C 1 6607	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
IN COLS. 3-6 ON ALL CARE	DATE WELL COMPLETE		COUNTY A 522 989 PERMIT NO. FROM "PERMIT TO DRILL WELL"
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SUBDIVISION	OG	GROUTING RECORD	
Not required for STATE THE KIND OF PENETRATED, THEIR THICKNESS AND IF V	FORMATIONS COLOR, DEPTH,	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF CROUTING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed)	FEET Check if water bearing	NO. OF BAGS NO. OF POUNDS	PUMPING RATE (gal. per min. to nearest gal.)
Top Soil Sand y Sand Stowe MICKA SAND Stone MICKA	0 2	GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from ft. to ft.	METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
Sandy	2 25 0	48 TOP 52 S4 BOTTOM 58 (enter 0 if from surface) Casing CASING RECORD	BEFORE PUMPING 17 20
SAND Stowe	25 30	types insert appropriate STEEL CONCRETE	WHEN PUMPING 22 25 TYPE OF PUMP USED (for test)
MICKA	55 60 0	code below PLASTIC OTHER	A air P piston T turbine
MICKA	60 185	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O other (describe below)
Electrical T		P L G 381 70	jet Submersible
		OTHER CASING (if used) C diameter depth (feet) H inch from to	PUMP INSTALLED
		C S	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO)
		screen type SCREEN RECORD	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED
		or open hole insert appropriate appropriat	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: 29
		below PLASTIC OTHER	GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER
IN HARD ROCK AREAS, IDEN		DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
WELL HYDROFRACTU	JRED YES	E 1 / 0 36 1 / 8 5 1 1 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
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ACCURATE AND THE PROPERTY OF T		him loo' Must	3. Simultan	usly Vield Tected &
	10-118 WITT	@ cou		

Review	

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Loca	1 Permit No. HO - 95-2082 ation of property (road) Ulcfory Car	E		
Subd	division Meriwether Farm	Lot 4 Block Owner Hendrage Re	Plat	Sec. 2 PITE
Well	1 Driller RAlph Mayue	Owner Hendrage Re	ALTYE CANO	1 hovelarment
	Depth of well 185 Distance of measuring point (M.P.) about Static water level (S.W.L.) below M.P.	ve ground 2"		
I.	High rate pumping reservoir drawdown			
	Time pump started 2:30 Total time 15 min to reach pumping	Pumping rate	10 GPW	L M D

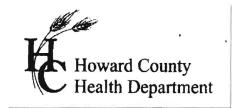
II. Recovery pump test data - observations to be recorded every 15 minutes

30 Pt	time to gallon b		(if used) Fest Stanted	(gallons minute))0 (GAN
30 H 30 H 30 H 30 H	6 7 7 7 7	Sec Sec Sec	Fest Stantad	10 0	GAN
30 H 30 H 30 H 30 H	7 7 7 7	Sec Sec Sec	Fest Stantad	8.5	GAN
30 H 30 H 30 II	7 7 7	Sec Sec	Fest Stantacl	8.2	GAN Glu
30 H 30 H 30 II	7 7 7	Sec Sec		8.2	GAN GAM
30 H 30 H 30 II	7 7 2			8.5	6Pm
30 11	7			8.5	6Pm
30 11	2			8.5	
30 11	2				"
		11	ok	8.5	le
	7	11		18,3	11
OH	7	Sec		8.5	GAN
o A	7			815	April
	7	Sec		8:5	GPM
0 11	12			8.2	11
30 11	7	11		8.2	ч
30 A	7	Sec		8.5	Gem
30 A	7	Sec		8.5	GPM
					34-44
	0 A 9 A 30 A 0 11 10 11 30 A	0 A 7 0 A 7 30 A 7 0 11 7 10 11 7 30 A 7	0 A 7 Sec 9 A 7 Sec 30 A 7 Sec 0 11 7 11 10 11 7 11 30 A 7 Sec	0 H 7 Sec 9 H 7 Sec 30 H 7 Sec 0 11 L 7 11 10 11 7 11 30 H 7 Sec	0 H 7 Sec 8.5 9 H 7 Sec 8.5 30 H 7 Sec 8.5 0 11 L 7 11 8.5 10 11 7 11 8.5 30 A 7 Sec 8.5

