

Ci 0541

SEQUENCE NO. (DENY USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER A² - 38841

DATE Received

DATE WELL COMPLETED 10 20 89

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0214

OWNER SIGNATURE HOMES INC. STREET OR RFD last name (SPRINGWOOD COURT) first name TOWN GLENELE SUBDIVISION RIDGEWOOD SECTION - LOT 7

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include: rolling ground gravel, brown shale, water, brown shale, water, brown gray sandstone, water, flint gray sandstone, dry hole sealed.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle appropriate box) YES (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 14 NO. OF POUNDS 1344 GALLONS OF WATER 84 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 39 ft.

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) 6 300

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below (ST) BR (HO) (PL) OT STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

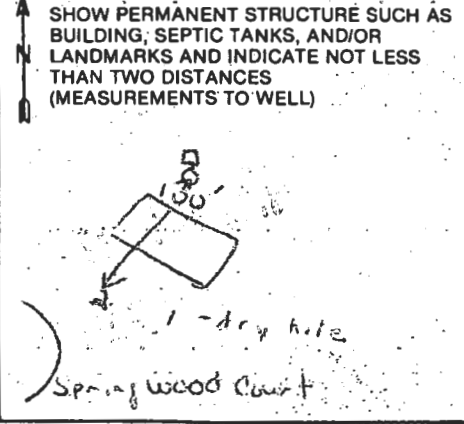
C 3

PUMPING TEST HOURS PUMPED (nearest hour) 5 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE watch + bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 40 WHEN PUMPING 200 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 WILL INSTALL PUMP (CIRCLE) (YES or NO) YES (Y) NO (N) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,M) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) (+) above (-) below LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT



A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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 IDENT. NO. 359

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

B 7 9329 SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-88-0214
fill in this form completely

Date Received (APA) 09/22/88
OWNER INFORMATION
Signature Homes Inc.
P.O. Box 2840
Columbia MD 21045

LOCATION OF WELL
Howard
Ridgewood
SECTION 44 46 LOT 7
Glensy
MILES FROM TOWN (enter 0 if in town) 1 MI

DRILLER INFORMATION
Robert W. Reichart 353
Wm. W. Reichart Inc
1772 Baltimore Pike, Hanover, PA 17331
9/2/88

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
Springwood Ct
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 160
ENTER FT. or MI E

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD A38841
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 100488
NORTH GRID 520000 EAST GRID 0807000
OVER

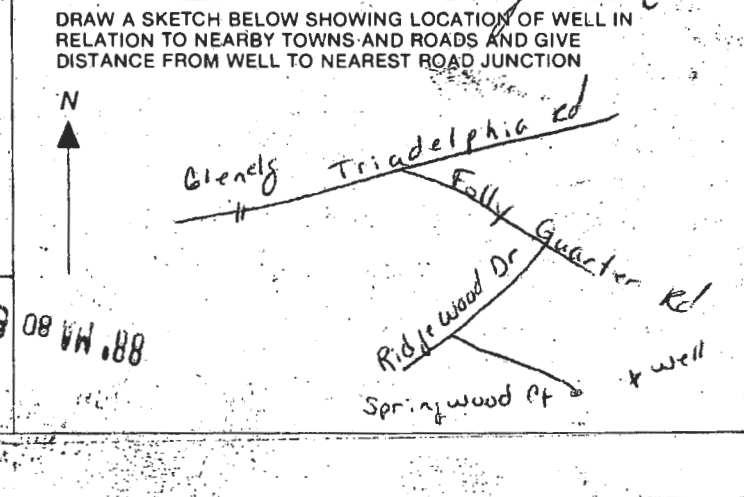
APPROXIMATE DEPTH OF WELL 550 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. Approved well
2. 42 casing
3. 39' of open hole
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800 7
N 520 0

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
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEAN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP
FORCE PERMIT NO. 40-88-0214

SPECIAL CONDITIONS

Page _____ of _____
 Date 10/20/88

Review ok 12/9/88 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0214
 Location of property (road) Springwood Court
 Subdivision RIDGEWOOD Lot 7 Block - Plat - Sec. -
 Well Driller R. REICHA Owner Signature Homes Inc.

