SEQUENCE NO THIS REPORT MUST BE SUBMITTED WITHIN STATE OF MARYLAND 36796 (MDE USE ONLY) 45 DAYS AFTER WELL IS COMPLETED. WELL COMPLETION REPORT COUNTY ITHIS NUMBER IS TO BE PUNCHED FILL IN THIS FORM COMPLETELY NUMBER PLEASE TYPE IN COLS 3-6 ON ALL CARDS) PERMIT NO. FROM "PERMIT TO DRILL WELL" ST/CO USE ONLY DATE WELL COMPLETED Depth of Well 8/3/16 DATE Received 0268 500 (TO NEAREST FOOT) 16 person 13 30 31 32 33 34 35 36 37 29 TOWN M WELL SITE ADDRESS SUBDIVISION____ SECTION LOT WELL LOG **GROUTING RECORD** C 3 WELL HAS BEEN GROUTED (Circle Appropriate Box) Not required for driven wells **PUMPING TEST** STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH. THICKNESS AND IF WATER BEARING TYPE OF GROUTING MATERIAL (Circle one) HOURS PUMPED (nearest hour) CEMENT CM BENTONITE CLAY BLC DESCRIPTION (Use additional sheets if needed) if water FROM PUMPING RATE (gal. per min.) NO. OF POUNDS NO. OF BAGS GALLONS OF WATER. Ž METHOD USED TO DEPTH OF GROUT SEAL (to nearest foot) MEASURE PUMPING RATE L 58 ft. 50 ft. to 54 BOTTOM 10 WATER LEVEL (distance from land surface) (enter 0 if from surface) BEFORE PUMPING CASING RECORD casing types SIT CO insert WHEN PUMPING 28 appropriate code TYPE OF PUMP USED (for test) below turbine Nominal diameter Total depth MAIN top (main) casing of main casing Gray Slat 55 CASING (nearest inch)! (nearest foot) TYPE centrifugal (describe Grown 9/gt 60 61 63 64 70 S J aubmersible OTHER CASING (if used) Gray Glat 76 depth (feet) inch from PUMP INSTALLED DRILLER INSTALLED PUMP NO. YES (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. SCREEN RECORD screen type or open hole TYPE OF PUMP INSTALLED 200 Flint any 56 PLACE (A,C,J,P,R,S,T,O) SIT BR HO IN BOX 29. BRASS CAPACITY: GALLONS PER MINUTE Gray glate appropriate BRONZE HOLE code OT (to nearest gallon) PLASTE PUMP HORSE POWER 41 C 2 DEPTH (nearest ft.) PUMP COLUMN LENGTH NUMBER OF UNSUCCESSFUL WELLS: (nearest ft.) (circle appropriate box and enter casing height) CASING HEIGHT WELL HYDROFRACTURED 15 17 N + above H LAND SURFACE CIRCLE APPROPRIATE LETTER 30 32 24 26 26 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED (nearest) below foot) **ELECTRIC LOG OBTAINED** 45 47 50 51 TEST WELL CONVERTED TO PRODUCTION LATITUDE 39.36 236 SLOT SIZE 1 WELL I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMARI 28 DA 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. LONGITUDE 77.110489 DIAMETER INFAREST OF SCREEN INCH (DEFAULT COORD, WGS 84) from Pursuant to \$10-624 of the State Govt. Article of the Maryand Code personal info, requested on DRILLERS LIC. NO. 1 MWD 040 GRAVEL PACK L this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info. PANCE WAS FLOWING WELL INSERT F IN BOX 66 may result in this form not being processed. You DHILLERS SIGNATURE have the right to inspect, amend, or correct this (MUST MATCH SIGNATURE ON APPLICATION) MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) form. The Maryland Department of the Environment is subject to the Maryland Public DC. NO. 1 ISD 038 1 T (EROS) W Q Information Act. This form may be made available on the Internet via MDE's website and is 211111 5/100 70 72 subject to inspection or copying, in whole or in SITE SUPERVISOR (sign. of driller or journeyman part, by the pulic and other governmental agencies, if not protected by federal or state law. 75 TELESCOPE responsible for sitework if different from permittee) INDICATOR OTHER DATA COUNTY MDEWMAPER071

