

1236

07891

SEQUENCE NO.
(MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.
COUNTY NUMBER 13

ST/CO USE ONLY
DATE Received
MM DD YY
8 13

DATE WELL COMPLETED
MM DD YY
10 16 00

Depth of Well
22 320 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0 - 94 - 2802

OWNER
last name first name
BRS DEVELOPERS WINDRIDGE CT.

TOWN GLENELG

SUBDIVISION WINDRIDGE FARMS SECTION LOT 16

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	
Topsoil	0	2	
Sandy	2	40	✓
Sand Stone	40	45	
MICKA	45	60	
Sand Stone	60	65	✓
MICKA	65	270	
Flint Rock	270	275	✓
MICKA	275	320	

GROUTING RECORD
WELL HAS BEEN GROUTED
(Circle Appropriate Box)
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT [CM] BENTONITE CLAY [BC]
NO. OF BAGS 14 NO. OF POUNDS 1100
GALLONS OF WATER 84
DEPTH OF GROUT SEAL (to nearest foot)
from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
[ST] STEEL [CO] CONCRETE
[PL] PLASTIC [OT] OTHER
MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 55
60 61 63 64 66 70
OTHER CASING (if used) diameter inch depth (feet) from to
E A C H C A S I N G

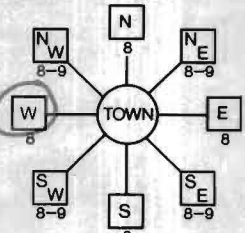
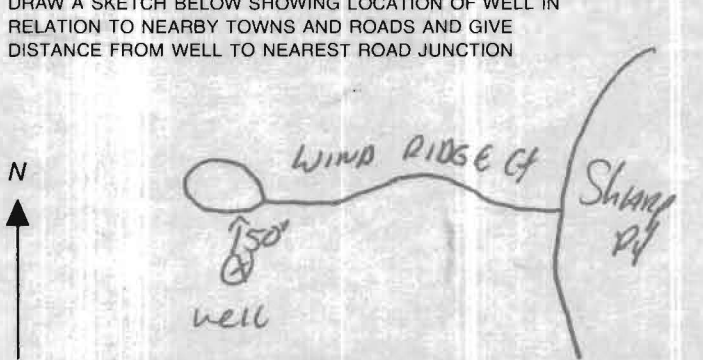
SCREEN RECORD
screen type or open hole insert appropriate code below
[ST] STEEL [BR] BRASS [HO] OPEN HOLE
[PL] PLASTIC [OT] OTHER
DEPTH (nearest ft.)
1 H0 53 320
E A C H S C R E E N
1 8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from 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 Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
1 2
PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 4
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 24 ft.
WHEN PUMPING 110 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
[-] below 2 (nearest foot)
LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
well 50
125
Prop Line
Ranch

