

C1 9395 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 A 10126

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED MM DD YY 12-21-99

Depth of Well 22 350 26 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-45-1843

OWNER Hyman Lawrence last name first name STREET OR RFD 3681 Holly Quarter Rd TOWN 21104 City SUBDIVISION SECTION LOT 6

WELL LOG Not required for driven wells

GROUTING RECORD YES NO WELLS HAS BEEN GROUTED (Circle Appropriate Box) Y N

C 3 S4 PUMPING TEST

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Top soil, Bin Clay + Micr, Boulders, Bin Clay + BK Micr, Sappanite, Soft Gray Rock w/voids + fractures, Gray + Blk Granite.

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 350 NO. OF POUNDS 7500 GALLONS OF WATER 750 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 35 BOTTOM 58 ft.

HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min.) 11 15 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING 17 20 ft. WHEN PUMPING 22 25 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

CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot) PL 16 70

PUMP INSTALLED

OTHER CASING (if used) diameter inch depth (feet) from to

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

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 - below LAND SURFACE (nearest) foot 50 51

NUMBER OF UNSUCCESSFUL WELLS:

C 2 DEPTH (nearest ft.)

WELL HYDROFRACTURED yes no Y N

E A C H S R E E 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

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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.

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

DRILLERS LIC. NO. 1 M D 8706 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 AW D 875

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76

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) Front X X X Geop field

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 **6736**

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
531987 please type

STATE PERMIT NUMBER

HO - 95 - 1843
70 fill in this form completely 79

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13
HYMAN
15 Last Name
Owner **LAWRENCE** First Name 34
36 **3681 FOLLY QUARTER ROAD** Street or RFD 55
57 **ELLICOTT CITY MD 21042** Town 70 State 72 Zip 76

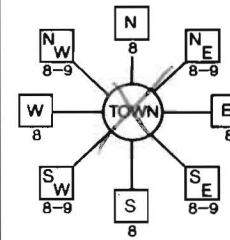
B 3 **HOWARD** LOCATION OF WELL

8 COUNTY 21
ELLICOTT CITY
23 SUBDIVISION 42
SECTION **6** LOT **6**
44 46 48 50
ELLICOTT CITY
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) **0** MI 73 76 77 78

DRILLER INFORMATION

MARSHAL ARNETTE M S D 106
Driller's Name 76 License No. 81
ALLIED ENVIRONMENTAL SERVICES INC
Firm Name
PO BOX 1242 MILLERSVILLE MD 21108
Address
Marshall Arnette 10/30/09
Signature Date

B 4
1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



3681 FOLLY QUARTER ROAD
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **300** 37 DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: **23** BLK: **9** PARCEL **67**

B 2 WELL INFORMATION
1 2
APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- 22 I INDUSTRIAL, COMMERCIAL, DEWATERING
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL **(3) CLOSED LOOPS**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME **(15)** COUNTY NO.
STATE SIGNATURE _____ INSERT S →
DATE ISSUED **11/23/09** CO SIGNATURE **John Wall** EXP. DATE **11/25/10**
43 MM DD YY 48
NORTH GRID **520 000** EAST GRID **0820 000**
50 55 57 63

APPROXIMATE DEPTH OF WELL **350** FEET
24 28

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jettied & DRIVEN
- 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
- 37 CABLE REVERSE-ROTary DRIVE-POINT
- other _____

REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
 - Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 - 39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 - D THIS WELL WILL DEEPEEN AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 _____ 52

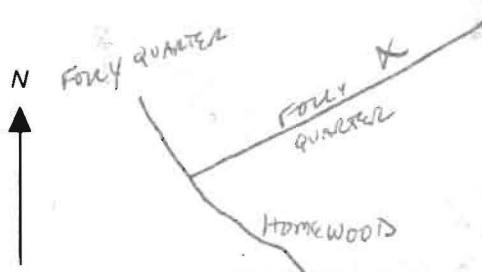
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER
- 1. **DAMMERS WELL**
 - 2.
 - 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E **820**
N **520**

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 (MDE OR COUNTY USE ONLY)

