

**C 1** **79111** SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND WELL COMPLETION REPORT**  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) **FILL IN THIS FORM COMPLETELY PLEASE TYPE**  
 COUNTY NUMBER **13** THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

ST/CO USE ONLY DATE Received **MM 02 DD 12** DATE WELL COMPLETED **MM 04 DD 03** **2025** Depth of Well **22 320 26** PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-22-0183**  
 (TO NEAREST FOOT) (28 29 30 31 32 33 34 35 36 37)

OWNER **Sullivan Robert Jon & Lindsey** first name last name  
 WELL SITE ADDRESS **10039 Hunting lane** TOWN **Columbia**  
 SUBDIVISION **Holiday Hills** SECTION \_\_\_\_\_ LOT **60**

**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	
Topsoil	0	1	
S.H. Brn. Sand	1	35	
Bedrock: Grey Monzonite	35	320	

Reason for Abandonment: geo well to close to second geo well.

**GROUTING RECORD** yes  no

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

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

NO. OF BAGS **18** NO. OF POUNDS **312**

GALLONS OF WATER \_\_\_\_\_

DEPTH OF GROUT SEAL (to nearest foot)  
 from **48** TOP ft. to **320** BOTTOM 56 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** Total depth of main casing (nearest foot) **60**

60 61 63 64 66 70

**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 **ST** **BR** **HO**  
 STEEL BRASS OPEN  
**PL** **OT**  
 PLASTIC OTHER

(insert appropriate code below)

**C 2** DEPTH (nearest ft.)

1	2	3	4	5	6
8	9	11	15	17	21
23	24	26	30	32	36
38	39	41	45	47	51

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)  
 from \_\_\_\_\_ to \_\_\_\_\_

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 \_\_\_\_\_

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

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

70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76 \_\_\_\_\_

TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3** **PUMPING TEST**

HOURS PUMPED (nearest hour) **N/A**

PUMPING RATE (gal. per min.) **N/A**

METHOD USED TO MEASURE PUMPING RATE **N/A**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **N/A** ft.

WHEN PUMPING **N/A** 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 **N/A**

CAPACITY: GALLONS PER MINUTE (to nearest gallon) **N/A**

PUMP HORSE POWER **N/A**

PUMP COLUMN LENGTH (nearest ft.) **N/A**

CASING HEIGHT (circle appropriate box and enter casing height)

**+** above } LAND SURFACE  
**-** below } **0** (nearest foot)

LATITUDE **39.178940**  
 LONGITUDE **76.890624**  
 (DEFAULT COORD. WGS 84)

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DRILLERS LIC. NO. **MW D 587**

DRILLERS SIGNATURE **Steph Hedat**

LIC. NO. **AWD 083**

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

**C 1** **79106** 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 **13**

ST/CO USE ONLY DATE Received **04 - 03 - 2025** DATE WELL COMPLETED **04 - 03 - 2025** Depth of Well **320** PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO - 22 - 0183**

DATE Received MM DD YY 04 03 25 DATE WELL COMPLETED MM DD YY 04 03 25 Depth of Well (TO NEAREST FOOT) 320 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 22 - 0183

OWNER **Sullivan Robert Jon + Lindsay** WELL SITE ADDRESS **10834 Holiday Hills** TOWN **Columbia** SUBDIVISION **Holiday Hills** SECTION \_\_\_\_\_ LOT **60**

**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	
Bio-sand	0	35	
gravel	35	320	

re-installed 320 Holiday Hills well loop

**GROUTING RECORD** yes  no

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

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

NO. OF BAGS **20** NO. OF POUNDS **1,800**

GALLONS OF WATER **380**

DEPTH OF GROUT SEAL (to nearest foot) from **320** 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** Total depth of main casing (nearest foot) **320**

**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** HOLE **PL** PLASTIC **OT** OTHER

NUMBER OF UNSUCCESSFUL WELLS: \_\_\_\_\_

WELL HYDROFRACTURED  YES  NO

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 D 1587**

DRILLERS SIGNATURE **[Signature]**

(MUST MATCH SIGNATURE ON APPLICATION)

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

PER. NO. **D 83**

**C 2** DEPTH (nearest ft.)

1	8	9	11	15	17	21
2	23	24	26	30	32	36
3	38	39	41	45	47	51

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

DIAMETER OF SCREEN (NEAREST INCH) \_\_\_\_\_

from \_\_\_\_\_ to \_\_\_\_\_

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.R.O.S.) W Q \_\_\_\_\_

70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76 \_\_\_\_\_

TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3** **PUMPING TEST**

HOURS PUMPED (nearest hour) **N/A**

PUMPING RATE (gal. per min.) **N/A**

METHOD USED TO MEASURE PUMPING RATE **N/A**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **N/A** ft.

