

C11974

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AT PERMIT
WELL IS COMPLETED.

COUNTY
NUMBERA58993EE

ST/CO USE ONLY
DATE Received
MM DD YY
813

DATE WELL COMPLETED
MM DD YY
9-23-99

Depth of Well
2217526
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-94-2432

OWNERCatHail Overlook LLC
STREET OR RFDWindy Ridge Ct
SUBDIVISIONCatHail RidgeSECTIONLOT29

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	
Brown soil	0	80	
White Granite	80	175	
	120		✓
	140		✓

GROUTING RECORD

yesno
YNY
4444

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS21NO. OF POUNDS1474

GALLONS OF WATER126

DEPTH OF GROUT SEAL (to nearest foot)

from0ft. to84ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STEELSTCONCRETECO
PLASTICPLOTHEROT

MAIN
CASING
TYPE

Nominal diameter
top (main) casing
(nearest inch)!

Total depth
of main casing
(nearest foot)

ST0684

OTHER CASING (if used)

diameter
inch

depth (feet)
fromto

screen type
or open hole

insert
appropriate
code
below

STEELSTBRASSBR
BRONZEPL
PLASTICPLOTHEROT

DEPTH (nearest ft.)

84175

NUMBER OF UNPROCESSED WELLS:0

WELL HYDROFRACTUREDyesno
YNY

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.1 MW D 355

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.1 MW D 549

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

DEPTH (nearest ft.)

84175

ACCHSRE

SLOT SIZE 123

DIAMETER
OF SCREEN

(NEAREST
INCH)

fromto

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 Q

7072747576

TELESCOPE
CASING

LOG
INDICATOR

OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min.)7.5

METHOD USED TO
MEASURE PUMPING RATEWatch
Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING38'ft.

WHEN PUMPING65'ft.

TYPE OF PUMP USED (for test)

AairPpistonTturbine
272727

CcentrifugalRrotaryOother
272727

JjetSsubmersible

PUMP INSTALLED

DRILLER INSTALLED PUMP YESNO

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)3135

PUMP HORSE POWER3741

PUMP COLUMN LENGTH
(nearest ft.)4347

CASING HEIGHT (circle appropriate box
and enter casing height)

+above

LAND SURFACE

below2(nearest
foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)

10'
15'

B 1 14100		SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER 40-94-2432 fill in this form completely	
Date Received (APA) 083099 8 MM DD YY 13			OWNER INFORMATION CATTAIL OVERLOOK LLC 15 Last Name Owner First Name 34 8808 CENTRE PARK DR. Suite 108 36 Street or RFD 55 Columbia MARYLAND 21045 57 Town 70 State 72 Zip 76			
DRILLER INFORMATION MICHAEL BARLOW M W D 355 Driller's Name 76 License No. 81 MICHAEL BARLOW WELL DRILLING Svc Inc Firm Name 912 FAWN CT. Joppa MD 21085 Address Signature Date 8/18/99			LOCATION OF WELL B 3 HOWARD 8 COUNTY 21 CATTAIL RIDGE 23 SUBDIVISION 42 SECTION 44 46 LOT 29 48 50 ROXBURY 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78			
WELL INFORMATION B 2 APPROX. PUMPING RATE 1 2 (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20			DIRECTION OF WELL FROM TOWN (CIRCLE BOX) N W N E 8-9 8-9 W TOWN E 8 8 S W S E 8-9 8-9 S 8 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 11 NEAR WHAT ROAD 30 WINDY PATH CT COUNTRY SIDE DR ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 15 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: BLK: PARCEL			
USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING G GEO-THERMAL			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard Co A58993EE COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 090999 A McMill 9/7/00 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH 520 000 EAST GRID 780 000 50 55 57 63			
APPROXIMATE DEPTH OF WELL 250 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6" INCH NEAREST INCH			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 780 N 520 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 9/23/99 65' casing 16 bags cement Missed grout BB HO-94-2432			
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			REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 52			
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 54 G A P 63 PERMIT No. HO-94-2432 70 71 72 73 74 75 76 77 78 79						
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED						

9/22/99 2:30 Yield

Depth of well 175'
Distance of measuring point (M.P.) above ground 18"
Static water level (S.W.L.) below M.P. 38'

Time pump started 11:00 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 65' ft. below M.P.

