C 1 [illegible]

SEQUENCE NO. (MDE USE ONLY)

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

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

DATE WELL COMPLETED MM 5 DD 11 YY 2024 (15 20)

Depth of Well 22 400' 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-22-0121 (28 29 30 31 32 33 34 35 36 37)

OWNER Cyber Eric J/E Reynold (last name, first name)

WELL SITE ADDRESS 11478 Radio Rd Clarksville TOWN Fulton

SUBDIVISION Lot 14 4.515 ac Rd Widen Plat SECTION ____ LOT 14

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	FEET TO	check if water bearing
Sil. Sndy, Wh	0	10'	
Schst, Red, Wh	10'	40'	
Quartz Granite	40	43'	✓
Schst Granite, Rd	43'	55	
Schstic Gneiss High Mica	55'	400'	✓
Installed 1.25" x 400' closed loop Hdpe U bend			

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.

DRILLERS LIC. NO. MWD 587

DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. JWD 422

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y 44 no N 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM 45 46 BENTONITE CLAY BC 45 46

NO. OF BAGS 21 NO. OF POUNDS 1050

GALLONS OF WATER 399

DEPTH OF GROUT SEAL (to nearest foot)

from 0' 48 TOP 52 ft. to 400' 54 BOTTOM 58 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 (60 61) Nominal diameter top (main) casing (nearest inch)! 6 (63 64) Total depth of main casing (nearest foot) 60 (66 70)

OTHER CASING (if used) EACH CASING — 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

C 2 DEPTH (nearest ft.)

EACH SCREEN 1 40 60 17 400 2 23 24 26 30 32 36 3 38 39 41 45 47 51

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH) 56 60

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 — from ____ to ____ 68

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

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

70 ____ TELESCOPE CASING; 72 ____ LOG INDICATOR; 74 75 76 OTHER DATA

C 3 (1 2)

PUMPING TEST
HOURS PUMPED (nearest hour) NA (8 9)

PUMPING RATE (gal. per min.) NA (11 15)

METHOD USED TO MEASURE PUMPING RATE N/A

WATER LEVEL (distance from land surface)

BEFORE PUMPING NA (17 20) ft.

WHEN PUMPING NA (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. NA (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) NA (31 35)

PUMP HORSE POWER NA (37 41)

PUMP COLUMN LENGTH (nearest ft.) NA (43 47)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above (49), ~~-~~ below (49) — LAND SURFACE -3 (50 51) (nearest foot)

LATITUDE 39.171664
LONGITUDE 76.910790
(DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryand Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info. may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the pulic and other governmental agencies, if not protected by federal or state law.

MDE/WMA/PER.071

COUNTY

C 1 73823

SEQUENCE NO. (MDE USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 13

ST/CO USE ONLY
DATE Received MM DD YY

DATE WELL COMPLETED 3 11 2004

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-22-0121

OWNER Cobel Eric & Kesmala
WELL SITE ADDRESS 14478 Rowley Rd Clarksville TOWN Fulton
SUBDIVISION Lot 14 4.55Ac Plat Wesleyville SECTION LOT 14

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	FEET TO	check if water bearing
Silt, Sandy, Mica	0'	10'	
Schist Rd. weathered	10'	38'	
Quartz Gravel's	38	40	✓
Schist Rd, fractured	40	70'	
Schist & Gneiss High Mica	70'	400	✓

I installed 1.25" x 400' Closed loop hdpe U-bend

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.

DRILLERS LIC. NO.: M 14 D 5 3 7
Keith M Kool
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: J D 4 1 2

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y 44 no N 44

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT CM 45 46 BENTONITE CLAY BC 45 46

NO. OF BAGS 20 NO. OF POUNDS
GALLONS OF WATER 380 ✓

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. (48 TOP 52) to 400 ft. (54 BOTTOM 58)
(enter 0 if from surface)

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)
PL (60 61)	6 (63 64)	52 (66 70)

OTHER CASING (if used)

EACH CASING	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

C 2 DEPTH (nearest ft.)

EACH SCREEN			
1	HO (8 9)	52 (11 15)	400 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 — from ____ to ____ (68)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
70 TELESCOPE CASING | 72 LOG INDICATOR | 74 75 76 OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) NA (8 9)

PUMPING RATE (gal. per min.) NA (11 15)

METHOD USED TO MEASURE PUMPING RATE N/A

WATER LEVEL (distance from land surface)

BEFORE PUMPING NA (17 20) ft.

