

<b>C1</b> 1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY) <b>55755</b>	<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  COUNTY NUMBER <b>XIII</b>																																																																																																																																																						
ST/CO USE ONLY DATE Received MM <b>01</b> DD <b>04</b> YY <b>19</b> 8 13	DATE WELL COMPLETED MM <b>01</b> DD <b>04</b> YY <b>19</b> 15 20	Depth of Well <b>463</b> 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" <b>HO - 17 - 0372</b> 28 29 30 31 32 33 34 35 36 37																																																																																																																																																						
OWNER <b>ZIEGLER JESSICA &amp; SOPHIE - TOLL BROTHERS INC.</b> WELL SITE ADDRESS <b>PROPOSED PUDDING LANE</b> TOWN <b>ELICOTT CITY</b> SUBDIVISION <b>KINGS FOREST</b> SECTION <b>15</b> LOT <b>15</b>																																																																																																																																																									
<b>WELL LOG</b> Not required for driven wells  STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT <b>CM</b> BENTONITE CLAY <b>BC</b> NO. OF BAGS <b>12</b> NO. OF POUNDS <b>600</b> GALLONS OF WATER <b>240</b> DEPTH OF GROUT SEAL (to nearest foot) from <b>0</b> TOP 52 ft. to <b>38</b> BOTTOM 58 ft. (enter 0 if from surface)																																																																																																																																																							
<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>YELLOW - BROWN CLAY SAPROLITE</td> <td>0</td> <td>10</td> <td></td> </tr> <tr> <td>WHITE QUARTZITE GNEISS HARD</td> <td>10</td> <td>41</td> <td>X</td> </tr> <tr> <td>GRAY/BLACK GNEISS</td> <td>41</td> <td>190</td> <td></td> </tr> <tr> <td>FRACTURE</td> <td>190</td> <td>191</td> <td>X</td> </tr> <tr> <td>GRAY/BLACK GNEISS</td> <td>191</td> <td>275</td> <td></td> </tr> <tr> <td>SOFT GNEISS</td> <td>275</td> <td>280</td> <td></td> </tr> <tr> <td>GRAY/BLACK GNEISS</td> <td>280</td> <td>463</td> <td></td> </tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	YELLOW - BROWN CLAY SAPROLITE	0	10		WHITE QUARTZITE GNEISS HARD	10	41	X	GRAY/BLACK GNEISS	41	190		FRACTURE	190	191	X	GRAY/BLACK GNEISS	191	275		SOFT GNEISS	275	280		GRAY/BLACK GNEISS	280	463		<b>CASING RECORD</b> casing types insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><b>ST</b> STEEL</td> <td><b>CO</b> CONCRETE</td> </tr> <tr> <td><b>PL</b> PLASTIC</td> <td><b>OT</b> OTHER</td> </tr> </table> MAIN CASING TYPE <b>PL</b> Nominal diameter top (main) casing (nearest inch) <b>6</b> Total depth of main casing (nearest foot) <b>40</b> 60 61 63 64 66 70 OTHER CASING (if used) diameter depth (feet) inch from to EACH CASING		<b>ST</b> STEEL	<b>CO</b> CONCRETE	<b>PL</b> PLASTIC	<b>OT</b> OTHER																																																																																																																
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NUMBER OF UNSUCCESSFUL WELLS: <b>0</b>  WELL HYDROFRACTURED <b>Y</b> <b>N</b>  CIRCLE APPROPRIATE LETTER <b>A</b> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <b>E</b> ELECTRIC LOG OBTAINED <b>P</b> 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.		<b>SCREEN RECORD</b> screen type or open hole insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><b>ST</b> STEEL</td> <td><b>BR</b> BRASS BRONZE</td> <td><b>HO</b> OPEN HOLE</td> </tr> <tr> <td><b>PL</b> PLASTIC</td> <td><b>OT</b> OTHER</td> <td></td> </tr> </table>		<b>ST</b> STEEL	<b>BR</b> BRASS BRONZE	<b>HO</b> OPEN HOLE	<b>PL</b> PLASTIC	<b>OT</b> OTHER																																																																																																																																																	
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DRILLERS LIC. NO. <b>MWD 576</b> DRILLERS SIGNATURE <b>[Signature]</b> (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. <b>MWD 594</b> <b>[Signature] - DRILLER</b>  SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		<b>DEPTH (nearest ft.)</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td><td>39</td><td>40</td><td>41</td><td>42</td><td>43</td><td>44</td><td>45</td><td>46</td><td>47</td><td>48</td><td>49</td><td>50</td><td>51</td><td>52</td><td>53</td><td>54</td><td>55</td><td>56</td><td>57</td><td>58</td><td>59</td><td>60</td><td>61</td><td>62</td><td>63</td><td>64</td><td>65</td><td>66</td><td>67</td><td>68</td><td>69</td><td>70</td><td>71</td><td>72</td><td>73</td><td>74</td><td>75</td><td>76</td><td>77</td><td>78</td><td>79</td><td>80</td><td>81</td><td>82</td><td>83</td><td>84</td><td>85</td><td>86</td><td>87</td><td>88</td><td>89</td><td>90</td><td>91</td><td>92</td><td>93</td><td>94</td><td>95</td><td>96</td><td>97</td><td>98</td><td>99</td><td>100</td> </tr> <tr> <td colspan="10"></td> <td colspan="10"><b>HO</b></td> <td colspan="10"><b>38</b></td> <td colspan="10"><b>463</b></td> <td colspan="10"></td> </tr> </table> SLOT SIZE 1 <b>6</b> 2 <b>3</b> 3 <b>3</b> DIAMETER OF SCREEN <b>6</b> (NEAREST INCH) 56 60 64 68 72 76 80 84 88 92 96 100 from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <b>68</b> MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA		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	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100											<b>HO</b>										<b>38</b>										<b>463</b>																			
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LATITUDE <b>39.257455</b> LONGITUDE <b>76.883701</b> (DEFAULT COORD. WGS 84)		<b>PUMPING TEST</b> HOURS PUMPED (nearest hour) <b>7</b> PUMPING RATE (gal. per min.) <b>2</b> METHOD USED TO MEASURE PUMPING RATE <b>WATCH &amp; BUCKET</b> WATER LEVEL (distance from land surface) BEFORE PUMPING <b>28</b> ft. WHEN PUMPING <b>170</b> ft. TYPE OF PUMP USED (for test) <b>A</b> air <b>P</b> piston <b>T</b> turbine <b>C</b> centrifugal <b>R</b> rotary <b>O</b> other (describe below) <b>J</b> jet <b>S</b> submersible  <b>PUMP INSTALLED</b> DRILLER INSTALLED PUMP (CIRCLE) (YES OR NO) <b>NO</b> 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 <b>29</b> CAPACITY: GALLONS PER MINUTE (to nearest gallon) <b>31</b> <b>35</b> PUMP HORSE POWER <b>37</b> <b>41</b> PUMP COLUMN LENGTH (nearest ft.) <b>43</b> <b>47</b> CASING HEIGHT (circle appropriate box and enter casing height) <b>+</b> above <b>LAND SURFACE</b> <b>-</b> below <b>Z</b> (nearest foot) 49 50 51																																																																																																																																																							

