

C1 6017

SEQUENCE NO.
(MDE 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 A-391441 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received

9/9/97

DATE WELL COMPLETED

MM DD YY
4 15 97

Depth of Well

22 305 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

H0-94-1104

OWNER BIMESEFER J.W.
STREET OR RFD GOLDEN HARVEST CT first name
SUBDIVISION CARRVILLE MANOR SECTION LOT 6

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	
Sandy	2	20	✓
SANDSTONE	20	25	
MICKA	25	90	
SANDSTONE	90	95	✓
MICKA	95	220	
FLINT ROCK	220	225	✓
MICKA	225	305	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)YES NO
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 20 NO. OF POUNDS 2080

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)Casing types
insert
appropriate
code
below
Casing RECORD
ST STEEL CO CONCRETE
PL PLASTIC OT OTHERMAIN CASING TYPE PL
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 88OTHER CASING (if used)
diameter depth (feet)
inch from toscreen type or open hole
insert appropriate code below
SCREEN RECORD
ST STEEL BR BRASS HO OPEN
PL PLASTIC OT OTHER

C2 DEPTH (nearest ft.)

E 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21
A 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36
C 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51
S
R
E
E
N
SLOT SIZE 1 2 3
DIAMETER 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.R.O.S.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

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 30 ft.

WHEN PUMPING 50 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 WILL INSTALL 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 29CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35

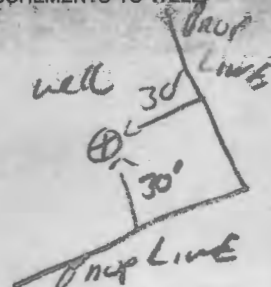
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above LAND SURFACE 2 (nearest foot)
- below 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)

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.

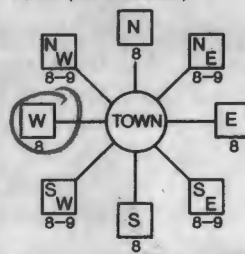
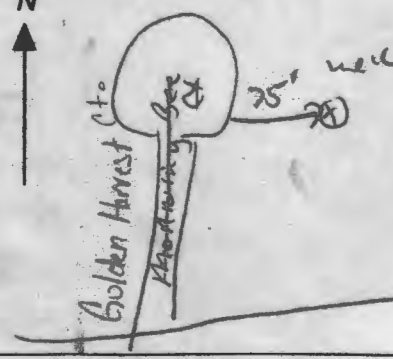
DRILLERS LIC. NO. M S D 1116

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M S D 1112

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

COUNTY

B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block;">8296</div> <small>SEQUENCE NO. (MDE USE ONLY)</small> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">40-94-1104</div> <small>fill in this form completely</small>
Date Received (APA) <div style="border: 1px solid black; padding: 2px; display: inline-block;">033197</div> OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; display: inline-block;">GIMESTER J W</div> <small>Last Name Owner First Name</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11920 MEADOW LISA</div> <small>Street or RFD</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CLARKSVILLE MD 21029</div> <small>Town State Zip</small>	B 3 LOCATION OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">HOWARD</div> <small>COUNTY</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CLARKSVILLE MANOR</div> <small>SUBDIVISION</small> SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block;">4</div> LOT <div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CLARKSVILLE</div> <small>NEAREST TOWN</small> MILES FROM TOWN (enter 0 if in town) <div style="border: 1px solid black; padding: 2px; display: inline-block;">1</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">MI</div>	
DRILLER INFORMATION CIRCLE: MSD MGD/MWD <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne</div> <small>Driller's Name</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne (well drilling)</div> <small>Firm Name</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">9120 Brown Church Rd, Mt. Airy</div> <small>Address</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne 3/27/97</div> <small>Signature Date</small>	B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block;">Golden Harvest Ct.</div> <small>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">75</div> <small>DISTANCE FROM ROAD</small> ENTER FT OR MI <div style="border: 1px solid black; padding: 2px; display: inline-block;">FT</div> TAX MAP: <div style="border: 1px solid black; padding: 2px; display: inline-block;">34</div> BLK: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12</div> PARCEL: <div style="border: 1px solid black; padding: 2px; display: inline-block;">398</div>	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block;">5</div> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">500</div> USE FOR WATER (CIRCLE APPROPRIATE BOX) <div style="border: 1px solid black; padding: 2px; display: inline-block;">D</div> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">F</div> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <div style="border: 1px solid black; padding: 2px; display: inline-block;">I</div> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <div style="border: 1px solid black; padding: 2px; display: inline-block;">P</div> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT-AND STATE HEALTH DEPARTMENT APPROVAL) <div style="border: 1px solid black; padding: 2px; display: inline-block;">T</div> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="border: 1px solid black; padding: 2px; display: inline-block;">HOWARD</div> <small>COUNTY NAME</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">A-39144</div> <small>COUNTY NO.</small> STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block;">04/1/97</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">4/1/98</div> <small>CO SIGNATURE</small> <small>EXP. DATE</small> NORTH GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">500000</div> EAST GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">815000</div>	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">190</div> FEET APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">6"</div> INCH METHOD OF DRILLING (circle one) <div style="border: 1px solid black; padding: 2px; display: inline-block;">BORED (or Augered)</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">JETTED</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Jettied & DRIVEN</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">AIR-ROTARY</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">AIR-PERCussion</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">ROTARY (Hydraulic Rotary)</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CABLE</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">REVERSE-ROTARY</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">DRIVE-POINT</div> 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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">815</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">500</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 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <div style="border: 1px solid black; padding: 2px; display: inline-block;">N</div> THIS WELL WILL NOT REPLACE AN EXISTING WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">Y</div> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <div style="border: 1px solid black; padding: 2px; display: inline-block;">S</div> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <div style="border: 1px solid black; padding: 2px; display: inline-block;">D</div> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <div style="border: 1px solid black; padding: 2px; display: inline-block;">41</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">52</div>	Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">54</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">GAP</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">83</div> FORCE <div style="border: 1px solid black; padding: 2px; display: inline-block;">G5</div> WRITE INITIALS IN BOX <div style="border: 1px solid black; padding: 2px; display: inline-block;">H0-94-1104</div> PERMIT No. <div style="border: 1px solid black; padding: 2px; display: inline-block;">70</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">71</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">72</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">73</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">74</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">75</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">76</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">77</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">78</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">79</div>	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -		

