



HOWARD COUNTY HEALTH DEPARTMENT

74086

DATE
4 / 18 / 23

105

Received From

Connelly + Associates

PHONE #

30169108520

For

Geothermal Well Permit - 10742, Jody Lane

CASH

CHECK

NO.

100

One hundred sixty

00/100

Dollars

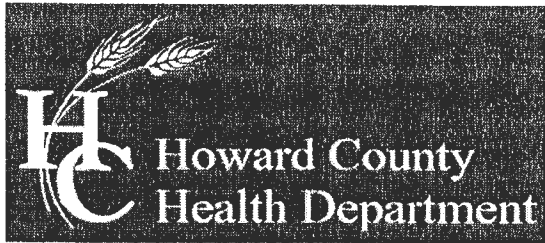
\$

160 00

Received By

[Signature]

1 2 3 6 74133	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER H0-20-0273 <small>70 fill in this form completely 79</small>
OWNER INFORMATION Date Received (APA) <u>07/13/23</u> <small>8 MM DD YY '13</small> 15 Last Name <u>Lloyd Maria Cristina T. Jones Living Trust</u> Owner First Name <u>Judy M.</u> 34 36 Street or RFD <u>Columbia Md. 21044</u> 55 57 Town <u>Columbia</u> 70 State <u>Md.</u> 72 Zip <u>21044</u> 76		LOCATION OF WELL B 3 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>58L-H-919A 10742 Judy M. Estate S4</u> 42 SECTION <u>Columbia</u> 44 46 LOT <u>5</u> 48 50 52 NEAREST TOWN _____ 71	
DRILLER INFORMATION Driller's Name <u>Stephan Delush</u> M W D <u>587</u> 76 License No. 81 Firm Name <u>Connolly & Associates Inc</u> Address <u>1513 Tilde Dr. Frederick, Md. 21704</u> Signature <u>[Signature]</u> Date <u>4-18-2023</u>		SOURCES OF DRILLING WATER B 4 1. <u>public</u> 2. _____ 3. _____ STREET ADDRESS <u>10742 Judy Lane</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> DISTANCE FROM ROAD <u>193</u> 34 37 FT ENTER FOR MI <u>FT</u> 38 39 TAX MAP: <u>0011</u> BLK: <u>11</u> PARCEL <u>0420</u>	
WELL INFORMATION B 2 APPROX. PUMPING RATE (GAL. PER MIN.) <u>N/A</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>N/A</u> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>Howard</u> COUNTY NO. <u>13</u> STATE SIGNATURE _____ INSERT S → DATE ISSUED <u>4/24/2023</u> 43 MM DD YY 48 CO SIGNATURE <u>[Signature]</u> EXP. DATE <u>4/24/2024</u> 41	
USE FOR WATER (CIRCLE APPROPRIATE BOX) 22 <input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input checked="" type="checkbox"/> OPEN LOOP GEOTHERMAL <input checked="" type="checkbox"/> CLOSED LOOP GEOTHERMAL		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 	
APPROXIMATE DEPTH OF WELL <u>480</u> 24 28 FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN 30 AIR-ROTary <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) 37 CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> DRive-POINT other _____	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Pursuant to § 10-624 of the State Govt. Article of the Maryland 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 public and other governmental agencies, if not protected by federal or State Law.	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. <u>H0-20-0273</u> <small>70 71 72 73 74 75 76 77 78 79</small>		SPECIAL CONDITIONS <u>Grout from bottom to top</u>	



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:

Riverside Estates S4
Lot 5 B L-H. 919A 10742 Judy Ln 5 Judy Ln.
Subdivision/Property Name Lot # Road Name