WHEN PUMPING NA (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. NA (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) NA (31 35)

PUMP HORSE POWER NA (37 41)

PUMP COLUMN LENGTH (nearest ft.) NA (43 47)

CASING HEIGHT (circle appropriate box and enter casing height)
+ above (49) / - below (49) LAND SURFACE -3 (nearest foot) (50 51)

LATITUDE 39.171594
LONGITUDE 76.910875
(DEFAULT COORD. WGS 84)

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MDE/WMA/PER.071

COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 T2453 — SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

STATE PERMIT NUMBER: HO - 22 - 0121

fill in this form completely

Date Received (APA): 2-14-24

OWNER INFORMATION

Coler Erica T/E Reginald
Last Name — Owner — First Name

11428 Rowley Rd.
Street or RFD

Clarksville MD 21029
Town — State — Zip

DRILLER INFORMATION

Stephen DeLosh — M W D 587
Driller's Name — License No.

Connelly & Associates Inc
Firm Name

1513 Tilco Drive Frederick, MD. 21704
Address

Signature — Date 2-14-2024

B 3 LOCATION OF WELL

Howard
COUNTY

Lot 14 4.515A Plat Wesley Hills
SUBDIVISION

SECTION ____ LOT 14

FULTON
NEAREST TOWN

B 4

SOURCES OF DRILLING WATER
1. Private
2.
3.

3/8/2024 - Driller @ 400' on 2nd bucket. Hit water @ 110'.

11428 Rowley Rd.
STREET ADDRESS

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH N, WEST W, EAST E, SOUTH S

DISTANCE FROM ROAD 76 FT

ENTER FT OR MI

TAX MAP 0041 BLK: ____ PARCEL 0417

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): N/A

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): N/A

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
- O OPEN LOOP GEOTHERMAL
- C CLOSED LOOP GEOTHERMAL

3/6/2024 - Driller dug hole on property for water to drain into. Sediment bag

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard — COUNTY NAME — (12) COUNTY NO.

STATE SIGNATURE ____ INSERT S →

DATE ASSIGNED 2/21/2024 — CO SIGNATURE — EXP. DATE 2/21/2025

DON: 3/5/2024 DOT: N/A DOC: 3/11/2024

APPROXIMATE DEPTH OF WELL 400 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

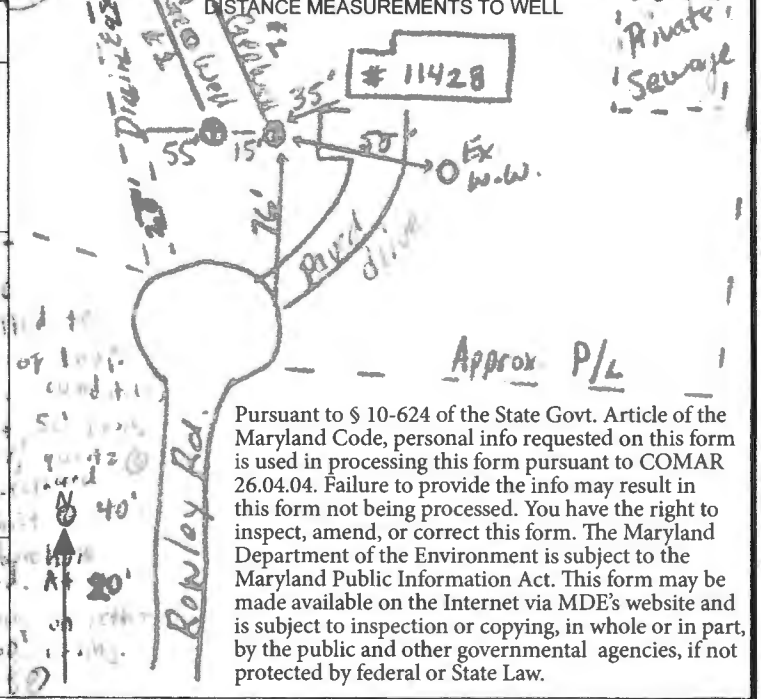
BORED (or Augered) — JETTED — Jetted & DRIVEN
AIR-ROTary — AIR-PERcussion — ROTARY (Hydraulic Rotary)
CABLE — REVerse-ROTary — DRive-POINT
other ____

