

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

Ce-Cf 48

APPLICATION FOR PERMIT TO DRILL WELL

WATER RESOURCES

TEST HOLE ONLY

Owner T.L. FOARD
T.L. FOARD (OWNER OF PROPERTY)

Driller E.R. Murray License Number 316

Street or R. F. D. ROUTE 285

Post Office LATHE ATLANTIC CO. GLEN BURNING WA.

Post Office CHESAPEAKE CITY

Date 8-22-66

Quantity of Water to be Produced TEST Gallons Per Minute

Location of Well County CECIL

Total Quantity Needed For Use TEST Gallons Per Day

Subdivision _____

Use for Water TEST WELL

Section _____ Lot _____

Approximate Depth of Well (feet) 500-550

County CECIL

Method of Drilling to be used ROTARY

Nearest Town CHESAPEAKE CITY

Is this a Replacement Well? Yes - No

Distance from Town 3300'

Direction from Town N.E.

Description of Location of Well
(This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).

If YES, indicate date abandoned well is to be sealed: _____
and by whom: _____

Near what road RT 285

On which side of road NORTH
(North, East, South, West)

PERMIT TO DRILL WELL
(Not To Be Filled In By Driller)

Distance from road 1800'

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 Permit No. CE-67-W-143

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

Paul W. Nye Director Sept. 9, 1966 Date

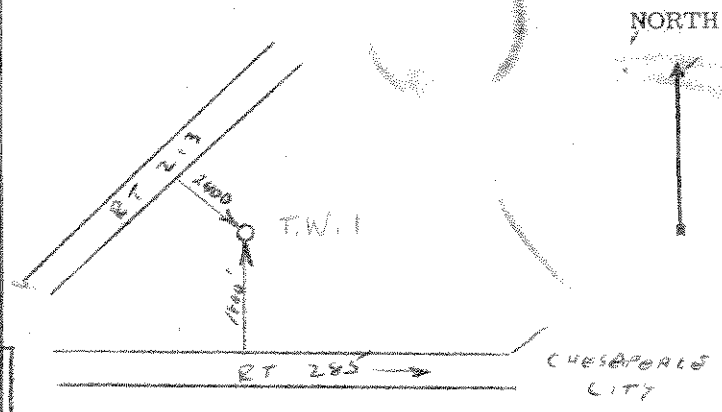
THIS PERMIT IS NOT TRANSFERABLE WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT

Special conditions that must be observed:

- ① Samples every 20 feet, or change in formation,
- ② Samples every 10 feet, to 630 feet, or change in formation, deeper than 630 feet.
- ③ Electric Log must be obtained; copy submitted to the Department of Water Resources.
- ④ Drill into basement 5 feet ⑤ Must provide means for measuring water levels.

Health Department Approval of Application
Cecil County Department of Health

Approved by David S. Moore (p)
Title Supervising Sanitarian
Date August 23, 1966



TEST WELL #1

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

WELL COMPLETION REPORT

WELL DESCRIPTION

WELL LOG

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

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).

| WELL LOG | FEET | CASING AND SCREEN RECORD | DIAM. (inches) | FEET |
|--|--------------|--------------------------|----------------|------------------|
| TOP SOIL AND YELLOW CLAY | from 0 to 14 | BLACK STEEL T+C | 12 | from 0 to 247 |
| SAND + GRAVEL IN STREAKS | 14-38 | BLACK STEEL WELDED PE. | 8 | 0-519'5" |
| WHITE SAND + GRAVEL | 38-64 | ARM CO IRON SCREEN | 6" | 519'5" TO 550'8" |
| BROWN CLAY | 64-65 | BLK STEEL T+C | 3" | 498'8" TO 580' |
| WHITE SAND + GRAVEL w/ STREAKS OF CLAY | 65-78 | EVEROUR SCREEN Kpx | 3" | 580 TO 585' |
| GREY CLAY | 78-100 | BLACK STEEL T+C | 3" | 585 TO 658'6" |
| BROWN SAND + GRAVEL | 100-112 | EVEROUR SCREEN Kpx | 3" | 585'6" TO 608'6" |
| RED SANDY CLAY | 112-140 | BLACK STEEL T+C | 3" | |
| FINE BROWN SAND + LIGNITE | 140-207 | EVEROUR SCREEN Kpx | 3" | |
| RED SANDY CLAY | 207-246 | | | |
| TOUGH RED CLAY | 246-249 | | | |
| RED SANDY CLAY | 249-294 | | | |
| FINE TO MEDIUM SAND + GRAVEL | 294-303 | | | |
| MULTICOLORED CLAY | 303-376 | | | |
| MEDIUM TO FINE WHITE SAND + GRAVEL | 376-430 | | | |
| RED + WHITE CLAY | 430-450 | | | |
| MEDIUM WHITE SAND + GRAVEL | 450-476 | | | |
| RED + WHITE CLAY | 476-505 | | | |
| RED + WHITE CLAY | 505-600 | | | |
| SAND + GRAVEL WHITE | 600-614 | | | |
| RED + WHITE CLAY | 614-653 | | | |
| HARD STREAKS | 653-657 | | | |
| WEATHERED BEDROCK | 657-673 | | | |
| HARD BEDROCK | 673-695 | | | |

Permit Number CE-67-03-143
 Owner T.L. FORD
 Address R.D. # 3 CITY CO.
 Subdivision _____
 Section _____ Lot _____

PUMPING TEST

Hours Pumped 8
 Type of Pump Used VERT TURB.
 Pumping Rate 172 GPM
 Gallons per Minute 172.6 GPM

WATER LEVEL

(Distance from land surface to water)
 Before Pumping 58' Ft.
 When Pumping 140' Ft.

APPEARANCE OF WATER

Clear YES Cloudy _____
 Taste _____
 Odor _____

Height of Casing Above Land

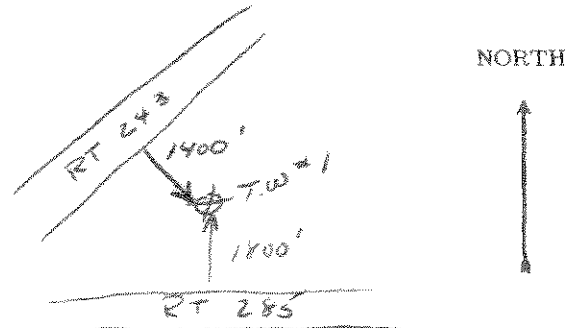
Surface 1'6" Ft.

PUMP INSTALLED

Type NONE
 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.



DATE WELL WAS COMPLETED

9-14-66

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.

E.R. Murray, Well Driller

Well Driller License No.: 316