

B 1 <div style="border: 1px solid black; padding: 5px; font-size: 24px; font-weight: bold;">67551</div>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <div style="font-size: 24px; font-weight: bold;">Ho-18-0199</div> fill in this form completely
Date Received (APA) <div style="border: 1px solid black; padding: 5px;"> 8 MM DD YY 13 <u>Burns</u> <u>Keith</u> 15 Last Name Owner First Name 34 <u>11882 Simpson Road</u> 36 Street or RFD 55 <u>Clarksville MD 21029</u> 57 Town 70 State 72 Zip 76 </div>		B 3 LOCATION OF WELL <div style="border: 1px solid black; padding: 5px;"> <u>Howard</u> 8 COUNTY 21 <u>2207</u> 23 SUBDIVISION 42 SECTION <u>44</u> <u>46</u> LOT <u>7</u> <u>50</u> <u>Clarksville</u> 52 NEAREST TOWN 71 </div>	
OWNER INFORMATION <div style="border: 1px solid black; padding: 5px;"> <u>C. John Hess</u> <u>M</u> <u>MD</u> <u>553</u> Driller's Name 76 License No. 81 <u>Carroll Water-Systems</u> Firm Name <u>12047 Fays Road, Cockeysville</u> Address <u>C. John Hess</u> <u>5/22/20</u> Signature Date </div>		B 4 SOURCES OF DRILLING WATER <div style="border: 1px solid black; padding: 5px;"> <u>Public</u> 1 <u>5/28/20 - yield:</u> <u>9 gpm insp.</u> <u>6 hr yield 3.9 gpm</u> <u>road 12 bags</u> <u>9 psd the well</u> 3 </div>	
DRILLER INFORMATION <div style="border: 1px solid black; padding: 5px;"> <u>12047 Fays Road, Cockeysville</u> Address <u>C. John Hess</u> <u>5/22/20</u> Signature Date </div>		<div style="border: 1px solid black; padding: 5px;"> <u>11882 Simpson Rd</u> 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> NORTH N WEST W SOUTH S EAST E </div> <div style="text-align: center;"> 34 <u>30</u> 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 </div> </div> TAX MAP: <u>41</u> BLK: _____ PARCEL <u>042</u> </div>	
B 2 WELL INFORMATION <div style="border: 1px solid black; padding: 5px;"> APPROX. PUMPING RATE (GAL. PER MIN.) 8 <u>5</u> 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 <u>500</u> 20 </div>		USE FOR WATER (CIRCLE APPROPRIATE BOX) <div style="border: 1px solid black; padding: 5px;"> <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> OPEN LOOP GEOTHERMAL <input type="checkbox"/> CLOSED LOOP GEOTHERMAL </div>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH		HEALTH DEPARTMENT APPROVAL <div style="border: 1px solid black; padding: 5px;"> <u>Howard</u> COUNTY NAME STATE SIGNATURE DATE ISSUED <u>05/22/2020</u> 43 MM DD YY 48 CO SIGNATURE <u>[Signature]</u> EXP. DATE <u>05/22/2024</u> DON: <u>5/26/2020</u> DOG: <u>5/28/20</u> DOY: <u>5/28/20</u> </div>	
METHOD OF DRILLING (circle one) <div style="border: 1px solid black; padding: 5px;"> BORED (or Augered) <u>JETTED</u> <u>Jettied & DRIVEN</u> 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other _____ </div>		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="border: 1px solid black; padding: 5px;"> <u>11882</u> <u>45'</u> <u>45'</u> <u>21'</u> <u>21'</u> <u>new</u> <u>5/27/20</u> <u>bedrock 73'</u> <u>casing 81'</u> <u>36" @ 10 AM,</u> <u>no water</u> </div>	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52 </div>		Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ <u>G</u> _____ PERMIT No. <u>Ho-18-0199</u> 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED <div style="font-size: 24px; font-weight: bold;">NA CL TDS SAMPLES</div>			

Send Report To:

Bert Nixon

State of Maryland
MDH - Laboratories Administration

Division of Environmental Sciences

TRACE METALS LABORATORY

1770 Ashland Avenue
Baltimore, Maryland 21205

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

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 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