MDE USE ONLY)	F MARYLAND PERMIT TO DRILL WEL	STATE PERMIT NUMBER
A Section of the Control of the Cont	ease type	10-15-02-68 70 fill in this form completely
Date Received (APA)		LOCATION OF WELL CON
OG 14 16 OWNER INFORMATION	B 3 Howard	
WARREN BRENDA FLEMING	8 COUNTY	21
15 Last Name Owner First Name 34	23 SUBDIVISION	e Farm
20803 LAVENDAR PLACE Street or RFD 55	SECTION L	LOT L 1
LEXINGTON PARK MD 20653	44 45	48 60
57 Town 70 State 72 Zip 76 DRILLER INFORMATION	Mt. Airy	71
Commo E Englandor ME 040		
Driller's Name 76. License No. 81	B 4	the second secon
L. Franklin Easterday, Inc.	SOURCES OF DRILLING WATER	611 W. Watersville Road
Firm Name	t. wells	11 STREET ADDRESS 30
9265 Brown Church Rd., Mt. Airy, Md. 21771,	1	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
Degre 7. resterlar 61912016		WEIGE
B 2 WELL INFORMATION		34 200 37 SOUTH
1 2 APPROX. PUMPING RATE	The state of	DISTANCE FROM ROAD FL.
(GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED 500	量 (四种) 点 亦多。	TAX MAP: 2 BLK: 14 PARCEL 10
(GAL: PER DAY) 14 20	NOT	
USE FOR WATER (CIRCLE APPROPRIATE BOX) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION		O BE FILLED IN BY DRILLER TH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & AGRICULTURAL	1 Howard	(3)
IRRIGATION) 1 INDUSTRIAL, COMMERCIAL, DEWATERING	COUNTY NAME STATE	COUNTY NO.
P PUBLIC WATER SUPPLY WELL	SIGNATURE	INSERT S 41
T TEST, OBSERVATION, MONITORING	16/22/16~	Enla Cello 6/22/171
O OPEN LOOP GEOTHERMAL C CLOSED LOOP GEOTHERMAL	43 MM DD YY 48	CO SIGNATURE EXP. DATE
U deduction destinations		
APPROXIMATE DEPTH OF WELL 300 FEET	The second secon	SED LOCATION OF WELL ON LOT RUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM.
24 28	ROADS AND/OR LAN	DMARKS AND INDICATE NOT LESS THAN TWO
APPROXIMATE DIAMETER OF WELL 6 NEARES	ST DISTA	NCE MEASUREMENTS TO WELL
METHOD OF DRILLING (circle one)		
BORED (or Augered) JETTED Jetted & DRIVEN		
AIR-PERcussion HOTARY (Hydraulic Hotary)		
CABLE REVerse ROTary DRIve POINT other		://e/ X
REPLACEMENT OR DEEPENED WELLS		7N1
(CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL		0
THIS WELL WILL REPLACE AN EXISTING WELL Y ABANDONED AND SEALED		Mr.
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPRIORING AUTHORITY	1. West	Why and all I
FOR POLICY ON STANDBY WELLS	this /	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED	NOLD	gred Rd
(IF AVAILABLE) 4152	N OZ	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)		F 10
APPROP PERMIT NUMBER		1
PERMIT No. 10 - 15 - 0268		
SPECIAL CONDITIONS BOTE APPROXIME AUTHORITIES BHOOLD USE SEPARATE SHEET IF MESONS		•

Page	of	
Date	7-21-	16

Review					
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FIELD DATA SHEET HYDROGEOLOGIC AREA (3) WELL YIELD TEST

	TI K APPARATOR A	N. See A. L. Market J. C. A. A.	CLEANING A TECHNIS	A ESCO A	
Mary 1	and Well Permit No. HO - 15 -	-0268	Election	n District	or to discount or to the control of
	ion of Property (road) 6/1			Rd	
Subdi	vision ELM Lee GARM			Plat	Sec.
Well	Driller EASTERd my	0	wner Bredd	a Floring	WATEN
	Dapth of Well 500 Distance of Measuring Poir Static Water Level (S.W.L.	t (M.P.) al	bove ground P. 54	2	05 400
I. Hi	gh Rate Pumping reservoir Time pump started 4, 45 Total time 15 to reach p		Pumping rate or level 19		500

