

C1 14319 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 13 P5174408

DATE RECEIVED DATE RECEIVED DATE RECEIVED

DATE WELL COMPLETED 11/9/03 DEPTH OF WELL 600

PERMIT NO. FROM "PERMIT TO DRILL WELL" 1-29-03 OK H0-94-3585

OWNER B. Riley STREET OR RFD 13477 Brighton Dam Road TOWN Highland SUBDIVISION HAVILAND HILLS SECTION LOT 31

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, FEET (FROM, TO), check if water bearing. Rows include Fill, red rocky clay, Tannish/Orange Shale, Brown shale, Gray slate, Gray Mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL (C) BENTONITE CLAY (BC) NO. OF BAGS 30 NO. OF POUNDS 3000

CASING RECORD

MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 80

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

SCREEN RECORD

screen type or open hole (ST) (BR) (HO) (PL) (OT)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) NO (N)

- 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...

DRILLERS LIC. NO. 1 M D 040 DRILLERS SIGNATURE George F. Kautenbury

LIC. NO. 1 D 227

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

DEPTH (nearest ft.)

Table with columns: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100. Values: 78, 600

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

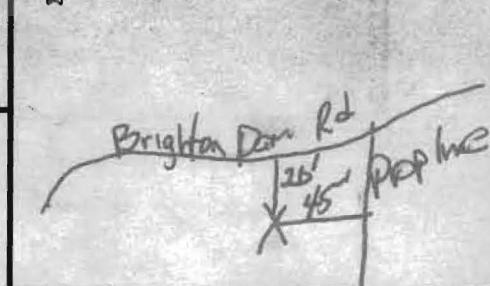
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 6 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 72 ft. WHEN PUMPING 137 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES) NO (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) LAND SURFACE 2 (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)



B 1 1450 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 518003 please type

STATE PERMIT NUMBER HO-94-3585 fill in this form completely

DATE RECEIVED (APA) 11-24-02 OWNER INFORMATION BILLEY BRIAN 13979 BRIGHTON DAM RD CLARKSVILLE, MD 21029

LOCATION OF WELL Howard Haviland Hills 23 SUBDIVISION Highland 52 NEAREST TOWN

DRILLER INFORMATION George F. Easterday M W D 040 L. Franklin Easterday, Inc. 9265 Brown Church Rd., MT. Airy, Md. 21771

13979 Brighton Dam Rd NEAR WHAT ROAD ON WHICH SIDE OF ROAD 34 37 DISTANCE FROM ROAD 31 13 TAX MAP: 31 BLK: 13 PARCEL 221

WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 500 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HO P517440-B COUNTY NAME STATE SIGNATURE DATE ISSUED 11-21-03

USE FOR WATER (CIRCLE APPROPRIATE BOX) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST TOWN

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER wells WRITE THE BOX NUMBER FROM THE MAP HERE

METHOD OF DRILLING (circle one) BORED (or Augered) AIR-ROTary

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

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 PERMIT No. HO-94-3585

SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

A517440-D

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION  
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

\*\*\*\*\*  
WATER WELL ABANDONMENT-SEALING REPORT FORM  
\*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK  
KPD  
5-28-03

DATE WELL ABANDONED: 4/21/03 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

\* PERMIT NUMBER OF REPLACEMENT WELL \_\_\_\_\_

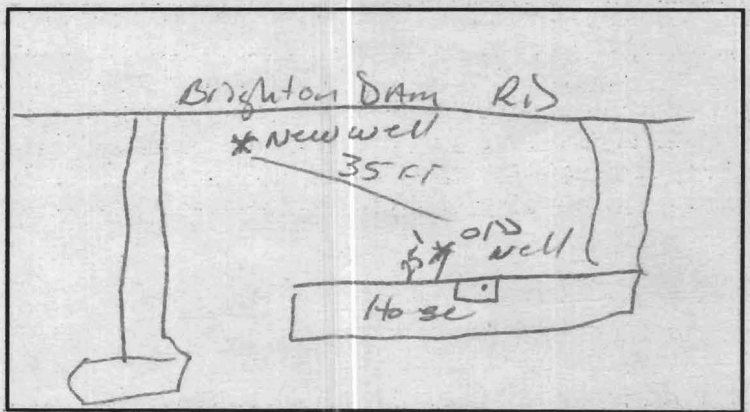
70 - 94 - 3585

\* PERSON ABANDONING WELL: Richard A. Cummitt WELL DRILLERS LICENSE NUMBER: WR0 014  
CIRCLE: MWD/MSD/MGD

\* OWNER'S NAME: BRIAN BILLEY

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: HOWARD  
 NEAREST TOWN: RIGHLAND  
 TAX MAP \_\_\_\_\_ BLOCK \_\_\_\_\_ PARCEL \_\_\_\_\_  
 SUBDIVISION: \_\_\_\_\_  
 SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_  
 NEAREST ROAD: 13979 Brighton DAM Rd



