

C1 3810

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A12738

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

DATE Received MM DD YY

12/21/04

22 400 26 (TO NEAREST FOOT)

1/6/04 O.K. BB

FROM "PERMIT TO DRILL WELL" HD-94-4091

OWNER WAREFIELD, GUNNEVERE STREET OR RFD 3684 Route 94 TOWN WOODBINE SUBDIVISION SECTION LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Top Soil, Brown Shale, Tan Slate, Gray Slate, Brown slate, Gray Slate.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED [X] YES [N] NO

CIRCLE APPROPRIATE LETTER: 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 MWD 040 DRILLERS SIGNATURE George F. Eastenday (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 JSD 038

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) [Y] YES [N] NO. TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC]. NO. OF BAGS 13 NO. OF POUNDS 1300. GALLONS OF WATER 78. DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 35 ft.

CASING RECORD

MAIN CASING TYPE [ST] Nominal diameter top (main) casing (nearest inch)! 6. Total depth of main casing (nearest foot) 40. OTHER CASING (if used) diameter inch depth (feet) from to.

SCREEN RECORD

screen type or open hole [ST] STEEL [BR] BRASS [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER. SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH) 56 60.

DEPTH (nearest ft.) 110 38 400

Table with columns: A C H S R E N, rows 1-11, 15-17, 23-26, 30-32, 38-41, 45-47, 51. Includes slot size and diameter of screen.

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

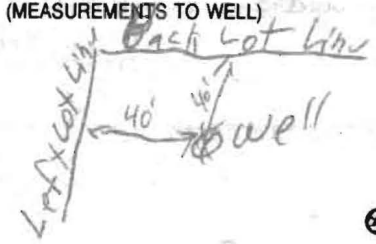
PUMPING TEST

HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min.) 3. METHOD USED TO MEASURE PUMPING RATE Bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 50 ft. WHEN PUMPING 400 ft. TYPE OF PUMP USED (for test) [A] air [P] piston [T] turbine [C] centrifugal [R] rotary [O] other [J] jet [S] submersible.

PUMP INSTALLED

DRILLER INSTALLED PUMP 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) [4] above LAND SURFACE [] below (nearest foot) 2.

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)



B 1 9686

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 521611

STATE PERMIT NUMBER

HO 94 4091 fill in this form completely

Date Received (APA) 12/16/04

OWNER INFORMATION

9921

WARFIELD GUINEVERE 3684 ROUTE 94 WOODBINE, MD 21797

B 3

LOCATION OF WELL

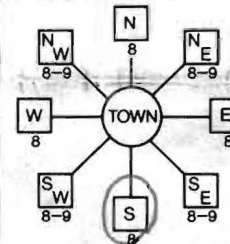
Howard 21 COUNTY SUBDIVISION 42 SECTION 44 46 LOT 48 50 Lisbon 52 NEAREST TOWN MILES FROM TOWN 73 76 77 78

DRILLER INFORMATION

George F. Easterday M W D 040 L. Franklin Easterday, Inc. 9265 Brown Church Rd., MT. Airy, Md. 21771 12/14/04

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



3684 Route 94

NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH DISTANCE FROM ROAD 34 2 37 Ft. ENTER FT OR MI 38 39 TAX MAP: 12 BLK: 24 PARCEL 32

B 2

WELL INFORMATION

APPROX. PUMPING RATE 5 (GAL. PER MIN.) AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DI DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION 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 A12738 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 12/10/2004 Brian Baker 12/10/2005 EXP. DATE NORTH GRID 529 000 EAST GRID 763 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

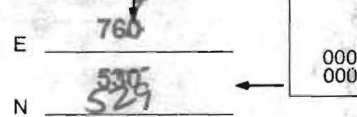
- THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

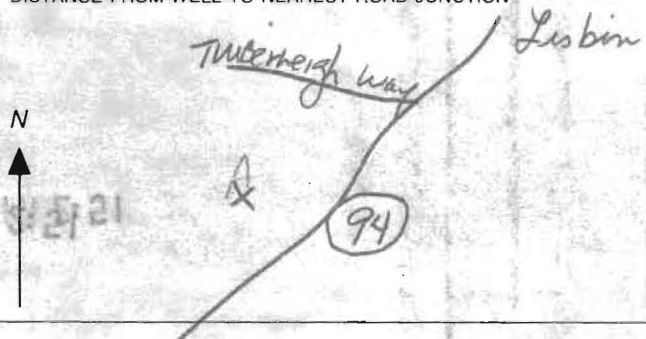
SOURCES OF DRILLING WATER

- 1. wells 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE



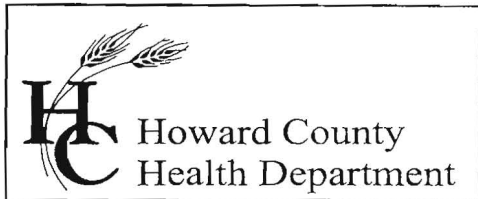
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 766



Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G PERMIT No HO 94 4091

SPECIAL CONDITIONS



7178 Columbia Gateway Drive, Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

January 6, 2005

Guinevere Warfield
3684 Woodbine Road
Woodbine, MD 21797

Keep With File

RE: **Replacement Well Issues**
3684 Woodbine Road
Woodbine, MD 21797
Well Permit #: HO-94-4091

2/16/05

Dear Mrs. Warfield:

Well Line Not Inspected - Never Called In
Cap O.K., Conduit Tight, Tag on Well (BB)

This office is requesting that you forward the enclosed form to the appropriate licensed contractor (Well Driller, Registered Plumber or Pump Installer) who was responsible for the installation of the well pump, well water line connection and related plumbing in the referenced replacement well. The contractor should complete this form and submit it to this office via fax or mail once the pump is placed in the well. **Submission of this completed form by the contractor is required for final approval of the field inspection, which should be conducted by an inspector from this office when the work is ready for inspection. The contractor is responsible for scheduling an inspection request with this office.**

We understand that you have already contacted the Community Services Program at (410) 313-1773 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). **Currently, there is no charge for this sampling.**

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

It was marked on the Well Permit by the driller that you plan to use your old well as a standby well. In order to properly maintain a well as a standby supply and to prevent the possibility of groundwater contamination, a well designated as a standby should be connected to the house and sampled for potability requirements. Therefore, this office requests that you make arrangements to have this well connected to your house by an appropriate licensed contractor (Well Driller, Registered Plumber or Pump Installer) as soon as possible. **The contractor is also responsible for scheduling an inspection request with this office once the work is ready for inspection.**

If you have any questions, or would like to discuss these matters further please call me at (410) 313-1771. Thank you for your attention to these important matters.

Respectfully,

Brian Baker

Brian Baker, R.S.
Well & Septic Program

Enclosure

cc: Community Services Program
File

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 1/26/05 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

Unknown
~~HO - 94 - 4091~~

* PERMIT NUMBER OF REPLACEMENT WELL

HO - 94 - 4091

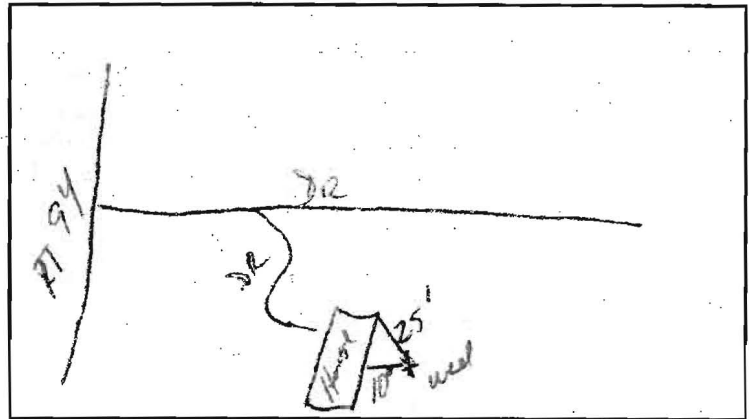
* PERSON ABANDONING WELL: Richard A. Crummett

WELL DRILLERS LICENSE NUMBER: L1100014

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: BUINEVEW... WAREH

SITE LOCATION MAP



* WELL LOCATION:
 COUNTY: HOWARD
 NEAREST TOWN: WOODRIDGE
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: _____ LOT: _____
 NEAREST ROAD: 2124 ROUTE 94

* TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED
- _____ BORED/AUGERED _____ HAND DUG
- _____ OTHER (specify) _____

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Bentonite	212	1
All Dirt	1	0

* USE CODE:

- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION _____ GEOTHERMAL

VOLUME OF MATERIAL USED

9 BAG Bentonite

* TYPE OF CASING:

- STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 212 FEET DEEP

* WAS ANY CASING REMOVED? YES _____ NO
 if yes, length removed, in feet: 3

* WAS CASING RIPPED OR PERFORATED? _____ YES NO

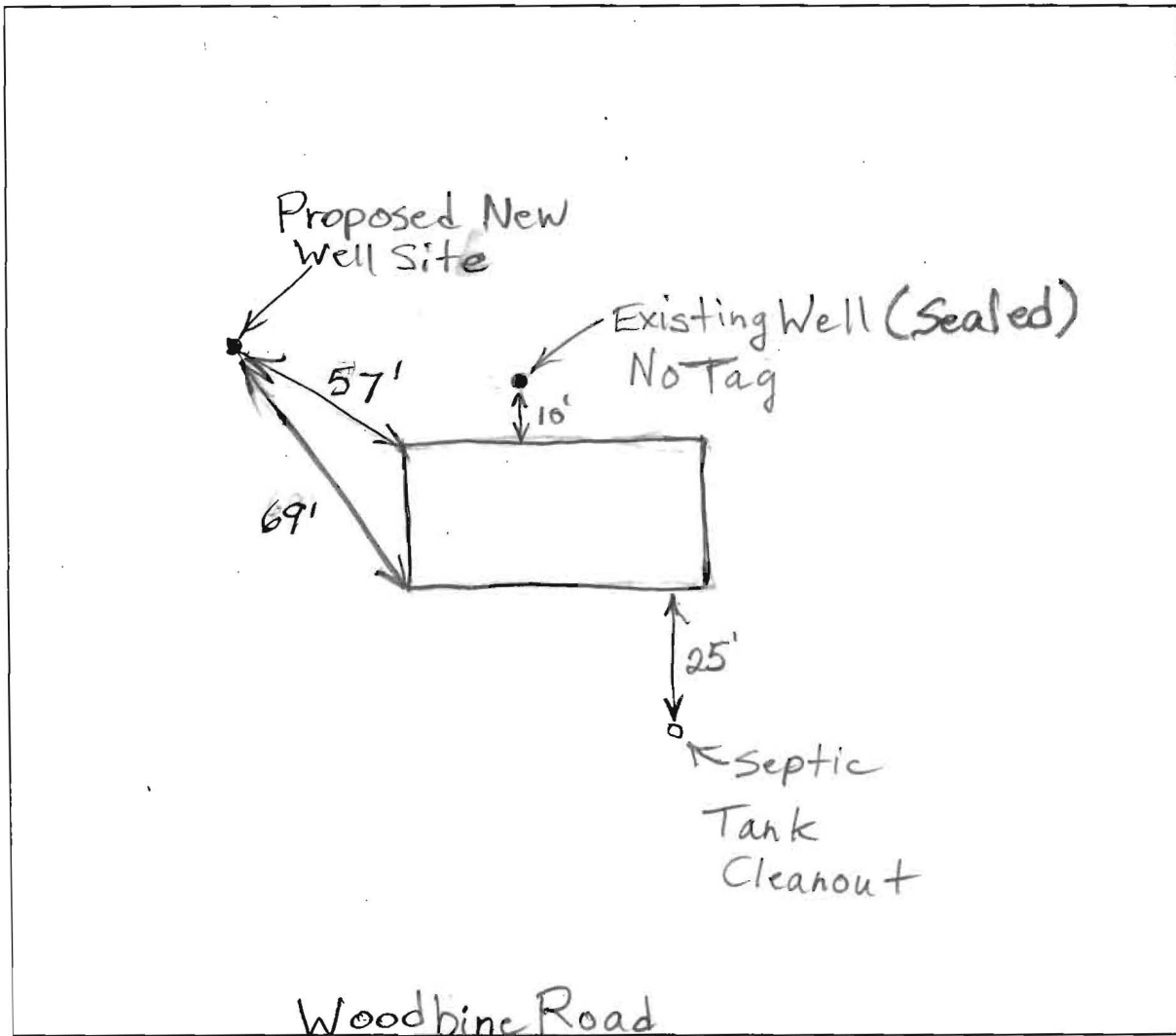
SIGNATURE: Gregory J. [Signature] LICENSE # 040

CIRCLE ONE MWD/MSD/MGD DATE 2-2-05

SITE INSPECTION SHEET

OWNER: Guinevere Warfield PHONE #: _____
ADDRESS: 3684 Woodbine Road CONTRACTOR: EASTERDAY-301-879-1640
WOODBINE, MD 21797 WELL TAG #: _____
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: REPLACEMENT WELL - OUT OF WATER

LOCATION DIAGRAM



COMMENTS: 12/9/04 Existing well has low yield. Proposed drilling a new well at site indicated. No one from Easterday at site. (BB)

DATE: _____ INSPECTOR: _____