

C1 16613 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 MM DD YY 12 27 12

DATE WELL COMPLETED MM DD YY 12 27 12

Depth of Well 22 150 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-95-2436

OWNER last name Goodier Baker Hornigs first name WELL SITE ADDRESS 2835 Hail Shop rd TOWN Highland SUBDIVISION Schoolly Mill Farm SECTION LOT 1

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 (Y) NO (N) TYPE OF GROUTING MATERIAL (C) MENTONITE CLAY (B) C NO. OF BAGS 26 NO. OF POUNDS 2944 GALLONS OF WATER 156 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 70 ft.

CASING RECORD casing types insert appropriate code below (S) T (C) O (P) L (O) T MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 86 Total depth of main casing (nearest foot) 73

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole (S) T (B) R (H) O (P) L (O) T (insert appropriate code below)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER 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.

DRILLERS LIC. NO. 1 M SD 007 Allen Compton DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2 DEPTH (nearest ft.) 1 2 40 73 150 3 8 9 11 15 17 21 4 23 24 26 30 32 36 5 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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST 1 2 HOURS PUMPED (nearest hour) 03 8 9 PUMPING RATE (gal. per min.) 4 11 15 METHOD USED TO MEASURE PUMPING RATE 1966 WATER LEVEL (distance from land surface) BEFORE PUMPING 32 17 20 ft. WHEN PUMPING 98 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 (YES or 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 ( ) below LAND SURFACE 02 (nearest foot)

LATITUDE 3 9.1705208 LONGITUDE 7 6.9568939 (DEFAULT COORD. WGS 84)

NOTES:

B 1 09380 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND STATE PERMIT NUMBER  
 1 2 3 6 APPLICATION FOR PERMIT TO DRILL WELL HO -95 -2436  
 please type 70 fill in this form completely 79

Date Received (APA) 11 27 12  
 8 MM DD YY 13  
**OWNER INFORMATION**  
 15 Last Name Goodier Baker Homes Owner First Name 34  
 36 Street or RFD 10751 Falls Rd. Suite 405 55  
 57 Town Lutherville, MD 70 State MD 72 Zip 21093 76

B 3 LOCATION OF WELL  
 8 COUNTY Howard 21  
 23 SUBDIVISION Schooly Mill Farm 42  
 SECTION 44 46 LOT 1 48 50  
 52 NEAREST TOWN Highland 71

**DRILLER INFORMATION**  
 76 Driller's Name Allen Compton M 5 D 009 License No. 81  
 Firm Name Eagles Well Drilling, LLC  
 Address P.O. Box 202 Woodbine MD  
 Signature Allen Compton Date 9-5-13

B 4 SOURCES OF DRILLING WATER  
 1. 12835 Hall Shop RD 11 STREET ADDRESS 30  
 2. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 3.  NORTH  WEST  EAST  SOUTH  
 190' 34 37 DISTANCE FROM ROAD FT  
 ENTER FT OR MI 38 39  
 TAX MAP: 40 BLK: 10-11 PARCEL 115-149

B 2 WELL INFORMATION  
 1 2 APPROX. PUMPING RATE 5  
 (GAL. PER MIN.) 8 12  
 AVERAGE DAILY QUANTITY NEEDED 500  
 (GAL. PER DAY) 14 20

**USE FOR WATER** (CIRCLE APPROPRIATE BOX)  
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, DEWATERING  
 PUBLIC WATER SUPPLY WELL  
 TEST, OBSERVATION, MONITORING  
 OPEN LOOP GEOTHERMAL  
 CLOSED LOOP GEOTHERMAL