E20003672001

Received: 05/29/2020

Metals

HO-18-0199

LABORATORY ANALYSIS REQUEST

Do not write above this line

Please Print

Sample ID No: HO-18-0199 Site Name: 11882 Simpson Rd ^{rep.} Well County: Howard

Sample Source: 11882 Simpson Rd Clarksville, MD 21029 Collector: R. Rappaport
Street Town or City Name

Date Collected: 5/28/2020 Time Collected: 1230 a.m. / PM Phone #: 410-313-1781

Sample Preserved By: ☒ Field ☐ ESRL ☐ WMRL ☐ Central Lab

Preservative Used: ☒ HNO₃ _____ mL pH: _____ pH: < 2
(field use only) (lab use only)

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☒ Liquid
Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid
Code ☐ ☐ Non-Community ☐ Sediment ☐ Other _____
☐ Private

Specify Program: ☒ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other _____

Type of Sample Preparation: ☐ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals
(field preparation required)

Remarks: Sample taken for field test

*Place a ☒ by the element(s) requested for testing

<input checked="" type="checkbox"/>	Element	Lab Use	<input checked="" type="checkbox"/>	Element	Lab Use	<input checked="" type="checkbox"/>	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Uranium (U)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cobalt (Co)			Zinc (Zn)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
<input checked="" type="checkbox"/>	Sodium (Na)	<u>645</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: _____

Date Reported: ____/____/____

•Phone: (443) 681 - 4596

•Fax: (443) 681 - 4507



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
TRACE METALS LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



Certificate of Analysis

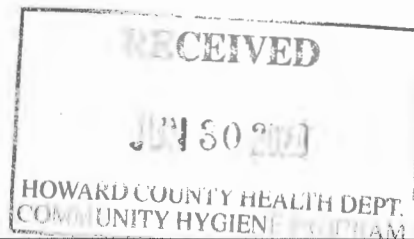
HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project No: E20003672 Date Coll.: 05/28/2020 Date Received: 05/29/2020 Submitted By: Rappaport

Field ID: HO-18-0199
Lab No.: E20003672001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	10.76	ppm	06/11/2020

Comments:



Approved by: Wanda Tressen

Approval date: 06/15/2020

**The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1. Samples are tested as received.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6944 and arrange for return or destruction.

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

May 28, 2020

Keith Burns
11882 Simpson Rd.
Clarksville, MD. 21029

RE: **Replacement Well Sampling**
11882 Simpson Rd.
Clarksville, MD. 21029
Well Permit # HO-18-0199

Mr. Burns:

According to our records, your new well has been in use to the dwelling. We request that you contact the Community Hygiene Program at (410) 313-1773 to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). This sampling includes testing for bacteria, nitrates, turbidity, sand, total dissolved solids, sodium and chloride. Please be advised that the Health Department has already taken samples for sodium, chloride and total dissolved solids on May 28, 2020, please make arrangements to have the other samples taken as soon as possible.

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

The old well on the property, Well Tag #HO-73-2411 must be sealed and abandoned according to COMAR 26.04.04.34 by a Maryland licensed well driller.

If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office. If you have any further questions, you can call me at 410-313-2643. Otherwise, call Community Hygiene at 410-313-1773 to schedule or arrange for them to collect the subsequent water samples.

If you have any questions or would like to discuss these matters further, please call me at (410) 313-1781. Thank you for your attention to these important matters.

