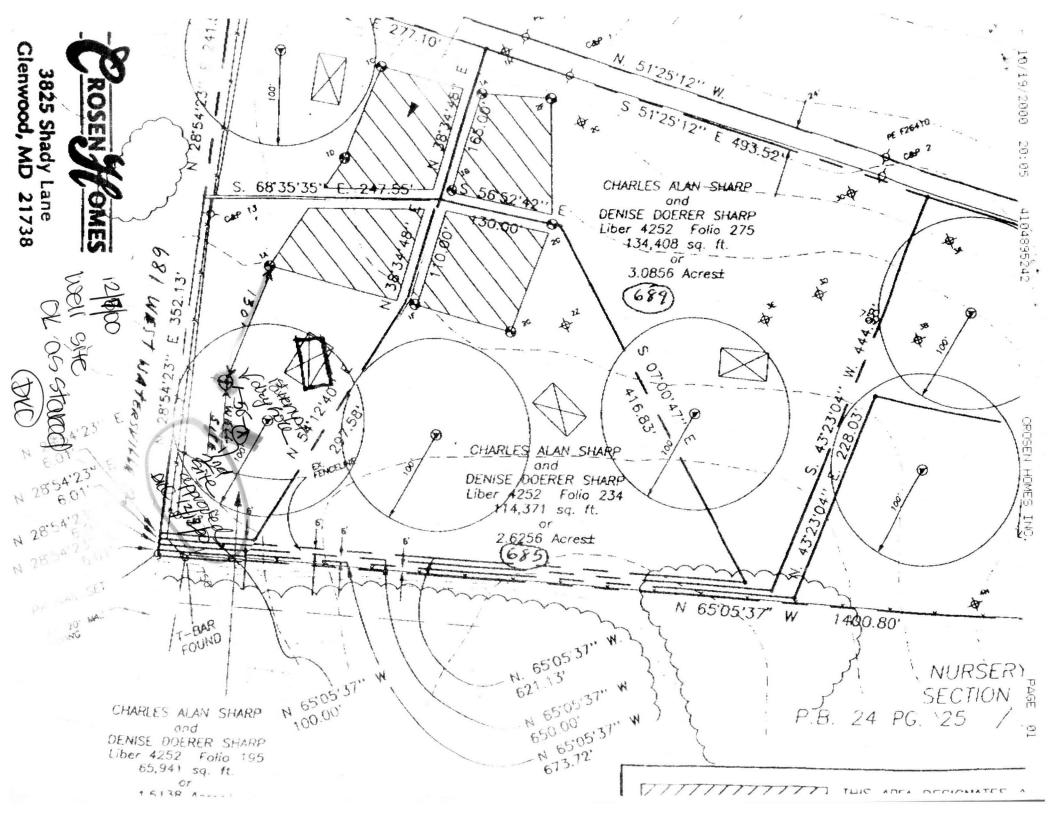
THIS REPORT MUST BE SUBMITTED AFTER SEQUENCE NO. STATE OF MARYLAND WELL IS COMPLETED. (MDE USE ONLY) WELL COMPLETION REPORT COUNTY FILL IN THIS FORM COMPLETELY NUMBER PLEASE TYPE FROM "PERMIT TO DRILL WELL" Depth of Well DATE WELL COMPLETED ST/CO USE ONLY HO-94-2840 400 **DATE** Received 2000 28 29 30 31 32 33 34 35 36 37 (TO NEAREST FOOT) W. Watersville first name OWNER\_ TOWN STREET OR RFD LOT SECTION SUBDIVISION. GROUTING RECORD 3 WELL LOG WELL HAS BEEN GROUTED (Circle Appropriate Box) N **PUMPING TEST** Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING TYPE OF GROUTING MATERIAL (Circle one) HOURS PUMPED (nearest hour) BENTONITE CLAY | B | C CEMENT C M FEET DESCRIPTION (Use additional sheets if needed) if water bearing PUMPING RATE (gal. per min.) NO. OF POUNDS NO. OF BAGS FROM TO 15 GALLONS OF WATER\_ METHOD USED TO Brown S MEASURE PUMPING RATE L DEPTH OF GROUT SEAL (to nearest foot) WATER LEVEL (distance from land surface) 400 воттом 58 (enter 0 if from surface) BEFORE PUMPING CASING RECORD casing types CO WHEN PUMPING insert appropriate TYPE OF PUMP USED (for test) code OIT below turbine T piston A Dry well backfilled 440.40 dielling Total depth Nominal diameter MĂIN other of main casing top (main) casing CASING 0 (describe R rotary (nearest inch)! (nearest foot) centrifugal TYPE below) moterial 6 submersible 66 63 64 61 OTHER CASING (if used) depth (feet) diameter from inch PUMP INSTALLED NO YES DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED SCREEN RECORD screen type 20 PLACE (A,C,J,P,R,S,T,O) or open hole H O BR IN BOX 29. SIT OPEN insert CAPACITY GALLONS PER MINUTE HOLE appropriate BRONZE 35 31 code (to nearest gallon) PL OIT below PLASTIC PUMP HORSE POWER 41 37 PUMP COLUMN LENGTH DEPTH (nearest ft.) C 2 (nearest ft.) NUMBER OF UNSUCCESSFUL WELLS: 43 400 CASING HEIGHT (circle appropriate box and enter casing height) yes 15 17 WELL HYDROFRACTURED N Y + above LAND SURFACE 36 H 30 32 CIRCLE APPROPRIATE LETTER 24 26 (nearest) 23 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED S below foot) 50 51 51 45 47 38 39 41 ELECTRIC LOG OBTAINED LOCATION OF WELL ON LOT TEST WELL CONVERTED TO PRODUCTION SHOW PERMANENT STRUCTURES 3 SLOT SIZE 1\_ 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. AND INDICATE NOT LESS THAN (NEAREST DIAMETER TWO DISTANCES INCH) OF SCREEN 60 (MEASUREMENTS TO WELL) 56 to from See attached locations DRILLERS LIC. NO. 1 MS DO 34 GRAVEL PACK L WAS FLOWING WELL 68 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) WQ (E.R.O.S.) D LIC. NO. I 74 75 76 SITE SUPERVISOR (sign. of driller or journeyman LOG TELESCOPE OTHER DATA responsible for sitework if different from permittee) INDICATOR



