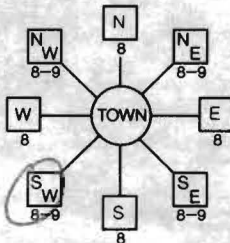
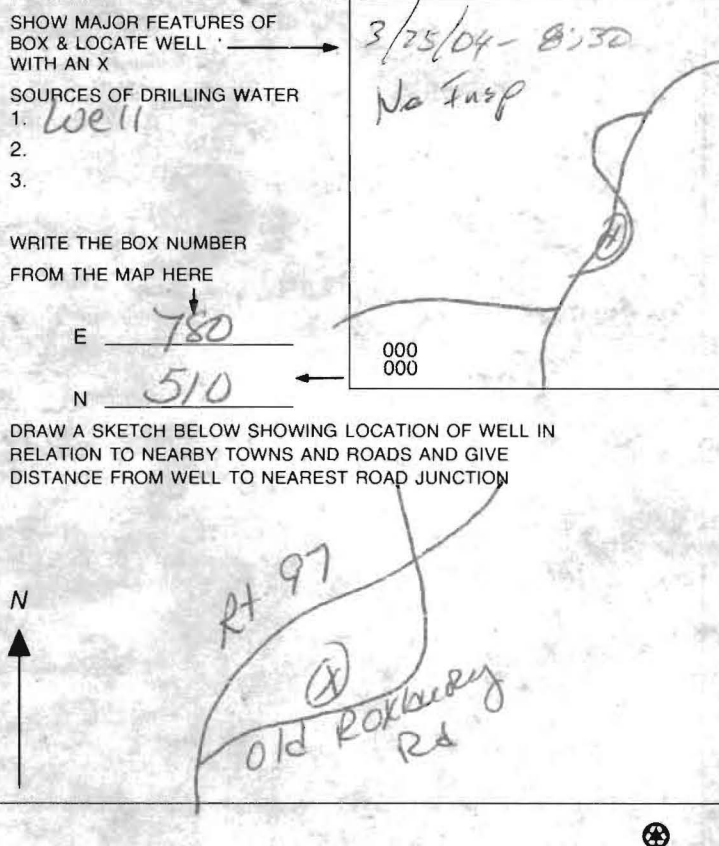


DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.

C1 3873		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.																															
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						COUNTY NUMBER 59935																															
ST/CO USE ONLY DATE Received MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 04 26 2004		Depth of Well 22 240 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" H0 - 94 - 3843																															
OWNER last name first name BUICE ROBERT		STREET OR RFD RIVERCREST COURT		TOWN GLENWOOD		SUBDIVISION RIVERCREST																															
SECTION		LOT		9																																	
WELL LOG Not required for driven wells				GROUTING RECORD																																	
<div style="text-align: center;">STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING</div> <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th><th colspan="2">FEET</th><th rowspan="2">check if water bearing</th></tr><tr><th>FROM</th><th>TO</th></tr></thead><tbody><tr><td>Overburden</td><td>0</td><td>55</td><td></td></tr><tr><td>Gray Rock</td><td>55</td><td>240</td><td>x</td></tr><tr><td colspan="4">water at 83'</td></tr><tr><td colspan="4">2 dry holes</td></tr><tr><td colspan="4">#1 well 400' (backfilled)</td></tr><tr><td colspan="4">#2 well 300' (backfilled)</td></tr></tbody></table>				DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	Overburden	0	55		Gray Rock	55	240	x	water at 83'				2 dry holes				#1 well 400' (backfilled)				#2 well 300' (backfilled)				WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N			
					DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing																													
				FROM		TO																															
				Overburden	0	55																															
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water at 83'																																					
2 dry holes																																					
#1 well 400' (backfilled)																																					
#2 well 300' (backfilled)																																					
				TYPE OF GROUTING MATERIAL (Circle one)																																	
				CEMENT CM BENTONITE CLAY BC																																	
				NO. OF BAGS 10 NO. OF POUNDS 1000																																	
				GALLONS OF WATER 60																																	
				DEPTH OF GROUT SEAL (to nearest foot)																																	
				from 48 TOP 52 ft. to 54 BOTTOM 58 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 Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot)																																	
				PL 6 60																																	
				OTHER CASING (if used) diameter inch depth (feet) from to																																	
				EACH CASING																																	
				SCREEN RECORD																																	
				screen type or open hole insert appropriate code below																																	
				ST BR HO STEEL BRASS OPEN																																	
				PL OT PLASTIC OTHER																																	
NUMBER OF UNSUCCESSFUL WELLS: 2				C2 DEPTH (nearest ft.)																																	
WELL HYDROFRACTURED Y N				1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76																																	
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				SLOT SIZE 1 2 3																																	
				DIAMETER OF SCREEN (NEAREST INCH)																																	
				from to																																	
DRILLERS LIC. NO. 1 M SD 162				GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68																																	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 AW D 7666 David Hale				MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q																																	
				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) Locations to be provided by Surveyor																																	

