

C1 1294

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER EX SITE SERVICES STREET OR RFD 503 NATAIL RIVER TOWN LISBON SUBDIVISION CHASE AT STONEY BROOK SECTION LOT 13

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Top Soil 0-2, Brown Shale 2-15, Brown Slate 15-90, Gray Slate 90-450. Note: Installed log and back filled with bentonite slurry.

GROUTING RECORD form with fields for material (CM, BC), bags (30), pounds (1000), and depth of seal (48-54 ft).

CASING RECORD form with fields for casing type (ST, PL, CO, OT), nominal diameter, and total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form with fields for screen type (ST, BR, PL, HO, OT) and depth.

PUMPING TEST form with fields for hours pumped, pumping rate, water level, and pump type.

PUMP INSTALLED form with fields for driller name, pump type, capacity, and horse power.

WELL HYDROFRACTURED and CIRCLE APPROPRIATE LETTER (A, E, P) section.

DEPTH (nearest ft.) table with columns 1-21 and rows A-C, H-S, R-E, N.

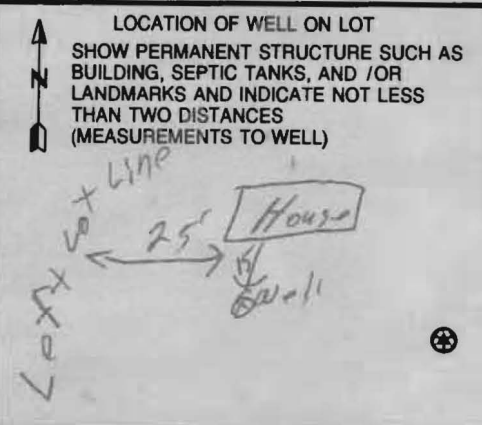
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 MW D040 George J. Mastenday DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 JSD 038

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) form with fields T, W, Q.

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

TELESCOPE CASING, LOG INDICATOR, OTHER DATA fields.



C1 3953

SEQUENCE NO. (MDE USE ONLY)

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(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER EXSITE SERVICES STREET OR RD 16303 Cathail River Dr TOWN Lisbon SUBDIVISION Chase At Stony Ridge SECTION LOT 13 HP2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Top Soil (0-2), Brown Sand (2-16), Brown Silt (16-95), Gray Silt (95-450). Note: Installed loop and back-filled with bentonite slurry.

GROUTING RECORD form. Includes: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (30), NO. OF POUNDS (1500), GALLONS OF WATER (460), DEPTH OF GROUT SEAL (0-450).

CASING RECORD form. Includes: casing types (ST, CO, PL, OT), MAIN CASING TYPE (60-70), Nominal diameter top (main) casing, Total depth of main casing.

OTHER CASING (if used) form. Includes: diameter inch, depth (feet) from to.

SCREEN RECORD form. Includes: screen type or open hole (ST, BR, HO, PL, OT), DEPTH (nearest ft.) (1-2).

WELL HYDROFRACTURED (Y), NUMBER OF UNSUCCESSFUL WELLS: 0

CIRCLE APPROPRIATE LETTER: A (Well abandoned and sealed), 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...

DRILLERS LIC. NO. 1 MW D040 George J. Easterday DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 JS D038 Bill Shannon

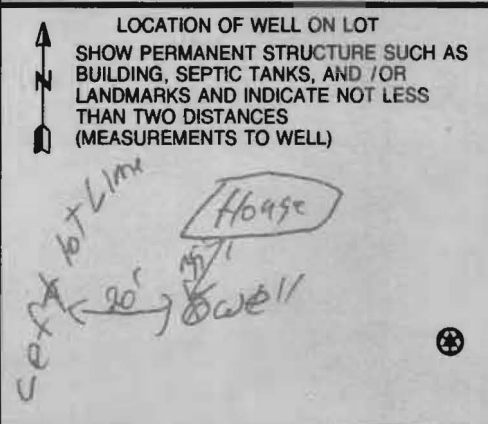
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.) table with columns 1-2 and rows E, A, C, H, S, C, R, E, N. Includes DIAMETER OF SCREEN (56-60) and GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL (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 form. Includes: HOURS PUMPED (8.0), PUMPING RATE (gal. per min.) (11-15), METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL (distance from land surface) BEFORE PUMPING (17-20), WHEN PUMPING (22-25), TYPE OF PUMP USED (for test) (A, C, J, P, R, S, T, O, J, S).

PUMP INSTALLED form. Includes: DRILLER INSTALLED PUMP (YES/NO), TYPE OF PUMP INSTALLED (A, C, J, P, R, S, T, O), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (circle appropriate box and enter casing height) (+ above, - below), LAND SURFACE (nearest foot).



