

C 1 18650 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received
MM DD YY
06 24 13

DATE WELL COMPLETED

MM DD YY
6-11-13

Depth of Well

22 290 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"HD-95-2527
28 29 30 31 32 33 34 35 36 37OWNER Miller Thomas
WELL SITE ADDRESS 3592 Sheel Dr last name first name
SUBDIVISION Wayside Est SECTION TOWN Ellicott City LOT 4

WELL LOG

Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Top Soil	0	10	
Soft Brn Sand	10	45	
Hard Brn Sand	45	70	
Gry Rock	70	160	
Red Rock	160	180	
Gry Rock	180	260	
Green Rock	260	290	

NUMBER OF UNSUCCESSFUL WELLS:

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 WD 553

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. AWD 942

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

GROUTING RECORD

WELL HAS BEEN GROUTED yes no
(Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 47 NO. OF POUNDS 2350

GALLONS OF WATER 1175

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
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN CASING TYPE PL
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 70EACH CASING
OTHER CASING (if used)
diameter depth (feet)
inch from toscreen type or open hole
insert appropriate code belowST BR HO
STEEL BRASS OPEN HOLE
PL BRONZE OT
PLASTIC OTHER

C 2 DEPTH (nearest ft.)

1 2
A 8 9 11 15 17 21
C 23 24 26 30 32 36
S 38 39 41 45 47 51
R
E
E
N
SLOT SIZE 1 2 3DIAMETER OF SCREEN (NEAREST INCH)
56 60
from toGRAVEL PACK IF WELL DRILLED
WAS FLOWING WELL
INSERT F IN BOX 68MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.F.O.S.) W Q70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 8 9

PUMPING RATE (gal. per min.) 11 15

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20 ft.

WHEN PUMPING 22 25 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
(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

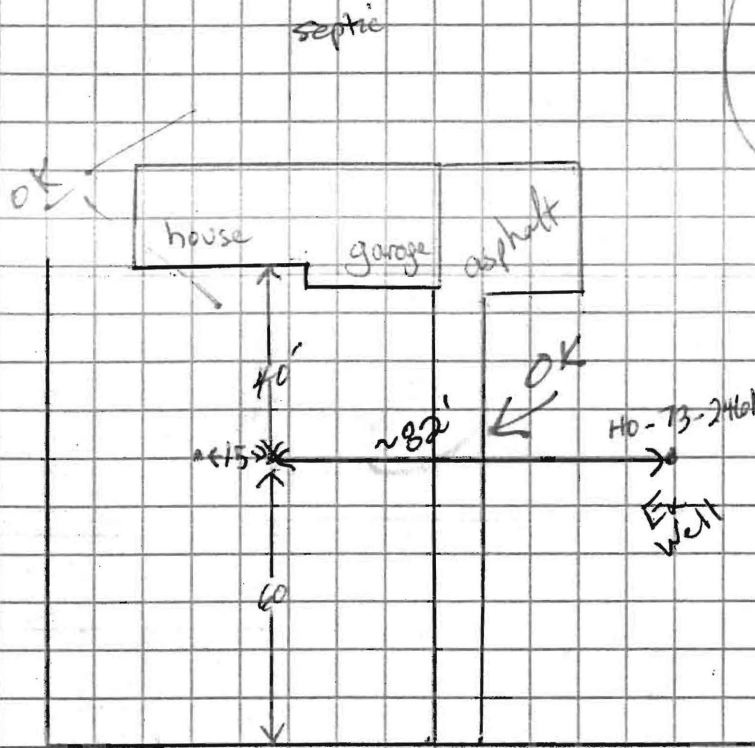
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH
(nearest ft.) 43 47CASING HEIGHT (circle appropriate box
and enter casing height)+ above LAND SURFACE (nearest foot)
- below 49 50 51LATITUDE 39.27193
LONGITUDE 76.95632
(DEFAULT COORD. WGS 84)
NOTES:
Front
x x

B 1 21201 <small>1 2 3 6</small>		SEQUENCE NO. (MDE USE ONLY)	EMERGENCY/TEMP NO. IF ANY 545042A		STATE PERMIT NUMBER 40-95-2527 <small>70 79</small> fill in this form completely	
Date Received (APA) 05/16/13 <small>8 MM DD YY 13</small>			STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type			
OWNER INFORMATION 15 Last Name Miller Owner First Name Thomas 34 36 Street or RFD 3592 School Dr 55 57 Town Ellicott City 70 State MD 72 Zip 21042 76			B 3 LOCATION OF WELL 8 COUNTY Howard Co. 21 23 SUBDIVISION Wayside Estates 42 SECTION 4 LOT 4 <small>44 46 48 50</small> 52 NEAREST TOWN Ellicott City 71			
DRILLER INFORMATION Driller's Name C. John Hen 76 License No. MWD 553 81 Firm Name Allied Environmental Svcs Address PO Box 129, Annapolne MD 20701 Signature C. John Hen Date _____			B 4 SOURCES OF DRILLING WATER 1. Public 2. _____ 3. _____			
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20			3592 School Dr 11 STREET ADDRESS 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 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 0022 BLK: 0011 PARCEL 0490			
USE FOR WATER (CIRCLE APPROPRIATE BOX) [D] DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 [I] INDUSTRIAL, COMMERCIAL, DEWATERING [P] PUBLIC WATER SUPPLY WELL [T] TEST, OBSERVATION, MONITORING [O] OPEN LOOP GEOTHERMAL [C] CLOSED LOOP GEOTHERMAL 2 loops			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. 13 STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED 5/30/13 CO SIGNATURE Kevin Wall EXP. DATE 5/30/14 <small>43 MM DD YY 48</small>			
APPROXIMATE DEPTH OF WELL 290 FEET <small>24 28</small>			APPROXIMATE DIAMETER OF WELL 6 INCH <small>NEAREST INCH</small>			
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 _____			PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL <div style="text-align: center;"> </div>			
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 39 [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS [D] THIS WELL WILL DEEPEEN 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. 40-95-2527 <small>70 71 72 73 74 75 76 77 78 79</small>			
SPECIAL CONDITIONS <small>NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>						



SITE PLAN



3592 School Dr
Baltimore City

1" = 40'

Sediment Control Protocol:

Distance From House: 40'
From Septic: 15' + 15' = 30'
From Sewer: n/a
From Property Line: 80'
From Street: 60'

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

H0-95-2527

INFORMATION-GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD.
BALTIMORE, MARYLAND 21230

No issues
are marked
to leave asphalt
n/a
H0-73-2461

Comments:

Person Completing Form: GUZZARDI



WARD COUNTY HEALTH DEPARTMENT

45042

CODES

DATE

5/16/13

WS

☐ CASH

☒ CHECK

NO.

29293

Received From

For

allied Environmental
Geo Thermal Wells - 3592 Schell Dr.
8535 Old Frederick Rd

Three hundred Twenty**//

Dollars

Received By

J King

320.00