\* TYPE OF WELL BEING ABANDONED:  
 DRILLED      \_\_\_\_\_ JETTED  
 \_\_\_\_\_ BORED/AUGERED      \_\_\_\_\_ HAND DUG  
 \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

LOG OF SEALING MATERIAL

\* USE CODE:  
 DOMESTIC      \_\_\_\_\_ MUNICIPAL/PUBLIC  
 \_\_\_\_\_ IRRIGATION      \_\_\_\_\_ INDUSTRIAL  
 \_\_\_\_\_ TEST/OBSERVATION      \_\_\_\_\_ GEOTHERMAL

MATERIAL	FEET	
	FROM	TO
<input checked="" type="checkbox"/> Bentonite well pit	134	5
	5	0
VOLUME OF MATERIAL USED		
9 BAGS Bentonite		

\* TYPE OF CASING:  
 STEEL      \_\_\_\_\_ PLASTIC  
 \_\_\_\_\_ CONCRETE 410      \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 6 INCHES IN DIAMETER

\* DEPTH OF WELL: 134 FEET DEEP

\* WAS ANY CASING REMOVED? YES \_\_\_\_\_ NO   
if yes, length removed, in feet: \_\_\_\_\_

\* WAS CASING RIPPED OR PERFORATED? YES \_\_\_\_\_ NO

George F. Eustentun      040      MWD/MSD/MGD      5.16.03  
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN      LICENSE #      CIRCLE ONE      DATE  
 DENV 828      JULY 1997      2) COUNTY ENVIRONMENTAL AGENCY

2/11/03  
3:10 PM

~~\* Please Sign~~  
~~to State Authority~~

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.

OWNER  
Company Name: Brian S. Billey Telephone #: 301-370-9674  
Address: 13979 Brighton Dam Rd  
CLARKSVILLE, MD 21029-1330

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer OWNER

License # and name of individual responsible for the field installation:

Name (Print): NA License# NA

\*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: Brian S. Billey Telephone #: 301-370-9674  
Subdivision: HAOLAND HILLS (PLAT TWO) Lot #: 31 Well Tag #: HO-94-3585  
Site Address: 13979 Brighton Dam Rd  
CLARKSVILLE, MD 21029-1330

Submersible Pump Data

Make: JACUZZI  
Model #: JES-4521XV-52  
Pump Capacity 5 GPM  
Well Yield: 7.5 GPM

Pitless Adapter

Make: Campbell  
Model #: B-300X  
Depth: 42" (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 1 1/2" B.C.: 1 1/2"  
Conduit secured to well cap: YES

Depth of well encountered at time of pump installation: 600 (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 YES

Piping to house

Type: PVC  
PSI: ✓ (160 psi min) 42"  
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.

X [Signature] X 2-6-03  
Signature of company representative responsible for installation date

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

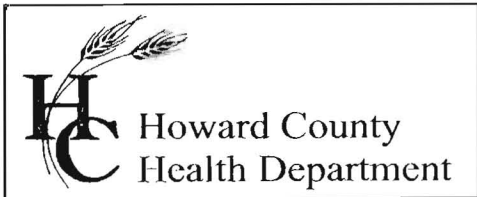
Date Insp. Requested: 2/11/03 Date Insp. Approved: 2/11/03

- 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 ✓

BB/FA

✓ Sleeved to House

Old well not sealed on  
2/11/03 Reminded Mr. Billey to  
have old pit well sealed or possibly  
use for irrigation. BB Fee?



P517440-D

3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

**INDEXED** 05-366364

December 20, 2002

Brian Billey  
13979 Brighton Dam Road  
Clarksville, MD 21029

RE: **Replacement Well Issues**  
13979 Brighton Dam Road  
Well Permit # HO-94-3585

Dear Mr. Billey:

Our office is requesting that you contact the Community Environmental Health Program at (410) 313-1773 to schedule a well line inspection and water sampling for the referenced replacement well once it is hooked up to your home(s) (required by the Maryland Well Construction Regulation COMAR 26.04.04). There is currently no charge for the well line inspection and water sampling.

It is preferred that the sample be collected by a certified health official from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

**Failure to confirm the potability of this well water supply by completion of documentation or water sampling requirements could result in the issuance of an order to abandon and seal the replacement well in accordance with COMAR 26.04.04.**

We have also noted in your file that a well line inspection was not called in our office by the plumber for an inspection of the pitless adaptor as well as other items on the form (please see inclosed form). The well permit application also states that you want to abandon and seal the existing well. For your records, we have not received an abandonment report from Mr. Easterday. It is important to abandon a non-usable well if it is not maintained to prevent bacteria from entering the aquifer used for potability. If you have any questions, or would like to discuss these matters further please call me at (410) 313-1771. Thank you for your attention to these important matters.

Respectfully,  
*Kacie Noonan*  
Kacie Noonan, Sanitarian  
Well and Septic Program

cc: Community Environmental Health Program  
File ✓

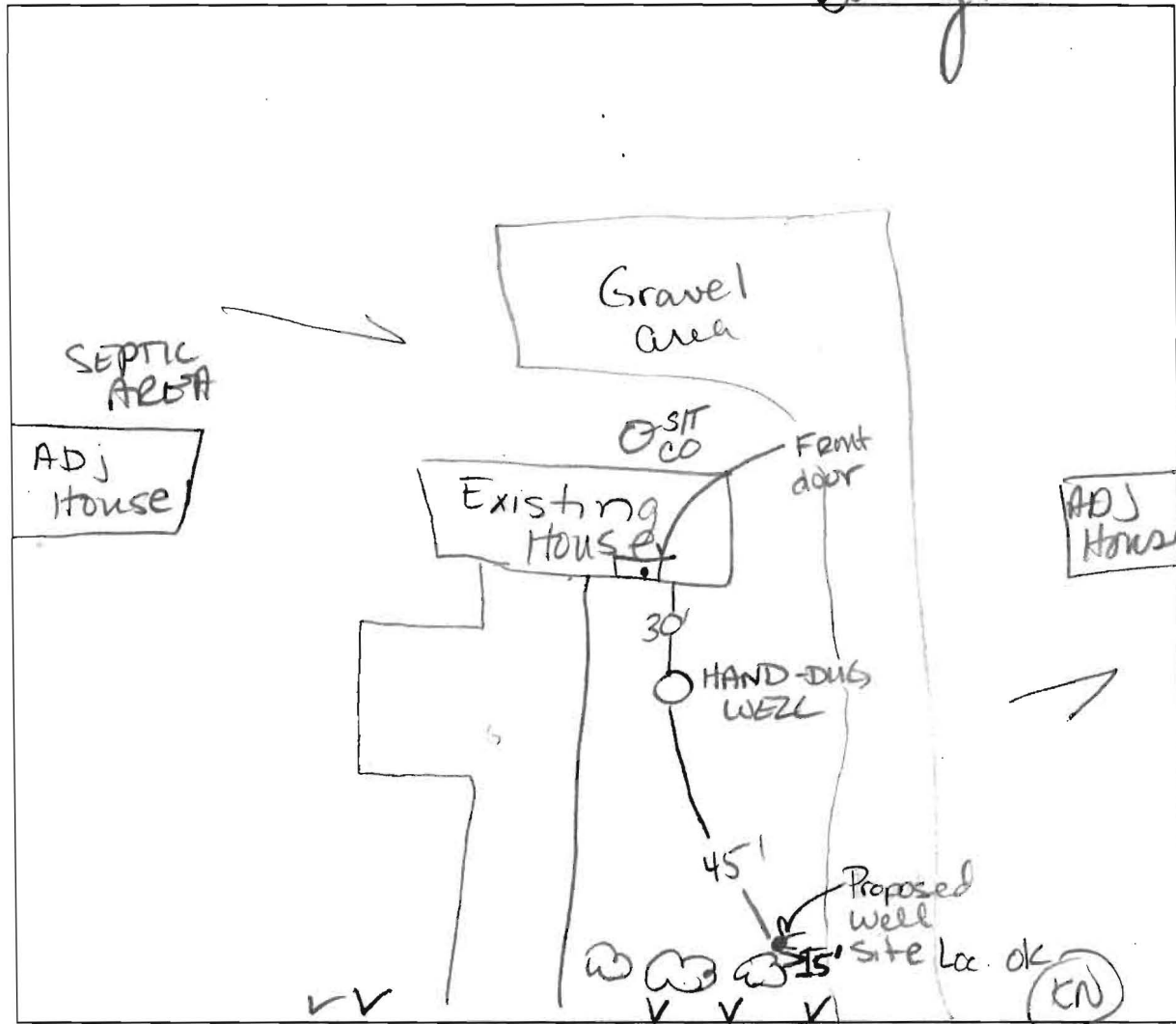
P517440-D

SITE INSPECTION SHEET

OWNER: Brian Billey PHONE #: \_\_\_\_\_  
ADDRESS: 13979 Brighton Dam CONTRACTOR: Easterday  
21029 WELL TAG # HO 94 - 3585 NEW  
SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY #: HO.  
PROPOSAL: 1/4 gpm per min.

LOCATION DIAGRAM

*low yield*



COMMENTS:

11-21-02 - Well site ok'd - told owner (KN)

DATE:

11-21-02

INSPECTOR:

KN / FA