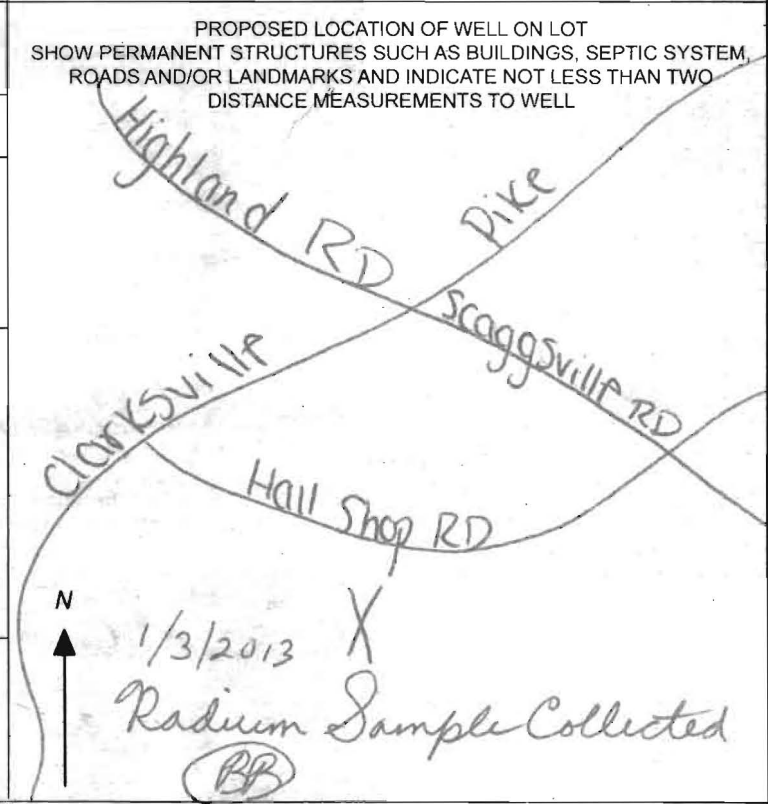
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
Howard A525118 13  
 COUNTY NAME COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ INSERT S → 41  
 DATE ISSUED 11/29/2012 R-KT 11/29/13  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE

APPROXIMATE DEPTH OF WELL 300 FEET  
 24 28  
 APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

**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)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEAN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

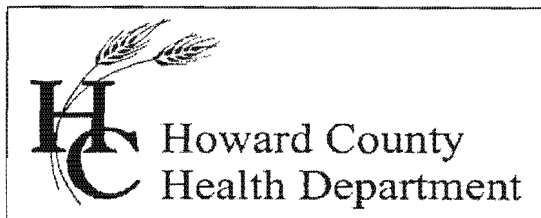
Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROX. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_  
 PERMIT No. HO -95 -2436  
 70 71 72 73 74 75 76 77 78 79



SPECIAL CONDITIONS  
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED: Abandon existing well/ Radium sample required @ yield test







Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045

Main: 410-313-1771 | 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](http://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

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**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – JANUARY 1, 2015**

July 1, 2014

Homeowner  
12835 Hall Shop Road  
Highland, MD 20777

**RE: Schooley Mill Farm, Lot 1  
12835 Hall Shop Road  
Building Permit: B13004269  
Well Permit: HO-95-2436**

Dear Homeowner:

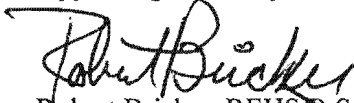
This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on 6/30/2014. Final approval of the well line connection to the dwelling was granted on 5/12/2014. The well construction was completed on 12/27/2012. Water samples were collected on 6/3/2014 and 6/18/2014.

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-95-2436. 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,



Robert Bricker, REHS/R.S., L.E.H.S.  
Environmental Sanitarian  
Well & Septic Program

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



Bureau of Environmental Health  
 7178 Columbia Gateway Drive, Columbia, MD 21046-2347  
 (410) 313-2640 Fax (410) 313-2648  
 TDD (410) 313-2323 Toll Free 1-866-313-6380  
 website: www.hchealth.org

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

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:

