

SEQUENCE NO. 3514
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 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

DATE RECEIVED (OWNER USE ONLY)
101371

DATE WELL COMPLETED June 28-71
DEPTH OF WELL 120
(TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELLS"
40-171-01/SIC
DRILLERS IDENTIFICATION NO. 48

OWNER: Okky Hereth
STREET OR RFD: [blank]
POST OFFICE: Finksburg Md

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Septail	0	3	
Sandy	3	10	
Low Red	10	80	
Granite	80	120	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX): YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
CEMENT BENTONITE CLAY

NO. OF BAGS: 6 NO. OF POUNDS: 600

GALLONS OF WATER: 35

DEPTH OF GROUT SEAL (TO NEAREST FOOT):
FROM 0 FT. TO 19 FT.

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR): 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON): 6

METHOD USED TO MEASURE PUMPING RATE: [handwritten]

WATER LEVEL (DISTANCE FROM LAND SURFACE):
BEFORE PUMPING: 28 (NEAREST FOOT)
WHEN PUMPING: 120 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX):
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

CASING RECORD

MAIN CASING TYPE: ST (STEEL) 6 INCH DIAMETER, 20 FEET DEPTH

OTHER CASING (IF USED): [blank]

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: ST (STEEL) 40 INCH DIAMETER, 20 FEET DEPTH

SCREEN TYPE: ST (STEEL) 40 INCH DIAMETER, 20 FEET DEPTH

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX): YES NO

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON): [blank]

PUMP HORSE POWER: [blank]

PUMP COLUMN LENGTH (NEAREST FOOT): [blank]

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT):
 ABOVE LAND SURFACE
 BELOW LAND SURFACE

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, DEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL):

2/3/05
Replacement Tag
Mailed to Allan
Homes. (BB)

With Instructions
for Well Driller to Install

CIRCLE APPROPRIATE BOXES

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: [handwritten signature]

(PLEASE PRINT) [handwritten name]

SIGNATURE: [handwritten signature]

DEPTH (NEAREST WHOLE FOOT) FROM 10 TO 120

DIAMETER OF SCREEN: 55 INCH

GRAVEL PACK: [blank]

IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX): 68 F

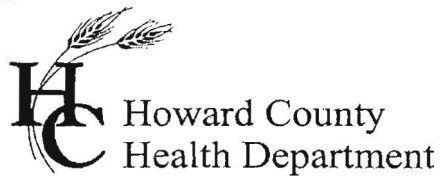
OWNER USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.P.O.S.): [blank]

TELESCOPE CASING: [blank]

LOG INDICATOR: [blank]

OTHER DATA AVAILABLE: [blank]

House 30' west



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-1771 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

February 14, 2005

Mark Hasegawa
6836 Mink Hollow Road
Highland, MD 20777

SENT VIA FACSIMILE 410-381-1211

RE: 6836 Mink Hollow Road
Highland, MD 20777
BP #: B00149805
Well Permit # HO-71-0150

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 02/10/2005. Final approval of the well line connection to the dwelling was approved on 02/14/2005.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

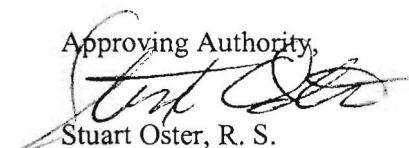
INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-71-0150. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Sample: 02/07/2005
Date of Well Completion: 06/28/1971

Approving Authority,


Stuart Oster, R. S.
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File



L. FRANKLIN EASTERDAY, INC.

WELL DRILLING - TRENCHING - PUMPS & SERVICE

9285 Brown Church Rd., Mt. Airy, Maryland 21771

PHONE: 301-829-1640 • FAX: 301-829-2667

September 16, 2004

Fax transmittal # 410-313-2648

Brian Baker
Howard County Health Dept.
3535 Elliott Mills Drive, Suite H
Ellicott City, Md. 21043

Re: Well Inspection
6836 Mink Hollow Rd.

Dear Mr. Baker:

The well at the above referenced property was inspected on September 16, 2004 at the request of our client Allan Homes. The well is 124 feet deep with a minimum of 18 feet of casing and produced 7.5 GPM .

If you have any questions or need further information please feel free to contact me.

Very truly yours,

George F. Easterday, CWD/PI MWD 040
President

GFE/sve

Attachment (1)
C: Allan Homes/Candy