

B 1	<b>7027</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b>	STATE PERMIT NUMBER <b>HO-95-1162</b> <small>fill in this form completely</small>
1 2 3 6			527252 please type	70 79

**OWNER INFORMATION**

Date Received (APA) \_\_\_\_\_

8 MM DD YY 13

15 Last Name Roth Owner First Name Ryan 34

36 Street or RFD 14215 Clarksville Pike 55

57 Town Highland MD 20777 State 70 Zip 76

**LOCATION OF WELL**

B 3

8 COUNTY Howard 21

23 SUBDIVISION Fox Haven 42

SECTION 1 LOT 26  
44 46 48 50

52 NEAREST TOWN Highland 71

MILES FROM TOWN (enter 0 if in town) 1 M I |  
73 76 77 78

**DRILLER INFORMATION**

Driller's Name DAVID KELLY License No. MW D 304 76 81

Firm Name Jones Well Drilling Inc

Address 3700 Rush Rd. Jarrettsville, MD 21084

Signature David Kelly Date 7-5-07

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

B 4

1 2

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

11 NEAR WHAT ROAD 14215 Clarksville Pike 30

34 900 37 DISTANCE FROM ROAD FT

ENTER FT OR MI 38 39

TAX MAP: 40 BLK: 21 PARCEL 465

**WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 0 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 0 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 2 holes closed loop

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

COUNTY NAME Howard COUNTY NO. (13) A21290

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED 7/30/2007 CO SIGNATURE Bruce Baker EXP. DATE 7/30/2008

43 MM DD YY 48

NORTH GRID 483 0 0 0 EAST GRID 808 0 0 0

50 55 57 63

APPROXIMATE DEPTH OF WELL 400 FEET  
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH  
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 \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 
- 
- 

WRITE THE BOX NUMBER FROM THE MAP HERE

E 81008

N 4893

000  
000

**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**

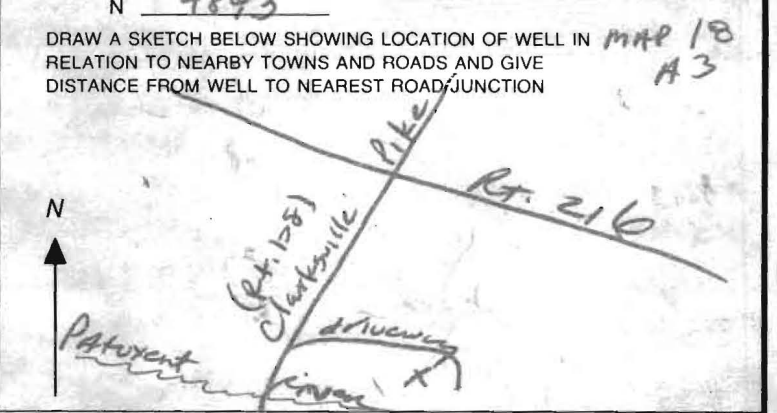
N THIS WELL WILL NOT REPLACE AN EXISTING WELL

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 DEEPEM 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 \_\_\_\_\_

PERMIT No. HO-95-1162  
70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS**

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEETS IF NEEDED

Borehole Must Be Fully Grouted From Bottom to Top

With Approved Grout - Submit Completion Report For Each Well

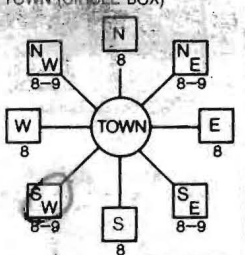

DENV-Permit 97

B 1 7027 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type STATE PERMIT NUMBER HO-95-1162  
70 fill in this form completely 79

Date Received (APA) \_\_\_\_\_  
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 15 Last Name Roth Owner Ryan First Name 34  
 36 Street or RFD 14215 Clarksville Pike 55  
 57 Town Highland MD 20777 State 70 Zip 76