<b>B 1</b> <div style="font-size: 2em; font-weight: bold; margin-top: 10px;">59802</div>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> <div style="font-size: 1.5em; margin-top: 10px;">564034-B</div> please type	STATE PERMIT NUMBER <div style="font-size: 1.5em; margin-top: 10px;">40-17-0372</div> fill in this form completely
Date Received (APA) <div style="font-size: 1.2em; margin-top: 10px;">10/10/18</div> <div style="display: flex; justify-content: space-between;"> <span>8 MM DD YY 13</span> </div> <div style="display: flex; justify-content: space-between;"> <span>15 Last Name</span> <span>Owner</span> <span>First Name</span> <span>34</span> </div> <div style="display: flex; justify-content: space-between;"> <span>36</span> <span>Street or RFD</span> <span>55</span> </div> <div style="display: flex; justify-content: space-between;"> <span>57 Town</span> <span>70 State</span> <span>72 Zip</span> <span>76</span> </div>		<b>B 3</b> <b>LOCATION OF WELL</b> <div style="margin-top: 10px;">Howard</div> <div style="display: flex; justify-content: space-between;"> <span>8 COUNTY</span> <span>21</span> </div> <div style="margin-top: 10px;">Kings Forest</div> <div style="display: flex; justify-content: space-between;"> <span>23 SUBDIVISION</span> <span>42</span> </div> <div style="display: flex; justify-content: space-between;"> <div>           SECTION <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <span>44</span> <span>46</span> </div> </div> <div>           LOT <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <span>48</span> <span>50</span> </div> </div> </div> <div style="margin-top: 10px;">Ellicott City</div> <div style="display: flex; justify-content: space-between;"> <span>52 NEAREST TOWN</span> <span>71</span> </div>	
<b>OWNER INFORMATION</b> <div style="margin-top: 10px;">Ziegler Jessica &amp; Sophie</div> <div style="display: flex; justify-content: space-between;"> <span>15 Last Name</span> <span>Owner</span> <span>First Name</span> <span>34</span> </div> <div style="display: flex; justify-content: space-between;"> <span>36</span> <span>Street or RFD</span> <span>55</span> </div> <div style="display: flex; justify-content: space-between;"> <span>57 Town</span> <span>70 State</span> <span>72 Zip</span> <span>76</span> </div>		<b>DRILLER INFORMATION</b> <div style="margin-top: 10px;">RANDALL L. ALEXANDER M W D 576</div> <div style="display: flex; justify-content: space-between;"> <span>Driller's Name</span> <span>76</span> <span>License No.</span> <span>81</span> </div> <div style="margin-top: 10px;">ALEXANDER'S WELL DRILLING</div> <div style="display: flex; justify-content: space-between;"> <span>Firm Name</span> <span>34</span> </div> <div style="margin-top: 10px;">126 W. MAIN ST. P.O. BOX 443 FAIRFIELD, PA. 17322</div> <div style="display: flex; justify-content: space-between;"> <span>Address</span> <span>55</span> </div> <div style="margin-top: 10px;">Ratall L. dot 10-1-18</div> <div style="display: flex; justify-content: space-between;"> <span>Signature</span> <span>Date</span> </div>	
<b>B 2</b> <b>WELL INFORMATION</b> <div style="margin-top: 10px;">APPROX. PUMPING RATE</div> <div style="display: flex; justify-content: space-between;"> <span>8</span> <span>12</span> </div> <div style="margin-top: 10px;">AVERAGE DAILY QUANTITY NEEDED</div> <div style="display: flex; justify-content: space-between;"> <span>14</span> <span>20</span> </div>		<b>B 4</b> <b>SOURCES OF DRILLING WATER</b> 1. WELL WATER 2. 3.	
