

Date Received (OEP use only) _____ DATE WELL COMPLETED **7/25/72** Depth of Well **180** PERMIT NO. FROM "PERMIT TO DRILL WELL" **MD-73-4247**
 (TO NEAREST FOOT)

OWNER **Adlegate Bruce** last name first name
 STREET OR RFD **Point Hitch Road** TOWN **Glenwood**
 SUBDIVISION **Countryside** SECTION _____ LOT **16**

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	
Top Soil	0	2	
Brown Clay	2	4	
Blue mica	4	67	
Brown mica	67	69	✓
Blue mica	69	140	
Green mica	140	147	✓
Blue mica	147	180	

GROUTING RECORD
 WELL HAS BEEN GROUTED YES NO
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL
 CEMENT BENTONITE CLAY
 NO. OF BAGS **4** NO. OF POUNDS **700**
 GALLONS OF WATER **20**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **18** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST CO
 STEEL CONCRETE
 PL OT
 PLASTIC OTHER
 MAIN CASING TYPE ST **6** - **21**
 Nominal diameter top/main casing (nearest inch) Total depth of main casing (nearest foot)

OTHER CASING (if used)
 diameter inch depth (feet) from to
 E A C H C A S I N G

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

C2 (Seq. no.)
 DEPTH (nearest ft.)
 E A C H S C R E E N
1 HO **19** **180**
2 _____
3 _____
 SLOT SIZE _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

CIRCLE APPROPRIATE BOX
 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. **70**
 DRILLERS SIGNATURE **George P. Tasterday**
 (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 CIRCLE BOX F

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

C3 (Seq. no.)
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **6**
 METHOD USED TO MEASURE PUMPING RATE **BUCKET**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **40**
 WHEN PUMPING **63'6"**
 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)
 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 LAND SURFACE
 below _____ (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)
 Lot lines
 Well C 250'

EMERGENCY/TEMP. NO. IF ANY

B 1 7290

SEQUENCE NO. (OEP USE ONLY)

830 Pump test 3 hrs.
11:00 Grant
8/25/82

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

OEP PERMIT NUMBER

HO-73-4247

fill in this form completely

Date Received

07/16/82

(OEP Use Only)

OWNER INFORMATION
KENNETH
Allegiate Bruce

11651101 Batchle Forest

11651101 Batchle Forest
Annapolis Md 20813

LOCATION OF WELL

COUNTY Howard

SUBDIVISION Country Side Est.

SECTION 23 LOT 16

NEAREST TOWN Glenwood
MILES FROM TOWN (enter 0 if in town) 2

B 1 Continued DRILLER INFORMATION

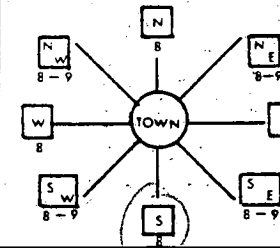
George Easterday 40
Driller's Name 77 License No. 80

George Easterday
Firm Name 9265 Brown Church Rd Umhain Md

George F Easterday 7-14-82
Address Signature Date

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



RE 97
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
WEST EAST SOUTH NORTH

2,100
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 600

USE FOR WATER (CIRCLE APPROPRIATE BOX)

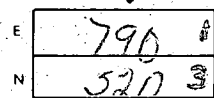
- HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- TEST,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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

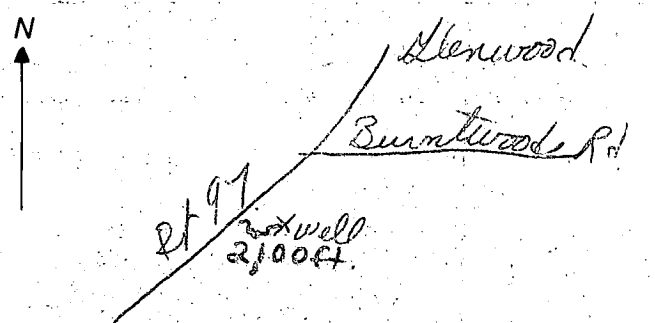
- 1. well
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE



Location OK
21' casing
1 1/2' above gr.
8' open
18' jet
24' - bags cement
8/25/82 JS

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



APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST 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 DEEPEINED 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 DEEPEIN AN EXISTING WELL

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

APPROX. PERMIT NUMBER GAP

FORCE FS INITIALS IN BOX PERMIT No. HO-73-4247

HOWARD COUNTY NAME A28869 COUNTY NO.

OEP SIGNATURE DATE ISSUED 081082

CO SIGNATURE STATE HEALTH CIRCLE BOX 41

NORTH GRID 522 EAST GRID 0791 EXPIRES 02/09/83

SPECIAL CONDITIONS

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

5/3/91 Friday
 P.M. Final OK C.B.D.
 OVER

APPLICATION FOR PITLESS ADAPTER WELL PUMP AND PRESSURE TANK INSTALLATION

PITLESS ADAPTER
 WELL LINE

New Installation _____ Receipt # _____
 Replacement _____ Date _____

Name of Installer _____ Telephone _____

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

Name of Property Owner _____ Telephone _____
 Subdivision County Sides Est Lot # 16 Well Tag # HO-73-4242
 Site Address 3651 Point View Road

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
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 _____		

Tank	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line _____	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: _____

5/3/91 Left card

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

5/3/91 { Note: ① {Left original} + card at casing top. white sheet }
 ② They are requested to send a check to above address for inspection.