B 1 9247
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
535152 please type N5

STATE PERMIT NUMBER
Ho-95-2127
fill in this form completely

Date Received (APA) 11605
04/12/11
OWNER INFORMATION
EXSITS SERVICES
15 Last Name Owner First Name 34
6601 AMMENDALE ROAD
36 Street or RFD 55
BELTSVILLE MD 20705-1262
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
Howard
8 COUNTY 21
Chase at Stony Brook
23 SUBDIVISION 42
SECTION 44 46 LOT 13 48 50
Lisbon
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78

DRILLER INFORMATION
George F. Easterday M WD 040
Driller's Name 76 License No. 81
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771
Address
George F. Easterday 4/8/2011
Signature Date

B 4
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
16303 Cattail River Drive
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST EAST
SOUTH
34 50 37
DISTANCE FROM ROAD FT.
ENTER FT OR MI 38 39
TAX MAP: 7 BLK: 17 PARCEL 133

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 50
8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard (13) A59207
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S 41
DATE ISSUED 5/9/2011 Brian Baker 5/9/2012
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 543 000 EAST GRID 777 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 2x450 300
24 28 FEET

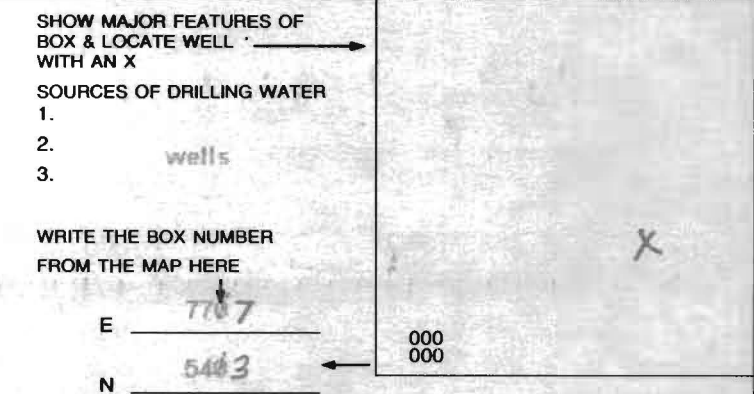
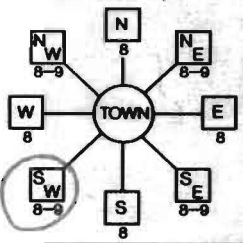
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

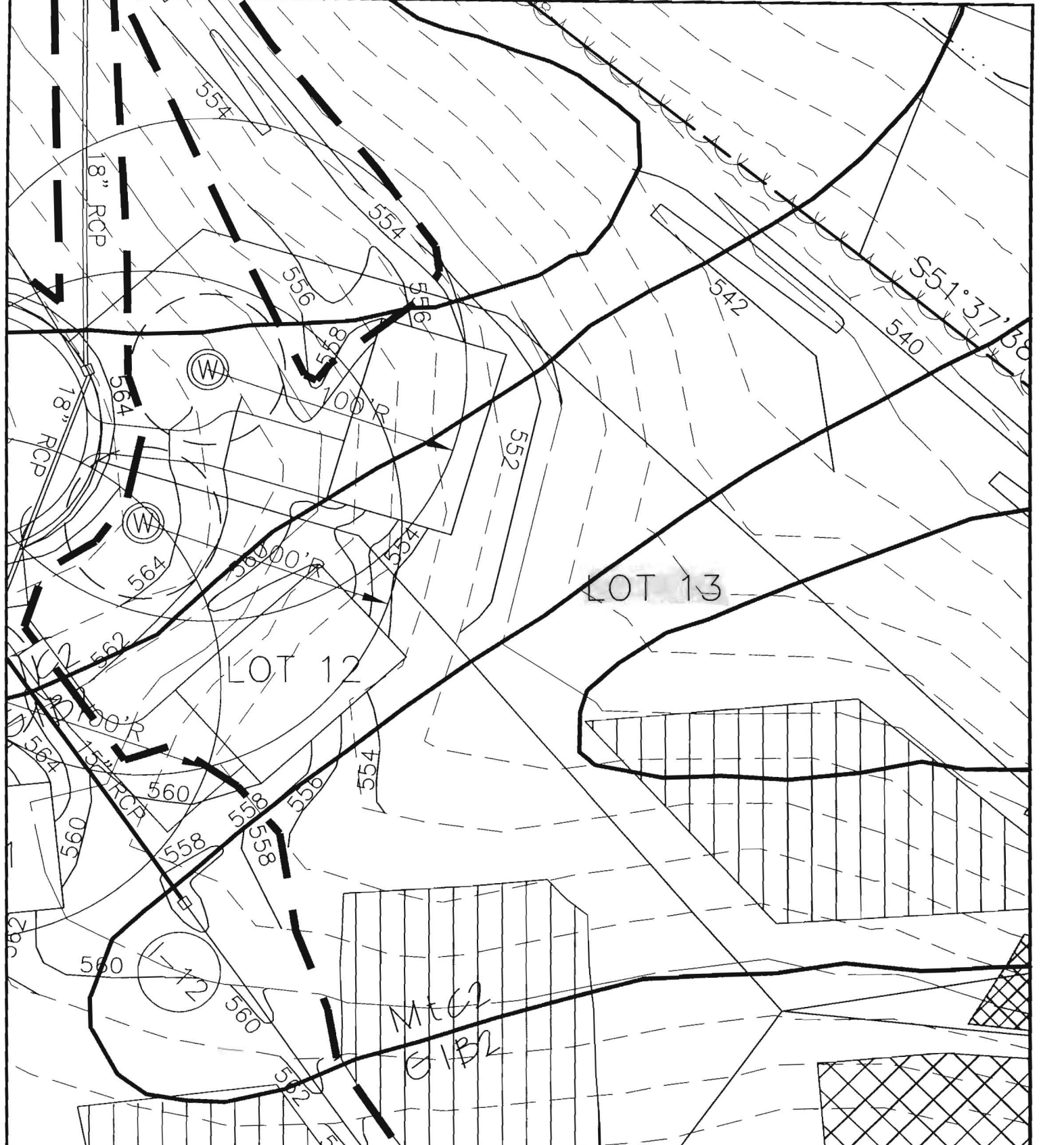
METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROTary DRive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEMED AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER G
PERMIT No. Ho-95-2127
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED





BENCHMARK

ENGINEERS • LAND SURVEYORS • PLANNERS

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043

PHONE: 410-465-6105

P:\1187.dwg 7/25/05 11:43:57 AM, FAX: 410-465-6644

imc, Kyocera Mita KM-2530 KX.pc3

THE CHASE AT STONEY BROOK

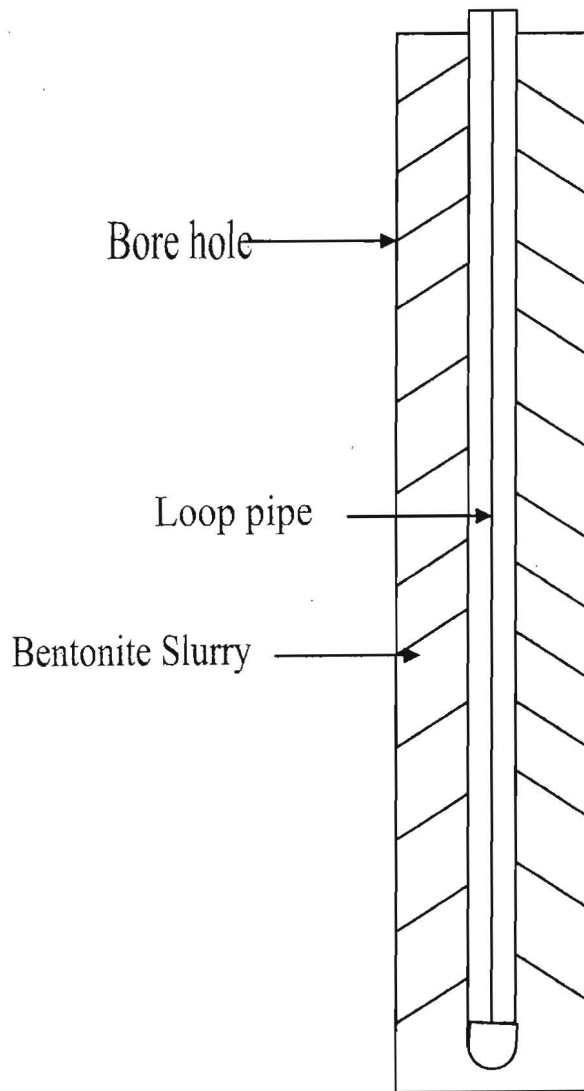
LOT 13

FORTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 8/2/05

GEOHERMAL WELL DESIGN

L. FRANKLIN EASTERDAY, INC



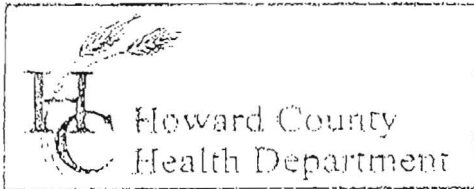
Owner Ex-site Services - Kari Cole

Location 16303 CATTAIL RIVER DR

Number of wells 2

Depth 450 Loop Size 1 1/4"

Grout Material-----Bentonite Slurry from bottom to G.L.



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., 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:

- The well site has been staked by Driller,
 (professional land surveyor or company employing professional land surveyors)
 on 4-7-11 (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.

Revised 6/10/03

16303 CATTAIL RIVER DR
 WOODBINE
 EX SITE SERVICES.