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <div style="margin-top: 10px;"> <input type="checkbox"/> DOMESTIC POTABLE SUPPLY &amp; RESIDENTIAL IRRIGATION  <input type="checkbox"/> FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION)  <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING  <input type="checkbox"/> PUBLIC WATER SUPPLY WELL  <input checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING  <input type="checkbox"/> OPEN LOOP GEOTHERMAL  <input type="checkbox"/> CLOSED LOOP GEOTHERMAL       </div>		<b>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</b> <div style="text-align: center; margin-top: 10px;">         NORTH  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">W</div> <div style="text-align: center;">N</div> <div style="text-align: center;">E</div> </div> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">WEST</div> <div style="text-align: center;">S</div> <div style="text-align: center;">EAST</div> </div> <div style="text-align: center;">SOUTH</div> </div> <div style="margin-top: 10px;">         DISTANCE FROM ROAD          ENTER FT OR MI       </div>	
<b>APPROXIMATE DEPTH OF WELL</b> <div style="border-bottom: 1px solid black; width: 50px; display: inline-block;"></div> FEET <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <span>24</span> <span>28</span> </div>		<b>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</b> <div style="margin-top: 10px;">Howard</div> <div style="display: flex; justify-content: space-between;"> <span>COUNTY NAME</span> <span>COUNTY NO.</span> </div> <div style="margin-top: 10px;">STATE SIGNATURE</div> <div style="display: flex; justify-content: space-between;"> <span>DATE ISSUED</span> <span>INSERT S →</span> </div> <div style="display: flex; justify-content: space-between;"> <div> <div style="font-size: 0.8em;">43 MM DD YY 48</div> <div style="font-size: 1.2em;">11/20/18</div> </div> <div> <div style="font-size: 1.2em;">11/20/18</div> <div style="font-size: 0.8em;">EXP. DATE</div> </div> </div>	
<b>APPROXIMATE DIAMETER OF WELL</b> <div style="border-bottom: 1px solid black; width: 50px; display: inline-block;"></div> INCH <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <span>24</span> <span>28</span> </div>		<b>PROPOSED LOCATION OF WELL ON LOT</b> SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <span>12/27/2018</span> <span>General 10524183</span> </div> <div style="margin-top: 10px;">           200' Deep @ inspection            10' Casing            BK @ 10'         </div> <div style="margin-top: 10px;"> </div> </div>	
<b>METHOD OF DRILLING (circle one)</b> <div style="display: flex; justify-content: space-between;"> <div>           BORED (or Augered)  <input type="checkbox"/> AIR-ROTary  <input type="checkbox"/> CABLE            other         </div> <div>           JETTED  <input checked="" type="checkbox"/> AIR-PERCussion  <input type="checkbox"/> REVERSE-ROTary         </div> <div>           Jetted &amp; DRIVEN  <input type="checkbox"/> ROTARY (Hydraulic Rotary)  <input type="checkbox"/> Drive-POINT         </div> </div>		<b>REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)</b> <div style="margin-top: 10px;"> <input 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  <input checked="" 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       </div>	
<b>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)</b>		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>Not to be filled in by driller (MDE OR COUNTY USE ONLY)</b> APPROP. PERMIT NUMBER <div style="border-bottom: 1px solid black; width: 100px; display: inline-block;"></div>		<div style="text-align: center; margin-top: 10px;"> <div style="font-size: 2em;">N</div> <div style="font-size: 1.5em;">↑</div> </div>	
PERMIT No. <div style="border-bottom: 1px solid black; width: 100px; display: inline-block;"></div>			
<b>SPECIAL CONDITIONS</b> NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.			

