



HOWARD COUNTY HEALTH DEPARTMENT

W5 27851

DATE
10 / 09 / 07

Received
From

Walter Toney

PHONE # 301-854-6398

15688 Union Chapel Rd. Woodbine MD 21797

For Will Permit

☐ CASH

☒ CHECK

same address

NO.

0754

One hundred sixty and 00/100

Dollars

\$

160

00

Received By

Mary L Bugge

C13141SEQUENCE NO. (MDE USE ONLY)STATE OF MARYLANDWELL COMPLETION REPORTFILL IN THIS FORM COMPLETELYPLEASE TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.COUNTY NUMBER13

ST/CO USE ONLYDATE RECEIVEDMMDDYYDATE WELL COMPLETEDMMDDYYDEPTH OF WELL222002610/26/07PERMIT NO. FROM "PERMIT TO DRILL WELL"HO-95-1301

OWNERJoneyWalterSTREET OR RFD15688 Union Chapel RdTOWNWoodbine Md 21797SUBDIVISIONSECTIONLOT

WELL LOGNot required for driven wellsSTATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use additional sheets if needed)FEETFROMTOcheck if water bearingBrown Shale056Blue Rock56200✓

GROUTING RECORDWELL HAS BEEN GROUTED (Circle appropriate box)TYPE OF GROUTING MATERIAL (Circle one)CEMENTCMBENTONITE CLAYBCNO. OF BAGS16NO. OF POUNDS1504GALLONS OF WATER96DEPTH OF GROUT SEAL (to nearest foot)from0ft. to56ft. (enter 0 if from surface)CASING RECORDcasing types insert appropriate code belowMAIN CASING TYPESTNominal diameter top (main) casing (nearest inch)6Total depth of main casing (nearest foot)60OTHER CASING (if used) diameter inchdepth (feet) fromtoEACH CASINGSCREEN RECORDscreen type or open hole insert appropriate code belowSTBRHOPLBRHOPLOTHOPLASTICOTHER

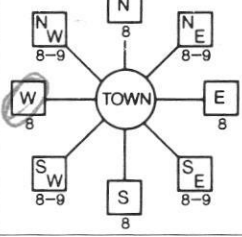
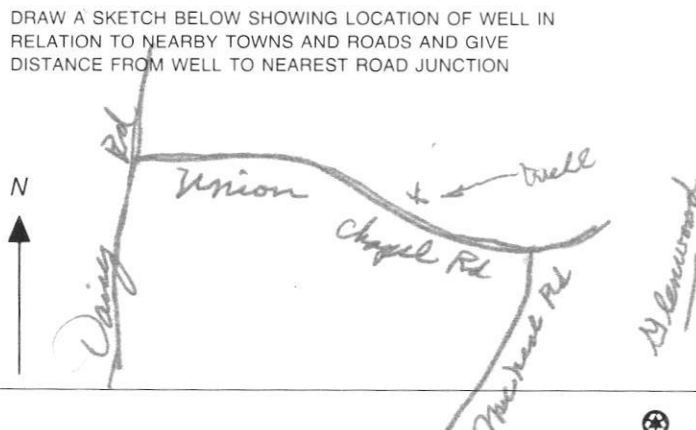
C2DEPTH (nearest ft.)12HO58200EACH232426303236S3383941454751REREESLOT SIZE 123DIAMETER OF SCREEN5660NEAREST INCHfromtoGRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)T(E.R.O.S.)WQ7072747576TELESCOPE CASINGLOG INDICATOROTHER DATA

C3PUMPING TESTHOURS PUMPED (nearest hour)3PUMPING RATE (gal. per min.)15METHOD USED TO MEASURE PUMPING RATEBucketWATER LEVEL (distance from land surface)BEFORE PUMPING41ft. WHEN PUMPING120ft. TYPE OF PUMP USED (for test)AairPpistonTturbineCcentrifugalRrotaryOother (describe below)JjetSsubmersible

PUMP INSTALLEDDRILLER INSTALLED PUMP (CIRCLE) (YES or NO)YESNOIF 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)3135PUMP HORSE POWER3741PUMP COLUMN LENGTH (nearest ft.)4347CASING HEIGHT (circle appropriate box and enter casing height)abovebelowLAND SURFACE2(nearest foot)

