

C16076860768

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.

COUNTY
NUMBER

ST/CO USE ONLY
DATE Received
10-07-2020

DATE WELL COMPLETED
1-10-20

Depth of Well
300
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-18-0146

OWNER
Haberst, Daniel + Goldberg, Brittany

WELL SITE ADDRESS
3985 Sharp Rd

TOWN
Greenbelt, MD

SUBDIVISION

SECTION

LOT

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	
Sof. Brown	0	48	
Hard G. Rock	48	300	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ CM BENTONITE CLAY ☒ BC

NO. OF BAGS ⁴⁵42 ⁴⁶ NO. OF POUNDS ⁴⁵1050 ⁴⁶1100

GALLONS OF WATER

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 STEEL ☒ CO CONCRETE

☒ PL PLASTIC ☒ OT OTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

60 61 63 64 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 ☒ HO OPEN HOLE

☒ PL PLASTIC ☒ OT OTHER

DEPTH (nearest ft.)

1 2 3 4 5 6 7 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)

56 60

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

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

8 9

PUMPING RATE (gal. per min.)

11 15

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20 ft.

WHEN PUMPING 22 25 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.

29

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

31 35

PUMP HORSE POWER

37 41

PUMP COLUMN LENGTH (nearest ft.)

43 47

CASING HEIGHT (circle appropriate box and enter casing height)

☒ + above ☒ - below

LAND SURFACE (nearest foot)

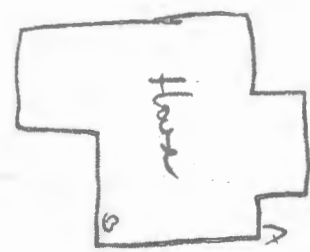
49 50 51

LATITUDE 39.26140

LONGITUDE 77.06891

(DEFAULT COORD. WGS 84)

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.

B 1	66628	SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 557261	STATE PERMIT NUMBER Ho - 18 - 0146 fill in this form completely
1 2 3 6	OWNER INFORMATION Date Received (APA) 01/01/2000 8 MM DD YY 13 Habersat Daniel + Goldberg Brianny 15 Last Name Owner First Name 34 3816 Swan House Court 36 Street or RFD 55 Burtonsville MD 20814 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL Howard 8 COUNTY 21 Charles Sharp 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 52 NEAREST TOWN 71 Glenelg
DRILLER INFORMATION Driller's Name Marshall Annette M S D 106 76 License No. 81 Allied Well Drilling Firm Name PO Box 129 Annapolis Junction MD 20701 Address Marshall Annette 12/31/19 Signature Date		B 4 SOURCES OF DRILLING WATER 1. Public 3. 1/10/20 Quik-Good # 11214191 3985 Sharp Rd 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST S EAST SOUTH 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 0021 BLK: PARCEL: 0208	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20		USE FOR WATER (CIRCLE APPROPRIATE BOX) [D] DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 [I] INDUSTRIAL, COMMERCIAL, DEWATERING [P] PUBLIC WATER SUPPLY WELL [T] TEST, OBSERVATION, MONITORING [O] OPEN LOOP GEOTHERMAL [C] CLOSED LOOP GEOTHERMAL	
APPROXIMATE DEPTH OF WELL _____ FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME STATE SIGNATURE DATE ISSUED 01/08/2000 43 MM DD YY 48 CO SIGNATURE EXP. DATE 01/08/2001 DON: DOY: N/A DOG: 1/10/2001	
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		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 1/10/20 3 holes, 300' 	
REPLACEMENT OR DEEPEENED 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 39 [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 DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (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. Ho - 18 - 0146 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED SEE ATT MEMO			



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: K+T Plumbing Telephone #: 443-8449073
Address: P.O. Box 2152
Westminster MD 21158

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer

License # and name of individual responsible for the field installation

Name (Print): Tom D. Maggiora License #: 21951

*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: Gregory Telephone #: 301-330-0000
Subdivision: _____ Lot #: _____ Well Tag #: HO-81-0772
Site Address: 3985 Shurep Rd
Calexico MD 21738

Submersible Pump Data

Make: Dutton
Model #: 12284
Pump Capacity: 8
Well Yield: 12 GPM

Depth of well encountered at time of pump installation: 395 (feet)

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

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

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

Pitless Adapter

Make: SMYDAS
Model #: 1522SD
GPM Depth: 48 (36" min)
GPM 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.: ✓
Conduit secured to well cap: ✓

Piping to house

Type: Poly
PSI: 250 (160 psi min)
Depth of supply line: 48 (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: Thomas D. Maggiora Jr. date: 3/30/20

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

Date Insp. Requested: _____ Date Insp. Approved: 3/30/20 Inspector: 1234

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 10/24/2018)

Website: www.hchealth.org Facebook: www.facebook.com/hocohealth Twitter: @HoCoHealth

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – DECEMBER 12, 2020

June 12, 2020

Homeowner
3985 Sharp Road
Glenwood, MD 21738

RE: Charles Sharp Subdivision, Lot 7
3985 Sharp Road
Building Permit: B19002348
Well Permit: HO-88-0772

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 **6/3/2020**. Final approval of the well line connection to the dwelling was granted on **3/31/2020**. The well construction was completed on **7/12/1989**. Water samples were collected on **6/2/2020, 6/8/2020**.

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-88-0772. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

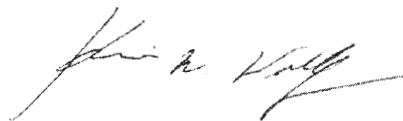
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will 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>

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

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



Kevin M. Wolf, LEHS, R.S./REHS, Supervisor
Groundwater Management Section
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 #:	137577	Account #:	4226
Reference:	Goldberg	Company:	Viking Development Corporation
Location:	3985 Sharp Road	Requested By:	Cary Cumberland
	Glenwood, MD 21738	Source:	Well Water
Date/ Time Collected:	6/2/2020 1028	Site:	Pressure Tank
Date/Time Rec'd:	6/2/2020 1430	Treatment:	**
Chlorine ppm:	Free: ND Total: ND	pH:	5.8
Collected By:	J. Yeager 0819JY	Well #:	HO-88-0772

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	3.1	MPN/ 100 ml	<1.0	SM20 9223B	6/3/2020 / 1045 / BCD
Bacteria, E. coli, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM20 9223B	6/3/2020 / 1045 / BCD
Nitrate	4.01 ✓	mg/L	10	601	6/2/2020 / 1635 / CRS
Sand	8.50	mg/L	5	Visual/Gravimetric	6/3/2020 / 1010 / CRS
Turbidity	11.4	NTU	<10	SM20 2130B	6/2/2020 / 1705 / CRS

NOTES

- 1 **Sample collected prior to Spin-down Separator
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 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 pH & Chlorine level tested on site
- 8 Visual well check: Sealed, vented cap: Cap Appeared Satisfactory

Reason for Test : Use & Occupancy

Building Permit # : 19002348

Date Reported: 6/3/2020

REPORT OF ANALYSIS

Laboratory ID #: 137685
Reference: Goldberg
Location: 3985 Sharp Road
Glenwood, MD 21738
Date/ Time Collected: 6/8/2020 1050
Date/Time Rec'd: 6/8/2020 1556
Chlorine ppm: Free: ND Total: ND
Collected By: J. Yeager 0819JY
Account #: 4226
Company: Viking Development Corporation
Requested By: Cary Cumberland
Source: Well Water
Site: Pressure Tank
Treatment: **
pH: 5.9
Well #: HO-88-0772

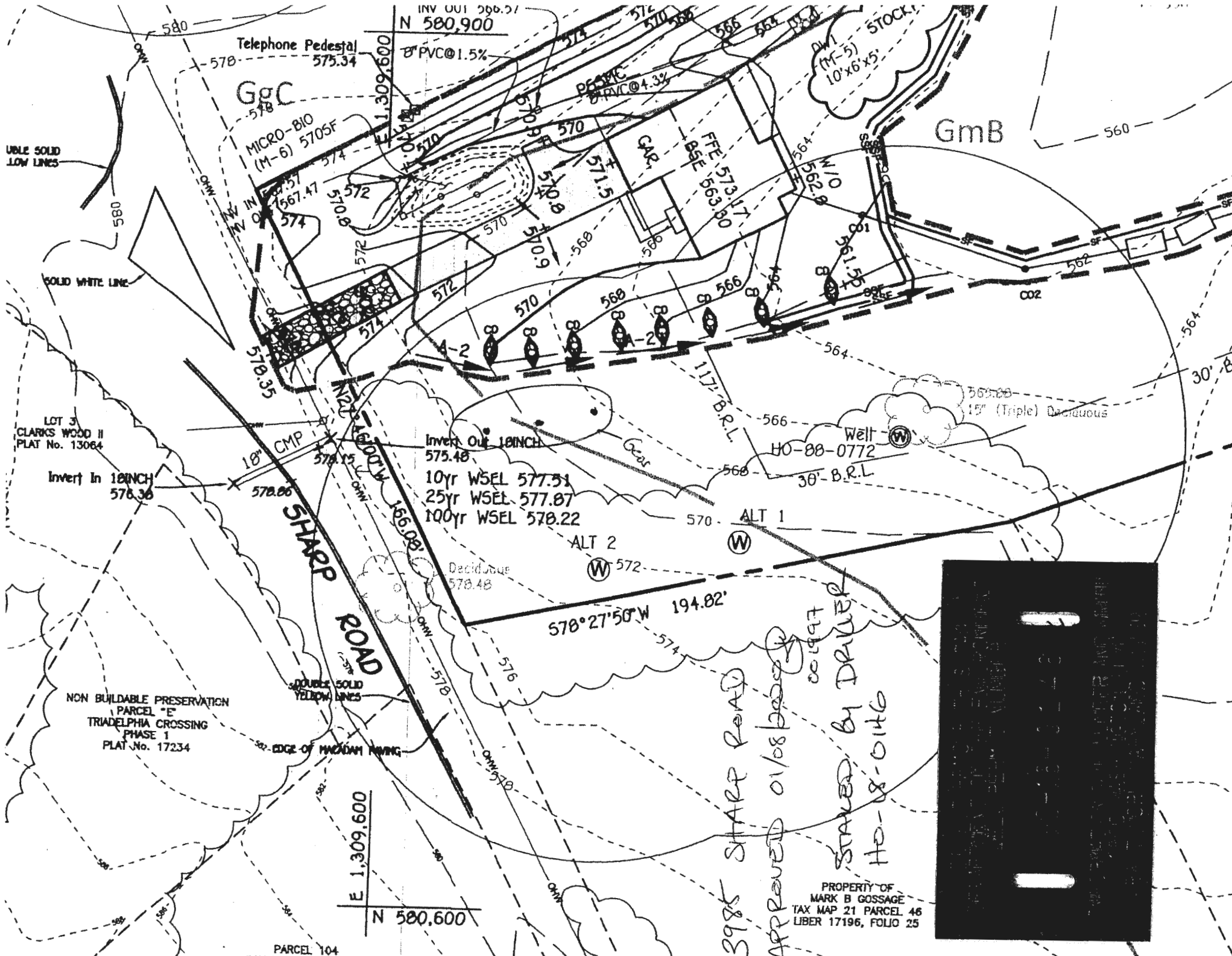
PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	6/9/2020 / 1100 / BCD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	6/9/2020 / 1100 / BCD
Turbidity	1.82	NTU	<10	SM20 2130B	6/9/2020 / 1000 / CRS
Sand	ND	mg/L	5	Visual/Gravimetric	6/9/2020 / 1000 / CRS

NOTES

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- 2 NTU = Nephelometric Turbidity Units
- 3 pH & chlorine tested on site
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 ND:None Detected
- 6 Visual well check: Sealed, vented cap
- 7 **Sample collected prior to Spin-down Separator

Reason for Test : Use & Occupancy
Building Permit # : 19002348

Date Reported: 6/9/2020



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

MEMORANDUM

TO: Fisher, Collins & Carter, Inc.
10272 Baltimore National Pike
Ellicott City, MD 21042

FROM: Hank Oswald, L.E.H.S.
Well & Septic Program

RE: Charles Sharp Subdivision, Lot 7

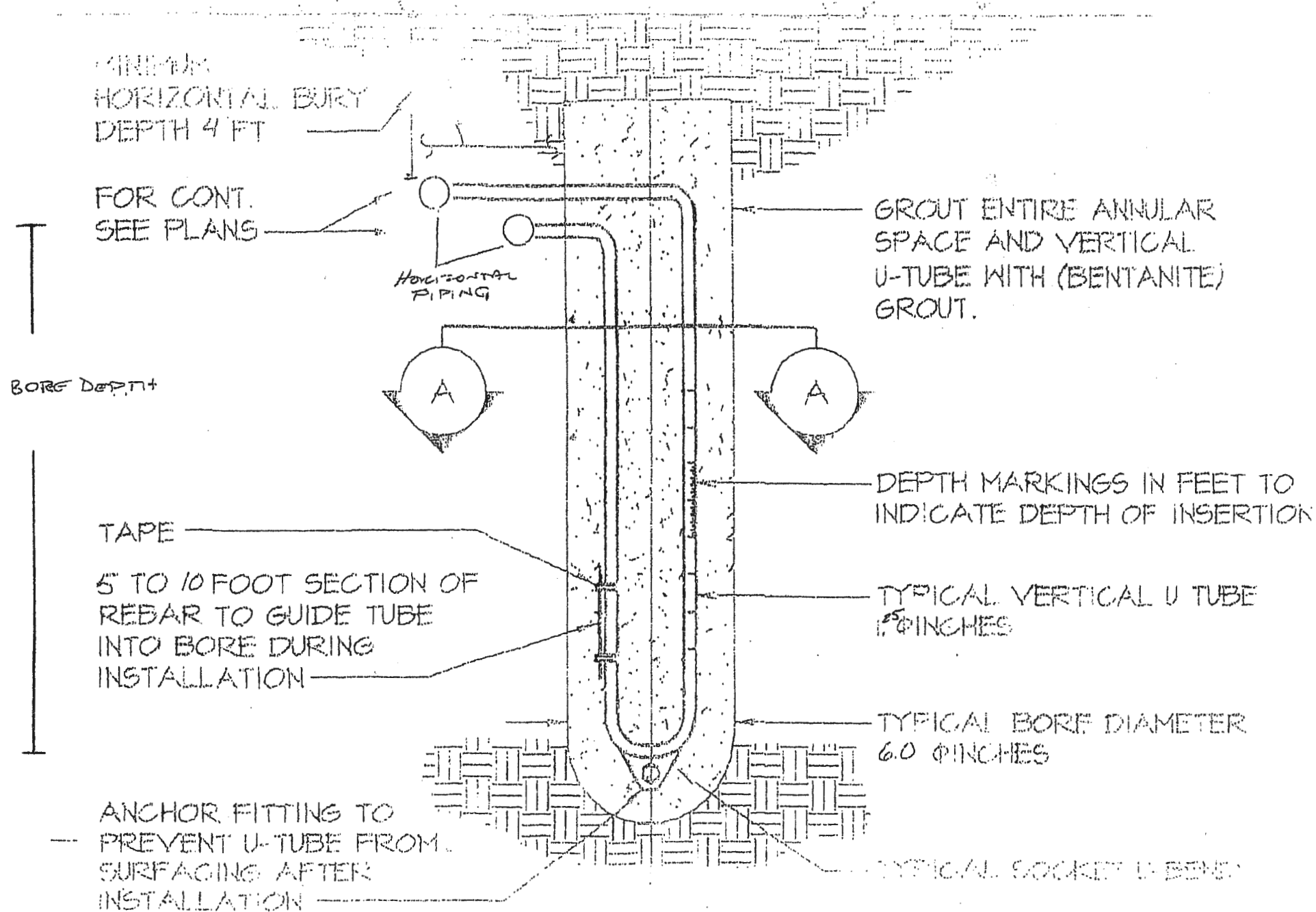
Date: February 12, 2019

The amended perc cert plan for **Charles Sharp Subdivision, Lot 7** has been reviewed with the following comment:

- 1.) Add well tag # (see attachment)
- 2.) Add well field location note
- 3.) Perc test holes 3 & 4 (1985) and 1 & 2 (1996) locations are reversed (see attachments)
- 4.) Add soil units on plan

GRADE

EACH BORE HOLE (TYP.)



HOWARD COUNTY GROUTING PROCEDURE

Boreholes will be grouted from the bottom to the top via a tremie pipe and positive displacement pump. Bentonite grout, known as Quik-Grout will be used according to the manufacturer's specifications to achieve a consistency of at least 20% solids (24 gallons potable water/50 lb. sack of grout) and a permeability no more than $2.5 \text{ E}(-08) \text{ cm/sec}$. Grouting will be completed immediately after installing the geothermal loop and no later than twenty-four (24) hours after installing the geothermal loop. Open boreholes/annular space will be protected as necessary to prevent the entry of surface water or pollutants.