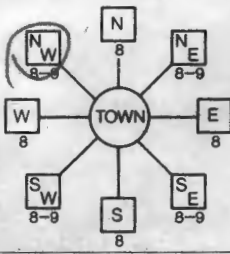

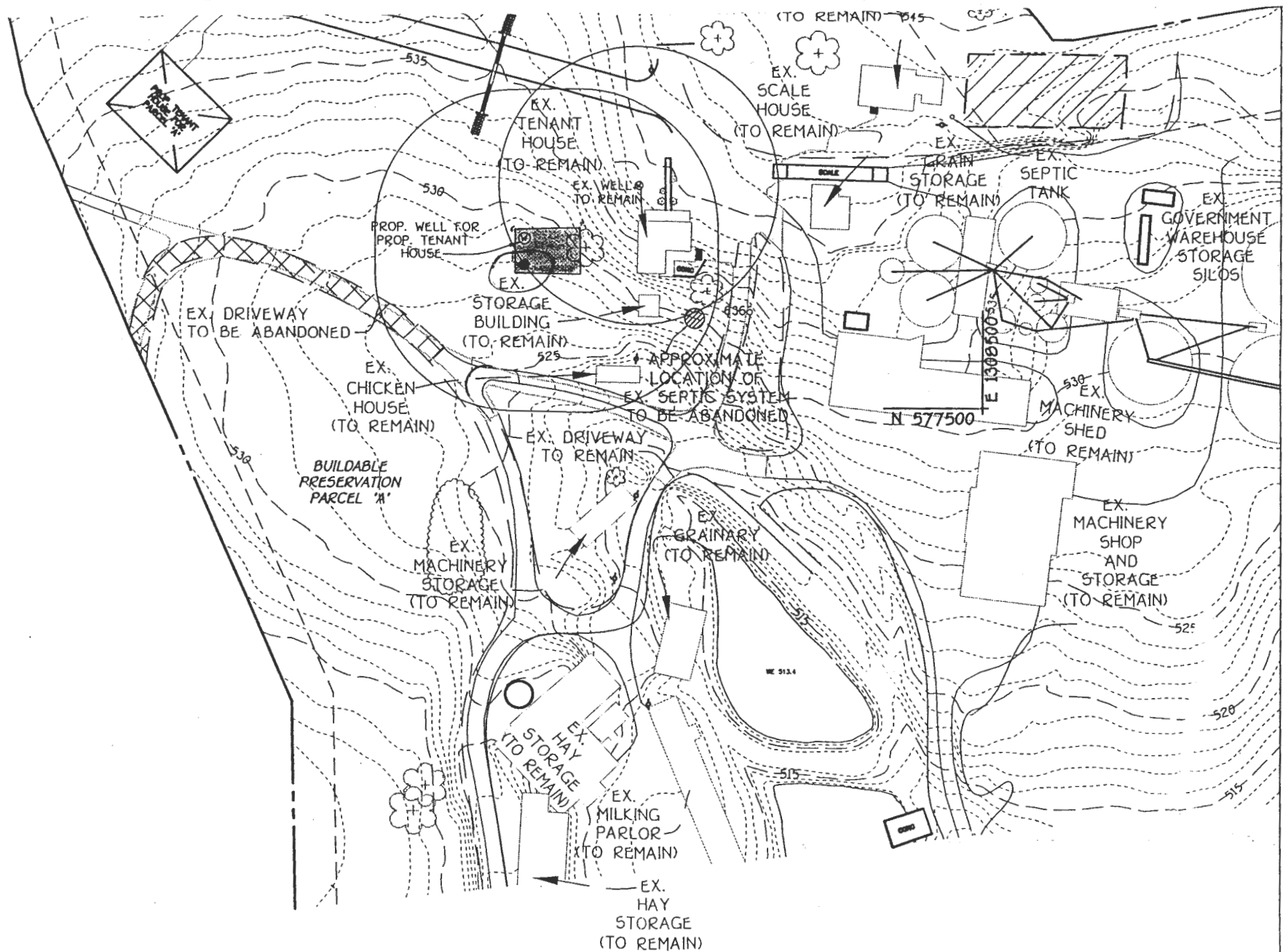


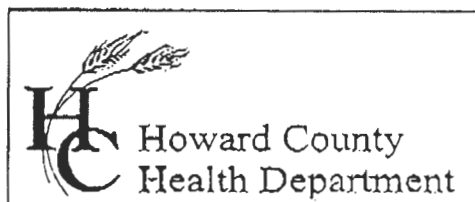
<b>C1</b> 2037 1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
ST/CO USE ONLY DATE Received MM DD YY 8 13	DATE WELL COMPLETED MM DD YY 6 13 08	Depth of Well 22 240' 26 (TO NEAREST FOOT)	COUNTY NUMBER A 517 336
OWNER Warfield Sr last name first name STREET OR RFD Michelle Drive SUBDIVISION The Warfields II		TOWN Dayton	PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 95 - 1624
SECTION 2		LOT PPA	

<b>WELL LOG</b> Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle appropriate box) yes <input checked="" type="radio"/> Y no <input type="radio"/> N TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="radio"/> CM BENTONITE CLAY <input type="radio"/> BC NO. OF BAGS 45 12 NO. OF POUNDS 45 1128 GALLONS OF WATER 72 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 38 ft. (enter 0 if from surface)	<b>C3</b> 1 2 <b>PUMPING TEST</b> HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 20 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 14 ft. WHEN PUMPING 39 ft. TYPE OF PUMP USED (for test) <input type="radio"/> A air <input type="radio"/> P piston <input type="radio"/> T turbine <input type="radio"/> C centrifugal <input type="radio"/> R rotary <input type="radio"/> O other (describe below) <input type="radio"/> J jet <input checked="" type="radio"/> S submersible
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing
Sand Stone	0 29	✓
Gray Mica Rock	29 240	Water 33' 180'
<b>CASING RECORD</b> casing types insert appropriate code below MAIN CASING TYPE 5+ Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 40 OTHER CASING (if used) diameter inch depth (feet) from to		
<b>SCREEN RECORD</b> screen type or open hole insert appropriate code below <input type="radio"/> ST STEEL <input type="radio"/> BR BRASS <input type="radio"/> HO OPEN HOLE <input type="radio"/> PL PLASTIC <input type="radio"/> OT OTHER		
<b>C2</b> 1 2 DEPTH (nearest ft.) 1 38 240 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		
NUMBER OF UNSUCCESSFUL WELLS: 0		
WELL HYDROFRACTURED yes <input checked="" type="radio"/> Y no <input type="radio"/> 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.		
DRILLERS LIC. NO. MS D024 DRILLERS SIGNATURE Joseph E. Maime (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. MS D024 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 LOG CAGING INDICATOR OTHER DATA		
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) See Attached location		