B 1 1 2 3 6 5664	SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 519644	STATE PERMIT NUMBER HO - 94 - 3843 70 <u>fill in this form completely</u> 79
Date Received (APA) 10/29/03 8 MM DD YY 13 OWNER INFORMATION Buice Robert 15 Last Name Owner First Name 34 7979 Muncaster Mill Road 36 Street or RFD 55 Gaithersburg MD 20877 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL Howard 8 COUNTY 21 Buice Property / Rivercrest 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 9 Glenwood 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>3</u> M I 73 76 77 78
DRILLER INFORMATION Sandy B. Cochran M W D 120 76 Driller's Name License No. 81 G. Edgar Harr Sons' Corp. Firm Name 12047 Falls Road, Cockeysville 21030 Address Signature <u>[Signature]</u> Date 10/22/03 10/22/03		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  RIVERCREST COURT Old Roxbury Road 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST SOUTH EAST 34 100 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: <u>21</u> BLK: <u>30</u> PARCEL <u>24</u>
WELL INFORMATION APPROX. PUMPING RATE <u>5</u> (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED <u>750</u> (GAL. PER DAY) 14 20		USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" 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 type="checkbox"/> GEO-THERMAL
APPROXIMATE DEPTH OF WELL <u>250</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH 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 _____		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME 59935 COUNTY NO. STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED 11/5/03 Steven R. Krieg 11/5/04 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 510 000 EAST GRID 780 000 50 55 57 63
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 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 DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		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 E <u>780</u> N <u>510</u> 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER _____ G _____ PERMIT No. HO - 94 - 3843 70 71 72 73 74 75 76 77 78 79		
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED		

Well Permit No. HO - 94-3843
Location of property (road) RIVERCREST COURT
Subdivision RIVERCREST Lot N 9 Block Plat Sec.
Well Driller GEDGAR HARR Owner ROBERT BUICE

I. High rate pumping -- reservoir drawdown

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

Lot-9 Rivercrest

How. Co.

B-14002735

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: JEIPS Telephone #: 410 489-2735
Address: 643 E. Watersville Rd
Mt. Airy, MD 21771

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:

Name (Print): Joel Isaacs, Sr. License# 4524

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Columbia Builders, Inc. Telephone #: 410 730-3939
Subdivision: Rivercrest Lot #: 9 Well Tag #: HO-94-3843
Site Address: 15416 Rivercrest Ct.
Brooksville, MD 20833

Submersible Pump Data

Make: Grundfos
Model #: 3/4
Pump Capacity 10 GPM
Well Yield: 5.0 GPM

Pitless Adapter

Make: Campbell
Model#: 1"
Depth: 42" (36" min)
NSF/WSC approved:

Well Cap and Electric Conduit

Two piece watertight cap: ✓
Screened, vented well cap: ✓
Cap secured to casing: ✓
Conduit min 18" B.G.: ✓

