c 1 - 3795 SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(7HIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY 🗸	COUNTY A52#3729
ST/CO USE ONLY DĂTE Received MM DO YY DATE WELL COMPI		FROM "PERMIT NO. FROM "PERMIT TO DRILL WELL"
8 13 4/18/00	22 <u>L/ 00</u> (TO NEAREST FOOT) 26 G	7 9 9 0 9 88 28 29 30 31 32 33 34 35 36 37
OWNER DOUD; TIM STREET OR RFD 15	523 CLARRY MILL ROWN C	ooksville.
SUBDIVISION	SECTION	LOT
WELL LOG Not required for driven wells	GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST
DESCRIPTION (Use additional sheets if needed) FROM TO check if water bearing	CEMENT CIM) BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
Top Soil 0 2	NO. OF BAGS 77 NO. OF POUNDS 77700	PUMPING RATE (gal. per min.)
Brown w. Cos. 2 78	DEPTH OF GROUT SEAL (to nearest foot)	MEASURE PUMPING RATE Bushet
Greymica 75 285	from 48 TOP 52 ft. to 54 BOTTOM 58 ft. (enter 0 if from surface)	WATER LEVEL (distance from land surface)
in Quarte	casing CASING RECORD	BEFORE PUMPING $\frac{19}{17}$ ft.
Greymica 285 400	insert STEEL CONCRETE	WHEN PUMPING $\frac{176}{22}$ ft.
'	code below PLASTIC OTHER	TYPE OF PUMP USED (for test)
	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	A air P piston T turbine
	TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O (describe below)
	$\frac{5.7}{60 \ 61}$ $\frac{63}{63}$ $\frac{100}{66}$	J jet S submersible
	E OTHER CASING (if used) A diameter depth (feet)	27 27
	H inch from to C S	PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)
	g	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
40	screen type SCREEN RECORD	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) 29
	insert STEEL BRASS OPEN	IN BOX 29.
]	(appropriate code below BRONZE HOLE P L O T	GALLONS PER MINUTE (to nearest gallon) 31 35
i	PLASTIC OTHER	PUMP HORSE POWER 37 41
NUMBER OF UNSUCCESSFUL WELLS:	DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
WELL HYDROFRACTURED Yes NO	E 1 1/0 - 98 400 A 8 9 11 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED	H 2 23 24 26 30 32 36	LAND SURFACE
WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED	C 3 R 38 39 41 45 47 51	below (nearest) foot)
P TEST WELL CONVERTED TO PRODUCTION WELL	E E SLOT SIZE 1 2 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
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.	DIAMETER	BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIC. NO. 1 M LAD 040.	GRAVEL PACK	M (MICHOOLIEMENTO 10 MEET)
DRILLERS SIGNATURE KUNTELLING	IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68	
(MUST MATCH SIGNATURE ON APPLICATION)	MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
GC. NO.1 H-WD 7 & & 1	T (E.R.O.S.) W Q	20' ta 15 A
SITE SUPERVISOR (sign of driller or fourneyman	70 72 74 75 76	20' 50 €
responsible for sitework (t different from permittee)	TELESCOPE LOG CASING INDICATOR OTHER DATA	AREE Line

		 2.10-06		X'O	0				
age	of	4-20-00	1. 4	•		1	Review		
ate		 - 1 · · · ·					Service Control	 	

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-6488 Location of property (road) <u>15523</u> Subdivision	S CARLS MIU	L (CD) Block	Plat	Sec.	
Well Driller EASTERDAY	Owner 7	South, TV	u -		
	25Pm				
Distance of measuring point (
Static water level (S.W.L.) b	elow M.P				
I. High rate pumping reservoir	drawdown				
i. High face pumping leservoir					
Time pump started ///45		mping rate _	25 6 PM	7	