WHEN PUMPING **N/A** ft.

TYPE OF PUMP USED (for test)

**A** air **P** piston **T** turbine **C** centrifugal **R** rotary **NO** other (describe below) **S** submersible **J** jet

**PUMP INSTALLED**

DRILLER INSTALLED PUMP 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 **N/A**

CAPACITY: GALLONS PER MINUTE (to nearest gallon) **N/A**

PUMP HORSE POWER **N/A**

PUMP COLUMN LENGTH (nearest ft.) **N/A**

CASING HEIGHT (circle appropriate box and enter casing height)

**+** above } LAND SURFACE **0** (nearest foot)

**-** below }

LATITUDE **39 1 7883 - 13**

LONGITUDE **76 890603 - 517**

(DEFAULT COORD. WGS 84)

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C1 79108

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER 13

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well 320 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, WELL SITE ADDRESS, SUBDIVISION, SECTION, TOWN, LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Brown silt, grey marlstone, install 1.25 HDPE 600 100P.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [Y] NO [N]. TYPE OF GROUTING MATERIAL: CEMENT [CM], BENTONITE CLAY [BC]. NO. OF BAGS 16, NO. OF POUNDS 800. DEPTH OF GROUT SEAL 320.

CASING RECORD

casings types insert appropriate code below: [ST] STEEL, [CO] CONCRETE, [PL] PLASTIC, [OT] OTHER. MAIN CASING TYPE: N/A. Nominal diameter top (main) casing: N/A. Total depth of main casing: N/A.

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

SCREEN RECORD

screen type or open hole: [ST] STEEL, [BR] BRASS, [HO] OPEN HOLE, [PL] PLASTIC, [OT] OTHER. insert appropriate code below: [HO].

DEPTH (nearest ft.)

Table with columns: E, A, C, H, S, R, E, N. Rows for casing height and slot size. Includes handwritten entry: 320.

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED YES [Y] NO [N]

- CIRCLE APPROPRIATE LETTER: 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...

DRILLERS LIC. NO. M D 587, DRILLERS SIGNATURE, LIC. NO. 1 D 083

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST. HOURS PUMPED (nearest hour) N/A. PUMPING RATE (gal. per min.) N/A. METHOD USED TO MEASURE PUMPING RATE N/A. WATER LEVEL (distance from land surface) BEFORE PUMPING N/A, WHEN PUMPING N/A. TYPE OF PUMP USED (for test): [A] air, [P] piston, [T] turbine, [C] centrifugal, [R] rotary, [O] other, [J] jet, [S] submersible.

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) YES [O] NO [X]. IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED: N/A. PLACE (A,C,J,P,R,S,T,O) IN BOX 29: 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) N/A. PUMP HORSE POWER N/A. PUMP COLUMN LENGTH (nearest ft.) N/A. CASING HEIGHT (circle appropriate box and enter casing height): [ ] above, [ ] below. LAND SURFACE (nearest foot) 0.

LATITUDE 3, LONGITUDE 76. (DEFAULT COORD. WGS 84)

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05/21/25

**B 1** SEQUENCE NO. (MDE USE ONLY) **40435** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type **587984** STATE PERMIT NUMBER **H0 - 22 - 0183**  
70 fill in this form completely 79

**OWNER INFORMATION**  
 Date Received (APA) **05/25**  
 8 MM DD YY 13  
 15 Last Name **Sullivan** Owner **Robert** First Name **Robert & Lindsey** 34  
 36 Street or RFD **10834 Hunting Lane** 55  
 57 Town **Columbia** 70 State **MD** 72 Zip **21044** 76

**B 3** LOCATION OF WELL **4/4/25**  
 8 COUNTY **Howard** 21  
 23 SUBDIVISION **Holiday Hills**  
 SECTION **44** LOT **60** 48 50  
 52 NEAREST TOWN **Columbia**

*whom drill casings  
 in base mean sec  
 and strated  
 Great remain  
 n le Connelly will be  
 next week to remove  
 plastic casing from ge  
 #2 and tie off with  
 pipe*

**DRILLER INFORMATION**  
 Driller's Name **Stephen DeIosh** MWD **587** 76 License No. 81  
 Firm Name **Connelly & Associates, Inc.**  
 Address **1513 Tileo Dr. Frederick, MD. 21704**  
 Signature **Stephen DeIosh** Date **3-13-25**

