

C1 4042

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 125

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-2210

OWNER: Tata Pasqualz; WELL SITE ADDRESS: 15940 A E Mullinix; TOWN: Glenwood; SUBDIVISION: Tata Subdivision

WELL LOG

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Brown Shale, Gray Limestone, Brown Sandstone, Gray Limestone.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N); TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY); NO. OF BAGS, NO. OF POUNDS; GALLONS OF WATER; DEPTH OF GROUT SEAL

CASING RECORD

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

OTHER CASING (if used)

SCREEN RECORD

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

PUMPING TEST

HOURS PUMPED (03); PUMPING RATE (15); METHOD USED TO MEASURE PUMPING RATE (5); WATER LEVEL (distance from land surface) BEFORE PUMPING (13), WHEN PUMPING (17); TYPE OF PUMP USED (S)

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES/NO); TYPE OF PUMP INSTALLED (S); PLACE (A,C,J,P,R,S,T,O) IN BOX 29; CAPACITY: GALLONS PER MINUTE (31-35); PUMP HORSE POWER (37-41); PUMP COLUMN LENGTH (43-47); CASING HEIGHT (above/below LAND SURFACE) (02)

NUMBER OF UNSUCCESSFUL WELLS: 0; WELL HYDROFRACTURED (Y/N)

- CIRCLE APPROPRIATE LETTER: A (WELL ABANDONED), 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.: M S D 009; DRILLERS SIGNATURE: Allen Compton; LIC. NO.: D

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

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

LATITUDE 3 N. 39 18. 668; LONGITUDE 7 W. 077 04. 031; (DEFAULT COORD. WGS 84); NOTES:

B 1 4890

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-2210

fill in this form completely

535998 please type

Date Received (APA) 10/11/11

OWNER INFORMATION

Tata Pasquale, 15940 A.E. Mullinix Rd, Woodbine, Md. 21797

LOCATION OF WELL

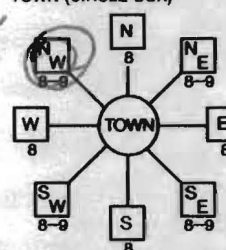
Howard County, TATA Subdivision, Section 44, Lot 1, Glenwood

MILES FROM TOWN (enter 0 if in town) 3

DRILLER INFORMATION

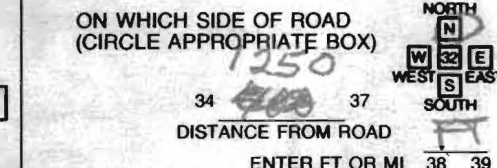
Allen Compton, Eagle's Well Drilling, 580 Obrecht rd Sykesville 21784

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



1250 NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



TAX MAP: 13 BLK: 6 PARCEL 156

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 500, AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14

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 (13) A533350, COUNTY NAME, COUNTY NO., STATE SIGNATURE, DATE ISSUED 10/25/2011, CO SIGNATURE Brian Baber, EXP. DATE 10/25/2012, NORTH GRID 538, EAST GRID 781

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered), JETTED, Jetted & DRIVEN, AIR-ROTary, AIR-PERcussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, 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, 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

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

APPROP. PERMIT NUMBER G, PERMIT No. HO-95-2210

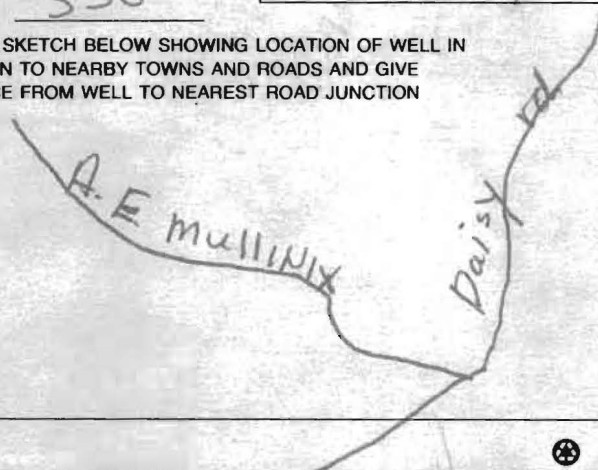
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

E 7801, N 538

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

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 12-14-11 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: Allen Confor

WELL DRILLERS LICENSE NUMBER: 009

* OWNER'S NAME: Tata Pgs Quacc

CIRCLE: MWD/MSD/MGD

* WELL LOCATION:
 COUNTY: Howard
 NEAREST TOWN: Greenwood
 TAX MAP 13 BLOCK 6 PARCEL 156
 SUBDIVISION: Tata Subdivision
 SECTION: _____ LOT: 2
 NEAREST ROAD: A.E. MILLINIX

	X
000	
000	

SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES

BOX NUMBER E 781
 N 538 ← _____

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

* USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL

* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) _____

SIZE OF CASING: 6" INCHES IN DIAMETER

DEPTH OF WELL: 425 FEET DEEP

WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: 40

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

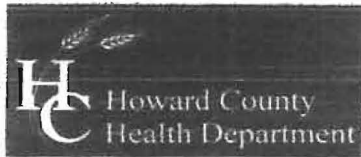
MATERIAL	FEET	
	FROM	TO
<u>Cement</u>	<u>0</u>	<u>40</u>
<u>Rock cutting</u>	<u>40</u>	<u>425</u>

RE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE # 009

MWD/MSD/MGD 12-14-11
 CIRCLE ONE

DATE



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:
TATA Subdivision 1 A.E. Mullinix Rd
Subdivision/Property Name Lot# Road Name

The well site has been staked by Vanmar Associates
(professional land surveyor or company employing professional land surveyors)
on 10/3/11 (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

