

Building Permit ID: M11000259

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Permit Number	Permit Type	Status		
M11000259	Building/Residential/Mech/Add Alt	Application Acceptance Pend		
Opened Date *	Est Construction Cost	Total Fee Invoiced	Total Pay	Balance
03/16/2011	0.00	138.00	138.00	0.00
Description of Work				
REPLACE 2 HEAT PUMP SYSTEMS WITH GEO-THERMAL SYSTEMS. PLUMBING BY OTHERS				
CAP ID	In Possession Time(hrs)			
11FIR-00000-03311				

3126 Rt 32

(on-line permit application)

3/18/2011

O.K.

111000259

C1 7599 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) FILL IN THIS FORM COMPLETELY PLEASE TYPE COUNTY NUMBER

ST/CO USE ONLY DATE Received MM DD YY DATE WELL COMPLETED 3-4-11 Depth of Well 22 320 26 (TO NEAREST FOOT) FROM "PERMIT TO DRILL WELL" 110-95-20576

OWNER Lilley, Eric STREET OR RFD 3126 Route #32 TOWN W Friendship MD SUBDIVISION Hilltop Farm SECTION LOT 2

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	0	80	
Bin Gray Soft Rock	80	160	
Hard Granite	160	280	
Gray Soft + Rock	280	320	
Hard + Harder	320		

3 closed loops

GROUTING RECORD YES NO
WELL HAS BEEN GROUTED Y N
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 42 NO. OF POUNDS 5100
GALLONS OF WATER 1050
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 320 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) 6.5 Total depth of main casing (nearest foot) 80

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

NUMBER OF UNSUCCESSFUL WELLS: _____

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. M 5-D 106
DRILLERS SIGNATURE _____
(MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 5-D 138

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

C 2 DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
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SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN _____ (NEAREST INCH) from _____ to _____

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 88

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T _____ (E.R.O.S.) W O _____

70 _____ 72 _____ 74 75 78 _____

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 3126 Route #32

PUMPING TEST

HOURS PUMPED (nearest hour) _____

PUMPING RATE (gal. per min.) _____

METHOD USED TO MEASURE PUMPING RATE _____

WATER LEVEL (distance from land surface)

BEFORE PUMPING _____ ft.
WHEN PUMPING _____ 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 (CIRCLE) (YES OR NO) 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

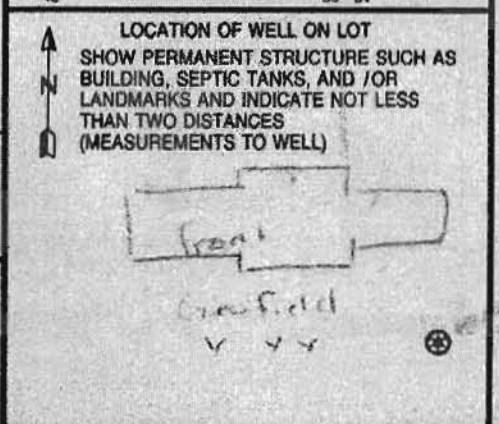
CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____

PUMP HORSE POWER _____

PUMP COLUMN LENGTH (nearest ft.) _____

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE
 - below } (nearest foot)



24.10: 03-310663

EMERGENCY/TEMP NO. IF ANY

M1000259

B 1	8725	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER HO-95-2056 <small>fill in this form completely</small>
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OWNER INFORMATION

Date Received (APA) **2/14/2011**

8 MM **00** YY **13** DD

15 Last Name **Miller** **34** First Name **Eric P.**

36 Street or RFD **3126 Route 32** **55**

57 Town **West Friendship** **70** State **MD** **72** Zip **21774** **76**

B 3 **LOCATION OF WELL**

8 COUNTY **Howard** **21**

23 SUBDIVISION **Hill Top Farms** **42**

SECTION **44** **46** LOT **2** **48** **50**

52 NEAREST TOWN **West Friendship** **71**

MILES FROM TOWN (enter 0 if in town) **0** **M I**
73 **78** **77** **76**

DRILLER INFORMATION

76 Driller's Name **Marshall Anette** **81** License No. **M 5 D 106**

Firm Name **Allied Environmental Svcs**

Address **PO Box 139, Annapolis Junction MD 21010**

Signature **Marshall Anette** **Date** **2/14/11**

B 4

1 **2** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 NEAR WHAT ROAD **(3126) E. Route 32** **30**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 **525** **37** DISTANCE FROM ROAD
ENTER FT OR MI **38** **39**

