

**STATE OF MARYLAND  
WELL COMPLETION REPORT**  
FILL IN THIS FORM COMPLETELY  
PLEASE TYPE

45 DAYS AFTER WELL IS COMPLETED.  
COUNTY NUMBER 13 OR SRU 8/23/01  
PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3155

**C1** 0.112 (MDE USE ONLY)  
1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY  
DATE Received  
MM DD YY  
08 17 2001  
DATE WELL COMPLETED  
MM DD YY  
08 17 2001

Depth of Well  
22 300 26  
(TO NEAREST FOOT)

OWNER Brantly Development  
STREET OR RFD 11363 Frederick Rd TOWN Ellicott City  
SUBDIVISION Brantwood 311 SECTION \_\_\_\_\_ LOT Pros Pcl C

**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	
Overburden Limestone	0	35	
water at 65'	35	300	x

**GROUTING RECORD**  
WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT **CM** BENTONITE CLAY **BC**  
NO. OF BAGS 8 NO. OF POUNDS 800  
GALLONS OF WATER 48  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 32 ft.  
(enter 0 if from surface)

**CASING RECORD**  
casing types insert appropriate code below  
**ST** STEEL **CO** CONCRETE  
**PL** PLASTIC **OT** OTHER  
MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 40

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

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

**C2** DEPTH (nearest ft.)  
HO 40 300  
EACH CASING SLOT SIZE 1 2 3  
DIAMETER OF SCREEN (NEAREST INCH) 58 60  
from to

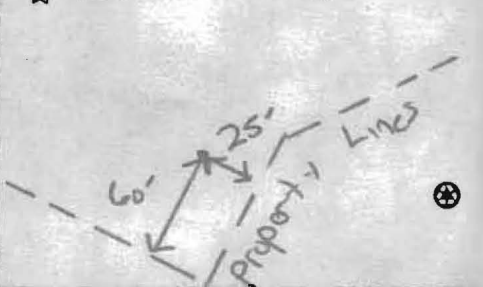
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68

MDE 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

**C3** **PUMPING TEST**  
HOURS PUMPED (nearest hour) 3  
PUMPING RATE (gal. per min.) 4.0  
METHOD USED TO MEASURE PUMPING RATE Submersible  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING 24 ft.  
WHEN PUMPING 270 ft.  
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**  
DRILLER INSTALLED PUMP 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 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 49 LAND SURFACE  
**-** below 1 (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)



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED **Y** **N**

CIRCLE APPROPRIATE LETTER  
**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 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. MWD 399

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
Wann Powell

LIC. NO. M D 241

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

B 1 9409

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-94-3155 fill in this form completely

W51595 please print or type

Date Received (APA) 7/20/01

OWNER INFORMATION

Brantly Development, 8835 P Columbia 100 PKWY, Columbia MD 21045

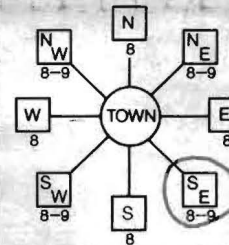
LOCATION OF WELL

Howard County, Brantwood Area 1, Section 3, Lot Preservation Parcel C, West Friendship

DRILLER INFORMATION

Paul M. Fabiszak, G. Edgar Harr Sons' Corp, 12047 Falls Rd Cockeysville 21030, 7/18/01

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11363 Frederick Road, 200 feet from road, Tax Map: 38-39

WELL INFORMATION: APPROX. PUMPING RATE 5 GAL. PER MIN., AVERAGE DAILY QUANTITY NEEDED 750 GAL. PER DAY

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled), FARMING, INDUSTRIAL, PUBLIC WATER SUPPLY WELL, TEST, GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co 13, DATE ISSUED 7/25/01, EXP. DATE 7/25/07, NORTH GRID 520 000, EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 250 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered), AIR-ROtary, AIR-PERcussion (circled), ROTARY (Hydraulic Rotary), CABLE, REVerse ROTary (circled), Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled), THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED (circled), 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

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

APPROP. PERMIT NUMBER G

PERMIT No. 40-94-3155

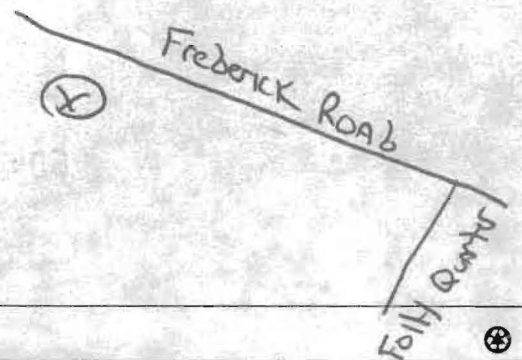
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER: 1. Well, 2., 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820, N 520

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



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

**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: G. Edgar Harr Son's Corp Telephone #: 410-252-4588  
Address: 72047 Falls Road  
Cockeysville, MD 21030

(Must circle one) Licensed Plumber  **Licensed Well Driller**  Licensed Well Pump Installer   
License # and name of individual responsible for the field installation:  
Name (Print): Paul M. Fabiszak License# MWD399  
**\*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: Nick Liparini Telephone #: 410-730-0870  
Subdivision: Brantwood Lot #: PPC Well Tag #: HO - 94- 3155  
Site Address: 11363 Frederick Road

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Goulds</u>	Make: <u>Martinson</u>	Two piece watertight cap: <u>x</u>
Model #: <u>5G505472</u>	Model#: <u>B-10X</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity <u>5</u> GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: <u>y</u>
Well Yield: <u>4</u> GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>300</u> (feet)		Conduit secured to well cap: <u>y</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     

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>Poly</u>	PVC sleeved to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>7'</u>
Depth of supply line: <u>42</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

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.

Tal [Signature] 8/27/01  
Signature of company representative responsible for installation date

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

Date Insp. Requested: 8/27/01 Date Insp. Approved: 8/28/01 **KG** <sup>SRU</sup>  
Inspection Data: Pitless adapter and water supply line at least 36" below grade   
Two piece cap installed and attached to casing securely   
Elec. conduit extends at least 18" below grade/attached to cap properly   
Safety rope installed inside of well casing   
Correct well tag attached properly and casing 8" above finished grade   
Water supply line sleeved adequately at house connection   
Adequate grout observed below pitless adapter



6/19/01 Adjustment to SDA OK as shown if new well is drilled. N. Lippari agreed to redrill immediately

