



HOWARD COUNTY HEALTH DEPARTMENT

29484

DATE
7 / 14 / 08

WS

Received
From

Allied Environmental Services, Inc. PHONE # 410-789-2711

6702 Fort Smallwood Rd.

For

Geo-thermal Well.

8492

Tipton Dr.

☐ CASH

☒ CHECK

NO.

17480

One hundred & sixty dollars

xx

Dollars

\$

160

00

Received By

Pat H

C1 1712 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
NUMBER

ST/CO USE ONLY

DATE Received
MM DO YY

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

OWNER

STREET OR RFD

SECTION

LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

check
if water
bearing

Brown 0 27
Gravel 27 35
Brown Schist 35 70
Gray Granite 70 300

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

YES

NO

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ CMBENTONITE CLAY ☒ BC

NO. OF BAGS 30 NO. OF POUNDS 1500

GALLONS OF WATER 750

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 62 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

OTHER

MAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)EACH
CASING

OTHER CASING (if used)

diameter
inchdepth (feet)
from to

SCREEN RECORD

screen type
or open holeinsert
appropriate
code
below

ST

STEEL

BR

BRASS

HO

OPEN
HOLE

PL

BRONZE

OT

OTHER

C 2

DEPTH (nearest ft.)

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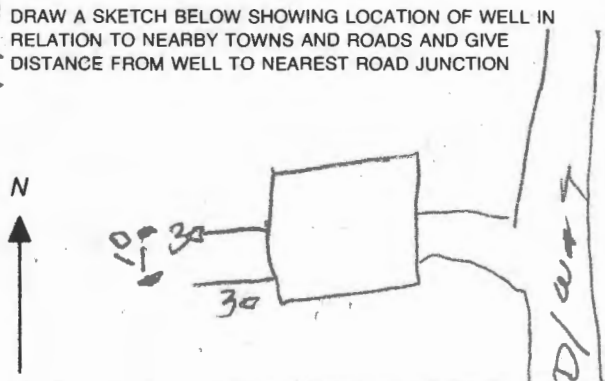
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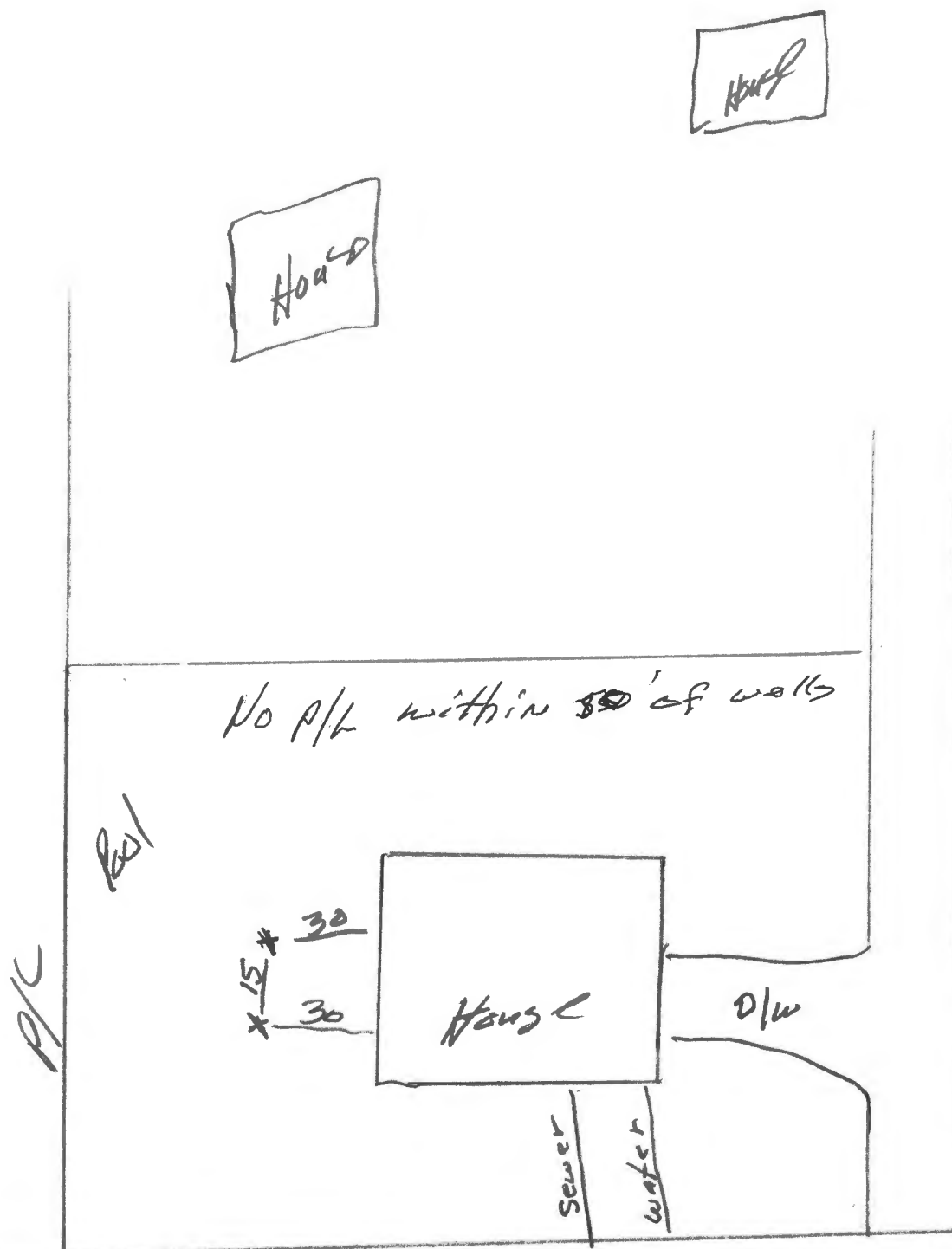
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B 1		9478	SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 529484 please type		STATE PERMIT NUMBER HD-95-1650 fill in this form completely 79	
Date Received (APA) 8 MM DD YY. 13 6/26/08								
OWNER INFORMATION 15 Last Name Hansen Owner Bob First Name 36 Street or RFD 6492 Tipton Dr 57 Town Laurel MD 20723 Zip 76								
DRILLER INFORMATION Driller's Name Marshall Arnette License No. M 5 D 105 Firm Name Allied Environmental Service Address P.O. Box 1242 Millerville Md 21108 Signature Marshall Arnette Date 7/14/08								
B 2		WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20						
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input 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 checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING <input checked="" type="checkbox"/> GEO-THERMAL 2 Closed Loop								
APPROXIMATE DEPTH OF WELL 24 300 FEET APPROXIMATE DIAMETER OF WELL 2 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								
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 DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 15 52								
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER G PERMIT No. HD-95-1650								
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED Use only COMAR approved grant letter to								

B 3		LOCATION OF WELL 8 COUNTY Howard 21 23 SUBDIVISION SECTION 44 46 LOT 48 50 Laurel md 20723-2203 52. NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 73 76 77 78					
B 4		8492 Tipton Dr. 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 46 BLK: 1 PARCEL 15					
		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME 13 COUNTY NO. STATE SIGNATURE DATE ISSUED 7/22/08 INSERT S 43 MM DD YY 48 CO SIGNATURE John B... EXP. DATE 7/22/09 NORTH GRID 476 000 EAST GRID 832 000 50 55 57 63					
		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. DRILLERS WELL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 832 N 476 19-D-7 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 					



8492 Tipton Dr.

7/22/08 2 Geo Therm well sites OK

(SC)