B 1	<b>1014</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b> 528955 please type	STATE PERMIT NUMBER <u>HO - 95 - 1624</u> <small>fill in this form completely</small>
Date Received (APA) 8 MM DD YY 13		OWNER INFORMATION		
15 Last Name <u>Warfield Jr.</u> Owner First Name <u>Kennard</u> 36 Street or RFD <u>P.O. Box 30</u> 57 Town <u>Henley</u> 70 State <u>MD</u> 72 Zip <u>21739</u> 76		B 3 LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>The Warfields II</u> 42 SECTION <u>2</u> LOT <u>B.P.A.</u> 52 NEAREST TOWN <u>Dayton</u> 71 MILES FROM TOWN (enter 0 if in town) <u>4</u> M I 73 76 77 78		
DRILLER INFORMATION		B 4		
Driller's Name <u>Joseph E. Mayne</u> 76 License No. <u>M 5 D 024</u> 81 First Name <u>Joseph E. Mayne</u> Address <u>5512 Ridge Rd Mt. Airy MD 21771</u> Signature <u>Joseph E. Mayne</u> Date <u>5-19-2008</u>		1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD <u>Michale Drive</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> SOUTH <input type="checkbox"/> EAST <input type="checkbox"/> 34 600 37 DISTANCE FROM ROAD <u>FT</u> ENTER FT OR MI 38 39 TAX MAP: <u>21</u> BLK: <u>23</u> PARCEL <u>114</u>		
B 2 WELL INFORMATION		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL		
APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>		COUNTY NAME <u>Howard</u> COUNTY NO. <u>13</u> STATE SIGNATURE <u>[Signature]</u> INSERT S → DATE ISSUED <u>6/9/08</u> EXP DATE <u>6/9/09</u> 48 MM DD YY 48 CO SIGNATURE <u>[Signature]</u> EAST GRID <u>0895</u> 0:00 NORTH GRID <u>516</u> 0:00 55 57 63		
USE FOR WATER (CIRCLE APPROPRIATE BOX)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		SOURCES OF DRILLING WATER 1. <u>well</u> 2. 3.		
APPROXIMATE DEPTH OF WELL <u>300</u> FEET		WRITE THE BOX NUMBER FROM THE MAP HERE E <u>790 5</u> N <u>510 6</u> 000 000		
APPROXIMATE DIAMETER OF WELL <u>6</u> INCH				
METHOD OF DRILLING (circle one)		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION		
BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT <input type="checkbox"/> other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> 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)				
APPROX. PERMIT NUMBER _____ G _____				
PERMIT No. <u>HO - 95 - 1624</u>				
SPECIAL CONDITIONS <u>Drill well South West corner of well Box.</u>				

## 15-225





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:

The Warfields II Lot 5 Parcel A Michelle Dr.  
Subdivision/Property Name Lot# Road Name

- ☒ The well site has been staked by Justin Collins & Carter Inc.  
(professional land surveyor or company employing professional land surveyors)  
on Apr 2008 (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 3/11/05

*Parcel A is staked as Lot 5.*





**FISHER, COLLINS  
& CARTER, INC.**

CIVIL ENGINEERING CONSULTANTS  
and LAND SURVEYORS

Terrell A. Fisher, P.E., L.S.  
Earl D. Collins, P.E.  
Charles J. Crovo, Sr., P.E., L.S.

Paul W. Kriebel, P.E.  
Mark L. Robel, P.L.S.  
Aldo M. Vitucci, P.E.

# Transmittal

Via: ☐ Fax ☐ Mail ☒ Messenger ☐ E-Mail ☐ To Be Picked Up  
☐ Fax (original to follow via U.S. Mail)

To: HOWARD COUNTY HEALTH DEPT.

Attn: KEVIN WOLF

Fax:

Phone:

From: MICHAEL VITUCCI

CC:

Re: THE WARFIELDS II, SEC. 2, F-07-040

W.O.# 30310

Date: 6-2-00

Pages: Page(s) Including this cover

We are forwarding: ☒ Prints ☐ Copy of Letter ☐ Specifications ☐ Shop drawings ☐ Other  
☐ Urgent ☒ For your use ☒ As requested ☐ For Review & Comment

Remarks: WELL PERMIT EXHIBIT FOR PARCEL "A"

