

C1 2047		SEQUENCE NO. (OEP USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE				THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.			
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)								COUNTY NUMBER A-29476			
DATE Received 8 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 13		DATE WELL COMPLETED 15 12 1 0 8 7 20		Depth of Well 22 24 5 26 (TO NEAREST FOOT)				PERMIT NO. FROM "PERMIT TO DRILL WELL" A0-81-2499 28 29 30 31 32 33 34 35 36 37			
OWNER FOREMOST INDUSTRY INC.		last name WARRASVILLE first name REL.		TOWN POPULAR SPRINGS							
STREET OR RFD				SUBDIVISION POPULAR SPRINGS				SECTION 4 LOT 4			
WELL LOG Not required for driven wells				GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 45 NO. OF POUNDS 200 GALLONS OF WATER 42 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 32 ft. (enter 0 if from surface)				C3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 8 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 34 WHEN PUMPING 56 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		Check if water bearing		CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) PL 4 34 OTHER CASING (if used) diameter inch depth (feet) from to SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER C2 1 2 DEPTH (nearest ft.) 140 32 245 EACH SCREEN 1 140 32 245 2 23 24 26 30 32 36 3 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56 60 (NEAREST INCH) from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA			
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 10.17.13 "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 IDENT. NO. 273 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)								PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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) 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) 40' DRY HOLE 20' 20'			

B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em; font-weight: bold;">5740</div>	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">10-81-2497</div>
Date Received <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">10/1/87</div>		LOCATION OF WELL 8 COUNTY <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">HOWARD</div>	
OWNER INFORMATION 15 Last Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">FOREMAN</div> Owner First Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">JIM</div> 36 Street or RFD <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">404 N MAIN ST</div> 57 Town <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">POTOMAC</div> 70 State <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">21</div> Zip <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">221</div>		23 SUBDIVISION <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">POTOMAC SPRINGS</div> SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">44</div> LOT <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">48</div> 52 NEAREST TOWN <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">POTOMAC</div>	
DRILLER INFORMATION Driller's Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">RALPH MAYNE</div> 77 License No. <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">273</div> Firm Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">RALPH MAYNE (WELL DRILLING)</div> Address <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">9120 KNOX CHURCH RD. MT AIRY</div> Signature <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">Ralph Mayne</div> Date <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">10/1/87</div>		MILES FROM TOWN (enter 0 if in town) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">0</div>	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">5</div> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">500</div>		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NEAR WHAT ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">WATERSVILLE RD.</div>	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">150</div> FEET		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">HOWARD</div> COUNTY NO. <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">A-29476</div> OEP SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">[Signature]</div> STATE HEALTH INSERT S <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">41</div> DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">10/23/87</div> CO SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">[Signature]</div> EXP. DATE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">05-22-88</div>	
APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">6"</div> INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">well</div> 2. 3.	
METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT other _____		WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">7701</div>	
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 <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">41</div>		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 (OEP USE ONLY) APPROP. PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">54</div> G A P <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">63</div>			
FORCE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">37</div> WRITE INITIALS IN BOX PERMIT No. <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">10-81-2497</div>			
SPECIAL CONDITIONS <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">Split for 1st pit</div>			

Well Permit No. HO - 81-2449
Location of property (road) WARSAWILLE Rd.
Subdivision POPULAR SPRINGS Lot 4 Block Plat Sec.
Well Driller R. MAYNE Owner FOREMOST IND. INC.

Depth of well 245
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 34 ft

Time pump started 12:15 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 56' ft. below M.P.

[illegible]

House Set Backs

Left side 40'
Right side 375'
Back 95'
Front 193'

House + Drain Line Elevations

House elev. Floor 688.6
House " basement 680.6
Invert elev. (out of house) 677.0
" " (into tank) 676.6
" " (out of ") 674.0
" " (into box) 675.6

