

C1 4056

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORTTHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)FILL IN THIS FORM COMPLETELY
PLEASE TYPECOUNTY
NUMBER

ST/CO USE ONLY

DATE Received

MM DD YY
8 3 10

DATE WELL COMPLETED

MM DD YY
8 18 10

Depth of Well

22 300 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"40-95-1929
28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

SUBDIVISION

SECTION

TOWN

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

Overburden 0 7'

Soft Brown 7' 59'

Gray Rock 59' 300'

Hit water 87' 217'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 46 18 NO. OF POUNDS 45 46 18

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST
STEELCO
CONCRETEPL
PLASTICOT
OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)57 6 69
60 61 63 64 66 70

OTHER CASING (if used)

E A P H C A S I N G
diameter depth (feet)
inch from toscreen type
or open hole

SCREEN RECORD

(insert
appropriate
code
below)ST
STEELBR
BRASSHO
OPEN
HOLEPL
BRONZEOT
HOLEPL
PLASTICOT
OTHER

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
WELLI 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

MWD 120

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1

D

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 68MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

W Q

70
TELESCOPE
CASING72
LOG
INDICATOR74 75 76
OTHER DATA

C 3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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 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)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)CASING HEIGHT (circle appropriate box
and enter casing height)

above } LAND SURFACE (nearest foot)

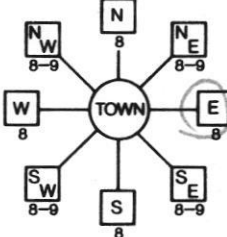
below }

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)

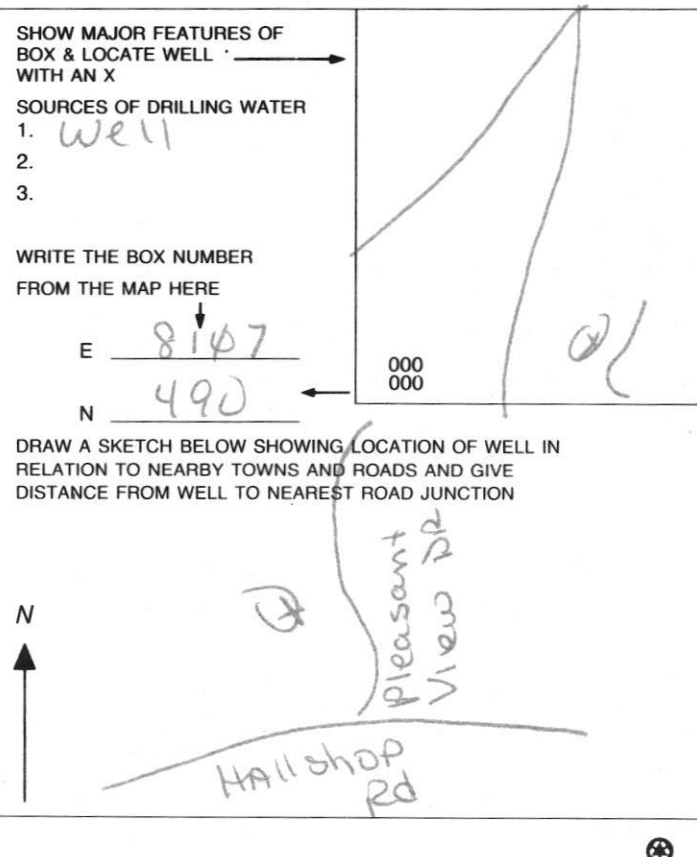
B 1 3804 1 2 3 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 6332827 please type	STATE PERMIT NUMBER <u>HO-95-1929</u> <small>70 fill in this form completely 79</small>
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OWNER INFORMATION Date Received (APA) <u>6/7/2010</u> <small>8 MM DD YY 13</small> <u>Upchurch</u> <u>Don</u> <small>15 Last Name Owner First Name 34</small> <u>457 Old Orchard Circle</u> <small>36 Street or RFD 55</small> <u>Millersville</u> <u>MD</u> <u>21108</u> <small>57 Town 70 State 72 Zip 76</small>	LOCATION OF WELL B 3 <u>Howard</u> <small>8 COUNTY 21</small> <u>Fulton Manor II</u> <small>23 SUBDIVISION 42</small> SECTION <u>44</u> <u>46</u> LOT <u>4</u> <u>48</u> <u>50</u> <u>Highland</u> <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) <u>1</u> <small>73 M 76 77 78</small>
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DRILLER INFORMATION <u>Sandy B. Cochran</u> <u>M W D</u> <u>120</u> <small>Driller's Name 76 License No. 81</small> <u>G. Edgar Harr Sons' Corp.</u> <small>Firm Name</small> <u>12047 Falls Road, Cockeysville 21030</u> <small>Address</small> <u>Sandy B. Cochran</u> <u>6/2/10</u> <small>Signature Date</small>	B 4 <small>1 2</small> DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <u>Pleasant View Drive</u> <small>11 NEAR WHAT ROAD 30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <u>45</u> <small>34 37</small> DISTANCE FROM ROAD <u>45</u> <small>ENTER FT OR MI 38 39</small> TAX MAP: <u>40</u> BLK: <u>6</u> PARCEL: <u>205</u>
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WELL INFORMATION B 2 APPROX. PUMPING RATE <u>5</u> <small>(GAL. PER MIN.) 8 12</small> AVERAGE DAILY QUANTITY NEEDED <u>750</u> <small>(GAL. PER DAY) 14 20</small>	USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="radio"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="radio"/> P PUBLIC WATER SUPPLY WELL <input type="radio"/> T TEST, OBSERVATION, MONITORING <input type="radio"/> G GEO-THERMAL
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APPROXIMATE DEPTH OF WELL <u>300</u> FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL <u>6</u> INCH <small>NEAREST INCH</small>	NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> <u>4/6/10</u> <u>A522420</u> <small>COUNTY NAME COUNTY NO.</small> STATE SIGNATURE <u>Brian Baker</u> <u>6/2/2011</u> <small>DATE ISSUED</small> NORTH GRID <u>490</u> <u>000</u> EAST GRID <u>817</u> <u>000</u> <small>43 MM DD YY 48 CO SIGNATURE EXP. DATE</small> <small>50 55 57 63</small>
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METHOD OF DRILLING (circle one) BORED (or Augered) <u>JETTED</u> Jettied & DRIVEN <small>30 AIR-ROTARY 37 AIR-PERCussion ROTARY (Hydraulic Rotary) Drive-POINT</small> CABLE <u>REVERSE-ROTARY</u> other _____	SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE E <u>8147</u> N <u>490</u> 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 
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REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> 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="radio"/> D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <u>41</u> _____ <u>52</u>	SPECIAL CONDITIONS NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.
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Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ <u>G</u> _____ PERMIT No. <u>HO-95-1929</u> <small>70 71 72 73 74 75 76 77 78 79</small>	APPROVING AUTHORITY SIGNATURE _____ TITLE _____ DATE _____
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HARR WELL DRILLING

