

C1 0257

SEQUENCE NO. (MDE-USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE TYPE

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

COUNTY NUMBER 13 A517422

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

ST/CO USE ONLY DATE RECEIVED MM DO YY

DATE WELL COMPLETED MM DO YY

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER DeFrancis STREET OR RFD Breakness Circle Lane TOWN Clarksville SUBDIVISION Walnut Grove SECTION LOT 6

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. Rows include Sand (0-42) and Gray Mica Rock (42-220).

GROUTING RECORD yes no Y N

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 30 NO. OF POUNDS 1800 GALLONS OF WATER 180 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 13 ft.

CASING RECORD casing 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) 46

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 PL PLASTIC HO OPEN HOLE OT OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES Y NO N

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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. MSD024 DRILLERS SIGNATURE

LIC. NO. D

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

DEPTH (nearest ft.) 44 220

Table with columns: E A C H S R E N, rows 8-11, 15-17, 23-24, 28, 30-32, 36, 38-39, 41, 45-47, 51

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 58

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 29 ft. WHEN PUMPING 30 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO

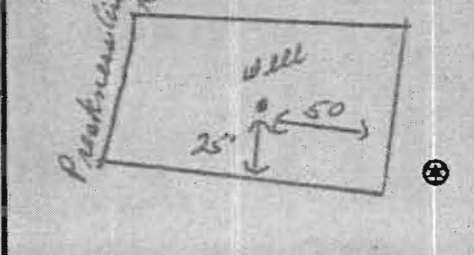
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

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) + above - below 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	0517	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 525642 please type	STATE PERMIT NUMBER 70 <u>HO-95-0563</u> 79 fill in this form completely
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OWNER INFORMATION

Date Received (APA) 8 MM DD YY 13

15 Last Name Land Marketing Consultants Owner First Name 34

36 Street or RFD 3060 RT 92 55

57 Town Glenwood MD 21738 70 State 72 Zip 76

DRILLER INFORMATION

Driller's Name RALPH MAYNE M SD 112 License No. 81

Firm Name Ralph E. Mayne Inc

Address 17024 Handy Rd Mt Airy MD 21771

Signature Ralph E. Mayne Date 11-11-06

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)

37 CABLE REVERSE-ROTARY DRIVE-POINT

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

39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEAN 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)

APPROP. PERMIT NUMBER HO 2005G 006

PERMIT No. HO-95-0563

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE THIS SECTION

Need Radium Sample

LOCATION OF WELL

8 COUNTY Howard 21

23 SUBDIVISION Walnut Grove 42

SECTION 44 LOT 6 50

52 NEAREST TOWN Clarksville 71

MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD Prankess Circle 11 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 275 37 DISTANCE FROM ROAD 1/4 38 39

ENTER FT OR MI

TAX MAP: 28 BLK: 18 PARCEL 74

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13) A517422 COUNTY NAME COUNTY NO

