K190711AA	Sample number(s): 1001070								
Acetone	37.5	48.72			130		70-130		
Acrolein	37.5	41.7			111		70-130		
Acrylonitrile	112.5	126.53			112		70-130		
t-Amyl Methyl Ether	5.00	4.86			97		70-130		
Benzene	5.00	5.46			109		70-130		
Bromodichloromethane	5.00	5.47			109		70-130		
Bromoform	5.00	4.57			91		70-130		
Bromomethane	2.00	1.87			94		70-130		
2-Butanone	37.5	43.86			117		70-130		
t-Butyl Alcohol	50	65.72			131*		70-130		
n-Butylbenzene	5.00	6.58			132*		70-130		
sec-Butylbenzene	5.00	5.63			113		70-130		
tert-Butylbenzene	5.00	5.24			105		70-130		
Carbon Tetrachloride	5.00	5.28			106		70-130		
Chlorobenzene	5.00	5.46			109		70-130		
Chloroethane	2.00	2.04			102		70-130		
Chloroform	5.00	5.72			114		70-130		
Chloromethane	2.00	2.06			103		70-130		
Dibromochloromethane	5.00	5.24			105		70-130		
1,2-Dichlorobenzene	5.00	5.82			116		70-130		
1,3-Dichlorobenzene	5.00	5.80			116		70-130		
1,4-Dichlorobenzene	5.00	5.85			117		70-130		
1,1-Dichloroethane	5.00	5.48			110		70-130		
1,2-Dichloroethane	5.00	5.98			120		70-130		

*- Outside of specification

(1) The result for one or both determinations was less than five times the LOQ.

(2) The unspiked result was more than four times the spike added.

P##### is indicative of a Background or Unspiked sample that is batch matrix QC and was not performed using a sample from this submission group.

REVISED

Quality Control Summary

Client Name: Kleinfelder
Reported: 03/19/2019 15:31

Group Number: 2031958

LCS/LCSD (continued)

Analysis Name	LCS Spike Added ug/l	LCS Conc ug/l	LCSD Spike Added ug/l	LCSD Conc ug/l	LCS %REC	LCSD %REC	LCS/LCSD Limits	RPD	RPD Max
1,1-Dichloroethene	5.00	5.63			113		70-130		
cis-1,2-Dichloroethene	5.00	5.51			110		70-130		
trans-1,2-Dichloroethene	5.00	5.49			110		70-130		
1,2-Dichloropropane	5.00	5.70			114		70-130		
cis-1,3-Dichloropropene	5.00	5.08			102		70-130		
trans-1,3-Dichloropropene	5.00	5.05			101		70-130		
Ethyl t-Butyl Ether	5.00	5.01			100		70-130		
Ethylbenzene	5.00	5.39			108		70-130		
di-Isopropyl Ether	5.00	4.99			100		70-130		
Isopropylbenzene	5.00	5.26			105		70-130		
p-Isopropyltoluene	5.00	5.85			117		70-130		
Methyl Tertiary Butyl Ether	5.00	5.19			104		70-130		
Methylene Chloride	5.00	5.85			117		70-130		
Naphthalene	5.00	4.72			94		70-130		
n-Propylbenzene	5.00	5.74			115		70-130		
1,1,2,2-Tetrachloroethane	5.00	5.64			113		70-130		
Tetrachloroethene	5.00	5.17			103		70-130		
Toluene	5.00	5.44			109		70-130		
1,1,1-Trichloroethane	5.00	5.21			104		70-130		
1,1,2-Trichloroethane	5.00	5.92			118		70-130		
Trichloroethene	5.00	5.35			107		70-130		
Trichlorofluoromethane	2.00	1.94			97		70-130		
1,2,4-Trimethylbenzene	5.00	5.59			112		70-130		
1,3,5-Trimethylbenzene	5.00	5.60			112		70-130		
Vinyl Chloride	2.00	2.03			101		70-130		
Xylene (Total)	15	16.32			109		70-130		

Surrogate Quality Control

Surrogate recoveries which are outside of the QC window are confirmed unless attributed to dilution or otherwise noted on the Analysis Report.

Analysis Name: VOCs 524.2 Kleinfelder Full
Batch number: K190711AA

	4-Bromofluorobenzene	1,2-Dichlorobenzene-d4
1001070	89	97
Blank	89	101
LCS	98	103
Limits:	80-120	80-120

*- Outside of specification

(1) The result for one or both determinations was less than five times the LOQ.

(2) The unspiked result was more than four times the spike added.

P##### is indicative of a Background or Unspiked sample that is batch matrix QC and was not performed using a sample from this submission group.

