

SEQUENCE NO. (DENV USE ONLY)
1 2 3 4 5 6
3521
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MICHIGAN
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

45 DAYS AFTER WELL IS COMPLETED.
COUNTY NUMBER **A 48721**

ST/CO USE ONLY
DATE RECEIVED
060895

DATE WELL COMPLETED
032095

Depth of Well
22 **125** 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-94-0327

OWNER **Dickey** last name **Jean** first name
STREET OR RFD **Day Rd** TOWN **Sykesville**
SUBDIVISION **DICKEY FARMS** SECTION _____ LOT **17**

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	
Overburden	0	35	
Gray Rock	35	125	x

water was encountered at 90'

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
TYPE OF GROUTING MATERIAL
CEMENT **CM** BENTONITE CLAY **BC**
NO. OF BAGS **10** NO. OF POUNDS **1000**
GALLONS OF WATER **600**
DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **40** ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
ST **CO**
STEEL CONCRETE
PL **OT**
PLASTIC OTHER
MAIN CASING TYPE
Nominal diameter top (main casing) (nearest inch) **4**
Total depth of main casing (nearest foot) **40**

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

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

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED **Y** **N**

C 2

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	

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

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

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

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 IDENT. NO. **399**
Pat W. [Signature]
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Allen Compton
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) **WQ**
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) **3**
PUMPING RATE (gal. per min. to nearest gal.) **10**
METHOD USED TO MEASURE PUMPING RATE **Submersible**
WATER LEVEL (distance from land surface)
BEFORE PUMPING **24**
WHEN PUMPING **125**
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 WILL INSTALL PUMP YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____
PUMP HORSE POWER _____
PUMP COLUMN LENGTH (nearest ft.) _____
CASING HEIGHT (circle appropriate box and enter casing height)
+ above } LAND SURFACE
- below } **1** (nearest foot)

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)
Map to be supplied by Developer

B 1 **6349** SEQUENCE NO. (DP USE ONLY)

1 2 3 4 5 6
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-94-0327
fill in this form completely

Date Received (APA) **082294** *Grow 8:00am*

B 3 OWNER INFORMATION

8 COUNTY **Howard** 21
23 SUBDIVISION **Dickey Farms** 42
SECTION **117/18** 44 46 48 50
52 NEAREST TOWN **Sykesville** 71
MILES FROM TOWN (enter 0 if in town) **2 MI** 73 76 77 78

B 2 DRILLER INFORMATION

MSD/MGD/MWD **399** 77 License No. 80
Driller's Name **Paul M. Fabiszak**
Firm Name **G. Edgar Harr Sons' Corp.**
Address **12047 Falls Rd cockeysville 21030**
Signature *Paul M. Fabiszak* Date **8/16/94**

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5** 1 2 3 4 5 6 7 8 9 10 11 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **750** 13 14 15 16 17 18 19 20

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD **Day Road** 11 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH NORTH
WEST WEST
EAST EAST
SOUTH SOUTH
DISTANCE FROM ROAD **30** 34 37
ENTER FT OR MI **FT** 38 39
TAX MAP: **9** BLK: **3** PARCEL **271**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME COUNTY NO. **A 48721**
STATE SIGNATURE _____ INSERT S 41
DATE ISSUED **020895** Mark E. Piffin 2/8/96
43 48 CO SIGNATURE EXP DATE
NORTH GRID **549000** 50 55 EAST GRID **0808000** 57 63

APPROXIMATE DEPTH OF WELL **200** 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 _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1.
- 2.
- 3.

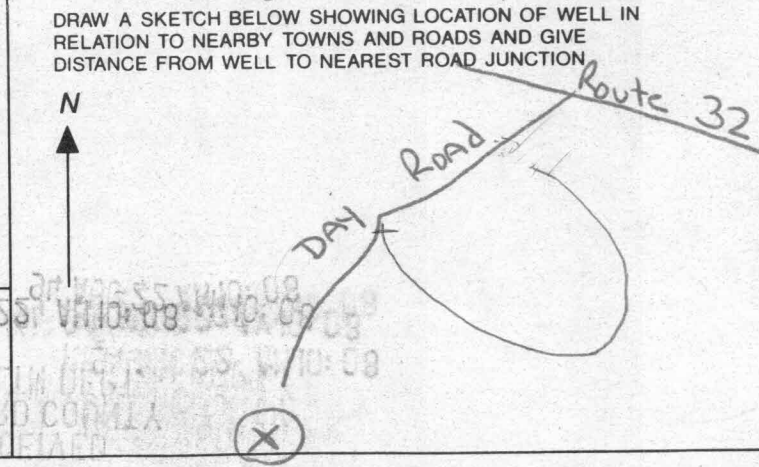
WRITE THE BOX NUMBER FROM THE MAP HERE

E **8008**
N **5409**

Grow 9:00 3/16/95
GROUT DRY DONE MR 3/6/95 Page 4 TAG OK K-10

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 DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER _____ 54 GAP _____ 63
FORCE **MR** WRITE INITIALS IN BOX PERMIT No. **40-94-0327** 70 71 72 73 74 75 76 77 78 79

