

C1 6010

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

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER: EWELL, MALCOLM; STREET OR RFD: 1251 UNDERWOOD; TOWN: COOKSVILLE; SUBDIVISION: EWELL PROPERTY; SECTION: ; LOT: 3

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N); TYPE OF GROUTING MATERIAL: CEMENT BENTONITE CLAY; NO. OF BAGS: 25; NO. OF POUNDS: 2500; GALLONS OF WATER: 150; DEPTH OF GROUT SEAL: 64 ft.

C 3

PUMPING TEST

HOURS PUMPED: 3; PUMPING RATE: 20 gal. per min.; METHOD USED TO MEASURE PUMPING RATE: Bucket; WATER LEVEL: BEFORE PUMPING 11 ft., WHEN PUMPING 91 ft.; TYPE OF PUMP USED: submersible

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Brown mica, Gray mica, etc.

CASING RECORD

MAIN CASING TYPE: ST; Nominal diameter top (main) casing: 6 inch; Total depth of main casing: 20 feet

OTHER CASING (if used)

Table for OTHER CASING with columns: diameter inch, depth (feet) from, to

SCREEN RECORD

screen type or open hole: ST; DEPTH (nearest ft.): 68

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: Y (yes), N (no)

CIRCLE APPROPRIATE LETTER: A (well abandoned), E (electric log), P (test well converted to production)

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...

DRILLERS LIC. NO.: MWD 040; DRILLERS SIGNATURE: George F. Schenkling

LIC. NO.: AWD 288

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

Table for CASING RECORD with columns: E A C H C A S I N G, diameter inch, depth (feet) 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

TELESCOPE CASING LOG INDICATOR: ; OTHER DATA

PUMP INSTALLED

DRILLER INSTALLED PUMP: YES (NO); IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS; TYPE OF PUMP INSTALLED PLACE: ; CAPACITY: 31 GALLONS PER MINUTE; PUMP HORSE POWER: 37; PUMP COLUMN LENGTH: 41; CASING HEIGHT: + above LAND SURFACE 2 (nearest) foot

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) See plat

B 1 2655

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-1763

531009 please type

fill in this form completely

Date Received (APA) 11111

8 MM DD YY 13

OWNER INFORMATION

EWELL MALCOLM
Last Name Owner First Name
1251 UNDERWOOD ROAD
SYKESVILLE, MD. 21784

B 3 HOWARD LOCATION OF WELL

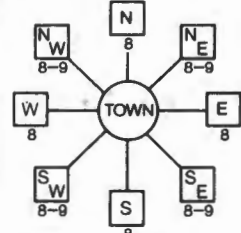
8 COUNTY 21
Ewell Property
23 SUBDIVISION
SECTION 44 46 LOT 3 48 50
Cooksville
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2

DRILLER INFORMATION

George F. Easterday M W D 040
Driller's Name License No. 81
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771
Address
George F. Easterday 5/14/2009
Signature Date

B 4 1251 Unerwood Road

11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W EAST E
SOUTH S
34 250 37
DISTANCE FROM ROAD Ft.
ENTER FT OR MI 38 39
TAX MAP: 9 BLK: 8 PARCEL 74



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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13) A528928
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S 41
DATE ISSUED 6/1/2009 Brian Baber 6/1/2010
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 547 000 EAST GRID 804 000
56 55 57 63

- USE FOR WATER (CIRCLE APPROPRIATE BOX)
D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, DEWATERING
P PUBLIC WATER SUPPLY WELL
T TEST, OBSERVATION, MONITORING
G GEO-THERMAL

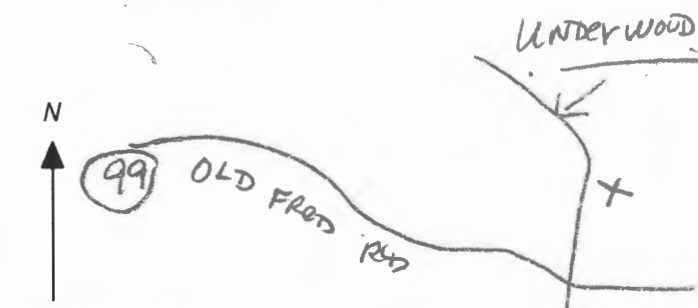
APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 5 INCH NEAREST

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 8064
5487
N 000 000

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTary Drive-POINT
other

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

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
D THIS WELL WILL DEEPEM 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)
APPROP. PERMIT NUMBER G
PERMIT No. HO-95-1763

