

C1 2337

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER

A-3110

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

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

H0-88-0500

OWNER: KAREN DEPARTMENT last name: ELLENIC CT first name: TOWN: CLANBOND SUBDIVISION: SECTION: LOT: 13

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 (0-1), Red Clay (1-6), Blue Mica (6-90), Green Mica (90-140), Blue Mica (140-160), Blue Mica (160-165), Blue Mica (165-270).

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS: 32 NO. OF POUNDS: 3200. GALLONS OF WATER: 165. DEPTH OF GROUT SEAL (to nearest foot) from 0 to 87 ft.

CASING RECORD: casing types insert appropriate code below. ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE: Nominal diameter (nearest inch) 6, Total depth (nearest foot) 101.

OTHER CASING (if used) diameter inch, depth (feet) from to.

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.) H0 101 340. SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH) from to.

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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 411. DRILLERS SIGNATURE: [Signature]. SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): [Signature].

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68.

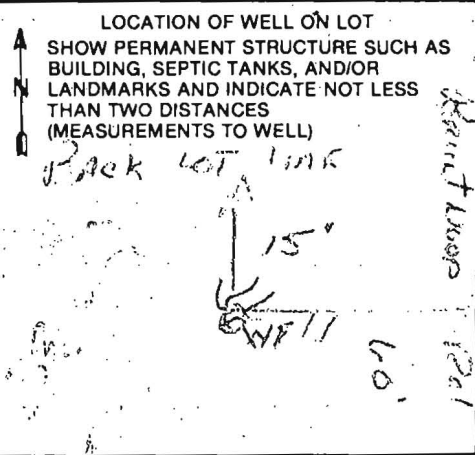
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER). T (TELESCOPE CASING), LOG INDICATOR, W.Q. (OTHER DATA).

C 3

PUMPING TEST: HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min. to nearest gal.) 8. METHOD USED TO MEASURE PUMPING RATE Bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 31, WHEN PUMPING 110. TYPE OF PUMP USED (for test) S (submersible).

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES (NO). IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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, - below. LAND SURFACE 50-51 (nearest foot).



B 1 **1164** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-88-0500
 fill in this form completely

Date Received (APA) **030389**
 OWNER INFORMATION
KOREAN DEVELOPMENT
 15 Last Name 34 Owner First Name
1 CENTRE PARK DR
 36 Street or RFD 55
COLUMBIA **MD 21045**
 57 Town 70 State 72 Zip 76

DRILLER INFORMATION
George F. Easterday 40
 77 License No. 80
L. Franklin Easterday, Inc.
 Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
 Address
George F. Easterday 3/1/89
 Signature Date

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL **200** FEET
 24 28

APPROXIMATE DIAMETER OF WELL **6** INCH
 30 32 NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jettied & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY DRIVE-POINT
 other _____

REPLACEMENT OR DEEPEINED 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
 THIS WELL WILL DEEPEIN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 54 63
 FORCE **S** WRITE INITIALS IN BOX PERMIT No. **HO-88-0500**
 67 68 70 71 72 73 74 75 76 77 78 79

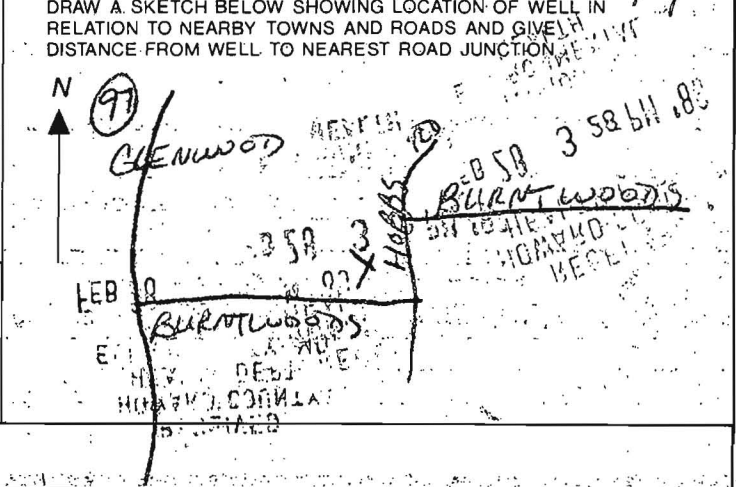
SPECIAL CONDITIONS

LOCATION OF WELL **R 43214**
HOWARD **40, 10**
 8 COUNTY 21 **3/2/89**
ELLERSLIE
 23 SUBDIVISION 42
 SECTION _____ LOT **13**
 44 46 48 50
GLENWOOD
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **1** MI
 73 76 77 78