RADIUM SAMPLES REQUIRED



FIELD DATA SHEET

Well Permit No. HO - 17-0372

Location of property (road) PROPOSED PUDDING LANE

Subdivision KINGS FOREST

Lot 15 Block 23 Plat \_\_\_\_\_ Sec. \_\_\_\_\_

Well Driller ALEXANDERS WELL DRILLING

Owner JESSICA & SOPHIE ZIEGLER - TOLL BROTHERS INC.

Depth of well 463 FT.

Distance of measuring point (M.P.) above ground 2 FT.

Static water level (S.W.L.) below M.P. 28 FT.

I. High rate pumping -- reservoir drawdown

Time pump started 8:45 A.M.

Pumping rate START 12 G.P.M. DURING TEST 2 G.P.M.

Total time 1 HOUR to reach pumping water level 170 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <u>X1</u> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:45 A.M.	28 FT.	5 SEC		12 G.P.M.
9:00	56	5 SEC		12 G.P.M.
9:15	122	5 SEC		12 G.P.M.
9:30	147	5 SEC		12 G.P.M.
9:45	170	30 SEC		2 G.P.M.
10:00	170	30 SEC		2 G.P.M.
10:15	170	30 SEC		2 G.P.M.
10:30	170	30 SEC		2 G.P.M.
10:45	170	30 SEC		2 G.P.M.
11:00	170	30 SEC		2 G.P.M.
11:15	170	30 SEC		2 G.P.M.
11:30	170	30 SEC		2 G.P.M.
11:45	170	30 SEC		2 G.P.M.
12:00 P.M.	170	30 SEC		2 G.P.M.
12:15	170	30 SEC		2 G.P.M.
12:30	170	30 SEC		2 G.P.M.
12:45	170	30 SEC		2 G.P.M.
1:00	170	30 SEC		2 G.P.M.
1:15	170	30 SEC		2 G.P.M.
1:30	170	30 SEC		2 G.P.M.
1:45	170	30 SEC		2 G.P.M.
2:00	170	30 SEC		2 G.P.M.
2:15	170	30 SEC		2 G.P.M.
2:30	170	30 SEC		2 G.P.M.
HD-224 2:45	170	30 SEC		2 G.P.M.
3:00	170	30 SEC		2 G.P.M.
3:15	170	30 SEC		2 G.P.M.
3:30	170	30 SEC		2 G.P.M.
3:45	170	30 SEC		2 G.P.M.