Schooly Mill Farm	1	Hallshop RD
Subdivision/Property Name	Lot#	Road Name

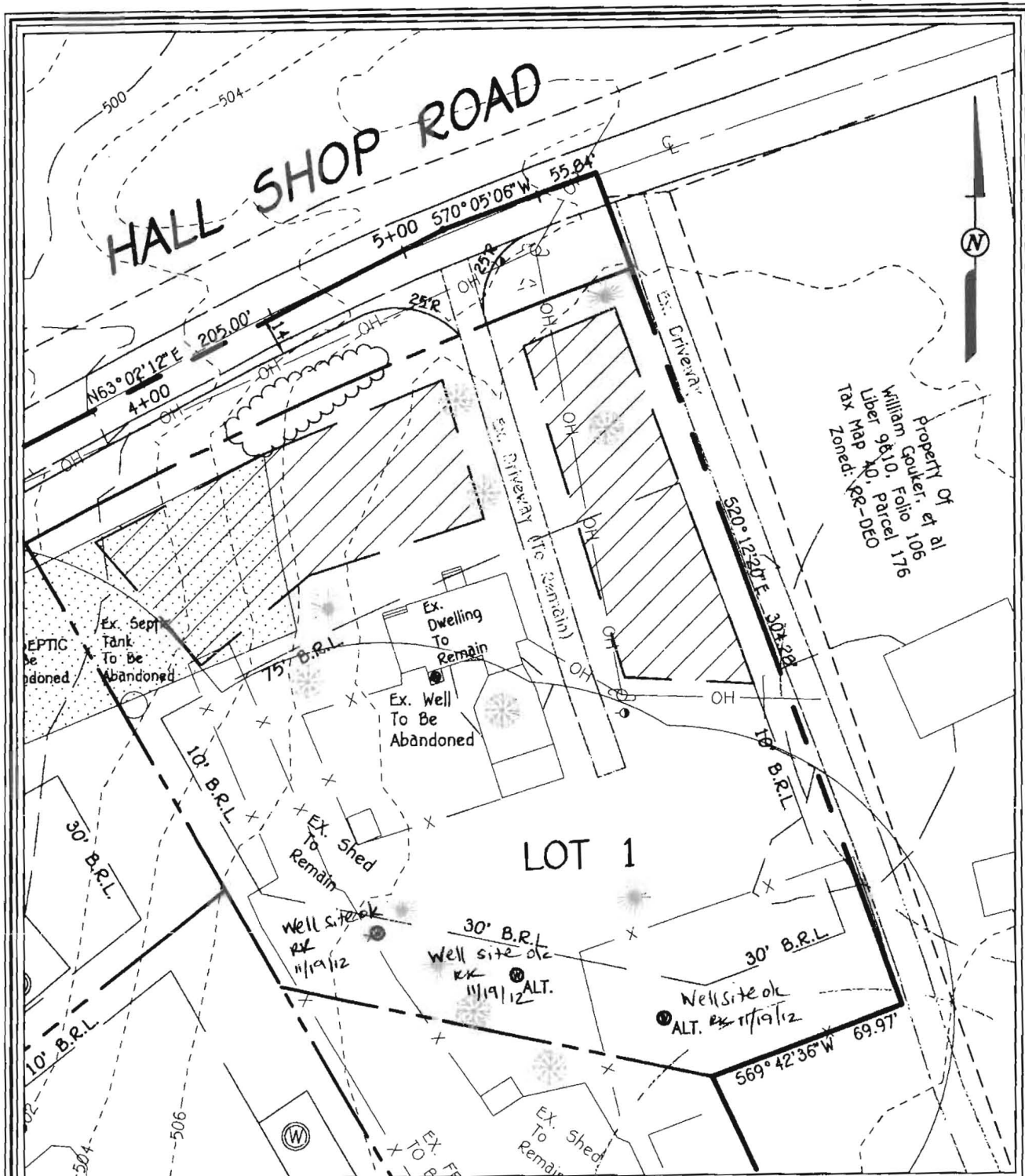
The well site has been staked by Fisher Collins & Carter, INC  
 (professional land surveyor or company employing professional land surveyors)  
 on 8/20/12 (date) and does not require a site inspection.