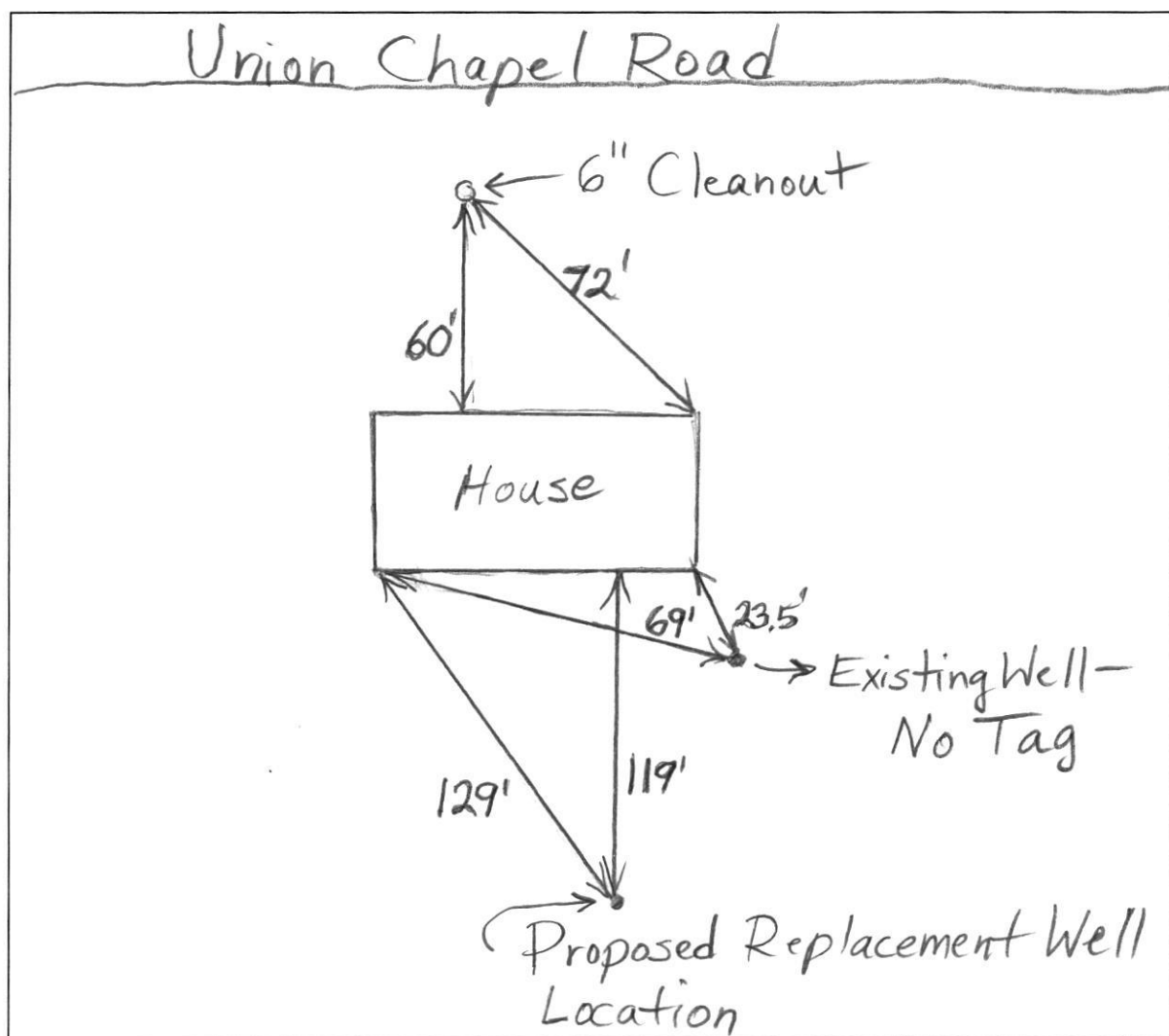
LOCATION OF WELL ON LOTSHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)140' well150'Ex. HouseFront

B 1	1048	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 527851 please type	STATE PERMIT NUMBER 40-95-1301 fill in this form completely
Date Received (APA) 8 MM DD YY 13 <u>10</u> <u>09</u> <u>20</u> <u>07</u>		OWNER INFORMATION 15 Last Name <u>Toney</u> Owner <u>Walter</u> First Name 34 36 <u>15688 Union Chapel Rd</u> Street or RFD 55 57 <u>Woodbine</u> Town 70 State <u>MD</u> Zip 76 <u>21797</u>		
DRILLER INFORMATION Driller's Name <u>Joseph L. Mayne</u> License No. 76 <u>M 5 D 024</u> 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>10/9/07</u>		LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION _____ 42 SECTION <u>44</u> 46 LOT <u>48</u> 50 52 NEAREST TOWN <u>Alexwood</u> 71 MILES FROM TOWN (enter 0 if in town) <u>3 1/2</u> M I 73 76 77 78		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>4</u> 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 		
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> P PUBLIC WATER SUPPLY WELL <input type="checkbox"/> T TEST, OBSERVATION, MONITORING <input type="checkbox"/> G GEO-THERMAL		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>Howard</u> COUNTY NO. <u>13</u> STATE SIGNATURE _____ INSERT S → DATE ISSUED <u>10/9/2007</u> <u>Brian Baker</u> <u>10/9/2008</u> 43 MM DD YY 48 CO SIGNATURE _____ EXP. DATE NORTH GRID <u>531</u> 000 55 EAST GRID <u>782</u> 000 63		
APPROXIMATE DEPTH OF WELL <u>300</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> 2. _____ 3. _____		
METHOD OF DRILLING (circle one) BORED (or Augered) _____ JETTED _____ Jetted & DRIVEN _____ 30 <u>AIR-ROTARY</u> AIR-PERCussion _____ ROTARY (Hydraulic Rotary) _____ 37 <u>CABLE</u> REVERSE-ROTARY _____ DRIVE-POINT _____ other _____		WRITE THE BOX NUMBER FROM THE MAP HERE E <u>782</u> N <u>531</u>		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input checked="" type="checkbox"/> S 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"/> D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER _____ G _____ PERMIT No. <u>40-95-1301</u> 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.</small>				

SITE INSPECTION SHEET

OWNER: Walter Toney PHONE #: _____
ADDRESS: 15688 Union Chapel Rd. CONTRACTOR: J. Mayne
WELL TAG #: _____
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: Drill Replacement Well

LOCATION DIAGRAM



COMMENTS: 10/9/07 Existing well is not supplying enough water. Owner wants to drill a new well and connect the existing well to outdoor spigots. (BB)
DATE: 10/9/07 INSPECTOR: B. Baber