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: Fogles Well Pump & Water Treatment LLC Telephone #: 410.795.5670  
Address: 5580 Orchard Rd  
Sykesville MD 21784

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

License # and name of individual responsible for the field installation:

Name (Print): David C. Fogle License #: MSD2276

\*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: Toll Brothers Telephone #: \_\_\_\_\_  
Subdivision: Kingsley Woods Lot #: 15 Well Tag #: HO-17-0372 (9)  
Site Address: 10500 Audubon Lane  
Ellicott City, MD 21042

### Submersible Pump Data

Make: Grundfos  
Model #: 74510422  
Pump Capacity: 7  
Well Yield: 7

### Pitless Adapter

Make: Complete  
Model #: NA  
GPM Depth: 21" (36" min)  
GPM NSF/WSC approved: YES

### Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 460 (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 NA

### Piping to house

Type: 1" poly pipe  
PSI: 200 (160 psi min)  
Depth of supply line: 36" (36" min)

### House Connection

PVC sleeve to undisturbed soil at wall penetration: YES  
Length of sleeve (5' minimum from foundation): 6'  
Sleeve sealed properly: YES

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: David C. Fogle

date: 12/14/2021

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

Date Insp. Requested: 12/15/21 Date Insp. Approved: 12/15/21 Inspector: (Signature)

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

52"  
36"  
21"  
20"

(Revised form 10/24/2018)

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

TEMPORARY INTERIM CERTIFICATE OF POTABILITY  
**TEMPORARY DEVIATION FOR RADIUM**

Expiration Date – July 25<sup>th</sup>, 2022

June 9, 2022

Homeowner  
10500 Pudding Lane  
Ellicott City, MD 21042

**RE: Kingsley Woods, Lot 15  
10500 Pudding Lane  
Building Permit: B21001239  
Well Permit: HO-17-0372**

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 **6/9/2022**. Final approval of the well line connection to the dwelling was granted on **12/15/2021**. The well construction was completed on **1/4/2019**. Water samples were collected on **4/25/2022**.

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-17-0372. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

**This is a temporary deviation to allow additional time for testing your well water system for Radium. Submission of water sample results must be obtained by the Health Department within the allowed 45 day period for the Interim Certificate of Potability.**

This Department will grant a **temporary deviation** to the Interim Certificate of Potability on condition that water sample results for short term gross alpha/beta are submitted to this Department **within 45 days**. Those results must indicate that the radionuclide levels meet a Gross Alpha level of less than **15 pCi/L**, and a Gross Beta level of less than **50 pCi/L**.

**This Temporary Interim Certificate of Potability will expire 45 days from the date of issuance.** Failure to submit the required radium sample results and obtain an Interim Certificate of Potability before the expiration date 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.

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

Please contact (410) 313-1773 to schedule a water sample appointment or contact a Maryland certified water quality 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>

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

Approving Authority,

Kevin M. Wolf, L.E.H.S., REHS/R.S., Supervisor  
Groundwater Management Section  
Well & Septic Program

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



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

**MEMORANDUM**

**TO: Alexander's Well Drilling**  
**Attn: Randall Alexander MSD 576**  
P.O. Box 443  
126 W. Main St  
Fairfield, PA 17320

**FROM: Joseph Cabahug**  
Licensed Environmental Health Specialist **001997** *EC 12/19/2018*  
Howard County Health Department  
**Well & Septic Program**

**RE: Kings Forest Subdivision – Test well Permits**  
**Special Conditions for Conversion to Potable Well**

**DATE: December 19<sup>th</sup>, 2018**

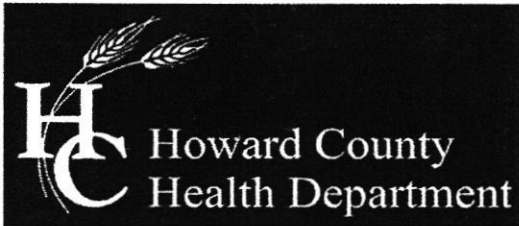
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**The following comments apply to the above referenced Well Permit Application. Please Read through and complete as needed.**

- A. Lot 17 Will require 50' of Steel Casing or 10' into competent bedrock, whichever is deeper.**

10. A waiver for the location of the septic systems and wells, as shown on [Percolation Certification Signed 06/18/2014 and Revision Submitted 12/18/2018], has been approved by MDE. As a condition of the approved [sic] of this waiver the initial and all replacement wells on lots 17, 26, 27, and 33 – 35 Will require Steel Casings to be installed to 50' or 10' into competent bedrock, whichever is deeper.

- B. All lots in the Kings Forest Subdivision are within the Baltimore Gneiss Formation and will require Water Quality Tests for Radium to be collected at the time of the Yield Test.**



## 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](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

### TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well, please indicate one of the following:

Well Site Location:

Kings Forest  
Subdivision/Property Name

15  
Lot #

Peddling Lane  
Road Name

☒ The well site, as shown on the attached well site plan, has been staked by

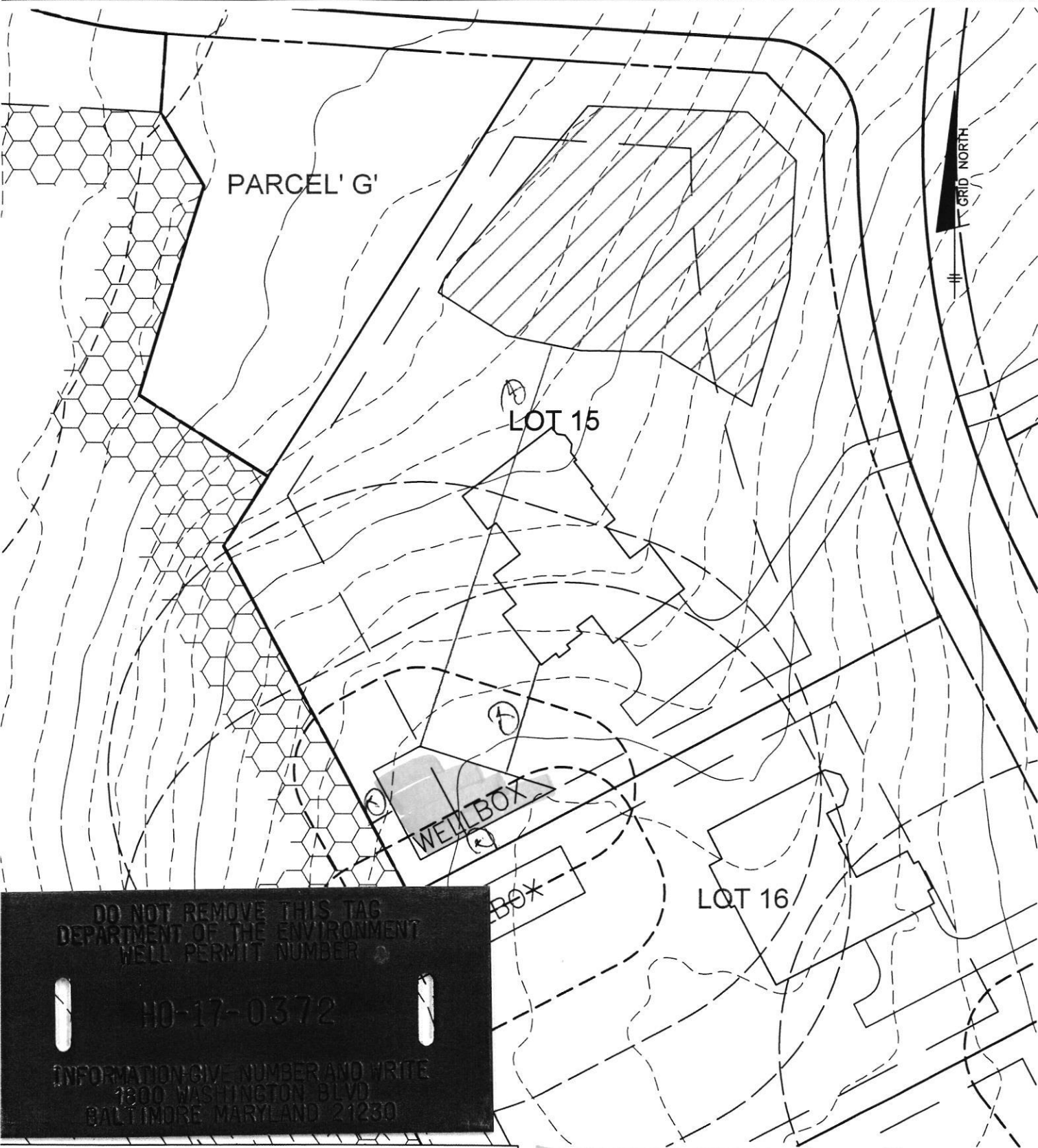
Benchmark Engineering, Inc.  
(professional land surveyor or company employing professional land surveyors)

on 9/26/18  
(date)

☐ 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.





PARCEL 'G'

LOT 15

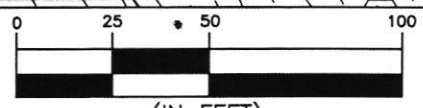
LOT 16

WELL BOX

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

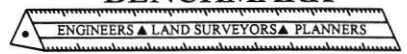
HO-17-0372

FOR INFORMATION GIVE NUMBER AND WRITE  
1800 WASHINGTON BLVD  
BALTIMORE MARYLAND 21230



(IN FEET)  
1 inch = 50 ft.

**BENCHMARK**



**ENGINEERING, INC.**

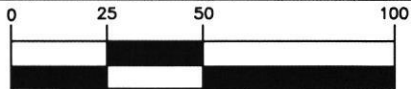
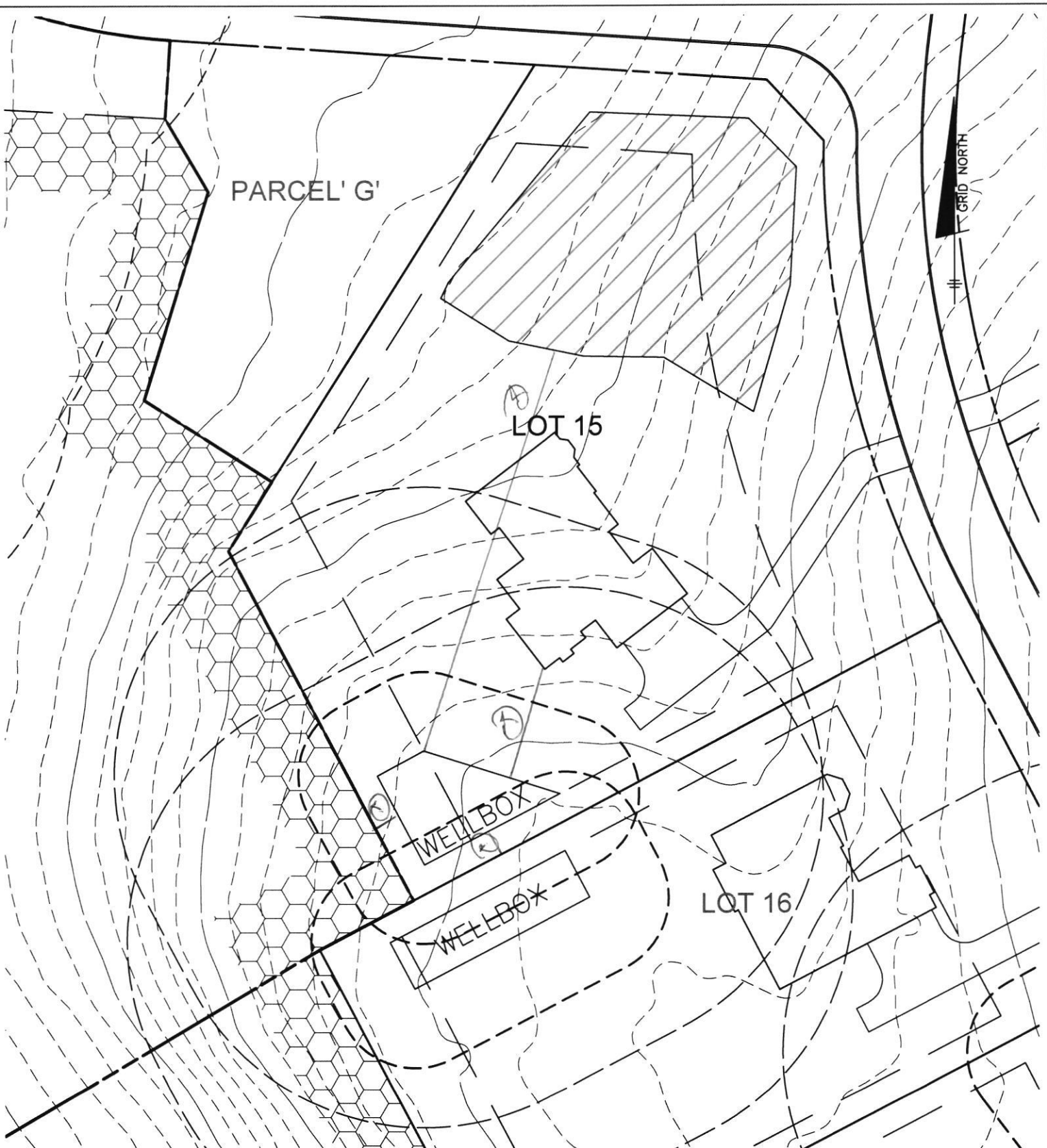
8480 BALTIMORE NATIONAL PIKE • SUITE 315 • ELIJAH CITY, MARYLAND 21043  
(P) 410-485-8105 (F) 410-485-8644

WWW.BEI-CVLENGINEERING.COM

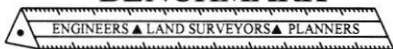
APPROVED 11/20/2018 @ 001997  
STAKED BY BENCHMARK 09/26/2018  
HO-17-0372

**KINGS CROSSING**  
LOT 15 (WELL EXHIBIT)

DATE: NOVEMBER, 2018  
SCALE: 1" = 50'




(IN FEET)  
1 inch = 50 ft.



