

C 1 1362 SEQUENCE NO. (OEP 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 A 31137

Date Received (OEP use only)

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

7/7/82

260 (TO NEAREST FOOT)

HO-73-4076

OWNER Miles Warren G. last name first name

STREET OR RFD Md. Rte 108 TOWN Clarksville

SUBDIVISION SECTION LOT parcel 252 #2

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 Brown Shale, Sand, Gray Mica rock.

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 12 NO. OF POUNDS 1128 GALLONS OF WATER 72 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 45 ft.

CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE Nominal diameter top/main casing (nearest inch) Total depth of main casing (nearest foot) S+ 6 50

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 BRONZE HO OPEN HOLE PL PLASTIC OT OTHER

DEPTH (nearest ft.) 48 260

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

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

C 3 (seq. no.)

PUMPING TEST HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 4

METHOD USED TO MEASURE PUMPING RATE air

WATER LEVEL (distance from land surface) BEFORE PUMPING 45 WHEN PUMPING 160

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 YES NO DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

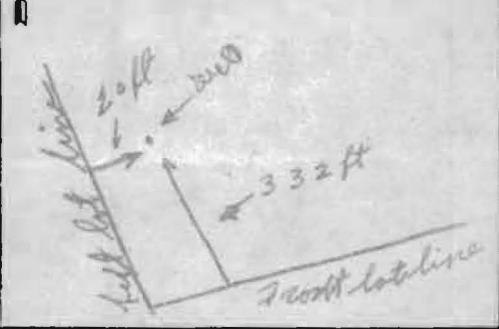
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height) above below LAND SURFACE 2 (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)



- CIRCLE APPROPRIATE BOX 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 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. 238 DRILLERS SIGNATURE Joseph P. Mayne

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

80 SEQUENCE NO. WRA USE ONLY  
(THIS NUMBER IS TO BE PUNCHED IN CIRCLES 3-6 ON ALL CARDS)

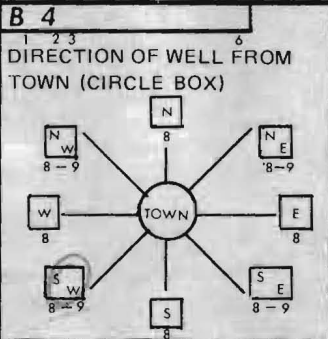
STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
please print or type

WRA PERMIT NUMBER  
HO-73-4076  
fill in this form completely

DATE RECEIVED 11/17/81  
1/4/82 8 (WRA USE ONLY) 13  
9:30 A.M. OWNER INFORMATION  
Miles Warren G.  
LAST NAME OWNER FIRST NAME  
12980 Rt. 108  
STREET OR RFD  
Clarksville Md. 21039  
TOWN STATE ZIP

B 3 LOCATION OF WELL  
1 2 3 6  
COUNTY 8 Howard 21  
SUBDIVISION 23  
SECTION 44 Block 23 46 LOT 48 Parcel 253\*2 50  
NEAREST TOWN 52 Clarksville 71  
MILES FROM TOWN (enter 0 if in town) 73 3/10 76 77 78 MI

B 1 CONTINUED DRILLER INFORMATION  
Joseph L. Mayne 238  
DRILLER'S NAME 77 LICENSE NO. 80  
Joseph L. Mayne 11/12/81  
SIGNATURE DATE



11 Md. 108 Clarksville pike  
NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST EAST  
SOUTH  
34 DISTANCE FROM ROAD 37 3/10 FT  
(CIRCLE APPROPRIATE BOX) 38 39

B 2 WELL INFORMATION  
1 2 3 6  
APPROX. PUMPING RATE (GAL. PER MIN) 8 5 12  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 250 20

