

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) FILL IN THIS FORM COMPLETELY PLEASE TYPE
 COUNTY NUMBER 13
 DATE WELL COMPLETED 2 27 2004 Depth of Well 400' (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" VHD-22-0142

OWNER 40901 Stuart
 WELL SITE ADDRESS 15000 ... TOWN Highland
 SUBDIVISION ... SECTION ... LOT ...

WELL LOG
 Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
GILLES TOPSOIL	0	6"	
Silt, soft, dry	6"	18"	
Brown silty water bearing sand	18"	45"	
Bel rock	45"	400'	
Soft sandy silt			
Fractured 1 1/4" to 1" loop in 400'			

GROUTING RECORD YES NO

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS 33 NO. OF POUNDS 1100

GALLONS OF WATER 627

DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 400 ft.

CASING RECORD

causing types insert appropriate code below

ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch!) 6 Total depth of main casing (nearest foot) 59'

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD

screen type or open hole (insert appropriate code below)

ST STEEL **BR** BRASS **BO** OPEN HOLE
PL PLASTIC **OT** OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO

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.

DRILLERS LIC. NO. MWD 507
 DRILLERS SIGNATURE [Signature]
 MUST MATCH SIGNATURE ON APPLICATION
 LIC. NO. MWD 103

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2 DEPTH (nearest ft.)

8	9	11	15	17	21
23	24	26	30	32	36
38	39	41	45	47	51

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN (NEAREST INCH)
 from _____ to _____

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) N/A

PUMPING RATE (gal. per min.) N/A

METHOD USED TO MEASURE PUMPING RATE N/A

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 ft. N/A

WHEN PUMPING 22 ft. N/A

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 V/I

CAPACITY: GALLONS PER MINUTE (to nearest gallon) N/A

PUMP HORSE POWER N/A

PUMP COLUMN LENGTH (nearest ft.) N/A

CASING HEIGHT (circle appropriate box and enter casing height)

above } LAND SURFACE
 below } -3 (nearest foot)

LATITUDE 39.162636
 LONGITUDE 76.981690
 (DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info. may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or state law.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) **FILL IN THIS FORM COMPLETELY PLEASE TYPE** COUNTY NUMBER **13**

ST/CO USE ONLY DATE Received MM DD YY DATE WELL COMPLETED MM DD YY Depth of Well 22 **400** 26 **SP** FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37 **16/15/2024**

OWNER **Vogel** WELL SITE ADDRESS **1002 S. ORANGE ST. #62** TOWN **HIGHLAND** SUBDIVISION **SECTION** LOT

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Grass Turf Soil	0	6'	
Soft, silty, clay	6'	18'	
Broken shells, water rock	18'	28'	
Redd. sand, soft, sandy shale	28'	400'	

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 ⁴⁵ **32** ⁴⁶ NO. OF POUNDS ⁴⁵ **1,600**
GALLONS OF WATER **608**
DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **400'** ft.

CASING RECORD
casing types insert appropriate code below
ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER
MAIN CASING TYPE **PL** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **59'**

OTHER CASING (if used)

EACH CASING	diameter		depth (feet)	
	inch		from	to

SCREEN RECORD
screen type or open hole insert appropriate code below
ST STEEL **BR** BRASS **HO** OPEN HOLE
PL PLASTIC **OT** OTHER

NUMBER OF UNSUCCESSFUL WELLS: **0**
WELL HYDROFRACTURED **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 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.

DRILLERS LIC. NO. **M D 5871**
Stephen Vogel
DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. **M D 163**

C2 DEPTH (nearest ft.)

1	8	9	11	15	17	21
2	23	24	26	30	32	36
3	38	39	41	45	47	51

SLOT SIZE 1 _____ 2 _____ 3 _____
DIAMETER OF SCREEN (NEAREST INCH) from _____ to _____

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 **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

C3 **PUMPING TEST**
HOURS PUMPED (nearest hour) **N/A**
PUMPING RATE (gal. per min.) **N/A**
METHOD USED TO MEASURE PUMPING RATE **N/A**
WATER LEVEL (distance from land surface)
BEFORE PUMPING **N/A** ft.
WHEN PUMPING **N/A** 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 **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 **N/A**
CAPACITY: GALLONS PER MINUTE (to nearest gallon) **N/A**
PUMP HORSE POWER **N/A**
PUMP COLUMN LENGTH (nearest ft.) **N/A**
CASING HEIGHT (circle appropriate box and enter casing height) **+** above } LAND SURFACE
- below } **-3** (nearest foot)

LATITUDE **39.162662**
LONGITUDE **76.981981**
(DEFAULT COORD. WGS 84)

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B 1 72477

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-22-0142

please type

fill in this form completely

Date Received (APA)

OWNER INFORMATION

Vogel Stuart 13021 Wainwright Rd. Highland Md. 20777

LOCATION OF WELL

Howard 8 COUNTY 21 1002 15.08 Ac. 13021 Wainwright Rd. 23 SUBDIVISION SECTION 44 46 LOT 48 50 Ashmead 52 NEAREST TOWN 71