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) ____

PROPOSED LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



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

APPROP. PERMIT NUMBER ____ G ____

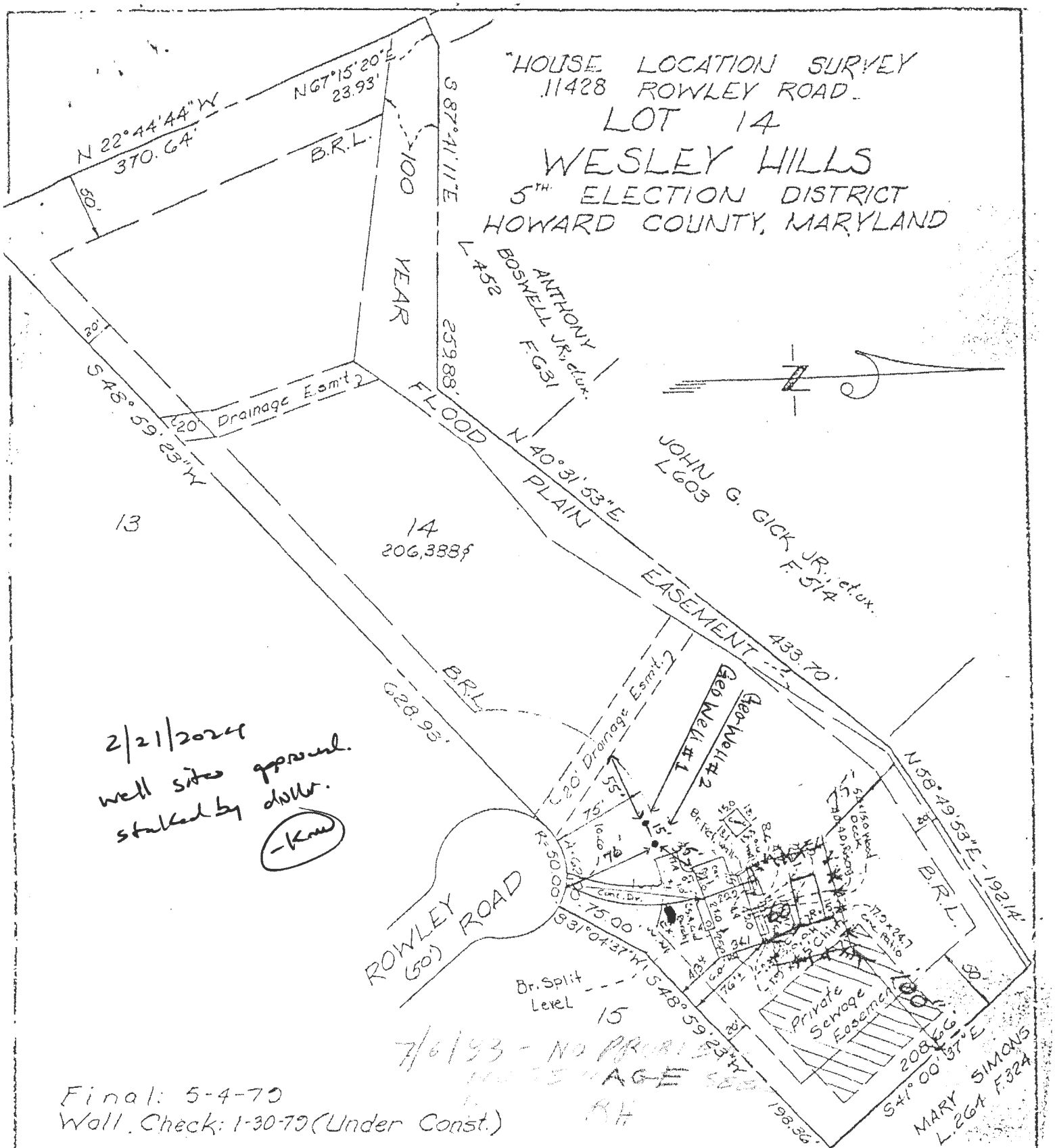
PERMIT No. HO - 22 - 0121

SPECIAL CONDITIONS Grout bottom to top 3/11/2024 - Driller started grout using bentonite.

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

MDE/WMA/PER.071

② COUNTY



SURVEYOR'S CERTIFICATE

I hereby certify that the position of all existing improvements on the above described property has been carefully established by a transit-tape survey and that unless otherwise shown, there are no encroachments.

Peter P. Katz #10319

JOHNSON, McCORDIC & THOMPSON, P.A.

