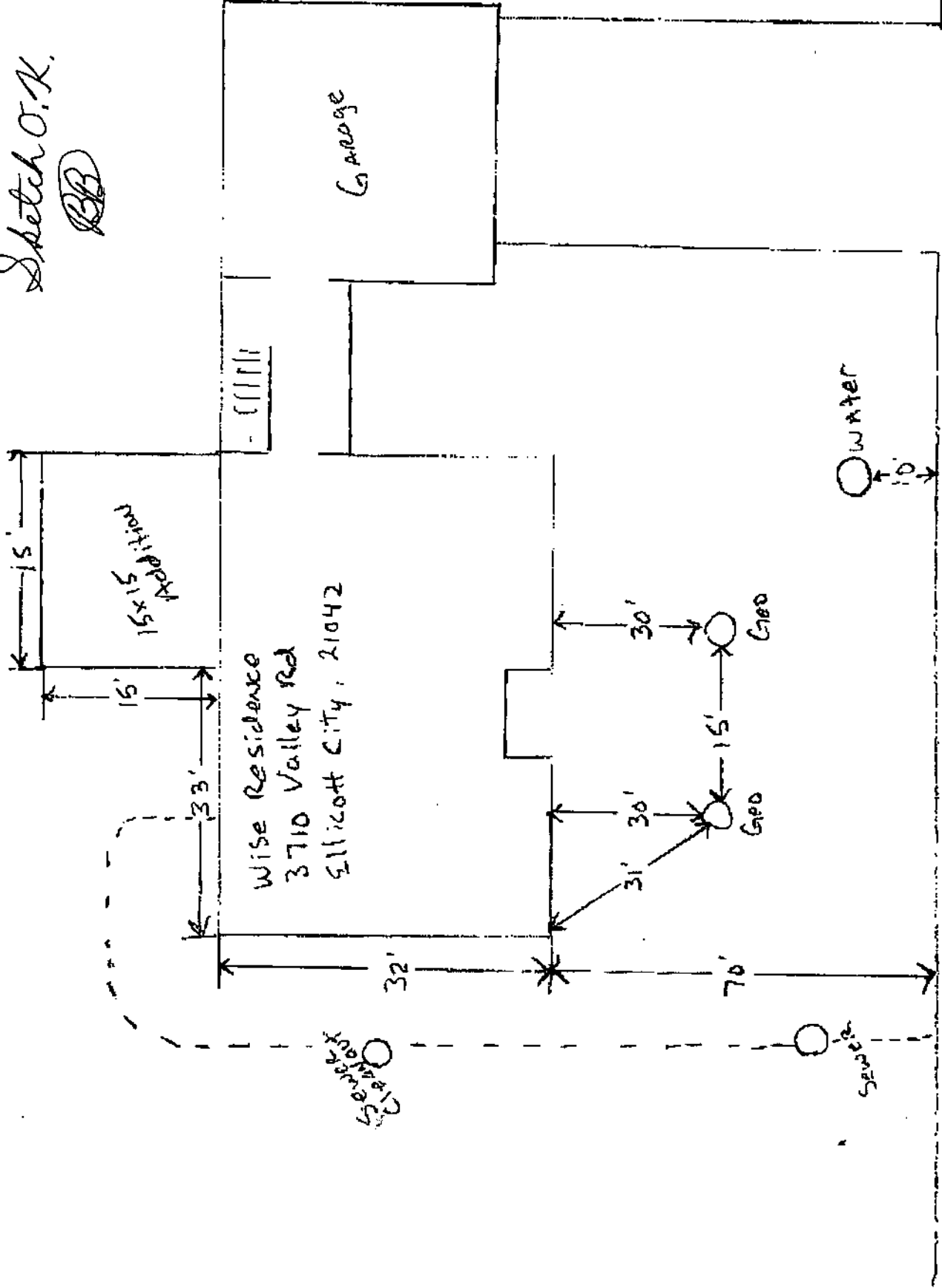


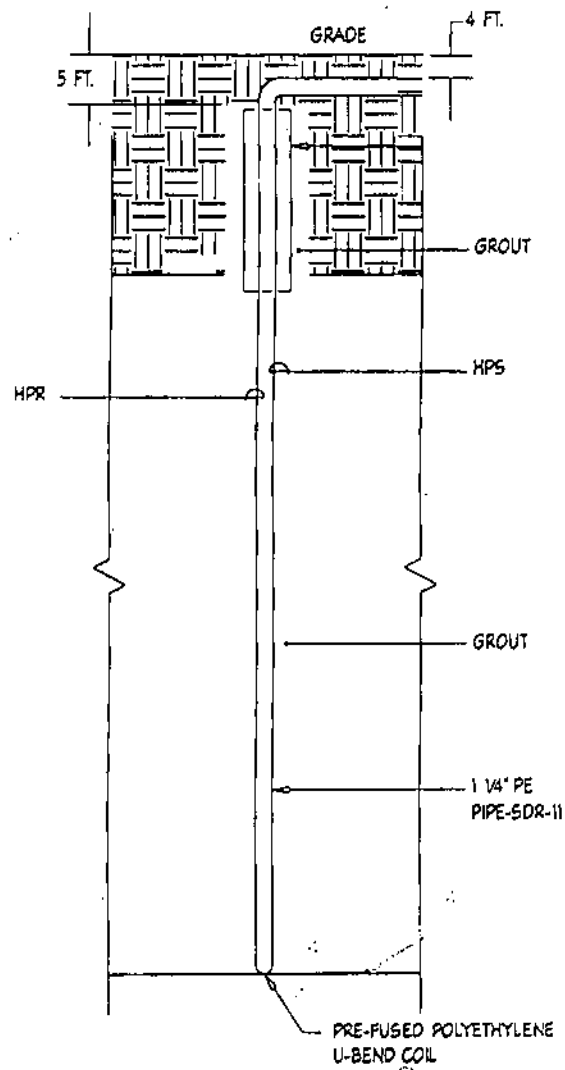
C1 4938		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.																																															
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						COUNTY NUMBER																																															
ST/CO USE ONLY DATE RECEIVED MM DD YY		DATE WELL COMPLETED MM DD YY		Depth of Well 22 305 26 11/5/09 (TO NEAREST FOOT) O.K. (BP)		PERMIT NO. FROM "PERMIT TO DRILL WELL" NO-95-1794																																															
8 19		15 20				28 29 30 31 32 33 34 35 36 37																																															
OWNER <u>Wise</u> STREET OR RFD <u>3710 Valley Road</u> TOWN <u>Ellicott City</u> SUBDIVISION <u>Macalpine</u> SECTION <u>11</u> LOT <u>11</u>																																																					
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) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS <u>45 48 15</u> NO. OF POUNDS <u>970</u> GALLONS OF WATER <u>375</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>48</u> ft. to <u>305</u> 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>Dir + Med Hard Gray</td><td>0</td><td>20</td><td></td></tr><tr><td>Hard Brown</td><td>20</td><td>25</td><td></td></tr><tr><td>Hard Brown</td><td>25</td><td>40</td><td></td></tr><tr><td>Hard Gray</td><td>40</td><td>43</td><td></td></tr><tr><td>Hard Brown</td><td>43</td><td>48</td><td></td></tr><tr><td>Hard Gray</td><td>48</td><td>190</td><td></td></tr><tr><td>Med Gray</td><td>190</td><td>195</td><td></td></tr><tr><td>Hard Gray</td><td>195</td><td>305</td><td></td></tr></tbody></table> <div style="font-size: 2em; margin-top: 10px;">X2</div> <div style="margin-top: 10px;">300' Casing</div>				DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	Dir + Med Hard Gray	0	20		Hard Brown	20	25		Hard Brown	25	40		Hard Gray	40	43		Hard Brown	43	48		Hard Gray	48	190		Med Gray	190	195		Hard Gray	195	305		CASING RECORD casing types insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"><tr><td>ST</td><td>CO</td></tr><tr><td>STEEL</td><td>CONCRETE</td></tr><tr><td>PL</td><td>OT</td></tr><tr><td>PLASTIC</td><td>OTHER</td></tr></table> MAIN CASING TYPE <u>ST</u> Nominal diameter top (main) casing (nearest inch) <u>60</u> Total depth of main casing (nearest foot) <u>70</u> OTHER CASING (if used) diameter inch <u> </u> depth (feet) from <u> </u> to <u> </u>				ST	CO	STEEL	CONCRETE	PL	OT	PLASTIC	OTHER
					DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing																																													
