

C1 41931

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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER

ST/CO USE ONLY DATE Received MM DD YY 04 27 16

DATE WELL COMPLETED MM DD YY 02 29 16

Depth of Well 440 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-15-0201

OWNER: Parakodety/Mallam path / Propi/Monica
WELL SITE ADDRESS: 31030 Foot Hill Dr. TOWN: Elkton City
SUBDIVISION: Foot Hill Village SECTION: LOT: 5

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Grass top soil, Very loose silt, Moist dk. brown, Wearhead Rock, light brown, Med hard lgr, blue silt.

GROUTING RECORD form including: WELL HAS BEEN GROUTED (checked), TYPE OF GROUTING MATERIAL (CEMENT CM, BENTONITE CLAY BC), NO. OF BAGS 23, NO. OF POUNDS 1100, GALLONS OF WATER 418, DEPTH OF GROUT SEAL.

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

MAIN CASING TYPE form including: Nominal diameter top (main) casing, Total depth of main casing.

OTHER CASING (if used) form including: diameter, depth (feet).

SCREEN RECORD form including: screen type or open hole (STEEL ST, BRASS BR, OPEN HOLE HO, BRONZE, PLASTIC PL, OTHER OT).

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED: YES (checked)

CIRCLE APPROPRIATE LETTER: A (checked) 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" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MWD 572
DRILLERS SIGNATURE: [Signature]

LIC. NO. 1 AWD 973

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

DEPTH (nearest ft.) table with columns for casing diameters (8, 9, 11, 15, 17, 21, 23, 24, 26, 30, 32, 36, 38, 39, 41, 45, 47, 51) and slot sizes.

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

PUMPING TEST form including: HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED (air, piston, turbine, centrifugal, rotary, other, jet, submersible).

PUMP INSTALLED form including: DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT, LAND SURFACE.

LATITUDE 39.269419
LONGITUDE 76.861102
(DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info. may result in this form not being processed...

C1 41930

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received MM DD YY

02 29 16

22 440 26 (TO NEAREST FOOT)

HO-15-0201

OWNER Palakodety/Mallampalli, WELL SITE ADDRESS 31030 Pont Hill Dr, TOWN Elkridge City, SUBDIVISION Fort Hill Village, SECTION, LOT 5

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 22 NO. OF POUNDS 1100

GALLONS OF WATER 418

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 440 ft.

DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP 52 ft. to 54 BOTTOM 58 ft.

CASING RECORD

ST STEEL, CO CONCRETE, PL PLASTIC, OT OTHER

MAIN CASING TYPE, Nominal diameter top (main) casing (nearest inch), Total depth of main casing (nearest foot)

60 61 63 64 66 70

OTHER CASING (if used)

diagram for other casing with diameter and depth fields

SCREEN RECORD

ST STEEL, BR BRASS, HO OPEN HOLE, PL PLASTIC, OT OTHER

DEPTH (nearest ft.)

Table with columns for casing types (A, C, H, S, R, E, N) and depth intervals (1-11, 15-17, 23-24, 26-30, 32-36, 38-39, 41-45, 47-51) and slot size/diameter of screen.

DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

PUMPING TEST

HOURS PUMPED (nearest hour) NA

PUMPING RATE (gal. per min.) NA

METHOD USED TO MEASURE PUMPING RATE NA

WATER LEVEL (distance from land surface)

BEFORE PUMPING NA ft.

WHEN PUMPING NA 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, - below, LAND SURFACE -3 (nearest foot)

LATITUDE 39.269452

LONGITUDE 76.861105

(DEFAULT COORD. WGS 84)

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B 1 SEQUENCE NO. (MDE USE ONLY) **46410** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL **HD -15 - 0201** STATE PERMIT NUMBER
 1 2 3 6 please type 70 fill in this form completely 79

B 1 Date Received (APA) 01/13/16
OWNER INFORMATION
 8 MM DD YY 13
 15 Last Name Palakodety/Mallampalli Owner Gopi/Monica First Name 34
 36 Street or RFD 3630 Font Hill Drive 55
 57 Town Ellicott City 70 State MD 72 Zip 21042 76

