

C 1 1949 (MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPE

COUNTY NUMBER A58993J
PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2413

ST/CO USE ONLY
DATE RECEIVED
MM DD YY
8 13

DATE WELL COMPLETED
MM DD YY
10 06 59
Depth of Well
22 200 26
(TO NEAREST FOOT)

11/5/99 OK MLL

OWNER BRS Developers
STREET OR RFD Clear Drive Ct
SUBDIVISION Cattail Ridge SECTION TOWN Glenwood LOT 10

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	
Top Soil	0	2	
Sandy	2	65	✓
Sand Stone	65	75	
MICKA	75	95	
Sand Stone	95	100	✓
MICKA	100	200	

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 22 NO. OF POUNDS 2200
GALLONS OF WATER 132
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 30+ ft.

CASING RECORD
casing types insert appropriate code below
STEEL ST CONCRETE CO
PLASTIC PL OTHER OT
MAIN CASING TYPE ST
Nominal diameter top (main) casing (nearest inch)! 6
Total depth of main casing (nearest foot) 84

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

SCREEN RECORD
screen type or open hole
STEEL ST BRASS BR BRONZE PL PLASTIC PL OPEN HOLE HO OTHER OT
DEPTH (nearest ft.)
HO 82 200

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

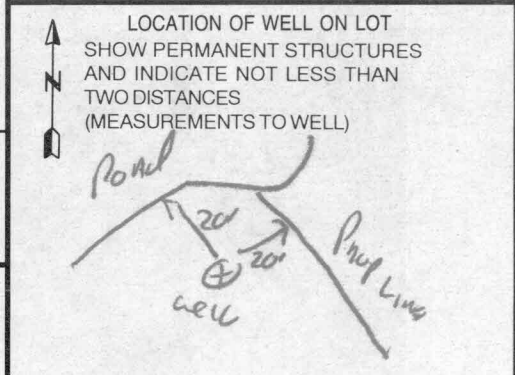
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 M SD 116
DRILLERS SIGNATURE
LIC. NO. 1 MS D 112

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 12
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 57 ft.
WHEN PUMPING 92 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 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 } LAND SURFACE
- below } 2 (nearest foot)



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

B 1 1941
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

11/5/99 OK
H0 - 94 - 2413
fill in this form completely

Date Received (APA)
08 30 99
8 MM DD YY 13

OWNER INFORMATION

15 Last Name: BRS Developers LLC
34 Owner: BRS
36 Street or RFD: 8808 Centre Park Dr. Suite 205
55
57 Town: Columbia MD. 21045
70 State: MD. 72 Zip: 21045 76

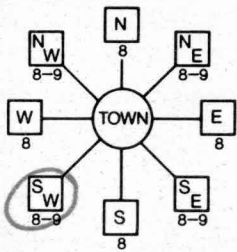
B 3 LOCATION OF WELL

8 COUNTY: Howard 21
23 SUBDIVISION: CUTTAL RIDGE 42
SECTION: - 44 46 LOT: 10 48 50
52 NEAREST TOWN: GLENWOOD 71
MILES FROM TOWN (enter 0 if in town) I M I
73 76 77 78

DRILLER INFORMATION

Driller's Name: RALPH MAYNE MS D 116
76 License No. 81
Firm Name: RALPH MAYNE WELL DRILLING
Address: 9120 Brown Church Rd. Mt Airy
Signature: Ralph Mayne 8-25-99
Date: 8-25-99

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD: Clear Drive Ct 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH [] WEST [] EAST [] SOUTH []

34 30 37 DISTANCE FROM ROAD: 30
ENTER FT OR MI 38 39
TAX MAP: 21 BLK: PARCEL 3

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5
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 Co A58993J
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S 41
DATE ISSUED: 080799 A M T M L 090700
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID: 525 000 EAST GRID: 790 000
50 55 57 63

APPROXIMATE DEPTH OF WELL: 150 FEET
24 28

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

METHOD OF DRILLING (circle one)

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

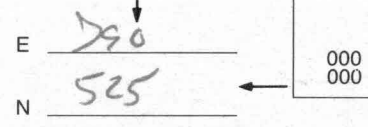
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL
 - THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 - 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

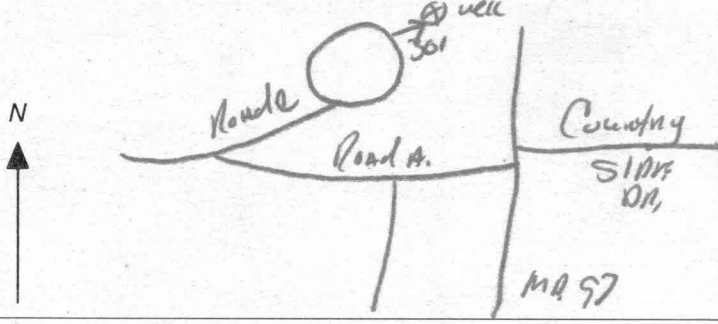
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