Depth of well 305
Distance of measuring point (M.P.) above ground 2
Static water level (S.W.L.) below M.P. 30

HD-224

80% Casing 35 open 20 BAY'S

SEND REPORT TO:		DEPARTMENT OF HEALTH AND MENTAL HYGIENE Laboratories Administration 201 W. Preston St. P.O. Box 2355, Baltimore, Maryland 21203 J. Mehsen Joseph, Ph.D., Director		Lab No. _____ Date Received _____ <div style="font-size: 1.5em; opacity: 0.5; margin-top: 10px;">C304064 415 5</div>	
DEPARTMENT OF HEALTH J. MEHSEN JOSEPH, PH.D. DIRECTOR 1100 ALLESTREE MILLS DRIVE BALTIMORE CITY, MD 21043		WATER ANALYSIS		Do not write above this line.	
S A M P L E I D	Bottle Number	Name	County	County Code	13
	Source			Data Category Code	4F
	Collected: Date	Time	Collector & Phone	Submitter Code	X
	CHECK (one per box)				
	<input checked="" type="checkbox"/> Drinking Water <input type="checkbox"/> Landfill <input type="checkbox"/> Stream <input type="checkbox"/> Other	<input type="checkbox"/> Community <input type="checkbox"/> Non-community <input checked="" type="checkbox"/> Private <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Source (raw water) <input type="checkbox"/> Distribution (treated) <input type="checkbox"/> MCL	<input type="checkbox"/> Emergency <input type="checkbox"/> Routine <input type="checkbox"/> Recheck <input type="checkbox"/> Special	Federal Project S
F I E L D	Plant No.	Sampling Station	Preservation: Iced <input checked="" type="checkbox"/>	Acid <input checked="" type="checkbox"/>	Type of Acid H₂SO₄
	pH 	Chlorine: Free 	Total 	Specific Conductance 	
	Notes to Lab/Remarks: H10-94-1104				
	J.L.H.				

CHECK TESTS	TESTS	CODES	ERROR CODE	G/L	RESULTS	DATE ANALYZED	ANALYST INITIALS
	Alkalinity (Total)	00410					
	Alkalinity, Ca CO ₃ Sat.	74023					
	Ammonia - N	00608					
	Chloride	00940					
	Color*	00081					
	Conductance*, spec.	00095					
	Dissolved Solids	70300					
	Hardness	00900					
	Fluoride	00951					
	Nitrite, N	00615					
	Nitrate - Nitrite, N	00630			5.3	4-16-97	BR
	pH*, Ca CO ₃ Sat.	70311					
	Sulfate	00945					
	Total Solids	00500					
	Turbidity*	00076					
	Other:						

* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested 01
DHMH 90-A 10/93

Section Chief **Asoka I. Katumuluwa**
SUBMITTER'S COPY

Date Reported

APR 16 1997