**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 315 ▲ ELLICOTT CITY, MARYLAND 21043  
(P) 410-485-8105 (F) 410-485-8644

WWW.BEI-CIVILENGINEERING.COM

APPROVED 11/20/2018   
STAKED BY BENCHMARK 09/26/2018  
HO-17-0372

## KINGS CROSSING

LOT 15 (WELL EXHIBIT)

DATE: NOVEMBER, 2018

SCALE: 1" = 50'

**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 #: 127748 Account #: 2440  
Reference: Toll Brothers/Kings Forest Company: Hydro-Terra Group  
Location: Manor Lane, Lot 15 Requested By: Jeff Lindaw  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 1/4/2019 1340 Site: Pumped from Well  
Date/Time Rec'd: 1/5/2019 1000 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.2  
Collected By: \*\* Well #: HO-17-0372

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Radium-226	0.4	pCi/L	****	903.1	1/15/2019 / 1058 / MJN
Radium-228	2.0	pCi/L	****	Ra-05	1/15/2019 / 0926 / SN

**NOTES**

- 1 \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- 2 \*\*Alexander's Well Drilling
- 3 pCi/L = picocuries per liter
- 4 Radium 226 Detection Limit: 0.2 pCi/L; Radium 228 Detection Limit: 0.7 pCi/L
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Sub-contracted to Reference Lab #128
- 7 ND = None Detected
- 8 Sample collected by client, analyzed as received
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : HCHD

Date Reported: 1/16/2019

Reviewed By:



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 152748 Account #: 1933  
Reference: Kingsley Woods Lot 15 Client: Fogle's Well Pump & Treatment  
Location: 10500 Pudding Lane Requested By: Dave Fogle  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 6/21/2022 0945 Site: Kitchen Sink  
Date/Time Rec'd: 6/21/2022 1426 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.1  
Collected By: J. Evans 0309JE Well #: HO-17-0372

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Radium-226	1.6	pCi/L	****	903.0	7/1/2022 / 0750 / MJN
Radium-228	3.2	pCi/L	****	Ra-05	6/30/2022 / 1044 / SN

### NOTES:

- 1 \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- 2 pCi/L = picocuries per liter
- 3 Radium 226 Detection Limit: 0.1 pCi/L; Radium 226 Error: +/- 0.4 pCi/L
- 4 Radium 228 Detection Limit: 0.8 pCi/L; Radium 228 Error: +/- 0.8 pCi/L
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Sub-contracted to Reference Lab #278
- 7 ND = None Detected
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 9 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy  
Building Permit # : B21001239

Date Reported: 7/1/2022



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #:	151620	Account #:	1933
Reference:	Kingsley Woods Lot 15	Client:	Fogle's Well Pump & Treatment
Location:	10500 Pudding Lane	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	4/25/2022 1030	Site:	Kitchen Sink
Date/Time Rec'd:	4/25/2022 1303	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	7.0
Collected By:	T. Cassell 0767TC	Well #:	HO-17-0372

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/26/2022 / 0930 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/26/2022 / 0930 / CRS
Turbidity	<0.30	NTU	<10	SM2130B	4/26/2022 / 1020 / CRS
Sand	ND	mg/L	5	Visual/Gravimetric	4/25/2022 / 1500 / TSD
Nitrate.	<0.40	mg/L	10	EPA 300.0	4/25/2022 / 1539 / TSD

### 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 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

**Reason for Test :** Use & Occupancy  
**Building Permit # :** B21001239

Date Reported: 4/26/2022



HOWARD COUNTY HEALTH DEPARTMENT

64741

DATE 1/15/19

WS

Received From Alexander Well PHONE # 77 642-5963

Drillers

For Well Permits (6)

Conversion of Test Wells

lots 14, 15, 16, 17, 32 and 36

Nine hundred fifty

Dollars

☐ CASH  
☒ CHECK

NO.

2093

\$ 960.00

Received By

Adine