

C132104

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPE

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

1236
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COUNTY
NUMBER

ST/CO USE ONLY
DATE Received
MM 01 DD 17 YY 14

DATE WELL COMPLETED
MM 12 DD 21 YY 16

Depth of Well
22 (5) 352 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO - 15 - 0363

OWNER MUMONEY, SERIE

WELL SITE ADDRESS 13615 TREADELPHIA MILWAU TOWN CLARKSVILLE

SUBDIVISION Dunfretten Estates SECTION LOT 28

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	
clst	0	1	
soft brown	1	59	
hard gray rock	59	60	
soft brown rock	60	64	✓
hard gray rock	64	89	✓
hard brown rock	89	91	
hard gray rock	91	97	
hard limestone	97	210	
hard gray rock	210	352	

Hole

#1- 352

#2 352'

#3 310'

#4 42'

#5 352

#6 352

Installed

7 1/4" loop

GROUTING RECORD

yes no

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 22 NO. OF POUNDS 1100

GALLONS OF WATER 440

DEPTH OF GROUT SEAL (to nearest foot)

from 0 TOP 52 ft. to 352 BOTTOM 58 ft.

(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

ST CO PL OT

STEEL CONCRETE PLASTIC 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)

diameter inch depth (feet) from to

E A C H C A S I N G

screen type or open hole

insert appropriate code below

ST BR HO PL OT

STEEL BRASS OPEN HOLE PLASTIC OTHER

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

6 9

PUMPING RATE (gal. per min.)

11 15

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20 ft.

WHEN PUMPING 22 25 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine

27 27 27

C centrifugal R rotary O other (describe below)

27 27 27

J jet S submersible

27 27

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no

Y N

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.

C2

DEPTH (nearest ft.)

1 2

E 8 9 11 15 17 21

A 23 24 26 30 32 36

C 38 39 41 45 47 51

S 56 60 64 68

R 72 76 80 84 88 92

E 96 100 104 108 112 116

N 120 124 128 132 136 140

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

56 60 64 68

from to

PUMP INSTALLED

DRILLER INSTALLED PUMP YES NO

(CIRCLE) (YES or 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

49

LAND SURFACE (nearest foot)

- below

49 50 51

DRILLERS LIC. NO. 1 MWD 304

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 WRD 107

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

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

LATITUDE 39.216106

LONGITUDE 76.985686

(DEFAULT COORD. WGS 84)

NOTES:

Tridelpnia m.u. 60.

5.6 342

102

43 21 64

#13615



HOWARD COUNTY HEALTH DEPARTMENT

59840

DATE

11/15/16

W5

Received
From

David Kelly LLC

PHONE #

For

Cell Permit / 13615

Therapeutic Area

☐ CASH

☒ CHECK

NO.

