

C11119

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.

COUNTY
NUMBER

A52/569

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

12/11/10
H0 - 95 - 1941

DATE RECEIVED
MM DD YY

DATE WELL COMPLETED
MM DD YY

DEPTH OF WELL
(TO NEAREST FOOT)

22 440 26

OWNER

Dorsey Builders Inc

STREET OR RFD

Watersville Rd

SUBDIVISION

Haymeadow Overlook

SECTION

LOT

6

TOWN

WOOD BRINE

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	
Brown Shale	0	22	
Blue Rock	22	440	✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ BENTONITE CLAY ☒

NO. OF BAGS 6 NO. OF POUNDS 564

GALLONS OF WATER 36

DEPTH OF GROUT SEAL (to nearest foot)

from 0 TOP 52 ft. to 23 BOTTOM 58 ft.

(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

☒ STEEL ☒ CONCRETE
☒ PLASTIC ☒ OTHER

MAIN CASING TYPE

PL 6 26

Nominal diameter top (main) casing (nearest inch)!

Total depth of main casing (nearest foot)

OTHER CASING (if used)

diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole

☒ STEEL ☒ BRASS ☒ OPEN HOLE
☒ PLASTIC ☒ OTHER

DEPTH (nearest ft.)

1 2 440

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

6

PUMPING RATE (gal. per min.)

1.2

METHOD USED TO MEASURE PUMPING RATE

Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

45

ft.

WHEN PUMPING

301

ft.

TYPE OF PUMP USED (for test)

☒ air ☒ piston ☒ turbine
☒ centrifugal ☒ rotary ☒ other (describe below)
☒ jet ☒ 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 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 - below

LAND SURFACE

2 (nearest foot)

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.

DRILLERS LIC. NO. 1 M S D 024

DRILLERS SIGNATURE

LIC. NO. 1 D

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

C2

DEPTH (nearest ft.)

1 2 440

1 8 9 11 15 17 21

2 23 24 26 30 32 36

3 38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN

56 60

from to

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

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)

attached well box

B 1	3472	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 533289 please type	STATE PERMIT NUMBER HO - 95 - 1941 <small>fill in this form completely</small>
Date Received (APA) 6/11/2010 8 MM DD YY 13		OWNER INFORMATION		
15 Last Name <u>Dorsey</u>		Owner <u>Builders Inc</u>		34 First Name
36 Street or RFD <u>13090 Old Frederick Rd</u>		55		
57 Town <u>Sykesville</u>		70 State <u>MD</u>	72 Zip <u>21784</u>	76
DRILLER INFORMATION				
Driller's Name <u>Joseph L Mayne</u>		M S D O 24 76 License No. 81		
Firm Name <u>Joseph L Mayne Well Drilling</u>				
Address <u>5512 Ridge Rd Mt. Airy Md 21771</u>				
Signature <u>Joseph L Mayne</u> Date <u>6-7-2010</u>				
B 2		WELL INFORMATION		
1 2		APPROX. PUMPING RATE (GAL. PER MIN.)		
		8 12		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		14 20		
		500		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<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				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME <u>Howard</u> COUNTY NO. <u>(13)</u> STATE SIGNATURE <u>Robert Brown</u> INSERT S → DATE ISSUED <u>6/25/2010</u> 41 43 MM DD YY 48 CO SIGNATURE <u>Robert Brown</u> EXP. DATE NORTH GRID <u>554</u> 000 EAST GRID <u>772</u> 000 50 55 57 63				
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		
APPROXIMATE DIAMETER OF WELL <u>6</u> INCH		SOURCES OF DRILLING WATER		
		1. <u>well</u>		
		2.		
		3.		
METHOD OF DRILLING (circle one)		WRITE THE BOX NUMBER FROM THE MAP HERE		
BORED (or Augered) <u>JETTED</u> Jetted & DRIVEN 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTary Drive-POINT other _____		E <u>7742</u> N <u>5544</u>		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION		
<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 39 <input checked="" 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		Sketch showing location of well in relation to nearby towns and roads. Includes labels for <u>Watersville Rd</u> , <u>Woodbine</u> , and <u>Old Frederick Rd</u> . A north arrow points up.		
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROP. PERMIT NUMBER _____ G _____				
PERMIT No. <u>HO-95-1941</u> 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>				

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-1941
Location of property (road) Watersville Rd
Subdivision Hay Meadows Overlook Lot 6 Block _____ Plat _____ Sec. _____
Well Driller Joseph Maine Owner Dorsey Builders

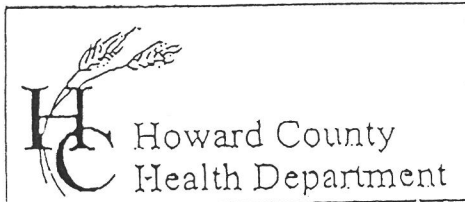
Depth of well 440'
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. 45'

I. High rate pumping -- reservoir drawdown

Time pump started 6:45 Pumping rate 20 gpm
Total time 30 min to reach pumping water level 301 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 <u>5</u> 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:00	167'	3 min		20 gpm
7:15	301	4		15
7:30	301	50		1.2
7:45	301	50		1.2
8:00	301	50		1.2
8:15	301	50		1.2
8:30	301	50		1.2
8:45	301	50		1.2
9:00	301	50		1.2
9:15	301	50		1.2
9:30	301	50		1.2
9:45	300	50		1.2
10:00	300	50		1.2
10:15	300	50		1.2
10:30	300	50		1.2
10:45	300	50		1.2
11:00	300	50		1.2
11:15	300	50		1.2
11:30	300	50		1.2
11:45	300	50		1.2
12:00	300	50		1.2
12:15	300	50		1.2
12:30	300	50		1.2
12:45	300	50		1.2
12:00	300	50		1.2
1:15	300	50		1.2



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:

Hay Meadow Overlook 1, 2, 3, 4, 5, 6, 7 Watersville Rd
Subdivision/Property Name Lot# Road Name

☒ The well site has been staked by Robert H. Vogel Engineers
(professional land surveyor or company employing professional land surveyors)
on 5-2010 (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

Dorsey Builders Inc