

657014

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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER

1516084

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received  
MM DD YY  
8 13

MM DD YY  
15 21 05

22 160 26  
(TO NEAREST FOOT)

9/1/05  
O.K. (PB)

110-95-0005  
28 29 30 31 32 33 34 35 36 37

OWNER Winchester Homes first name last name  
STREET OR RFD Riverwood I TOWN Clarksville  
SUBDIVISION Riverwood I SECTION 23/21/86 LOT Pros Pk Q

### 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	
brown rocky clay	2	9	
brown mica	9	27	
Gray mica	27	34	
Brown slate	34	37	
Gray mica	37	135	
Gravel bed	135	142	
Gray mica	142	160	

### GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES  NO   
 TYPE OF GROUTING MATERIAL (Circle one) CEMENT  BENTONITE CLAY   
 NO. OF BAGS 41 NO. OF POUNDS 4100  
 GALLONS OF WATER 246  
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 43 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 ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 45  
 60 61 63 64 66 67 70

OTHER CASING (if used) diameter inch depth (feet) from to  
 E A C H 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

C 2 DEPTH (nearest ft.)

1	2	3	4	5	6
8	9	11	15	17	21
23	24	26	30	32	36
38	39	41	45	47	51

E A C H I N G

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

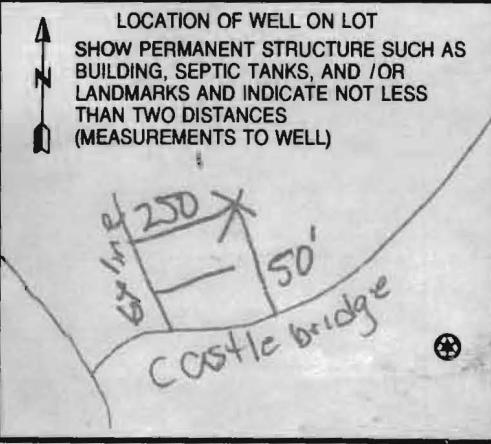
DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)  
 56 60  
 from to

### C 3

PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min.) 15  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 42 ft.  
 WHEN PUMPING 71 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 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 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)



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES  NO   
 CIRCLE APPROPRIATE LETTER  
 A 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. MWD 040  
 DRILLERS SIGNATURE George F. Rostad  
 (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC. NO. IWD 727

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

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

B 1 1461  
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
522426 please type

STATE PERMIT NUMBER  
HO - 95 - 0005  
70 fill in this form completely 79

Date Received (APA)  
OWNER INFORMATION 9979  
8 MM DD YY 13  
Winchester Homes, Inc  
15 Last Name Owner First Name 34  
6905 Rockledge Drive, Suite 800  
36 Street or RFD 55  
Bethesda, Md 20817  
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
Howard CC#  
8 COUNTY 21  
Riverwood Phase I  
23 SUBDIVISION 42  
SECTION 1 LOT pres Q  
44 46 48 50  
Clarksville  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 3 M I  
73 76 77 78

DRILLER INFORMATION  
George F. Easterday M W D 040  
Driller's Name 76 License No. 81  
L. Franklin Easterday, Inc.  
Firm Name  
9265 Brown Church Rd., MT. Airy, Md. 21771  
Address  
George F. Easterday 4/25/05  
Signature Date

B 4  
1 2  
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
Hunter View Road  
11 NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH  
WEST EAST  
SOUTH  
34 400 37  
DISTANCE FROM ROAD Ft.  
ENTER FT OR MI 38 39  
TAX MAP: 23 BLK: 21 PARCEL 96

B 2 WELL INFORMATION  
1 2  
APPROX. PUMPING RATE 5  
(GAL. PER MIN.) 8 12  
AVERAGE DAILY QUANTITY NEEDED 500  
(GAL. PER DAY) 14 20

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL  
Howard A 516084  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S 41  
DATE ISSUED 5/3/05 5/31/06  
43 MM DD YY 48 CO SIGNATURE EXP. DATE  
NORTH GRID 517 000 EAST GRID 826 000  
50 55 57 63

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

APPROXIMATE DEPTH OF WELL 300 FEET  
24 28  
APPROXIMATE DIAMETER OF WELL 6 INCH  
NEAREST INCH

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  
E 516 7  
N 826 6  
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)  
N THIS WELL WILL NOT REPLACE AN EXISTING WELL  
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
D THIS WELL WILL DEEPEM AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

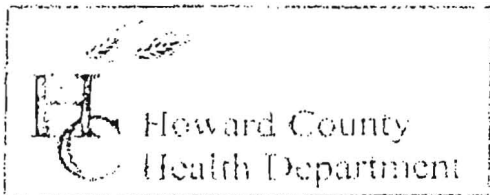
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
15B1  
Howard  
Clarksville  
Clarksville  
108

Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
APPROP. PERMIT NUMBER HO 2004 G 007  
PERMIT No. HO 95 0005  
70 71 72 73 74 75 76 77 78 79

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







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

TO ALL INTERESTED PARTIES

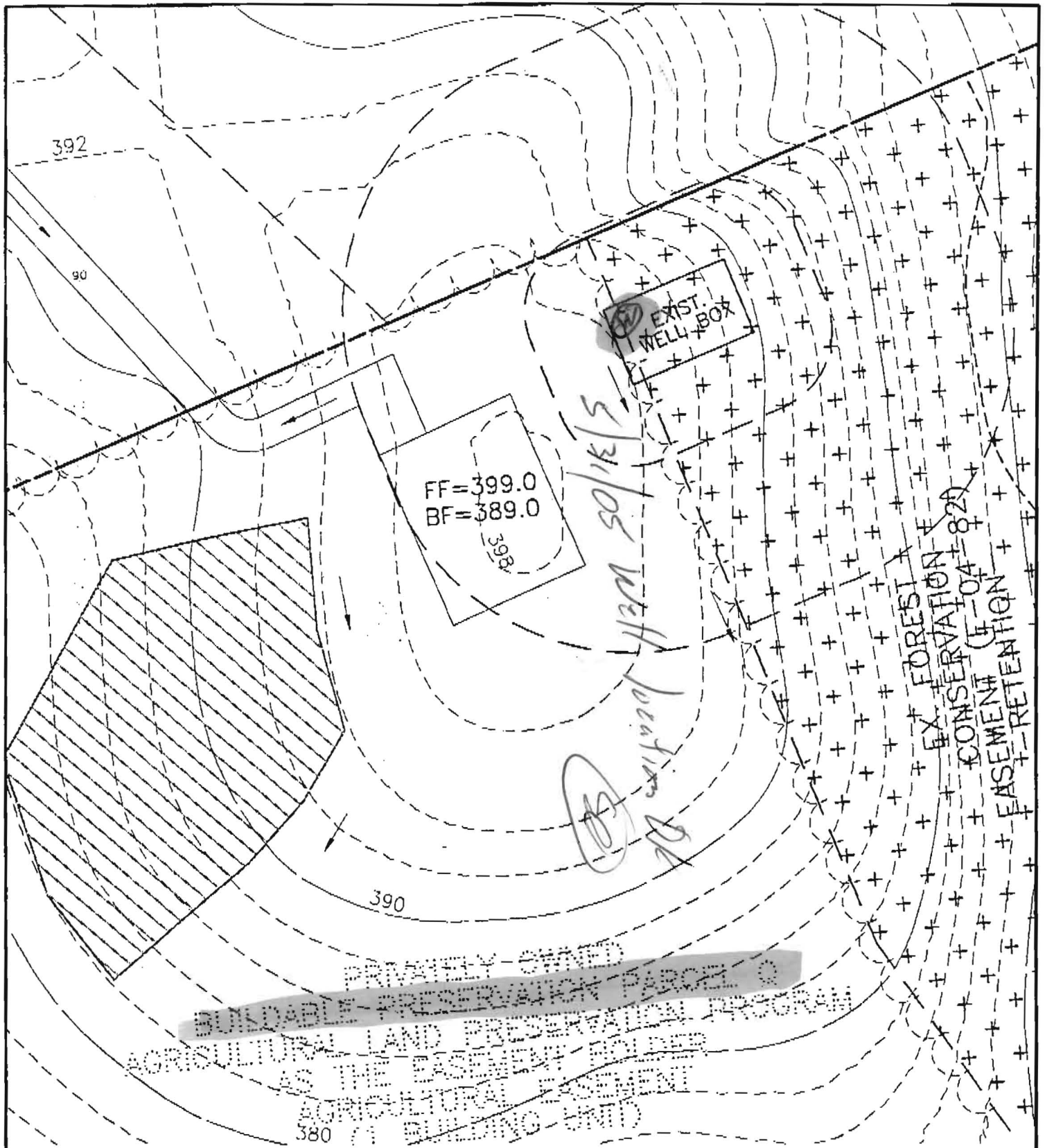
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by Engineer Benchmark,  
 (professional land surveyor or company employing professional land surveyors)  
 on 4/11/05 (date) and does not require a site inspection.
- The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

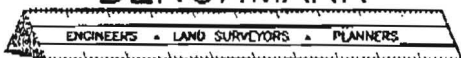
Riverwood Phase I  
 Lots 11, 24-33, 42  
 preservation parcel 0



RIVERWOOD

PARCEL Q

BENCHMARK



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043

PHONE 410-465-6195

FAX: 410-465-6644

THIRD ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 10/12/04

REVISED: 3/29/05. 5/25/05