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PL	OT																																																				
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SCREEN RECORD screen type or open hole (Insert appropriate code below) <table border="1" style="width:100%; border-collapse: collapse;"><tr><td>ST</td><td>BR</td><td>HO</td></tr><tr><td>STEEL</td><td>BRASS</td><td>OPEN HOLE</td></tr><tr><td>PL</td><td>BRONZE</td><td>OT</td></tr><tr><td>PLASTIC</td><td>OTHER</td><td></td></tr></table> DEPTH (nearest ft.) E 1 8 9 11 15 17 21 A 2 23 24 26 30 32 36 C 3 38 39 41 45 47 51 F R E E S L O T S I Z E 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) <u>58</u> to <u>60</u>				ST	BR	HO	STEEL	BRASS	OPEN HOLE	PL	BRONZE	OT	PLASTIC	OTHER		PUMPING TEST HOURS PUMPED (nearest hour) <u>8</u> PUMPING RATE (gal. per min.) <u>11</u> METHOD USED TO MEASURE PUMPING RATE <u>15</u> WATER LEVEL (distance from land surface) BEFORE PUMPING <u>17</u> ft. WHEN PUMPING <u>22</u> ft. TYPE OF PUMP USED (for test) <u>A</u> air <u>P</u> piston <u>T</u> turbine <u>C</u> centrifugal <u>R</u> rotary <u>O</u> other (describe below) <u>J</u> jet <u>S</u> submersible																																					
ST	BR	HO																																																			
STEEL	BRASS	OPEN HOLE																																																			
PL	BRONZE	OT																																																			
PLASTIC	OTHER																																																				
NUMBER OF UNSUCCESSFUL WELLS: <u>0</u> WELL HYDROFRACTURED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 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. DRILLER'S LIC. NO. <u>MHD-355</u> DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) <u>[Signature]</u> CIC. NO. <u>MWD 553</u> SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) <u>[Signature]</u>				PUMP INSTALLED DRILLER INSTALLED PUMP YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> 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 <u>29</u> CAPACITY: GALLONS PER MINUTE (to nearest gallon) <u>31</u> to <u>35</u> PUMP HORSE POWER <u>37</u> to <u>41</u> PUMP COLUMN LENGTH (nearest ft.) <u>43</u> to <u>47</u> CASING HEIGHT (circle appropriate box and enter casing height) <u>+</u> above <u>-</u> below LAND SURFACE (nearest foot) <u>50</u> to <u>51</u> 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) <u>#3710</u> <u>30'</u> <u>15'</u> <u>30'</u>																																																	
GRUEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <u>68</u> 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																																																					