**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: Robert A. Thurman Telephone #: (410) 531-1724
Address: 1289 Folly Quarter Rd. Cell- (301) 343-5388
Ellicott City MD 21042

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:

Name (Print): Robert A. Thurman License# 17380

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

Name of Property Owner: Henry & Jill Bender Telephone #: (410) 531-1773
Subdivision: Dickey's Farm Lot #: 17 Well Tag #: HO-94-0327
Site Address: 995 Obv Rd.
Sykesville, MD

Submersible Pump Data
Make: JACUZZI
Model #: _____
Pump Capacity 10 GPM
Well Yield: 10 GPM

Pitless Adapter
Make: _____
Model#: PT800
Depth: 140" (36" min)
NSF/WSC approved: Yes

Well Cap and Electric Conduit
Two piece watertight cap: Yes
Screened, vented well cap: Yes
Cap secured to casing: _____
Conduit min 18" B.G.: 20"
Conduit secured to well cap: Yes

Depth of well encountered at time of pump installation: _____ (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing Yes

Low water cut off will be installed

Piping to house

Type: 1"
PSI: ✓ (160 psi min)
Depth of supply line: 40" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: Yes
Approximate length of sleeve: 5'
Sleeve caulked and sealed properly: Yes

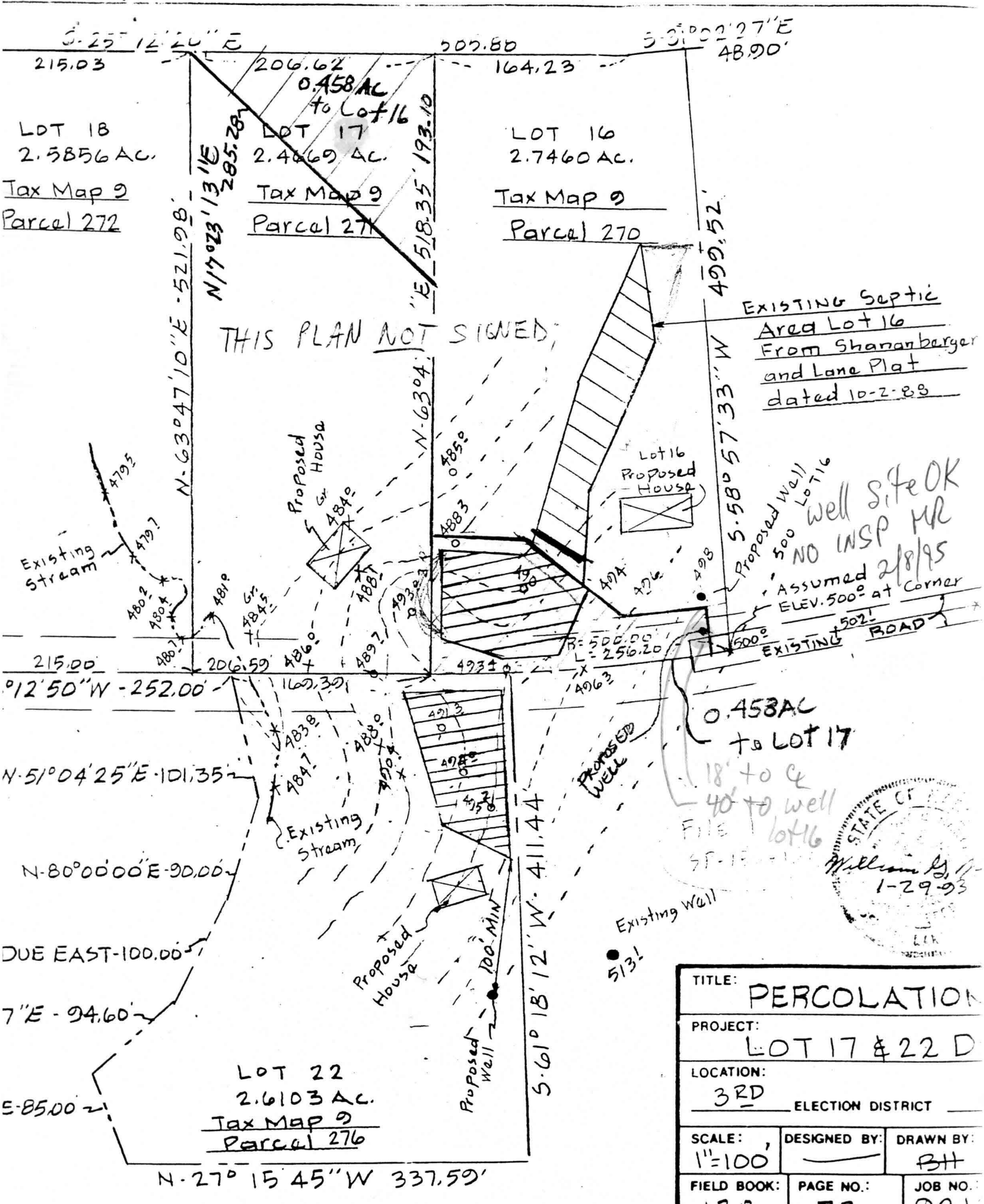
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Robert Thurman
Signature of company representative responsible for installation

