

C1

9378

SEQUENCE NO.

(MDE USE ONLY)

STATE OF MARYLAND

WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY

PLEASE TYPE

COUNTY NUMBER

A50905K

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

40-94-2004

ST/CO USE ONLY

DATE RECEIVED

1/13/99

DATE WELL COMPLETED

MM DD YY

1 5 99

DEPTH OF WELL

22 205 26

(TO NEAREST FOOT)

OWNER

Greenfield

last name

Whitetail La

first name

TOWN

W. Friendship

STREET OR RFD

SUBDIVISION

QUARTERFIELD III

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

FROM TO

check if water bearing

Sand

0 12

Cray Mica

12 205

Rock

GROUTING RECORD

yes no

Y N

44 44

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 6 NO. OF POUNDS 364

GALLONS OF WATER 36

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 19 ft.

48 TOP 52 54 BOTTOM 58

(enter 0 if from surface)

CASING RECORD

casing types 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)

54 6 21

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 STEEL BR BRASS HO OPEN HOLE

PL PLASTIC OT 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

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.

M 5 DO 24

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.

D

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

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

80

ft.

WHEN PUMPING

97

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 STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

Whitetail Lane

52.4' 18' well

B 1 <b>9458</b> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>HO-94-2004</b> <small>fill in this form completely</small>
Date Received (APA) <b>03/31/98</b> <small>8 MM DD YY 13</small> <b>Greenfield Home</b> <small>15 Last Name 34 First Name</small> <b>6656 Rustin Drive</b> <small>36 Street or RFD 55</small> <b>Highland Md. 20777</b> <small>57 Town 70 State 72 Zip 76</small>		B 3 <b>Howard</b> LOCATION OF WELL <small>8 COUNTY 21</small> <b>Quaterfield</b> <small>23 SUBDIVISION 42</small> SECTION <b>3</b> LOT <b>10</b> <small>44 46 48 50</small> <b>West Friendship</b> <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) <b>4</b> <small>73 76 77 78</small>	
<b>DRILLER INFORMATION</b> <b>Joseph L. Mayne</b> <b>M S D 024</b> <small>Driller's Name 76 License No. 81</small> <b>Joseph L. Mayne Well Drilling</b> <small>Firm Name</small> <b>5512 Ridge Rd. Mt. Airy 21771</b> <small>Address</small> <b>Joseph L. Mayne</b> <b>3/31/98</b> <small>Signature Date</small>		B 4 <b>Whitetail Lane</b> <small>11 NEAR WHAT ROAD 30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <small>NORTH N WEST W EAST E SOUTH S</small> 34 <b>260</b> 37 <small>DISTANCE FROM ROAD ENTER FT OR MI 38 39</small> TAX MAP: <b>23</b> BLK: <b>15</b> PARCEL <b>84</b>	
B 2 <b>WELL INFORMATION</b> <small>1 2</small> APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b> <small>8 12</small> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b> <small>14 20</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <b>Howard</b> <b>A50905K</b> <small>COUNTY NAME COUNTY NO.</small> STATE SIGNATURE <b>Mark E. Larkin</b> <b>12/11/99</b> <small>DATE ISSUED 41</small> <b>12/11/98</b> <b>Mark E. Larkin</b> <b>12/11/99</b> <small>CO SIGNATURE EXP. DATE</small> NORTH GRID <b>520</b> <b>000</b> EAST GRID <b>5825</b> <b>000</b> <small>50 55 57 63</small>	
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 APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>Well</b> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <b>8205</b> N <b>520</b> 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 <b>300</b> FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL <b>0</b> INCH <small>NEAREST INCH</small>		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> JETTED <input type="radio"/> Jetted & DRIVEN <input type="radio"/> <small>30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)</small> <small>37 CABLE REVERSE-ROTary DRIVE-POINT</small> other	
REPLACEMENT OR DEEPENED 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 DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) <b>41</b> <b>52</b>		11/4/99 GROUT @ 10' CC 21' CASING GROUT TAG OK POST-PONED LOC OK MR 11/4/99 POST-PONED TAG OK LOC OK	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)			
APPROP. PERMIT NUMBER <b>54</b> <b>GAP</b> <b>63</b> FORCE <b>MR</b> <b>HO-94-2004</b> <small>WRITE INITIALS IN BOX PERMIT No. 70 71 72 73 74 75 76 77 78 79</small>			
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</small>			

Well Permit No. HO - 94-22004  
 Location of property (road) Whitetail Lane  
 Subdivision QUARTERFIELD III Lot 10 Block      Plat      Sec.       
 Well Driller J Mayne Owner Greenfield Homes

Depth of well 205  
Distance of measuring point (M.P.) above ground 2'  
Static water level (S.W.L.) below M.P. 80

Time pump started 7:15 Pumping rate 20 gpm  
Total time 15 min to reach pumping water level 97 ft. below M.P.

[illegible]





**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

**NOTE:** The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: CHARLES A KLEIN & SON INC Telephone #: (410) 549-6960  
Address: 5230 KLEBS MILL ROAD  
SPRINGVILLE, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:

Name (Print): CHARLES A. KLEIN JR. License # 6521

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: WILLIAM SAUCAGE GRAY Telephone #: (410) 917-8800  
Subdivision: QUARTERFIELD Lot #: 10 Well Tag #: HO 94-2004  
Site Address: 11655 WHITETAIL LANE  
ELLINGTON CITY, MD 21043

**Submersible Pump Data**

Make: JACUPL  
Model #: SS400-13P-52  
Pump Capacity 5 GPM  
Well Yield: 20 GPM

**Pitless Adapter**

Make: HARVARD  
Model #: PT800  
Depth: 42" (36" min)  
NSF approved:       

**Well Cap and Electric Conduit**

Two piece watertight cap: ✓  
Screened, vented well cap: ✓  
Cap secured to casing: ✓  
Conduit min 18" B.G.: ✓  
Conduit secured to well cap:       

Depth of well encountered at time of pump installation: 205 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors or Cable guards are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt:       

**Piping to house**

Type: POLYETHYLENE  
PSI: 1" (160 psi min)  
Depth of supply line:        (36" min)

**House Connection**

PVC sleeved to undisturbed soil at wall penetration: Yes  
Approximate length of sleeve:         
Sleeve caulked and sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Charles A Klein Jr

date 2/19/01

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: 10/1/01 anytime

Date Insp. Approved: 10/1/01

Inspection Data: Pitless adapter and water supply line at least 36" below grade

Two piece cap installed and attached to casing securely

Elec. conduit extends at least 18" below grade/attached to cap properly

Safety rope installed inside of well casing

Correct well tag attached properly and casing 8" above finished grade

Water supply line sleeved adequately at house connection

Adequate grout observed below pitless adapter

SRK  
✓  
✓  
✓  
✓  
✓  
✓

Well  
Site OK  
MR 12/7/98

~~WATCHING~~ SEE

523.3418 W

A close-up photograph of a circular object, likely a coin or a small metal plate. The number '5000' is clearly visible, inscribed in a bold, sans-serif font. The object has a metallic sheen and is surrounded by a dark, textured background.

NONBULBULAE PRESER  
PARCEL A  
ZONED RC-BIO

30 312 314 316 318

N46°23'20"W

WY 11

This micrograph shows a cross-section of a plant stem. The vascular bundles are arranged in a ring, with xylem on the inside and phloem on the outside. The surrounding tissue is the cortex, which appears as a lighter, more uniform area.

1800 IN = 306.00  
1800 IN = 306.00

0  
ANK