B 3 LOCATION OF WELL
 8 COUNTY Howard 21
 23 SUBDIVISION Font Hill Village 42
 SECTION 44 46 LOT 5 48 50
 52 NEAREST TOWN Ellicott City 71

DRILLER INFORMATION
 Driller's Name Samuel A Connelly MND 572 76 License No. 81
 Firm Name Connelly + Associates, Inc.
 Address 260 Interstate Ct. Frederick MD 21701
 Signature Samuel A. Connelly Date 1/16/16

B 4 SOURCES OF DRILLING WATER
 1. private
 2.
 3.
 11 STREET ADDRESS 3630 Font Hill Dr. 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST EAST
 SOUTH
 34 38 37
 DISTANCE FROM ROAD FT
 ENTER FT OR MI 38 39
 TAX MAP: 24 BLK: 8 PARCEL 1079

B 2 WELL INFORMATION
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

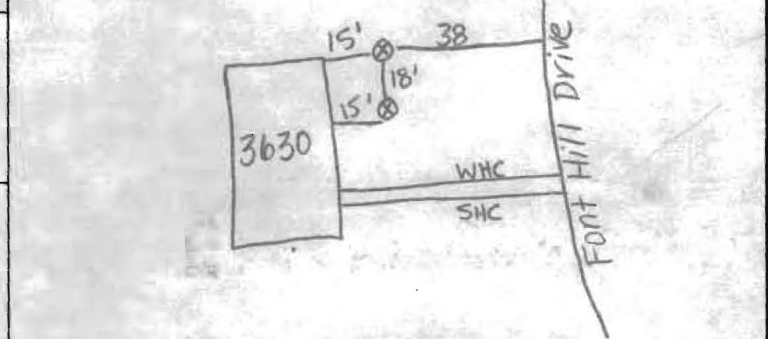
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 OPEN LOOP GEOTHERMAL
 CLOSED LOOP GEOTHERMAL 2 geo bores

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME Howard COUNTY NO. 13
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 01/13/16 CO SIGNATURE K-R-T EXP. DATE 1/13/17
 43 MM DD YY 48

APPROXIMATE DEPTH OF WELL 440 FEET
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

PROPOSED LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL

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
 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