B 1		SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL		STATE PERMIT NUMBER			
2247			531865 please type		H0-95-1794			
Date Received (APA) 8/14/2009			OWNER INFORMATION			B 3 LOCATION OF WELL		
8 MM DO YY 13			Wise			8 COUNTY 21		
15 Last Name			Owner First Name			23 SUBDIVISION 42		
3710 Valley Road			34			SECTION 44 46 LOT 11 50		
36 ELICOTT CITY, Md 21042			55			52 NEAREST TOWN 71		
57 Town 70 State 72 Zip 76						MILES FROM TOWN (enter 0 if in town) 73 76 77 78		
DRILLER INFORMATION			Michael Barlow M No 355			B 4		
Driller's Name			Barlow Well Drilling Service			1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		
Firm Name			522 Underwood Ln, Bel Air, Md			N W N E		
Address			7/23/04			W TOWN E		
Signature			Date			S W S E		
B 2 WELL INFORMATION			APPROX. PUMPING RATE (GAL. PER MIN.)			ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)		
1 2			0			NORTH		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)			000			W E S		
14 20						SOUTH		
USE FOR WATER (CIRCLE APPROPRIATE BOX)						DISTANCE FROM ROAD ENTER FT OR MI 38 39		
D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION						TAX MAP: 24 BLK: 11 PARCEL 224		
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)								
I INDUSTRIAL, COMMERCIAL, DEWATERING								
P PUBLIC WATER SUPPLY WELL								
T TEST, OBSERVATION, MONITORING								
G GEO-THERMAL			2x300'					
APPROXIMATE DEPTH OF WELL 300 FEET						NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL		
APPROXIMATE DIAMETER OF WELL 6 INCH						Howard (13)		
METHOD OF DRILLING (circle one)						COUNTY NAME COUNTY NO.		
BORED (or Augered) JETTED Jetted & DRIVEN						STATE SIGNATURE INSERT S 41		
30 AIR-ROTARY AIR-PERCUSSION ROTARY (Hydraulic Rotary)						DATE ISSUED 8/13/2009 Brian Baker 8/13/2010		
37 CABLE REVERSE-ROTARY Drive-POINT						43 MM DD YY 48 CO SIGNATURE EXP. DATE		
other						NORTH GRID 522 000 EAST GRID 848 000		
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)						SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		
N THIS WELL WILL NOT REPLACE AN EXISTING WELL						SOURCES OF DRILLING WATER		
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED						1.		
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS						2.		
39 D THIS WELL WILL DEEPEIN AN EXISTING WELL						3.		
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41						WRITE THE BOX NUMBER FROM THE MAP HERE		
Not to be filled in by driller (MDE OR COUNTY USE ONLY)						E 85048		
APPROX. PERMIT NUMBER						N 53522		
PERMIT No. H0-95-1794						DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION		
SPECIAL CONDITIONS						Frederick		
NOTE: APPROVING AUTHORITY SHOULD USE SEPARATE SHEET IF NEEDED.						Macapine Rd		
						Valley Rd		

8/13/09
 Sketch O.K.
 (BB)



- Valley Rd



4 TYPICAL BORE HOLE DETAIL
 M1.00 NOT TO SCALE