**B 4** SOURCES OF DRILLING WATER  
 1. **public**  
 2. **10834 Hunting Lane**  
 11 STREET ADDRESS 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  WEST  EAST  SOUTH   
 34 **49** 37 DISTANCE FROM ROAD FT  
 ENTER  OR MI 38 39  
 TAX MAP: **0041** BLK: \_\_\_\_\_ PARCEL **0273**

*Driller finished @ 97' set 45' of casing rock @ 50' (SP)*

**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **N/A** 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **N/A** 14 20

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**  
 22  DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION **3/28/2025- ben onsite**  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) **licensed**  
 INDUSTRIAL, COMMERCIAL, DEWATERING **boothole**  
 PUBLIC WATER SUPPLY WELL **clean by up driveway upon arrival. (SP)**  
 TEST, OBSERVATION, MONITORING  
 OPEN LOOP GEOTHERMAL **3/31/2025- visited site 2x. No driller onsite. (SP)**  
 CLOSED LOOP GEOTHERMAL

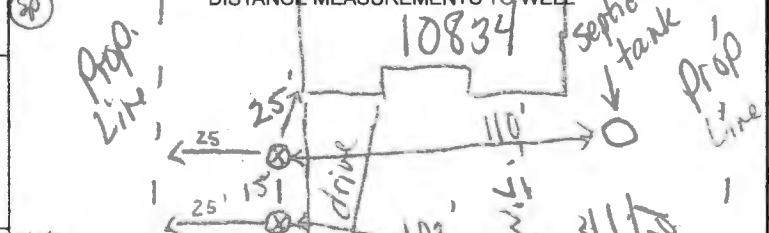
**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
 4/2/25 Dr. **13**  
 COUNTY NAME **Howard** COUNTY NO. \_\_\_\_\_  
 STATE SIGNATURE \_\_\_\_\_ INSERT S → 41  
 DATE ISSUED **03 20 25** **Walter Bunn** 3-20-26  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE

**DON: 3/27/2024 (SP) DOG: 4/13/2025 (SP)**

APPROXIMATE DEPTH OF WELL **320** FEET 24 28  
 APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

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

**METHOD OF DRILLING (circle one)**  
 30 BORED (or Augered)  JETTED  Jetted & DRIVEN  
 AIR-ROTary  AIR-PERcussion  ROTARY (Hydraulic Rotary)  
 37 CABLE  REVERSE-ROTary  Drive-POINT  
 other \_\_\_\_\_



**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**  
 39  THIS WELL WILL NOT REPLACE AN EXISTING WELL **4/13/2025- driller + HVAC + H10 onsite driller toppings off (2) wells closest to abandoned well. H10 be moved behind house, uphill or middle of driveway. lot 52 driller keep cuttings out of river. will seed & straw area & put top soil down of 65' bags of therm-ex grout used**  
 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 DEEPEAN AN EXISTING WELL

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**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**  
 APPROX. PERMIT NUMBER \_\_\_\_\_ **G** \_\_\_\_\_  
 PERMIT No. **H0 - 22 - 0183**  
 70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS** **Please not to off. eof drilling, gr...**  
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

\*\*\*\*\*  
WATER WELL ABANDONMENT-SEALING REPORT FORM  
\*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK 5/21/25

DATE WELL ABANDONED: 4-3-2025 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 22 - 0183

\* PERMIT NUMBER OF REPLACEMENT WELL:

HO - 22 - 0183

\* PERSON ABANDONING WELL: Steve Delosh

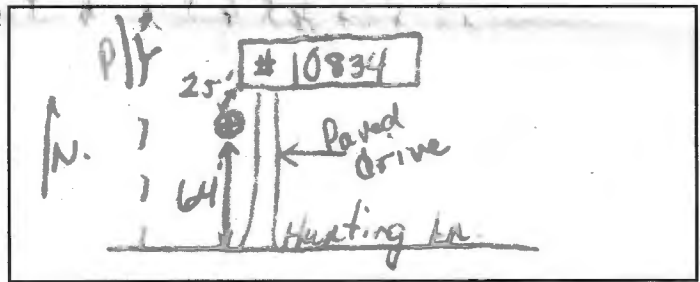
WELL DRILLER'S LICENSE NUMBER: 587

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Jon Sullivan

SITE LOCATION MAP

\* WELL LOCATION:  
COUNTY: Howard  
NEAREST TOWN: Columbia  
TAX MAP 0041 BLOCK \_\_\_\_\_ PARCEL 0273  
SUBDIVISION: 2301  
SECTION: \_\_\_\_\_ LOT: 60  
STREET ADDRESS: 10834 Hunting Ln.