May 10, 2001
date

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

Date Insp. Requested: 5/10/01 Date Insp. Approved: 5/10/01 Inspector: SRK
Inspection Data: Pitless adapter watertight & 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 not seen outside of well cap/casing ✓
Correct well tag attached properly and casing 8" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓



THIS PLAN NOT SIGNED

EXISTING Septic Area Lot 16 From Shananberger and Lane Plat dated 10-2-88

Proposed Well 500 Lot 16
 NO WSP MR
 ASSUMED 2/8/95
 ELEV. 500' at Corner

0.458 AC to LOT 17
 18' to &
 40' to well
 File lot 16



TITLE: PERCOLATION		
PROJECT: LOT 17 & 22 D		
LOCATION: 3RD ELECTION DISTRICT		
SCALE: 1"=100'	DESIGNED BY: [Signature]	DRAWN BY: BHT
FIELD BOOK: 122	PAGE NO.: 77	JOB NO.: 001



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 8, 1995

MEMORANDUM

TO: Russ Marshall

FROM: Mark Rifkin *MR*
Water & Sewerage Program
Bureau of Environmental Health

RE: Well Construction Permits HO-94-0326, -0327, -0328
Dickey Farms Lots 16, 17, 22
Day Road

This is to confirm that the above referenced well construction permits were issued subject to the following caution:

an approvable percolation certification plan has not yet been submitted for lots 16, 17, and 22. These wells will be considered test wells until the percolation certification plan has been signed by the health officer.

These conditions were discussed with you in this office on this date, February 8, 1995.

This office's approval of the well construction permits was based on your acceptance of this condition.

mr

LOT 17
DICKBY FARM
DAVID ZILKE



DEPARTMENT OF PUBLIC WORKS

James M. Irvin, Director

August 11, 2000

Mr. Henry C. Bender, Jr.
5095 Greenbridge Road
Dayton, Maryland 21036

Re: Ownership of Day Road

Dear Mr. Bender:

In response to your concern relative to the future extension of Day Road from the existing cul-de-sac to Day Road, the following information is provided:

1. Prior to 1991 the portion of Day Road from its intersection with Day Road around **the horseshoe to its intersection with Day Road was a private road.**
2. In 1991, the residents of Day Road petitioned Howard County to accept in fee simple title to Day Road from existing Day Road to the cul-de-sac. The County constructed this part of the roadway and it became a public road.
3. The portion of the road from the cul-de-sac to its intersection with Day Road is private. The only way that this portion of roadway would ever become public is for the residents who live adjacent to it to formally petition the County under the private road petition process. Under this process, the County would review the petition to determine if it would be feasible to extend the public road. If it was determined to be feasible, we would have to go through a public hearing process, the residents adjacent to this portion of the road would have to deed the land to the County and then the County would construct the road.

Based on all of the information known about this road, I do not believe that this portion of Day Road will ever be extended.

If you have any questions, please contact me at 410 313-3260.

Very truly yours,

Tina D. Hackett, Chief
Real Estate Services Division

tdh\f:\wpdocs\general\bender