C 1 . 5120 (THIS NUMBER IS TO BE F	SEQUENCE N (DENV USE OF		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. COUNTY NUMBER
IN COLS. 3-6 CN ALL CAR ST/CO USE ONLY DATE Received	DATE WELL COM	MPLETE	Depth of Well 22 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" - 9 4 - - - - - - - - - -
OWNER	ETCH	ME	e K	
STREET OR RFD	last name	JAPI		GLEVELG 1
SUBDIVISION		ELD.	SECTION SECTION	LOT
Not required for STATE THE KIND OF PENETRATED, THEIR	driven wells FORMATIONS COLOR, DEPTH,		WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST
THICKNESS AND IF DESCRIPTION (Use	FEET	Check if water	CEMENT C M BENTONITE CLAY B C 45 46	HOURS PUMPED (nearest hour)
additional sheets if needed)	FROM TO	bearing	NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from ft.	PUMPING RATE (gal. per min. 11 15 to nearest gal.) 11 15 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
Shuly	2 30		casing CASING RECORD types insert	BEFORE PUMPING WHEN PUMPING 17 20 122 25
Syncl Some	30 35		appropriate code below PLASTIC OTHER	TYPE OF PUMP USED (for test) A air P piston T turbine other
MICKA	35 60		MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O (describe below)
SAND SOME	60 65	V	60 61 63 64 66 70	J jet S submersible
MICKA	65 50	A.	OTHER CASING (if used) A diameter depth (feet)	PUMP INSTALLED
SAND Stone	90 95	/	H inch from to	DRILLER WILL INSTALL PUMP YES NO
MICKA	95 265		CAS IN G	(CIRCLE) (YES OF NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
	W 4 16		screen type or open hole insert appropriate code below SCREEN RECORD STEEL BRASS OPEN HOLE PLD OT PLASTIC OTHER	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 37 41
			DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box
		5	A 8 9 11 15 17 21 H 2	and enter casing height) LAND SURFACE (nearest
CIRCLE APPROPI		ED	S 23 24 26 30 32 36 R 3 S 29 41 45 47 51	49 foot)
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED			E 38 39 41 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION			SLOT SIZE 123 DIAMETER TTTT (NEAREST	BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN			OF SCREEN INCH)	(MEASUREMENTS TO WELL)
CCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" ND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE BOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE-IENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.			from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT	vell 2 200'
DRILLERS IDENT. NO. 1			F IN BOX 68 OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	20' 100 110
ORILLERS SIGNATURE MUST MATCH SIGNATURE ON APPLICATION)			T (E.R.O.S.) W Q	Programme (Ct)
ITE SUPERVISOR (sign. of driller or journeyman sponsible for sitework if different from permittee)			70 72 TELESCOPE LOG OTHER DATA CASING INDICATOR	
Sponsible for sitework if C	america nom perm	nttoe)	COUNTY	