[illegible]

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

WK6005934

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: CHARLES A. KLEIN & Sons, Inc. Telephone #: (410) 549-6960
Address: 5220 KLEIN MILL ROAD
SPRINGVILLE, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation: _____
Name (Print): CHARLES A. KLEIN, JR. License #: 6521
*A licensed individual must perform 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: WILLIAMSBURG GROUP Telephone #: (410) 997-8800
Subdivision: CATFISH RIDGE Lot #: 29 Well Tag #: HO-94-2432
Site Address: 3505 WINDING PATH COURT
BLENHEIM, MD 21738

Submersible Pump Data

Make: JACUZZI
Model #: 5845-13P-52
Pump Capacity: 5 GPM
Well Yield: 2.5 GPM

Pitless Adapter
Make: HAWARD
Model #: PT-800
Depth: 42" (36" min)
NSF approved: ✓

Well Cap and Electric Conduit

Two piece watertight cap: ✓
Screened, vented well cap: ✓
Cap secured to casing: ✓
Conduit min 18" R.G.: ✓
Conduit secured to well cap: ✓

Depth of well encountered at time of pump installation: 175 (feet)
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: POLYETHYLENE
PSI: 1" (160 psi min)
Depth of supply line: 36" min

House Connection

PVC sleeved to undisturbed soil at wall penetration: Yes
Approximate length of sleeve: _____
Sleeve caulked and sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: CHARLES A. KLEIN, JR.

date _____

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 5/11/01

Date Insp. Approved: 5/11/01

Inspection Data: Pitless adapter and water supply line at least 36" below grade

Two piece cap installed and attached to casing securely

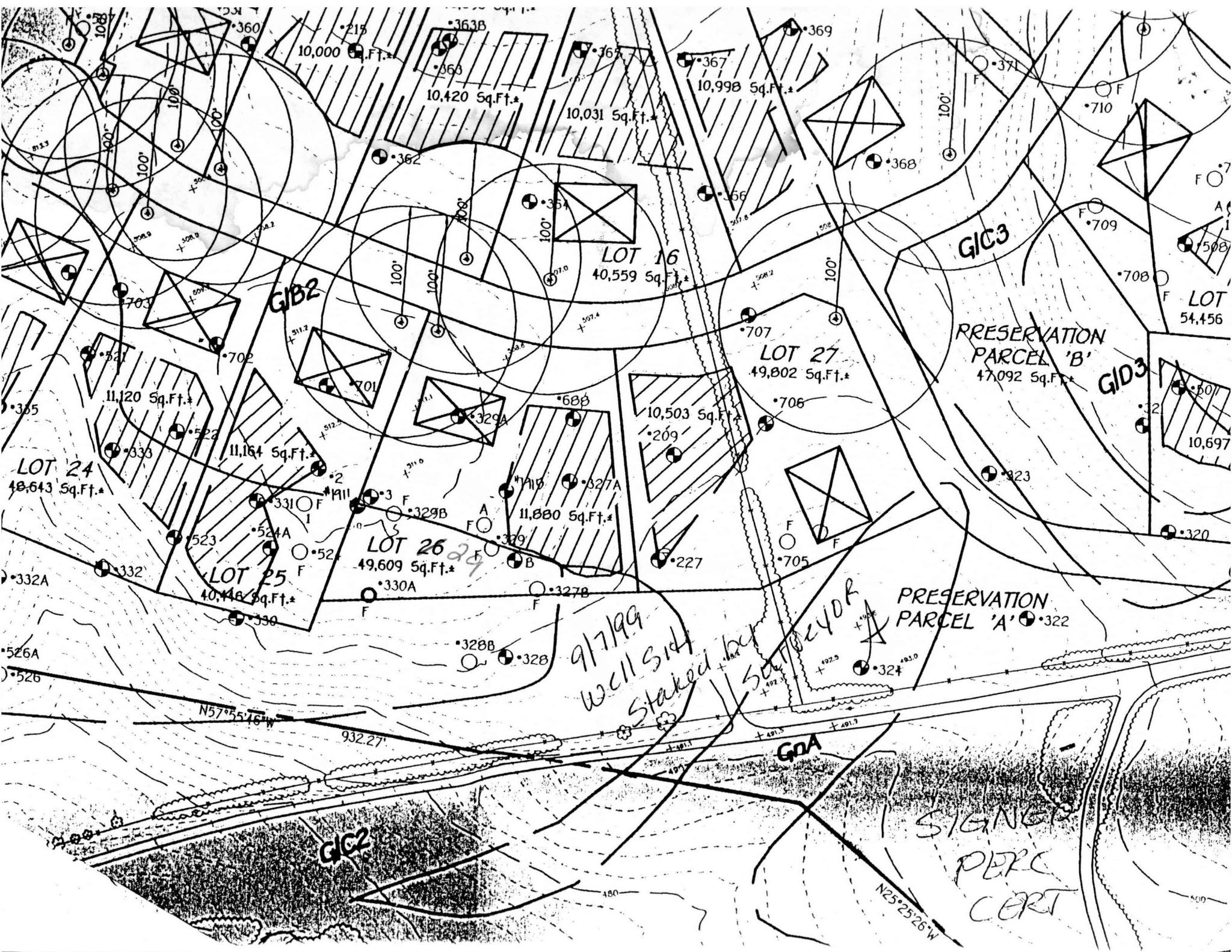
Elec. conduit extends at least 18" below grade/attached to cap properly