Depth of well encountered at time of pump installation: 240 (feet) Conduit secured to well cap: ✓

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors: Cable guards or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house

Type: 1" Poly
PSI: 160 (160 psi min)
Depth of supply line: 42" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: ✓
Length of sleeve (5' minimum from foundation): ✓
Sleeve sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

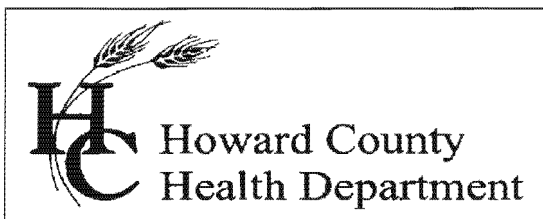
Signature of company representative responsible for installation

date

10-9-14

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: Date Insp. Approved: 10/10/14 Inspector: KE
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
Two piece cap installed and attached to casing securely ✓
Elec. conduit extends at least 18" below grade/attached to cap properly ✓
Safety rope not outside of well cap/casing ✓
Correct well tag attached properly and casing 8" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045

Main: 410-313-1771 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – June 19, 2015

December 19, 2014

Homeowner
15416 Rivercrest Court
Brookville, MD 20833

**RE: Rivercrest, Lot # 9
15416 Rivercrest Court
Building Permit: B14001007
Well Permit: HO-94-3843**

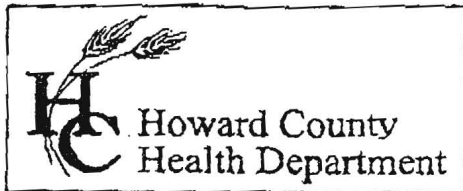
Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **12/19/2014**. Final approval of the well line connection to the dwelling was granted on **10/10/2014**. The well construction was completed on **4/26/2004**. Water samples were collected on **12/10/2014 and 12/16/2014**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-94-3843. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the Annotated Code of Maryland, Environment Article, 9-1311, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>



