

C1 00828

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER A 35197

DATE RECEIVED

DATE WELL COMPLETED 032786

DEPTH OF WELL 245 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1290

OWNER GOOD ISR BUILDERS INC. STREET OR RFD HOMEMOOD RD. TOWN ELICOTT CITY SUBDIVISION HOMEMOOD SECTION LOT 6

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for SAND stone and GRAY GRANITE.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y). TYPE OF GROUTING MATERIAL: CEMENT BENTONITE CLAY. NO. OF BAGS 45, NO. OF POUNDS 638.

CASING RECORD. casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE. Nominal diameter 6 inch, Total depth 28 feet.

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), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

DEPTH (nearest ft.) table with rows for EACH SCREEN and columns for depth measurements.

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

DRILLERS IDENT. NO. 238. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

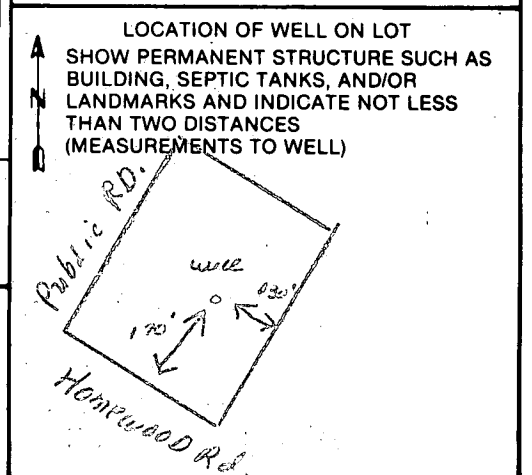
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER). T (E.R.O.S.), WQ, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST. HOURS PUMPED 3. PUMPING RATE 4 gal. per min. METHOD USED TO MEASURE PUMPING RATE: bucket. WATER LEVEL 40 BEFORE PUMPING, 163 WHEN PUMPING. TYPE OF PUMP USED: submersible.

PUMP INSTALLED. DRILLER WILL INSTALL PUMP YES (NO). TYPE OF PUMP INSTALLED: submersible. CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



B 1 3955

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

HO-81-1293

fill in this form completely

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

3-248  
3AD

please print or type

Date Received 12/27/85

OWNER INFORMATION

Goodier Builders Inc. 233 Deep Dale Drive Timonium MD 21093

B 3

LOCATION OF WELL

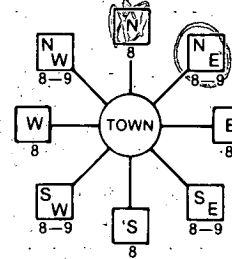
HOWARD COUNTY HOMewood SUBDIVISION SECTION 44 LOT 6 ELLIOTT CITY MILES FROM TOWN 1.0

DRILLER INFORMATION

Joseph L. Mayne 238 License No. 80 Joseph L. Mayne Well Drilling 5512 Ridge Rd. Mt. Airy 21771 12/26/85

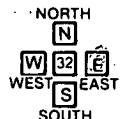
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Homewood Road NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



160 DISTANCE FROM ROAD ENTER FT or MI FT

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 3 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME COUNTY NO. A-35197 OEP SIGNATURE DATE ISSUED 01/07/86 STATE HEALTH INSERT S 07/07/86 EXP. DATE NORTH GRID 511000 EAST GRID 0827000

APPROXIMATE DEPTH OF WELL 240 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

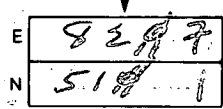
BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary DRive-POINT other:

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

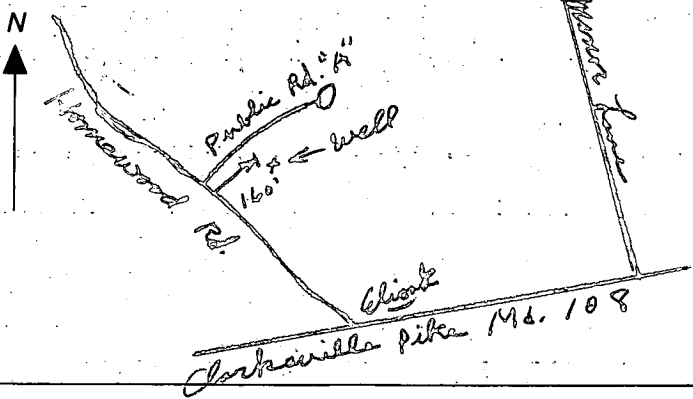
- 1. WELL 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE



Location of 28' casing 1 1/2' - above ground 25' - open 7' - large cement

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



Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GAP

FORCE BN PERMIT NO. HO-81-1293

SPECIAL CONDITIONS

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-N Ellicott Mills Drive  
Ellicott City, MD 21043

Fax 313-2640 / 313-2640  
APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation \_\_\_\_\_  
Replacement \_\_\_\_\_

Receipt # \_\_\_\_\_  
Date 4/22/95

Name of Installer Robert L. Peeler Co. Inc. Telephone 761-4655

License Number 2122  
Certified Well Pump Installer  Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner BAPTIST Telephone 785-1405  
Subdivision Point of View Lot # 6 Well Tag # HO-01-1290  
Site Address 11200 McFee Way

Pump  
1. Type  
a. Deep well jet \_\_\_\_\_  
b. Shallow well jet \_\_\_\_\_  
c. Submersible   
2. Make Grundfos  
3. Model # ED2707-301  
4. Capacity 7 GPM  
5. Pump exceeds well capacity Yes  No \_\_\_\_\_  
6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No   
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards  Other \_\_\_\_\_

Motor  
1. Horsepower 3/4  
2. RPM 3450  
3. Voltage \_\_\_\_\_  
a. 110 \_\_\_\_\_  
b. 220

Pitless Adapter  
1. Make MacAlister  
2. Model # TT800  
3. Depth 42"

Tank capitive air  
1. Capacity 62 GALS.  
2. Pressure relief valve?