2661

One Hundred Seventy

Dollars

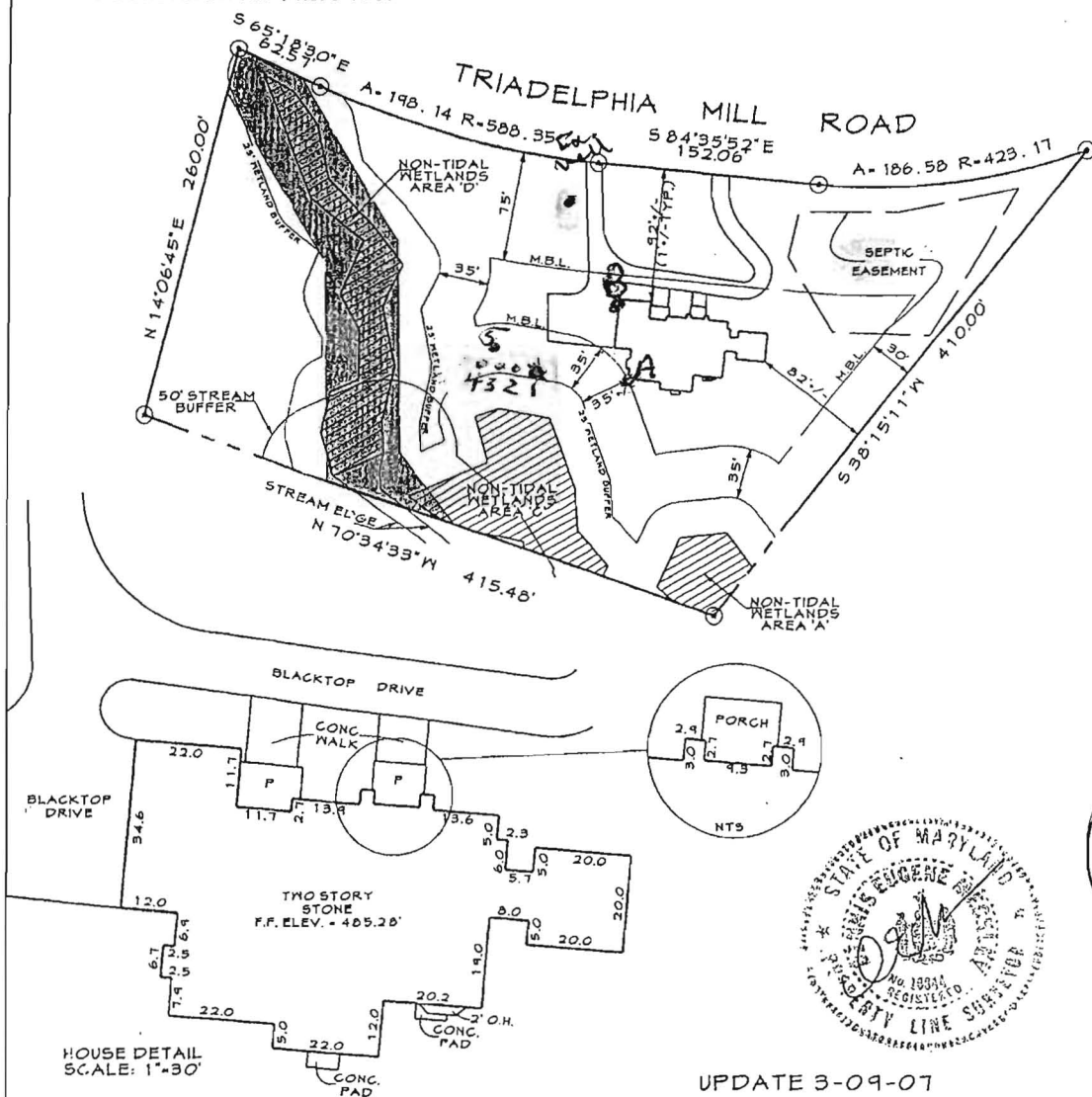
\$

160 W

Received By

King

EX. PUBLIC 100yr. FLOODPLAIN, DRAINAGE AND UTILITY EASEMENT AS SHOWN ON PLAT No. 5403.



A licensed Maryland Surveyor either personally prepared this Location Drawing, or was in responsible charge over its preparation and the surveying work reflected in it, in compliance with the Maryland Minimum Standards of Practice for Land Surveyors.

I hereby certify that I have surveyed the property shown hereon for the sole purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By Dennis E. Meckley Date 3/20/07
Dennis E. Meckley Property Line Surveyor No. 10844

12005230\qgn\loc\lot28.dgn Mar 20, 2007 13:52:59



FREDERICK OFFICE:
3445 Progress Drive, Suite 80
Frederick, MD 21701-4879
(301) 662-1759
FAX (301) 662-8004

WESTMINSTER OFFICE:
438 East Main Street
Westminster, MD 21157-5539
(410) 848-1790
FAX (410) 848-1791

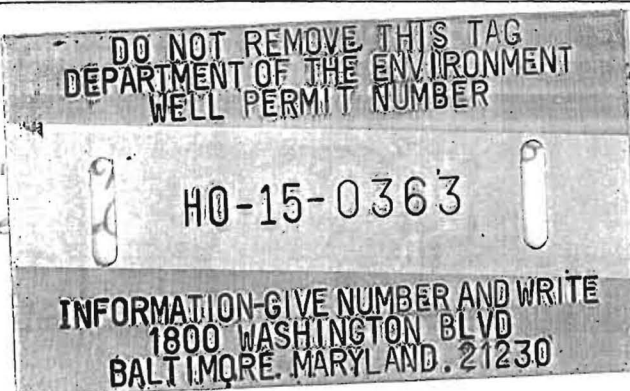
DRAWN BY: CDD
DESIGN BY:
REVIEW BY: DEM
DATE: 7-13-06
SCALE: 1"=100'
JOB NO: 2005030
SHEET: 1 OF 1

