

C1 0555 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

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

COUNTY NUMBER P 48169 OK (KIS) 2-1-02

ST/CO USE ONLY DATE RECEIVED MM DD YY 8 13

DATE WELL COMPLETED MM DD YY 12 17 01 15 20

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 170-94-3295 28 29 30 31 32 33 34 35 36 37

OWNER Dennis last name 18805 Penn Shop Rd first name TOWN Mt. Airy SUBDIVISION SECTION LOT Map 6, P. 12

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 FROM TO check if water bearing. TOP SOIL 0 3 BROWN SHALE + MICR 4 50 BLUE SLATE 5 30 GOT WATER AT 125 250

GROUTING RECORD yes no WELLS HAS BEEN GROUTED (Circle Appropriate Box) Y 44 N 44 TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 18 NO. OF POUNDS 108 GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 38 BOTTOM 58 ft. (enter 0 if from surface)

CASING RECORD casing types insert appropriate code below. MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 67 Total depth of main casing (nearest foot) 60

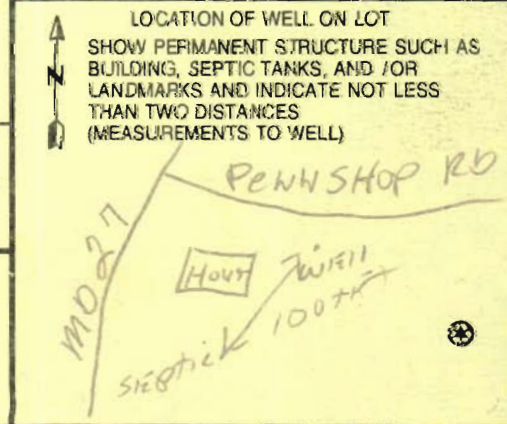
OTHER CASING (if used) diameter inch depth (feet) from to

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

C 2 DEPTH (nearest ft.) 1 2 10 59 300. E 1 3 9 11 15 17 21. A 2 23 24 26 30 32 36. S 3 38 39 41 45 47 51. R E E N SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

C 3 PUMPING TEST 1 2 HOURS PUMPED (nearest hour) 3 8 9 PUMPING RATE (gal. per min.) 6 11 15 METHOD USED TO MEASURE PUMPING RATE AIR WATER LEVEL (distance from land surface) BEFORE PUMPING 20 17 20 ft. WHEN PUMPING 250 22 25 ft. TYPE OF PUMP USED (for test) A air 27 P piston 27 T turbine 27 C centrifugal 27 R rotary 27 O other (describe below) 27 J jet 27 S submersible 27

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) 37 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above } LAND SURFACE - below } (nearest foot)



NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES Y NO 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. DRILLER'S LIC. NO. 1 M SD 143 Driller's Signature: Larry Horley LIC. NO. 1 M D 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 68 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.F.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 4822
1 2 3 6

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

HO-94-3295
70 fill in this form completely 79

Date Received (APA)

8 MM DD YY 13

OWNER INFORMATION 8819

DENNIS DIANE

15 Last Name Owner First Name 34

18805 PENN SHOP RD

36 Street or RFD 55

MT. AIRY, MD 21771

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

George F. Easterday transferred to Perry Harley
M W D 040 143
Driller's Name License No. 81

L. Franklin Easterday, Inc. Perry Harley
Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771

Address

Signature Date 12/15/2001

Signature Date

Signature Date

Signature Date

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B 3

Howard

LOCATION OF WELL

8 COUNTY 21

23 SUBDIVISION 42

SECTION 44 46 LOT 48 50

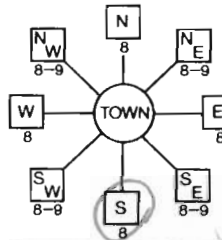
Mt. Airy

52 NEAREST TOWN 71

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

B 4

1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



18805 Penn Shop Rd

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



350 37

DISTANCE FROM ROAD: ENTER FT OR MI 38 39

TAX MAP: 6 BLK: 2 PARCEL 12

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- INDUSTRIAL, COMMERCIAL, DEWATERING
- PUBLIC WATER SUPPLY WELL
- TEST, OBSERVATION, MONITORING
- GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13
COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 12/15/2001 Brian Baber 12/15/2002

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 551 000 EAST GRID 752 000

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

12/17/01 Group location ok using 60' KB/APP 12/17/01 10:00

SOURCES OF DRILLING WATER

- 1.
- 2. wells
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

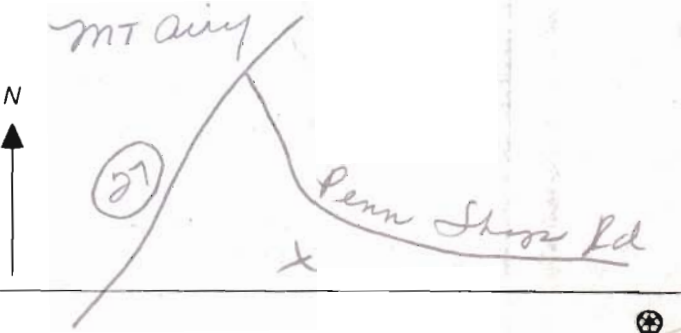
E 750-750

N 550'

