SEQUENCE NO. THIS REPORT MUST BE SUBMITTED WITHIN STATE OF MARYLAND (MDE USE ONLY) 45 DAYS AFTER WELL IS COMPLETED. WELL COMPLETION REPORT COUNTY THIS MIMBER IS TO BE PUNCHED FILL IN THIS FORM COMPLETELY NUMBER 560592-6 PLEASE TYPE IN COLS 3 6 ON ALL CARDS) ST/CO USE ONLY DATE WELL COMPLETED Depth of Well FROM "PERMIT TO DRILL WELL" **DATE Received** -0031 500 28 29 30 31 32 33 34 35 36 37 (TO NEAREST FOOT) FAMILY TOWN SPEES VICLE WELL SITE ADDRESS MEDEW LOT 14 SUBDIVISION\_ WALKER SECTION GROUTING RECORD 3 WELL HAS BEEN GROUTED (Circle Appropriate Box) Not required for driven wells **PUMPING TEST** STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING TYPE OF GROUTING MATERIAL (Circle one) HOURS PUMPED (nearest hour) CEMENT CM BENTONITE CLAY B C check if water bearing DESCRIPTION (Use additional sheets if needed) FEET NO. OF BAGS 46 13 FROM TO NO. OF POUNDS 650 PUMPING RATE (gal. per min.) 15 METHOD USED TO WATCH & BUCKET TAN GROUND, GALLONS OF WATER\_ 88 DEPTH OF GROUT SEAL (to nearest fool) SHALE, CLAY 52 ft. to 677 H WITH CULLAPSTING WATER LEVEL (distance from land surface) AREA'S (enter 0 if from surface) BEFORE PUMPING CASING RECORD casing types 148 GREEN/GREY 88 insert WHEN PUMPING appropriate code OT TYPE OF PUMP USED (for test) below OTHER 148 150 P piston turbine TAN SCHEST MAIN Nominal diameter Total depth top (main) casing of main casing CASING (nearest inch)! (nearest foot) (describe TYPE centrifugal GREENISCHIST 500 rotary 150 57 6 100 GREY 60 63 64 61 submersible OTHER CASING (if used) diameter depth (feet) inch from **PUMP INSTALLED** DRILLER INSTALLED PUMP NO (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. SCREEN RECORD screen type or open hole TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) 20 BR HO ST IN BOX 29. WATER BEART insert CAPACITY appropriate BRONZE HOLE 148-150 FT GALLONS PER MINUTE code 31 PL OIT (to nearest gallon) 35 below 465- 468 FT **PUMP HORSE POWER** 41 C 2 DEPTH (nearest ft.) PUMP COLUMN LENGTH NUMBER OF UNSUCCESSFUL WELLS: (nearest ft.) 43 CASING HEIGHT (circle appropriate box 21 WELL HYDROFRACTURED N and enter casing height) + above LAND SURFACE CIRCLE APPROPRIATE LETTER 36 30 32 24 26 A WELL WAS ABANDONED AND SEALED s (nearest) below WHEN THIS WELL WAS COMPLETED foot) **ELECTRIC LOG OBTAINED** 38 39 TEST WELL CONVERTED TO PRODUCTION LATITUDE 39.34.92 SLOT SIZE 1 I HEREBY CERTORY 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 LONGITUDE 7 6. 94110 DIAMETER (NEAREST OF SCREEN INCH) (DEFAULT COORD, WGS 84) 60 from NOTES: DRILLERS LIG. NO. 1, M NO 576 GRAVEL PACK LIF WELL DRILLED DRILLERS SIGNATURE WAS FLOWING WELL MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) LIC. NO. 1 75 D 1 48 (E.R.O.S.) w o ⊛ -- ORILLER MAY 22 2017 74 75 76 SITE SUPERVISOR (sign. of driller or journeyman LOG TELESCOPE HOWARD GUUNTY HEALTH DEPT. responsible for sitework if different from permittee) INDICATOR OTHER DATA COUNTY MDE/WMA/PER.071

