

C1 2932

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 517963

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER McAlister Linda & Jeffrey STREET OR RFD Florence Rd TOWN Mt. Airy 21771 SUBDIVISION Mocking Bird Forest SECTION LOT 2

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, FEET (FROM, TO), check if water bearing. Includes entries for Brown Shale and Blue Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 22 NO. OF POUNDS 2068 GALLONS OF WATER 132 DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 57

OTHER CASING (if used)

Table for OTHER CASING with columns for diameter and depth.

screen type or open hole

SCREEN RECORD

SCREEN RECORD (ST, BR, HO, PL, OT) insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS: 1

WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 M5D024 DRILLERS SIGNATURE

LIC. NO. 1 D

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

C 2 DEPTH (nearest ft.)

Table for C 2 DEPTH with columns for casing depth and slot size.

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

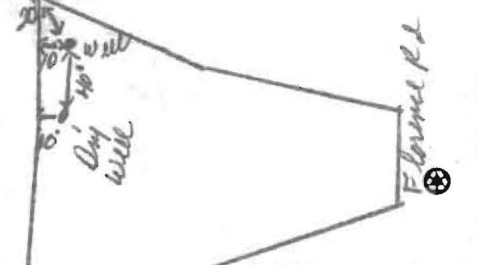
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 9.5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 56 ft. WHEN PUMPING 96 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES 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 (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 1068
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
525227 please type

STATE PERMIT NUMBER
HO - 95 - 0517
70 fill in this form completely 79

Date Received (APA)
8 MM DD YY 13
OWNER INFORMATION
15 Last Name Owner First Name 34
2610 Mullinix Mill Rd
36 Street or RFD 55
70 State 72 Zip 76

B 3 LOCATION OF WELL
8 COUNTY Howard 21
23 SUBDIVISION Baker Property Mockingbird Forest 42
SECTION 44 46 LOT 2 48 50
52 NEAREST TOWN Mt. Airy 71
MILES FROM TOWN (enter 0 if in town) 7 M I 73 76 77 78

DRILLER INFORMATION
Driller's Name Joseph R. Mayne M S D 024 76 License No. 81
Firm Name Joseph R. Mayne Well Drilling
Address 5512 Ridge Rd Mt. Airy Md 21771
Signature Date 8-21-06

B 4
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NEAR WHAT ROAD Florence Rd 11 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 520 37 DISTANCE FROM ROAD FT
ENTER FT OR MI 38 39
TAX MAP: 6 BLK: 24 PARCEL 151

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
COUNTY NAME Howard COUNTY NO. 1517963
STATE SIGNATURE INSERT S
DATE ISSUED 9/14/06 CO SIGNATURE EXP. DATE 9/14/09
43 MM DD YY 48. NORTH GRID 543 000 EAST GRID 759 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 280 FEET
24 28

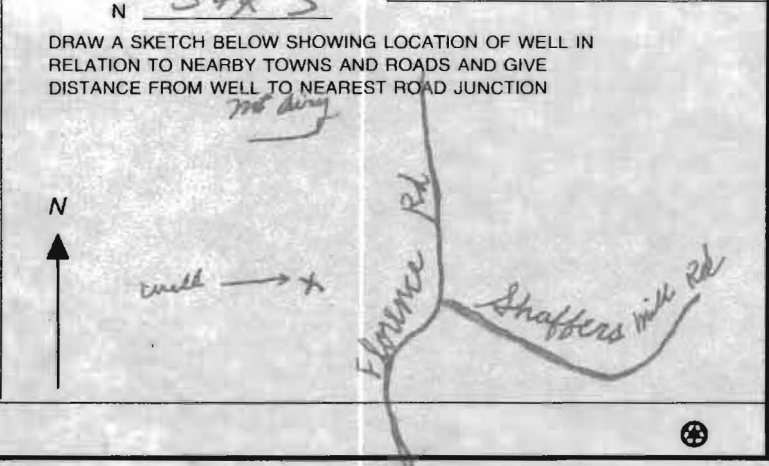
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 759
N 543
000
000

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 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
39 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

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER
PERMIT No. HO-95-0517
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED





Howard County
Health Department

3525 H Ellicott Mills Drive • Ellicott City, MD 21043
(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

ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by Van Mar Associates on Aug 10, 06 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN

Baker Prop-

Lot 1, 2, 3

Jeff McAlister

301-829-7681

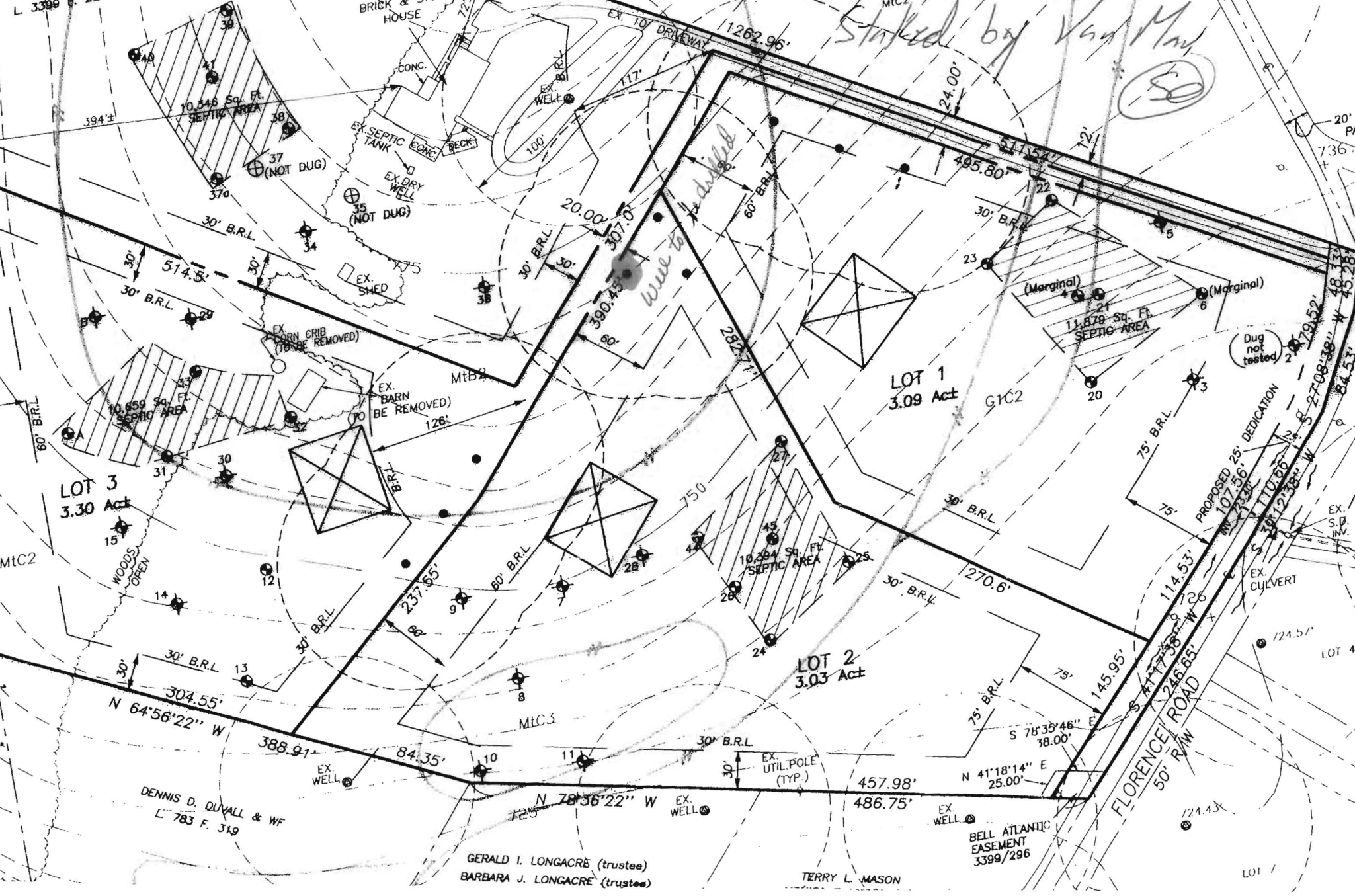
LOT 4
4.46 Act

GERALD R. BAKER
SHIRLEY A. BAKER
L. 3399 F. 296

BARNARD F. GEORGE
SHIRLEY M. BARNARD T/E
L. 3852 F. 221

9/14/06 well site OK
Staked by Van Man

(SD)



LOT 3
3.30 Act

LOT 1
3.09 Act

LOT 2
3.03 Act

DENNIS D. DUVALL & WF
L. 783 F. 319

GERALD I. LONGACRE (trustee)
BARBARA J. LONGACRE (trustee)

TERRY L. MASON

BELL ATLANTIC
EASEMENT
3399/296

FLORENCE ROAD
50' R/W

LOT 4