STATE PERMIT NUMBER STATE OF MARYLAND SEQUENCE NO. (MDE USE ONLY) HO - QU PERMIT TO DRILL WELL fill in this form completely W5 146 5 please print or type LOCATION OF WELL 3 Date Received (APA) OWNER INFORMATION COUNTY MANA omes 12 23 SUBDIVISION First Name Owner Last Name 15 LOT SECTION L 55 Street or RFD 36 NEAREST TOWN State 70 Town MILES FROM TOWN (enter 0 if in town) DRILLER INFORMATION D В 4 License No. Driller's Name DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 30 Firm Name ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N NE W W 32 E Address 37 SOUTH W TOW DISTANCE FROM ROAD Signature WELL INFORMATION ENTER FT OR MI 38 39 2 APPROX. PUMPING RATE  $s_{w}$ 12 PARCEL T (GAL. PER MIN.) BLK: \_ S TAX MAP: AVERAGE DAILY QUANTITY NEEDED 20 14 NOT TO BE FILLED IN BY DRILLER (GAL. PER DAY) USE FOR WATER (CIRCLE APPROPRIATE BOX) HEALTH DEPARTMENT APPROVAL DOMESTIC POTABLE SUPPLY & RESIDENTIAL HOWAR D COUNTY NO IRRIGATION COUNTY NAME FARMING (LIVESTOCK WATERING & AGRICULTURAL STATE F INSERT S SIGNATURE IRRIGATION INDUSTRIAL, COMMERICIAL, DEWATERING DATE ISSUED 22 PUBLIC WATER SUPPLY WELL CO SIGNATURE MM FAST TEST, OBSERVATION, MONITORING T 000 G GEO-THERMAL SHOW MAJOR FEATURES OF BOX & LOCATE WELL | FEET WITH AN X APPROXIMATE DEPTH OF WELL SOURCES OF DRILLING WATER NEAREST 1. Wel APPROXIMATE DIAMETER OF WELL INCH 2. METHOD OF DRILLING (circle one) 3. Jetted & DRIVEN **JETTED** BORED (or Augered) ROTARY (Hydraulic Rotary) WRITE THE BOX NUMBER AIR-PERcussion AIR-ROTary FROM THE MAP HERE **DRive-POINT** REVerse-ROTary CABLE other 000 REPLACEMENT OR DEEPENED WELLS 000 (CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL N DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN THIS WELL WILL REPLACE A WELL THAT WILL BE RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY S 39 FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED 52 (IF AVAILABLE) Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 63 **(X)** SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED ② COUNTY