Respectfully,



Ryan Rappaport, LEHS
Well & Septic Program

Copy given to
CH on 5/28/20

SITE INSPECTION SHEET

OWNER: Keith Burns

PHONE #: _____

ADDRESS: 11882 Simpson Rd
Clarksville MD 21029

CONTRACTOR: Carroll Water Systems

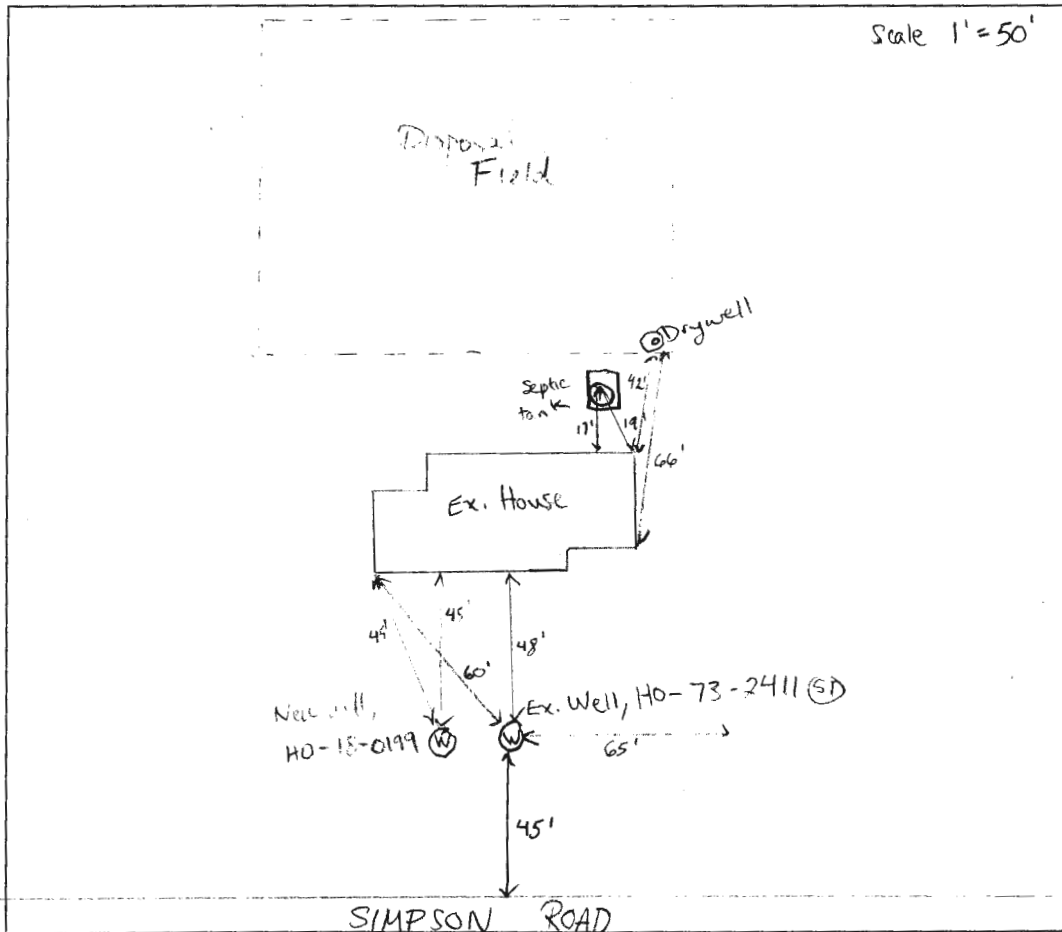
WELL TAG #: old. HO-73-2411 new: HO-15-0199

SUBDIVISION: _____ LOT: 7

COUNTY #: 13

PROPOSAL: owner out of water, little recharge Em. rep. well

LOCATION DIAGRAM



COMMENTS: special conditions: NA CL TDS samples, abandon +
seal ex. well

DATE: 5/26/2020

INSPECTOR: Susan Thomas

Thomas, Susan

From: Cabahug, Joseph
Sent: Friday, May 22, 2020 12:19 PM
To: Wolf, Kevin; jhess@carrollwater.com
Cc: tmctaggart@carrollwater.com; Rappaport, Ryan; Thomas, Susan; Martin, Sharhonda; King, Juanita; Youmans, Monna; Beatty, Sheila
Subject: Emergency Replacement Well_11882 Simpson Road

Hello John,

The emergency replacement well has been approved. The Well tag is Ho-18-0199. We will be looking out for the payment. Drilling to start on Tuesday 05/26/2020 per conversation in the field. The scanned copy of the driller permit has not come through our server yet. To be attached later. This is a verbal authorization to drill the Emergency Replacement Well (HO-18-0199).

