

C1 0399

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
8 13

DATE WELL COMPLETED

MM DD YY
04 13 08

Depth of Well

22 2 @ 330' 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

HO - 95 - 11607
28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

SUBDIVISION

Crehan
Weller Dr.
Potomac Overlook

SECTION

TOWN

Mt. Airy 21771
LOT 28

WELL LOG

Not required for driven wells

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 45 46 NO. OF POUNDS 45 46

GALLONS OF WATER

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
TYPENominal diameter
top (main) casing
(nearest inch)!Total depth
of main casing
(nearest foot)

60 61 63 64 66 70

E
A
C
H
C
A
S
I
N
G

OTHER 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 PL BRONZE OT OTHER
HOLE

C 2

DEPTH (nearest ft.)

1 2
E 8 9 11 15 17 21
A 23 24 26 30 32 36
C 3
S 38 39 41 45 47 51
R
E
N
SLOT SIZE 1 2 3DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.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
(CIRCLE) (YES or NO)

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 29.CAPACITY:
GALLONS PER MINUTE
(to nearest gallon)

31 35

PUMP HORSE POWER

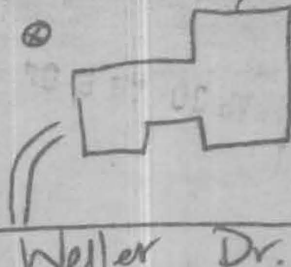
37 41

PUMP COLUMN LENGTH
(nearest ft.)

43 47

CASING HEIGHT (circle appropriate box
and enter casing height)+ above LAND SURFACE (nearest foot)
- below 49 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

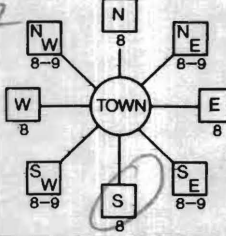
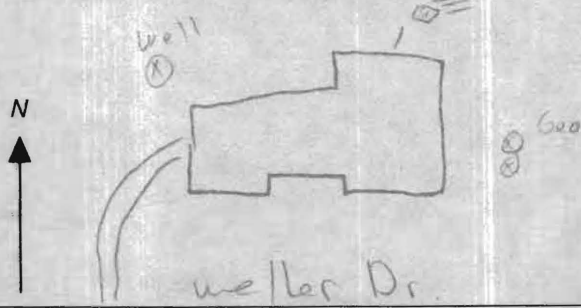
A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND
IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE
CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. 1 M S D 470

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 J S D 131

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

B 1 1 2 3 6 3823	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 52 88 90 please type	STATE PERMIT NUMBER <u>HO-95-1607</u> 70 fill in this form completely 79
Date Received (APA) <u>4/11/08</u> 8 MM DD YY 13 15 Last Name <u>Cnehan</u> Owner First Name <u>Earl</u> 34 36 <u>660 Weller Dr</u> Street or RFD 55 57 <u>Mt Airy</u> Town 70 <u>MD</u> State 72 <u>21771</u> Zip 76		B 3 <u>Howard</u> LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>Katapsco Overlook</u> 42 SECTION <u>44</u> 46 LOT <u>28</u> 48 50 <u>Woodbine / Mt Airy</u> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>1</u> 73 M 1 76 77 78	
DRILLER INFORMATION Driller's Name <u>Gary Shaff</u> M SD 170 76 License No. 81 Firm Name <u>H.H. Drilling</u> Address <u>PO Box 318 Clear Spring, MD 21722</u> Signature <u>Gary Shaff</u> Date <u>4/11/08</u>		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD <u>Weller Dr.</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W 34 95 37 DISTANCE FROM ROAD 4 ENTER FT OR MI 38 39 TAX MAP: <u>2</u> BLK: <u>24</u> PARCEL <u>227</u>	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) <u>8</u> 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>14</u> 20		USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> P PUBLIC WATER SUPPLY WELL <input type="checkbox"/> T TEST, OBSERVATION, MONITORING <input type="checkbox"/> G GEO-THERMAL	
APPROXIMATE DEPTH OF WELL <u>330</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> COUNTY NAME <u>A31280</u> COUNTY NO. STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED <u>4/11/08</u> CO SIGNATURE _____ EXP. DATE _____ 43 MM DD YY 48 NORTH GRID <u>554</u> 0 0 0 EAST GRID <u>778</u> 0 0 0 50 55 57 63	
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 _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. _____ 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE E <u>778</u> N <u>554</u> 000 000	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> S 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"/> D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. _____ 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED <u>not use COMAR approval grant</u>			

LOT 27

N 67° 57' 27" W

300.00'

MARYLAND GRID NORTH

LOT 28

A: 3.147 Ac.±

75' B.R.L.

30' B.R.L.

SECTION 3
LOT 30
PLAT 6782

2.55.26.22 N

2.55.26.22 N

87.62'

20.4'

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Septic

4/11/08

bro well sites
Staked by
driller

SECTION 3
LOT 29
PLAT 6782

2.55.26.22 N

WELTER

60' RIGHT-OF-WAY

DRIVE

NOTE:

FOUNDATION ONLY AT
8-25-87



SURVEYORS CERTIFICATION

THIS ~~MAP~~ / DOES NOT CONSTITUTE A LOT SURVEY.
THIS WILL CERTIFY THAT I HAVE LOCATED THE
IMPROVEMENTS ON THE ABOVE LOT AS INDICATED AND
FIND NO ENCROACHMENTS EXCEPT AS SHOWN.

REGISTERED LAND SURVEYOR 26-Aug-87 DATE
REFERENCE: FLAT DRAWN BY: JRG
P.B. #6784 CHECKED BY: GJT

WALL CHECK
LOT 28

PATAPSCO OVERLOOK

4th ELECTION DISTRICT, HOWARD COUNTY, MD
SCALE = 1" = 60', AUGUST, 1987

DEWBERRY & DAVIS

ENGINEERS - ARCHITECTS - PLANNERS
SURVEYORS

3300 N. RIDGE ROAD ELLICOTT CITY, MD 21043