

C1 18675

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, WELL SITE ADDRESS, TOWN, SUBDIVISION, SECTION, LOT

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, FEET (FROM, TO), check if water bearing. Includes entries like Top Soil, Soft Brown Red Clay, Med Hard weathered Sand Rock, Gray Rock, Gray Blk Rock.

GRROUTING RECORD, WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL, CEMENT, BENTONITE CLAY, NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD, casing types insert appropriate code below, STEEL, CONCRETE, PLASTIC, OTHER

MAIN CASING TYPE, Nominal diameter top (main) casing, Total depth of main casing

OTHER CASING (if used), diameter, depth (feet)

SCREEN RECORD, screen type or open hole, STEEL, BRASS, OPEN HOLE, PLASTIC, OTHER

DEPTH (nearest ft.), SLOT SIZE, DIAMETER OF SCREEN

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER), TELESCOPE CASING, LOG INDICATOR, OTHER DATA

C3

PUMPING TEST

HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED

PUMP INSTALLED

DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, PLACE, CAPACITY, GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT

LATITUDE, LONGITUDE, (DEFAULT COORD. WGS 84)

NOTES: 52 bags ÷ 4 = 13 × 20 = 330 gal/300' = 1.1

Tag 05-399515

EMERGENCY/TEMP NO. IF ANY

|     |       |                             |  |  |
|-----|-------|-----------------------------|--|--|
| B 1 | 21275 | SEQUENCE NO. (MDE USE ONLY) | STATE OF MARYLAND<br>APPLICATION FOR PERMIT TO DRILL WELL<br>please type<br>545071 | STATE PERMIT NUMBER<br>70 <u>HO-95-2535</u> 79<br>fill in this form completely |
|-----|-------|-----------------------------|--|--|

**OWNER INFORMATION**

Date Received (APA) 06 20 13  
8 MM DD YY 13

15 Last Name Madden Owner First Name Joshua 34  
36 Street or RFD 4272 Buckskin Lake Dr 55  
57 Town Ellicott City MD 70 State MD 72 Zip 21042 76

**LOCATION OF WELL**

B 3

8 COUNTY Howard 21  
23 SUBDIVISION Buckskin Woods 42  
SECTION 1 44 46 LOT 17 48 50  
52 NEAREST TOWN Ellicott City 71

**DRILLER INFORMATION**

Driller's Name Cubhn Hess MWD 553 76 License No. 81  
Firm Name Allied Environmental Svcs  
Address Po Box 129 Annapolis, MD 20701  
Signature [Signature] Date \_\_\_\_\_

**SOURCES OF DRILLING WATER**

B 4

1. Public  
2. \_\_\_\_\_  
3. \_\_\_\_\_

4272 Buckskin Lake Dr  
11 STREET ADDRESS 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

|   |
|---|
| NORTH   |
| <input checked="" type="checkbox"/> N           |
| WEST <input checked="" type="checkbox"/> S EAST |
| SOUTH   |

34 37 DISTANCE FROM ROAD  
ENTER FT OR MI 38 39  
TAX MAP: 0022 BLK: 0022 PARCEL 0535

**WELL INFORMATION**

B 2

APPROX. PUMPING RATE (GAL. PER MIN.) \_\_\_\_\_ 8 12  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) \_\_\_\_\_ 14 20

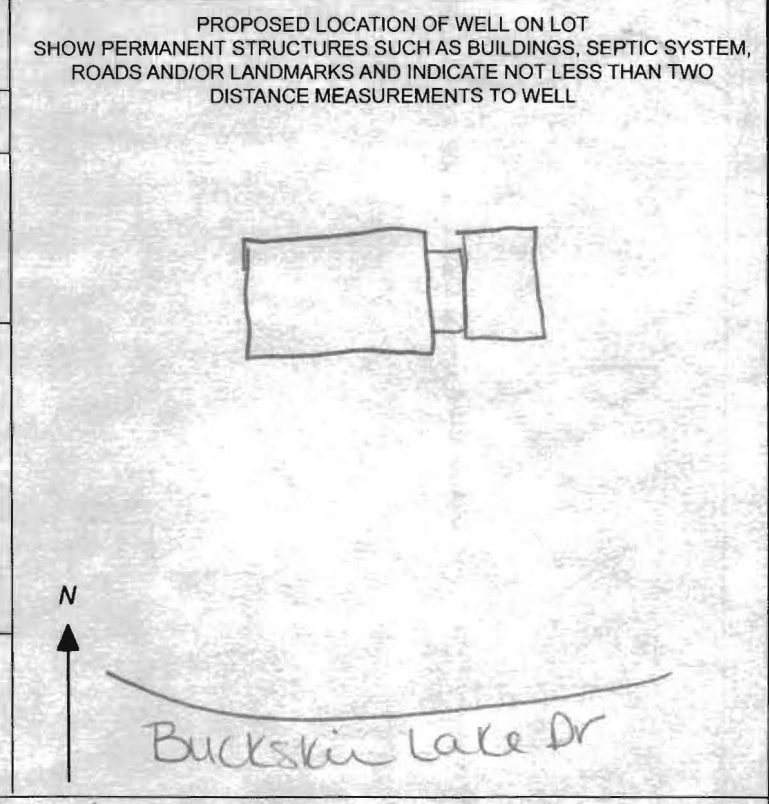
**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
22  INDUSTRIAL, COMMERCIAL, DEWATERING  
 PUBLIC WATER SUPPLY WELL  
 TEST, OBSERVATION, MONITORING  
 OPEN LOOP GEOTHERMAL  
 CLOSED LOOP GEOTHERMAL 4 loops