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

6-24-09

FIELD DATA SHEET  
 HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-1763  
 Location of property (road) 125/Underwood Rd  
 Subdivision Swell Park Lot \_\_\_\_\_ Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller Eastday Owner Malcolm Ewell

Depth of well 300 ft. 30 gpm  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 10.7

I. High rate pumping -- reservoir drawdown

Time pump started 11:45 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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
11:45	10.7	15 sec	5 gal bucket	20 gpm
12:00	50.1	15 "	"	20 "
12:15	57.2	15 "	"	20 "
12:30	60.5	15 "	"	20 "
12:45	62.7	15 "	"	20 "
1:00	64.2	15 "	"	20 "
1:15	65.9	15 "	"	20 "
1:30	66.9	15 "	"	20 "
1:45	67.8	15 "	"	20 "
2:00	68.6	15 "	"	20 "
2:15	69.3	15 "	"	20 "
2:30	70.1	15 "	"	20 "
2:45	70.7	15 "	"	20 "

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: Foales Well Pump & Water Treatment, LLC Telephone #: 410 795 5670  
 Address: 590 Obrecht 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 Foale License# MSD226

\*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: Matt Sroux Telephone #: \_\_\_\_\_  
 Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO-95-1763 ✓ (PR)  
 Site Address: 1411 Underwood Rd  
Sykesville, MD 21784

Submersible Pump Data

Make: Grundfos  
 Model #: 1550E07-180  
 Pump Capacity: 15  
 Well Yield: 20  
 Depth of well encountered at time of pump installation: 300 (feet)

Pitless Adapter

Make: Campbell +  
 Model#: NA  
 GPM Depth: 36" (36" min)  
 GPM NSF/WSC approved: Yes  
 Depth of well encountered at time of pump installation: 300 (feet)

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

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: [Signature] date: 8/26/20

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

Date Insp. Requested: 8/27/20 Date Insp. Approved: 8/27/20 Inspector: RR  
 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 ✓

(Revised form 10/24/2018)

8/27/20 water line sleeved under driveway (PR)

**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – OCTOBER 6, 2021**

April 6, 2021

Homeowner  
1411 Underwood Road  
Sykesville, MD 21784

**RE: Good Neighborhood, Lot 3**  
**1411 Underwood Road**  
**Building Permit: B19004387**  
**Well Permit: HO-95-1763**

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 **2/10/2021**. Final approval of the well line connection to the dwelling was granted on **8/27/2020**. The well construction was completed on **6/24/2009**. Water samples were collected on **10/21/2020, 10/28/2020**.

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-95-1763. 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.**

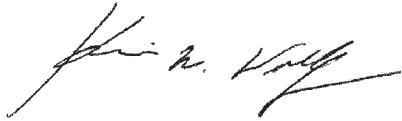
Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:  
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

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

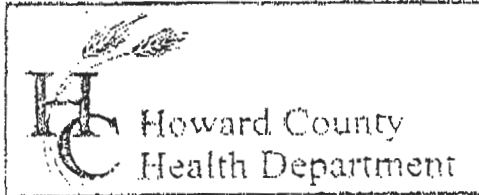
In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

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



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
 (410) 313-2640 Fax (410) 313-2648  
 TDD (410) 313-2323 Toll Free 1-866-313-6300  
 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