Special Conditions: Sodium Chloride TDS samples and abandon/seal existing well

Bests,

Joseph C. Cabahug – REHS/RS LEHS II
Environmental Health Specialist
Howard County Health Department
8930 Stanford Blvd.
Columbia, MD 21045
410-313-2643 Office
www.hchealth.org



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instagram.com/hocohealth

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From: Wolf, Kevin
Sent: Thursday, May 21, 2020 4:20 PM
To: jhess@carrollwater.com; Cabahug, Joseph <jcabahug@howardcountymd.gov>
Cc: tmctaggart@carrollwater.com
Subject: Re: emergency well

John,

11am tomorrow 5/22 should be fine. We will bring a well tag with us and can sign and complete the green well permit application at that time.

Here is the link to the property file and also the existing wcr for the well. [http://hcenvhealthinfo.org/hcenvapp_2/index.php/file-search/13047-WS SIMPSON ROAD 11882 05-384125/file](http://hcenvhealthinfo.org/hcenvapp_2/index.php/file-search/13047-WS_SIMPSON_ROAD_11882_05-384125/file)

Thanks,

Kevin M. Wolf, LEHS, REHS/RS

Groundwater Mgmt. Sec. Supervisor

Well & Septic Program

Howard County Health Department

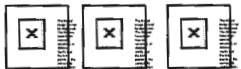
8930 Stanford Blvd.

Columbia, MD 21045

410-313-2645 (Office)

410-313-2648 (Fax)

www.hchealth.org



kwolf@howardcountymd.gov

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are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

From: jhess@carrollwater.com <jhess@carrollwater.com>
Sent: Thursday, May 21, 2020 3:47 PM
To: Wolf, Kevin <KWolf@howardcountymd.gov>
Cc: tmctaggart@carrollwater.com <tmctaggart@carrollwater.com>
Subject: emergency well

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Kevin, I have an emergency well in Clarksville 11882 Simpson Rd. Is there any possibility that someone could meet me there tomorrow ?

John Hess

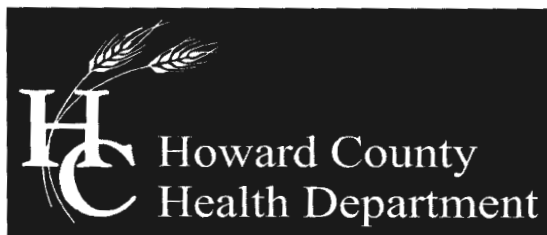
Well Division Director



12047 Falls Road
Cockeysville, MD 21030

OFFICE: 410-876-5100
MOBILE: 410-688-4417
FAX: 410-751-6468

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Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org

Maura J. Rossman, M.D., Health Officer

Sodium, Chloride and Total Dissolved Solids water sampling results

February 2, 2021

Keith Burns
11882 Simpson Rd
Clarksville, MD 21029

Re: 11882 Simpson Rd
Clarksville, MD 21029
Well Permit: HO-18-0199

Dear Keith Burns,

The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from your well water. These samples were collected directly from the raw well water when your well was drilled.

Sodium from your well measured 10.76 mg/L. There is no maximum contaminant level for sodium, however elevated sodium levels in drinking water could affect individuals on low-salt diets. If anyone in your household is on a low-salt diet, you may want to discuss these results with your physician.

Chloride and TDS are both considered secondary contaminants, meaning high concentrations can affect taste, color, odor, or corrosive properties of water but present no risk to health. The secondary maximum contaminant level for chloride is 250 mg/L; **chloride from your well measured 25 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 143 mg/L.**

Feel free to contact me at the number or email below with any questions regarding the results of water sampling.

Respectfully,

Susan Thomas
Environmental Health Specialist
Howard County Health Department
Well and Septic Program
410-313-6287
sathomas@howardcountymd.gov

✓ Cc: File

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

State of Maryland
MDH-Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205
WATER ANALYSIS

E20003671001
Received: 05/29/2020
Inorganic HO-18-0199

Do not write above this line.