LATITUDE 39.178940

LONGITUDE 76.890624

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Bentonite Well grout DF	0	320
VOLUME OF MATERIAL USED		
<u>480 gal.</u>		

\* TYPE OF WELL BEING ABANDONED:

- DRILLED  JETTED
- BORED  HAND DUG
- OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC  MUNICIPAL/PUBLIC
- IRRIGATION  INDUSTRIAL
- TEST/OBSERVATION  GEOTHERMAL

\* TYPE OF CASING:

- STEEL  PLASTIC
- CONCRETE  OTHER (specify) \_\_\_\_\_

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 320 FEET DEEP

WAS ANY CASING REMOVED?  YES  NO

If yes, length removed, in feet: 60

WAS CASING RIPPED OR PERFORATED?  YES  NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN Steve Delosh LICENSE# 587

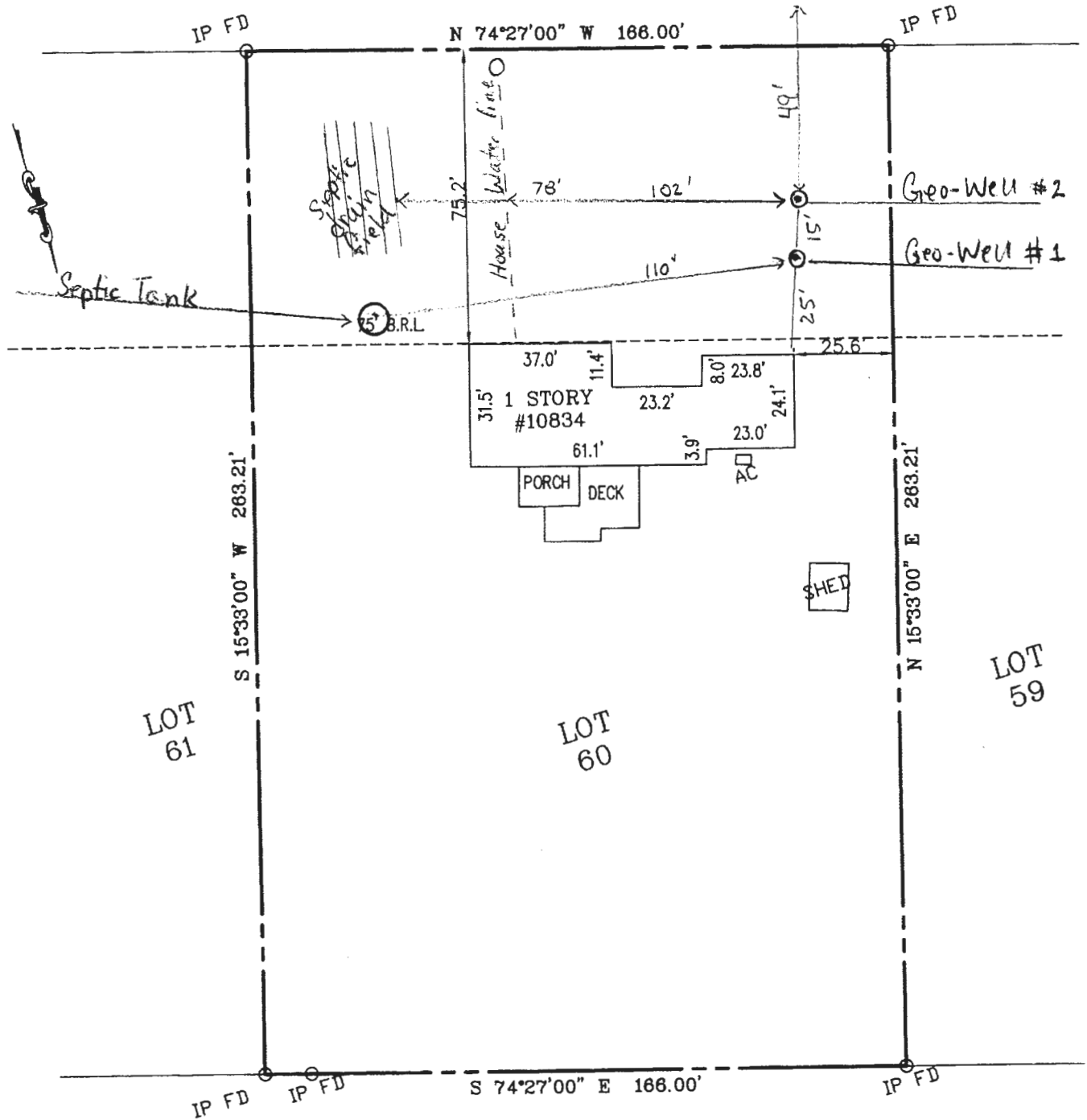
CIRCLE ONE MWD / MSD / MGS

DATE 4-28-25

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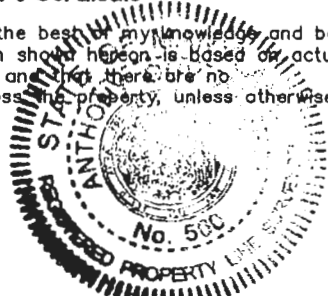
ADDRESS : 10834 HUNTING LN  
COLUMBIA MD 21044

# HUNTING LANE



### Surveyor's Certificate

I hereby certify to the best of my knowledge and belief that the information shown hereon is based on actual field measurements and that there are no encroachments across the property, unless otherwise shown.



*[Signature]*  
 ANTHONY G. CURRIE, PLS  
 MD REG. NO. 560  
 DATE: 8/24/21

## CURRIE AND ASSOCIATES CONSULTING

ENGINEERS, SURVEYORS AND PLANNERS

3331 TOLEDO TERRACE, SUITE 105, HYATTSVILLE MD 20782

TEL: (301) 559-0100 FAX: (301) 559-1700

EMAIL: TCCURRIE@AOL.COM

### BOUNDARY SURVEY

LOT 60  
 HOLIDAY HILLS  
 PLAT No. 79  
 HOWARD COUNTY, MARYLAND

SCALE: 1" = 40'

DATE: 8/24/2021



PO 834 Hunting Ln -

Backyard area where digill cuttings were moved to hide from  
Socel and snawel. Top's 1 added. <sup>1018</sup> 2/4/25