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH WELL & SEPTIC PROGRAM TEL: (410)313-1771 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitiess 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.	
Constitution regulations). Septimosion of a Complete for the 15 Fed Bit at prior to Car and October of approved approved.	
Cooler wall on the service the	· ·
Company Name: FONES WII DY 111 110 Telephone # 410-795-5670	
Address: PO Box 202 J	
11/00/21/19 MO 21/74.7	
	•
(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer	
Liceuse # and name of individual responsible for the field installation:	
Name (Print): DOWN (L. C. FOCIC Liceased MSD 226)	100
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: TOV BY OTHERS Telephone # 410-464-7408	
Name of Property Owner: 100 Art Arthrey Telephone # 410 443 / 700	
Subdivision: (AHOLL OVER COK Lot# 4 Well Tag # HO-95- 2087	•
Size Address: 14923 VICTORA LGYV	•
Genela, may 21737	•
Submersible Pump Data J Pitless Adapter Well Cap and Electric Conduit	
Spirites simple and the spirites and the	
Make: Cam Obel Two piece waterlight cap: 15	
Model # 1550EU7-180 Model# NIA Screened, vented well cap: NPS	3
Pump Capacity 15 GPM Depth: 210 " (36" min) Cap secured to casing: 185	,
Well Yield: 8.5 GPM NSF/WSC approved: WD Condoit min 18" B.G. 465	3 .
Depth of well encountered at time of pump installation: 185 (feet) Conduit secured to well cap: 165	
If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.8.4	
Torque agrestors, Cable guards, or other acceptable method used-Must circle one	
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/P	9
	200
Proving to house House Connection	•
TIC 1	
PSI-71(160 psi min) Length of sleever minimum from foundation):	
Depth of supply line: 30" (36" min) Sleeve sealed property: VCS	
	•
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping,	3.63
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 date	
For Health Department Use Only - Not to be completed by Installer	
To be seen as a	. ,
11/3-1/6 74.7	
Date Irisp Requested: 4/30/15 Date Irisp. Approved: 4/30/15 Inspector. SC	
Inspection Data: Pitters adapter waterlight & 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 caplaising	*
Contest well tag attached properly and pasting 8" above finished grade	
Water supply line sleeved adequately at house connection	
'Adequate grout observed below piless atlanter	



7178 Columbia Gateway Dr., Columbia, MD 21046

(410) 313-2640 TDD (410) 313-2323 Fax (410) 313-2648 Toll Free 1-866-313-6300

website: www.hchealth.org

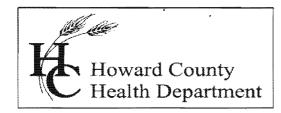
Peter L. Bielenson, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

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

Well Sit	e Location:				
Meriwether Farm, Sec. II, Ph. 1 4 Victory Lane					
Subdivision/Property Name Lot # Road Name					
X	The well site has been stake (professional land surveyor or co on03/21/11	ompany employ	ing professional land surveyors) loes not require a site inspection.		
	N a		er will call the Health Department verify the proposed well site		
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.					

Revised 3/11/07



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date - JANUARY 23, 2016

July 23, 2015

Homeowner 14923 Victory Lane Glenelg, MD 21737

RE:

Meriwether Farm, Lot 4 14923 Victory Lane

Building Permit: B14004399 Well Permit: HO-95-2082

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 7/22/2015. Final approval of the well line connection to the dwelling was granted on 4/30/2015. The well construction was completed on 6/30/2011. Water samples were collected on 7/6/2015.

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-95-2082. 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

Approving Authority,

Kevin M. Wolf, LEHS, Supervisor Groundwater Management Section Well & Septic Program

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

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 #:

101740

Reference:

Lot 4

Account #: Company:

Requested By: Dave Fogle

Location:

14923 Victory Lane Glenelg, MD 21737

Date/ Time Collected: 7/6/2015

Source: Site:

Well Water

Date/Time Rec'd:

1038

Kitchen Sink Tap _

Fogle's Well Drilling

7/6/2015

1502

Treatment:

None

Chlorine ppm:

Free: ND

Total: ND

pH:

5.6

Collected By:

J. Fogle

1974JF

Well #:

HO-95-2082

PARAMETERS	RESULTS	UNITS R	EFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	7/7/2015 / 1030 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	7/7/2015 / 1030 / LLO
Nitrate	7.77	mg/L	10	601	7/7/2015 / 0920 / CRS
Turbidity	0.54	NTU	<10	SM18 2130B	7/7/2015 / 1020 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	7/7/2015 / 1020 / CRS



NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample. 2
- 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.
- ND:None Detected 6
- 7 pH tested in lab, chlorine level tested on site
- Sample collected by client, analyzed as received

Reason for Test:

Use & Occupancy

Building Permit #:

B14004399

Date Reported:

7/7/2015

less for wells LOT 30 - use mabble (W LAS 31+32 - use back End LA 34 - may need special

PERMIT NUMBER: HO2008G010(01) PAGE NUMBER THREE

11. NON-TRANSFERRABLE - THIS PERMIT IS NON-TRANSFERRABLE. A NEW OWNER MAY ACQUIRE AUTHORIZATION TO CONTINUE THIS APPROPRIATION BY FILING A NEW APPLICATION WITH THE ADMINISTRATION. AUTHORIZATION WILL BE ACCOMPLISHED BY ISSUANCE OF A NEW PERMIT.

12. ******************************

- * INITIATION OF WITHDRAWAL THE PERMITTEE SHALL NOTIFY THE*
- * ADMINISTRATION BY CERTIFIED MAIL WHEN WITHDRAWALS FOR THE*
- * USES SPECIFIED IN THIS PERMIT HAVE BEEN INITIATED. THIS
- * PERMIT SHALL EXPIRE IF WATER WITHDRAWAL IS NOT COMMENCED *