Page		of	
Date	,	20	12000

## FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2890  Location of property (road) W. Worter  Subdivision Tim farm  Well Driller T. Mayne	Lot	Block Crosco	Plat	Sec.
Depth of well HOO Distance of measuring point (M.P.) about Static water level (S.W.L.) below M.P.		40'	,	
I. High rate pumping reservoir drawdown  Time pump started 7:30  Total time 30 010 to reach pumping			20 % ft. belo	

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	133	3 sec		20 yen
8:00	264	4		15 11
8:15	264	15		4
8:30	264	15		4
8:45	264	15		4
9:00	264	15		4
9:15	264	15		4
9:30	264	15		4
9:45	264	15		4
10:00	264	15		4
10:15	264	15		4
10:30	264	15		4
10:45	264	15		4
11:00	264	15		4

Page	of
Date	12/20/00
31	hR pomp @ 7:30

Review	
MENTEN	

## FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No.	HO - 94-28	90	N	
Subdivision S	stitu Falm	W. WOGOSVINE Lot	Block PI er crosen Hon	at Sec
Well Driller	1. Mayre	Owne	er crossen Hon	res
Depth of Distance	well		cound	
	pumping reservedto		Pumping rateft	. below M.P.
			recorded every 15 mi	
TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
	below M.P.		(if used)	
		1.0	V.Or	
		12/20/00	belle	
		MAS	100	The state of the s
		100	(1)	

## HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

WATER AND SEWERAGE PROGRAM TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply	riping
NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the inspection. No work is to be covered until approved by the Health Department. All installations is inspection.	TITLE COURTS
with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26,04,04 Construction Regulations). Submission of a complete form is required prior to Use and Occupant	TATTA AA CTE
Company Name: Willoughby Pluy Telephone # 410 - 781 - 7051	
Address: Ja203 VATKICK	
(Newsteierle and Licensed Plumber Licensed Well Driller Licensed Well Pump Installer	
(Must circle and) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer License # and name of inclividual responsible for the field installation:	
Name (Print): (A.1715 (1), (A.1) (A.1-4) Licenset	•
A Manual individual must newform the actual installation. Apprentices must be under the direct	# _
supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses	may be
subjected to field verification.	
Name of Property Owner. UCD FU DUI DEV Telephone #: 410 - 44 2 - X21 Subdivision: / JEW HILM Lot #: Well Tag #: HO 44-	2890
Subdivision: / STETUN FATTEN Lot #: Well Tag # : HO 44-	<u> </u>
MOUNT AIRU MD	
Submersible Pump Data Pitless Adapter Well Cap and Electric Condu	<u>it</u>
Make: THEUZZI Make: HRIVATU) Two piece watertight cap: V	7
Model #: Screened, vented well cap: 1/2  Pump Capacity 1 GPM Depth: 48 (36" min) Cap secured to casing: 1/2	
Pump Capacity GPM Depth: 4X (36" min) Cap secured to casing: V Well Yield: 7 GPM NSF approved: Conduit min 18" B.G.: V	d
Death of well encountered at time of pump installation: #DD (feet) Conduit secured to well cap: V	
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8	.4
Torque arrestors or Cable guards are required - Must circle one	
Safety rope, if used, attached to inside of well casing with eye bolt	
Piping to house  Type: COST LIVE  PVC sleeved to undisturbed soil at wall penetration:	
Type: COST LIVE  PVC sleeved to undisturbed soil at wall penetration:  Approximate length of sleeve:	-
PSI: 17 (160 psi min)  Depth of supply line: (36" min)  Approximate length of sleeve: 1 Sleeve caulked and sealed properly: 1	
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sew	ige piping,
distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact the	us office for
approval prior to installation.	
this wellingsby 4-24-01	
Signature of company representative responsible for installation date	
For Health Department Use Only - Not to be completed by Installer	-
Date Insp. Requested: 42301 Date Insp. Approved: 42301	RK)
Inspection Data: Pitless adapter and water supply line at least 36" below grade	- manife
Two piece can installed and attached to casing securely	
Elec. conduit extends at least 18" below grade/attached to cap properly	
Safety rope installed inside of well casing  Correct well tag attached properly and casing 8" above finished grade	
Water supply line sleeved adequately at house connection	
Adequate grout observed below pitless adapter	

