

C1 0813

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 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COUNTY
NUMBER

ST/CO USE ONLY
DATE Received
MM DD YY
8 13

DATE WELL COMPLETED
MM DD YY
11 06 2007

Depth of Well
22 500 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO 95 1279
28 29 30 31 32 33 34 35 36 37

OWNER Brantly Development
last name first name
STREET OR RFD Lime Kiln Road TOWN Fulton
SUBDIVISION Lime Kiln Valley SECTION LOT 30

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Soil	0	15	
Brown Shale	15	27	
Soft Shale	27	57	
Gray Rock	57	500	x

water at 420'

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 46 14 NO. OF POUNDS 45 46 1400

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 36 ft.
48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

MAIN CASING TYPE PL ST CO OT

Nominal diameter top (main) casing (nearest inch)! 6

Total depth of main casing (nearest foot) 60

60 61 63 64 66 70

OTHER CASING (if used)

A C H diameter depth (feet)
C A S I N G inch from to

SCREEN RECORD

screen type or open hole insert appropriate code below

ST BR HO PL OT

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED Y 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 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.

C 2

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	

DIAMETER OF SCREEN 56 (NEAREST INCH) to 60

DRILLERS LIC. NO. 1 M S D 162

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 1 A W D 766

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.) W Q

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

70 TELESCOPE CASING 72 LOG INDICATOR 74 75 76 OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 2.22

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)
BEFORE PUMPING 77 ft.
WHEN PUMPING 310 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 (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

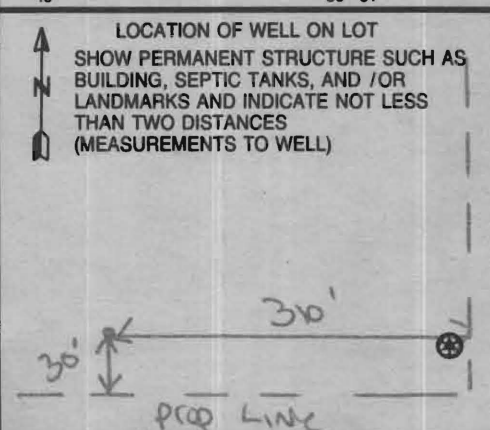
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.

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 } LAND SURFACE
- below } (nearest foot)



B 1 9854

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-1279

527237 please type

fill in this form completely

Date Received (APA)

8 MM DD YY 13

OWNER INFORMATION

Brantly Development 15 Last Name 34 Owner First Name

8835 N. Columbia 100 Pkwy 36 Street or RFD 55

Columbia MD 21045 57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Michael D. Isom M S D 162 76 Driller's Name 81 License No.

G. Edgar Harr Sons' Corp. Firm Name

12047 Falls Road, Cockeysville 21030 Address

Signature Date 6/11/07

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled)
Farming (Livestock Watering & Agricultural Irrigation)
Industrial, Commercial, Dewatering
Public Water Supply Well
Test, Observation, Monitoring
Geo-Thermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A519584 COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 10/2/07 CO SIGNATURE EXP. DATE 10/2/08
NORTH GRID 483 0 0 0 EAST GRID 811 0 0 0

APPROXIMATE DEPTH OF WELL 250 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered) Jetted Jetted & Driven
Air-Rotary Air-PerCussion Rotary (Hydraulic Rotary)
Cable REVerse-Rotary Drive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (circled)
This well will replace a well that will be abandoned and sealed
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 deepen 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 HO 2004 G 013/02
PERMIT No. HO-95-1279

B 3

LOCATION OF WELL

Howard 8 COUNTY 21

Lime Kiln Valley 23 SUBDIVISION 42

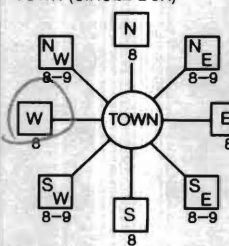
SECTION 44 46 LOT 30 48 50

Fulton 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Lime Kiln Road 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 300 37 DISTANCE FROM ROAD FT