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 N W N E
 8 8-9 8-9
 W TOWN E
 8 8
 S W S E
 8-9 8-9
 NEAR WHAT ROAD **ELLERSLIE CT**
 11 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 34 **800** 37
 DISTANCE FROM ROAD
 ENTER FT or MI **FT**
 38 39

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard **A. 3110**
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED **031589** **Sid, amp** **09-14-89**
 43 48 CO SIGNATURE EXP. DATE
 NORTH GRID **528000** EAST GRID **0794000**
 50 55 57 63

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
 N **7904**
 E **5208**
 000 000
101' CASING
87' OPEN
3' CASING A.G.
33 BAGS - GROUT
MR. [unclear] 6/6/89
✓ TAG OK



5/24/90

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement

Receipt # 45808
Date 04/20/90

Name of Installer W.W.King Plbg. & Htg. Contr., Inc.

Telephone 1-301-662-6990

License Number 2217

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Pulte Homes

Telephone 1-301-681-5800

Subdivision Ellerslie Est/Glen Manor Lot # 13

Well Tag # HO-88-0500

Site Address 3107 Ellerslie

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
- 2. Make Goulds
- 3. Model # 5ES07422
- 4. Capacity 5 GPM
- 5. Pump exceeds well capacity Yes No
- 6. If Yes, is low pressure cutoff switch installed? Yes No
- 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- 1. Horsepower 3/4
- 2. RPM 3500
- 3. Voltage
- a. 110
- b. 220

Pitless Adapter

- 1. Make Martinson
- 2. Model # BP-10X
- 3. Depth 42" min
60" max

Tank

- 1. Capacity 80
- 2. Pressure relief valve? yes

Piping

- 1. Type plastic 160#
- 2. Size 1"
- 3. NSF and/or BOCA Code approved
- 4. Depth of supply line 42" min
60" max

Well data

- 1. Depth 240 ft.
- 2. Yield 8 GPM
- 3. Static water level ft.
- 4. Will water supply be disinfected by installer? yes

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Pitless adapter casing, cap, and well head
OK BDA 5-24-90

Signature of Applicant: Walter W. King

Date: 4-17-90

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

(E)

7.50
NEW CURB 571.00
PROCEDURE
7. STAIR SUPPORT AT
SOLIDOT BACKFILL
7.2

LOT 13
11.706 AC.

APPROVED SITE AND
WALK-THRU BUILDING PERMIT
BP# BU0147778 A# 3111007
APP. SAN 2 DATE 5/5/04
DESC. OF WORK:

Sun room add, 7m

SEWER & UTILITY EXISTING
SEE 2ND SECTION

1. INST. ELEV. TOP OF TRENCH = 572.3
2. INST. ELEV. AT TRENCH = 572.0
3. EXIST. GRADE AT TANK = 572.2
4. PROP. GRADE AT TANK = 574.5
5. INK. INTO TANK = 572.0
6. INV. OUT OF TANK = 571.0

1. EX. ELEV. TOP OF PUMP WELL = 577.4
2. PROP. ELEV. AT PUMP WELL = 575.3
3. INV. INTO PUMP WELL = 571.00
4. BOTTOM OF PUMP = 565.0
5. HIGH WATER LEVEL = 568.1
6. LOW WATER LEVEL = 565.9
7. SEWER 14"
8. FLOOR ONLY

Add on
existing deck

NOTED:
1. ALL 2' FROM
EXISTING AND
ADJACENT TO
POND, SHALL
REPLY JOE
2. ALL 2' FROM
ADJACENT TO
POND, SHALL
REPLY JOE
3. ALL 2' FROM
ADJACENT TO
POND, SHALL
REPLY JOE
4. ALL 2' FROM
ADJACENT TO
POND, SHALL
REPLY JOE