000 X

000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE A8 DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST 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 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- 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 (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G

PERMIT No. HO-94-3295
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

4822

SECTION
NO. 1

DATE OF
REVISION

WEST VIRGINIA
8213

DENNIS DIANE

1805 PENN SHOP RD

MT AIRY, MO CITY

WELL INFORMATION

APPROXIMATE DATE OF WELL

APPROXIMATE DEPTH OF WELL

WELL IDENTIFICATION

APPROXIMATE DATE OF WELL

APPROXIMATE DEPTH OF WELL

WELL IDENTIFICATION

APPROXIMATE DATE OF WELL

APPROXIMATE DEPTH OF WELL

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APPROXIMATE DEPTH OF WELL

WELL IDENTIFICATION

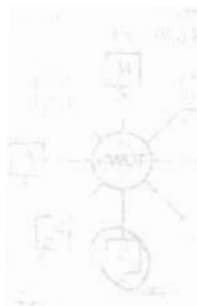
APPROXIMATE DATE OF WELL

APPROXIMATE DEPTH OF WELL

WELL IDENTIFICATION

APPROXIMATE DATE OF WELL

APPROXIMATE DEPTH OF WELL



How

Record.
12/14/01

SPC-11

B 1 - 1562
1 2 3 6

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

HO - 94 - 3295
70 fill in this form completely 79

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13
Dennis DIAVE
15 Last Name Owner First Name 34
18805 PENNSHOP RD
36 Street or RFD 55
MT AIRY MD 21771
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

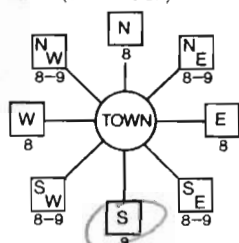
8 COUNTY HOWARD 21
23 SUBDIVISION 42
SECTION 44 46 LOT 48 50
52 NEAREST TOWN MT AIRY 71
MILES FROM TOWN (enter 0 if in town) 1 M 73 76 77 78

DRILLER INFORMATION

Denny HARLEY M 5 D 143
Driller's Name 76 License No. 81
HARLEY DRILLING & PUMPS
Firm Name
Box 160 WALKERSVILLE MD
Address
Denny HARLEY 12-12-01
Signature Date

B 4

1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



18805 PENNSHOP RD
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W
EAST E
SOUTH S
34 50 37
DISTANCE FROM ROAD ENTER FT OR MI 38 39
TAX MAP: 6 BLK: PARCEL 12

B 2 WELL INFORMATION

APPROX. PUMPING RATE 3
(GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED 500
(GAL. PER DAY) 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

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME COUNTY NO.
STATE
SIGNATURE INSERT S 41
DATE ISSUED
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 50 000 55 EAST GRID 57 000 63

APPROXIMATE DEPTH OF WELL 300 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST 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 DEEPEMED WELLS
(CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
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- 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 DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

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

APPROX. PERMIT NUMBER 54 G A P 63
PERMIT No. HO - 94 - 3295
70 71 72 73 74 75 76 77 78 79

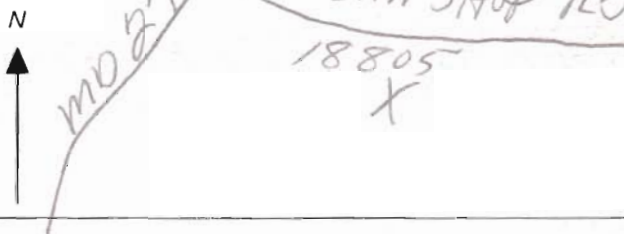
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