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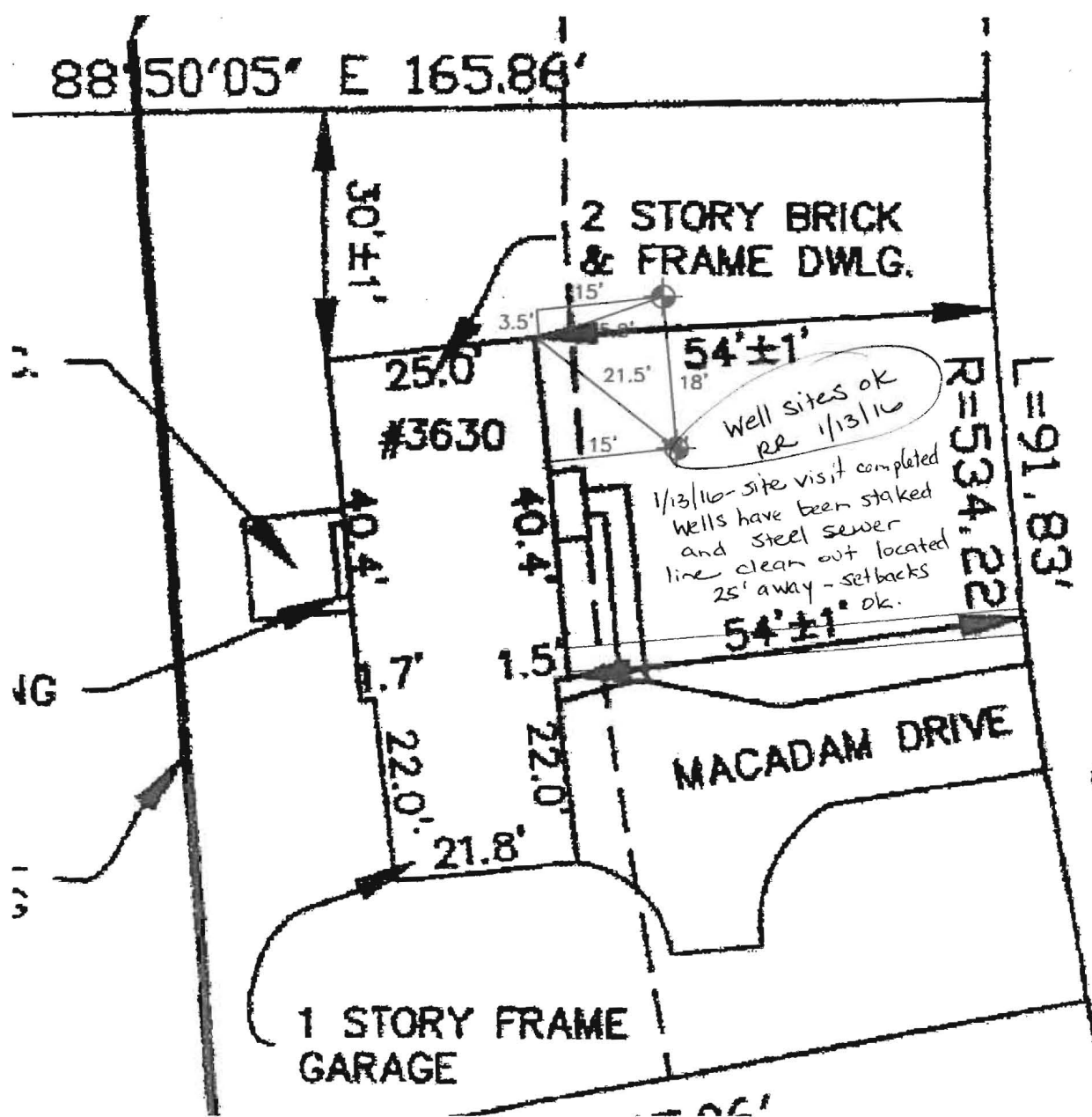
Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER _____ G _____
 PERMIT No. HD -15 - 0201
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED. wells must be grouted from bottom to top.

88°50'05" E 165.86'