Group #: 2031958 Sample #: 1601070

[illegible]

Lancaster Laboratories, Inc. 2425 New Holland Pike, PO Box 12425, Lancaster, PA 17605-2425 717-656-2300
Copies: White and yellow should accompany samples to Lancaster Laboratories. The pink copy should be retained by the client



Lancaster Laboratories
Environmental

Sample Administration Receipt Documentation Log

Doc Log ID: 242707



Group Number(s):

2031958

Client: Kleinfelder

Delivery and Receipt Information

Delivery Method:	<u>ELLE Courier</u>	Arrival Timestamp:	<u>03/05/2019 17:27</u>
Number of Packages:	<u>2</u>	Number of Projects:	<u>2</u>
State/Province of Origin:	<u>MD</u>		

Arrival Condition Summary

Shipping Container Sealed:	Yes	Sample IDs on COC match Containers:	Yes
Custody Seal Present:	No	Sample Date/Times match COC:	Yes
Samples Chilled:	Yes	VOA Vial Headspace \geq 6mm:	No
Paperwork Enclosed:	Yes	Total Trip Blank Qty:	0
Samples Intact:	Yes	Air Quality Samples Present:	No
Missing Samples:	No		
Extra Samples:	No		
Discrepancy in Container Qty on COC:	No		

Unpacked by Melvin Sanchez (8943) at 21:12 on 03/05/2019

Samples Chilled Details

Thermometer Types: DT = Digital (Temp. Bottle) IR = Infrared (Surface Temp) All Temperatures in °C.

Cooler #	Thermometer ID	Corrected Temp	Therm. Type	Ice Type	Ice Present?	Ice Container	Elevated Temp?
1	DT131	3.4	DT	Wet	Y	Bagged	N
2	DT131	1.0	DT	Wet	Y	Bagged	N

Explanation of Symbols and Abbreviations

The following defines common symbols and abbreviations used in reporting technical data:

BMQL	Below Minimum Quantitation Level	mL	milliliter(s)
C	degrees Celsius	MPN	Most Probable Number
cfu	colony forming units	N.D.	non-detect
CP Units	cobalt-chloroplatinate units	ng	nanogram(s)
F	degrees Fahrenheit	NTU	nephelometric turbidity units
g	gram(s)	pg/L	picogram/liter
IU	International Units	RL	Reporting Limit
kg	kilogram(s)	TNTC	Too Numerous To Count
L	liter(s)	µg	microgram(s)
lb.	pound(s)	µL	microliter(s)
m3	cubic meter(s)	umhos/cm	micromhos/cm
meq	milliequivalents	MCL	Maximum Contamination Limit
mg	milligram(s)		
<	less than		
>	greater than		
ppm	parts per million - One ppm is equivalent to one milligram per kilogram (mg/kg) or one gram per million grams. For aqueous liquids, ppm is usually taken to be equivalent to milligrams per liter (mg/l), because one liter of water has a weight very close to a kilogram. For gases or vapors, one ppm is equivalent to one microliter per liter of gas.		
ppb	parts per billion		
Dry weight basis	Results printed under this heading have been adjusted for moisture content. This increases the analyte weight concentration to approximate the value present in a similar sample without moisture. All other results are reported on an as-received basis.		

Analytical test results meet all requirements of the associated regulatory program (i.e., NELAC (TNI), DoD, and ISO 17025) unless otherwise noted under the individual analysis.

Measurement uncertainty values, as applicable, are available upon request.

Tests results relate only to the sample tested. Clients should be aware that a critical step in a chemical or microbiological analysis is the collection of the sample. Unless the sample analyzed is truly representative of the bulk of material involved, the test results will be meaningless. If you have questions regarding the proper techniques of collecting samples, please contact us. We cannot be held responsible for sample integrity, however, unless sampling has been performed by a member of our staff.

This report shall not be reproduced except in full, without the written approval of the laboratory.

Times are local to the area of activity. Parameters listed in the 40 CFR Part 136 Table II as "analyze immediately" are not performed within 15 minutes.

WARRANTY AND LIMITS OF LIABILITY - In accepting analytical work, we warrant the accuracy of test results for the sample as submitted. THE FOREGOING EXPRESS WARRANTY IS EXCLUSIVE AND IS GIVEN IN LIEU OF ALL OTHER WARRANTIES, EXPRESSED OR IMPLIED. WE DISCLAIM ANY OTHER WARRANTIES, EXPRESSED OR IMPLIED, INCLUDING A WARRANTY OF FITNESS FOR PARTICULAR PURPOSE AND WARRANTY OF MERCHANTABILITY. IN NO EVENT SHALL EUROFINS LANCASTER LABORATORIES ENVIRONMENTAL, LLC BE LIABLE FOR INDIRECT, SPECIAL, CONSEQUENTIAL, OR INCIDENTAL DAMAGES INCLUDING, BUT NOT LIMITED TO, DAMAGES FOR LOSS OF PROFIT OR GOODWILL REGARDLESS OF (A) THE NEGLIGENCE (EITHER SOLE OR CONCURRENT) OF EUROFINS LANCASTER LABORATORIES ENVIRONMENTAL AND (B) WHETHER EUROFINS LANCASTER LABORATORIES ENVIRONMENTAL HAS BEEN INFORMED OF THE POSSIBILITY OF SUCH DAMAGES. We accept no legal responsibility for the purposes for which the client uses the test results. No purchase order or other order for work shall be accepted by Eurofins Lancaster Laboratories Environmental which includes any conditions that vary from the Standard Terms and Conditions, and Eurofins Lancaster Laboratories Environmental hereby objects to any conflicting terms contained in any acceptance or order submitted by client.