1 4 0 4 4				STATE	PERMIT NUMBER
B 7 1241 SEQUEN	E ONLY)		MARYLAND	TO I A I	OLET TATLISTS
1 2 3 NUMBER IS TO BE PUNCHED		APPLICATION FOR PERMIT TO DRILL WELL		0 -	7171-1011414
IN COLS. 3-6 ON ALL CARDS)		please pi	rint or type	" fill in ti	his form completely 79
Date Received (APA)			B 3	LOCATION OF	: WE LL
01/101/19171 ow	NER INFORMAT	TION	HANKARIA		$\neg \neg$
RELICH MAR	K		8 COUNTY		21
15 Last Name	Owner Fi	rst Name 34	THE WAR	FIELDS	
6030 SHEF	HERD	SZUARE	23 SUBDIVISION	777	42
36 S	Street or RFD	55 101 01 101/11/1	SECTION 44 46	LOT 48 50	
57 Town	70 S	tate 72 Zio 76	GLEWELD		
DRILLER INFORMATION		MSD/MGD/MWD	52 NEAREST TOWN	LOT	71
11 1 1/100 0	VE	77/61	MILES FROM TOWN (enter	O if in town)	M I
Driller's Name	e (77 License No. 80	B 4	7.5	
Firm Name	DRILLING)	1 2 DIRECTION OF WELL FROM	SAPEI	AR WHAT POAD	
9120 Brown Chunch Nd. WIT Airy			TOWN (CIRCLE BOX)	NE)	AN WHAI NOAD
Address	una	6/25/94		ON MARINELL CH	NORTH N
Signature	7	Date	NW 8 NE 8-9	ON WHICH SI (CIRCLE APP	ROPRIATE BOX) WEST AST
B 2 WELL	INFORMATION			34	37 WES S 37 S 37 H
APPROX. PUMPING RATE (GAL.	PER MIN.) ST		(TOWN) E	DIST	ANCE FROM ROAD
AVERAGE DAILY QUANTITY NE	EDED 8	12			ENTER FT OR MI
(GAL. PER DAY)	20	0	S S S S		38 39
HOE FOR WATER	14	20	8		BLK: PARCEL
USE FOR WATER	(CIRCLE APPROP	HIATE BOX)		NOT TO BE FILLED HEALTH DEPARTM	
D HOME (SINGLE OR DOI		Marie Talabatha Carlo Ca	Hardon	TEALIN DEFAILM	O# Un DOD
FARMING (LIVESTOCK)	WATERING & AGR	ICULTURAL	COUNTY NAME		COUNTY NO.
INDUSTRIAL, COMMERC			STATE		
22 L' OTHER (REQUIRES APR			DATE ISSUED		INSERT S
P APPROPRIATION PERMI			0208946	harles Bere	en Vices 18/95
APPROVAL)	AONITODINO (NAN	DEOUBE	MODEL FOR	SIGNATURE EAST	EXP. DATE
TEST, OBSERVATION, MAPPROPRIATION PERMI		REQUIRE	GRID 50	O GRID 57	7 1 4 0 0 0
			SHOW MAJOR FEATURE		5-94 9:30am
APPROXIMATE DEPTH OF WEL	L / 50	FEET	BOX & LOCATE WELL WITH AN X	1-0-	3 19 1: Joan
-	/ //	28	SOURCES OF DRILLING	WATER	(No mey)
APPROXIMATE DIAMETER OF V	WELL	NEAREST INCH	well		(100-1)
METHOD OF	DOULING		2.		
BORED (or Augered)	DRILLING (circ	Jetted & <u>DRIVEN</u>	3.	ļ ·	
30 AIR-ROTary AIR-PERcu		OTARY (Hydraulic Rotary)	FROM THE MAP HERE	ER	0
3/	rse-ROTary	DRive-POINT	THOM THE WAY		
other		<u> </u>	E 750	4	
REPLACEMENT	OR DEEDENER	WELLS	N 5116	4 000	
	APPROPRIATE BOX		314	000	
N THIS WELL WILL NOT RE	EPLACE AN EXISTI	NG WELL	DRAW A SKETCH BELOW		
THIS WELL WILL REPLACE	CE A WELL THAT V		DISTANCE FROM WELL		
39 S THIS WELL WILL REPLACE		WILL BE USED AS	N		JUNCTION
A STANDBY-CONTACT L	OCAL APPROVING		A.A.	IE DRI	14
POLICY ON STANDBY W		ELL	Too L mich	LOLE DRI	120
PERMIT NUMBER OF WELL TO		<u>.</u>	1/4	1	Y
(IF AVAILABLE) 41	52	1,	15.	1	
	L 1111 10==1	NE ONILVA	1/1	SAPLINY	lus h
Not to be filled in	by aniler (OEP US	DE UNLY)	0 5	1	- CF-
APPROP. PERMIT NUMBER	G		101/ 2	1	2.00
WRITE	54	63	1 59	7	1000
FORCE INTIALS PERMIT	11 12	4-0122	12		& well
67 68	70 71 72 73	74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE:	= APPROVING AUT	THORITIES SHOULD USE SE	PARATE SHEET IF NEEDED =		7-

HOWARD COUNTY HEALTH DEPARTMENT Eureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PURP AND PRESSURE TANK INSTALLATION

	- /	
New Installation Replacement		Receipt # 2/17/95
Name of Installer CHAR	PLES A. KLEIN * SONS, J	40. Telephone (410) 549-6
Tienna Humban 752	iller X Well Driller	
Name of Property Owner Subdivision ARFIEL Site Address 24831 3	DS Lot & 24 W	Telephone ell Teg # 40 - 94 - 0/22
Pump 1. Typs a. Deep well jet b. Shallow well jet c. Submersible 2. Make	Motor 1. Horsepower 2. RPM 3. Voltage a. 110	Pitless Adapter 1. Make 2. Model # 3. Depth
	orestors Cable guards	Princi wining from
W.PI OK'd by	Piping 1 Type 2 Size NSF and/or BOCA Code approved 4. Depth of supply line	3. Static water level ft. 4. Will water supply
I understand that it is a Department when the instal is null and void).	y responsibility to notify ation is ready for inspecti	the Howard County Head on (otherwise this pa:
	e is true to the best of my s	knowledge.
	Date:	2/12/95
Note: A sticker indicating on the well casing at the	spproval/statue of the ins	tallation wi' > placed