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

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

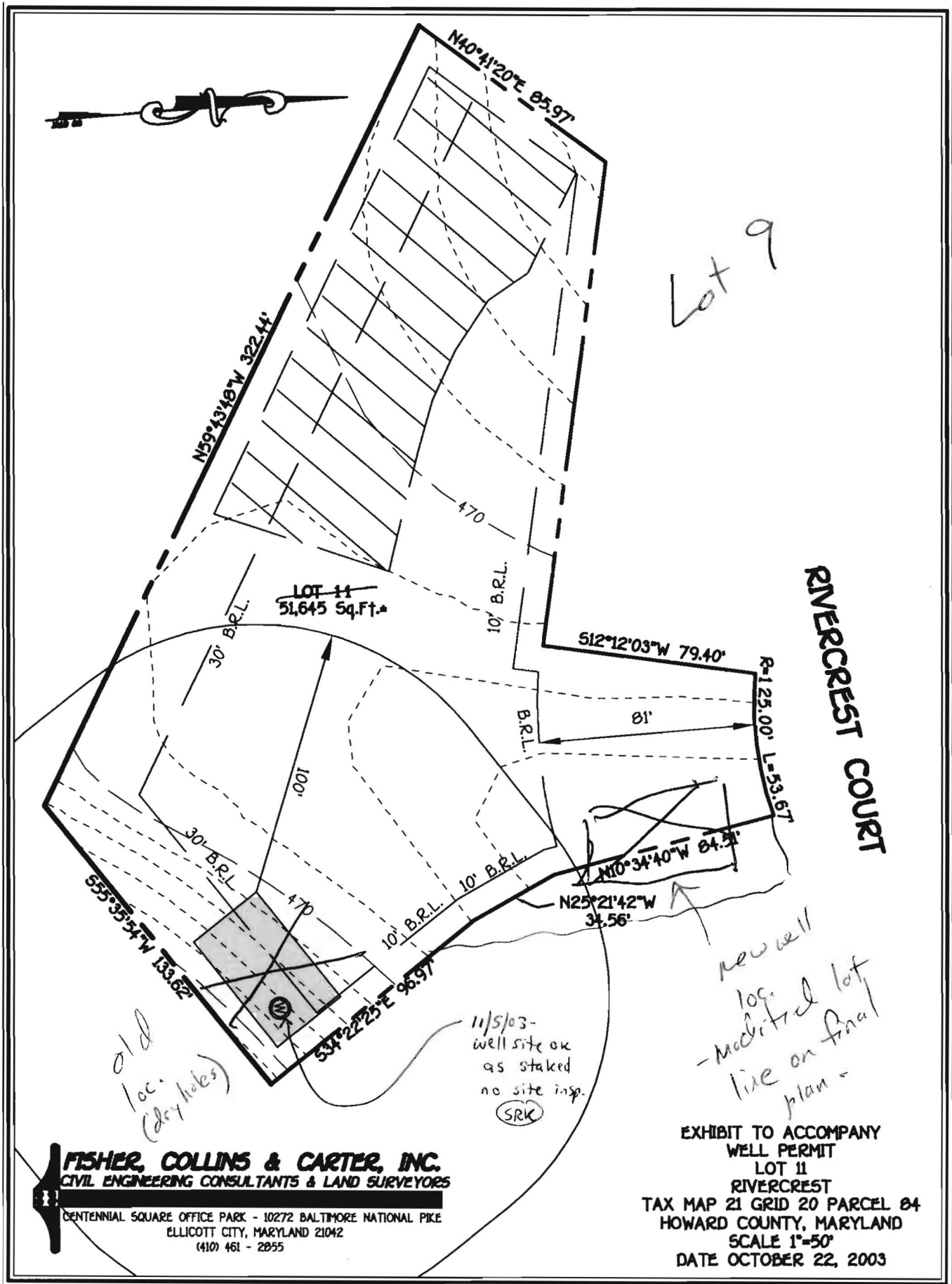
ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well,
please indicate one of the following: Rivercrest Subdivision, All lots

- ☒ The well site has been staked by Fisher Collins + Carter
on 11-2-03 and is ready for site inspection.
- ☐ _____ will call the Health Department
for a time to meet in the field to verify a well location.
- ☐ Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application.
This should help improve communication allowing a more timely
service for our citizens.

KN



Approving Authority,

Hank Oswald

Hank Oswald, L.E.H.S.
Environmental Sanitarian
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	98293	Account #:	1550
Reference:	Rivercrest Lot 9	Company:	Columbia Builders
Location:	15416 Rivercrest Court	Requested By:	Terry Brownley
	Brookeville, MD 20833	Source:	Well Water
Date/ Time Collected:	12/16/2014 1238	Site:	Pressure Tank
Date/Time Rec'd:	12/16/2014 1420	Treatment:	Prior to Spin Down Separator
Chlorine ppm:	Free: ND Total: ND	pH:	6.2
Collected By:	C. Mooshian 7268CM	Well #:	HO-94-3843

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
✓ Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	12/17/2014 / 0930 / LLO
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	12/17/2014 / 0930 / LLO

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 Visual well check: Sealed, vented cap
- 5 pH & Chlorine level tested on site

Reason for Test : Use & Occupancy
Building Permit # : B14001007

Date Reported: 12/17/2014

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	98183	Account #:	1550
Reference:	Rivercrest Lot 9	Company:	Columbia Builders
Location:	15416 Rivercrest Court Brookeville, MD 20833	Requested By:	Terry Brownley
Date/ Time Collected:	12/10/2014 1055	Source:	Well Water
Date/Time Rec'd:	12/10/2014 1828	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Prior to Spin Down Separator
Collected By:	J. Yeager 6176JY	pH:	6.1
		Well #:	HO-94-3843