STATE SIGNATURE _____ INSERT S → 41

DATE ISSUED 12/1/2006 Brian Baker 12/1/2007 43

CO SIGNATURE EXP. DATE

NORTH GRID 508 000 EAST GRID 816 000

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X →

SOURCES OF DRILLING WATER

- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

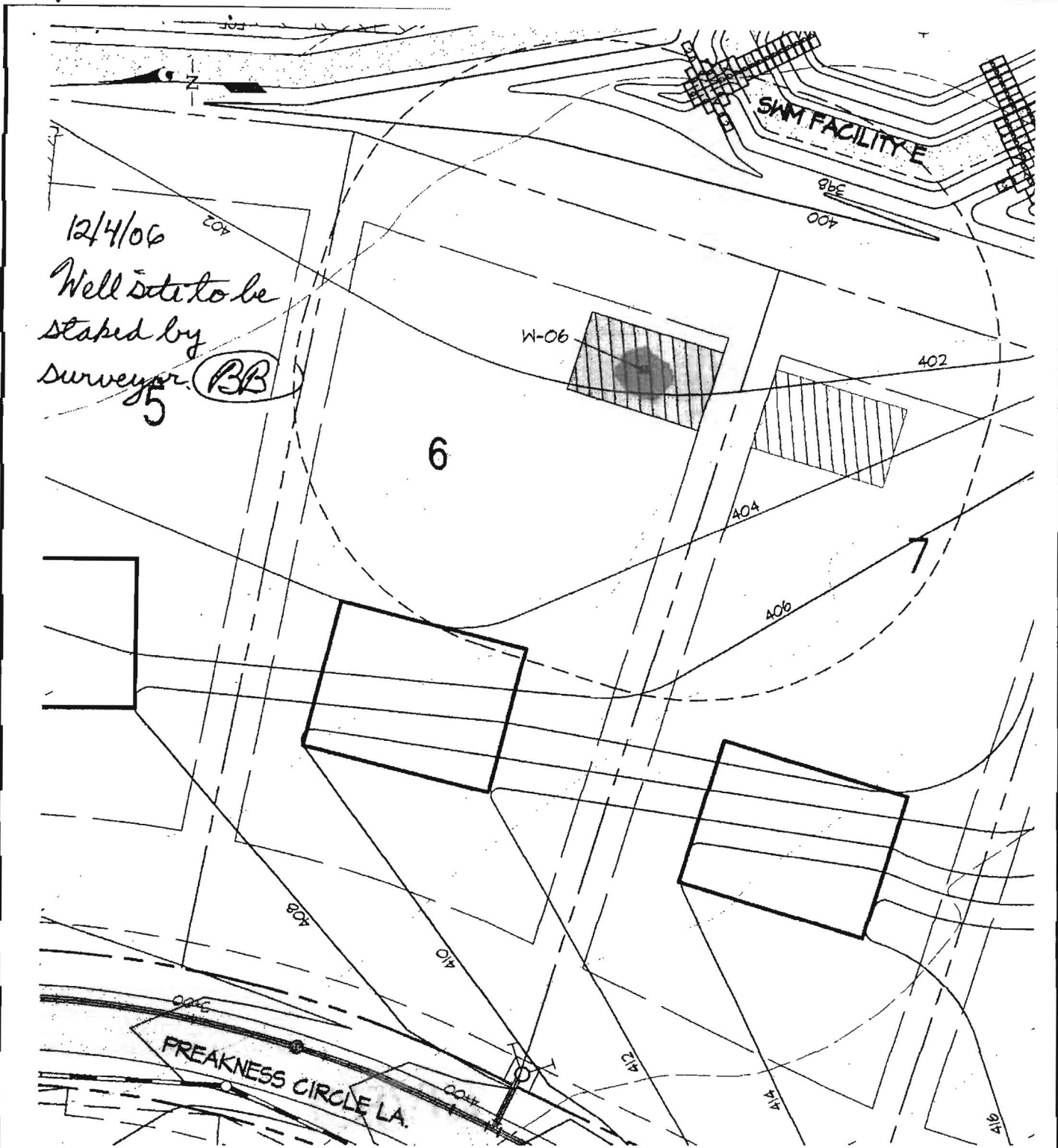
E 8156

N 508

Radium sample taken @ yard 000 test 1/11/07

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N ↑



LEGEND	PROPOSED LPSS	HOUSE BOX	WELL BOX	WELL SURVEY POINT
	PROPOSED STORM DRAIN			

WELL LOCATION EXHIBIT - LOT 6

WALNUT GROVE
Lots 1 thru 88, Buildable Preservation Parcel "A",
Non-Buildable Preservation Parcels "B" Thru "I" And
and Non-Buildable Bulk Parcel "J"

GLW GUTSCHICK LITTLE & WEBER, P.A.

CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS
3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK
BURTONSVILLE, MARYLAND 20866
TEL: 301-421-4024 BALT: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186

SCALE: 1"=50'	ZONING: RC/RR-DEO	TAX MAP/GRID: 28-18/17	GLW JOB NO: 00153	OCT., 2006	1 OF 1
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**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: Dr. It Plumbing Heating & Air Telephone #: 240-882-0069
Address: 4905 Old Mill Rd.
Ellicott City, MD 21041

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

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

Name (Print): Duane Gilbert License# 21899

*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: T.R.J. Telephone #: 410-480-0023
Subdivision: Walnut Grove Lot #: 6 Well Tag #: HO-95-0268
Site Address: 12321 Prokross Creek Ln.
B. Church Md. 21027

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Aqua</u>	Make: <u>American country</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>ZS12-12000-14-1</u>	Model#: <u>PT 200</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>12</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>15</u> GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>250</u> (feet)	Conduit secured to well cap: <u>yes</u>	

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 no

Piping to house
Type: plastic one inch
PSI: yes (160 psi min)
Depth of supply line: yes (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: yes
Approximate length of sleeve: 10 ft
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: [Signature] date: Oct. 1, 2011

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

Date Insp. Requested: _____ Date Insp. Approved: 11/1/2011 **(BB)**

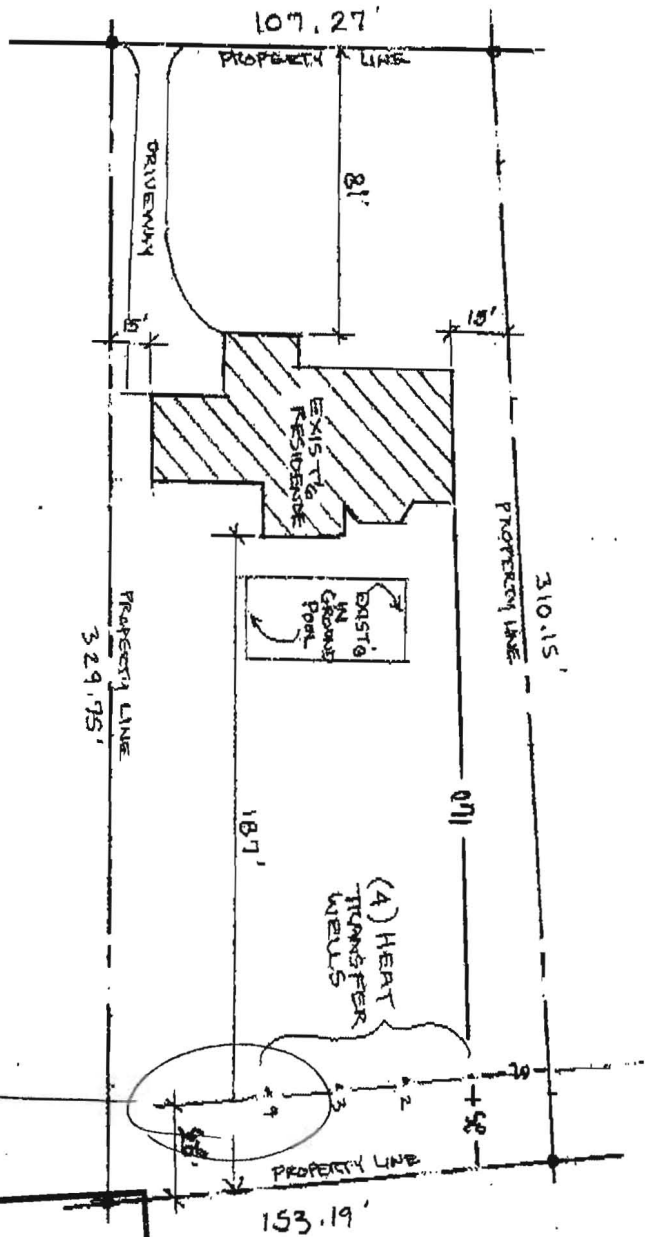
Inspection Data:

Pitless adapter and water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope installed inside of well casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

BREWSTER RESIDENCE

12351 Preakness Circle Ln, Clarksville MD 21029

Preakness Circle Ln.



SITE PLAN

SCALE: 1"=50'-0"

Not to Scale

7/15/14

on
Allied
by
provided

Setback
not 30'

RECEIVED

JUL 15 2014

HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM





P.O. Box 128
 Annapolis Junction, MD 20701
 NJ 301-776-8370
 9 301-776-8374
 www.alliedwells.com

Date: 07/15/14
 To: Ryan
 From: Donis
 Number of Pages: 3 Including Cover Sheet

RECEIVED
 JUL 15 2014
 HOWARD COUNTY HEALTH DEPT.
 COMMUNITY HYGIENE PROGRAM

Ryan, Bill asked me to send this
 to you.
 Thanks!
 Donis

Real Property Data Search (v.4)

[Search Help](#)

Search Result for HOWARD COUNTY

[View Map](#)[View GroundRent Redemption](#)[View GroundRent Registration](#)**Account Identifier:** District - 05 Account Number - 448654

Owner Information

Owner Name:	BREWSTER CHRISTOPHER A	Use:	RESIDENTIAL
	BREWSTER AMY E T/E	Principal Residence:	YES
Mailing Address:	12351 PREAKNESS CIRCLE LN	Deed Reference:	1) /12940/ 00001
	CLARKSVILLE MD 21029-		2)

Location & Structure Information

Premises Address:	12351 PREAKNESS CIRCLE LN CLARKSVILLE 21029-0000	Legal Description:	LOT 6 1.0488 A 12351 PREAKNESS CIRCLE L WALNUT GROVE							
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:	19226
0028	0018	0074		0000		9999	6	2014		Plat Ref:
Special Tax Areas:		Town:	NONE							
		Ad Valorem:	100							
		Tax Class:								
Primary Structure Built	Above Grade Enclosed Area	Finished Basement Area	Property Land Area	County Use						
2011	6,310 SF	2110 SF	1.0400 AC	000000						
Stories	Basement	Type	Exterior	Full/Half Bath	Garage	Last Major Renovation				
2.000000	YES	STANDARD UNIT	FRAME	4 full/ 2 half	2 Attached					

Value Information

	<u>Base Value</u>	<u>Value</u>	<u>Phase-in Assessments</u>	
		As of	As of	As of
		01/01/2014	07/01/2013	07/01/2014
Land:	350,400	350,400		
Improvements	709,600	1,042,100		
Total:	1,060,000	1,392,500	1,060,000	1,170,833
Preferential Land:	0			0

Transfer Information

Seller: WALNUT GROVE HOLDING II LLC	Date: 12/20/2010	Price: \$402,000
Type: ARMS LENGTH VACANT	Deed1: /12940/ 00001	Deed2:
Seller: WALNUT GROVE HOLDING LLC	Date: 11/07/2007	Price: \$19,321,500
Type: NON-ARMS LENGTH OTHER	Deed1: /10961/ 00624	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:

Exemption Information

Partial Exempt Assessments:	Class	07/01/2013	07/01/2014
County:	000	0.00	
State:	000	0.00	
Municipal:	000	0.00 0.00	0.00 0.00
Tax Exempt:	Special Tax Recapture:		
Exempt Class:	NONE		

Homestead Application Information

Homestead Application Status: Approved 08/17/2012