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

12835 Hall Shop Rd.



Property of  
William Conner, et al  
Folio 106  
Parcel 115 & 149  
Tax Map 40, RR-DEO  
Zone: RR-DEO

LOT 1

LOT 1 WELL MAP

**SCHOOLEY MILL FARM**

BUILDABLE LOTS 1 - 11,  
BUILDABLE PRESERVATION PARCEL 'A' &  
NON-BUILDABLE PRESERVATION PARCELS 'B' - 'D'

ZONED: RR-DEO  
TAX MAP 40, GRID 10 & 11, PARCEL 115 & 149  
FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 50' DATE: SEPT. 26, 2012

SHEET 1 OF 12

WELL LOCATION INFORMATION:

NORTHING = 547,677.8064    EASTING = 1,324,556.1949  
LATITUDE = N39°10'13.72"    LONGITUDE = W76°57'24.83"

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2895

I:\2005\05037\dwg\FINAL\05037 well maps.dwg, LOT 1, 9/26/2012 2:19:53 PM, 1:1



**TRACE LABORATORIES, INC**  
 5 North Park Drive  
 Hunt Valley, MD 21030 USA  
 Telephone: 410/584-9099 / Fax: 410/584-9117  
 Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

**CERTIFICATE OF ANALYSIS**

**Requester:**

Robert L. Feezer Company  
 Attn: Rick Cross  
 6321 Barnett Avenue  
 Sykesville, Maryland 21784

**S/O Number:** 93497

**Report Date:** June 19, 2014

*Bacteria Retest #1*

**Property Sampled:** 12835 Hall Shop Road, 20777  
**Sample Location:** Pressure Tank Tap  
**Residual Chlorine:** <0.1 mg/L

**Building Permit #:** B13004269  
**Sampler ID #:** 2256CL  
**Samples Iced:** Yes

**County:** Howard

**Subdivision:** Schooley Mill Farm

**Lot #:** 1

**Date/Time Collected in Field:** June 18, 2014 11:55 am

**Date/Time Received in Lab:** June 18, 2014 2:06 pm

**Well Tag #:**

HO-95-2436

**Well Condition:**

2-Piece Cap, 2 Bolts Missing, Cap Tight

**Water Treatment/Conditioning:** N/A – Raw Sample

PARAMETER	METHOD	MCL	RESULT	COMMENT
Total Coliform	SM 9223B	Absent	Absent	Pass
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

'OK' rob 7/1/2014

Katherine C. Higgs  
 Katherine C. Higgs  
 Manager – Drinking Water Testing



**TRACE LABORATORIES, INC**  
 5 North Park Drive  
 Hunt Valley, MD 21030 USA  
 Telephone: 410/584-9099 / Fax: 410/584-9117  
 Website: www.tracelabs.com / Email: [info@tracelabs.com](mailto:info@tracelabs.com)

Maryland State Certified Laboratory #318

**CERTIFICATE OF ANALYSIS**

**Requester:**

Robert L. Feezer Company  
 Attn: Rick Cross  
 6321 Barnett Avenue  
 Sykesville, Maryland 21784

**S/O Number:** 93298

**Report Date:** June 4, 2014

**Property Sampled:** 12835 Hall Shop Road, 20777  
**Sample Location:** Pressure Tank Tap  
**Residual Chlorine:** <0.1 mg/L ✓

**Building Permit #:** B13004269  
**Sampler ID #:** 7483AM  
**Samples Iced:** Yes

**County:** Howard      **Subdivision:** Schooley Mill Farm      **Lot #:** 1

**Date/Time Collected in Field:** June 3, 2014 1:40 pm  
**Date/Time Received in Lab:** June 3, 2014 3:13 pm

**Well Tag #:** HO-95-2436  
**Well Condition:** 2-Piece Cap, 1 Bolt Missing, Cap Tight

**Water Treatment/Conditioning:** N/A – Raw Sample ✓

PARAMETER	METHOD	MCL/*SMCL	RESULT	COMMENT
Total Coliform	SM 9223B	Absent	<b>PRESENT</b>	FAIL
<i>E. coli</i>	SM 9223B	Absent	Absent ✓	Pass
Nitrate	SM 4500-NO3D	10 mg/L as N	1.6 mg/L as N ✓	Pass
Turbidity	EPA 180.1	10 NTU	<1.0 NTU ✓	Pass
pH (Field)	SM 4500-H <sup>+</sup> B	*6.5-8.5 Units	6.5 Units ✓	***
Sand		Absent	Absent ✓	Pass

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

*Bacteria FAIL -  
 Others 'OK'  
 ROB  
 7/1/2014*

*Katherine C. Higgs*  
 Katherine C. Higgs  
 Manager – Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA  
 \*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA  
 \*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.