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

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW HETER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill #	Perma SET	(gallons per
tervals	and the second second	gallon bucket		minute)
19/15	1755	754	380R7	8.5
1236	175 PT	7 Se2		8,5
12:45	1756	75xc		6.5
1:00	17505	75-		8-5
1115	1750	254	\\	8.5
1:36	17501	7 8-4		5.5
1:45	175KT	75-1	/	6. 5
0,00	17610	75-4		8,5
2:15	17600	7 Suc		8.5
2130	176 RT) SEE		8.5
2:45	DEET	7 SEZ		8.5
3100	176 RT	7 Sec		8.5
3:15	1960	7562	390 PT	8.5
		TESTED 31/	Delde.	
فرت بعيضيضا	ليحضع والمستحصر			



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:

) XÍ	The we	ll sit	te has been s	taked by <u>6 WNOV</u>
/~	(profession	onal la	and surveyor or	company employing professional land surveyors)
	on 6			_ (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

TIM DOWD 15523 CARRS MILL ROXD 301-370-4263

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH WATER AND SEWERAGE PROGRAM TEL: (410)313-2640 FAX: (410)313-2648

C7004504

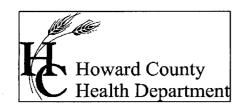
Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

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: Michael Runk Plumbing Telephone #: 410 - 781-6791 Address: 14001/c ma. 2.784 (Must circle one) (Licensed Plumber Licensed Well Driller Licensed Well Pump Installer License # and name of individual responsible for the field installation: Name (Print): Michael Runk License# *A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Name of Property Owner, Telephone #: Subdivision: Well Tag # : HO -Lot #: Site Address: Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit Make: Make: Harry Make: Harry Model #: 25792-9-344 24 37 250 Model #: 07-800 Two piece watertight cap: -Screened, vented well cap: Pump Capacity 8.0 GPM Well Yield: 8.5 GPM Depth: 42" (36" min) Cap secured to casing:___ NSF approved: Conduit min 18" B.G.: Depth of well encountered at time of pump installation: 4/5 (feet) 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 Torque arrestors of Cable guarde are required - Must circle one Safety rope, if used, attached to inside of well casing with eye bolt Piping to house House Connection Type: Kasa Poh PVC sleeved to undisturbed soil at wall penetration: PSI: 160 (160 psi min) Approximate length of sleeve: /p Depth of supply line: 42 (36" min) Sleeve caulked and sealed properly: 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. 6/27/08 Signature of company representative responsible for installation For Health Department Use Only - Not to be completed by Installer Date Insp. Requested: Date Insp. Approved: Inspection Data: Pitless adapter and 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 installed inside of well 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



Bureau of Environmental Health

7178 Columbia Gateway Drive Columbia, Maryland 21046-2132

(410) 313-2640

Fax (410) 313-2648

TDD (410) 313-2323 Toll Free 1

Toll Free 1-866-313-6300

website: www.hchealth.org

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

October 10, 2008

Mr. Robert Dowd 15545 Carrs Mill Road Woodbine, MD 21797

SENT VIA FACSIMILE 410-442-5930

RE: Dowd Property

15545 Carrs Mill Road Woodbine, MD 21797 BP#: B07004504

Well Tag #: HO-95-0488

Dear Dowd:

This is to advise you that the septic system for the above referenced property has been installed and inspected. Final approval of the septic system was granted on 06/10/2008. Final approval of the well line connection to the dwelling was approved on 06/10/2008.

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. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

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-95-0488. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.

Date of Water Samples:

10/02/2008 & 10/09/2008

Date of Well Completion:

09/18/2006

Stuart Oster, R. S.

Well & Septic Program

cc:

Building Inspector's Office Community Health Services

File

I, Timothy P. Dowd, have inspected the site and certify that the plan submitted for the Percolation Application is accurate as drawn.

Sim Joure Timothy P. Dowd

On this <u>8</u> day of <u>1000</u>, 2005, before me, the undersigned Notary Public for the state and count aforesaid, personally appeared Timothy P. Dowd known to 'Me or satisfactorily proven to be the person whose name is subscribed on this document.

My Commission Expires:

MARLA PARKHILL NOTARY PUBLIC STATE OF MARYLAND My Commission Expires February 28, 2009



3020 Venule Court & P.O. BOX 245 . Myersville, MO 21773 . 800-332-3349 . PAX 301-392-2309 www.fredericktownelebs.com @ info@fredericktownelebs.com

1. 16 5 " 1 1 1

Trail Part its

Certificate of Analysis

Acct. No. 366 - 8-2 Field Record

Site visit performed on: Thursday, October 09, 2008

12:30 PM::

by: Charles Havens

State ID No. 8699CH

Affiliation: Fredericktowne Labs, Inc.