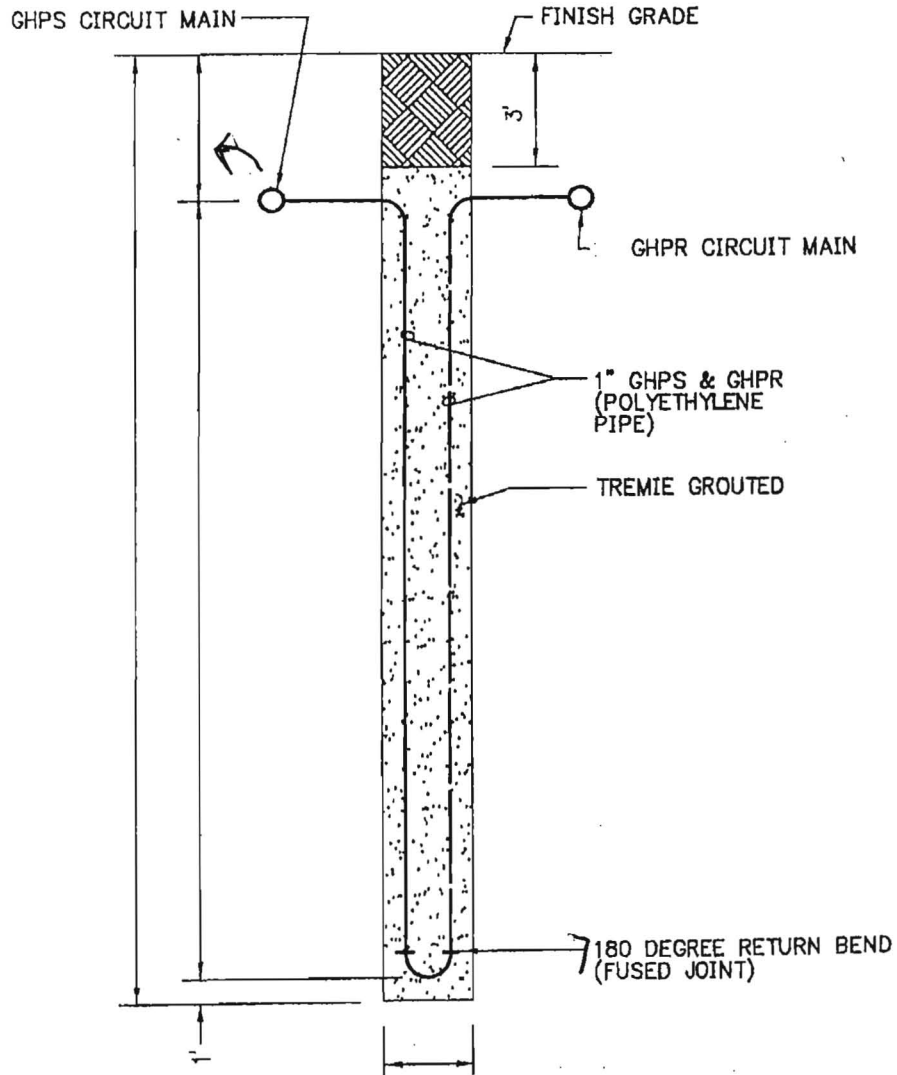
APPROP. PERMIT NUMBER _____ G _____
PERMIT No. **HO - 95 - 1843**
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS **Must maintain setbacks from Ex. Septic!!!**

DETAIL (1/M0.1)

TYPICAL GHPS/GHPR CIRCUIT MAINS BELOW GRADE

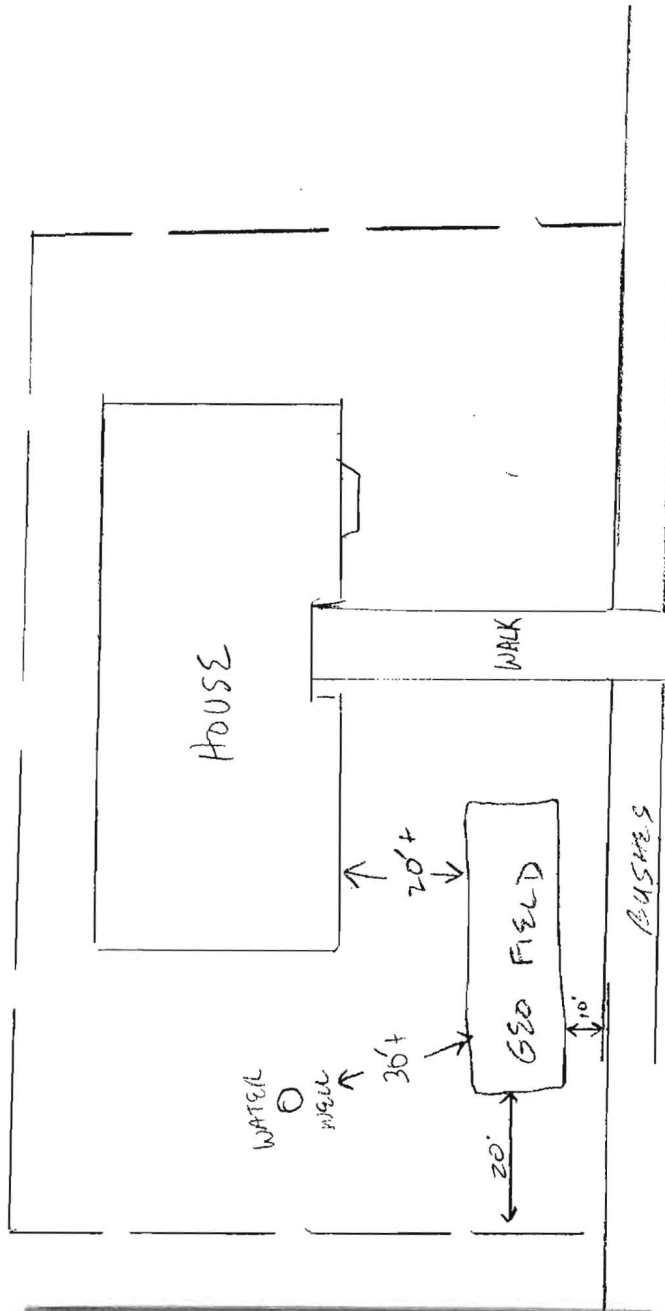
NOT TO SCALE



DETAIL (2/M0.1)

TYPICAL VERTICAL BOREHOLE

NOT TO SCALE



DO NOT REMOVE THIS TAG
 DEPARTMENT OF THE ENVIRONMENT
 WELL PERMIT NUMBER
 HO-95-1843
 INFORMATION-GIVE NUMBER AND WRITE
 1800 WASHINGTON BLVD.
 BALTIMORE, MARYLAND 21230

well sites OK.
 must maintain if up-gradient PARKING AREA
 50' from 100' if down-gradient. BLACK TOP