c 1 07892	(MDE USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.
1 2 3	6	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY	COUNTY NUMBER 13
ST/CO USE ONLY	DATE WELL COMPL	PLEASE TYPE ETED Depth of Well	PERMIT NO.
DATE Received	10 18 00	7/4	FROM "PERMIT TO DRILL WELL" 40 - 94 - 2803
8 13	BRS DEVEC	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
OWNER STREET OR RFD			CENELL
SUBDIVISION	WINDRIDGE !		LOT
WELL Not required for		WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF FORMA COLOR, DEPTH, THICKNESS	TIONS PENETRATED, THEIR	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST 3
DESCRIPTION (Use	FEET check if water	CEMENT C M BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed)	FROM TO bearing	NO. OF BAGS NO. OF POUNDS	PUMPING RATE (gal. per min.)
Top Soil	02	DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE
Jop Soil Shudy	Z 15	from ft. to ft. 48 TOP 52 ft. 54 BOTTOM 58 ft. (enter 0 if from surface)	WATER LEVEL (distance from land surface)
3,1000	15 20	casing CASING RECORD types	BEFORE PUMPING 17 20 ft.
Swed Stone		insert appropriate STEEL CONCRETE	WHEN PUMPING 22 25 ft.
MICKA	20 30	code below PLASTIC OTHER	TYPE OF PUMP USED (for test)
SAND Stone MICKA Flux Rock MICKA	30 35 0	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	A air P piston T turbine
MICKA	35 210	TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary (describe below)
Ct A Pack	210 215	60 61 63 64 66 70	J jet S submersible
Flux hors	25 320	E OTHER CASING (if used) A diameter depth (feet)	27 27
MICKA	33	H inch from to	PUMP INSTALLED DRILLER INSTALLED PUMP VES NO
		S	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
		screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS.
		or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.
		appropriate code BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
		below PLASTIC OTHER	(to nearest gallon) 31 35
		C 2 DEPTH (nearest ft.)	PUMP HORSE POWER 97 41 PUMP COLUMN LENGTH
NUMBER OF UNSUCCESSI		1,340 23 320	(nearest ft.) 43 47
WELL HYDROFRACTURED	yes N	E 1 8 9 11 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPROPRIES		C H 2 23 24 26 30 32 36	49 LAND SURFACE
A WELL WAS ABANDON WHEN THIS WELL WAS	COMPLETED	S C 3 R 38 39 41 45 47 51	below (nearest)
P TEST WELL CONVERTE		1 38 39 41 45 47 51 E E SLOT SIZE 1 2 3	A LOCATION OF WELL ON LOT
I HEREBY CERTIFY THAT THIS WE ACCORDANCE WITH COMAR 26.04	1.04 "WELL CONSTRUCTION" AND	DIAMETER (NEAREST	SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN
IN CONFORMANCE WITH ALL CON CAPTIONED PERMIT, AND THAT	NDITIONS STATED IN THE ABOVE THE INFORMATION PRESENTED IMPLETE TO THE BEST OF MY	OF SCREEN NCH) NCH) from to	TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIQ: NO:1 M D		GRAVEL PACK IF WELL DRILLED	(10)
DRILLERS SIGNATURE		WAS FLOWING WELL INSERT F IN BOX 68 68	1 1 6 6n
(MUST MATCH SIGNATURE ON APPLICATION)		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	Thop Circ
LIC NO. 1	D '	T (E.R.O.S.) W Q	25 25
SITE SUPERVISOR (sign. o	of driller or journeyman	70 72 74 75 76 TELESCOPE LOG	&
responsible for sitework if d	illerent from permittee)	CASING INDICATOR OTHER DATA	
DEMI/CB97		© COUNTY	