ENTER FT OR MI 38 39

TAX MAP: 40 BLK: 22 PARCEL 114

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

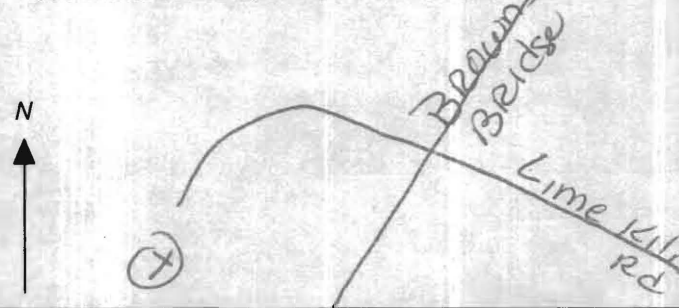
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8101
N 4803

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

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 FAX: (410)313-2648

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: Tri-County Pump Service Inc. Telephone #: 301-432-0330
Address: 6711 Old National Pike
Boonsboro, Md 21783

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): William Griffith License# 20135

*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: Craftmark Homes Telephone #: 703-937-0573
Subdivision: Maple Woods Lot #: 30 Well Tag #: EO-95-1219
Site Address: 17908 Lime Kiln Road
Highland, Md 20777

<u>Submersible Pump/Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Air Mac Good</u>	Make: <u>American Granby</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>23100V2SH</u>	Model #: <u>PT 400</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>9</u> GPM	NSP/WSC approved: <u>YES</u>	Conduit min 18" E.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: <u>YES</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors, Cable guards, or other acceptable method used - Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

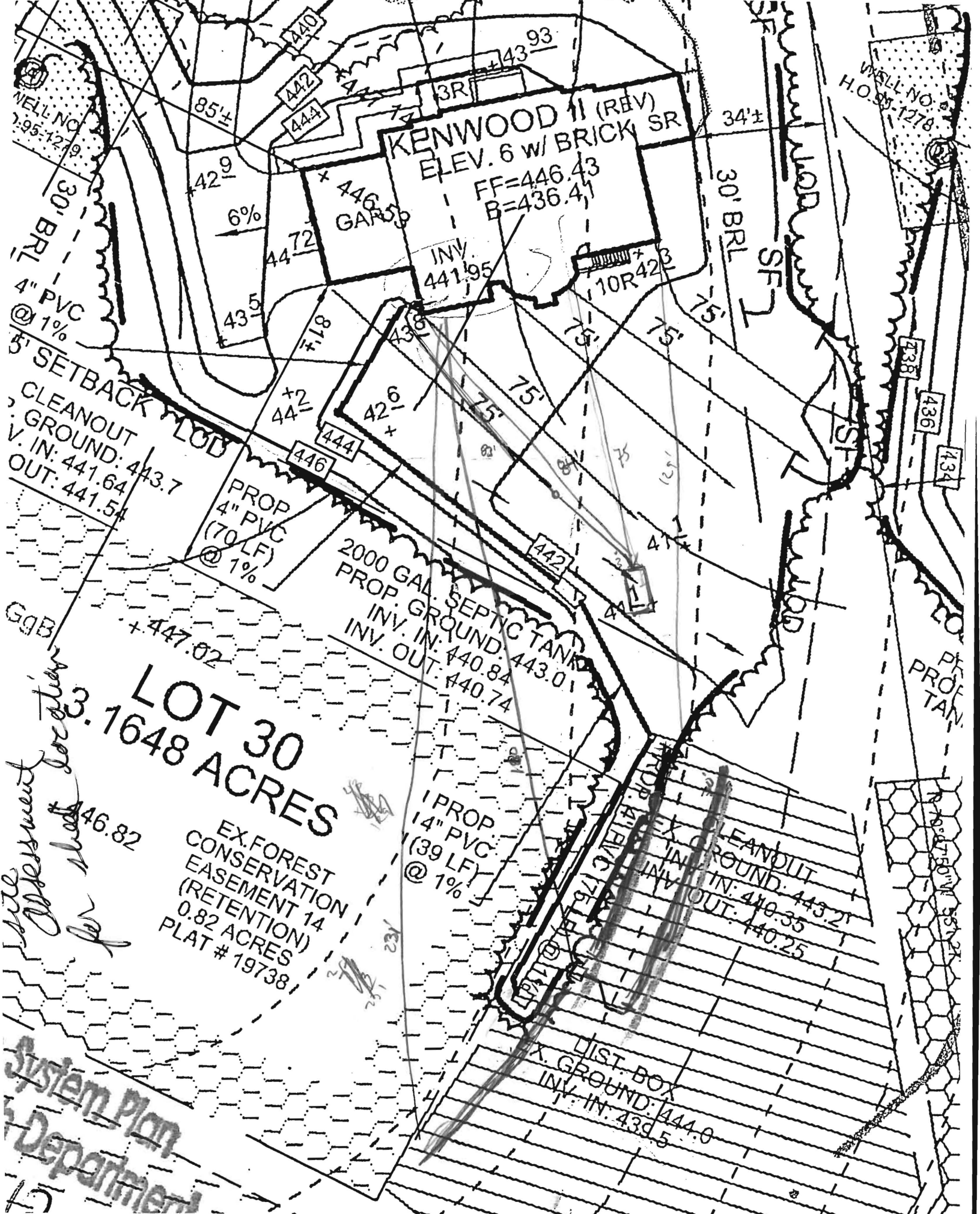
<u>Piping to house</u>	<u>House Connection</u>
Type: <u>Poly</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>160</u> (160 psi min)	Length of sleeve (3' minimum from foundation): <u>20ft</u>
Depth of supply line: <u>36'</u> (36" min)	Sleeve sealed properly: <u>YES</u>