geo holes

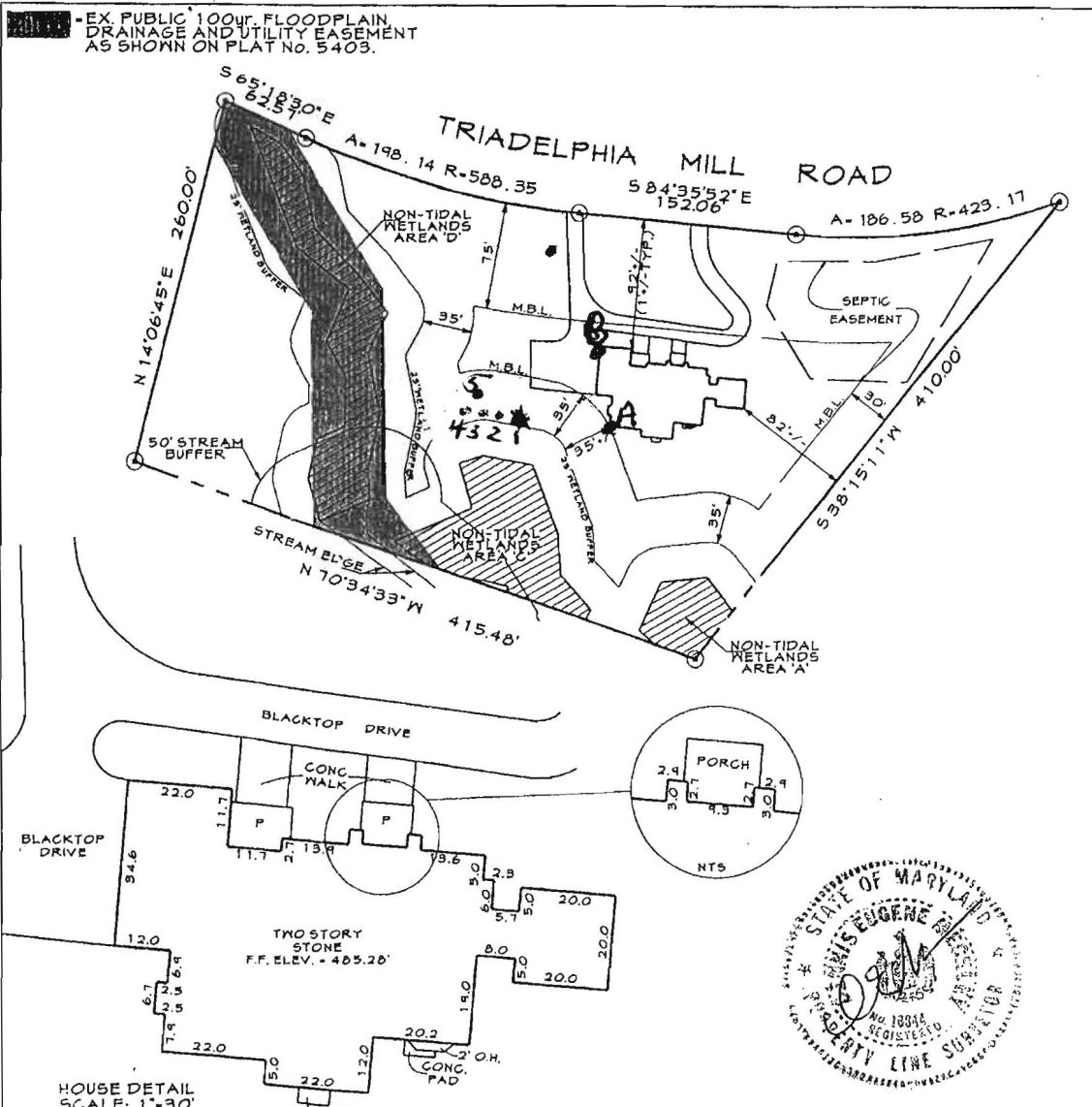
hole #	A	B
1	64	78
5	102	96
4	110	110
3	94	98
2	80	87

11/22/16
Geo holes
Approved
KMO

owner's
Serif M.
13615 Tr
Clarksville



contractor
Loop Htg & Air Cond Co. Inc.
836-7706
at Scott Callum



geo holes

hole #	A	B
1	64	78
5	102	96
4	110	110
3	94	98
2	80	87

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By Dennis E. Meckley Date 3/20/07
Dennis E. Meckley Property Line Surveyor No. 10844