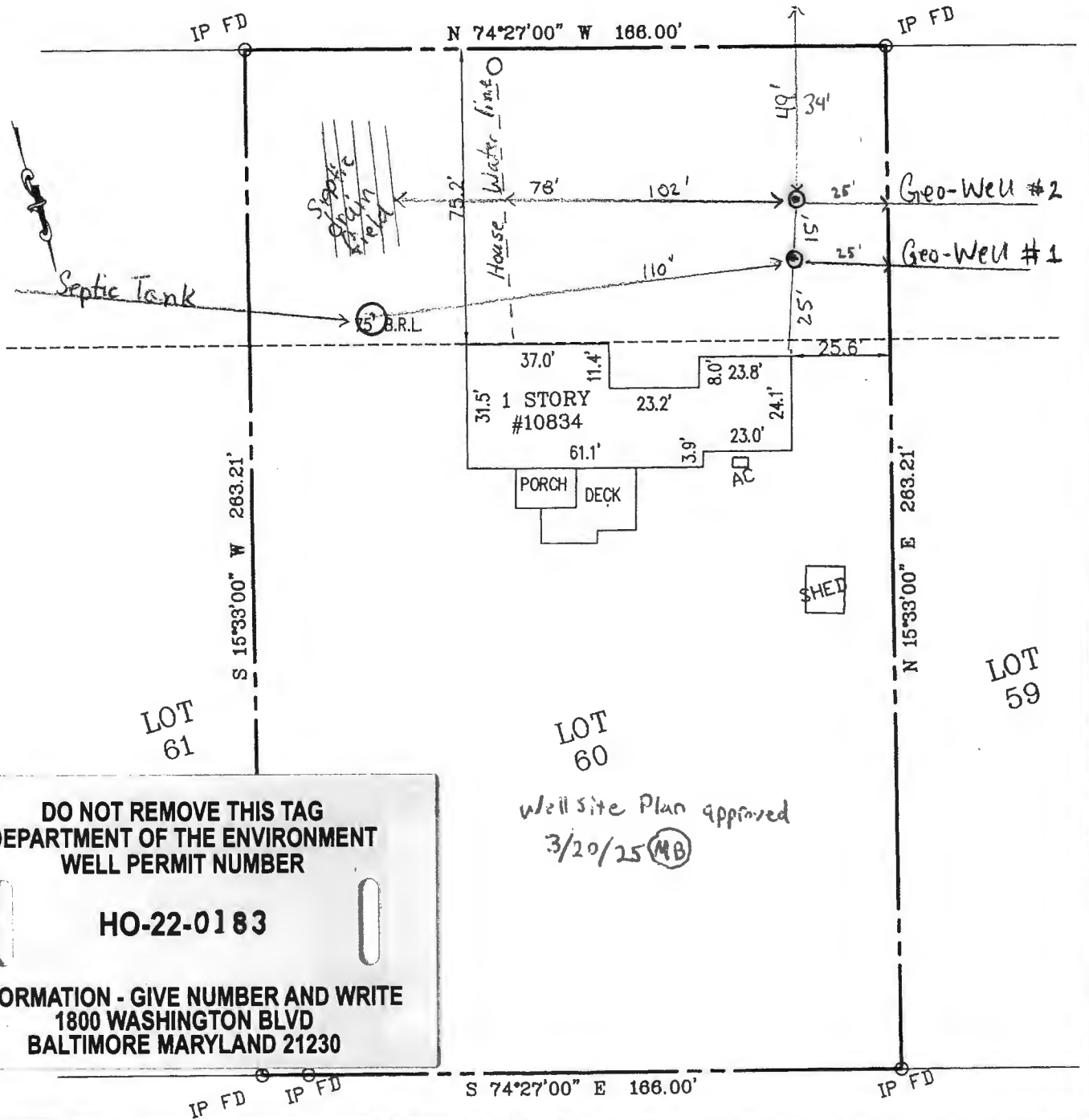


4/13/2025  
Drill cuttings  
upstream  
of Patuxent  
River.

Driller to  
add topsoil,  
seed & straw  
(SP)

ADDRESS : 10834 HUNTING LN  
COLUMBIA MD 21044

# HUNTING LANE



**DO NOT REMOVE THIS TAG**  
**DEPARTMENT OF THE ENVIRONMENT**  
**WELL PERMIT NUMBER**

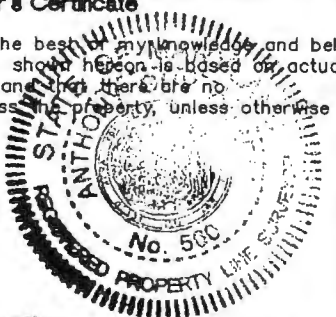
**HO-22-0183**

**INFORMATION - GIVE NUMBER AND WRITE**  
**1800 WASHINGTON BLVD**  
**BALTIMORE MARYLAND 21230**

Well site Plan approved  
3/20/25 (MB)

### Surveyor's Certificate

I hereby certify to the best of my knowledge and belief that the information shown hereon is based on actual field measurements and that there are no encroachments across the property, unless otherwise shown.



*[Signature]*  
ANTHONY G. CURRIE, PLS  
MD REG. NO. 560  
DATE: 8/24/21

## CURRIE AND ASSOCIATES CONSULTING ENGINEERS, SURVEYORS AND PLANNERS

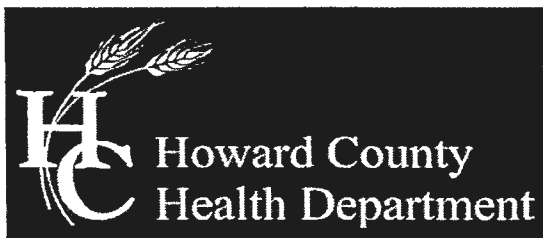
3331 TOLEDO TERRACE, SUITE 105, HYATTSVILLE MD 20782  
TEL: (301) 559-0100 FAX: (301) 559-1700  
EMAIL: TCCURRIE@AOL.COM

### BOUNDARY SURVEY

LOT 60  
HOLIDAY HILLS  
PLAT No. 79  
HOWARD COUNTY, MARYLAND

SCALE: 1" = 40'

DATE: 8/24/2021



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:

Lot 60 S 5  
10334 Hunting Ln. Holiday Hills      60      Hunting Lane  
Subdivision/Property Name      Lot #      Road Name

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-25-00587  
**Application Type:** EnvHealth/Well and Septic/Installation/Application  
**Address:** 10834 Hunting LN,

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<b>Receipt No.</b>	<b>Ref Number</b>	<b>Amount Paid</b>	<b>Payment Date</b>	<b>Cashier ID</b>	<b>Received</b>	<b>Comments</b>
	11917					
<b>Payment Method</b>						
Credit Card		\$160.00	03/14/2025	JUKING		

**Work Description:** GeoThermal Well/ 10834 Hunting Lane