

C1 3277  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)

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

PERMIT NO. FROM "PERMIT TO DRILL WELL"  
 COUNTY NUMBER A 29011

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED 06 08 82 Depth of Well 265 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-8-82-057

OWNER RUSCHER last name CHAMBLIS DR first name TOWN CLARKSVILLE  
 SUBDIVISION BROADWATER EST. SECTION LOT 2

**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	34	
Sandstone	34	50	<input checked="" type="checkbox"/>
Micka	50	75	
Sand Stone	75	80	<input checked="" type="checkbox"/>
Micka	80	265	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  Y  N  
 TYPE OF GROUTING MATERIAL  
 CEMENT  CM BENTONITE CLAY  BC  
 NO. OF BAGS 8 NO. OF POUNDS 800  
 GALLONS OF WATER 48  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 30 ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
 ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER

**MAIN CASING**  
 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)  
 PL 5 45  
 60 61 63 64 66 70

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

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

**SCREEN**  
 DEPTH (nearest ft.)  
 1 40 43 265  
 8 9 11 15 17 21  
 2 [ ] [ ] [ ] [ ] [ ] [ ]  
 23 24 26 30 32 36  
 3 [ ] [ ] [ ] [ ] [ ] [ ]  
 38 39 41 45 47 51  
 SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
 DIAMETER OF SCREEN [ ] [ ] [ ] [ ] (NEAREST INCH)  
 56 60

CIRCLE APPROPRIATE LETTER  
 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 10.17.13 "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. 223  
Kath E. Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
Kath E. Mayne

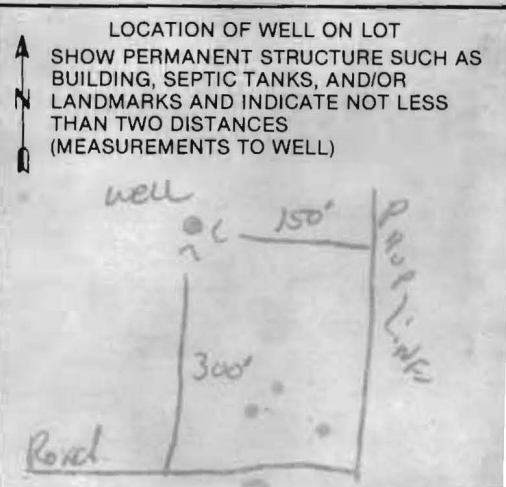
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK from \_\_\_\_\_ to \_\_\_\_\_  
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP 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) 6  
 PUMPING RATE (gal. per min. to nearest gal.) 3  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 35  
 WHEN PUMPING 265  
 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:  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 (nearest foot)  
 - below } 2 (nearest foot)  
 49 50 51



B 1 3069

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-0574

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

Date Received 4/8/84 - 1:30 P.M.

OWNER INFORMATION

Owner: SPARK, DAVID L. First Name: DAVID L. Street or RFD: 123 BELTOW RD. Town: SILVER SPRING, MD. State: 20901

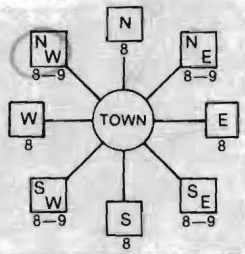
LOCATION OF WELL

8 COUNTY: HOWARD. 23 SUBDIVISION: BROADWATER EST. SECTION: 44-46. LOT: 48-50. 52 NEAREST TOWN: CLARKSVILLE. MILES FROM TOWN: 73-78 (MI)

DRILLER INFORMATION

Driller's Name: Ralph Mayne. 77 License No. 80: 273. Firm Name: Ralph Mayne (Well Drilling). Address: 9120 Brown Church Rd. Mt. Airy. Signature: Ralph Mayne. Date: 5/22/84

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



CHAMBLIS DR. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD: 300 FT. ENTER FT or MI: FT

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5. AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME. A 29011 COUNTY NO. OEP SIGNATURE: Frank Johnson. DATE ISSUED: 06/01/84. CO SIGNATURE: Frank Johnson. EXP. DATE: 12/1/84. NORTH GRID: 504000. EAST GRID: 0811000

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6 INCH

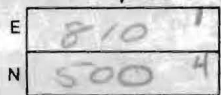
METHOD OF DRILLING (circle one)

Bored (or Augered) JETTED Jetted & DRIVEN. AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary). CABLE REVERSE-ROTary Drive-POINT. other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X. SOURCES OF DRILLING WATER: 1. well, 2., 3.