\*\*\*\*\*  
WATER WELL ABANDONMENT-SEALING REPORT FORM  
\*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 12-12-12 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

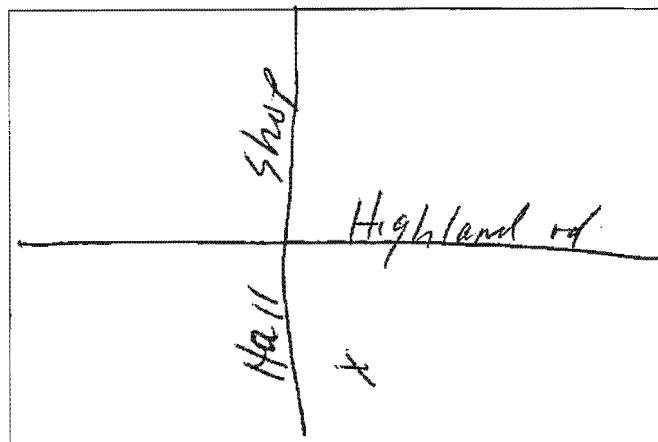
\* PERMIT NUMBER OF REPLACEMENT WELL: \_\_\_\_\_

\* PERSON ABANDONING WELL: Allen Compton WELL DRILLER'S LICENSE NUMBER: 009  
CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Schooley Mill Baker, LLC

\* WELL LOCATION:  
COUNTY: Howard  
NEAREST TOWN: Highland  
TAX MAP 0040 BLOCK 0011 PARCEL 0149  
SUBDIVISION: Schooley Mill Farm  
SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_  
STREET ADDRESS: 12835 Hall Shop rd.

SITE LOCATION MAP



LATITUDE 3 9.1707458

LONGITUDE 7 6.9568329

Allen Compton

\* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED
- OTHER (specify) \_\_\_\_\_
- JETTED
- HAND DUG

\* USE CODE: DOMESTIC

- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL
- GEOTHERMAL

\* TYPE OF CASING:

- STEEL
- CONCRETE
- OTHER (specify) Terra cotta

SIZE OF CASING: 6" INCHES IN DIAMETER

DEPTH OF WELL: 62' FEET DEEP

WAS ANY CASING REMOVED? YES  NO   
If yes, length removed, in feet: \_\_\_\_\_

WAS CASING RIPPED OR PERFORATED? YES  NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>CEMENT</u>	<u>-6</u>	<u>62</u>
VOLUME OF MATERIAL USED		
<u>1 yard</u>		



Send Report To: Bert Nixon  
Howard Co. Env Health  
7178 Columbia Gateway Dr.  
Columbia, MD 21046

State of Maryland  
 DHMH - Laboratories Administration  
 Division of Environmental Chemistry  
**RADIATION LABORATORY**  
 201 W. Preston Street, Baltimore, Maryland 21201  
 John M. DeBoy, Dr. P. H., Director

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: 952436BB No. B: \_\_\_\_\_ Field Blank Bottle No. 1: 123 No B: \_\_\_\_\_

Plant/Site Name: Schooly Mill Farm - Lot 1 County: Howard

Sample Source: Hall Shop Rd. Location: HO-95-2436  
 (well no, lab sink, sample tap, etc.)

County:  B Plant No.

CHECK (one per box)

Drinking Water   
 Landfill   
 Stream   
 Other

Community   
 Non-community   
 Private   
 Other

Source (raw water)   
 Distribution (treated)   
 MCL

Emergency   
 Routine   
 Recheck   
 Special

Collector: B. Baker

Telephone No.: (410) 313-2643

Date Collected: 1/3/2013

Time Collected: 9:00 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:

Federal Project:

Field Data: \_\_\_\_\_  
 pH \_\_\_\_\_ Chlorine \_\_\_\_\_

Remarks: Sample Collected During Yield Test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000				
✓	Gross Beta	4100				
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: \_\_\_/\_\_\_/\_\_\_

Supervisor: \_\_\_\_\_

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373