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: William E. Griffith date: 4-13-2012

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

Date Insp. Requested: 4/13/12 Date Insp. Approved: 7/5/2012 Inspector: RR/BB
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 ✓



WELL NO. 7-95-1279
30' BRL -
4" PVC @ 1%
5' SETBACK
CLEANOUT
GROUND: 443.7
V. IN: 441.64
OUT: 441.54

GGB
+447.02
3.1648 ACRES
EX. FOREST CONSERVATION EASEMENT 14 (RETENTION) 0.82 ACRES PLAT # 19738!

System Plan Department

KENWOOD II (REV)
ELEV. 6 w/ BRICK SR
FF=446.43
B=436.41

2000 GAL. SEPTIC TANK
PROP. GROUND: 443.0
INV. IN: 440.84
INV. OUT: 440.74

EX. CLEANOUT
GROUND: 443.21
INV. IN: 440.35
OUT: 440.25

DIST. BOX
X. GROUND: 444.0
INV. IN: 439.5

WELL NO. H.O. 55-1278

438
436
434

PROTAN

PROTAN

442
444

PROP 4" PVC (70 LF) @ 1%
444
446

PROP 14" PVC (39 LF) @ 1%

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

85±
42.9
6%
44.72
43.5

447.2
81.8
43.8

42.6
44.2
44.4

44.6
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446.53
GARAGE
INV. 441.95
10R423

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GARAGE
INV. 441.95
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GARAGE
INV. 441.95
10R423