Location OK. 45' - casing, 35' - open, 8' - bag cement. 6/8/84

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 (OEP USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: FS. PERMIT NO.: 110-81-0574

SPECIAL CONDITIONS



FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0574  
 Location of property (road) Chamblis Dr.  
 Subdivision Broadwater Est. Lot 2 Block — Plat — Sec. —  
 Well Driller Ralph Mayne Owner David Busher

Depth of well 265 ft  
 Distance of measuring point (M.P.) above ground 2 ft  
 Static water level (S.W.L.) below M.P. 35 ft

I. High rate pumping -- reservoir drawdown

Time pump started 6:15 Pumping rate 9 G.P.M.  
 Total time 15 MIN to reach pumping water level 90 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
6:30	90 ft	20 sec	—	36 P.M.
6:45	90 ft	20 sec	—	36 P.M.
7:00	90 ft	20 sec	—	36 P.M.
7:15	90 ft	20 sec	—	36 P.M.
7:30	90 ft	20 sec	—	36 P.M.
7:45	90 ft	20 sec	—	36 P.M.
8:00	90 ft	20 sec	—	36 P.M.
8:15	90 ft	20 sec	—	36 P.M.
8:30	90 ft	20 sec	—	36 P.M.
8:45	90 ft	20 sec	—	36 P.M.
9:00	90 ft	20 sec	—	36 P.M.
9:15	90 ft	20 sec	—	36 P.M.
9:30	90 ft	20 sec	—	36 P.M.
9:45	90 ft	20 sec	—	36 P.M.
10:00	90 ft	20 sec	—	36 P.M.
10:15	90 ft	20 sec	—	36 P.M.
10:30	90 ft	20 sec	—	36 P.M.
10:45	90 ft	20 sec	—	36 P.M.
11:00	90 ft	20 sec	—	36 P.M.
11:15	90 ft	20 sec	—	36 P.M.
11:30	90 ft	20 sec	—	36 P.M.
11:45	90 ft	20 sec	—	36 P.M.
12:00	90 ft	20 sec	—	36 P.M.
12:15	90 ft	20 sec	—	36 P.M.
12:30	90 ft	20 sec	—	36 P.M.

860 ft

September 27, 1985

Mr. & Mrs. David Buscher  
5673 Chamblis Drive  
Clarksville, Maryland 21029

Dear Mr. & Mrs. Buscher:

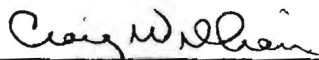
The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 10.17.13 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-0574. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 10.17.13.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. The well owner accepts his responsibilities under COMAR 10.17.13.10.

September 3, 1985  
Date

  
\_\_\_\_\_  
Approving Authority  
Craig Williams, Director  
Water and Sewerage Program

CW/JS:JR

Well Approved: 6/08/84  
Septic Approved: 8/05/85

Water Sample Date: 9/03/85

January 16, 1986

Mr. David Buscher  
5673 Chamblis Dirve  
Clarksville, Maryland 21029

Dear Mr. & Mrs. Buscher:

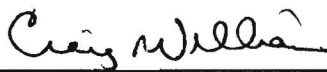
The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 10.17.13 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-0574.

December 5, 1985  
Date of Final Sampling

December 11, 1985  
Date of Acceptance

  
Craig Williams, Director  
Water and Sewerage Program

CW/JS:JR

Date Well Approved: 6/08/84  
Date Septic Approved: 8/05/85

Water Sample Dates: 9/03/85  
12/05/85

W E L L P U M P I N S P E C T I O N

Owner's Name: Paul & Loretta Buscher

Address:

Location of Property: Lot #2  
5673 Chamblis Drive  
Dayton, Maryland 21036

Well Tag Number:

Plumber or Certified Pump Installer: Kastner Plumbing & Heating, Inc.  
13556 Argo Drive  
Dayton, Maryland 21036

Phone Number: 725-5000

License Number: 1862

Receipt Number:

Date:

Comments: OK TO PROCEED w/INSTALLATION 4/1/85 Craig Miller

Inspection:

Date Well Pump Inspection was approved:

Inspector: