

C1 41842	SEQUEN (MDE USE		STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			FILL IN THIS FORM COMPLETELY	COUNTY	
ST/CO USE ONLY	DATE WEL	LCOME	RLEASETYPE	NUMBER	
DATE Received	MM	26 2	Depth of Well	FROM "PERMIT NO. FROM "PERMIT TO DRILL WELD"	
13	15		20 (TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37	
WELL SITE ADDRESS	last name 43	Jeralo 1	On the RA first name	(2)	
SUBDIVISION		7- 8	SECTION	Dayton	
WELL	LOG			LOT	
Not required fo			GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Well HAS BEEN GROUTED West No. 100 March	C 3	
STATE THE KIND OF FORMAT COLOR, DEPTH, THICKNESS	TIONS PENETRATED AND IF WATER BE	, THEIR	TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST	
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)	
Sand	0 36		NO. OF BAGS 46 /O NO. OF POUNDS 45 946 O	PUMPING RATE (gal. per min.)	
Sand Mica Rock	200		DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO Bucket 15	
Mica Nork	20	1000	from ft. to ft. to ft.	WATER LEVEL (distance from land surface)	
Water 240			(enter 0 if from surface)	BEFORE PUMPING 8 ft.	
Waln 290			types insert ST CO	17 20 III	
			(appropriate code STEEL CONCRETE	WHEN PUMPING 22 25 ft.	
			below PLASTIC OTHER	TYPE OF PUMP USED (for test)	
			MÅIN Nominal diameter Total depth CASING top (main) casing of main casing	A air P piston T turbine	
			TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O (describe below)	
			60 61 63 64 66 70	J jet S submersible	
	200		E OTHER CASING (if used) A diameter depth (feet)	27 21 3/37	
			H inch from to	PUMP INSTALLED STORY	
			8	DRILLER INSTALLED PUMP YES NO (CIRCLE) (YES or NO)	
一年 一年 第二十二年 在北京中 一年 年 五天 大		1.20	G + F + F + F + F + F + F + F + F + F +	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
			screen type SCREEN RECORD or open hole	TYPE OF PUMP INSTALLED	
			insert STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.	
			appropriate code below BRONZE HOLE PL OT	CAPACITY: GALLONS PER MINUTE	
			PLASTIC OTHER	(to nearest gallon) 31 35 PUMP HORSE POWER	
NUMBER OF UNSUCCESSFU	L WELLS:	2 1	C 2 DEPTH (nearest ft.)	PUMP COLUMN LENGTH	
WELL HYDROFRACTURED	yes	no	E Ho 38 280	(nearest ft.)	
	Y	N/	A 8 9 11 15 17 21 C	CASING HEIGHT (circle appropriate box and enter casing height)	
A WELL WAS ABANDONED	AND SEALED		H 23 24 26 30 32 36	LAND SURFACE	
E ELECTRIC LOG OBTAINED			C 3 R 38 39 41 45 47 51	below 2 (nearest) foot)	
P TEST WELL CONVERTED			E 51	49 50 51	
HEREBY CERTIFY THAT THIS WELL ACCORDANCE WITH COMAR 26.04.04	"WELL CONSTRUCT	ONI'' ANID	N SEOT SIZE 1 2 3	LATITUDE 3 9. 2.39 14 0	
N CONFORMANCE WITH ALL CONDICAPTIONED PERMIT, AND THAT THE HEREIN IS ACCURATE AND COMPI	TIONS STATED IN THE	E ABOVE		LONGITUDE 7 6 . 9 9 8 4 (DEFAULT COORD. WGS 84)	
KNOWLEDGE.	10 1116 8651	OF MY	from to	Pursuant to \$10-624 of the State Govt. Article of	
DRILLERS LIC. NO. 1 M	SD01	7 1	GRAVEL PACK	the Maryand Code personal info, requested on this form is used in processing this form pursuant	
DRILLERS SIGNATURE	e plus		IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68	to COMAR 26.04.04. Failure to provide the info. may result in this form not being processed. You	
(MUST MATCH SIGNATURE ON	APPLICATION)		MDE USE ONLY	have the right to inspect, amend, or correct this form. The Maryland Department of the	
LIC. NO.1	_ D	_ 1	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	Environment is subject to the Maryland Public	
			E AND AND AND A STATE OF THE ST	Information Act. This form may be made available on the Internet via MDE's website and is	
SITE SUPERVISOR (sign. of d	riller or journeyma	an	70 72 74 75 76	subject to inspection or copying, in whole or in part, by the pulic and other governmental	

Page	× '	of	
Date	7-	26-	2019

Review CABALLA 9/25/2029

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

0102 75	
Well Permit No. HO - 18 - +012	
Location of property (road) 4870 Jen Oaks	P /
Well Driller Jonesh Meyne Ji Own	DIOCA
Joseph Mayor Ja Own	er Gerald + Sandra Wescott
Depth of well 280 Distance of measuring point (M.P.) above g Static water level (S.W.L.) below M.P.	2
I. High rate pumping reservoir drawdown	
Time pump started 7:45	P
Total time 30 m/W to reach our	Pumping rate 20
Total time 30 m/N to reach pumping water	r level 238 ft. below M.P.
· ·	

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

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill % / gallon bucket	recorded every 15 minu PLOW METER. READING (if used)	CALCULATED FLOW
8:00	159	3 sec		minute)
8:15	238	3 sec		20
8:30	238	12 sec		20
8:45	238	12 sec		5
9:00	238	12 sic		
9:15	238	12 sec.		5
9:30	238			-5
9:45	238	12 sec		5
10:00	238	12 pec		3
-10:15	238	12 sec		5
10:30	238	· 12 sec		5
10:45	238	12 sec		5.
11:00	238	12 000,		5
11: 15	238	12 sec		. 5
11:30	238	12 sec		-5
	~10	12 sec		5
		,	**	
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			:	

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION 1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

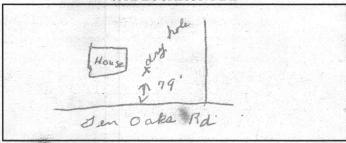
NT-SEALING REPORT FORM

	WA	ATER WELL ABANDONMEN	T-SEALING REPO
***		********	*****
SU	BMIT COPIES OF COMPLETED FORM		
*	COUNTY ENVIRONMENTAL AGEN	CY (contact MDE, WMA if	address needed)
*	WELL OWNER	DUCED ATION WELL DO	202114
*	MDE, WATER MANAGEMENT ADM		JGRAM
DA	TE WELL ABANDONED: 7-16	2019	(month/day/year)
*	PERMIT NUMBER OF ABANDONED	WELL (if any)	
*	PERMIT NUMBER OF REPLACEMEN	NT WELL:	7.4 /7
*	PERSON ABANDONING WELL:	-any Mayor	_ WELL DRILLE
*	OWNER'S NAME: Lingled + Sa	ndra Wescott	
*	WELL LOCATION: Howard		
	NEAREST TOWN: Dayton		
	NEAREST TOWN:	PARCEL	
	SUBDIVISION:		
	SECTION:L	OT:	
	STREET ADDRESS: 4810 Sten	cons Pd	
	LATITUDE 3 9 . 2 3 7 3		
	LONGITUDE 7 6. 9 8 5	3 4	
	LONGHODE /		
			M
			Do
			0.54
*	TYPE OF WELL BEING ABANDONE	D'	Back f
	DRILLEDJBOREDF	ETTED	mate
		HAND DUG	
	OTHER (specify)		
*	USE CODE:		
		MUNICIPAL/PUBLIC	
		NDUSTRIAL	
	TEST/OBSERVATIONC	GEOTHERMAL	
	do	halo	
*	TYPE OF CASING:	loce	12 Bags
		PLASTIC	
	CONCRETE	OTHER (specify)	Door
	THE TOTAL PROPERTY OF THE PARTY	ARTHUR BOOK	Pur Ma
			is u
CIZ	ZE OF CASING: INCHES IN I	NAMETER	26. this
512	EE OF CASHINGINCIDES IN I	JIANIE I EK	ins
DE	EPTH OF WELL: 540 FEET DEEP		De _j Ma
		V	ma
WA	AS ANY CASING REMOVED?YES	NO	is s by
	If yes, length removed, in feet:	. 1	pro
WA	AS CASING DIPPED OF PERFORATED	2 VES NO	k d I

WELL DRILLER'S LICENSE NUMBER: MSD 027

CIRCLE: MWD / MSD / MGD

SITE LOCATION MAP



MATERIAL	FEET		
0	FROM	ТО	
Back filled drilling materials cement	5 HO'	40°	
VOLUME OF N	MATERIAL USED		

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form Maryland Code, personal into 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.

MWD / MSD / MGS

027

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION 1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

	1800 Washington Blvd., Baltimore, Marylan	d 21230 (410) 537-3784		
***	**************************************	ING REPORT FORM	*****	
***	***************	*******	*****	********
		NOO!	ONE O	
SUE	BMIT COPIES OF COMPLETED FORM TO:	TAKE	look)
*	COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address WELL OWNER	s needed)	95)	
т *	MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM	\ \	()	
DAT	TE WELL ABANDONED: 7-26-2619 (mont	h/day/year)		
	Table State Commencer	dry hole _		\
*	PERMIT NUMBER OF ABANDONED WELL (if any)	4	01	02
	A CONTRACTOR OF THE CONTRACTOR	Ho -	18 -10	12/W
*	PERMIT NUMBER OF REPLACEMENT WELL:			- 6
	PERSON ABANDONING WELL: Larry Mayne WEI	LL DRILLER'S LICENSE NU	MBER:	
*	FERSON ABANDONING WEED.	CIRCLE: M	WD / MSD / MO	<u>GD</u>
*	OWNER'S NAME: Gerald + Sandra Wescott			
			ATION MAP	
*	WELL LOCATION: Howard COUNTY: Dayton		Jaz'	ole
	COUNTY: A oward	_	- ref)
	NEAREST TOWN:	LH0	ned D	
	TAX MAPBLOCKPARCEL			1
	SUBDIVISION: SECTION: LOT:		62	
	SECTION: LOT: STREET ADDRESS: 4870 Den Oaks Rd			
	STREET ADDRESS.	deno	aks Rd	
	LATITUDE 3 9 . 2 3 7 3 0 _			
	LONGITUDE 7 6. 9 8 5 3 4	LOG OF SEAL	ING MATERIA	L
			FE	ET
		MATERIAL		
		MATERIAL Dry Well Back felled drelling	FROM	ТО
		a b belled drilling		401
*	TYPE OF WELL BEING ABANDONED:	Duck	440'	and the same of the same of the
T	DRILLEDJETTED	Cement -	→ 40°	0 1
	BOREDHAND DUG	cernent		
	OTHER (specify)			
	USE CODE:			
*	DOMESTICMUNICIPAL/PUBLIC			
	IRRIGATIONINDUSTRIAL			
	TEST/OBSERVATIONGEOTHERMAL		MATERIAL LICEI	No. 10 Personal Property of the Personal Prope
	M/M		MATERIAL USEI	,
	TYPE OF CASING: / Y //	10 Bage cement	970202	
*	STEEL PLASTIC			
	CONCRETE OTHER (specify)	Pursuant to § 10-624 of	the State Govt. Art	icle of the
		Maryland Code, persona	d info requested or	i this form
		is used in processing thi 26.04.04. Failure to prov	s form pursuant to	COMAR
	TOWER DIDIAMETER	this form not being proc	essed. You have th	e right to
SI	ZE OF CASING:INCHES IN DIAMETER	inspect, amend, or corre	ct this form. The M	laryland
וח	EPTH OF WELL: 440 FEET DEEP	Department of the Envir Maryland Public Inform	ation Act. This for	m may be
וט	ETHIOF WELL. THE TELL BEE	made available on the It	nternet via MDE's	website and
W	AS ANY CASING REMOVED?YESNO	is subject to inspection of by the public and other	or copying, in who	le or in part,
	If yes, length removed, in feet:	protected by federal or S	State Law.	
W	AS CASING RIPPED OR PERFORATED? YES NO			

SIGNATURE-MASTER WELD DRILLER OR SUPERVISING SANITARIAN LICENSE#

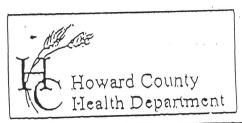
MWD / MSD / MGS

CIRCLE ONE

DATE

with a second		EMENGENCY/II	EMP NO. IF ANY	THU: KET	CACEDY)
1 64943	SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT	NUMBER
	(MDE USE ONLY)	APPLICATION FOR PL	ERMIT TO DRILL W	ELL +10-18	-010J
			e type	70 fill in this form	79
1 2 3 (4DA)			Ta Fa F	LOCATION OF WELL	completely
Date Received (APA)	OWNED INFO	DAAATION	B 3	LOCATION OF WELL	
8 MM DD YY 13	OWNER INFO	HMATION	Hou	rard	
Wes cot	t Sandra	+ Gerald	8 COUNTY	21	
15 Last Name	Owner	First Name 34			
. 4970 -Ten	Oaks Rd	A	23 SUBDIVISION		42
36	Street or RFD	55	SECTION L	J LOT []	
Dayton	md	21036	44 40	3 48 50	
57 Town	70 State	72 Zip 76	Wayle	ent *	
DRILLER, INFORM	IATION'		52 NEAREST TOW	/N	71
Larry Y	nagne	MSD 021			<u> </u>
Driller's Name	1	M 5 D 027 76 License No. 81	B 4		
losent & ma	yne Will Dru	Clerc	SOURCES OF DRILLING WATE	R 4870 Jen Oas	ts Rd
Firm Name	/		1. 0 300	11 STREET ADDR	RESS 30
1 5512 Redge	Rd Mt airy	Md 2177/	2.	ON WHICH SIDE OF F	NORTH
Address	/		3.	(CIRCLE APPROPRIAT	
Lossok	more M	7-10-2019			WEST STEAST
Signature		Date		34 79	37 SOUTH
B 2 WELL INFO				DISTANCE FR	OM ROAD FT.
그 그들이 가장이 되었습니다. 이번 이번 경기에 가장 하는 생각이 되었다. 그 사람이 없었습니까?	IOX. PUMPING RATE - PER MIN.)	8 12		ENTE	R FT OR MI 38 39
AVERAGE DAILY QUAN				TAX MAP: BLK:	PARCEL
(GAL. PER DAY)	14	20			
USE FO	OR WATER (CIRCLE A	PPROPRIATE BOX)	NO	T TO BE FILLED IN BY DRI ALTH DEPARTMENT APPRO	LLER
D DOMESTIC PO IRRIGATION	TABLE SUPPLY & RESID	ENTIAL		ALIH DEPARTMENT APPRO	JVAL
	ESTOCK WATERING & AC	CDICHITUDAL	. Han sari		(Settle)
F FARMING (LIVE IRRIGATION)	ESTOCK WATERING & AC	SICIOULIUNAL	COUNTY NAME		COUNTY NO.
	COMMERCIAL, DEWATER	RING	STATE		
22	R SUPPLY WELL		SIGNATURE	INS	ERT S 41
	/ATION, MONITORING		DATE ISSUED	26 ZEV	18/150
O OPEN LOOP G	EOTHERMAL	1 + + + + + + + + + + + + + + + + + + +	43 MM DD YY	48 CO SIGNATURE	EXP. DATE
C CLOSED LOOF	GEOTHERMAL			7/2 1/2 (P)	2 7 - Dolg
			DON: 7/18/0	DC: 419 209	top: His boil
	1	40	11 San Carlotte Commission of the Commission of	POSED LOCATION OF WELL ON	
APPROXIMATE DEPTH	OF WELL 24	FEET 28		STRUCTURES SUCH AS BUILDIN LANDMARKS AND INDICATE NOT	
	24	MEADEST		STANCE MEASUREMENTS TO W	
APPROXIMATE DIAMET	ER OF WELL	INCH	2/18/2012	S EES:	25 1 . Y
	ETHOD OF DRILLING	C (-11	7	m35%	7 /00
	ETHOD OF DRILLING				10 1
BORED (or Augered)	JETTED AID DEDayseins	Jetted & DRIVEN	- Reggs Y		1= 103
AIR-ROTary	AIR-PERcussion	ROTARY (Hydraulic Rotary)	100	F House	1/ 3/3
CABLE	REVerse-ROTary	DRive-POINT	65 cashy	(3	38 8 8 8
other			296 000	1 19	733/20
REPL	ACEMENT OR DEEP		24	N A	238 10 1
N THIS WELL WILL	(CIRCLE APPROPRIAT		SA	()	(Sup) 0
This neer mee	NOT REPLACE AN EXIST		24	Jen Oaks Ro	, ,
Y THIS WELL WILL ABANDONED ANI	REPLACE A WELL THAT D SEALED	WILL BE	EN I	Ven Varis ro	
	REPLACE A WELL THAT	WILL BE USED	- A		
39 S AS A STANDBY-C	CONTACT LOCAL APPRO		70	Pursuant to § 10-624 of the Stat	
0	STANDBY WELLS	A/CL1		Maryland Code, personal info r	equested on this form
	DEEPEN AN EXISTING V VELL TO BE REPLACED	장이 없이 얼마나 이 살이 되었다. 그는 그 아이들은 그 없는 것이 없는데 없다.		is used in processing this form processing this form processing this form provide the	oursuant to COMAR
(IF AVAILABLE) 41	ELL TO BE HEPLACED	= 52	N	this form not being processed.	You have the right to
			-	inspect, amend, or correct this f	form. The Maryland
Not to be filled in	n by driller (MDE OR	COUNTY USE ONLY)	1 7	Department of the Environmen	t is subject to the
ADDDOD DEDLAT MILE	DED	G		Maryland Public Information A made available on the Internet	via MDE's website and
APPROP. PERMIT NUM	DEM 17 -			is subject to inspection or copyi	ng, in whole or in part,
	PERMIT No.	-18-0102		by the public and other governr	nental agencies, if not
	70 71	72 73 74 75 76 77 78 79	A LONGE	protected by federal or State Lav	v.
SPECIAL CONDITION	VS.	PADWIM	SALLOI	E	⊗
NOTE APPROVING AUTHORITIES SH	HOULD USE SEPARATE SHEET IF NEEDED	- 4110.0.	OHIOTE		•