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



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

USE FOR WATER TREATMENT

DO NOT STOP POTABLE SUPPLY TREATMENT

INDUSTRIAL COMPLEX

PLANT

WELL

WATER

QUALITY

CONTROL

REPORT

DATE

TIME

BY

INITIALS

SIGNATURE

TITLE

DEPARTMENT

ADDRESS

CITY

STATE

ZIP

PHONE

FAX

EMAIL

WEBSITE

1582



RECEIVED

JAN 31 2002

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

12/5/01
1=00

SITE INSPECTION SHEET

OWNER: Diane Dennis

DATE REQUESTED: _____

PHONE #: _____

CONTRACTOR: Easterday

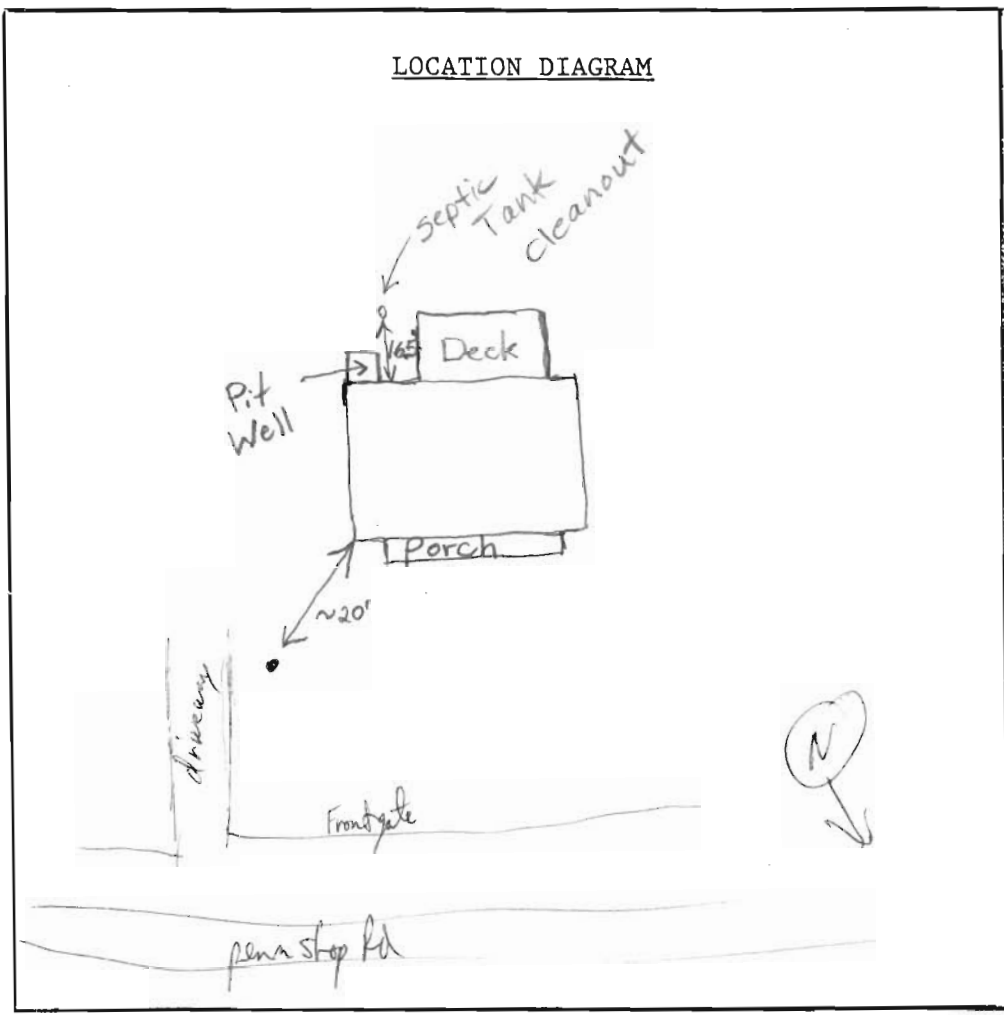
ADDRESS: 18805 Penn Shop Rd

WELL TAG #: _____

COUNTY #: _____

PROPOSAL: ex. older well dry, replacement well requested

LOCATION DIAGRAM



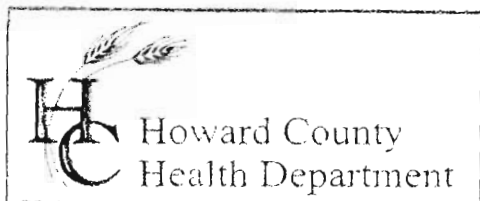
COMMENTS: 60' deep casing # of bags 18 legam

great inspection

DATE: 12-17-01

INSPECTOR: RP/KS





3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

April 7, 2003

Diane Dennis
18805 Penn Shop Road
Mount Airy, MD 21771

RE: **Replacement Well Issues**
18805 Penn Shop Road
Well Permit #: HO-94-3295

Dear Ms. Dennis

It is our understanding that you have contacted our Community Services Program at (410) 313-1773 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04).

Additionally, a condition of the well drilling permit was the proper abandonment and sealing of the existing well. This abandonment process is important to restore the subsurface geologic conditions, which existed before the well was drilled and to help protect the groundwater resource from potential contamination. This should be completed as soon as possible to avoid delays in the issuance of potability certification and any future permit approval requests for this property. A licensed well driller, who may perform the work without inspection, must accomplish the well abandonment process; however, the driller must then file an abandonment report with this office.

Failure to confirm the potability of this well water supply by completion of water sampling requirements or by not complying with an abandonment schedule could result in enforcement action. The sampling is free of charge, and if you have any questions, or would like to discuss this matter further, please call me at (410) 313-1771. Thank you for your attention to these important matters.

Sincerely,

Brian Baker

Brian Baker
Registered Environmental Sanitarian
Well and Septic Program

cc: Community Services Program
File