- * WITHIN TWO YEARS AFTER THE EFFECTIVE DATE OF THIS PERMIT *
- * EXCEPT THAT UPON WRITTEN REQUEST TO THE ADMINISTRATION
- * PRIOR TO THE EXPIRATION OF THE TWO YEAR PERIOD, THE TIME *
- * LIMIT MAY BE EXTENDED FOR GOOD CAUSE, AT THE DISCRETION
- * OF THE ADMINISTRATION.

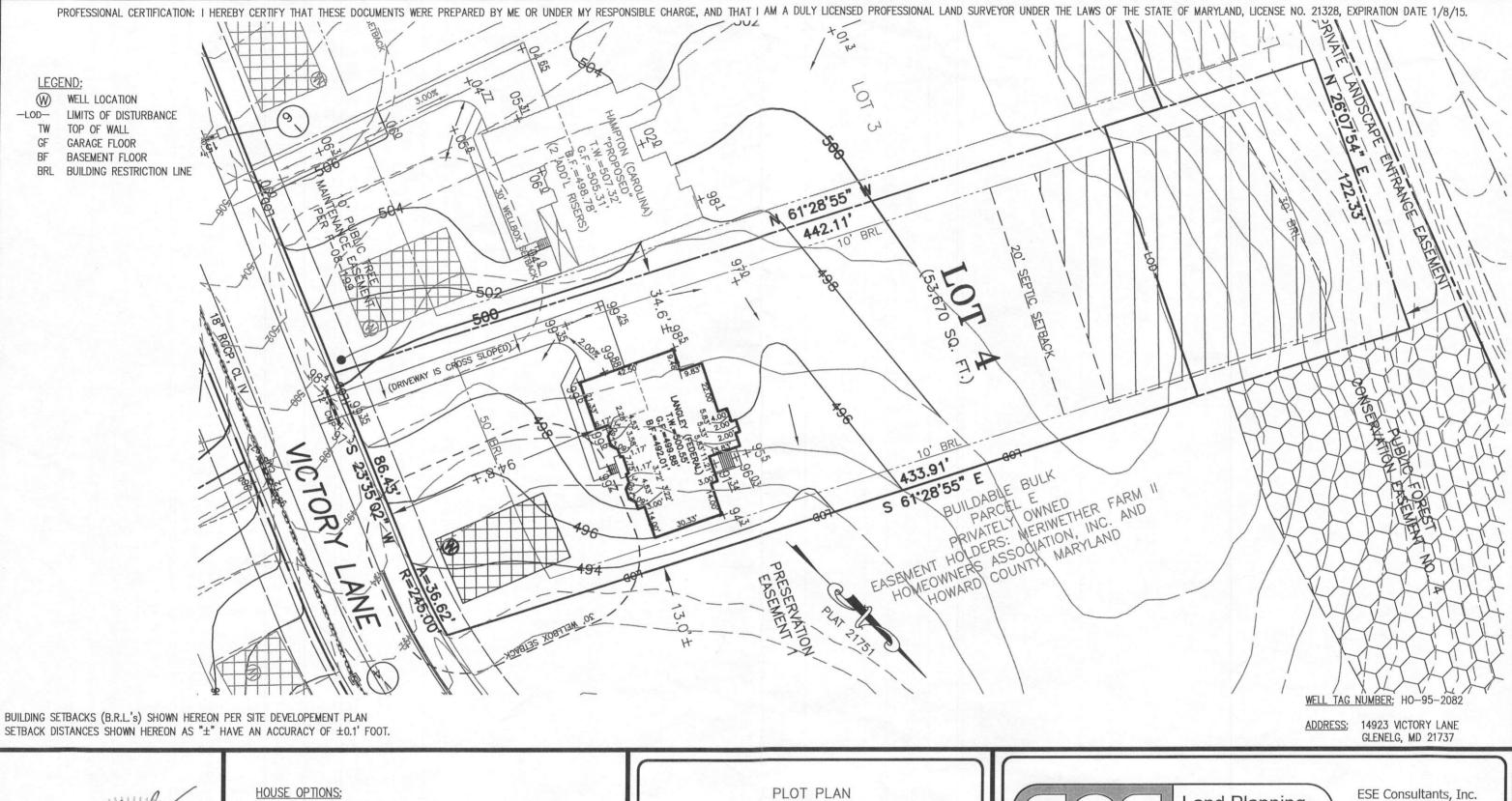
13. WELL SPACING- IN ORDER TO MINIMIZE THE POTENTIAL FOR INTERFERENCE BETWEEN WELLS, ALL WELLS SHALL BE LOCATED WITHIN LOCALLY APPROVED WELL BOXES AND, WHERE FEASIBLE, BE CONSTRUCTED SO AS TO ACHIEVE A SEPARATION OF AT LEAST 100 FEET FROM EACH OTHER AND/OR FROM EXISTING WELLS ON OTHER PROPERTIES. THE PERMITTEE SHALL CONDUCT SIMULTANEOUS YIELD TESTS FOR ANY WELLS THAT ARE SEPARATED BY LESS THAN 100 FEET. IN THE EVENT THAT A WELL TESTED SIMULTANEOUSLY WITH OTHER WELLS DOES NOT MEET MINIMUM YIELD STANDARDS, THE PERMITTEE SHALL RELOCATE OR DEEPEN THE WELL OR SEEK LOCAL APPROVAL TO RELOCATE THE WELL BOXES SO AS TO ACHIEVE THE 100-FOOT SEPARATION DISTANCE. ALL WELLS SHALL COMPLY WITH WELL CONSTRUCTION REQUIREMENTS.