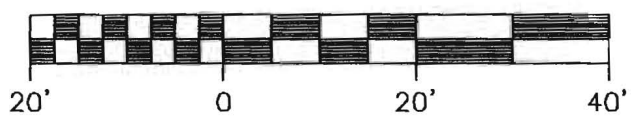
FONT HILL DRIVE
S 11°00'53" E



L E G E N D

- PROPOSED GEOTHERMAL WELL LOCATION
- APPROXIMATE SANITARY SEWER LINE
- APPROXIMATE DOMESTIC WATER LINE

GRAPHICAL SCALE



260 Interstate Court (301) 696-8820
 Frederick, Maryland 21704 (301) 696-0327 fax

PALAKODETY RESIDENCE
 3630 FONT HILL DRIVE, ELLICOTT CITY, MARYLAND

PROPOSED GEOTHERMAL WELL
 LOCATION PLAN

Scale:
 AS SHOWN

Fig.
 1

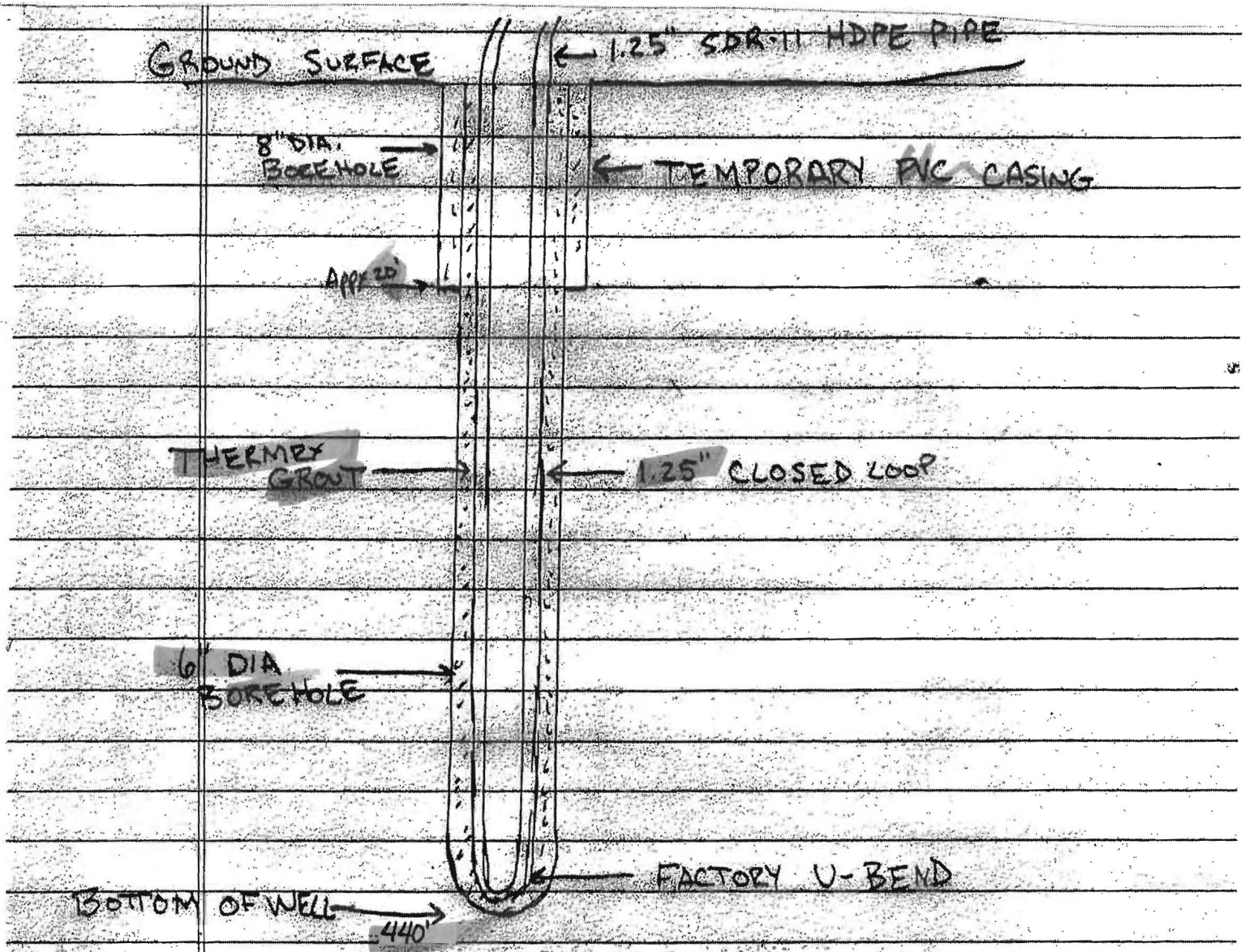
Date:
 DEC. 2015

Drawn By:
 J.A.

Checked By:
 E.S.

Project No.:
 00000

Geothermal Closed Loop – 3630 Font Hill Dr., Ellicott City, MD



Grout information for this property is as follows:

Thermex grout mixture of 50 lb. grout to 17 gallons water, placed in the well using the tremie method, from bottom to top.



260 Interstate Court, Frederick, Maryland 21704 · 301-696-8820 · www.connellygeothermal.com

Howard County
Bureau of Environmental Health
8930 Stanford Boulevard
Columbia, MD 21045

April 22, 2016

RE: Geothermal Well Completion Report / HO-15-0201

Please find enclosed the Well Completion Reports for the above referenced well tag number.

Thank you,

A handwritten signature in black ink, appearing to read 'Emily Sottile', is written over a horizontal line.

Emily Sottile
Business Operations Manager