

C1 66802

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORTFILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

ST/CO USE ONLY

DATE Received

MM DD YY
7 24 2021

DATE WELL COMPLETED

MM DD YY
6-24-21

Depth of Well

260
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

HD-20-0097

OWNER

WELL SITE ADDRESS

TOWN

SUBDIVISION

SECTION

LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

check
if water
bearingBrown Strata
Blue Rock

0

3

3

260

Water
60 ft
180 ft

GROUTING RECORD

yes no

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM

BENTONITE CLAY BC

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 21 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

ST

STEEL

CO

CONCRETE

PL

PLASTIC

OT

OTHER

MAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

PL

6

23

EACH
CASING

OTHER CASING (if used)

diameter
inchdepth (feet)
from toscreen type
or open hole
(insert
appropriate
code
below)

SCREEN RECORD

ST

STEEL

BR

BRASS

PL

PLASTIC

HO

OPEN

OT

OTHER

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED

yes

Y

no

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
WELLI 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 S D 027

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)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

TELESCOPE
CASINGLOG
INDICATOR74 75 76
OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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
(CIRCLE) (YES or NO)

YES

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 29CAPACITY:
GALLONS PER MINUTE
(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)CASING HEIGHT (circle appropriate box
and enter casing height)

+ above

- below

LAND SURFACE

(nearest
foot)LATITUDE 39.33456
LONGITUDE 77.02544
(DEFAULT COORD. WGS 84)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
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Environment is subject to the Maryland Public
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part, by the public and other governmental
agencies, if not protected by federal or state law.

B 1	61289 1 2 3 6 <u>WS 72818</u>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER <u>HO - 20 - 0097</u> 70 fill in this form completely 79
Date Received (APA) <u>05/20/21</u> 8 MM DD YY 13 OWNER INFORMATION 15 Last Name <u>Gally</u> Owner <u>Nicholas</u> First Name <u>Nicholas</u> 34 36 <u>14830 Old Frederick Rd</u> 55 Street or RFD 57 <u>Woodbine Md 21797</u> 76 Town 70 State 72 Zip			B 3 LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>Mc Cann Estates East</u> 42 SECTION <u>44</u> 46 LOT <u>3</u> 48 50 52 <u>Woodbine</u> 71 NEAREST TOWN	
DRILLER INFORMATION Driller's Name <u>Larry Mayne</u> MS D 027 76 License No. 81 Firm Name <u>Joseph Mayne Well Drilling</u> Address <u>5512 Ridge Rd Mt. Airy Md 21771</u> Signature <u>Larry Mayne</u> Date <u>4-29-2021</u>			B 4 SOURCES OF DRILLING WATER 1. <u>Well</u> 2. <u>6/21/21</u> 3. <u>Thompson</u> 11 STREET ADDRESS <u>14830 Old Frederick Rd</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 <u>420</u> 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: <u>8</u> BLK: <u>10</u> PARCEL <u>27B</u>	
B 2 WELL INFORMATION 1 APPROX. PUMPING RATE (GAL. PER MIN.) 8 <u>500</u> 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 <u>500</u> 20			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>XIII</u> STATE SIGNATURE <u>[Signature]</u> INSERT S → 41 DATE ISSUED <u>05/20/2021</u> 43 MM DD YY 48 CO SIGNATURE <u>[Signature]</u> EXP. DATE <u>03/20/2022</u>	
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"/> OPEN LOOP GEOTHERMAL <input type="radio"/> CLOSED LOOP GEOTHERMAL			PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL <u>17/21 - 20' solar</u> <u>20' as-is</u> <u>20' K&S</u> <u>fracture - 50'</u> <u>2/3 gpm</u> <u>6/22/21</u> <u>GFS</u> <u>DID Frederick Rd</u>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST INCH			METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR-ROTary</u> JETTED <u>ROTARY (Hydraulic Rotary)</u> Jetted & DRIVEN 30 <u>CABLE</u> AIR-PERCussion <u>Drive-POINT</u> 37 <u>other</u> REVERSE-ROTary	
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 checked="" 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 DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 <u>41</u> 52			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.	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <u>G</u> PERMIT No. <u>HO - 20 - 0097</u> 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED				