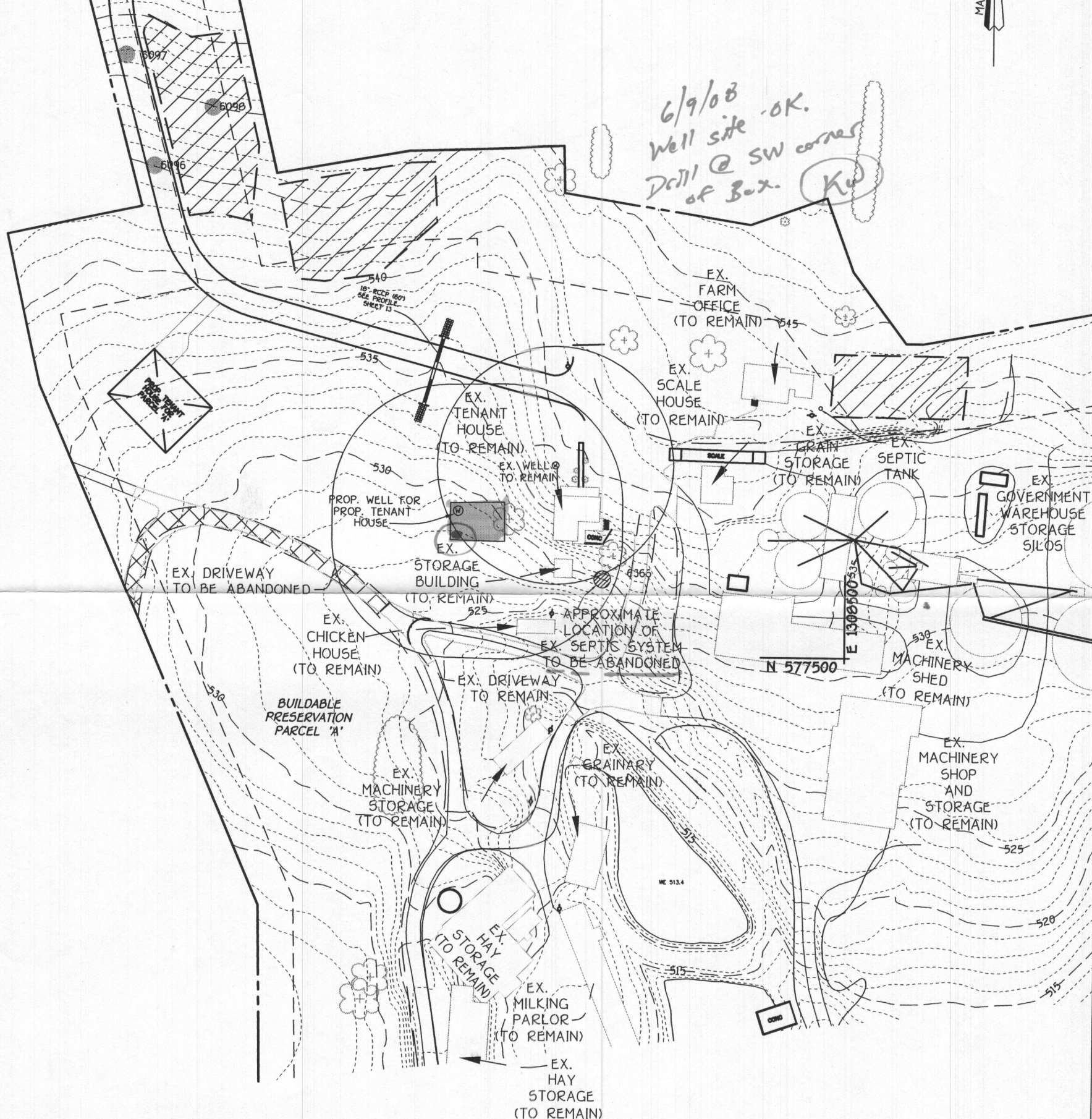
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MICHELE DRIVE

6/9/08  
Well site OK.  
Drill @ SW corner  
of Box. (K)