DRILLER INFORMATION

Stephen Delosh MWD 587 Driller's Name License No. Connelly & Associates, INC. Firm Name 1513 T.iku Dr. Frederick, MD 21704 Address Stephen Delosh 07/25/24 Signature Date

SOURCES OF DRILLING WATER

1. Private 2. 8/26/24 - N 220 3. Run @ 50' casing @ 60'

13021 Wainwright Rd. 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH DISTANCE FROM ROAD 34 300' 37 FT ENTER OR MI 38 39 TAX MAP 0040 BLK: PARCEL 0034

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) N/A 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) N/A 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION 8/27/24 - 14 well 25' d.d. 25' @ 320' Run @ 50' casing @ 60' (C) CLOSED LOOP GEOTHERMAL (SP/W)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 8/6/2024 8/6/2024 43 MM DD YY 48 CO SIGNATURE EXP. DATE

APPROXIMATE DEPTH OF WELL 400 FEET

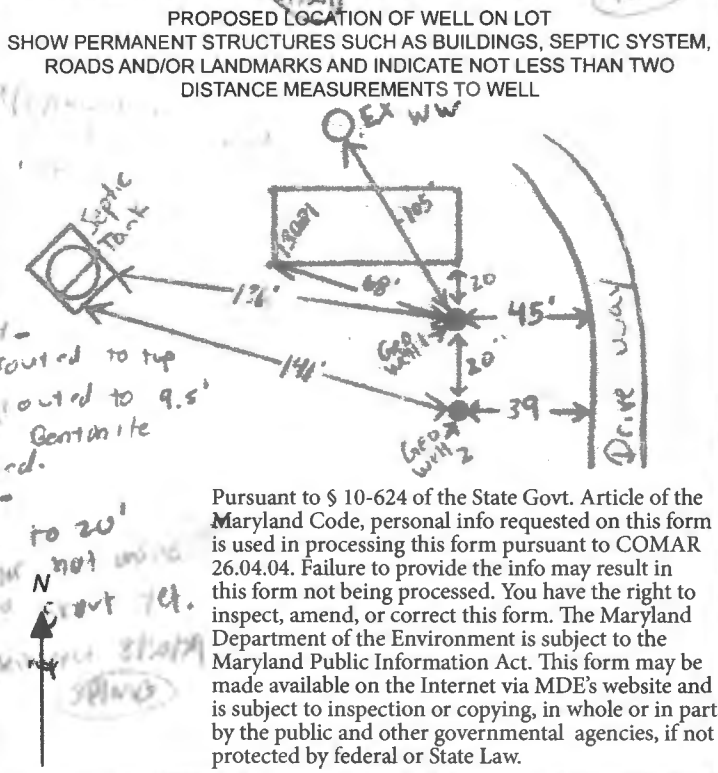
APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary DRIVE-POINT

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL Geo well 1 routed to top Geo well 2 routed to top below ground. Bentonite Grout depth to 20' not using Grout 74'



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Not to be filled in by driller (MDE OR COUNTY USE ONLY)

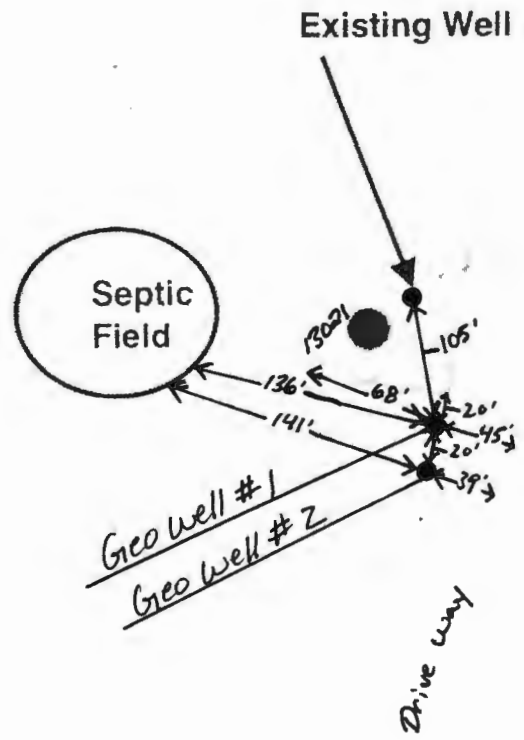
APPROP. PERMIT NUMBER G PERMIT No. HO-22-0142

SPECIAL CONDITIONS

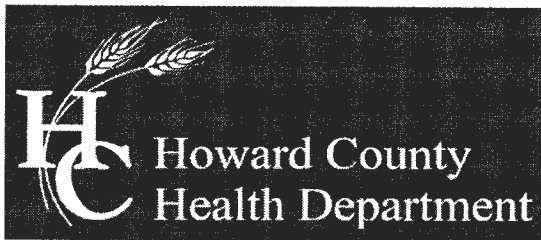
NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

well site
Approved
SP 8/6/2024

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER
HO-22-0142
INFORMATION - GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230



Wainwright Rd.