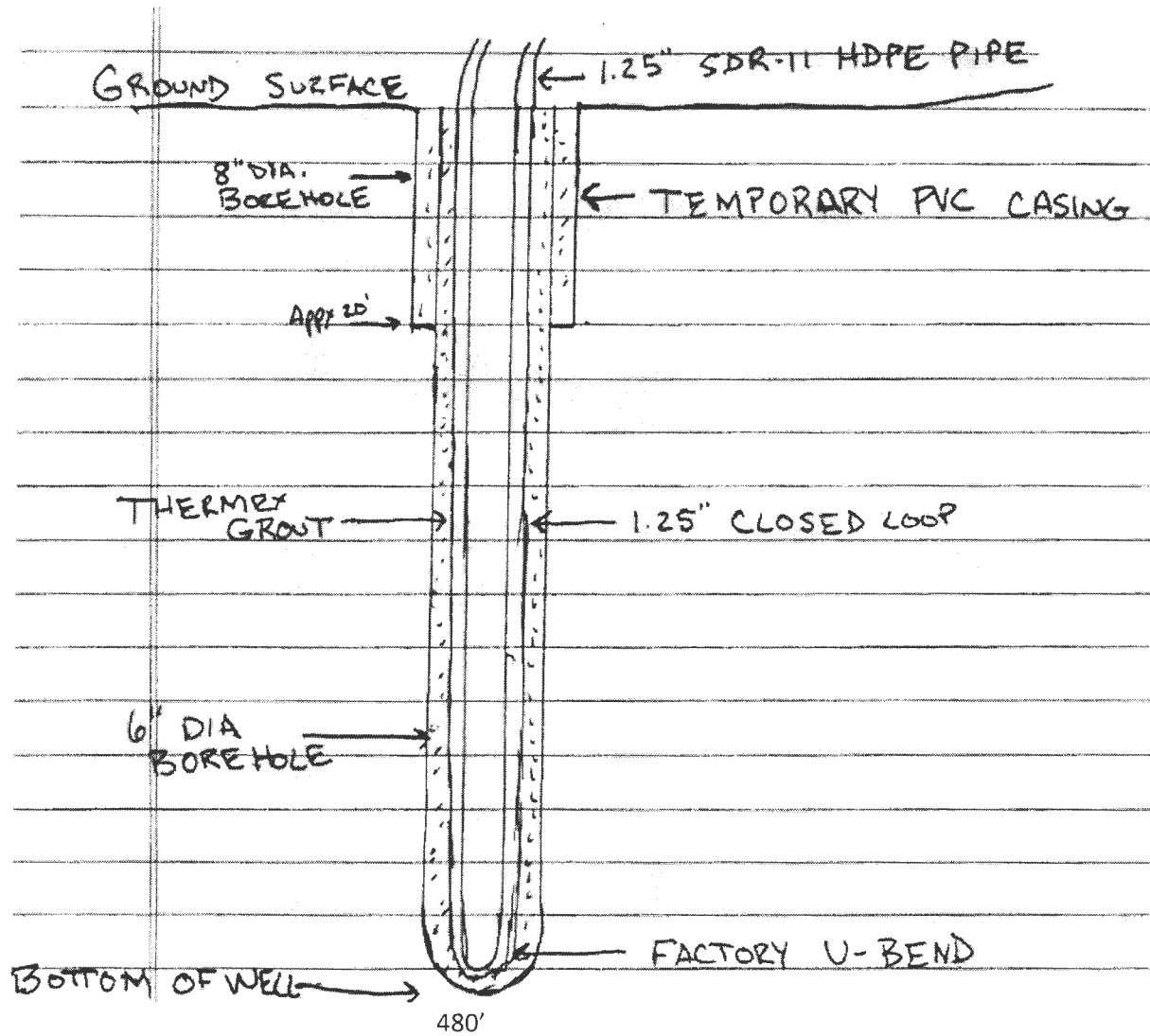
The well site has been staked by Connelly & Associates Inc.
(professional land surveyor or company employing professional land surveyors)
on 4-13-2023 (date) and does not require a site inspection.

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.



Collura Residence: 10724 Judy Lane Columbia, 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.

RECEIPT

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

Application: WS-WP-23-00938
Application Type: EnvHealth/Well and Septic/Installation/Application
Address: 10742 JUDY LN, Columbia, 21044

Receipt No.	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
6399		\$160.00	04/18/2023	SMARTIN		

Owner Info.: CIOCCIO JOHN P
10742 JUDY LN
COLUMBIA, MD 21044

Work Description: GEOTHERMAL WELL

Credit Card Payment Review

Authorization Code: 111111

Reference ID: 2294692

Transaction ID: BN0P4FEA0501

Transaction Type: Charge

Result Code: 0

Result Message: Success

Breana Davis

0

Amount: \$160.00

Processing Fee: \$0.00

Convenience Fee: \$0.00

Total Fee: \$160.00

Card Type: Visa

Account Number: XXXXXXXXXXXXX3281

Close