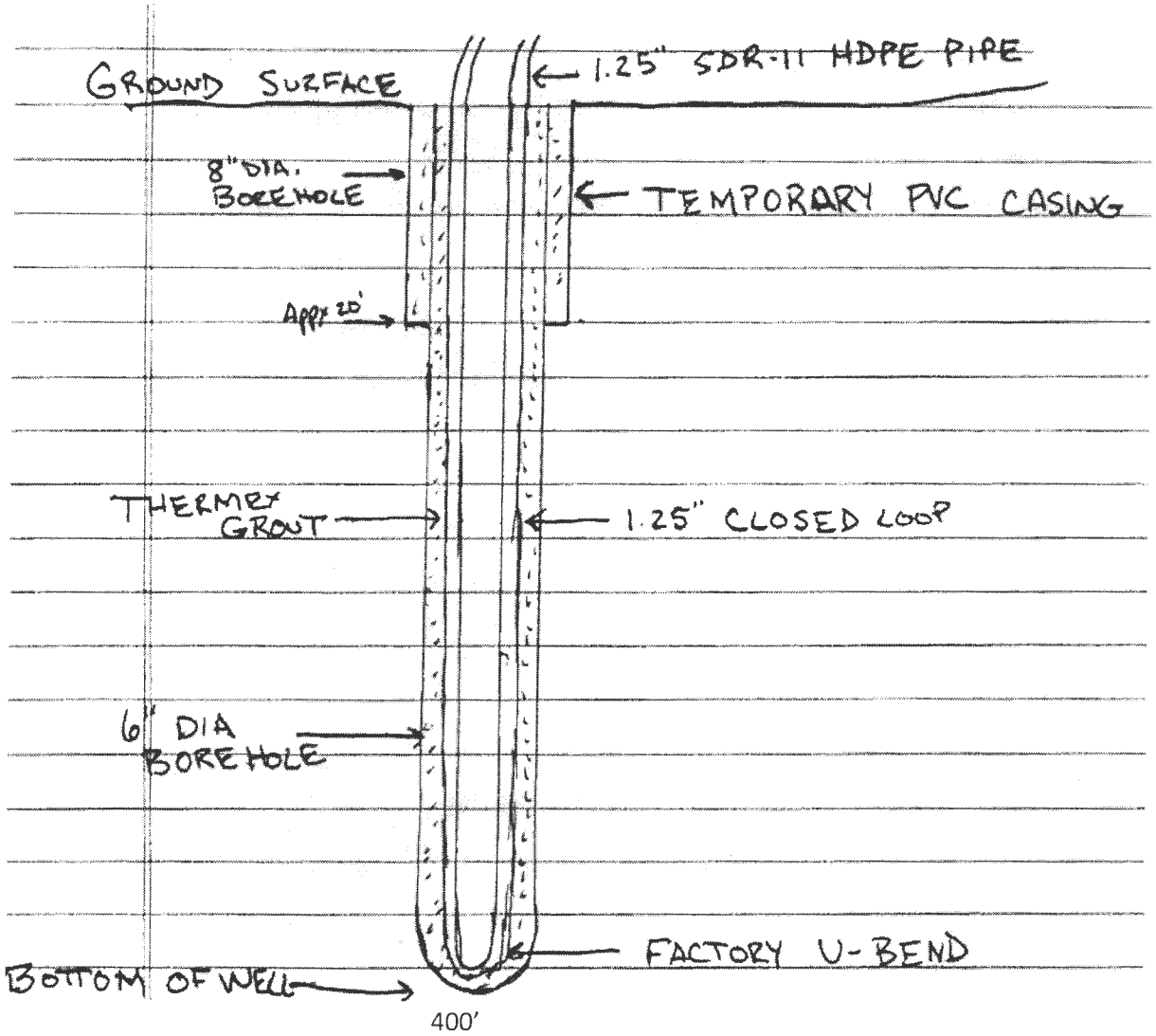
1620 ELTON ROAD, SILVER SPRING, MD. 20903 434-7000

ENGINEERS · PLANNERS · SURVEYORS

REFERENCE	Drawn by DBS	Checked by SCS
Plat Book Plat No. 3821	Date 1-31-79	Record No. 8-111-85.14 H
	Scale 1"=100	

Connelly Geothermal
Partnering with Mother Earth

Coler Residence: 11428 Rowley Rd. Clarksville, Md. Geothermal Closed Loop



Grout information for this property is as follows:

Well Grout DF grout mixture of 50 lb. grout to 19 gallons water, placed in the well using the tremie method, from bottom to top.

Howard County Health Department

Bureau of Environmental Health
8930 Stanford Boulevard, Columbia, MD 21045
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:

Subdivision/Property Name	Lot #	Road Name
11428 Rowley Rd. Lot 14 4.515A Plat Wesley Hills	14	Rowley Rd.

☐ The well site has been staked by _____
(professional land surveyor or company employing professional land surveyors)
on _____ (date) and does not require a site inspection.

☒ The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

RECEIPT

Howard County, MD
HOWARD COUNTY HEALTH DEPARTMENT
ASCEND ONE BUILDING
Columbia, MD 21045
8930 STANFORD BLVD

Application: WS-WP-24-00373
Application Type: EnvHealth/Well and Septic/Installation/Application
Address: 11428 ROWLEY RD, Clarksville, 21029

Receipt No. 8902

Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Credit Card		$160.00	02/14/2024	SMARTIN		

Owner Info.: COLER REGINALD
11428 ROWLEY RD
CLARKSVILLE, MD 21029

Work Description:

Transaction Code: BQ0P9C6B3319
Date: 02/14/2024 01:18:59 PM
Card Type: Visa
Card Number: xxxxxxxxxxxx7326
Authorization Code: 111111
Total Amount: $160.00
Operator ID: SMARTIN
Cash Drawer ID :
Record: WS-WP-24-00373

I agree to pay the above amount according to the Credit Card issuer agreement.
Sign Below:

Print Receipt Cancel