

B 1 8448

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO - 95 - 0479

W525138 please type

fill in this form completely

Date Received (APA)

7/3/06

OWNER INFORMATION

Land Marketing Consultants
Last Name: Land Marketing Consultants
Street or RFD: 3060 Washington Rd
Town: GLENWOOD MD 21738

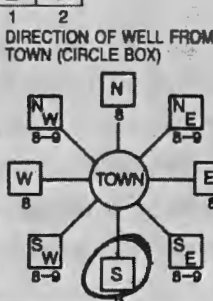
LOCATION OF WELL

Howard
COUNTY: Howard
SUBDIVISION: SARTERIO Prop
SECTION: 5
LOT: 5
NEAREST TOWN: WOODBINE
MILES FROM TOWN: 2

DRILLER INFORMATION

Ralph E. MAYNE MSD 117
Driller's Name: Ralph E. MAYNE
License No.: MSD 117
Firm Name: RALPH E MAYNE INC
Address: 17024 Handy Rd Mt Airy MD 21771
Signature: [Signature] Date: 7/3/06

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



OLD ANNAPOLIS Rd
NEAR WHAT ROAD: 11

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH, WEST, SOUTH, EAST

DISTANCE FROM ROAD: 250

TAX MAP: 2 BLK: 21 PARCEL 123

WELL INFORMATION

APPROX. PUMPING RATE: 5 GAL. PER MIN.
AVERAGE DAILY QUANTITY NEEDED: 500 GAL. PER DAY

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME
A521582 COUNTY NO.
STATE SIGNATURE: [Signature]
DATE ISSUED: 7/7/06
CO SIGNATURE: Daniel A. Cuyler 7/8/07
NORTH GRID: 540 EAST GRID: 770

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCUSION ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT

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 DEEPM AN EXISTING WELL

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER: G
PERMIT No. HO-95-0479

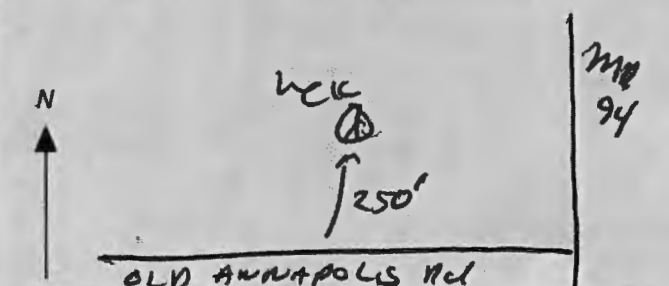
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well

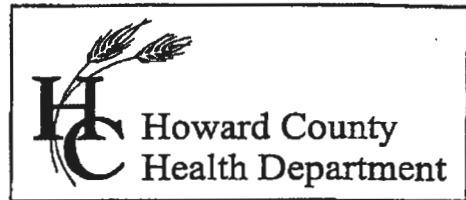
WRITE THE BOX NUMBER FROM THE MAP HERE



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



SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -
Grout well to a minimum depth of 5 feet or more



7178 Columbia Gateway Drive, Columbia, MD 21046
(410) 313-6300 Fax (410) 313-6303
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

Sartorio Property Lot #5 *HO 95 0479*
Well Special Conditions

- ❖ The Well to be drilled on proposed Lot #5 (and all wells drilled in Howard County) shall be grouted according to Code of Maryland Annotated Regulations (COMAR) 26.04.04.07(G). (Grouting)
- ❖ **Additionally this well is required to be grouted according to these regulations to a depth of (minimum) 50 feet or through all unconsolidated materials**

GAC

*cc: file
MDE groundwater management*

C1 0216

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)

COUNTY NUMBER A521582

DATE RECEIVED JUL 26 2006

DATE WELL COMPLETED 07 13 06

DEPTH OF WELL 220 (TO NEAREST FOOT)

PERMIT NO. HO-95-0479

OWNER Sartorio, Elsie Davis; STREET OR RFD 218 Annapolis Rd; TOWN WOODBINE; SUBDIVISION Sartorio Property; SECTION; LOT 5

WELL LOG

Not required for driven wells. 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. Includes entries for Top Soil, Sand, Sand/Stone, MICKA, Sand/Stone, MICKA, Flint Rock, MICKA.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N). TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS: 21. NO. OF POUNDS: 126. GALLONS OF WATER: 126. DEPTH OF GROUT SEAL: 0 to 50 ft.

CASING RECORD

MAIN CASING TYPE: PL (PLASTIC). Nominal diameter: 6 inch. Total depth of main casing: 70 feet.

OTHER CASING (if used) diameter and depth.