Depth of well 300'
 Distance of measuring point (M.P.) above ground 0' surface
 Static water level (S.W.L.) below M.P. 40'

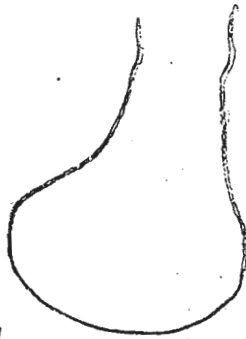
I. High rate pumping -- reservoir drawdown

Time pump started 1:15 Pumping rate 8 1/2 G.P.M.
 Total time 2 hrs to reach pumping water level 200 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
1:15	40'	7 sec	N/A	8 1/2
1:30	57'	7 sec		8 1/2
1:45	67'	7 sec		8 1/2
2:00	99'	7 sec		8 1/2
2:15	128'	7 sec		8 1/2
2:30	153'	8 sec		7 1/2
2:45	173'	8 sec		7 1/2
3:00	198'	8 sec		7 1/2
3:15	200'	14 sec		4
3:30				
3:45				
4:00				
4:15				
4:30				
4:45				
5:00				
5:15				
5:30				
5:45				
6:00				
6:15	200'	14 sec		4

Handwritten notes:
 well 11/12/90
 callahan
 156



↓
#0214
Well as per staked }
34±' ↓ x dig hole to be
completed 10/20/88

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.
SEP 15 9 08 AM '88

10/31/89
1/30/90

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # 44879
Date 08-10-89

Name of Installer CUMBERLAND CO.

Telephone 854-6838

License Number ~~249~~ 249
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Jonathan SCOTT Telephone 421-1214
Subdivision RIDGEWOOD Lot # 7 Well Tag # HO-88-0214 COLLAPSED
Site Address 13827 SPRINGWOOD CT GLENELG M.D

NEW WELL HO-88-1152 DRILLED 1/90

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower	1. Make
a. Deep well jet	2. RPM	2. Model #
b. Shallow well jet	3. Voltage	3. Depth
c. Submersible <input checked="" type="checkbox"/>	a. 110	
2. Make	b. 220	
3. Model #		
4. Capacity _____ GPM		
5. Pump exceeds well capacity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input checked="" type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other _____		

Tank	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth <u>300</u> ft.
2. Pressure relief valve? _____	2. Size <u>1"</u>	2. Yield <u>4</u> GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level <u>40</u> ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? <u>Yes</u>

NO TAG
NOTIFIED DRILLER

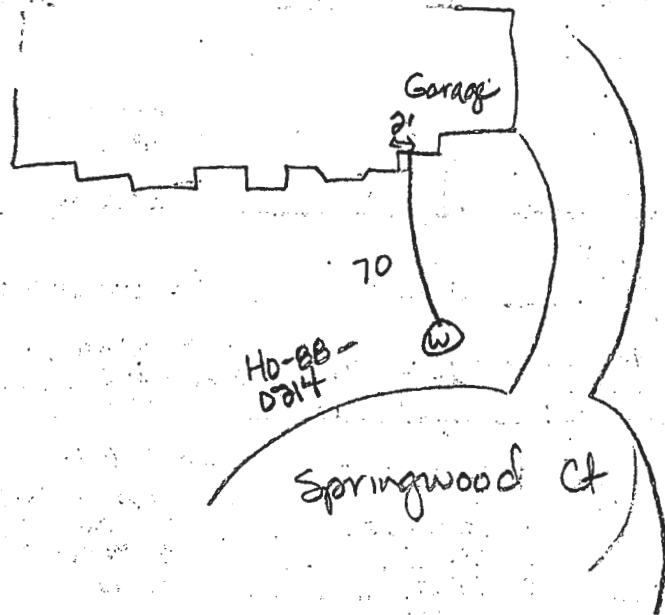
P.A. 5' B.G. MR 1/30/90
NEW LINE FITTED TO EX. WELL LINE W/ BRASS COUPLING

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge

Signature of Applicant: [Signature]
Date: _____

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



10-31-89

Pitless adaptor installed at 50 inches below grade.
Well line in trench at 48 in. House connection ok. No
ground connected yet. Pump tank not installed. JE Nadeau

PRIVATE WELL & SEPTIC

NOTE:

A VACUUM BREAKER WILL BE INSTALLED AS PER CODE

FOLLY

QUARTER RD.

LOT 6

LOT 7
(2.84 AC.)

LOT 8

EX. 100 YR. FLOOD
PLAIN DRAINAGE &
UTILITY ESMT.

EX. 20' WIDE
DRAINAGE &
UTILITY ESMT.

5/25/90 CADD.
OK TO PROCEED
RESTRICTIONS
SATISFY ZONING
(10,000 GPD)
SEPTIC
RESERVE AREA

FENCE DATA:
5' HIGH BORED ON 80'
FENCE AS PER CODE
(BY OWNER)

OWNER IS ADVISING
CITY OF 15' MINIMUM
CRITICAL TO AVOID
EXACT EXECUTION
BUILT OR ADVISED THAT
8' DECK EDGE TO TRUCK
TRUCK
20' POOL EDGE TO
UPPER TRENCH EXCAVATED

POOL
(16' x 8')

FILTER PAD

EX. WELL

SPRINGWOOD

COURT

SITE PLAN

SCALE: 1" = 100'