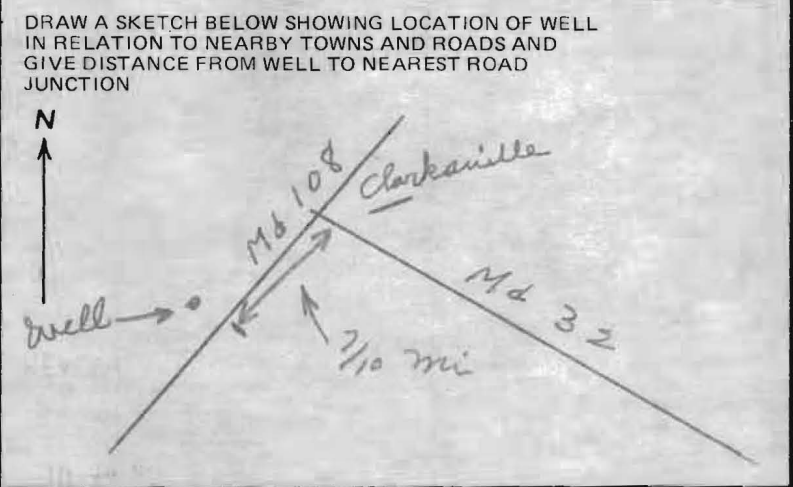
USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX  
50' casing  
2' above gr.  
45' open  
12 - bag cement  
X  
WRITE THE BOX NUMBER FROM THE MAP HERE  
E 8103  
N 4904  
000  
000

APPROXIMATE DEPTH OF WELL 24 200 28 FEET  
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

Method of Drilling (circle one)  
BORED (OR AUGERED) JETTED JETTED & DRIVEN  
30-37 AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC)  
CABLE REVERSE ROTARY DRIVE POINT ROTARY  
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  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 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 (WRA USE ONLY)  
APPROX. PERMIT NUMBER 54 GAP 63  
FORCE INITIALS CONDITIONS 70 71 72 73 74 75 76 77 78 79  
E S IN BOX 70 71 72 73 74 75 76 77 78 79

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
HOWARD COUNTY NAME A 31137 COUNTY NO.  
EHA SIGNATURE STATE HEALTH CIRCLE BOX 41  
MO DAY YR 12 09 81  
CO SIGNATURE DATE  
NORTH 4904 000 EAST 0813 000 ELEV. (FT.)  
GRID 50 55 GRID 57 63 65 68

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
 Bureau of Environmental Health  
 3525-H Ellicott Mills Drive  
 Court House Square  
 Ellicott City, Md. 21043  
 461-9933

4/21/87  
 HARJESS  
 WPS in  
 OK OK  
 (BP 6644)  
 MILES?  
 (BP 6644)

New Installation  Replacement  Receipt # \_\_\_\_\_ Date \_\_\_\_\_

Name of Installer WOLFKEY Telephone \_\_\_\_\_

License number \_\_\_\_\_ Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner MILES Telephone \_\_\_\_\_  
 Subdivision \_\_\_\_\_ Lot # 2 Well tag # HO-73-4076  
 Site Address 12720 CLARKSVILLE PIKE (6520 PAPER PLACE - NEW ADDRESS)  
OLD ADDRESS

<b>Pump</b>	<b>Motor</b>	<b>Pitless Adapter</b>
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth <u>4'</u>
c. Submersible _____	a. 110 _____	<u>ground wire in + mounted</u>
2. Make _____	b. 220 _____	
3. Model # _____		
4. Capacity _____ 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 _____		

<b>Tank</b>	<b>Piping</b>	<b>Well data</b>
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? <input checked="" type="checkbox"/>	2. Size <u>1" blue</u>	2. Yield _____ GPM
<u>mark 10 tanks (glass lined tank)</u>	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
<u>power line in - OK</u>	4. Depth of supply line <u>≈ 4'</u>	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: \_\_\_\_\_