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 SECTION 1 LOT 26  
 44 46 48 50  
Highland  
 52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) 1 M 1  
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DRILLER INFORMATION  
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 Firm Name Jones Well Drilling Inc  
 Address 3700 Bush Rd. Jarrettsville, MD 21084  
 Signature David Kelly Date 7-5-07

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 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
 34 900 37 DISTANCE FROM ROAD FT  
 ENTER FT OR MI 38 39  
 TAX MAP: 40 BLK: 21 PARCEL 465

B 2 WELL INFORMATION  
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14

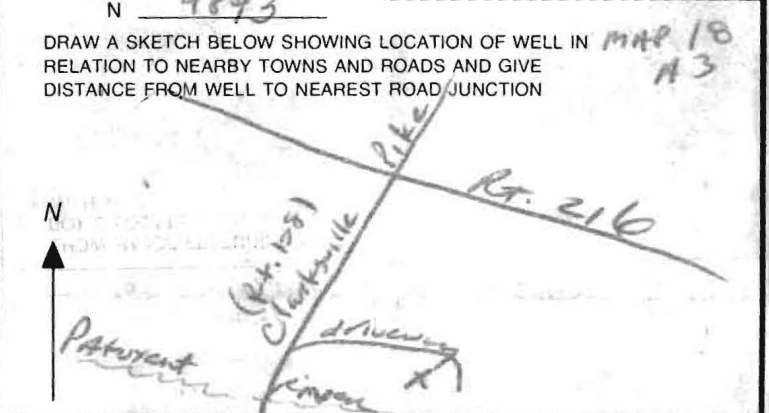
USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 DOMESTIC POTABLE IRRIGATION  
 WELLS FOR AGRICULTURE  
 MINERAL WATER  
 GEO-THERMAL  
 OTHER (Specify) \_\_\_\_\_  
**Please Cancel**

NOT TO BE FILED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME Howard COUNTY NO. (13) A21290  
 STATE SIGNATURE \_\_\_\_\_ INSERT S →  
 DATE ISSUED 7/30/2007 41  
 43 MM DD YY 48 CO SIGNATURE Brian Baker EXP. DATE  
 NORTH GRID 483 000 EAST GRID 808 000  
 50 55 57 63

APPROXIMATE DEPTH OF WELL 400 FEET  
 grout:  
 HO:  
 Miss U# \_\_\_\_\_ by \_\_\_\_\_  
 mark property:  
 Fax confirmation

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E 8008  
 N 4893  
 000  
 000

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
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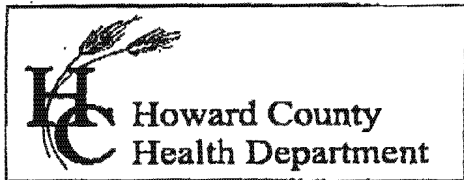


Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_  
 PERMIT No. HO-95-1162  
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS  
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED  
Permittee Must Be Fully Grouted From Bottom to Top  
With Approved Grout - Submit Completion Report For Each Well  
 DENV-Permit 97