B 1 18649 SEQUENCE NO. (MDE USE ONLY)	STATE OF	MARYLAND	STATE PERMIT NUMBER
1 2 3 6		DRILL WELL	Ho -91 -2803
	W513 6 please pr	rint or type	70 fill in this form completely 79
Date Received (APA)		B 3 4	LOCATION OF WELL
8 MM DD YY 13	IMATION	8 COUNTY	21
Bas Developens 2	(C.	WINDRIDE	SE FARMS
15 Last Name Owner	First Name 34	23 SUBDIVISION	42
36 Street or RFD	1. Suite 29	SECTION 2	LOT 1 7
allumbia MM	2/04	GLENE	48 50
	72 Zip 76	52 NEAREST TOWN	71
DRILLER INFORMATION	0 111	MILES FROM TOWN (ente	er 0 if in town)M_I
Driller's Name 76	6 License No. 81	B 4	73 76 77 78
RAW MAYOR WELL OF	1111ins	1 2 DIRECTION OF WELL FROM	WIND RIDGE CH
Firm Name		TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30
Address Address	4+Any	N N NE	ON WHICH SIDE OF ROAD NORTH
Address Il Muyero	2-5-00	8-9 1 8-9 8-9	(CIRCLE APPROPRIATE BOX)
Signature	Date	W TOWN E	34 37 SOUTH
B 2 WELL INFORMATION APPROX. PUMPING RATE —	5	3 /	DISTANCE FROM ROAD
(GAL. PER MIN.) 8	S S 12		ENTER FT OR MI 38 39
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14	20	8-9 S 8-9	TAX MAP: BLK: PARCEL
USE FOR WATER (CIRCLE APP	PROPRIATE BOX)		D BE FILLED IN BY DRILLER
D DOMESTIC POTABLE SUPPLY & RESIDEN	TIAL		H DEPARTMENT APPROVAL
HHIGATION A PARTICULAR ASSESSMENT OF A SERVICE OF A SERVI	CULTURAL	COUNTY NAME	COUNTY NO.
L IRRIGATION	SOE! OFFICE	STATE SIGNATURE	INSERT S →
22 I INDUSTRIAL, COMMERICIAL, DEWATERING	G	DATE ISSUED	1N3EN 3 41
P PUBLIC WATER SUPPLY WELL	he er 图象 I m	43 MM DD YY 48	CO SIGNATURE EXP. DATE
T TEST, OBSERVATION, MONITORING		NORTH = 7 0	EAST - 2 CO
G GEO-THERMAL	DE SUBJECT SU	GRID 50 0	0 0 GRID 57 0 0 0 0 57 63
15		SHOW MAJOR FEATURES	S OF
APPROXIMATE DEPTH OF WELL 24	PEET 28	BOX & LOCATE WELL WITH AN X	
APPROXIMATE DIAMETER OF WELL	NEAREST	SOURCES OF DRILLING V	NATER
	INCH	1. hell	
METHOD OF DRILLING		3.	
BORED (or Augered) 30 AIR-ROTary AIR-PERcussion	Jetted & <u>DRIVEN</u> ROTARY (Hydraulic Rotary)	WEITE THE DOY NUMBER	
37 CABLE REVerse-ROTary	DRive-POINT	FROM THE MAP HERE	8
other		Sch	
REPLACEMENT OR DEEPER		E	000
(CIRCLE APPROPRIATE N) THIS WELL WILL NOT REPLACE AN EXISTIN		N 520	000
THIS WELL WILL REPLACE A WELL THAT W		DRAW A SKETCH BELOW	SHOWING LOCATION OF WELL IN
ABANDONED AND SEALED			OWNS AND ROADS AND GIVE O NEAREST ROAD JUNCTION
39 S THIS WELL WILL REPLACE A WELL THAT WAS A STANDBY-CONTACT LOCAL APPROVIN		DIOTAGE THE MEET	O NEATEST HOAD SONOTION
FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEN AN EXISTING WE	11		
PERMIT NUMBER OF WELL TO BE REPLACED OR	R DEEPENED	N (WINDRIDGE
(IF AVAILABLE) 41	52		725' Ct, SI
Not to be filled in by driller (MDE OR CO	OUNTY USE ONLY)		Some
	GAP		ner 114
54	94 - 2803		
PERMIT No. 70 71 72	2 73 74 75 76 77 78 79		
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			●

Page			of	
Date	oct	16	2000	

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Revie	w 5/21/01 OK	
	Though Ralph	15
	Measurement Water Depth	
	Incorrect (BB

Well Permit No. HO - 94-2803 Location of property (road) WWDRIOGE I Subdivision WWD 1196E FARMS SECT	Lot 17 Block Plat Sec. 2
Well Driller RAGH MAYNE	Owner BNS Developens
Depth of well 320 Distance of measuring point (M.P.) Static water level (S.W.L.) below	above ground 2th
I. High rate pumping reservoir drawd	own
Time pump started 12:15 Total time 15 min to reach pump	Pumping rate 10 6Pm ing water level 120 ft. below M.P.

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

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill of gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
12:50	120 4	15 Sec		4 GPM
12:45	120 K	15 see		4 GPU
1:00	120 /	15 Sec		4 Gmm
1:15	120 "	15 4		4 4
1:30	120 4	15 11		4 4
1:45	120 11	15 4		4 4
2100	120 K	15 Se		4 6PM
2:15	120 K	15 Sec		4 6 PM
2:30	120 K	15 Sec. 15 Sec.		4 GPM
2743	120 "	15 4		Y . i,
3:00	170 4	15 h		4 4
3115	120 H	15 See		4 "
3:30	120 K	15 Sec		11 Gom
				1 gon
Tartis Brains				
To the second				

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 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 sources.

	CLARKE 1 3510 Rid Westminter	e ed	#: <u>410 - 489 - 402</u> 9	,
(Must circle one) License # and nan Name (Print): "A licensed indiv supervision of a l subjected to field	Licensed Plumber me of individual respondent dual must perform licensed journeyman l verification.	Licensed Well Driller naible for the field installation: the actual installation. Appr or master plumber, pump in	License# 3808 rentices must be under the direct staller or well driller. Licenses may be	
Name of Property	Owner: Hamily	ton Kees Teleph	one #: 4/0 - 480 - 9/46 17 Well Tag #: HO - 44 - 2803	
Site Address: /	4553 Wines	ides Ct	77 Well 188 # : HO - 17 - 5000)	
If pump capacity Torque arrestors	GPM GPM countered at time of prescreds well yield, a countered at time of prescreds well yield.	Pitless Adapter Make: Harvard Model#: P-T-800 Depth: 13 (36" min) NSF approved: ump installation: 320 (feet) low water cut off switch is required - Must circle one le of well casing with eye bolt	Well Cap and Electric Conduit Two piece watertight cap: Screened, vented well cap: Cap secured to casing: Conduit min 18" B.G.: Conduit secured to well cap: aired by NSPC 1990 Section 17.8.4	
Pioing to house Type: Platfe PSI: (160) Depth of supply	pei min) line: ½2 (36" min)	House Connection PVC sleeved to undistur Approximate length of sl Sleeve caulked and seale	oed soil at wall penetration: ceve: d properly:	
	, drainfields, and ser		eptic tank, pump chamber, sewage pipic mot be accomplished, contact this office	
Signature of com	pany representative r	esponsible for installation	12-3-0/ date	
	Pitless adapter and v Two piece cap instal Elec. conduit extend Safety rope installed Correct well tag atta Water supply line st	Date Insp. A water supply line at least 36" be liled and attached to casing seculs at least 18" below grade/attact inside of well casing 8" at least properly and casing 8" at seved adequately at house content of the low pitters adapter	pproved: 10 2 01 BB low grade rely ched to cap properly ove finished grade)