Safety rope installed inside of well casing

Correct well tag attached properly and casing 2" above finished grade

Water supply line sleeved adequately at house connection

Adequate grout observed below pitless adapter



GIC2

GIC3

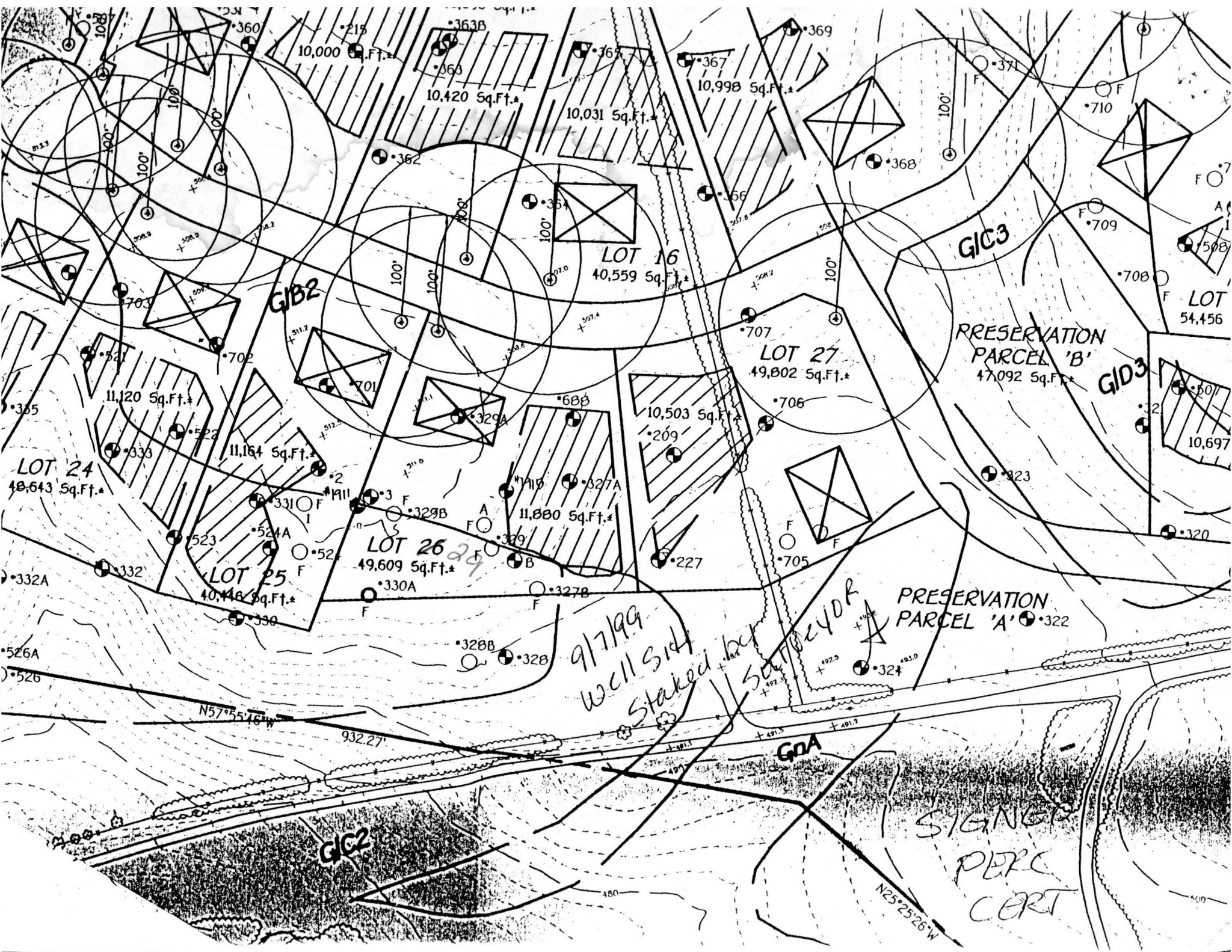
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Staked by
SATO 2408



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