

C1 2328

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A-3117

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

DATE Received

DATE WELL COMPLETED 06/28/89

Depth of Well 160 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-48-0491

OWNER: K... Development last name S... first name TOWN: ... SUBDIVISION: ... SECTION: ... LOT: 4

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Clay, Shale, Sand silt, Clay mixed, Brown shale, Granite, Quartz, Granite.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS: 24, NO. OF POUNDS: 2900.

CASING RECORD: casing types insert appropriate code below. Includes codes for ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE: ST, Nominal diameter: 4, Total depth of main casing: 94.

OTHER CASING (if used) diameter and depth.

SCREEN RECORD: screen type or open hole insert appropriate code below. Includes codes for ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

DEPTH (nearest ft.) table with rows for EACH SCREEN and columns for depth measurements.

CIRCLE APPROPRIATE LETTER: A (WELL ABANDONED), 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"...

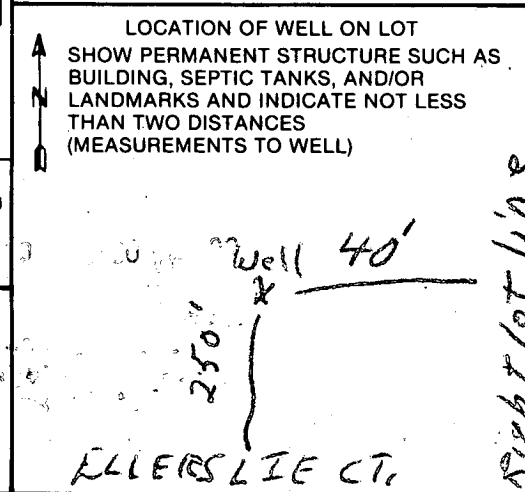
DRILLERS IDENT. NO., DRILLERS SIGNATURE, SITE SUPERVISOR responsible for sitework if different from permittee.

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER): TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (10), METHOD USED TO MEASURE PUMPING RATE (Built), WATER LEVEL (21), TYPE OF PUMP USED (S - submersible).

PUMP INSTALLED: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (above/below), LAND SURFACE (2).



COUNTY

3/4/90

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # 45509
Date 2/2/90

Name of Installer W.W.King Plbg. & Htg. Contr., Inc.

Telephone 1-301-662-6990

License Number 2217

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Pulte Homes

Telephone 1-301-921-8707

Subdivision Ellerslie/Glen Manor Lot # 4 Well Tag # HO - 88 - 0491

Site Address 3118 Ellerslie Ct.m Glenwood, Md. 21738

Pump

- 1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible X
- 2. Make Goulds
- 3. Model # 7EH05422
- 4. Capacity 7 GPM

Motor

- 1. Horsepower 1/2
- 2. RPM 3500
- 3. Voltage _____
 - a. 110 _____
 - b. 220 X

Pitless Adapter

- 1. Make Martinson
- 2. Model # BP-10K
- 3. Depth 42" min
60" max

- 5. Pump exceeds well capacity Yes _____ No X
- 6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
- 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards X Other _____

Tank

- 1. Capacity 80
- 2. Pressure relief valve? yes

Piping

- 1. Type Plastic #160
- 2. Size 1"
- 3. NSF and/or BOCA Code approved X
- 4. Depth of supply line 42" min
60" max

Well data

- 1. Depth 160 ft.
- 2. Yield 40 GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? yes

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Walter W King

Date: 2-1-90

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215 3/16/90 - OJL TO COLER
STICKER APPLIED