

C1 2457

SEQUENCE NO. (DENV. 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 A37076

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 070589

22 26 240

28 37 40-88-0660

OWNER KERWIN HOMES last name first name TOWN CLARKSVILLE STREET OR RFD HIGHLAND RD SUBDIVISION HIGHLAND MEADOWS SECTION 1 LOT 12

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, Shale, Soft Brown Mica, Green Mica, Brown Mica, Gray Mica, Brown Mica, Gray Mica, Brown Mica, Granite.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 10 NO. OF POUNDS 1000 GALLONS OF WATER 50 DEPTH OF GROUT SEAL (to nearest foot) from 1 ft. to 2 ft.

CASING RECORD casing types insert appropriate code below MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot) ST 16 33

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

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

DEPTH (nearest ft.) H 0 31 240

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

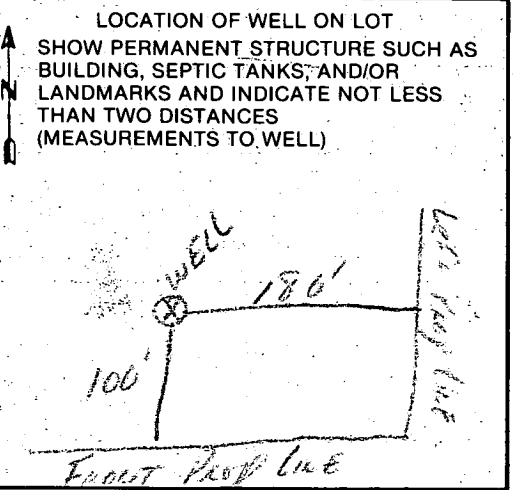
DRILLERS IDENT. NO. 40 DRILLERS SIGNATURE SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

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 (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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 WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)



COUNTY

B 1 9143 SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HD-88-0660
fill in this form completely

Date Received (APA) 050889
OWNER INFORMATION
KERWIN HOMES, INC
24024 FREDERICK RD
CLARKSBURG MD 20871

B 3 LOCATION OF WELL
HOWARD
HIGHLAND MEADOWS
SECTION 12 LOT 12
CLARKSVILLE
MILES FROM TOWN 2 MI

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Inc.
9265 Brown Church Rd., Mt. Airy, Md. 21771
Signature Date 5/4/89

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NARROW LEAF CT
DISTANCE FROM ROAD 125 FT

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
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)

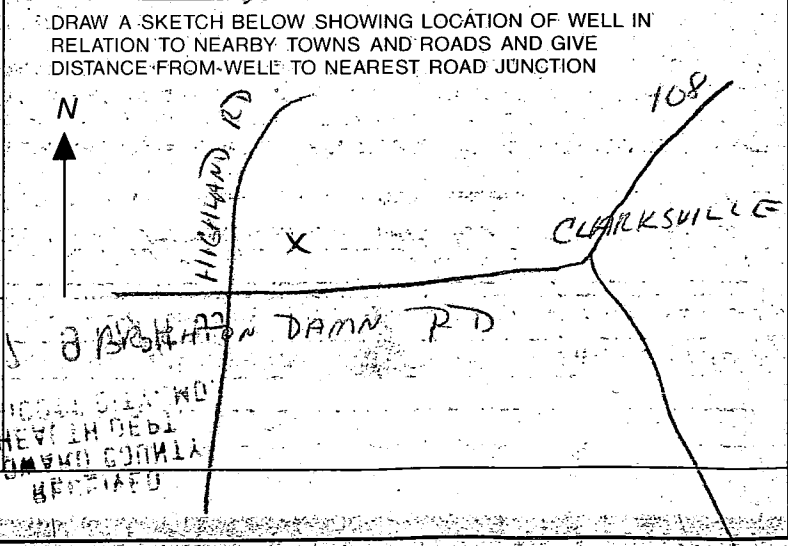
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD A37076
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 053189 Mark E. Rifkin 11/30/89
NORTH GRID EAST GRID

APPROXIMATE DEPTH OF WELL 500 FEET
APPROXIMATE DIAMETER OF WELL 6 INCH

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 500 5
N 498 8

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

REPLACEMENT OR DEEPENED 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
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER
FORCE INITIALS PERMIT NO. HD-88-0660
SPECIAL CONDITIONS

3/16/95
H100

Final
3/16/95
CWB

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date 3/14/95

Name of Installer William Morrow

Telephone _____

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber # 18612

Name of Property Owner DAVID BAXTER Telephone 410 880-1999
Subdivision Highland Meadows Lot # 12 Well Tag # HO-88-0660
Site Address 13500 NARROW LEAF COURT

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
- Make JACUZZI
- Model # 2445079004 7547-12
- Capacity 7 GPM
- Pump exceeds well capacity Yes _____ No
- If Yes, is low pressure cutoff switch installed? Yes No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other _____

Motor

- Horsepower 3/4
- RPM 3450
- Voltage 230
 - 110 _____
 - 220

Pitless Adapter

- Make HAFVARD
- Model # PT 800
- Depth 42"

Tank

- Capacity 34 gallons wx-205
- Pressure relief valve? 75psi

Piping

- Type Polyster Deep Well
- Size 1"
- NSF and/or BOCA Code approved _____
- Depth of supply line 220'

Well data

- Depth 240 ft.
- Yield 10 GPM
- Static water level 108 ft.
- Will water supply be disinfected by installer? YES

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: William Morrow #18612
Master plumber

Date: _____

ORANGE

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

HD-215

Notes: Final per below & above
3/16/95 (1) Saw 1" at casing & (some) 3" from
home - all covered otherwise
CWB