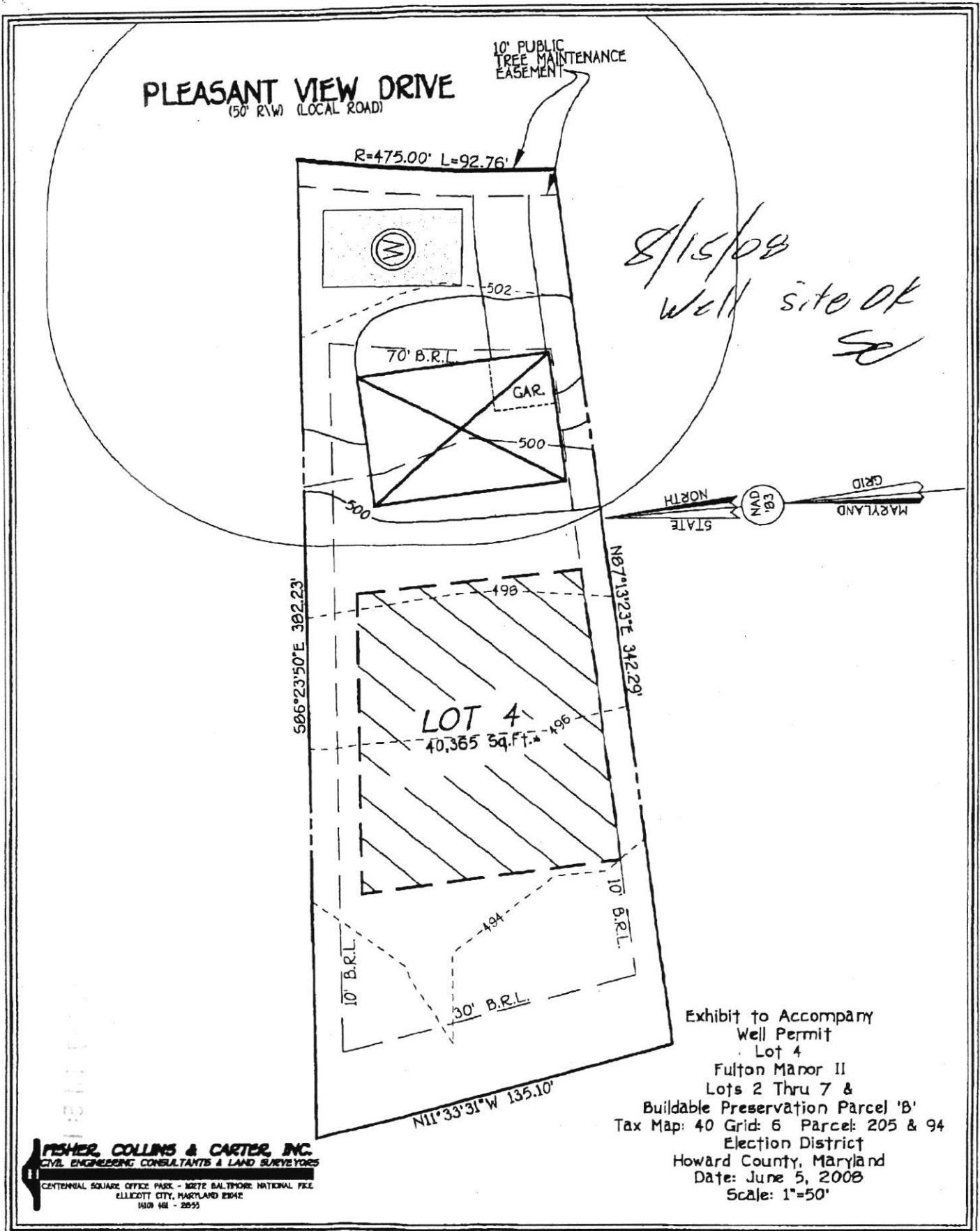
12047 FALLS ROAD
COCKEYSVILLE, MD 21030
410-252-4588

