C 1 0 0 4 4 3 SEQUENCE NO (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
DATE Received DATE WELL COMPLETE B 13 DATE WELL COMPLETE 15 20	Depth of Well 22 2 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37	
OWNERlast name	first name	STATE OF THE	
STREET OR RFD	TOWN _	ELCICOTI CITY	
SUBDIVISION WELL LOG	SECTION	LOT	
Not required for driven wells	WELL HAS BEEN GROUTED	C 3	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL 44 44	PUMPING TEST HOURS PUMPED (nearest hour)	
DESCRIPTION (Use FEET Check if water	CEMENT C M BENTONITE CLAY B C	PUMPING RATE (gal. per min.	
additional sheets if needed) FROM TO bearing	NO. OF BAGS NO. OF POUNDS	to nearest gal.)	
Top Soil 0 2 Sandy 2 20	GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP 52 ft. to 54 BOTTOM 58	METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)	
SANdy 2 20	(enter 0 if from surface) casing CASING RECORD	BEFORE PUMPING	
SAND STONE 20 28 -	types insert appropriate STEEL CONCRETE	WHEN PUMPING 22 25 TYPE OF PUMP USED (for test)	
MICICA 28 60	code below PLASTIC OTHER	A air P piston T turbine	
SANCESTONE 60 65 V	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O other (describe 27 below)	
Mick 4 65 200	60 61 63 64 66 70	J jet Submersible	
	C OTHER CASING (if used) A diameter depth (feet) I inch from to	PUMP INSTALLED	
2351 3	inch from to	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO)	
	N G	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
	screen type SCREEN RECORD or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: 29	
	appropriate code below BRONZE HOLE PL OT	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35	
THE SECTION	PLASTIC OTHER	PUMP HORSE POWER PUMP COLUMN LENGTH	
	DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box	
	A 8 9 11 15 17 21	+ above LAND SURFACE	
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	S C 23 24 26 30 32 36 E 3 E 3 8 39 41 45 47 51	LOCATION OF WELL ON LOT	
E ELECTRIC LOG OBTAINED	SLOT SIZE 1 2 3	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR	
P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST	LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES	
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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	GRAVEL PACK	(MEASUREMENTS TO WELL)	
DRILLERS IDENT. NO.	FLOWING WELL INSERT FIN BOX 68 OEP USE ONLY	Pays 500 hall	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) WQ		
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	On wat on,	

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Page	of
Date	41.84
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Review	_	
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FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

will Permit No. HO - \$\frac{\mathbb{f}}{-1385}\\ \taution of property (road) \frac{\mathbb{Gleffelle Hoad}}{\taution of property (road) \mathbb{Gleffell	
Well Driller Kalek Mauril Owner Stere Bulk	
Depth of well 200 ff Distance of measuring point (M.P.) above ground 2 ff Static water level (S.W.L.) below M.P. 25 ff	
High rate pumping reservoir drawdown	
Time pump started 6.45 Pumping rate 10 G.P.M. Total time 15 men to reach pumping water level 50 ft. below M.P.	

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	White to fill 5	(if used)	(gallons per
tervals	2010# 14.11	gailon bucket	(II used)	minute)
7:00	5014	7 pu	1	9 G.P.M
7:15	50	7		96.Pm
2:30	50	フ		9
7:45	50 At	Jou		9
8:00	50	2		9
8:15	50	7		9
8'.30	5014	7 ar		9 G.P.n
8.45	50	7	V	9
9:00	50.	7	Δ	9
9:15	5011	7 su		9 C.Pm
9:30	50			9
9:45	50 ft	7		9
10:00	50 ft	7 m		9 G.Pim
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HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL DRILLER:

My well driller is not to install the pump for my water well, and I hereby certify that it will be my responsibility to have a Pump Permit taken out by a registered master plumber or certified pump installer. It will be my responsibility to notify the Health Department before and during the installation so that inspections can be made by their representative. (Pursuant to Chapter XVII, of the Plumbing Code of Howard County.)

> Steven A. Areen Name)
> 10108 CAMPUS WAY S. NU. 202
> LARGO MD. 20172 (Address) PH-336-0554 (OEP Well Permit Number)

Jef 6, 1586

4/11/86

well location as stoked

140 somple token 1000 pm (19658)

35 ft annular space

38 ft cosing

2 ft cosing above ground

8 bogs censed

NOTE Good finish upon arrival

HTJA3H

18 20 S 07 PH '81

HOWARD COUNTY HOWARD COUNTY