Property Owner:

W. R. Becker, LLC / Dowd Residence

Property Address: 15545 Carrs Mill Road

Woodbine, MD 21797

Sample Source:

Kitchen Sink

Treatment Devices Noted: No Treatment Devices Present

Sample taken after treatment: No

Well No.: HO-94-0488

Flaid pH: 7.4

Res. Cl.: 0.0 mg/l

Laboratory Report

Sample Received at laboratory: 10/9/2008

2:35 PM

Bacteriological results:

Total Colf. (/100ml)

E.coli.(/100ml)

Method

Analyst

<1

10/9/2008 3:00 PM 9223B

JD

This sample meets Federal standards for coliform bacteria in drinking water and is safe for human consumption. Analysis was performed according to the 20th edition of Standard. Methods



3020 Ventria Court • P.O. BOX 245 • Myeraville, MD 21773 • 800-332-3340 • FAX 301-283-2386 www.fredericktownelabs.com • Info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 366 - 8-1 Field Record

Site visit performed on: Thursday, October 02, 2008

10:55 AM

by: Charles Havens

State ID No. 8699CH

Affiliation: Fredericktowne Labs, Inc.

Property Owner:

W. R. Becker, LLC / Dowd Residence

Property Address: 15545 Carrs Mill Road

Woodbine, MD 21797

Sample Source:

Bathroom Sink

Treatment Devices Noted: No Treatment Devices Present

Sample taken after treatment: No

Well No.: HO-94-0488

Field pH: 6.2

Res. Cl.: 0.0 mg/l

Laboratory Report

Sample Received at laboratory: 10/2/2008

2:30 PM

Bacteriological results:

Total Collf. (/100ml)

E.coli.(/100ml)