Data Qualifiers

Qualifier	Definition
C	Result confirmed by reanalysis
D1	Indicates for dual column analyses that the result is reported from column 1
D2	Indicates for dual column analyses that the result is reported from column 2
E	Concentration exceeds the calibration range
K1	Initial Calibration Blank is above the QC limit and the sample result is ND
K2	Continuing Calibration Blank is above the QC limit and the sample result is ND
K3	Initial Calibration Verification is above the QC limit and the sample result is ND
K4	Continuing Calibration Verification is above the QC limit and the sample result is ND
J (or G, I, X)	Estimated value \geq the Method Detection Limit (MDL or DL) and $<$ the Limit of Quantitation (LOQ or RL)
P	Concentration difference between the primary and confirmation column $>40\%$. The lower result is reported.
P^	Concentration difference between the primary and confirmation column $> 40\%$. The higher result is reported.
U	Analyte was not detected at the value indicated
V	Concentration difference between the primary and confirmation column $>100\%$. The reporting limit is raised due to this disparity and evident interference.
W	The dissolved oxygen uptake for the unseeded blank is greater than 0.20 mg/L.
Z	Laboratory Defined - see analysis report

Additional Organic and Inorganic CLP qualifiers may be used with Form 1 reports as defined by the CLP methods.

Qualifiers specific to Dioxin/Furans and PCB Congeners are detailed on the individual Analysis Report.



ATTACHMENT 4

3514 Urbana Pike - Supply Well Abandonment Report

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

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

DATE WELL ABANDONED: 8/16/16 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

FR - 94 - 4632

* PERMIT NUMBER OF REPLACEMENT WELL:

* PERSON ABANDONING WELL: Marshall Amette WELL DRILLER'S LICENSE NUMBER: 106

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Kiplinger Washington Editors

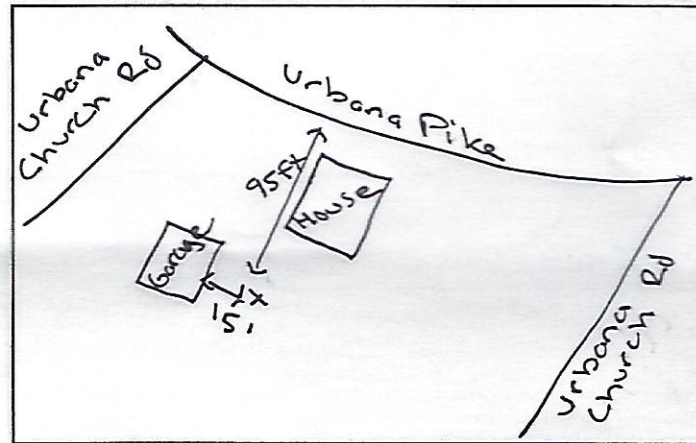
* WELL LOCATION:

COUNTY: Frederick
NEAREST TOWN: Frederick
TAX MAP 0096 BLOCK - PARCEL 0054
SUBDIVISION: 0000
SECTION: - LOT: -
STREET ADDRESS: 3514 Urbana Pike

LATITUDE 39.325976

LONGITUDE 77.353111

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:

☒ DRILLED ☐ JETTED
☐ BORED ☐ HAND DUG
☐ OTHER (specify) _____

* USE CODE:

☒ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION ☐ GEOTHERMAL

* TYPE OF CASING:

☒ STEEL ☐ PLASTIC
☐ CONCRETE ☐ OTHER (specify) _____

SIZE OF CASING: 6" INCHES IN DIAMETER

DEPTH OF WELL: 200 FEET DEEP

WAS ANY CASING REMOVED? ☒ YES ☐ NO

If yes, length removed, in feet: 3

WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

106 MWD / MSD / MGS

CIRCLE ONE

DATE

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement / bentonite grout	0 43	3 200
VOLUME OF MATERIAL USED		
2447 lbs portland cement 145 lbs benseal 155 gallons water		

ORIGINAL