II. Recovery pump test data - observations to be recorded every 15 minutes.

TIME	WATER LEVEL, Below M.P.	PUMPING RATE Time to fill _/ gal. bucket	TLOW METER READING (if used)	CALCULATED FLOW (gallons per min.
5:00	145	35,		1.7
5:15	145	35		1.7
5:30.	145	35,		1.7
5.45	145	35		1.7
6.00.	145	35		1.7
6:15	145	40		1.5
6:30	145	40		1.5
6:45	145	47		1.25
7:00	146	47		1,25
112	146	47		1.25
7'30	146	47		1,25
1:45	146	53		1.1
(:00)	146	53		1.1
8:30	146	53		1.1
6.30	146	53 53 53		
3:45	146	53		- 14
7:00	146	53		1.1
115	146	53		
1:30	146	53		1.1 .
1,45	146	5 3		1,1
0.00	146	53 53 53		1.1,
0,15	146	55		1.1
0.30	146	53		1.1
1:00	146	37		1.1

HOWARD COUNTY HEALTH DEPARTMENT

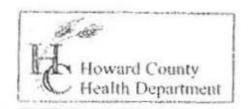
BUREAU OF ENVIRONMENTAL HEALTH WELL & SEPTIC PROGRAM

TEL: (410)313-1771 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired

inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well
Company Name: Burger Fre Telephone #: 110-259-8 924 Address: 640 kkes M.// Ed We Stars W. M.
(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer License # and name of individual responsible for the field installation: Name (Print): License# 6 4802 *A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.
Name of Property Owner: Brenda Flenghts Telephone #: 301-481-5852 Subdivision: Site Address: 591 West Watersville Rd Well Tag #: HO-15-0268/01/02 2018
Submersible Pump Data Make: Note of the second of the sec
Piping to house Type: 1' 7 5 PSI: 200 (160 psi min) Depth of supply line: 42 (36" min) PSI: 3 (36" min) Depth of supply line: 42 (36" min) PSI: 3 (36" min) Length of sleeve (5" minimum from foundation): 10 (5) Sleeve sealed properly: 5 (36" min)
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.
Signature of company representative responsible for installation date
Date Insp. Requested: O O DO DO B Date Insp. Approved: O O DO DO B Inspector: Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade/attached to cap properly Safety rope not outside of well cap/casing Correct well tag attached properly and casing 8" above finished grade Water supply line sleeved adequately at house connection
Water supply line sleeved adequately at house connection Adequate grout observed below pitless adapter Adequate grout observed below pitless adapter



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:

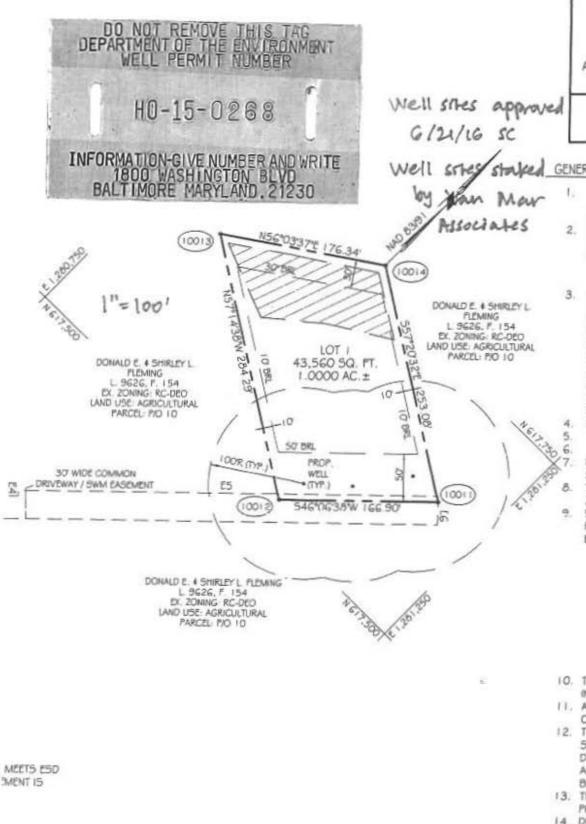
ফ্	The well site has been staked by	VAN	MAR	ASSOCIATES	14
	(professional land surveyor or company on				
	on 6-6-16 (date) an	d does	not require	a site inspection	

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

611 Waterswelle Rosal Warren Residence



HO. CO. CONTROL STA. 02GB ADC MAP: 08 GRID: C-2 TAX MAP: 2: GR

VICIN SCALE: 1

GENERAL NOTES:

THE LOTS SHOWN HEREON COMPLY WITH TO AREA AS REQUIRED BY THE MARYLAND STAT REGULATIONS.