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

Howard (13) A35541  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE \_\_\_\_\_ INSERT S → 41  
DATE ISSUED 07 03 13 43 MM DD YY 48 [Signature] CO SIGNATURE 7/3/14 EXP. DATE

APPROXIMATE DEPTH OF WELL 300 FEET 24 28  
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)**

THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEM AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

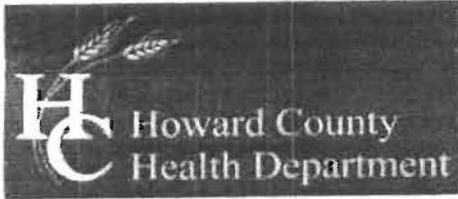
**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**

APPROX. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_  
PERMIT No. HO-95-2535  
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS Maintain 60' off of right side lot line  
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Total Comfort





Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Peter L. Beilenson, 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:  
Buckskin Woods      17      Buckskin Lake Dr  
Subdivision/Property Name      Lot#      Road Name

The well site has been staked by Allied  
(professional land surveyor or company employing professional land surveyors)  
on 6/18/13 (date) and does not require a site inspection.

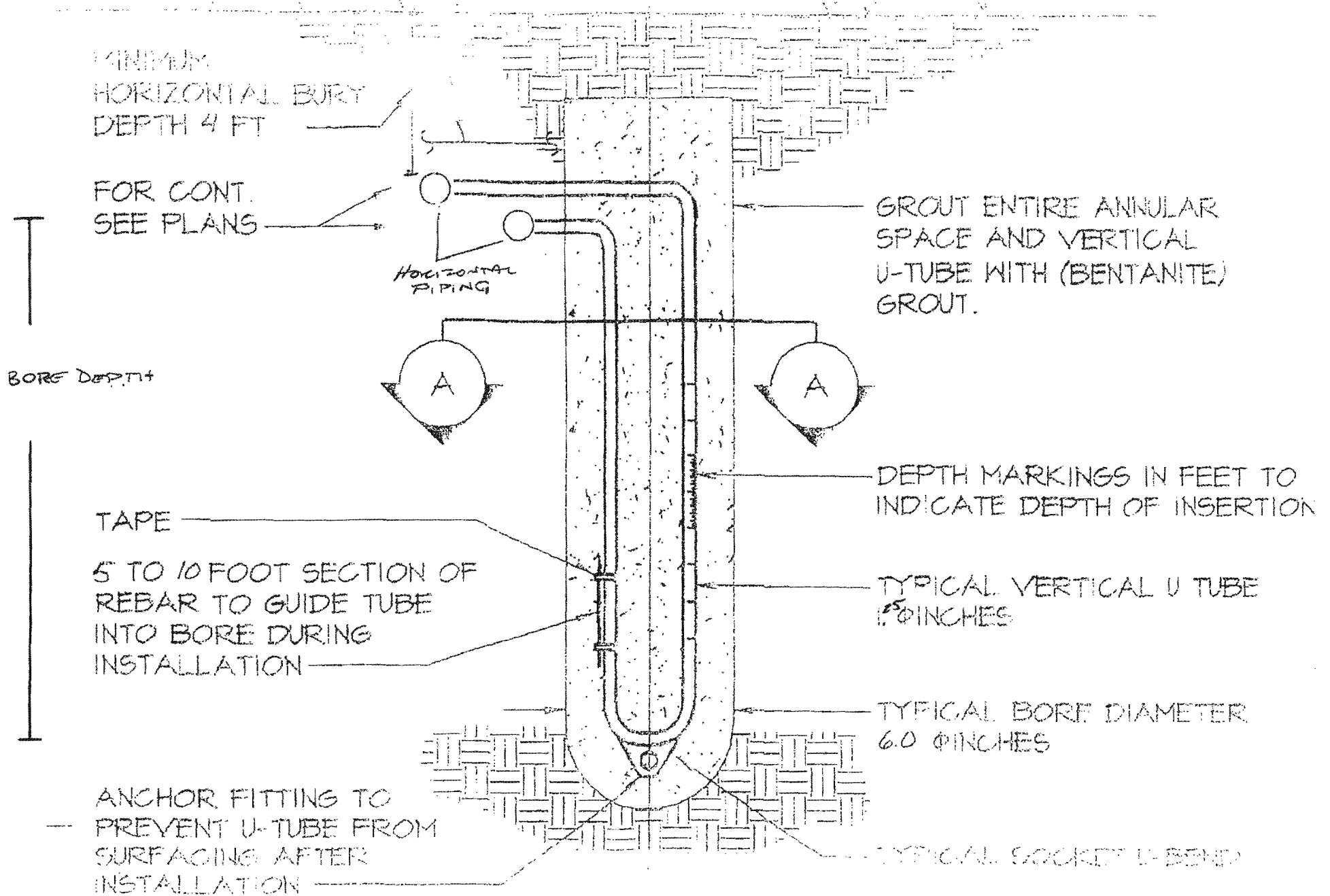
The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

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

GRADE

EACH BORE HOLE (TYP.)



MINIMUM HORIZONTAL BURY DEPTH 4 FT

FOR CONT. SEE PLANS

HORIZONTAL PIPING

GROUT ENTIRE ANNULAR SPACE AND VERTICAL U-TUBE WITH (BENTANITE) GROUT.

BORE DEPTH

A

A

DEPTH MARKINGS IN FEET TO INDICATE DEPTH OF INSERTION

TAPE

5 TO 10 FOOT SECTION OF REBAR TO GUIDE TUBE INTO BORE DURING INSTALLATION

TYPICAL VERTICAL U TUBE 1.5 INCHES

TYPICAL BORE DIAMETER 6.0 INCHES

ANCHOR FITTING TO PREVENT U-TUBE FROM SURFACING AFTER INSTALLATION

TYPICAL SOCKET U-BEND