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:

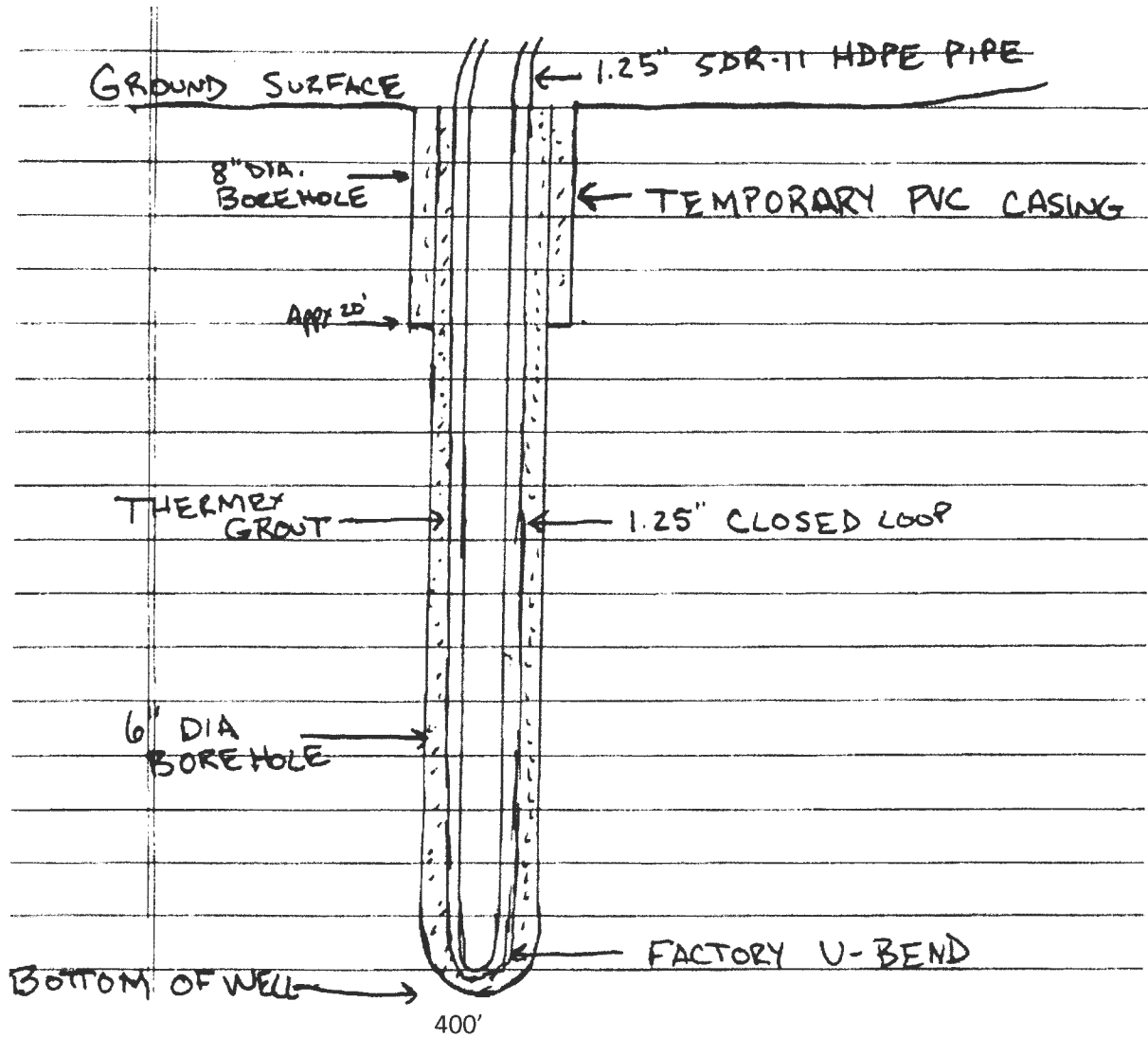
1002/15.08 Ac. 13021 Wainwright Rd. — Wainwright Road
Subdivision/Property Name Lot # Road Name

The well site has been staked by _____
(professional land surveyor or company employing professional land surveyors)
on _____ (date) and does not require a site inspection.

The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Vogel Residence: 13021 Wainwright Rd. Highland, Md. 20777 Geothermal Closed Loop



Grout information for this property is as follows:

Well Grout DF grout mixture of 50 lb. grout to 19 gallons water, placed in the well using the tremie method, from bottom to top.

FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
8/5/2024	- Met w/ homeowner to identify well stakes &
	check distances from ex septic tank & well.
	Both stakes meet setbacks. (SP)

RECEIPT

Howard County, MD
HOWARD COUNTY HEALTH DEPARTMENT
ASCEND ONE BUILDING
Columbia, MD 21045
8930 STANFORD BLVD

Application: WS-WP-24-02191
Application Type: EnvHealth/Well and Septic/Installation/Application
Address: 13021 Wainwright RD,

Receipt No.	10313					
Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Credit Card		\$160.00	07/25/2024	JUKING		

Work Description: Well Permit/ Stephen Delosh/ Connelly Association