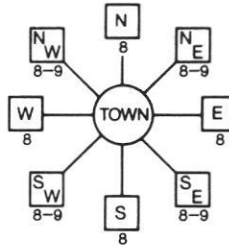
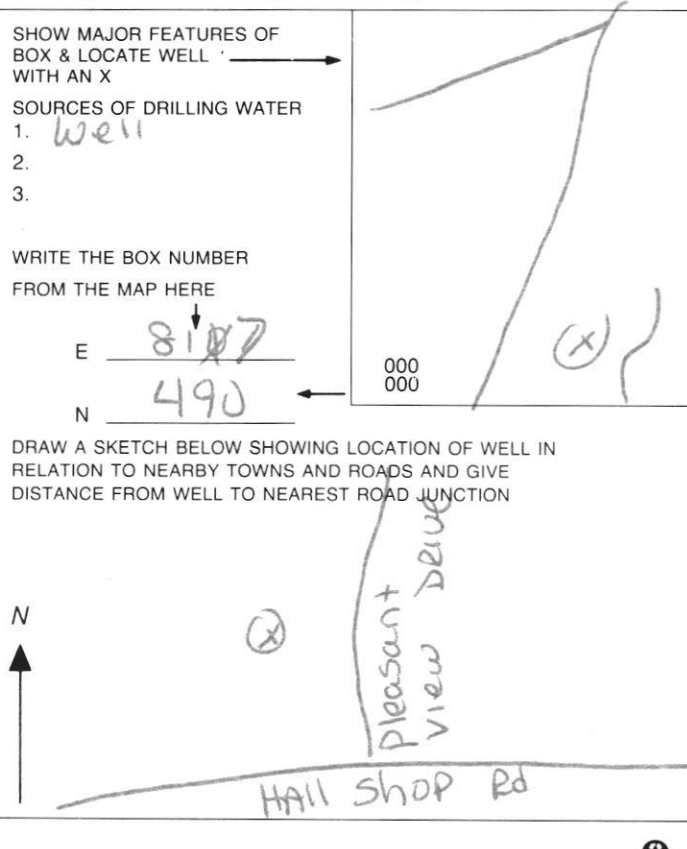
HOWARD COUNTY WELL YIELD TEST REPORT

