

Date Received (WRA use only) **4/16/81** DATE WELL COMPLETED **4 16 81** Depth of Well **145 ft.** PERMIT NO. FROM "PERMIT TO DRILL WELL" **10-73-3851**

OWNER **BACH BROTHERS INC.** last name first name
 STREET OR RFD **1702 Heatherwood Way** TOWN **West Friendship**
 SUBDIVISION **Heatherwood** SECTION _____ LOT **7**

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	
Mica Sand	0	40	
Mica Rock	40	145	X

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **(CM)** BENTONITE CLAY **BC**
 NO. OF BAGS **38** NO. OF POUNDS **3610**
 GALLONS OF WATER **304**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **39** ft.
48 TOP (enter 0 if from surface) 54 BOTTOM 58

CASING RECORD
 casing types insert appropriate code below
ST **CO**
 STEEL CONCRETE
PL **OT**
 PLASTIC OTHER
 MAIN CASING TYPE **S T** Nominal diameter top(main)casing (nearest inch) **6** Total depth of main casing (nearest foot) **145**

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

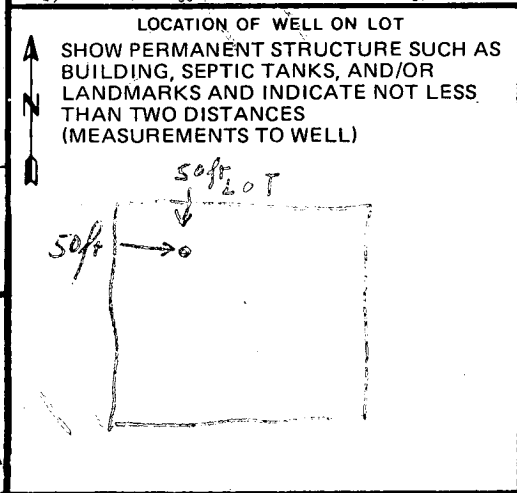
SCREEN RECORD
 screen type or openhole insert appropriate code below
ST **BR** **HO**
 STEEL BRASS BRONZE OPEN HOLE
PL **OT**
 PLASTIC OTHER

C 2 (Seq. no)
 DEPTH (nearest ft.)
 1 **0** **145**
 2 _____
 3 _____
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN (NEAREST INCH) from _____ to _____

GRAVEL PACK _____
 IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX **F**
 WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 _____ 72 _____ 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (seq no)
PUMPING TEST
 HOURS PUMPED (nearest hour) **6**
 PUMPING RATE (gal. per min. to nearest gal.) **20**
 METHOD USED TO MEASURE PUMPING RATE **TIME**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **30**
 WHEN PUMPING **75**
 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 YES **Y** NO **N**
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))
 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 **-** below
 LAND SURFACE **2** (nearest foot)



CIRCLE APPROPRIATE BOX
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 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 IDENT. NO. **209**
Charles Dillan
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

B 1 1737 SEQUENCE NO. WRA USE ONLY
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
HO-73-3851 ✓
fill in this form completely

please print or type

DATE RECEIVED 3/3/81
4/10/81
8 (WRA USE ONLY) 13
OWNER INFORMATION
DACH BROTHERS INC.
LAST NAME OWNER FIRST NAME
15 34
10 B Winters Lane
36 55
STREET OR RFD
Catonsville, Maryland 21228
TOWN 57 STATE 76 ZIP

B 3 LOCATION OF WELL
1 2 3 6
COUNTY HOWARD
SUBDIVISION Heatherwood Development
23 21 42
SECTION 44 46 LOT 7 50
NEAREST TOWN West Friendship
52 71
MILES FROM TOWN (enter 0 if in town) 2 M I
73 76 77 78

B 1 CONTINUED DRILLER INFORMATION
Howard Dillon 209
DRILLER'S NAME 77 LICENSE NO. 801
Signature Date
3/26/81

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
N W E S
8-9 8-9 8-9 8-9
TOWN
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH SOUTH
WEST EAST
30 32 34
Old Frederick Road
NEAR WHAT ROAD
50
34 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 37
38 39

B 2 WELL INFORMATION
1 2 3 6
APPROX. PUMPING RATE (GAL. PER MIN) 8
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 300 20

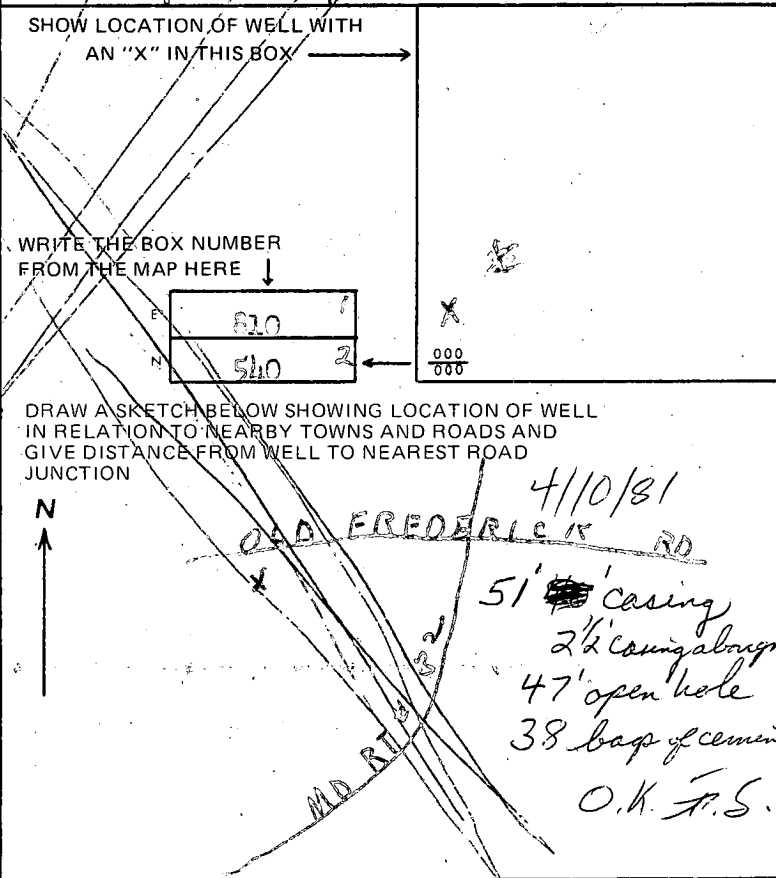
USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE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

APPROXIMATE DEPTH OF WELL 24 200 28 FEET
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

Method of Drilling (circle one)
BORED (OR AUGERED) JETTED JETTED & DRIVEN
30-37 AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC)
CABLE REVERSE ROTARY DRIVE POINT ROTARY
other

REPLACEMENT OR DEEPEMED WELLS (Circle Appropriate Box)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

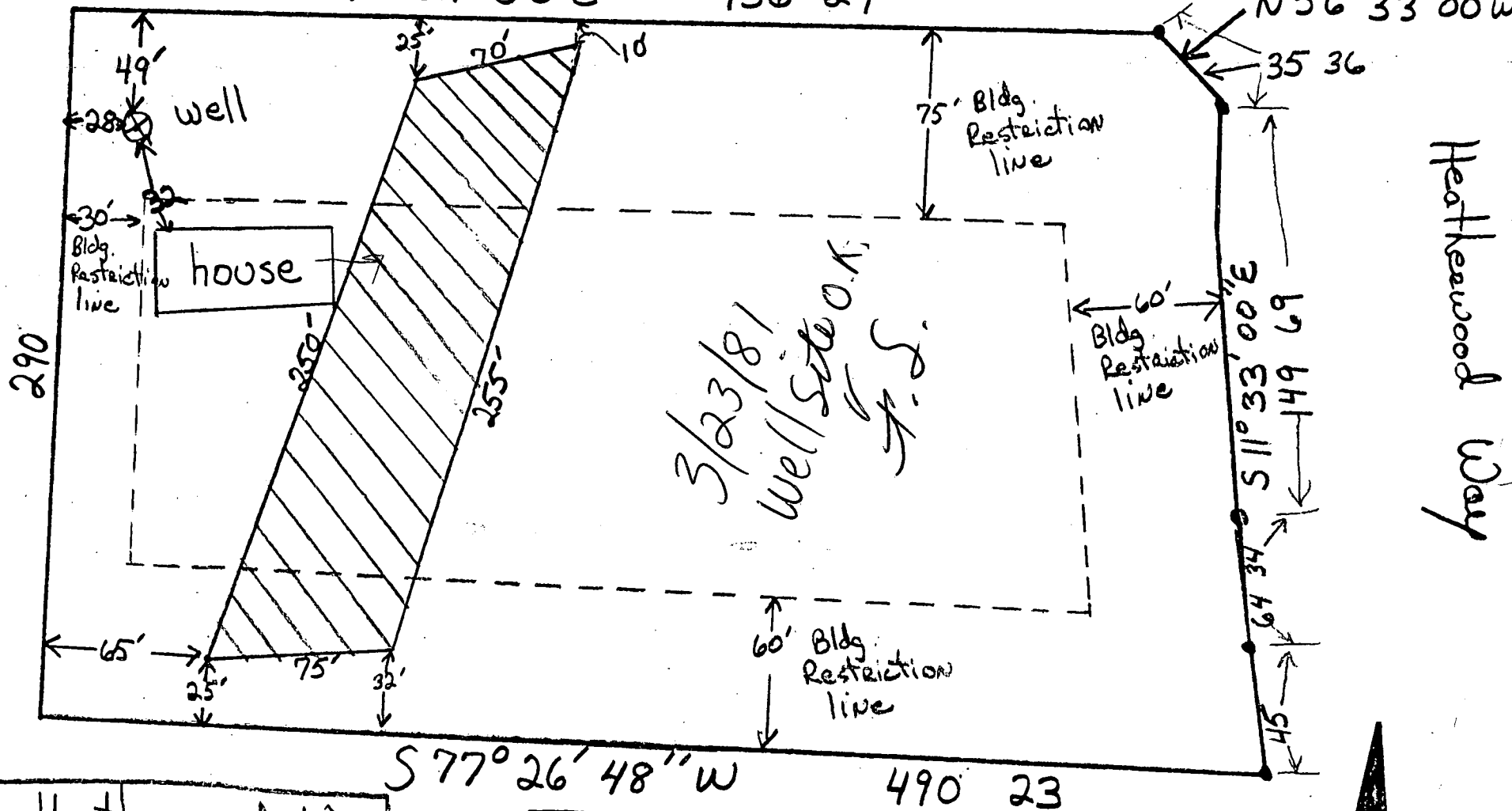
Not to be filled in by driller (WRA USE ONLY)
APPROX. PERMIT NUMBER 54 G A P 63
FORCE INITIALS CONDITIONS 67 68 IN BOX 70 71 72 73 74 75 76 77 78 79



B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard 227561
COUNTY NAME COUNTY NO.
EHA SIGNATURE STATE HEALTH CIRCLE BOX
Fred Frommelt, Sanitarian 41
MO. DAY YR. 03 03 81
43 48 CO SIGNATURE DATE
NORTH 542 000 EAST 0811 000 ELEV. (FT.)
GRID 50 55 GRID 57 63 65 68

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

OLD FREDERICK ROAD
 N 78° 27' 00" E 436 24



Heatherwood Way

1702 Heatherwood Way
 Sykesville, Md 21784

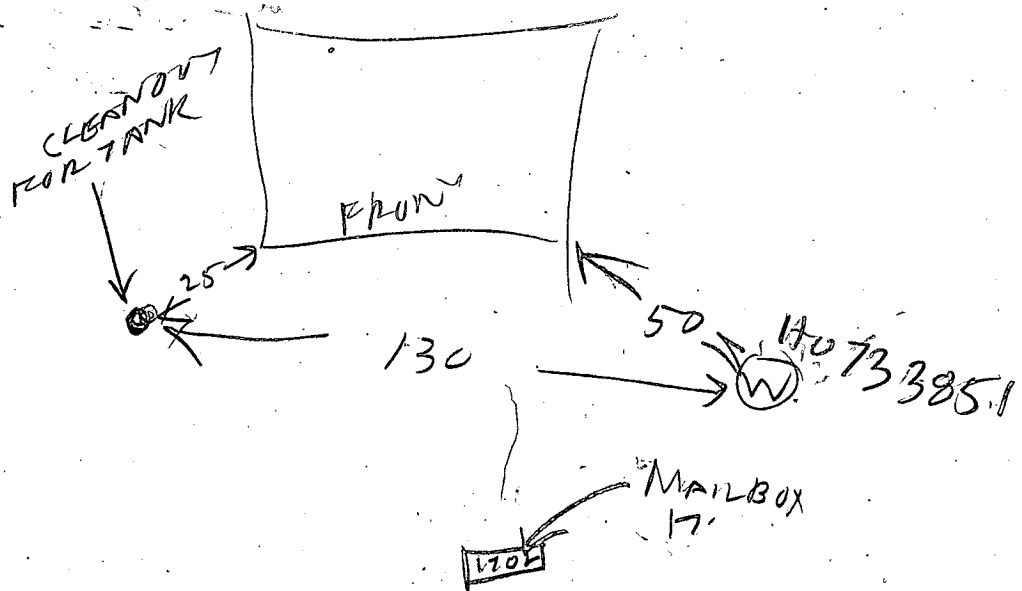
John W. Lauterbach Jr
 Bach Bros. Inc.
 16 B. Winters Lane
 Balto. Md 21228

Lot 7
 Plat. - C.M.P.
 No. 4400

744-1667



14-A-1022-1000-1001



OLD RIVERBANK RD

RECEIVED
 HOWARD COUNTY
 HEALTH DEPT.
 FEB 27 8 52 AM '88
 STATE HEALTH
 DEPARTMENT