Cancelled 7/11/07 - Tag returned

Dec'd  
7/1/07



7178 Columbia Gateway Drive, Columbia MD 21046  
 (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

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

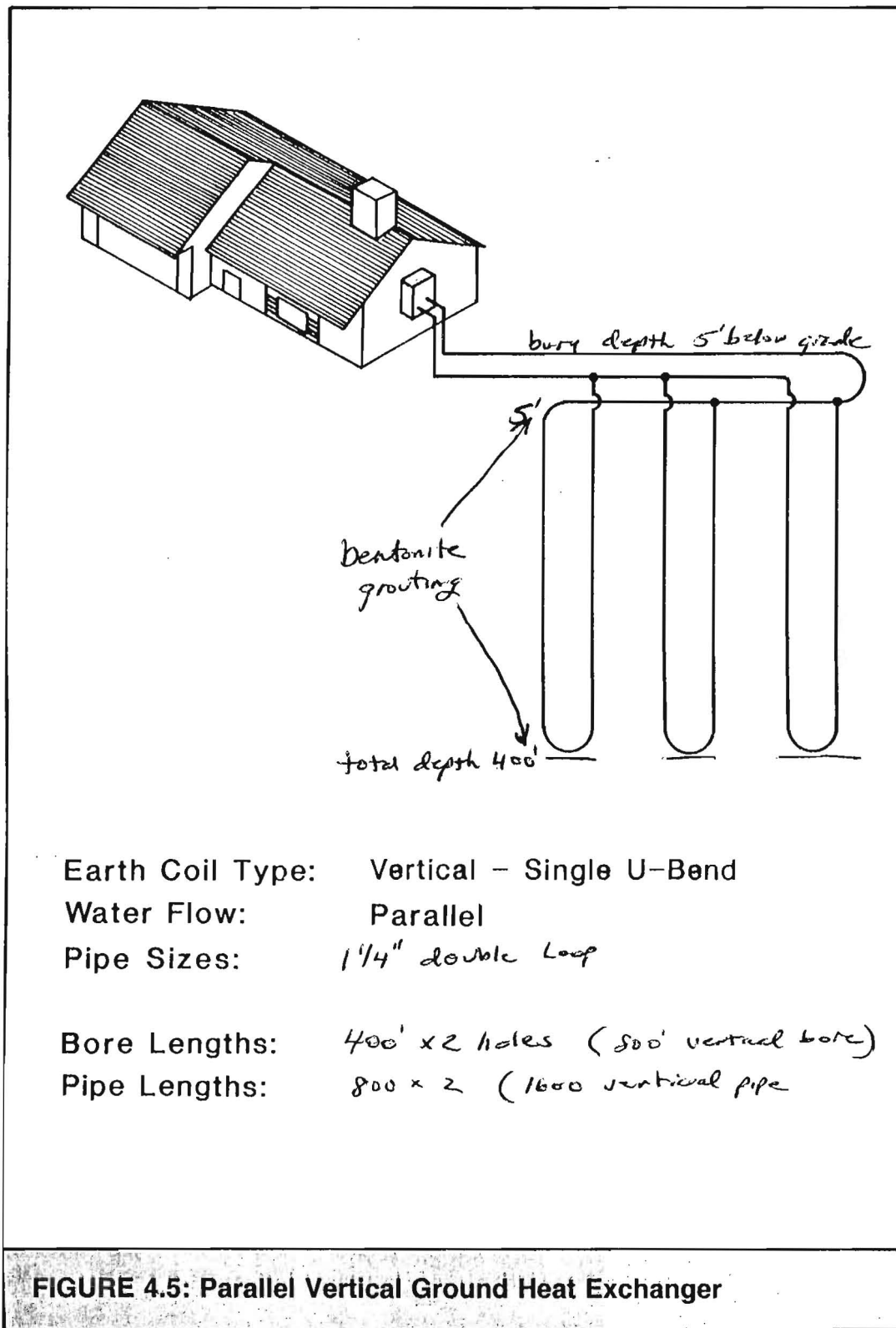
Well Site Location:

<u>For Haven</u>	<u>26</u>	<u>14215 Clarksville Pike</u>
Subdivision/Property Name	Lot#	Road Name

- The well site has been staked by \_\_\_\_\_,  
 (professional land surveyor or company employing professional land surveyors)  
 on \_\_\_\_\_ (date) and does not require a site inspection.
- The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/05



**FIGURE 4.5: Parallel Vertical Ground Heat Exchanger**



HOWARD COUNTY HEALTH DEPARTMENT

27252

DATE 7/10/07

415

Received From Jones Well Drilling, Inc. PHONE #

3700 Rush Rd Garretttsville MD 21084

For Well permit

CASH CHECK NO. 2366

14215 Clarksville Pike

one hundred sixty dollars Dollars

\$ 160.00

Received By W. S. Smith

DO NOT REMOVE THIS TAG DEPARTMENT OF THE ENVIRONMENT WELL PERMIT NUMBER HO-95-1162 INFORMATION-GIVE NUMBER AND WRITE 1800 WASHINGTON BLVD. BALTIMORE, MARYLAND 21230