34±
30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

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30' BRL SF

30' BRL SF

30' BRL SF

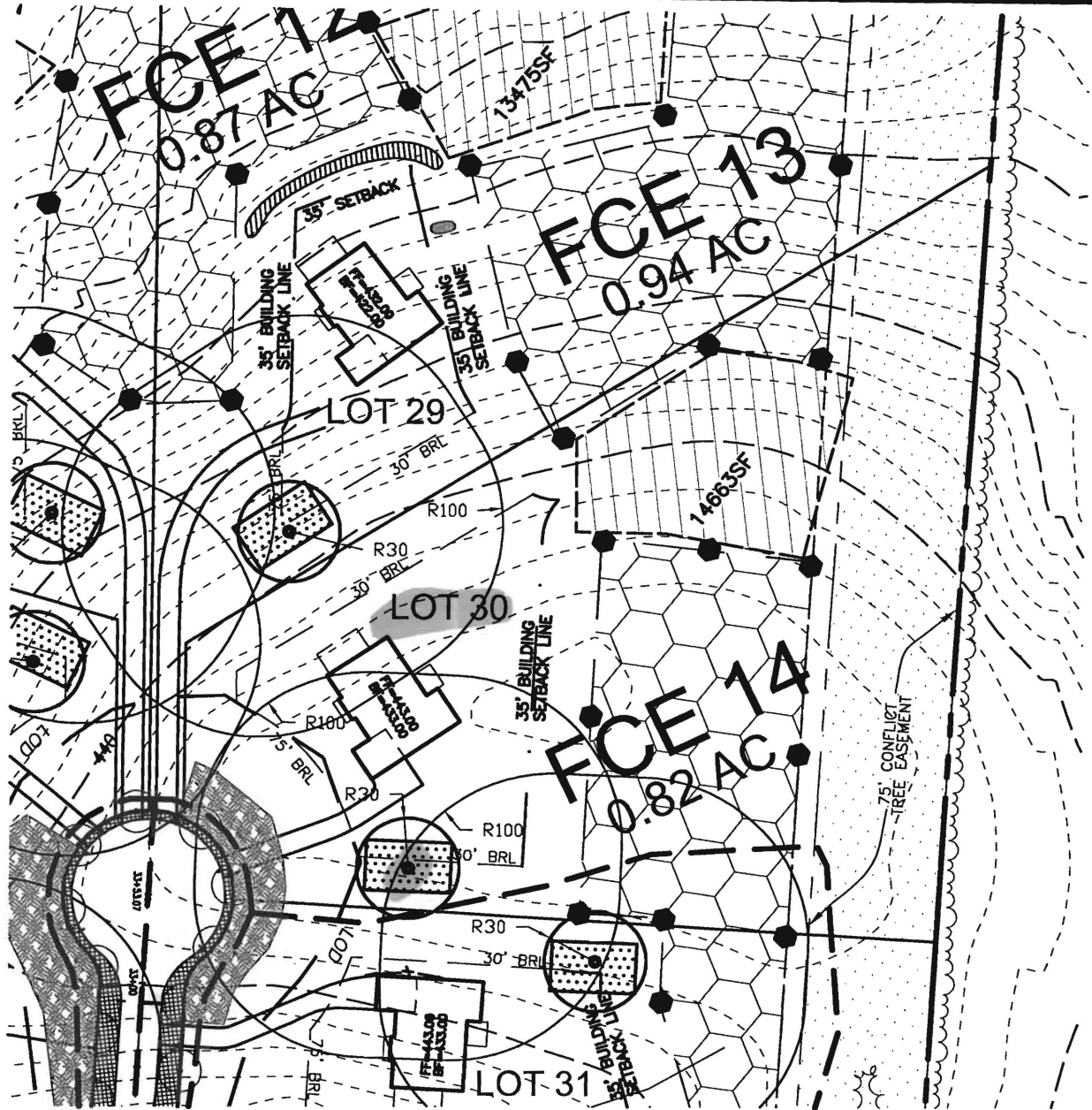
30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF

30' BRL SF



SCALE: 1"=100'

9/25/07 well site OK (S)