House Ten Oako Rd Jamie Wescott 301-440-8947



7178 Columbia·Galeway Drive, Columbia, MID 2104 (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

TO ALL INTERESTED PARTIES

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

Well Site Location:		4870 J	en Oaks R	1
Subdivision Property Name	Lot#	Road Name		· 6 .
The well site has bee (professional land surveyo on		by ny employing profes e) and does not r	sional land survey equire a site in	vors)

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. Well staked by Joseph & Mayre well Drillery

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

Revised 3/11/05



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

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: AVS P19+ HH. Telephone #: 410-442-2221 Address: 121-30 Fraction No. 122-123 Must circle one (Licensed Plumbs) Licensed Well Driller / Licensed Well Pump Installer License # and man of Individual responsible for the field installation. Pame (Print): Carry (Ag 5-received From 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: Japanes West-cott Telephone #: 301-440-8947 Stindivision: Lot #: Well Tag #: IIO - IF - 1077 Stindivision: Lot #: Well Tag #: IIO - IF - 1077 Stindivision: Lot #: Well Tag #: IIO - IF - 1077 Stindivision: Lot #: Well Tag #: IIO - IF - 1077 Stindivision: Stancticible Pump Data Prites Adapter Make: Goot As Tag Despired Pump Data Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter Make: Goot As Tag Despired Installation And Prites Adapter On the Associated Prites Adapter On the Tag Pr	complete form is required prior to ese unit occupante, approvan	
Name of Property Owner: Tamus West-coff Telephone #: 301-440-8947 Subdivision: Site Address: 4870 Ten 0845 Tel Dayton MD 2036 Submersible Pump Data Make: Boshert Two piece waterlight cap: Model #: 56507422 Model #: 56507422 Model #: 5700 Ten 0845 Tel Model #: 56507422 Model #: 56507422 Model #: 56507422 Model #: 56507422 Well Yield: 5 CPM GPM NSF/NSC approved: Conduit min 18" B.G.: 18" Depth of well encountered at time of pump installation: If pump capacity exceeds well yield a low water cut off switch is required by NSPC 1990 Section 17.8.4 Must circle one: Forque arrestors Cable guard Other acceptable method used 5/6000 Unce Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well easing Piping to house Type: MT 200 PVC sleeve to undisturbed soil at wall penetration: Length of sleeve(5' minimum from foundation): 5' Depth of supply line: 36" (36" min) Sleeve scaled property: 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. **For Health Department Use Only Not to be completed by Installer Unspection Data: Pikes adapter wateright & 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	Address: 12630 Frederich Tel PO Bot 129 West Friends up MD 21794 Must circle one Licensed Plumber) Licensed Well Driller / Licensed Well Pump Installer License # and name of individual responsible for the field installation: Name (Print): Sary K95 mer License# 6500 *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.	
Model#: 56507422 Model#: 7-100-55 Screened, vented well cap: Pump Capacity 5 GPM GPM Depth: 3U" (36" min) Cap secured to casing: Well Yield: 5 GPM GPM NSF/WSC approved: Conduit min 18" B.G.: 18" Depth of well encountered at time of pump installation: (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 Must circle one: Forque arrestors Cable guards Other acceptable method used 5/ecve Wire Safety rope, if used, attached to brass rope adapter or other acceptable method used 5/ecve Wire Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing Piping to house Type: NT 200 PSI: 200 (160 psi min) Depth of supply line: 36" (36" min) 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 8-8-19 Signature of company representative responsible for installation 8-8-19 Signature of company representative acting the water supply line at least 36" below grade For Health Department Use Only Not to be completed by Installer 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 pittess adapter	Name of Property Owner: James Westcott Telephone #: 301-440-8947 Subdivision: Site Address: 4870 Ten Oaks Tel Dayton MD 21036 NEED WELL T	nc.
PVC sleeve to undisturbed soil at wall penetration: PSI: 200 (160 psi min) Depth of supply line: 36" (36" min) 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 8-8-19	Model#: 56507422 Model#: P-100-55 Screened, vented well cap: Pump Capacity 56PM GPM Depth: 36" (36" min) Cap secured to casing: Well Yield: 56PM GPM NSF/WSC approved: Conduit min 18" B.G.: 18" Depth of well encountered at time of pump installation: (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 Must circle one: Forque arrestors Cable guards Other acceptable method used sleeve ωire	
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 8-8-19	Type: NT 200 PVC sleeve to undisturbed soil at wall penetration: V PSI: 200 (160 psi min) Length of sleeve(5' minimum from foundation): 5'	
Date Insp. Requested: Only Date Insp. Approved: Date Inspection: 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	box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to	
Date Insp. Requested: Office Date Insp. Approved: Date Inspector: 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	Signature of company representative responsible for installation 8-8-19 date	
C(Revised form 19/24/2018)	Date Insp. Requested: Office Date Insp. Approved: Date Inspector: 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)
	("(Revised form 19/24/2018)	

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TIE IN TO



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

MEMORANDUM

August 19th, 2019

Gerald J Wescott

RE:

Replacement Well Sampling

4870 Ten Oaks Road Dayton, MD 21036

Well Permit # HO-18-0102

Dear Homeowner:

According to our records, your replacement well is proposed to be connected to the dwelling. We request that you contact the Community Hygiene Program at (410) 313-1773 to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). This sampling includes testing for bacteria, nitrates, turbidity, and sand. In addition, the well will need radium samples. There is currently no charge for the sampling and it is to your benefit to have it tested. The existing well must either be tied in for use or abandoned and sealed.

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office. If you have any further questions, you can call me at 410-313-2643. Otherwise, call Community Hygiene at 410-313-1773 to schedule or arrange for them to collect the subsequent water samples.

Sincerely,

Joseph C. Cabahug LEHS Licensed Environmental Health Specialist

Well & Septic Program Bureau of Environmental Health

Cc: Community Hygiene Program

File

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