BY AUTHORITY OF THE DIRECTOR WATER MANAGEMENT ADMINISTRATION

Anduzcous

2/6/2009

John W. Grace, Chief SOURCE PROTECTION AND APPROPRIATION DIV





HOUSE OPTIONS:

TYPE: LANGLEY (FEDERAL) DAYLIGHT BASEMENT EXPANDED FAMILY ROOM/GREAT ROOM CONSERVATORY ELITE ADDITION ADD'L 1' HEIGHT OF BASEMENT FOUNDATION WALLS SOLARIUM ADDITION BAY WINDOWS WITH FOUNDATION ON FRONT OF LIVING ROOM AND DINING

LOT 4 MERIWETHER FARMS OPTION No. 018 OPTION No. 023 OPTION No. 039

OPTION No. 070

OPTION No. 501

OPTION No. 90004004

LIBER 13779, FOLIO 473 PLAT NO. 21751 FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND



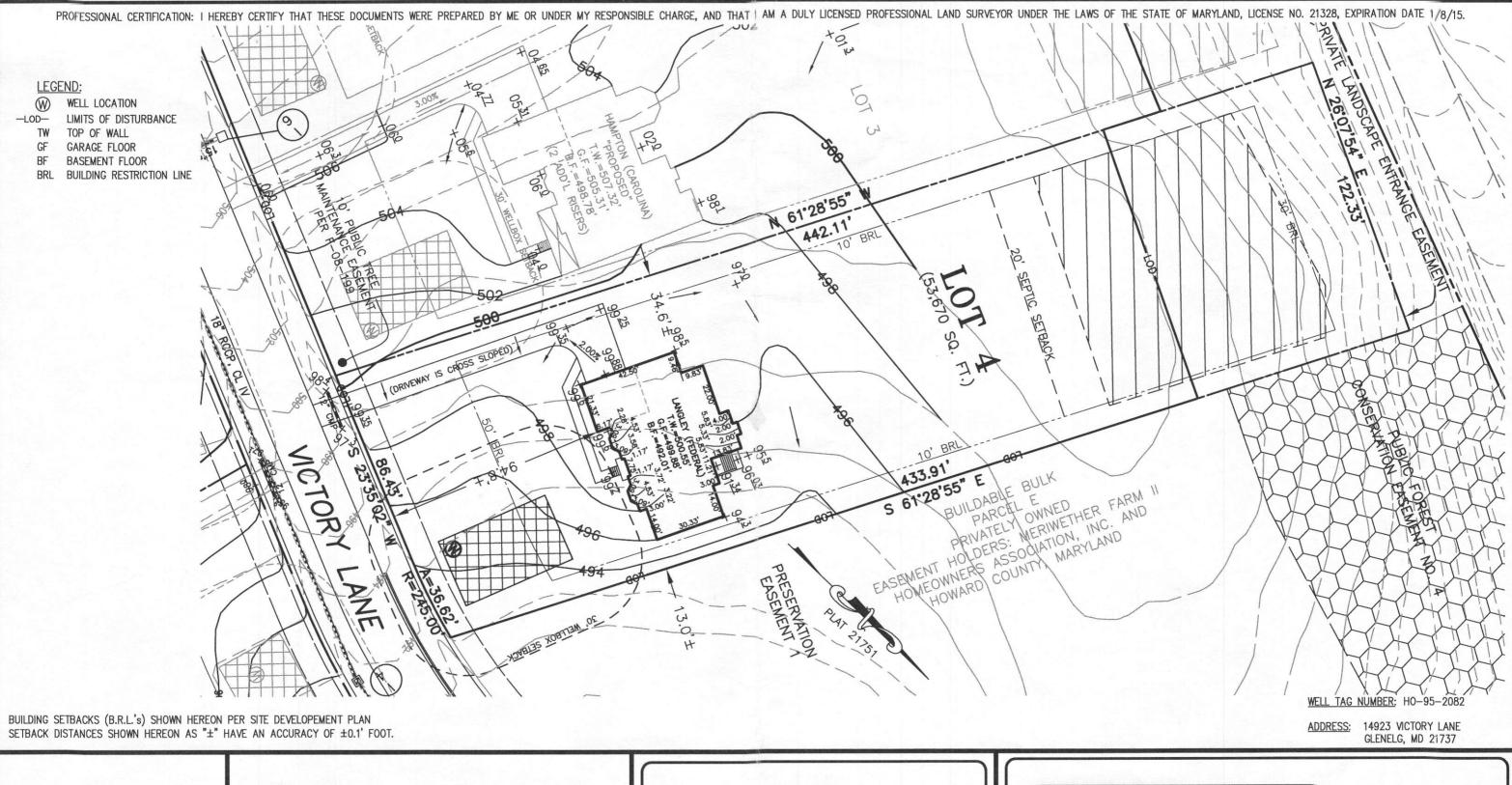
Land Planning Engineering Land Surveying

ESE Consultants, Inc. 7164 Columbia Gateway Dr. Columbia, MD 21046 Tel: 410-872-9105 Fax: 410-872-4870

DATE: 10/23/14 CHK'D: M.J.B.

SCALE: 1"=40' JOB NO: 3184

FILE: PP LOT 4 DRAWN: R.C.K





HOUSE OPTIONS:

TYPE: LANGLEY (FEDERAL)
DAYLIGHT BASEMENT
EXPANDED FAMILY ROOM/GREAT ROOM
CONSERVATORY ELITE ADDITION
ADD'L 1' HEIGHT OF BASEMENT FOUNDATION WALLS
SOLARIUM ADDITION
BAY WINDOWS WITH FOUNDATION ON FRONT OF
LIVING ROOM AND DINING

OPTION No. 018

OPTION No. 023

OPTION No. 039

OPTION No. 070

OPTION No. 501

OPTION No. 90004004

PLOT PLAN LOT 4 MERIWETHER FARMS

LIBER 13779, FOLIO 473
PLAT NO. 21751
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



Land Planning Engineering Land Surveying ESE Consultants, Inc. 7164 Columbia Gateway Dr. Columbia, MD 21046 Tel: 410-872-9105 Fax: 410-872-4870

DATE: 10/23/14 CHK'D: M.J.B. SCALE: 1"=40' JOB NO: 3184 FILE: PP LOT 4
DRAWN: R.C.K