Yield Test Data Sheet County File # 5605 42-C

MD Well Permit #: 40-17-0031 Subdivision Name: Walker Madaw	Pump Start Time	Static Weter level: 34 ft.	Pumping Rate  () Time to fill i gal. bucket  () Flow meter	Calculated Flow (gallons per minute)
Street Address: HIGH STEEPER TRAZE SYKESVZ	TIME	WATER LEVEL	reading (if used)	
Measuring Point (MP) Description: Top of casing")	Water level an	BELOW M.P.  d pumping rate minut		led every 15
Distance from MP to ground surface 2 ft.	1 9:30	34 ft.	7	185 GPM
	29:45	12- n	7	A.S GPM
Well Depth 500 ft.	3/0:00	// 6 ft.	7	8 S GPM
		144 ft.	1	R.S GPM
Well Driller: Willin & Hech ISD-09.	5 /0 :30	169 ft.	4	R.S GPM
ALEXANDERS WELL DRILLING  Must be submitted with the State of Maryland Well	6 10 1 4 5	188 n.	7	7.5 GPM
Completion Report	7//:00	209 ft.	7	P. S GPM
Submit to: 3		229 m	7	& S GPM
Submit to: Bureau of Environmental Health	9 11:30	241 n	8	7.5 GPM
Columbia Md. 21045	10/1:45	254 A.	3	7.5 GPM
	11/21.00	258 A	9	R. G GPM
· * ·	12 /2 1/5	265 ft.	9	& GPM
	13 /2 . 30	170 n.	9	6 GPM
•	14	, ft.		GPM
NOTES:	15/2434	270 n.	A 11	5.4 GPM
	16	ft.		GPM
5/1/17	17	ft.		GPM
	18	ft.		GPM
E I	19	ft.		GPM
	20	ft.		GPM
	21	ft.		GPM
1 .	22	ft.	·	GPM
1	23	ft.	·	GPM
	24	ft.		GPM
	25	ft.		GPM
RECEIVED	26	ft.		GPM
LICIAL VEXIO	27	, ft.		GPM
MAY 22 2017	28	ft.		GPM

29

30

ft.

**GPM** 

**GPM** 

HOWARD COUNTY HEALTH DEPT. BUREAU OF ENVIRONMENTAL HEALTH U:\ENV\FORMS\WELLS\data.sheet

### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST:

Well Permit No. HO - 7-0031 Location of property (road) High Steps Subdivision Walker Meadows	Lot 14 Block Plat Sec.
Well Driller Alexander Well Prilling	Owner Gilliece Family LLC
Depth of well 500 Distance of measuring point (M.P.) Static water level (S.W.L.) below	above ground 2
Time pump started 7-30 Am  Total time 1HR 15 m to reach pump	own

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	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8.45	256	9.2 sec.		6.569m
9:00	256	9.2 sec.		6.56PM
925	256	9.2 Sec.		6.569M
9:30	256	9.2 sec.		6.56PM
945	256	9.2 Sec.		6.56PM
1000	256	9.2 sec		6-56 PM
1075	256	9.2 sec.		6-561h
1030	236	9.2 Sec.		6.56PM
1045	256	9.2 500.		6.5 Car
11:00	2.56	9.2 sec.		6.56PM
11-15	256	9-2 sec.		6.56PM
11-30	256	9.2 sec.		6-5 GPM
11:45	256	9.2 sec.		6-5 GPM
12:00	256	9.2 sec.		6.5 GPM
				The state of the s
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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

### **INTERIM CERTIFICATE OF POTABILITY**

Expiration Date - OCTOBER 20, 2020

April 20, 2020

Homeowner 1041 Stepping Place West Friendship, MD 21794

RE:

Walker Meadows, Lot 14

1041 Stepping Place

Building Permit: B19004198 Well Permit: HO-17-0031

### 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 3/17/2020. Final approval of the well line connection to the dwelling was granted on 2/19/2020. The well construction was completed on 5/1/2017. Water samples were collected on 4/13/2020.

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-17-0031. 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

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



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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

### Cabahug, Joseph

From:

Cabahug, Joseph

Sent:

Monday, March 26, 2018 3:01 PM

To:

Randall Alexander

Cc: Subject: Wolf, Kevin; Collins, Sarah; Rappaport, Ryan Walker Meadows Lot 14 - Failed Yield Test

Attachments:

Walker Meadows\_Yield Test\_Lot 14\_2017.05.01.pdf

Hello Alexander's Well Drilling,

The yield test performed on Walker Meadows lot 14 is deemed not passing per COMAR 26.04.04.26(G)(4)(b):

The pump test may be terminated early and the well yield shall be considered adequate if a well yields 4 gallons per minute or greater for 3 hours continuous pumping after the well has been pumped out, [where] pumping shall begin at a rate of withdrawal greater than 8 gallons per minute until the water level drops to a point close to the pump.

From 9:30 to 12:30 the water level was reported to be steadily decreasing towards the pump, confirmed with HCHD notes.

I vaguely recall there being an issue this day during the yield in which the field operator informed me that something happened with the pump and another yield test would be required at a later date. This is a friendly reminder. Please reschedule a yield test for this lot.

Bests,

Joseph C. Cabahug - LEHS
Environmental Health Specialist
Howard County Health Department - Well & Septic Program
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, MD 21045
(o) 410-313-2643





jcabahug@howardcountymd.gov

### CONFIDENTIALITY NOTICE

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## 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 #:

136725

Account #:

1933

Reference:

Walker Meadows Lot 14

Company:

Fogles Well Pump & Treatment

Location:

1041 Stepping Place West Friendship, MD 21794

Requested By: Dave Fogle

Date/ Time Collected: 4/13/2020

0840

Source:

Well Water

Site:

Pressure Tank

Date/Time Rec'd:

1015

Treatment:

None

Chlorine ppm:

4/13/2020 Free: ND

Total: ND

pH:

7.2

Collected By:

J. Evans

0309JE

Well #:

HO-17-0031

PARAMETERS :	RESULTS	UNITS RE	FERENCE	METHOD D	ATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/14/2020 / 0900 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/14/2020 / 0900 / RER
Iron	0.05	mg/L	0.3*	FR, 45 (126)	4/13/2020 / 1145 / RER
Nitrate	<1.0	mg/L	10	601	4/14/2020 / 0920 / CRS
Turbidity	0.75	NTU	<10	SM20 2130B	4/14/2020 / 0935 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	4/14/2020 / 0935 / CRS

### **NOTES**

- \*SMCL = Secondary Maximum Contaminant Level 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.
- 7 Sample collected by client, analyzed as received
- ND:None Detected 8
- 9 Visual well check: Sealed, vented cap
- pH and Chlorine level tested in lab (pH tested after recommended holding time) 10

Reason for Test:

Use & Occupancy

Building Permit #:

19004198

Date Reported:

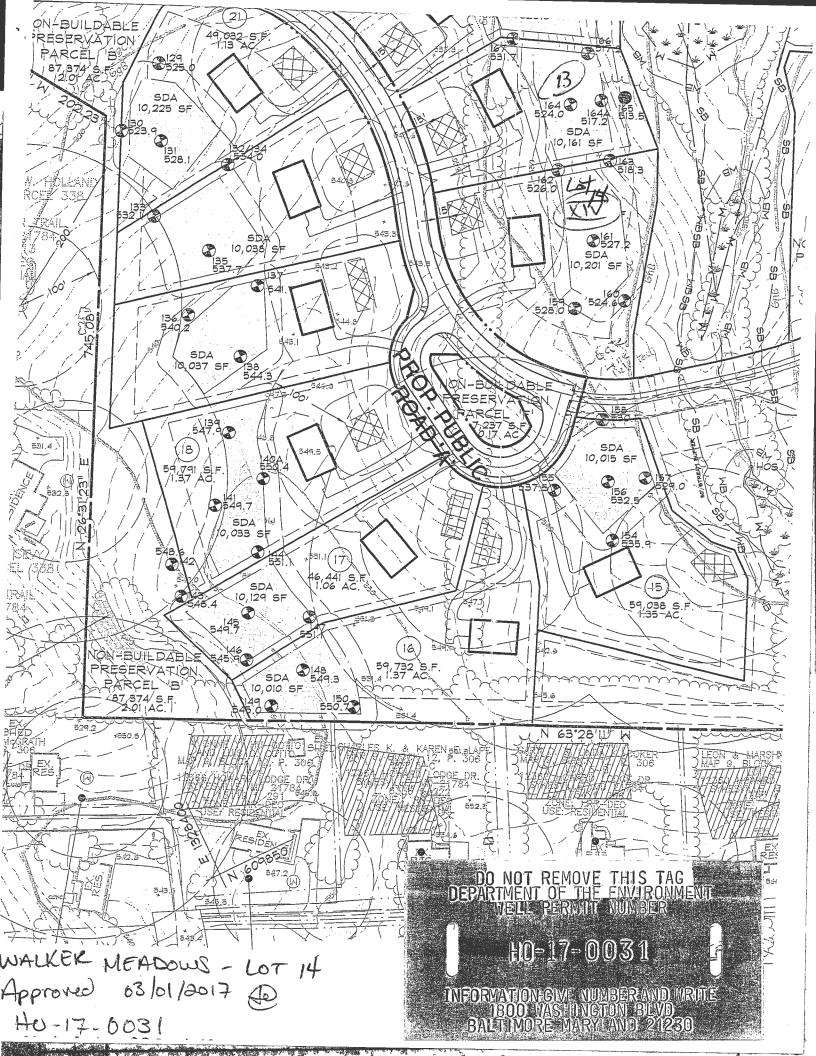
4/14/2020

[LOT 14 ]

Test Walker Meadow Sub.

FILE INQUIRY NOTES High Stepper trail
Alexander Well

and the second	nuxanaer well
DATE	RESULTS OF REVIEW FOR FILE
46/4	Granting: 20 gal the per 50 165 bentonite
ingenilphinasinanininingsprantesigliphay	Benseal - 13 bags -75-1 gal EZ MUD EmulsiAler
isa aa cika ayya ta tiiraa fikka ay maa ay kifi aasta. T	45' Trumie Pipe
*	·
	yield:
	July :
	Pump 8et 1300' ~ 500 Deep
	Static Water 34' ~100' casing
naponi e sinapidano me ida liberatura ang	## kow
in the second se	11:30 241' Fre Igel FI
	11:45 254' 8.75 Caro PIL
***************************************	12:00 258' 9 me 1900 fil
ellerining	
Action to the second	
and the second s	
	at any control of the state of
<del></del>	



Walker Madous

# FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
5/22/2017	t yield test failed. Driller notified of
	t yield tost failed. Driller notified of Reviseld P
4/27/8	Socke to Driller in field to confirm reyteld.
	Spoke to Driller in field to confirm reyteld. They are aware and will make contact?



Received

CHECK ☐ CASH

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# HOWARD COUNTY HEALTH DEPARTMENT

60638

PHONE #

Received By