**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

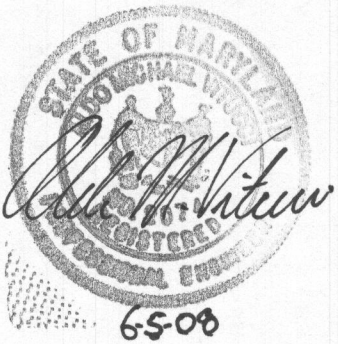
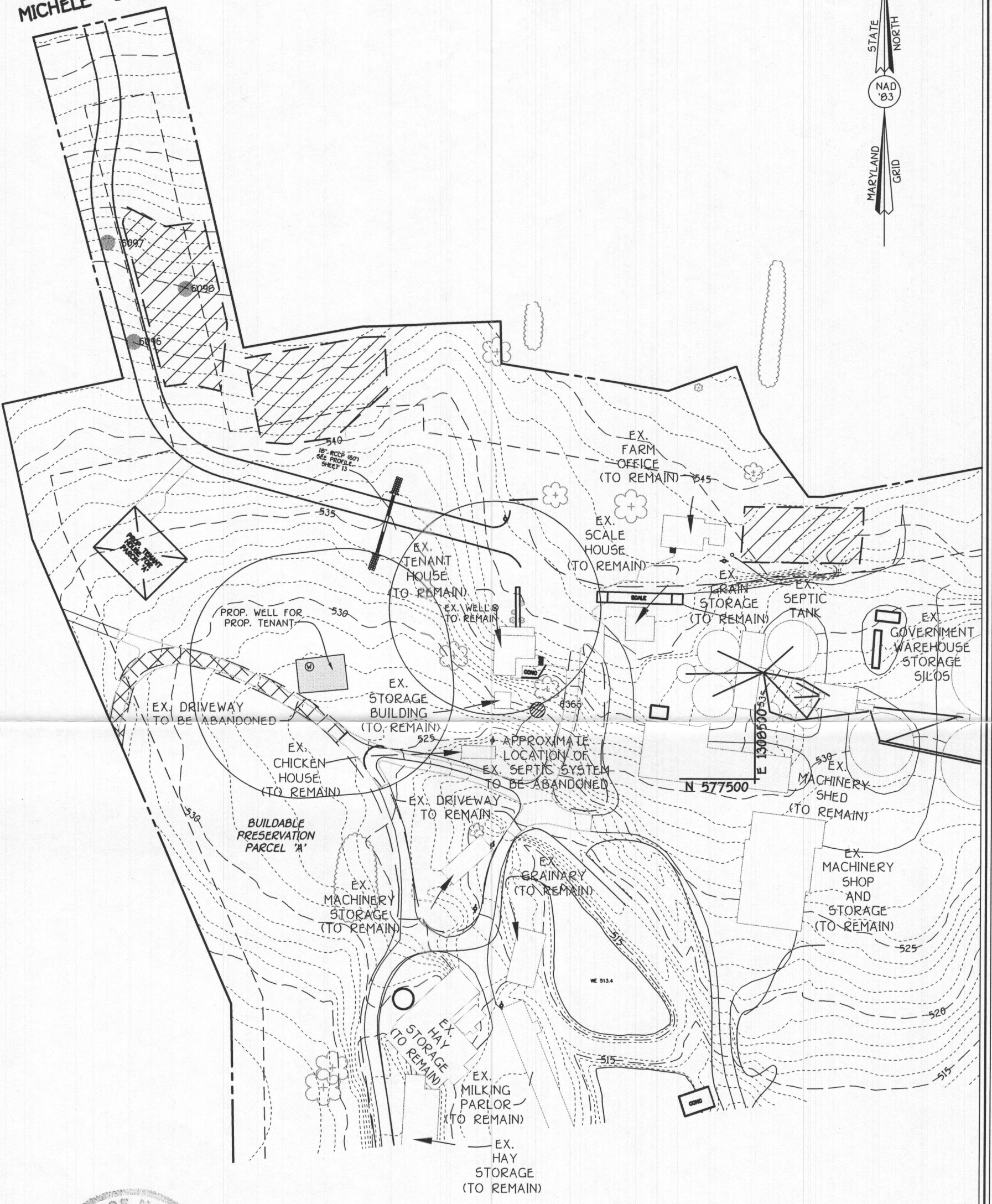
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
(410) 461 - 2855

EXHIBIT TO ACCOMPANY  
WELL PERMIT  
BUILDABLE PRESERVATION 'A'  
THE WARFIELDS II  
SECTION TWO  
Lots 6 Thru 68,  
Cemetery Open Space Lot 69, And  
Buildable Preservation Parcel 'A' And  
Non-Buildable Preservation Parcels 'B', Thru 'I'  
Tax Map: 21, Grid 23, Parcel: 55  
Tax Map: 27, Grid 5, Parcels: 56, 109 And 144  
Fourth Election District  
Howard County, Maryland  
Date: June 2, 2008  
Scale 1"=100'  
F-07-040





MICHELE DRIVE



**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
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