B 1 18648 <small>1 2 3 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type W513672	STATE PERMIT NUMBER H0-94-2802 <small>70 fill in this form completely 79</small>
Date Received (APA) <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <small>8 MM DD YY 13</small> BAS Developers LLC <small>15 Last Name Owner First Name 34</small> 8808 Center Park Dr. Suite 209 <small>36 Street or RFD 55</small> Columbia MD 21045 <small>57 Town 70 State 72 Zip 76</small> </div>		B 3 Howard Wind Ridge Farms LOCATION OF WELL <small>8 COUNTY 21</small> <small>23 SUBDIVISION 42</small> SECTION 2 LOT 16 <small>44 46 48 50</small> GLENELG <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) I M I <small>73 76 77 78</small>	
OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <small>8 MM DD YY 13</small> BAS Developers LLC <small>15 Last Name Owner First Name 34</small> 8808 Center Park Dr. Suite 209 <small>36 Street or RFD 55</small> Columbia MD 21045 <small>57 Town 70 State 72 Zip 76</small> </div>		B 4 Windridge Ct DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  <small>11 NEAR WHAT ROAD 30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;"> <small>34 50 37</small> <small>ENTER FT OR MI 38 39</small> </div> <div style="text-align: center;"> <small>NORTH</small> <small>WEST</small> <small>EAST</small> <small>SOUTH</small> </div> </div> TAX MAP: _____ BLK: _____ PARCEL: _____	
DRILLER INFORMATION <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <small>8 MM DD YY 13</small> Ralph MAYNE MSD 116 <small>15 Last Name Owner First Name 34</small> Ralph MAYNE well drilling <small>36 Street or RFD 55</small> 9120 Brown Church Rd Mt Airy <small>57 Town 70 State 72 Zip 76</small> </div>		WELL INFORMATION <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <small>8 MM DD YY 13</small> 5 <small>15 Last Name Owner First Name 34</small> 500 <small>36 Street or RFD 55</small> 14 20 <small>57 Town 70 State 72 Zip 76</small> </div>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL </div> </div>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> HOWARD 13 <small>8 COUNTY NAME 30 COUNTY NO.</small> <small>STATE SIGNATURE 41</small> <small>DATE ISSUED 08/10/00 C. Will 8/9/01</small> <small>43 MM DD YY 48</small> <small>NORTH GRID 520 000 55</small> <small>EAST GRID 0790 000 63</small> </div>	
APPROXIMATE DEPTH OF WELL 150 FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL 6" INCH <small>NEAREST INCH</small>		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;"> <small>E</small> D90 <small>N</small> 520 </div> <div style="text-align: center; margin-left: 20px;"> <small>000</small> <small>000</small> </div> </div>	
METHOD OF DRILLING (circle one) <div style="display: flex; justify-content: space-around;"> <div> <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> CABLE <small>other</small> </div> <div> <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> REVERSE-ROTARY </div> <div> <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> Drive-POINT </div> </div>		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="text-align: center; margin-top: 20px;">  </div>	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> 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"/> THIS WELL WILL DEEPEMED AN EXISTING WELL </div> </div> PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) H0-94-2802 <small>41 52</small>		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 54 G A P 63 PERMIT NO. H0-94-2802 <small>70 71 72 73 74 75 76 77 78 79</small>	
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</small>			

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-280,2

Location of property (road) Windridge Farms Court

Subdivision Windridge Farms section 2 Lot 16 Block Plat Sec.

Well Driller	Ralph Mayne	Owner	BRS Developers
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Depth of well 320

Distance of measuring point (M.P.) above ground 2 ft

Static water level (S.W.L.) below M.P. 24

I. High rate pumping -- reservoir drawdown

Time pump started 8:30

Pumping rate 10 GPM

Total time 15 min to reach pumping water level 110 ft. below M.P.

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

[illegible]

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 approval.

Company Name: CLARKE PTH INC Telephone #: 410-489-4029
Address: 351A Ridge Rd
Westminster, MD 21159

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:

Name (Print): Ken Clarke License# 3808

*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: HAMILTON ROAD Telephone #: 410-480-9196
Subdivision: WINDRIDGE FARMS Lot #: 116 Well Tag #: HO-94-2802
Site Address: 14559 Windridge Ct

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Coult</u>	Make: <u>Harvard</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>55B07422L</u>	Model#: <u>PT-800</u>	Screened, vented well cap: <input type="checkbox"/>
Pump Capacity <u>5</u> GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: <input type="checkbox"/>
Well Yield: <u>4</u> GPM	NSF approved: <input type="checkbox"/>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>315</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

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: Plastic
PSI: ☒ (160 psi min)
Depth of supply line: 22 (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: ☒
Approximate length of sleeve: 15
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: Ken Clarke date: 12-13-01

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

Date Insp. Requested: _____ Date Insp. Approved: 10/22/01 (50) SRH
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 8" above finished grade ☒
Water supply line sleeved adequately at house connection ☒
Adequate grout observed below pitless adapter ☒