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	4.2	MPN/ 100 ml	<1.0	SM18 9223	12/11/2014 / 1245 / LLO
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	12/11/2014 / 1245 / LLO
✓ Nitrate	<1.0	mg/L	10	601	12/10/2014 / 1850 / BCD
✓ Turbidity	0.51	NTU	<10	SM18 2130B	12/10/2014 / 1850 / BCD
✓ Sand	NS	mg/L	5	Visual/Gravimetric	12/10/2014 / 1850 / BCD

NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 Visual well check: Sealed, vented cap
- 8 pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B14001007

Date Reported: 12/11/2014

**FISHER, COLLINS
& CARTER, INC.****CIVIL ENGINEERING CONSULTANTS
and LAND SURVEYORS**Terrell A. Fisher, P.E., L.S.
Earl D. Collins, P.E.
Ronald B. Carter, L.S.
Charles J. Crovo, Sr., P.E., L.S.**Transmittal**Via: ☒ Fax ☐ Mail ☐ Messenger ☐ E-Mail ☐ To Be Picked Up
☐ Fax (original to follow via U.S. Mail)**To: Howard County Health Department
3525 Ellicott Mills Drive
Ellicott City, Maryland 21042****Attn: Mr. Mark Rifkin
Fax: 410-313-2648
Phone: 410-313-2640****From: Terry Fisher****CC: Bob Buice, John Komsa, Aldo****Re: Buice Property Lot 13, AKA Lot 9 Rivercrest W.O.# 30636****Date: March 12, 2004****Pages: 3 Page(s) including this cover**We are forwarding: ☐ Prints ☐ Copy of Letter ☐ Specifications ☐ Shop drawings ☒ Other
☐ Urgent ☐ For your use ☐ As requested ☐ For Review & Comment

Remarks:

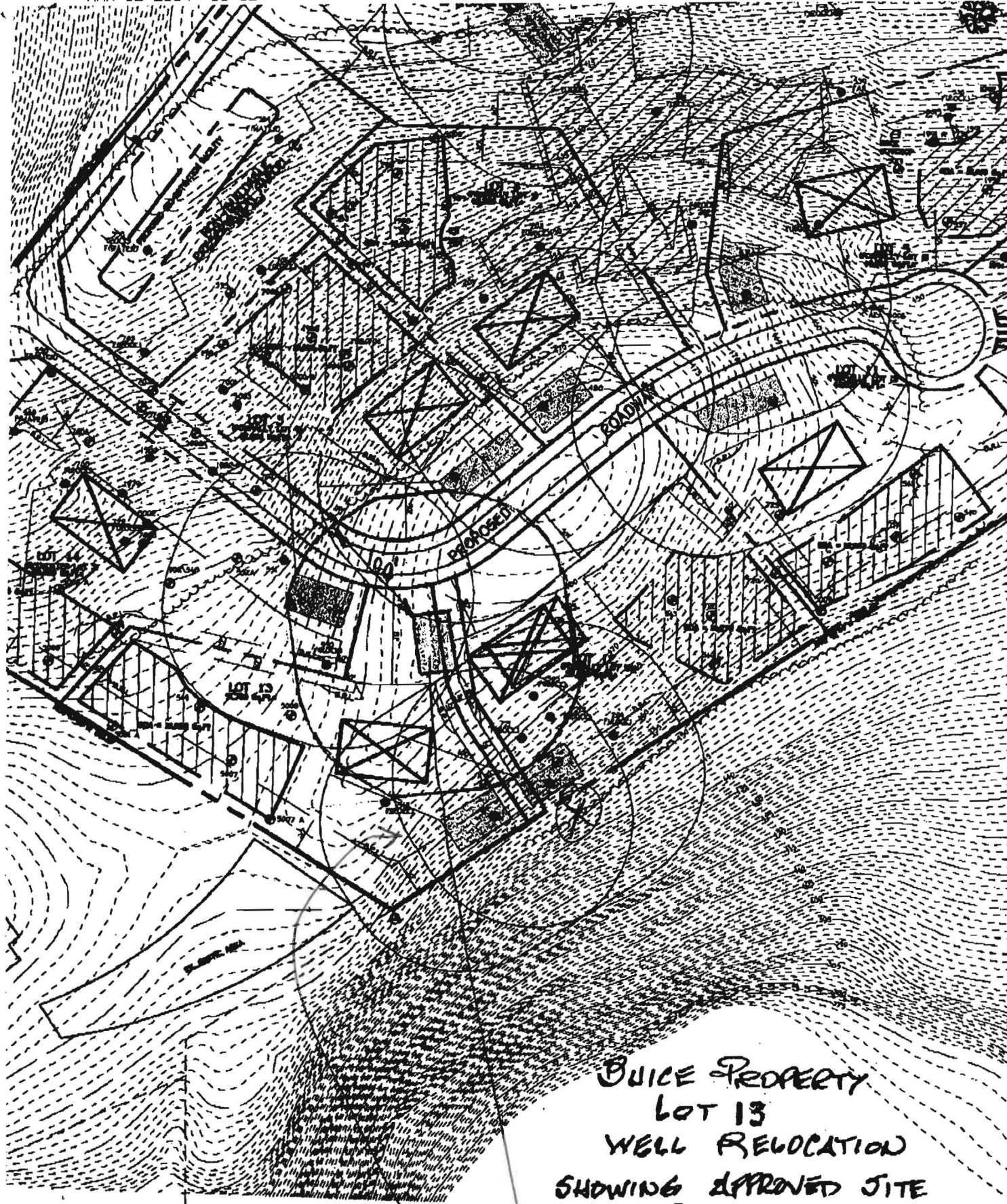
Mark:

Enclosed please find a copy of the relocated well site on Lot 13, Buice Property approved by the Howard County Health Officer. Please be advised that the designation of this Lot is identified as Lot 9 of the Rivercrest subdivision (F-04-57) presently being reviewed by the Department of Planning and Zoning. Please call me after your review, since we need to stake this well box out on Monday.

Again, thanks for your assistance.

**CONFIDENTIALITY NOTICE**

This transmission contains confidential information which may be legally privileged, and is intended only for the use of the individual named above. If you are not the intended recipient, you are hereby notified that any distribution (except to the intended recipient), copying, or disclosure of this transmission is strictly prohibited.



ALL MDE REQUIREMENTS EXCEPT COMAR 26.04.02.04K
 : MARYLAND DEPARTMENT OF ENVIRONMENT PRIOR TO

3/12/04
 1ST SITE DRY
 MR

BUICE PROPERTY
 LOT 13
 WELL RELOCATION
 SHOWING APPROVED SITE
 AND RELOCATED SITE

2ND =
 WELL SITE/WELL BOX OK
 CONTINGENT ON MAINTAINING
 WELL BOX @ LOT TO THE EAST
 (MARKED BY (X))

**FISHER, COLLINS
& CARTER, INC.**

**CIVIL ENGINEERING CONSULTANTS
and LAND SURVEYORS**

Terrell A. Fisher, P.E., L.S.
Earl D. Collins, P.E.
Ronald B. Carter, L.S.
Charles J. Crovo, Sr., P.E., L.S.

November 4, 2003

Mr. Steve Kreig
Howard County Health Department
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

RE: Rivercrest Subdivision
Well Stakeout

Dear Steve:

This is to advise you that the proposed well location for Lots 3 thru 12; 2 future lots in Bulk Parcel 'D' and Buildable Preservation Parcel A were staked by our firm on October 30th and November 2, 2003 and is ready for site inspection.

Very truly yours,
Fisher, Collins & Carter, Inc.



Terrell A. Fisher, P.E., L.S.

DO NOT DISCARD

WO #30636
c.c. Mr. Mike Isom
Mr. John Komsa