Date: \_\_\_\_\_

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

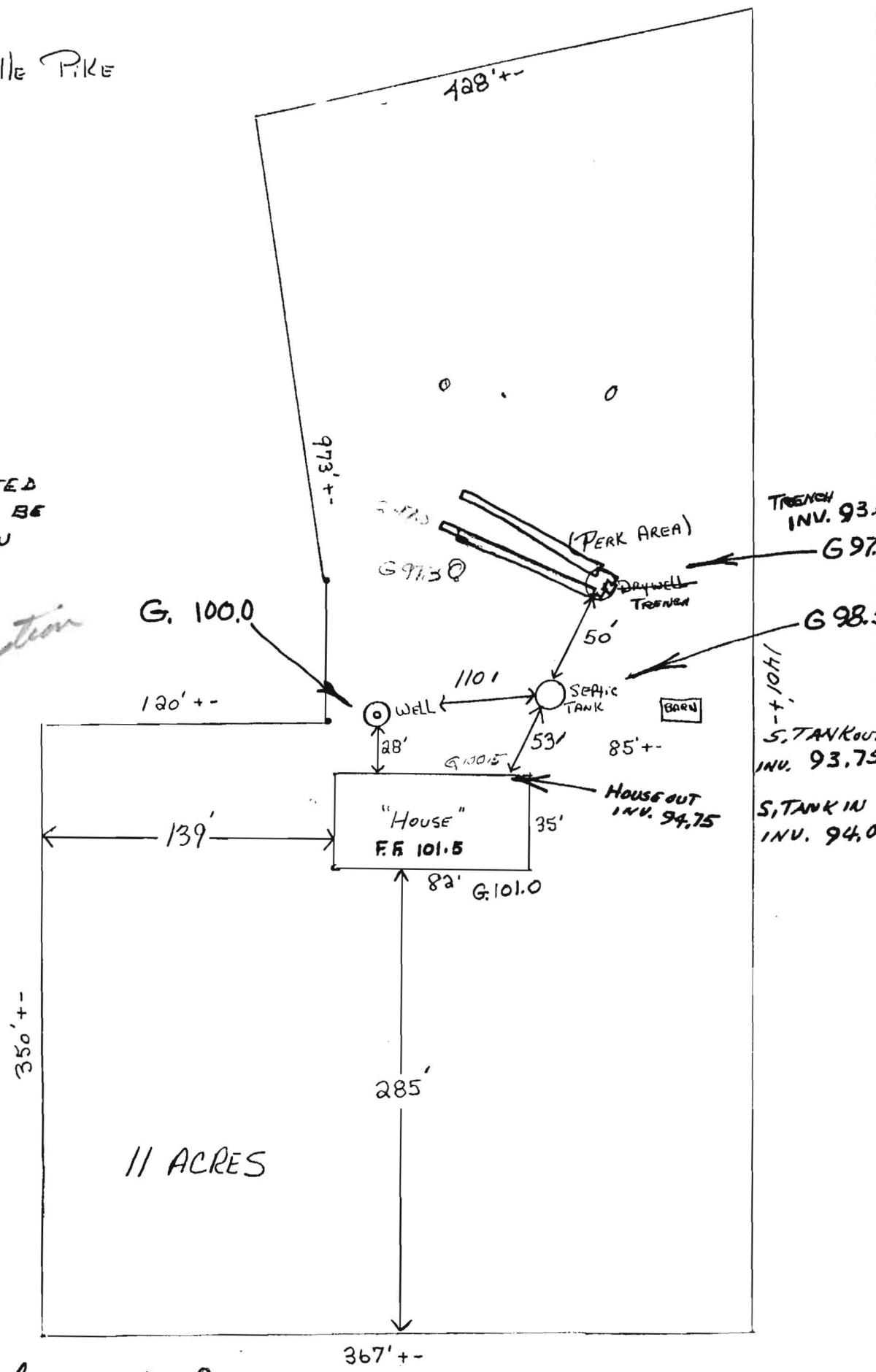
Phot plan for:  
12720 CLARKSVILLE PIKE

OWNER + BUILDER:

