

C1 5210

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)ST/CO USE ONLY
DATE Received
MM DD YY

DATE WELL COMPLETED

8 15 20

10 24 2006

Depth of Well

22 200 26

(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO - 95 - 0533

28 29 30 31 32 33 34 35 36 37

OWNER Coleman Michelle
STREET OR RFD Williamfield Drive
SUBDIVISION Coleman Property SECTION LOT 1

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	
Overburden	0	20	
Gray Rock	20	200	x

water at 33' & 103'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ CM BENTONITE CLAY ☒ BC

NO. OF BAGS 45 46 NO. OF ROUNDS 20 26

GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 25 ft.
48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below
☒ ST STEEL ☒ CO CONCRETE
☒ PL PLASTIC ☒ OT OTHERMAIN CASING TYPE PL
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 25
60 61 63 64 66 70OTHER CASING (if used)
diameter inch depth (feet) from to
E A C H C A S I N Gscreen type or open hole
insert appropriate code below
☒ ST STEEL ☒ BR BRASS ☒ HO OPEN HOLE
☒ PL PLASTIC ☒ OT OTHERC 2 DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100E A C H C A S I N G
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

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 Q70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 17.64

METHOD USED TO MEASURE PUMPING RATE submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 20 ft.

WHEN PUMPING 20 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 29CAPACITY:
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 (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

LINE

Prop 20' 15'

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED ☒ 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 28.04.04 "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. M S D 1 6 2

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)NC. NO. AWD766
Daryl Hule

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

B 1 3911
1 2 3 6SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
5255 77 please type

STATE PERMIT NUMBER

HD-95-0533
70 79

fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 AM DD YY 13

Coleman Michelle
15 Last Name Owner First Name 3413104 Williamfield Drive
36 Street or RFD 55Ellicott City MD 21042
57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Michael D. Iron MS D 162
Driller's Name 76 License No. 81G. Edgar Harr Sons' Corp.
Firm Name12047 Falls Road, Cockeysville 21030
Address

Signature Date 9/27/06

B 2 WELL INFORMATION

APPROX. PUMPING RATE
(GAL. PER MIN.)5
8 750 12AVERAGE 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
- ☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 250 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jettied & 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
- 39 ☐ 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 DEEPEN AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G

PERMIT No. HD-95-0533
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

2 existing wells need abandonment

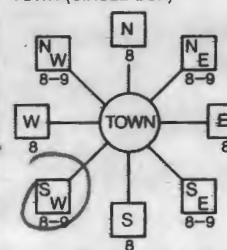
B 3 LOCATION OF WELL

8 COUNTY 21

23 SUBDIVISION 42

SECTION 1 LOT 41
44 46 48 50West Friendship
52 NEAREST TOWN 71MILES FROM TOWN (enter 0 if in town) 3 MI
73 76 77 78

B 4

1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)11 13104 Williamfield DR, 30
NEAR WHAT ROADON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)

34 300 37
DISTANCE FROM ROAD ENTER FT OR MI 38 39

ENTER FT OR MI 38 39

TAX MAP: 22 BLK: 4 PARCEL 205

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVALHoward A-522506
COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 9/29/06 9/29/07
43 MM DD YY 48 CO SIGNATURE EXP/DATENORTH GRID 526 000 EAST GRID 809 000
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

E 809

N 526

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

N



HARR WELL DRILLING

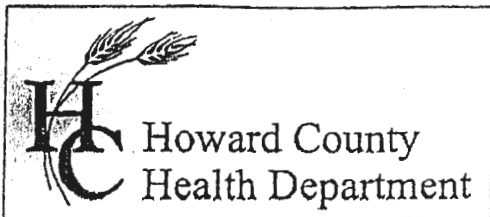
12047 FALLS ROAD
COCKEYSVILLE, MD 21030
410-252-4588

HOWARD COUNTY YIELD TEST REPORT

Date Test Performed: 10-23-06
Address: 13104 Williamfield Dr
Owner Name: Michelle Coleman
Well Depth: 200 Ft

Permit Number: HO - 95-0533
Subdivision: Coleman Property L#1
Election District:
Static Water Level: 20 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5gallon bucket	Calculated Flow-Gallons Per Minute
1215	20 ft		17 sec	17.64
1230	20		17	17.64
1245	20		17	17.64
1300	20		17	17.64
1315	20		17	17.64
1330	20		17	17.64
1345	20		17	17.64
1400	20		17	17.64
1415	20		17	17.64
1430	20		17	17.64
1445	20		17	17.64
1500	20		17	17.64
1515	20		17	17.64