Date Test Performed: 09-07-10
Address: Pleasant View Road
Owner: Don Upchurc
Well Depth: 300 Ft

Permit Number: HO-95-1929
Subdivision: Fulton Manor II L#4
Election District:
Static Water Level: 20 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5 Gallon bucket	Calculated Flow-Gallons Per Minute
0815	20 ft		15 sec	20.00
0830	30		15	20.00
0845	36		15	20.00
0900	36		15	20.00
0915	36		15	20.00
0930	36		15	20.00
0945	36		15	20.00
1000	36		15	20.00
1015	36		15	20.00
1030	36		15	20.00
1045	36		15	20.00
1100	36		15	20.00
1115	36		15	20.00



B 1 6933 1 2 3 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 529506 please type	STATE PERMIT NUMBER HO-95-1663 70 fill in this form completely 79
Date Received (APA) 8 MM DD YY 13 Upchurch Don 15 Last Name Owner First Name 34 457 Old Orchard Circle 36 Street or RFD 55 Millersville MD 21008 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL Howard 8 COUNTY 21 Fulton Manor II 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 Highland 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78	
DRILLER INFORMATION Michael D. Isom M S D 162 Driller's Name 76 License No. 81 G. Edgar Harr Sons' Corp. Firm Name 12041 Falls Road, Cockeysville 21030 Address Signature 6/27/08 Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  Pleasant View Drive 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST 32 EAST SOUTH 34 200 37 DISTANCE FROM ROAD Ft ENTER FT OR MI 38 39 TAX MAP: 40 BLK: 6 PARCEL 205	
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APPROXIMATE DEPTH OF WELL 300 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH 30 37		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A520877 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 8/15/08 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 490 000 EAST GRID 817 000 50 55 57 63	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTary DRIVE-POINT other		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 817 N 490 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
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SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

C 1	9307	SEQUENCE (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER A49482 A																																																																	
ST/CO USE ONLY DATE Received MM DD YY 8 13	DATE WELL COMPLETED MM DD YY 12 16 98	Depth of Well 22 26 185 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-94-1958																																																																		
OWNER Trinity Custom Homes STREET OR RFD Fields End Ct TOWN Paisy SUBDIVISION Warfields Grant SECTION 2 LOT 1																																																																					
WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 11 NO. OF POUNDS 1100 GALLONS OF WATER 66 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30+ ft. (enter 0 if from surface)																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>Top Soil</td> <td>0</td> <td>2</td> <td></td> </tr> <tr> <td>Brown Shale</td> <td>2</td> <td>45</td> <td></td> </tr> <tr> <td>Brown Slate</td> <td>45</td> <td>50</td> <td></td> </tr> <tr> <td>Blue Slate</td> <td>50</td> <td>60</td> <td></td> </tr> <tr> <td>Brown Slate</td> <td>60</td> <td>65</td> <td></td> </tr> <tr> <td>Blue Slate</td> <td>65</td> <td>185</td> <td></td> </tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	Top Soil	0	2		Brown Shale	2	45		Brown Slate	45	50		Blue Slate	50	60		Brown Slate	60	65		Blue Slate	65	185		CASING RECORD casing types insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>ST STEEL</td> <td>CO CONCRETE</td> </tr> <tr> <td>PL PLASTIC</td> <td>OT OTHER</td> </tr> </table> MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 54 60 61 63 64 66 70			ST STEEL	CO CONCRETE	PL PLASTIC	OT OTHER																															
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DRILLERS LIC. NO. MSD 116 DRILLERS SIGNATURE [Signature] (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. MSD 116 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 CASING LOG INDICATOR OTHER DATA																																																																			
PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 7 METHOD USED TO MEASURE PUMPING RATE Budget WATER LEVEL (distance from land surface) BEFORE PUMPING 63 ft. WHEN PUMPING 84 ft. 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 INSTALLED PUMP (CIRCLE) (YES or NO) 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 LAND SURFACE - below 2 (nearest foot)																																																																			
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) 																																																																					