TAX MAP: **15** BLK: **22** PARCEL **34**

B 2 **WELL INFORMATION**

1 **2** APPROX. PUMPING RATE (GAL. PER MIN.)

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

8 **12** **14** **20**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL **2 Closed Loops**

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard (13) **A35631**

COUNTY NAME COUNTY NO.

STATE SIGNATURE **Brian Baker** INSERT S **41**

DATE ISSUED **2/28/2011** **2/28/2012**

43 MM **00** **48** CO SIGNATURES **EXP. DATE**

NORTH GRID **529** **000** EAST GRID **809** **000**

50 **55** **57** **63**

APPROXIMATE DEPTH OF WELL **320** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTARY AIR-PERCUSSION ROTARY (Hydraulic Rotary)

37 CABLE REVERSE-ROTARY DRIVE-POINT

other _____

REPLACEMENT OR DEEPEINED 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

39 **S** THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) **41** _____ **52**

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

APPROP. PERMIT NUMBER _____ **G** _____

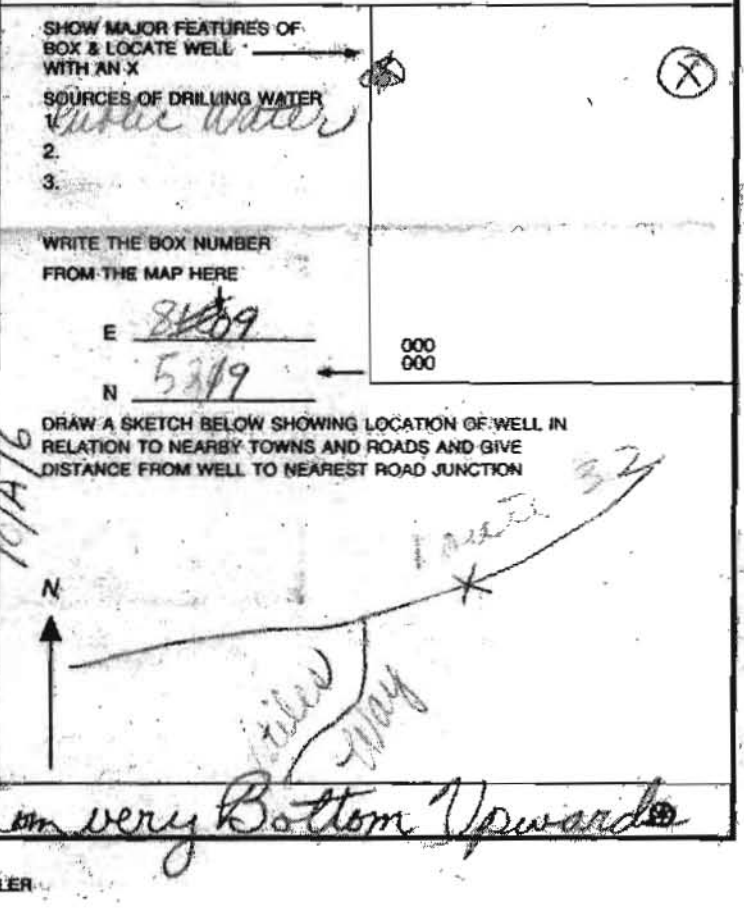
PERMIT No. **HO-95-2056**

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD REVIEW THIS SECTION

Drill Borehole from very Bottom Upward with Tremie Pipe

DRILLER



BGE