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

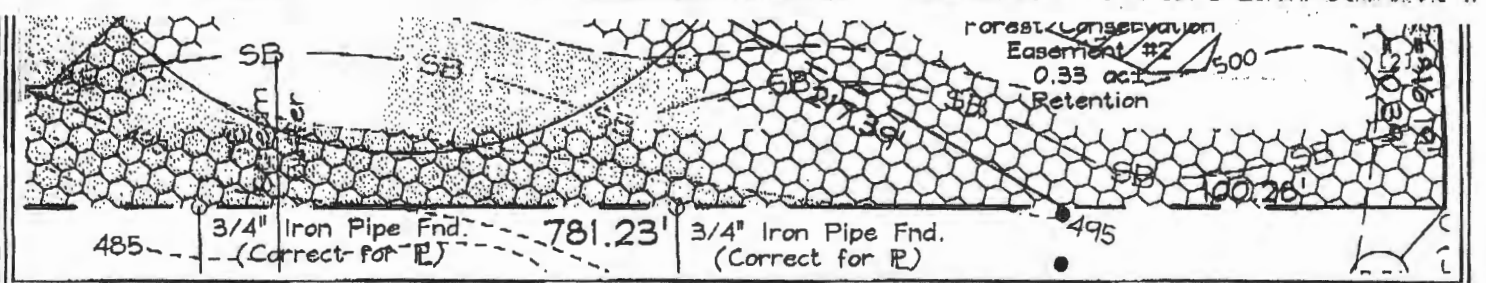
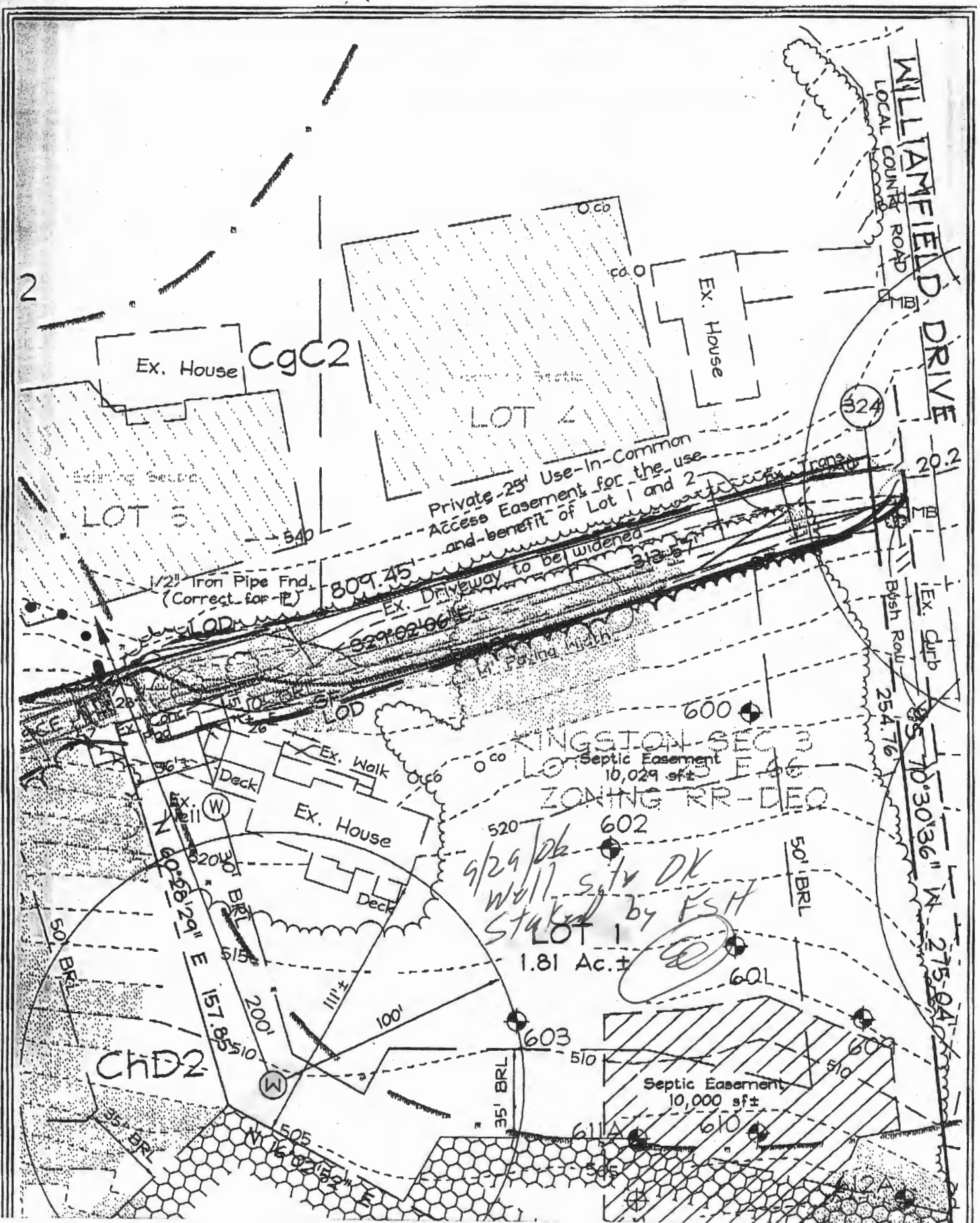
ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- ☒ The well site has been staked by FSH Assoc
on 9-22-06 and is ready for site inspection.
- ☐ _____ will call the Health Department
for a time to meet in the field to verify a well location.
- ☐ Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application.
This should help improve communication allowing a more timely
service for our citizens.

KN



DESIGN BY: ZYF	WELL EXHIBIT COLEMAN PROPERTY LOT 1 TAX MAP ²² 33 GRID 4 3RD ELECTION DISTRICT	PARCEL 205 HOWARD COUNTY, MARYLAND
DRAWN BY: HK		
CHECKED BY: ZYF		
SCALE: 1"=50'		
DATE: August 21, 2006		
W.O. No.: 3332		
SHEET No.: 1 OF 1		

G. EDGAR HARR SONS' CORP
12047 FALLS ROAD
COCKEYSVILLE, MD 21030
410-252-4588 410-560-0784 FAX

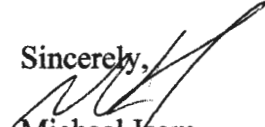
Howard County Health Dept
7178 Columbia Gateway Drive
Columbia, MD 21046

November 9, 2006

To whom it may concern,

As of today, the new well drilled at 13104 Williamfield Drive (Coleman Property lot 1, HO-95-0533) has been connected to the house. It is the only source of water for the home. The existing well has been disconnected from the house lines, and only supplies water to an outside hydrant. If you have any questions, please give me a call.

Sincerely,



Michael Isom
MSD162