+ BSM

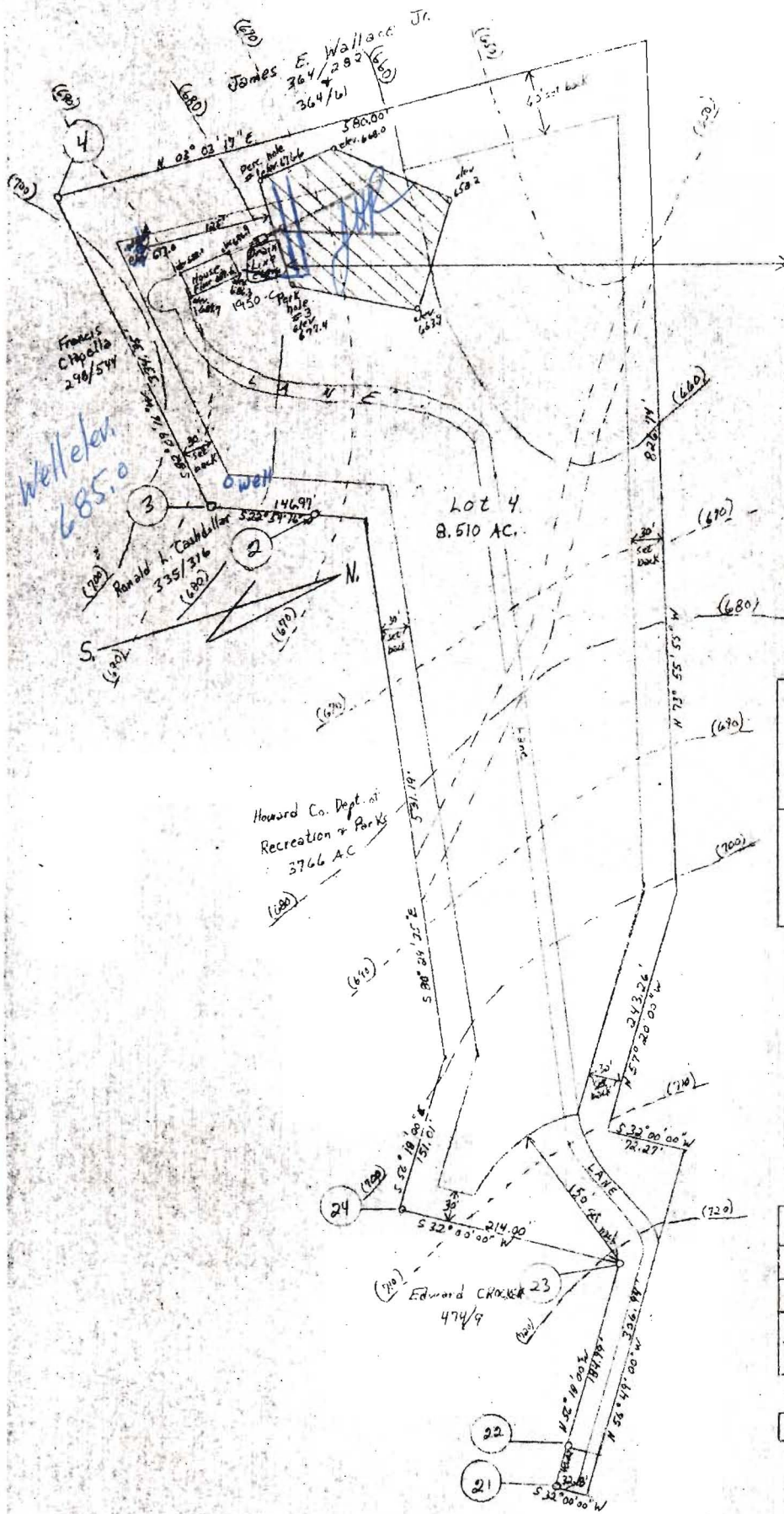
6/9/88
Elevations of
Sub

BIOG. PERMIT SIGNED
AND RETURNED 6-9-88
BP18910
SAB

Nov. 4, 1983
Foremost Industries, Inc.
2375 Buchanan Trail West
Greencastle, PA. 17225
Phone (717) 597-7166
Md. Sales Mgr. + Balt. Wash. Co. Ord.
J. Hoke Rosensteel
404 H. Main St. Mt. Airy, Md.
21771 Phone (301) 829-0886

Poplar Springs Lot #4
Plate #4849 Parcel A
Tax Map 7 4th Elect. Dist.
From Survey by Boeader Assoc.
J.H.R. For Foremost Industries

Scale: 1" = 100'





HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 4, 1991

Reply to:

Charles Streaker, Sanitarian
461-9933 or 461-9934

Mr. Hoke Rosensteel
404 N. Main Street
Mt. Airy, Maryland 21771

Re: Poplar Springs - Lot 4
914 Watersville Drive
Well Permit No. HO-81-2449

Dear Mr. Rosensteel:

This is to advise you that the septic system was installed, inspected and approved on June 28, 1990.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and bacteriologically safe for drinking.

FINAL CERTIFICATION OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-2449.

January 29, 1991
Date of Final Sampling

February 4, 1991
Date of Acceptance

Charles Streaker
Charles Streaker, Sanitarian
Water and Sewerage Program

Water Sample Dates:
November 16, 1990
January 29, 1991

✓
CS:cm

James Wallace Jr.
364/202

Popella

Ronald Cashdollar
335/316

Howard Co. Dept Parks
3,766 Ac.

Edward Crocker
474/9

John Schneeberg

