

C 1		3323		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE WELL COMPLETED MM DD YY 2/25/08		Depth of Well 22 200 26 (TO NEAREST FOOT)		COUNTY NUMBER 016 4/4/08 (59)		PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-1532 28 29 30 31 32 33 34 35 36 37	
ST/CO USE ONLY DATE RECEIVED MM DD YY 8 13		OWNER last name first name MIL HOMES WAYNERIDGE STREET		TOWN FULTON		SUBDIVISION MOOREFIELD		SECTION C LOT 11	
WELL LOG Not required for driven wells		STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) yes no Y N 44 44 TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 27 NO. OF POUNDS 2700 GALLONS OF WATER 162 DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP 52 54 BOTTOM 58 ft. (enter 0 if from surface)		C 3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 3 8 9 PUMPING RATE (gal. per min.) 20 11 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 4 ft. 17 20 WHEN PUMPING 87 ft. 22 25 TYPE OF PUMP USED (for test) A air P piston T turbine 27 27 27 C centrifugal R rotary O other 27 27 27 J jet S submersible 27 27			
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		check if water bearing		C 2 1 2 DEPTH (nearest ft.) T 2 E 1 8 9 11 15 17 21 A C 2 H 23 24 26 30 32 36 S C 3 R 38 39 41 45 47 51 E E N 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		PUMP INSTALLED DRILLER INSTALLED PUMP YES NO (CIRCLE) (YES or 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 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 49 - below 49 LAND SURFACE 2 (nearest foot) 50 51	
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED yes no Y N		CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL		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.		LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) Chain Link Fence Gravel Back	
DRILLERS LIC. NO. 1 MW D 040 George F. Easternley DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 AWD 288		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE LOG CASING INDICATOR OTHER DATA					

B 1	1835	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 528438 please type	STATE PERMIT NUMBER <u>H0-95-1532</u> 70 fill in this form completely 79
Date Received (APA) 8 MM DD YY 13		OWNER INFORMATION 10719		
15 Last Name		Owner		34 First Name
36 10630 Little Patuxent Pkwy, S 1000		Street or RFD		55
57 Columbia, Md 21044		Town		76 Zip
DRILLER INFORMATION				
Driller's Name		MW D 040		81 License No.
Firm Name		L. Franklin Easterday, Inc.		
Address		9265 Brown Church Rd., MT. Airy, Md. 21771		
Signature		Date 1/9/2008		
B 2		WELL INFORMATION		
1 2		APPROX. PUMPING RATE 5 (GAL. PER MIN.)		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		500		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="radio"/> PUBLIC WATER SUPPLY WELL				
<input type="radio"/> TEST, OBSERVATION, MONITORING				
<input type="radio"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL 300 FEET				
APPROXIMATE DIAMETER OF WELL 6 INCH		NEAREST TOWN		
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				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER G				
PERMIT No. H0-95-1532				
SPECIAL CONDITIONS				
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.				

LOCATION OF WELL

Howard COUNTY 21

Moorefield

23 SUBDIVISION 42

SECTION C LOT 11C

44 46 48 50

Fulton

52 NEAREST TOWN 71

73 76 77 78

Wayneridge Street

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 250 37

DISTANCE FROM ROAD Ft.

ENTER FT OR MI 38 39

TAX MAP: 41 BLK: 14 PARCEL 293

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME

STATE SIGNATURE

DATE ISSUED 1/22/08

43 MM DD YY 48

CO SIGNATURE

NORTH GRID 822 000

EAST GRID 483 000

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. wells

2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 480 3

N 822 2

000 000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

18 H 3

Review

8:30 2-25-08

FIELD DATA SHEET
HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. 140-95-1532 Election District

Location of Property (road) Wayne ridge Cr

Subdivision Mowles field Lot 11 Block C Plat Sec.

Well Driller Erstarday Owner _____

Depth of Well 200 - 259 pm

Distance of Measuring Point (M.P.) above ground 2 ft

Static Water Level (S.W.L.) below M.P. 3.70 ft

I. High Rate Pumping -- reservoir drawdown

Time pump started 1:00 pm Pumping rate 20 Gpm
Total time to reach pumping water level ft. below M.P.

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

[illegible]

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

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

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.06 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: R & G WATER SYSTEM INC. Telephone #: 410-239-0700
Address: 4322 OPALS CHURCH DR.
MANCHESTER, MD. 21102

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

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

Name (Print): RICKEY L. ROOS License #: PI0141

*A Licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a Licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: NU-HOMES Telephone #: 410-730-2100 ANIV
Subdivision: _____ Lot #: 11 Well Tag #: EO-95-1532
Site Address: 11718 WAYNE EDEE CT.
FULTON, MD.

Submersible Pump Data

Make: GRUNDFOSS

Model #: 10SREDS-10

Pump Capacity _____ GPM

Well Yield: 2.5 GPM

Depth of well encountered at time of pump installation: 200 (feet)

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

Tongue arrestors or Cable glands are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt _____

Pitless Adapter

Make: HAYWARD

Model #: PT-800

Depth: 42" (36" min)

NSF approved: YES

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: POLYETHYLENE

PSI: 160 (160 psi min)

Depth of supply line: 42 (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: 2"x10"

Approximate length of sleeve: 10'

Sleeve caulked and sealed properly: FERREX

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.

RICKEY L. ROOS, SR.
Signature of company representative responsible for installation

9/8/08
date

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

Date Insp. Requested: _____

Date Insp. Approved: 9/9/08 BB

Inspection Data: Pitless adapter and 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

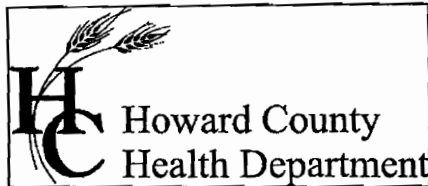
Safety rope installed inside of well casing

Correct well tag attached properly and casing 5" above finished grade

Water supply line sleeved adequately at house connection

Adequate ground observed below pitless adapter

HD-215 (Rev. 8/00)



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

October 9, 2008

Resident
11718 Wayneridge Court
Fulton, MD 20759

SENT VIA FACSIMILE 410-730-2011

RE: Mooresfield, Lot 11
11718 Wayneridge Court
Fulton, MD 20759
BP#: B08000658
Well Tag #: HO-95-1532

Dear Sir:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 08/20/2008. Final approval of the well line connection to the dwelling was approved on 09/09/2008.**

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. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

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-95-1532. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 09/29/2008
Date of Well Completion: 02/25/2008

Approving Authority

Stuart Oster, R. S.
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File



Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventrie Court • P.O. BOX 245 • Myeraville, MD 21775 • 800-332-3340 • FAX 301-293-2386
 www.fredericktownelabs.com • info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 5553 - 3-1

Field Record

Site visit performed on: Monday, September 29, 2008 12:55 PM
 by: Francis Vasquezna State ID No. 0273FV
 Affiliation: Fredericktowne Labs, Inc.
 Property Owner: Richard Cook Residence
 Property Address: 11718 Wayne Ridge Court
 Fulton, MD 20759
 Sample Source: Bathroom Sink
 Treatment Devices Noted: No Treatment Devices Present
 Sample taken after treatment: No
 Well No.: HO-95-1532
 Field pH: 5.6
 Res. Cl.: 0.0 mg/l

Laboratory Report

Sample Received at laboratory: 9/29/2008 2:50 PM

Bacteriological results:

Total Colif. (/100ml)	E.coli.(/100ml)	Date/Time Analysis Started	Method	Analyst
<1	<1	9/29/2008 3:00 PM	9223B	PH

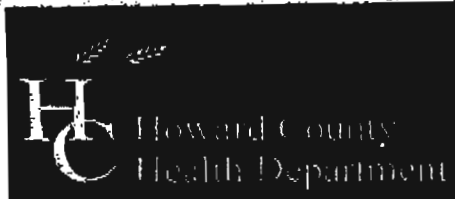
This sample meets Federal standards for coliform bacteria in drinking water and is safe for human consumption. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen	5.9 mg/l	10	10/1/2008	300.0	PH
Sand	<2 mg/l	5	10/1/2008	0.065mm Filter	JD
Turbidity	3.7 NTU	10	9/30/2008	180.1	JD

Verified by: M. B. Vasquezna / 8770 10/3/08
 Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
 Maryland Cert. No. 116 Virginia Cert. No. 00141 W. Virginia Cert. No. 9924-M
 MDOT WBE Cert. No.: 91-158



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Peter L. Beilenson, M.D., M.P.H., Health Officer

To: Stewart

TO ALL INTERESTED PARTIES

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

Well Site Location:

Madras Field *11* *Wayneville St*
Subdivision/Property Name Lot# Road Name

☐ The well site has been staked by *Surveyor* *Engineer listed on plat* *
(professional land surveyor or company employing professional land surveyors)
on *1-3-08* (date) and does not require a site inspection.

☐ 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.

Revised 3/11/05

** any site is ok just let us know which one*