SCREEN RECORD: screen type or open hole: HO (HOLE OTHER).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: Y (YES), N (NO)

CIRCLE APPROPRIATE LETTER: A (WELL ABANDONED AND SEALED), E (ELECTRIC LOG OBTAINED), P (TEST WELL CONVERTED TO PRODUCTION WELL)

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 28.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MSD 117; DRILLERS SIGNATURE; LIC. NO. D

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

DEPTH (nearest ft.)

Table with columns: T, E, A, C, S, R, E, N. Includes depth measurements for various casing sections.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

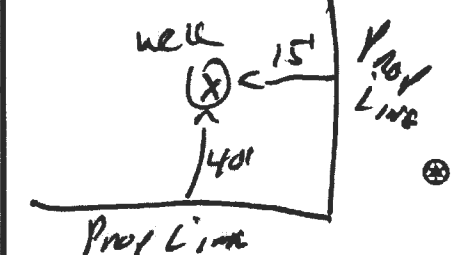
PUMPING TEST

HOURS PUMPED: 3; PUMPING RATE: 6 gal. per min.; METHOD USED TO MEASURE PUMPING RATE: Bucket; WATER LEVEL: BEFORE PUMPING 60 ft., WHEN PUMPING 95 ft.; TYPE OF PUMP USED: S (submersible)

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES/NO). TYPE OF PUMP INSTALLED: 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) +1 above LAND SURFACE 2 (nearest foot) below.

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)



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: R&G WATER SYSTEMS Telephone #: 410-234-0700
Address: 1009 S. MAIN ST.
HAMPSTEAD, MD. 21074

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. Ross, SR License# _____

*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: J.M.B HOMES Telephone #: 443-605-2852
Subdivision: SARATOGA PROPERTY Lot #: 5 Well Tag #: HO-95-0479
Site Address: 1961 OLD ANnapolis RD
WOODBINE 21799

Submersible Pump Data

Make: Grundfos
Model #: 76607422C
Pump Capacity: 7 G.P.M
Well Yield: 6 G.P.M
Depth of well encountered at time of pump installation: 240 (feet)

Pitless Adapter

Make: DOSHAK
Model #: 71002.5
GPM Depth: 42' (36" min)
GPM NSF/WSC 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:

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

Piping to house

Type: PVC
PSI: 160 (160 psi min)
Depth of supply line: 42" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: YES
Length of sleeve (5' minimum from foundation): 10'
Sleeve sealed properly: W/ FLEXCO & 2" VINYL TAPE

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. Ross
Signature of company representative responsible for installation

2/5/24
date

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

Date Insp. Requested: 2/5/2024 Date Insp. Approved: _____ Inspector: 5/24/
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade 48" - 60"
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly 48"
Safety rope not outside of well cap/casing
Correct well tag attached properly and casing 8" above finished grade 21"
Water supply line sleeved adequately at house connection 7'
Adequate grout observed below pitless adapter 6cm grout

BACK OF HOSE

(Revised form 10/24/2018)

2/5/24 - called plumber & left note
3:30 PM - plumber says broken &
no way to install. Elec. conduit 2' min
below grade. (P)

5/24/2024 - screw shell missing from well cap.
well casing not separated to show electric
conduit. Received pics of fixed well cap
from builder (MKS)



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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – NOVEMBER 24, 2024

May 24, 2024

Homeowner
1961 Old Annapolis Road
Woodbine, MD 21797

RE: Sartorio Property, Lot 2
1961 Old Annapolis Road
Building Permit: B23002899
Well Permit: HO-95-0479

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 **2/7/2024**. Final approval of the well line connection to the dwelling was granted on **5/24/2024**. The well construction was completed on **7/13/2006**. Water samples were collected on **5/9/2024, 5/15/2024, 5/17/2024**.

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-95-0479. 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,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a horizontal line.

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 #: 166183 Account #: 7852
Reference: Earle Client: JMB Homes
Location: 1961 Old Annapolis Road Requested By: John Berger
Woodbine, MD 21797 Source: Well Water
Date/ Time Collected: 5/9/2024 1216 Site: Pressure Tank
Date/Time Rec'd: 5/9/2024 1453 Treatment: Prior to Sediment Filter
Chlorine ppm: Free: ND Total: ND pH: 7.0
Collected By: R. Ott 0266RO Well #: HO-95-0479