Piping  
1. Type PVC  
2. Size 1"  
3. NSF and/or BOCA Code approved   
4. Depth of supply line 42"

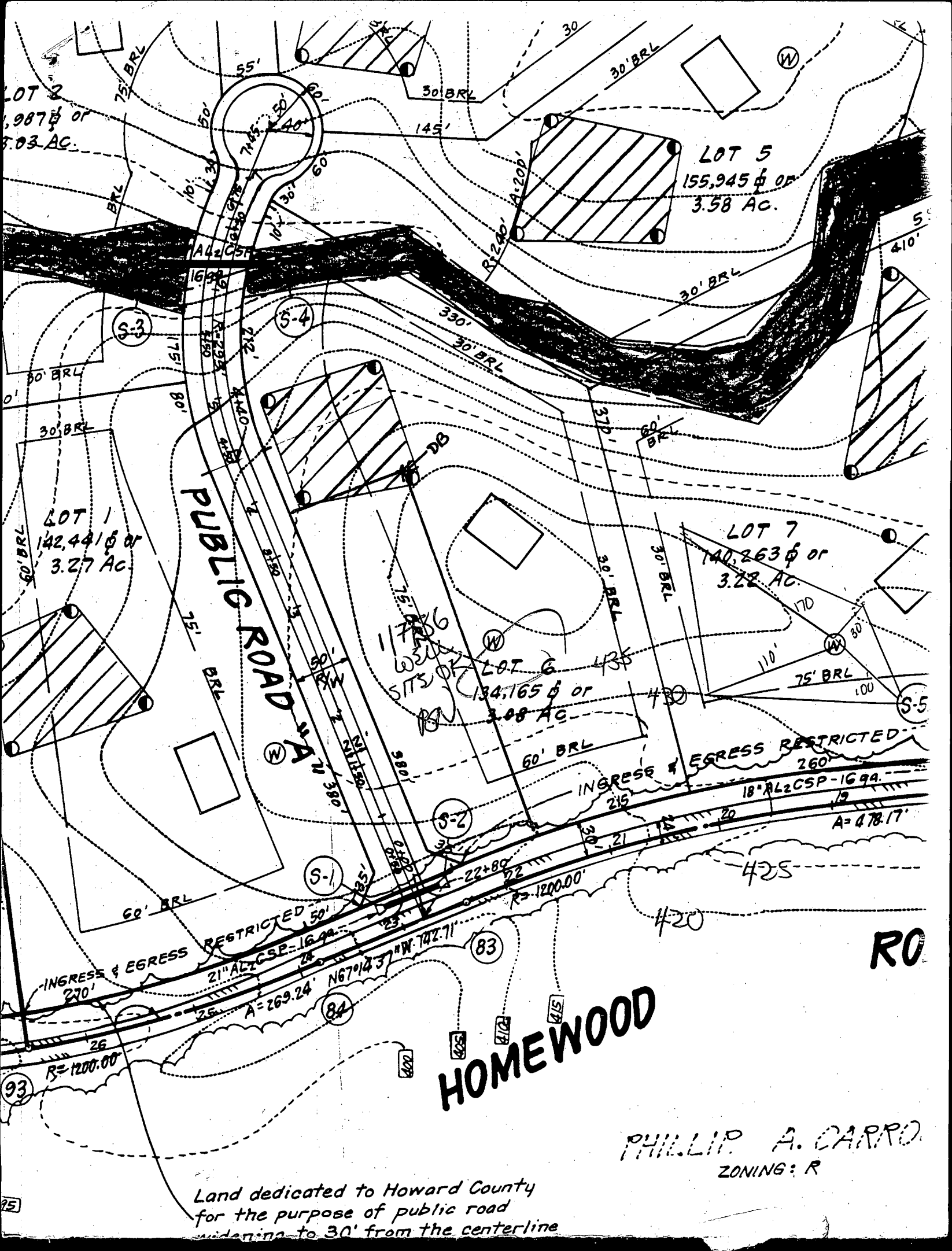
Well data  
1. Depth 245 ft.  
2. Yield 4 GPM  
3. Static water level \_\_\_\_\_ ft.  
4. Will water supply be disinfected by installer?

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Robert L. Peeler  
Date: 4/22/95

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



LOT 2  
1,987 ± of  
3.03 AC.

LOT 5  
155,945 ± of  
3.58 AC.

LOT 1  
142,441 ± of  
3.27 AC.

LOT 7  
140,263 ± of  
3.22 AC.

LOT 6  
134,165 ± of  
3.08 AC.

**PUBLIC ROAD "A"**

**HOMWOOD**

**R0**

PHILLIP A. CARRO  
ZONING: R

Land dedicated to Howard County  
for the purpose of public road  
widening to 30' from the centerline