[illegible]

NON BOUNDARIED
BULK PARCEL
"A"

LOT 4
3.22 AC.±

NICHOLAS J. LALLY
L 12519 F. 190
PARCEL 27-A

LOT 3
3.05 AC.±

LOT 5
3.27 AC.±

NICHOLAS J. LALLY
L 12519 F. 190
PARCEL 27-B

LOT 2
3.93 AC.±

DIANE B. DUIT
HANS DUIT T/E
L 12087 F. 865
McCANN PROPERTY
LOT 2
PLAT #15471

JAYESH PATEL
HEMU PATEL T/E
L 10073 F. 498
McCANN PROPERTY
LOT 3
PLAT #15471

DHIRENDBA KUMAR SINHA
PRATHEE SINHA
L 18259 F. 114
McCANN PROPERTY

ROBERT J. ADGER
BETH L. ADGER T/E
L 7964 F. 696
McCANN PROPERTY

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

HO-20- 0097

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

APPROVED 05/20/2021
LALLY LOT 3
HO-20-0097
STAKED BY MILDENBERG

RT PLAT OCT 2019.DWG

LOT 4
3.22 AC ±

NICHOLAS J. LALLY
L 12519 F. 190
PARCEL 27-A

~~LOT 3~~
~~3.05 AC ±~~

LOT 5
3.27 AC. ±

NICHOLAS J. LALLY
L 12519 F. 190
PARCEL 27-B

LOT 2
3.93 AC.±

APPROVE LOCATION OF
POTABLE WATER WELL
ZONE TO BE
RELOCATED.

PROPOSED LOCATION OF
POTABLE WATER WELL
ZONE.

APPROVED 05/20/2021
LARRY LOT 3
HO-20-0097
STAKED BY MILDENBORG

32' WIC DRIVEWAY, UTILITY
MAINTENANCE EASEMENT.

JAYESH PATEL
HEMU PATEL T/5
A. 10073 FA 498
McCANN PROPERIN
LOT 31
PLAT #15471

DHIRENDRA KUMAR SINHA
 PRAJITME SINHA
 L 18259 F. 114
 MCCANN PROPERTY

HOOVER J. ADGER
BETTY L. ADGER 17E
L 7964 F. 696
McCANN PROPERTY



HOWARD COUNTY HEALTH DEPARTMENT

72818

DATE
10/20/20

W5

Received
From

PHONE #

For

☐ CASH
☒ CHECK

NO.

232

\$ 1040 100

Walter J. King
14830 - Old Frederick Rd.

Six hundred forty

Dollars

Received By

J King



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

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.

(Revised form 10/24/2018)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – August 29, 2024

February 29, 2024

Homeowner
14760 McCann Farm Road
Woodbine, MD 21797

**RE: McCann Farm Est., Lot 3
14760 McCann Farm Rd
Building Permit: B22004276
Well Permit: HO-20-0097**

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 **2/20/2024**. Final approval of the well line connection to the dwelling was granted on **10/16/2023**. The well construction was completed on **6/21/2021**. Water samples were collected on **2/19/2024**.

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-20-0097. 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>



Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

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 Environment's 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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 164503 Account #: 4470
Reference: Williamsburg Homes LLC Client: Williamsburg Homes LLC
Location: 14760 McCann Farm Road Requested By: Bill McBride
Woodbine, MD 21797 Source: Well Water
Date/ Time Collected: 2/19/2024 1220 Site: Pressure Tank
Date/Time Rec'd: 2/19/2024 1430 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.4
Collected By: J. Yeager 0819JY Well #: HO-20-0097

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/20/2024 / 1000 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/20/2024 / 1000 / CRS
Nitrate.	5.67	mg/L (as N)	10	EPA 300.0	2/19/2024 / 2220 / CRS
Turbidity	0.42	NTU	<10	SM2130B	2/20/2024 / 1215 / KDR
Sand	ND	mg/L	5	Visual/Gravimetric	2/20/2024 / 1230 / KDR

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 ND = None Detected
- 6 Visual well check: Sealed, vented cap
- 7 pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B23002711

Date Reported: 2/20/2024