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	3.1	MPN/ 100 ml	<1.0	SM20 9223B	5/10/2024 / 0935 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/10/2024 / 0935 / KDR
Nitrate.	0.68	mg/L (as N)	10	EPA 300.0	5/9/2024 / 1735 / KDR
Turbidity	<0.30	NTU	<10	SM2130B	5/10/2024 / 0930 / KDR
Sand	>5	mg/L	5	Visual/Gravimetric	5/10/2024 / 0920 / 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 # : B23002899

Date Reported: 5/10/2024

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 166278 Account #: 7852
Reference: Earle Client: JMB Homes
Location: 1961 Old Annapolis Road Requested By: John Berger
Woodbine, MD 21797 Source: Well Water
Date/ Time Collected: 5/15/2024 0927 Site: Pressure Tank
Date/Time Rec'd: 5/15/2024 1307 Treatment: Prior to Sediment Filter
Chlorine ppm: Free: ND Total: ND pH: 6.9
Collected By: R. Ott 0266RO Well #: HO-95-0479

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/16/2024 / 0900 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/16/2024 / 0900 / KDR
Sand	>5	mg/L	5	Visual/Gravimetric	5/16/2024 / 0955 / KDR

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

Reason for Test : Use & Occupancy

Building Permit # : B23002899

Date Reported: 5/16/2024

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:	166337	Account #:	7852
Reference:	Earle	Client:	JMB Homes
Location:	1961 Old Annapolis Road Woodbine, MD 21797	Requested By:	John Berger
Date/ Time Collected:	5/17/2024 1050	Source:	Well Water
Date/Time Rec'd:	5/17/2024 1400	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Prior to Sediment Filter
Collected By:	J. Yeager 0819JY	pH:	6.1
		Well #:	HO-95-0479

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sand	ND	mg/L	5	Visual/Gravimetric	5/17/2024 / 1440 / CJM

NOTES:


- 1 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 2 ND = None Detected
- 3 Visual well check: Sealed, vented cap
- 4 pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B23002899

Date Reported: 5/17/2024



5/24/2024 - well cap w/ screw fastened
received from builder. 

Linda D. Alexander

Associate / Senior Project Manager

CLSI

439 East Main Street, Westminster, MD. 21157

lalexander@clsimail.com

direct: 410-871-4475

cell: 443-375-9903

From: Oswald, Hank <hoswald@howardcountymd.gov>

Sent: Wednesday, January 9, 2019 9:36 AM

To: Linda D. Alexander <lalexander@clsimail.com>

Subject: OSDS Plan_1961 Old Annapolis Road

Hi Linda:

Good morning. The OSDA Plan just needs the well note, The existing well tag # has been field located by _____ and accurately shown on plan.

You may come in to redline the plan or revise the plan with the well note.

Thanks,

Hank

Hank Oswald

Licensed Environmental Health Specialist

Howard County Health Department

Bureau of Environmental Health

Well & Septic Program

8930 Stanford Boulevard

Columbia, MD 21045

410.313.1786 (Office)

hoswald@howardcountymd.gov

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Oswald, Hank

From: Linda D. Alexander <lalexander@clsimail.com>
Sent: Friday, February 15, 2019 8:23 AM
To: Oswald, Hank
Subject: RE: OSDS Plan_1961 Old Annapolis Road

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Hank,
It is he temporary stockpile of soil for when the house is under construction.

Linda D. Alexander

Associate / Senior Project Manager

CLSI

439 East Main Street, Westminster, MD. 21157
lalexander@clsimail.com
direct: 410-871-4475
cell: 443-375-9903

From: Oswald, Hank <hoswald@howardcountymd.gov>
Sent: Friday, February 15, 2019 7:31 AM
To: Linda D. Alexander <lalexander@clsimail.com>
Subject: RE: OSDS Plan_1961 Old Annapolis Road

Hi Linda:

Good morning. Can you tell me what the circle within the well radius represents?

Thanks,

Hank

From: Linda D. Alexander <lalexander@clsimail.com>
Sent: Thursday, February 14, 2019 1:57 PM
To: Oswald, Hank <hoswald@howardcountymd.gov>
Cc: Jeffrey Zigler <jzigler@clsimail.com>
Subject: FW: OSDS Plan_1961 Old Annapolis Road

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Hi Hank
This revision was done and resubmitted on January 9. Is this approved yet?
Thanks

Oswald, Hank

From: Oswald, Hank
Sent: Wednesday, January 09, 2019 9:36 AM
To: 'lalexander@clsimail.com'
Subject: OSDS Plan_1961 Old Annapolis Road

Hi Linda:

Good morning. The OSDA Plan just needs the well note, The existing well tag # has been field located by _____ and accurately shown on plan.

You may come in to redline the plan or revise the plan with the well note.

Thanks,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
hoswald@howardcountymd.gov

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