COORDINATES ARE BASED ON THE MARYLA PROJECTED BY HOWARD COUNTY GEODETIC 02GB

> STA. 02HC N. 612,924.256 STA, OZGB N. 614,978,569

THIS AREA DESIGNATES A P. 10,000 SQUARE FEET (OR SHARED DRAIN FIELDS ASSOCIATED WITH A REQUIRED BY THE MARYLAND STATE DEPART INDIVIDUAL SEWAGE DISPOSAL (COMAR 26. IN THIS AREA ARE RESTRICTED UNTIL PUBLIC EASEMENTS SHALL BECOME NULL AND VOID SEWAGE SYSTEM, THE COUNTY HEALTH OFF GRANT VARIANCES FOR ENCROACHMENTS II RECORDATION OF A MODIFIED SEWAGE EAS B.R.L. - REPRESENTS BUILDING RESTRICTION

 \mathbf{p} REPRESENTS CONCRETE MONUMENT

0 REPRESENTS IRON REBAR SET (UNLE PUBLIC WATER AND SEWER ARE NOT AVAILAL SEWER WILL BE PROVIDED UNTIL PUBLIC UTIL THE SUBJECT PROPERTY IS ZONED "RC-DEO" ZONING PLAN.

DRIVEWAYS SHALL BE PROVIDED PRIOR TO I PERMIT FOR ANY NEW DWELLINGS TO INSURE EMERGENCY VEHICLES PER THE FOLLOWING I

1) WIDTH - 12' (16' SERVING MORE

2) SURFACE - 6' OF COMPACTED CF COATING (1-1/2" MIN.);

GEOMETRY - MAX. 15% GRADE, N TURNING RADIUS:

4) STRUCTURES (CULVERTS / BRIDGE GROSS TONS (H25 LOADING);

5) DRAINAGE ELEMENTS - CAPABLE (WITH NO MORE THAN ONE FOOT D

6) MAINTENANCE - SUFFICIENT TO IA 10. THIS PLAT IS BASED ON A FIELD RUN MONUN IN FEBRUARY, 1985 BY VANMAR ASSOCIATE

II. AREAS AS STATED ON THIS PLAT ARE TO BE OTHERWISE NOTED

12. THIS PLAT IS IN COMPUANCE WITH THE AMEN SUBDIVISION AND LAND DEVELOPMENT REGU DEVELOPMENT OR CONSTRUCTION OF THIS L AND BUFFER REGULATION IN EFFECT AT THE 1 BUILDING/GRADING PERMIT.

13. THERE ARE NO HISTORIC SITES, CEMETERIES PROPERTY

14. DEVELOPER RESERVES UNTO ITSELF, ITS SUC EASEMENTS SHOWN ON THIS PLAN FOR WAT! PUBLIC UTILITIES LOCATED IN, ON OVER AND CONVEYANCES OF THE APORESAID LOTS / PA EASEMENTS HEREIN RESERVED, WHETHER OR CONVEYING SAID LOTS / PARCELS. DEVELOP! FOR THE EASEMENTS HEREIN RESERVED TO H

LAND RECORDS OF HOWARD COLINTY

OF THE PUBLIC UTILITIES AND THEIR ACCEPTA SHALL ACCEPT THE EASEMENTS AND RECORD

NOTE: ALL LOTS IN THIS SUBDIVISION ARE SUBJECT TO THE MIHLL



2020 Ventrie Chart. • P.O. BOX 245 • Myerkelle, MD 21773 • B00-252-7342 • FAX 301-715-2348 www.fredericktownelabs.com ● info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 11683 - 1-1 Field Record

Site visit performed on: Tuesday, May 29, 2018 11:42 AM

> State ID No. 7975DC by: Dennis Crockett

Affiliation: Fredericktowne Labs, Inc.

Property Owner: **NSB** Enterprises

Property Address: 591 W. Watersville Road

Mt. Airy, MD 21771

Pressure Tank Sample Source:

Treatment Devices Noted: No Treatment Devices

Well No.: HO-15-0268

Field pH: 7.4

Free Res. Cl.: <0.1 mg/l

Temp: 14.1° C

Laboratory Report

Sample Received at laboratory: 5/29/2018 1:25 PM

Bacteriological results:

Start End Total Colif. (/100ml) E.coli.(/100ml) Analyst Method Date Time Time 05/29/18-13:41 05/30/18-07:59 JD

Bacteriological analysis of this sample indicates the water is safe for human consumption and meets federal, state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen	9.4 mg/l	10	5/29/2018	300.0	PH
Sand	<2 mg/l	5	5/29/2018	0.065mmFilter	JD
Turbidity	1.9 NTU	<10	5/29/2018	180.1	KB