Date/Time Analysis Started

Method

Analyst

5.3

10/2/2008 3:00 PM 9223B

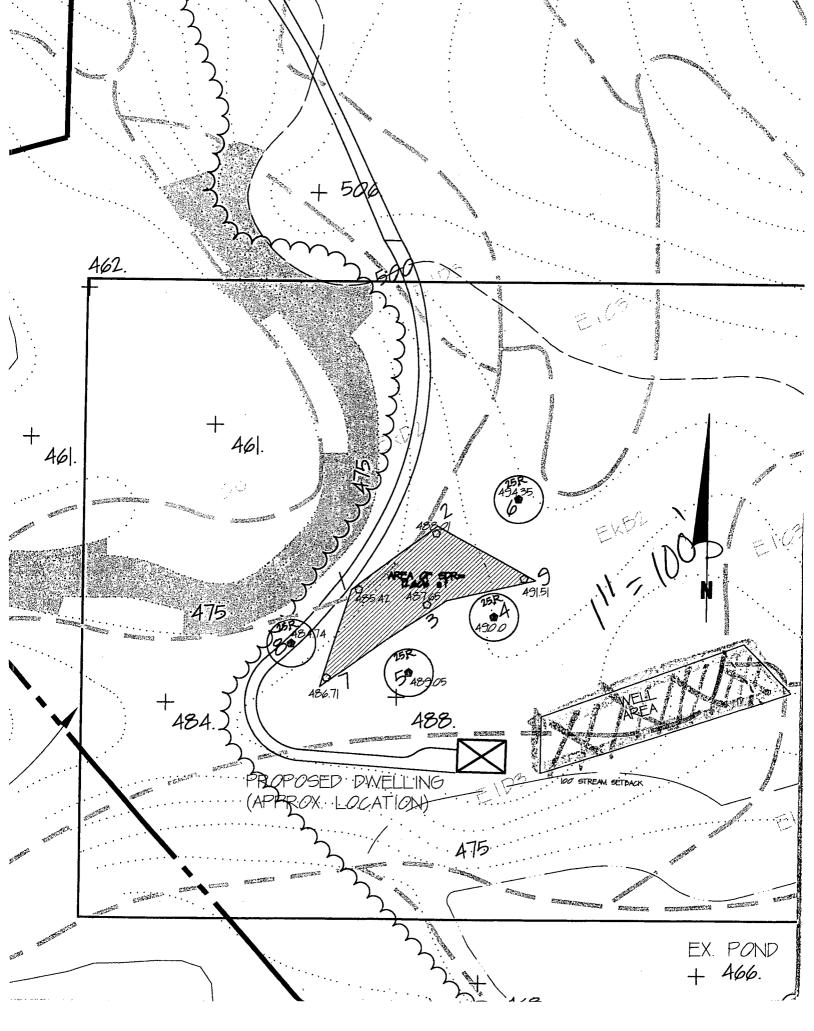
MM

Bacteriological analysis of this sample indicates the water is unsafe for human consumption. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

<u>Parameter</u>	Result Units	MCL	Date of Analysis	<u>Method</u>	Analyst
Nitrate-Nitrogen	10 mg/l	10	10/2/2008	300.0	PH
Sand	<2 mg/l	5	10/6/2008	0.065mmFilter	JD
Turbidity	1.4 NTU'	10	10/3/2008	180.1	JD

Verified by: W. L. Tufiller / grap 10/10/08



HOWARD COUNTY AGRICULTURAL LAND PRESERVATION BOARD

3430 Courthouse Drive Ellicott City, Maryland 21043 410-313-5407 www.co.ho.md.us



David Patrick, Chairman J. G. Warfield, Vice Chairman

H. "Bucky" Clark, Member James Eacker, Member Sean Hough, Member John Komsa, Member Shirley Matlock, Member

Joy Levy, Executive Secretary

November 16, 2005

Tim Dowd 15535 Carrs Mill Road Woodbine, MD 21797

Re:

Dowd property, HO-90-14-E

Dear Mr. Dowd.

At their November 14, 2005 meeting, the Agricultural Land Preservation Board (ALPB) of Howard County voted to approve your request to construct a tenant house on your easement property. This approval is granted in accordance with Section 15.514 of the Howard County Code and is subject to the obtainment of all appropriate county and state permits and approvals.

Please do not hesitate to call me if you have any questions at 410-313-5407.

Sincerely.

Joy Levy, Administrator

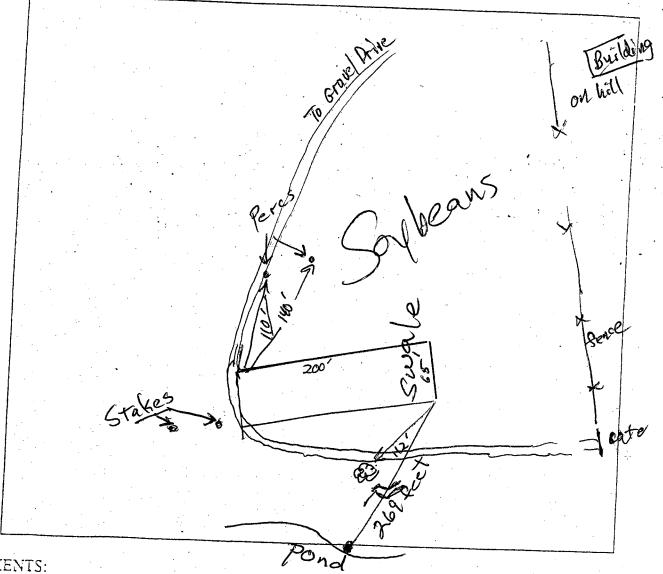
Agricultural Land Preservation Program

Ag Read File Dowd file #HO-90-14-E

SITE INSPECTION SHEET

SUBDIVISION:	LOT:	COUNTY#:	
ADDRESS:	Carris Mill Rd	PHONE #: CONTRACTOR: WELL TAG #:	

LOCATION DIAGRAM



COMMENTS

Il area to a Wood Duck House at Pond's Edge Shipods unowed area at bend, next to black willow shrub 8/4/pook

SDA 110 8DA 140

> Backline 200 Side 65 Side 65 Side 65 Side 65 Side 65 Side 65 Wood Duck 269' "... House in bend in pond bank in pond bank (black willow shruls)