CLSI
www.clsi-chd.com

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2245 Progress Drive, Suite 80
Frederick, MD 21701-4879
(301) 662-1799
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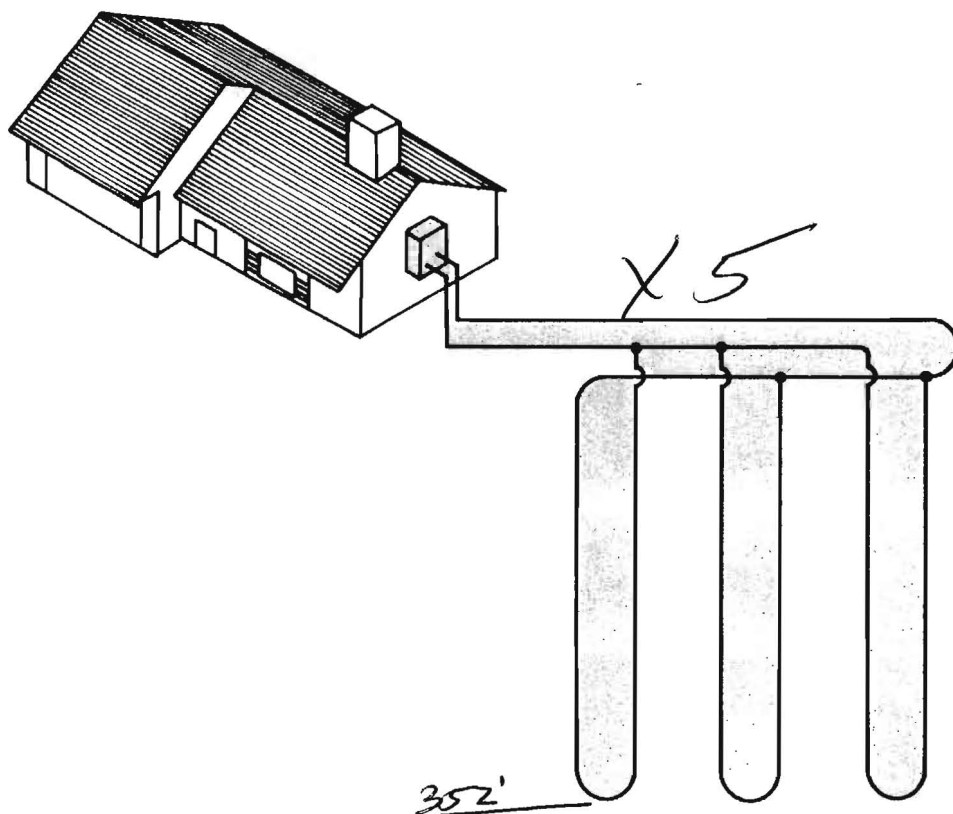
DRAWN BY: CDD
DESIGN BY:
REVIEW BY: DEM
DATE: 7-13-06
SCALE: 1"=130'
JOB NO: 2005030
SHEET: 1 OF 1

owner's
Serif Mumuney
13615 Triadelphia Rd.
Clarksville MD 21029

HVAC contractor
Ground Loop Htg & Air Cond Co. Inc.
410-836-1706
contact Scott Cullum

FILE INQUIRY NOTES

[illegible]



Earth Coil Type: Vertical - Single U-Bend
 Water Flow: Parallel 1'4
 Pipe Sizes: ~~3/4~~ 1-inch loops, ~~1/2~~ 2-inch headers
 Bore Lengths: ~~352'~~ 175 to 225 feet/ton
 Pipe Lengths: ~~704~~ 350 to 450 feet/ton

FIGURE 4.5: Parallel Vertical Ground Heat Exchanger



Howard County
Health Department

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

TO ALL INTERESTED PARTIES

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

Well Site Location:

Dunfries Estates 28 13615 Tridelphia m. ll rd
Subdivision/Property Name Lot# Road Name

- ☐ The well site has been staked by _____,
(professional land surveyor or company employing professional land surveyors)
on _____ (date) and does not require a site inspection.

- ☒ The well driller Geo holes flagged on 11/4/16 by the 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 3/11/05