G. WARREN MILES  
12980 RT. 108  
CLARKSVILLE, MD.  
21029

- GRADES ESTIMATED
- PIPE INVERT WILL BE MAXIMUM 4' BELOW ORIGINAL GRADE

*Septic tank's location  
OR F.F.*



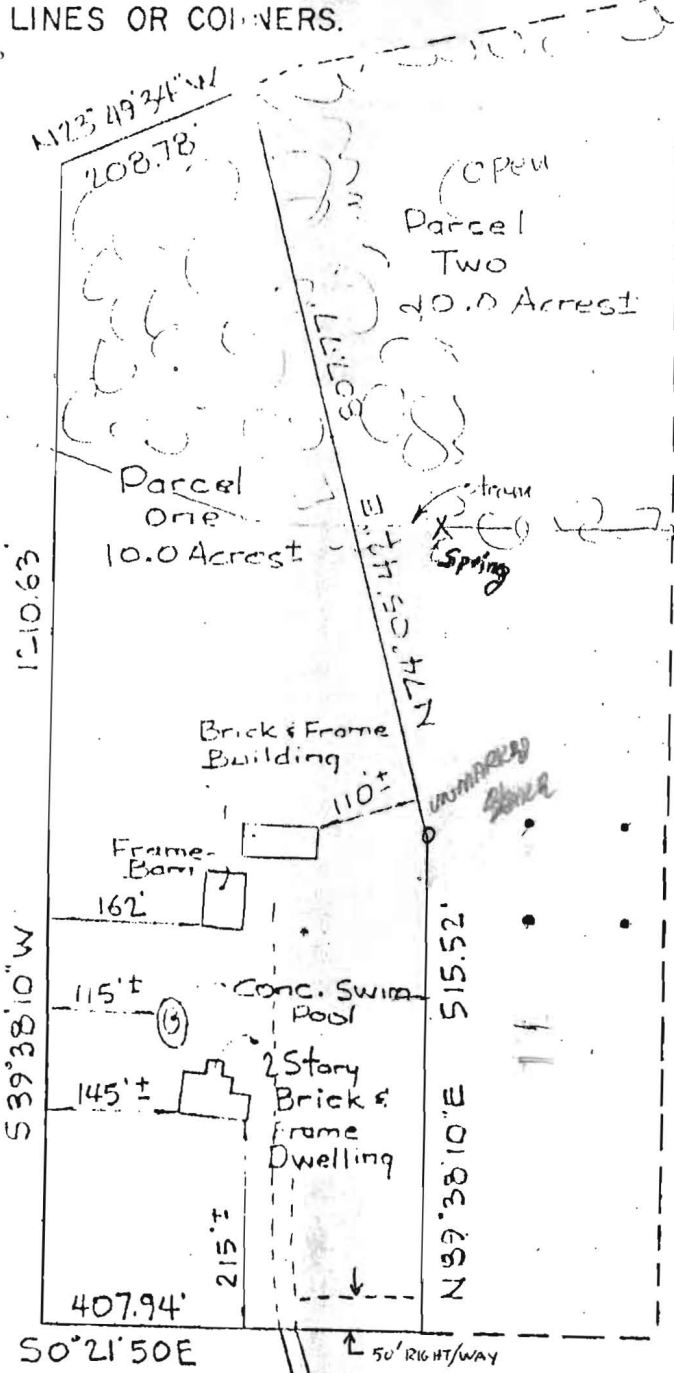
G. Warren Miles  
Aug. 6, 1985

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

Property known as:


HOWARD COUNTY TAX MAP  
 MAP 34  
 BLOCK 23  
 PARCEL 252

DEED REFERENCES:  
 LIBER 257 FOLIO 230  
 LIBER 487 FOLIO 115  
 LIBER 529 FOLIO 659



Map of Property of  
 Henry H. Harjes, Jr.

Right of Way to Maryland  
 Route 108 as described by deeds

<p>CERTIFICATION</p>	<p>SEAL</p>	<p>SCALE: 1"=200 DATE: 9-20-75</p>
<p>This is to certify that I have surveyed the property known as: <u>HOWARD COUNTY TAX MAP MAP 34, BLOCK 23, PARCEL 252</u> for the purpose of locating the improvements thereon, and the improvements are located as shown.</p>	 <p>Axel F. Loen</p>	<p>AXEL F. LOEN          PROFESSIONAL LAND SURVEYOR          730 - 0967          10754 FAULKNER RIDGE CIRCLE          COLUMBIA, MD. 21044</p>