Bottle Number	HD-18-0199	Name	Keith Burns	County	Howard	County Code	<input checked="" type="checkbox"/>
Address	11882 Simpson Rd, Clarksville, MD 21029					Data Category Code	<input type="checkbox"/>
Collected: Date	5/28/20	Time	1230 pm	Collector & Phone	R. Reppert 410-313-1781	Submitter Code	<input type="checkbox"/>
CHECK (one per box)							
Drinking Water	<input checked="" type="checkbox"/>	Community	<input type="checkbox"/>	Source (raw water)	<input checked="" type="checkbox"/>	Emergency	<input type="checkbox"/>
Landfill	<input type="checkbox"/>	Non-community	<input type="checkbox"/>	Distribution (treated)	<input type="checkbox"/>	Routine	<input checked="" type="checkbox"/>
Stream	<input type="checkbox"/>	Private	<input checked="" type="checkbox"/>	MCL		Recheck	<input type="checkbox"/>
Other	<input type="checkbox"/>	Other	<input type="checkbox"/>			Special	<input type="checkbox"/>
						Federal Project	<input checked="" type="checkbox"/>

F I E L D	Plant No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Sampling Station	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	RH	Preservation: Iced <input checked="" type="checkbox"/> Acid <input type="checkbox"/>	Type of Acid	<input type="text"/>
	pH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Chlorine: Free	<input type="text"/>	<input type="text"/>	Total	<input type="text"/>	<input type="text"/>	Specific Conductance	<input type="text"/>	<input type="text"/>
	Notes to Lab/Remarks: Sample collected @ yield test													

[illegible]

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

Number of Tests Requested

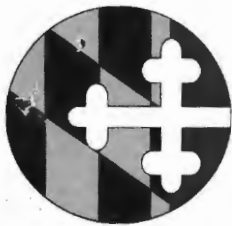
0	2
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Section Chief _____

SUBMITTER'S COPY

***Samples are tested as received.**

Date _____
Reported _____



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Certificate of Analysis

Lab Project NoE20003671 Date Coll. 05/28/2020 Date Received: 05/29/2020 Submitted By: Rappaport

Field ID: HO-18-0199
Lab No.: E20003671001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	25	mg/L	06/01/2020
Total Dissolved Solids	SM 2540C	143	mg/L	06/01/2020

Comments:

Approved by:

Approval date: 06/05/2020

*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN. Samples are tested as received.

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WATER WELL ABANDONMENT SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 2-4-21 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

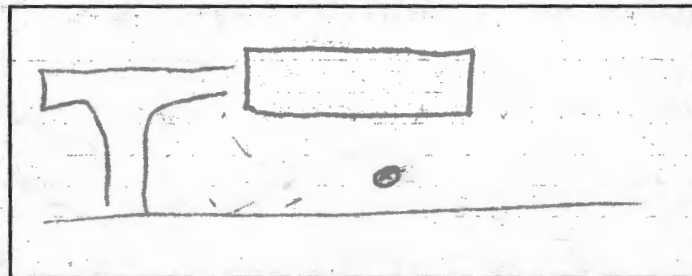
* PERMIT NUMBER OF REPLACEMENT WELL:

* PERSON ABANDONING WELL: Ray DoderlyWELL DRILLER'S LICENSE NUMBER: 212* OWNER'S NAME: Keith BarasCIRCLE: MWD MSD / MGS

* WELL LOCATION:

COUNTY: HowardNEAREST TOWN: ClarksvilleTAX MAP BLOCK PARCEL SUBDIVISION: SECTION: LOT: STREET ADDRESS: 11882 Simpson RdLATITUDE 39.170457LONGITUDE 76.922925

SITE LOCATION MAP



LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Quik Gum	300	0
VOLUME OF MATERIAL USED		
450 gallons 17 Bags		

* TYPE OF WELL BEING ABANDONED:

- ☒ DRILLED ☐ JETTED
☐ BORED ☐ HAND DUG
☐ OTHER (specify)

* USE CODE:

- ☒ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION ☐ GEOTHERMAL

* TYPE OF CASING:

- ☒ STEEL ☐ PLASTIC
☐ CONCRETE ☐ OTHER (specify)

SIZE OF CASING: 6 INCHES IN DIAMETERDEPTH OF WELL: 300 FEET DEEPWAS ANY CASING REMOVED? ☒ YES ☐ NOIf yes, length removed, in feet: WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

MWD MSD / MGS

CIRCLE ONE

DATE

COUNTY

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

FILE INQUIRY NOTES

11222 Simpson Road. out of water

[illegible]