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: 54 G A P 63
PERMIT No. H0 - 94 - 2413
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Willoughby PLUMB Telephone #: 410-281-7051
Address: State Street Dr. Ct
Greenwood, MD 21738

(Must circle one) Licensed Plumber: Licensed Well Driller: Licensed Well Pump Installer:
License # and name of individual responsible for the field installation:
Name (Print): Caris J. Willoughby License: 6992

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: MTL LEAD INC Telephone #: 201-953-5100
Subdivision: CATIAH RIDGE Lot #: 10 Well Tag #: HO 94-2913
Site Address: 412 WOODBINE CT
Greenwood, MD 21738

Submittable Form Data
Make: JACOBI Pitless Adapter Make: RAYVARD Well Cap and Electric Conduit
Model #: Model #: Two piece wastring cap:
Pump Capacity: GPM Depth: 48" (36" min) Screened, vented well cap:
Well Yield: GPM NSF approved: Cap secured to casing:
Depth of well encountered at time of pump installation: 500 (feet) Conduit min 1 1/2" B.G.:
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Conduit secured to well cap:
Torque wrench or Cable guards are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house
Type: CRESTLINE House Connection
PSI: 11 (160 psi min) PVC sleeved to undisturbed soil at wall penetration:
Depth of supply line: 36" min Approximate length of sleeve: 6'
Sleeve caulked and sealed properly:

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

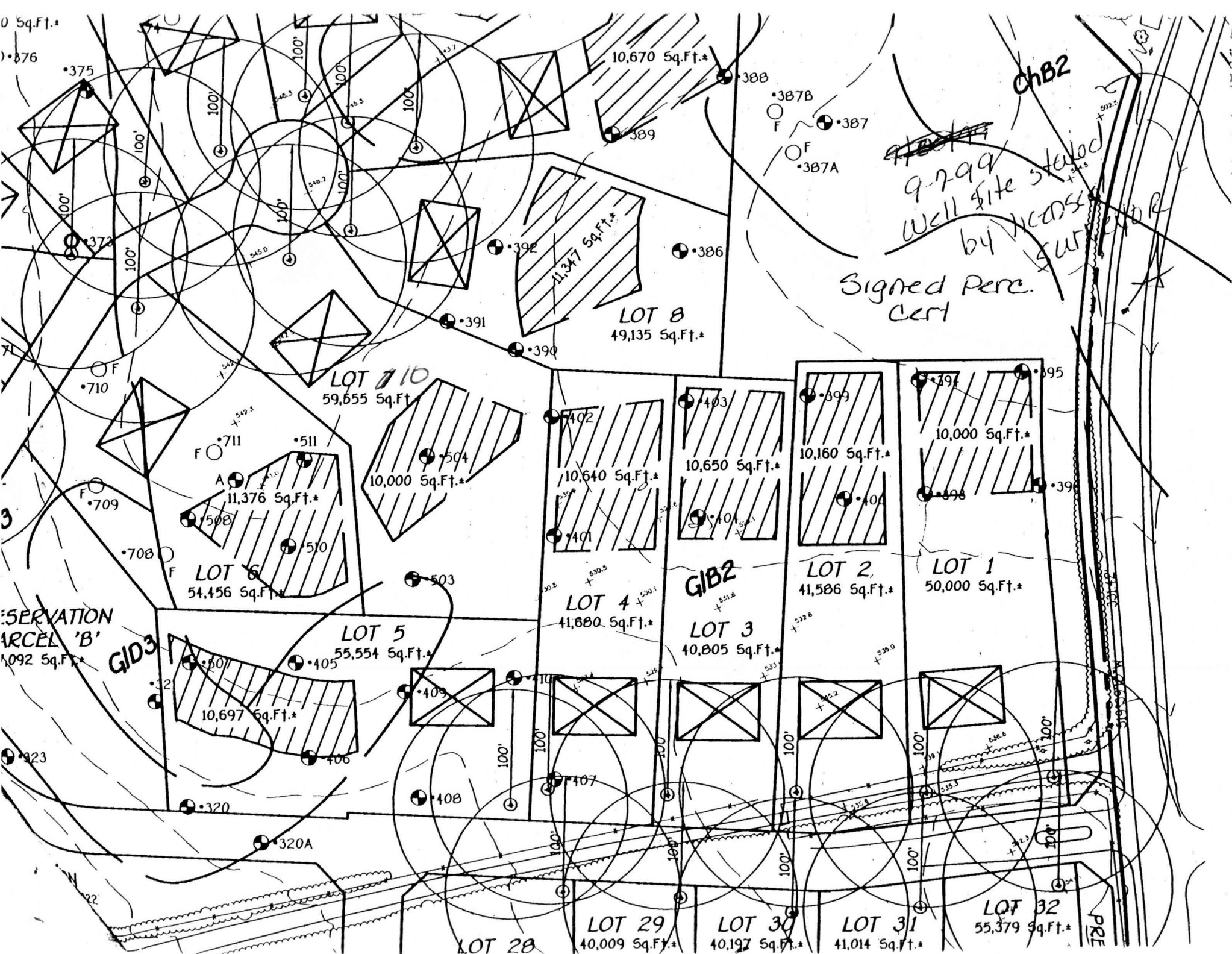
Signature of company representative responsible for installation: Chris Willoughby date: 9/18/01

