

C1 05169

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A35683

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED 3/19/98

MM 3 DD 98

22 285 26 (TO NEAREST FOOT)

HO-94-1449

OWNER GVC Group STREET OR RFD Gaither Farm Road TOWN Clarksville SUBDIVISION Gaither Farms SECTION LOT 24

WELL LOG

Not required for driven wells

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes entries for Sand and Gray mica Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [Y] NO [N]

TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC]

NO. OF BAGS 15 NO. OF POUNDS 1410

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 37 ft. (enter 0 if from surface)

CASING RECORD

Case types insert appropriate code below: ST STEEL, CO CONCRETE, PL PLASTIC, OT OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch): 6 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: ST STEEL, BR BRASS, HO OPEN HOLE, PL PLASTIC, OT OTHER

DEPTH (nearest ft.)

Table with columns: E, A, C, H, S, C, R, E, N and rows for casing depth and slot size.

DIAMETER OF SCREEN (NEAREST INCH) from 56 to 60

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST 3

HOURS PUMPED (nearest hour) 8.5

PUMPING RATE (gal. per min.) 8.5

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 36 ft.

WHEN PUMPING 73 ft.

TYPE OF PUMP USED (for test)

Pump selection options: A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE): 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

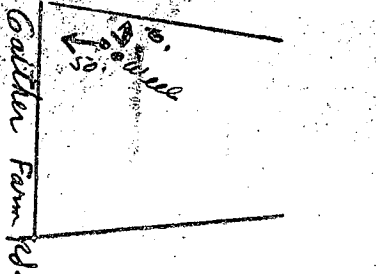
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

Casing height options: + above, - below. LAND SURFACE 3 (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)



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES [Y] NO [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 S D 0 2 1, DRILLERS SIGNATURE Joseph Mayne

LIC. NO. 1 M S D 0 2 1, SIGNATURE Robert Mayne

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

<b>B 1</b>	<b>9451</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>HO-94-1449</b> <small>fill in this form completely</small>
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**OWNER INFORMATION**

Date Received (APA) **3-3-98**

**CVC Group**  
Last Name: **CVC** Owner: **Group** First Name: **Group**

**P.O. Box 1765**  
Street or RFD: **Westminster Md. 21158**

Town: **Westminster** State: **Md.** Zip: **21158**

**LOCATION OF WELL**

**Howard**  
COUNTY: **Howard**

**Caithen Farm**  
SUBDIVISION: **Caithen Farm**

SECTION: **44** LOT: **24**

**Clarksville**  
NEAREST TOWN: **Clarksville**

MILES FROM TOWN (enter 0 if in town) **4** M I

**DRILLER INFORMATION**

**Joseph L. Mayne MS 0024**  
Driller's Name: **Joseph L. Mayne** License No.: **MS 0024**

**Joseph L. Mayne Well Drilling**  
Firm Name: **Joseph L. Mayne Well Drilling**

**5512 Ridge Rd. Mt. Airy 21771**  
Address: **5512 Ridge Rd. Mt. Airy 21771**

**Joseph L. Mayne 2/9/98**  
Signature: **Joseph L. Mayne** Date: **2/9/98**

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

**Caithen Farm Rd.**  
NEAR WHAT ROAD: **Caithen Farm Rd.**

**ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)**

**40**  
DISTANCE FROM ROAD: **40** ENTER FT OR MI

**29** **10** **1**  
TAX MAP: **29** BLK: **10** PARCEL: **1**

**WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

**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 APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

**Howard** **A35683**  
COUNTY NAME: **Howard** COUNTY NO.: **A35683**

STATE SIGNATURE: \_\_\_\_\_ INSERT S →

DATE ISSUED: **3-3-98** **Kimberly Priest** **3-3-99**

43 MM DD YY 48 50 SIGNATURE 57 EXP. DATE 63

NORTH GRID: **511** 000 EAST GRID: **829** 000

APPROXIMATE DEPTH OF WELL **260** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X → **3/6/98 sheet**

SOURCES OF DRILLING WATER

1. **Well** location of

2. **location of**

3. **3/6/98 Arrived at site @ 10:40 no exe at site**

WRITE THE BOX NUMBER FROM THE MAP HERE

E **829**

N **511**

**METHOD OF DRILLING (circle one)**

BORED-(or-Auger)            JETTED            Jetted & DRIVEN           

AIR-ROTary            AIR-PERcussion            ROTARY (Hydraulic Rotary)           

CABLE            REVerse-ROTary            Drive-POINT           

other           

**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**

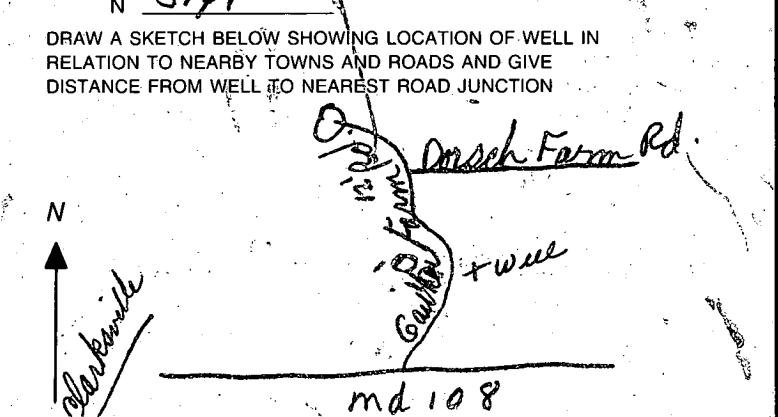
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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 \_\_\_\_\_



**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**

APPROX. PERMIT NUMBER **Km** WRITE INITIALS IN BOX **HO-94-1449**

FORCE **67** **68** PERMIT No. **HO-94-1449**



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: Fogles Well Drilling Telephone #: 410-795-5670  
Address: 588 Obercht Rd  
Stylesville, Md 21154

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

Name (Print): Allen Compton License# MSD 009

\*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: GUC Telephone #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO-94-1449  
Site Address: Hold Gauthier farm Rd

Submersible Pump Data

Make: Goulds  
Model #: 75B07422  
Pump Capacity: 7 GPM  
Well Yield: 7 GPM

Pitless Adapter

Make: Cornbell  
Model#: N/A  
Depth: 36 (36" min)  
NSF approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: YES  
Screened, vented well cap: YES  
Cap secured to casing: YES  
Conduit min 18" B.G.: YES  
Conduit secured to well cap: YES

Depth of well encountered at time of pump installation: 285 (feet)  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
Torque arrestors or Cable guards are required - Must circle one  
Safety rope, if used, attached to inside of well casing with eye bolt N/A

Piping to house

Type: 1" Black Plastic  
PSI: 160 (160 psi min)  
Depth of supply line: 42 (36" min)

House Connection

PVC sleeved 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.

Signature of company representative responsible for installation: Allen Compton date: 12-5-03

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 10/20/03 (50)  
Inspection Data: 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 8" above finished grade   
Water supply line sleeved adequately at house connection   
Adequate grout observed below pitless adapter

1250

Lot 24  
Caithen Farm

PROX. LOCATION OF  
VIOLENTLY DRILLED  
WELL (NO YIELD)

AREA ALLOWED  
FOR PROP WELL

3/2/98  
K. Eng  
Main from 100 ft well site  
as per  
K.M.