Approved Septic System Plan
Howard County Health Department

Signature

Date _____

Approved Septic System Plan
Howard County Health Department

Signature

558
1/20/99

Date 20

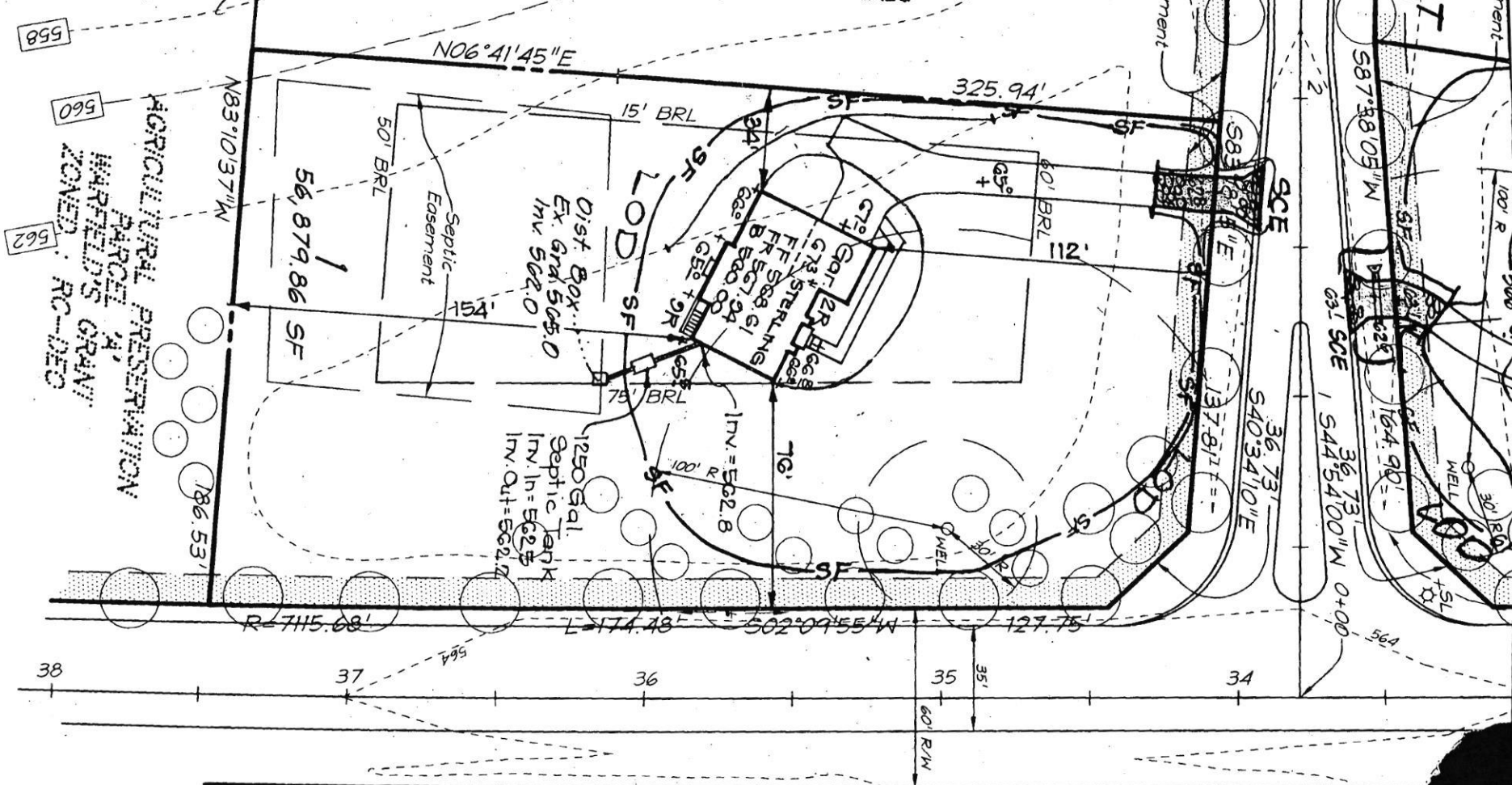
Total linear feet of trench
required 240 feet

Width of trench(es) 3 Tree 1/2 feet

Depth of trench(es) 6

Depth of stone required below distribution pipe 2 feet

RECEIVED'S GATE
ZONED : RC-DEO



DAISY ROAD
(PUBLIC ROAD)