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 9/19/01 Date Insp. Approved: 9/19/01 SRK

- Inspection Date: 9/19/01
- Pitless adapter and water supply line at least 36" below grade
- Two piece cap installed and attached to casing securely
- Elec. conduit extends at least 18" below grade/attached to cap properly
- Safety rope installed inside of well casing
- Correct well tag attached properly and casing 3" above finished grade
- Water supply line sleeved adequately at house connection
- Adequate grout observed below pitless adapter

0 Sq.Ft.*
1.876



10,670 Sq.Ft.*

chB2

~~9-7-99~~
Well site stated
by [unclear]
signed Perc.
Cert

LOT 8
49,135 Sq.Ft.*

LOT 7/10
59,655 Sq.Ft.*

LOT 6
54,456 Sq.Ft.*

LOT 4
41,680 Sq.Ft.*

LOT 3
40,805 Sq.Ft.*

LOT 2
41,586 Sq.Ft.*

LOT 1
50,000 Sq.Ft.*

RESERVATION
PARCEL 'B'
10,922 Sq.Ft.*

10,697 Sq.Ft.*

LOT 5
55,554 Sq.Ft.*

LOT 29
40,009 Sq.Ft.*

LOT 30
40,197 Sq.Ft.*

LOT 31
41,014 Sq.Ft.*

LOT 32
55,379 Sq.Ft.*

PRE

C 1 1346
SEQUENCE NO. (OWNERS USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLUMN 4 ON ALL CARDS!

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
FILL IN THIS FORM COMPLETELY
A13079

DATE RECEIVED (OWNERS USE ONLY) 3-10-71
DATE WELL COMPLETED 3-10-71
DEPTH OF WELL 130 (TO NEAREST FOOT)
PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-71-0105
DRILLERS IDENTIFICATION NO. 122

OWNER Beck, Ernest
STREET OR RFD 643 Plymouth rd
CITY STATE POST OFFICE Baltimore

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CROSS HATCH BEARING
	FROM	TO	
Overburden	0	6	
Brown clay	6	30	
W...	30	30	X

WELL DESCRIPTION
GROUTING RECORD
WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO
TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT MONTONITE CLAY
NO. OF BAGS 4 NO. OF POUNDS 400
GALLONS OF WATER 24
DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 TO 32

CASING RECORD
CASING TYPE (CIRCLE APPROPRIATE CODE BELOW) ST STEEL CO CONCRETE PL PLASTIC OT OTHER
MAIN CASING TYPE S T
NOMINAL DIAMETER TOP MAIN CASING (NEAREST INCH) 6
TOTAL DEPTH OF MAIN CASING (NEAREST FEET) 32

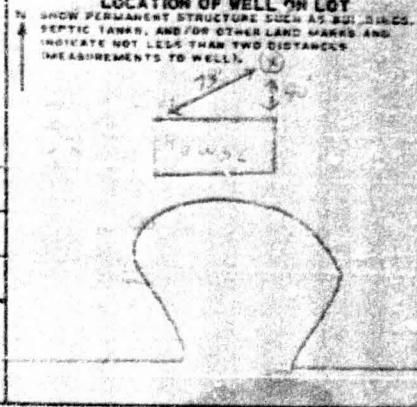
OTHER CASING (IF USED)
DIAMETER (INCH) FROM TO

SCREEN RECORD
SCREEN TYPE (CIRCLE APPROPRIATE CODE BELOW) ST WIRE BR BRASS OR COPPER PL PLASTIC HO OPEN HOLE OT OTHER

SCREEN DEPTH (NEAREST WHOLE FOOT)
FROM 32 TO 130
EACH SCREEN FROM TO

PUMPING TEST
HOURS PUMPED (TO NEAREST HOUR) 1
PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 15
METHOD USED TO MEASURE PUMPING RATE air
WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 38 NEAREST FOOT
WHEN PUMPING 140 NEAREST FOOT
TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) AIR PISTON TURBINE CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW) J JET S SUBMERSIBLE

PUMP INSTALLED
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE) A, C, J, P, R, S, T, O
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 38
PUMP HORSE POWER 27 41
PUMP COLUMN LENGTH (NEAREST FOOT) 43 47
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) ABOVE BELOW LAND SURFACE 1 NEAREST FOOT



CIRCLE APPROPRIATE BOXES
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
C COPY OF ELECTRIC LOG ATTACHED
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE CAPTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.
DRILLERS NAME
SIGNATURE

DIAMETER OF SCREEN (NEAREST INCH) FROM TO
GRAVEL PACK
IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX) F
OWNERS USE ONLY (DO NOT BE FILLED IN BY DRILLER)
SELECTED CASING LOG INDICATOR