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory Maryland Cert. No. 116 Virginia Cert. No. 00444 MDOT WBE Cert. No.: 91-158

5/30/2018 1:40:19 PM

Page 1 of 1 No Regulatory Reports Required



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date - DECEMBER 22, 2018

June 22, 2018

Homeowner 591 West Watersville Road Mt. Airy, MD 21771

RE: Elm-Lee Farm, Lot 1

591 W. Watersville Road Building Permit: B17003209 Well Permit: HO-15-0268

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on 1/4/2018. Final approval of the well line connection to the dwelling was granted on 1/2/2018. The well construction was completed on 7/20/2016. Water samples were collected on 5/29/2018.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-15-0268. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire six months from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the Annotated Code of Maryland, Environment Article, 9-1311, subject to a fine of up to \$500 or imprisonment not to exceed three months.

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website: http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf

Website: www.hchealth.org Facebook: www.facebook.com/hocohealth Twitter: @HoCoHealth



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

Maura J. Rossman, M.D., Health Officer

In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor

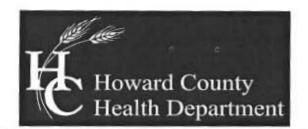
Groundwater Management Section

Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits

Community Hygiene Program

File



Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO: Kent Sheubrooks, Chief

Dept. Planning & Zoning

FROM: Kevin M. Wolf, L.E.H.S., Supervisor

Groundwater Mgmt. Sec. Well & Septic Program

DATE: August 4, 2016

RE: 'All-Wells-Drilled' - F-16-058

Elm Lee Farm Lot 1

The wells for the Elm Lee Farm have been drilled and received preliminary approval by the Health Department. The recordation of plat F-16-058 should not be held up any longer due to issues involving well drilling. The developer of this project has fulfilled this prerequisite. If there are any questions involving this particular memorandum, I can be reached at (410) 313 – 2645 or kwolf@howardcountymd.gov

KMW

C.c. Debbie VanSant, DKV@vanmar.com

File

MARYLAND DEPARTMENT OF THE ENVIRONMENT WATER MANAGEMENT ADMINISTRATION 1800 Washington Blvd. Baltimore, Maryland 21230 (410) 537-3784

. .

WATER WELL HYDROFRACTURE REPORT

WELL TAG NUMBER 40-15-02 DATE WORK PERFORMED (mm/dd/yyyy) 07/20/2016
WELL SITE ADDRESS 611 W. WATERS WITTE ROAD
TAX MAP 2 BLK 14 PARCEL 10 LATITUDE 3 9 362361 LONGITUDE 72 -110489
CASING DEPTH 40_FT CASING TYPE (circle) ST OR PVC DIAMETER 6
WELL DEPTH 500 FT WATER LEVEL BEFORE FRAC 54 FT YIELD BEFORE FRAC 2 GPM
PACKER SETTINGS (circle) SINGLE or MULTIPLE SET DEPTH OF SHALLOWEST PACKER
SOURCE OF WATER LUSS C
OBSERVATIONS

SET NUMBER	TOP ZONE (FT)	BOTTOM ZONE (FT)	MAX PRESSURE (PSI)	WATER VOLUME USED (GALLONS)
1 /	80	500	1300	1000
2 2	140	500	1300	1000
3				
4	1	1	101 288	
5				

WATER LEVEL AFTER FRACE FT YIELD AFTER FRAC GPM
NOTE: YIELD TEST PROCEDURES CAN BE FOUND UNDER COMAR 26.04.04.26.G.

REGULATIONS FOR HYDROFRACTURING OF WATER WELLS CAN BE FOUND IN COMAR 26.04.04.28. FAILURE TO FOLLOW REGULATORY PROCEDURES WILL CONSTITUTE RECEIVING A WRITTEN VIOLATION WHICH MAY RESULT IN PENALTIES DESCRIBED IN COMAR 26.04.04.38.

This Notice is provided pursuant to \$10-624 of the Blakes Government Article of the Maryland code. The Personal Information Requested on this form is intended to be used in processing this form pursuant to COMAR 26.04.64. Feature to provide the information requested may result in the form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("MDE") a public agency and subject to the Maryland Public information Act. This form may be made available on the internet via MDE a website and subject to inspection or copyling. In whole or inpart, by the public and other government agencies. If not protected by Federal or State law.

Bruce Thampson JSD 038
DRILLER SIGNATURE
LIC#