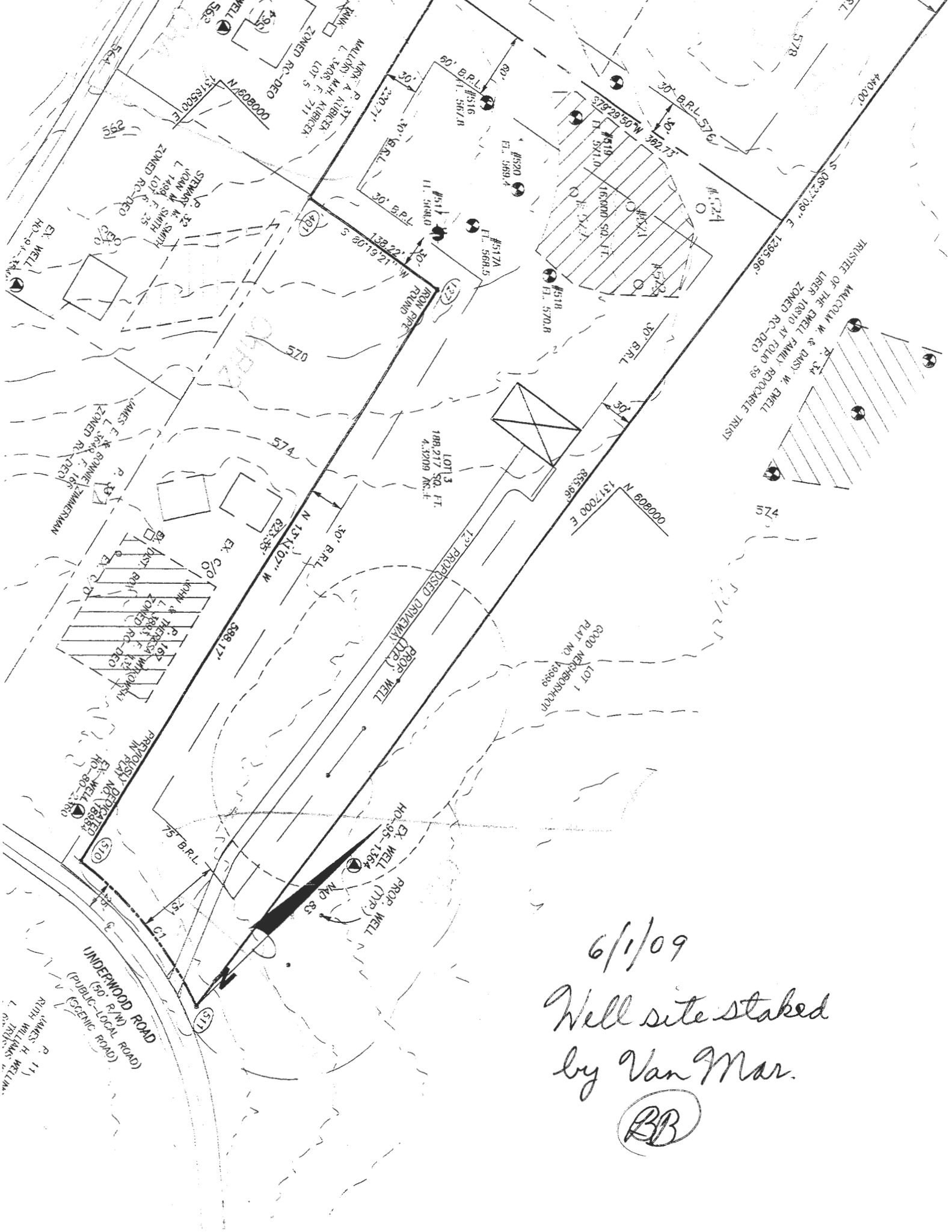
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by VAN MAR  
 (professional land surveyor or company employing professional land surveyors)  
 on 5-11-09 (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 6/10/03

LOT 3 EWELL Property  
 UNDERWOOD Road



6/1/09  
 Well site staked  
 by Van Mar.

BB

# 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 #: 140636 Account #: 1933  
Reference: Matt Srour Company: Fogles Well Pump & Treatment  
Location: 1411 Underwood Road Requested By: Dave Fogle  
Sykesville, MD 21784 Source: Well Water  
Date/ Time Collected: 10/21/2020 0800 Site: Pressure Tank Drain  
Date/Time Rec'd: 10/21/2020 0850 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.8  
Collected By: T. Cassell 0767TC Well #: HO-95-1763

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	31	MPN/ 100 ml	<1.0	SM20 9223B	10/22/2020 / 0930 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/22/2020 / 0930 / CRS
Nitrate	7.23	mg/L	10	601	10/22/2020 / 1000 / CRS
Turbidity	5.03	NTU	<10	SM20 2130B	10/22/2020 / 1100 / CRS
Sand	NG	mg/L	5	Visual/Gravimetric	10/22/2020 / 1100 / CRS

### 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 Visual well check: Sealed, vented cap
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy  
Building Permit # : B19004387

Date Reported: 10/22/2020

# 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 #:	140812	Account #:	1933
Reference:	Matt Srour	Company:	Fogles Well Pump & Treatment
Location:	1411 Underwood Road Sykesville, MD 21784	Requested By:	Dave Fogle
Date/ Time Collected:	10/28/2020 0710	Source:	Well Water
Date/Time Rec'd:	10/28/2020 1051	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	J. Evans 0309JE	pH:	6.0
		Well #:	HO-95-1763

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/29/2020 / 1130 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/29/2020 / 1130 / CRS

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
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Date Reported: 10/29/2020