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

WELL PLAT LEGEND	
	SEPTIC EASEMENT
	PROPOSED WELL AREA

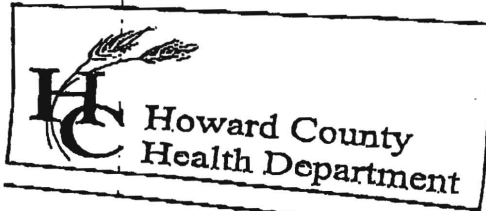
SCALE: _____ AS SHOWN
 DRAWN BY: _____ JCO
 CHECKED BY: _____ RHV
 DATE: _____ JUNE 2007
 PROJECT NO.: _____ 04-21
 SHEET NO. _____ 1 OF 1

LIME KILN VALLEY II
 PHASE 1 & 2 (LOT 30)

PROPOSED WELL LOCATION EXHIBIT

TAX MAP 40 & 45
 5TH ELECTION DISTRICT

PARCEL 114 & 12
 HOWARD COUNTY, MARYLAND



7178 Columbia Gateway Drive, Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2640
 TDD (410) 313-2323 Toll Free 1-866-313-2640
 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:

Well Site Location:

<u>Lime KILN VALLEY</u>	<u>1-39</u>	<u>Lime KILN VALLEY</u>
Subdivision/Property Name	Lot#	Road Name

The well site has been staked by ^{sites} Robert Vogel Inc
 (professional land surveyor or company employing professional land surveyors)
 on 7/24/07 (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



Bureau of Environmental Health
7178 Gateway Drive Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – January 6, 2013

July 6, 2012

Homeowner
12908 Lime Kiln Road
Highland, MD 20777

**RE: Lime Kiln Valley II, Lot 30
12908 Lime Kiln Road
Building Permit: B11003511
Well Permit: HO-95-1279**

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 **3/30/2012**. Final approval of the well line connection to the dwelling was granted on **7/5/2012**. The well construction was completed on **11/6/2007**. Water samples were collected on **6/21/2012**.

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-95-1279. 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.
Environmental Sanitarian
Well & Septic Program

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



Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventrite Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3340 • FAX 301-293-2366
www.fredericktownelabs.com • info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 3948 - 754-1

Field Record

Site visit performed on: Wednesday, June 20, 2012 10:30 AM
by: Kevin Kretzer State ID No. 1511KK
Affiliation: Tri-County Pump Service
Property Owner: Craftmark Homes
Property Address: 12908 Lime Kiln Road
Highland, MD
Sample Source: Kitchen Sink
Treatment Devices Noted: No Treatment Devices
Sample taken after treatment: No
Res. Cl.: <0.1 mg/l ✓

Laboratory Report

Sample Received at laboratory: 6/21/2012 7:58 AM

Bacteriological results:

Total Colif. (/100ml)	E.coli. (/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
✓ <1	<1	06/21/12	11:45	06/22/12	11:45	9223B	KMW

Bacteriological analysis of this sample indicates the water is safe for human consumption and meets state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result	Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen ✓	<0.2	mg/l	10	6/21/2012	300.0	PH
Turbidity ✓	0.5	NTU	10	6/21/2012	180.1	KMW

'OK' RB 6/21/12

Reported by: Paul Stutz 6/22/12
Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
Maryland Cert. No. 116 Virginia Cert. No. 00444
MDOT WBE Cert. No.: 91-158



Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventrice Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3540 • FAX 301-293-2366
www.fredericktownelabs.com • info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 3948 - 756-1

Field Record

Site visit performed on: Friday, June 22, 2012 12:30 PM
by: Kevin Kretzer State ID No. 1511KK
Affiliation: Tri-County Pump Service
Property Owner: Craftmark Homes
Property Address: 12908 Lime Kiln Road
Highland, MD
Sample Source: Kitchen Sink
Res. Cl.: <0.1 mg/l

Laboratory Report

Sample Received at laboratory: 6/22/2012 3:25 PM

Inorganic Chemical results:

Parameter	Result	Units	MCL	Date of Analysis	Method	Analyst
Sand	<2	mg/l	5	6/25/2012	0.065mmFilter	PH

OK JB 7/6/12

Reported by: Gloria Phelps 6/26/12
Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
Maryland Cert. No. 116 Virginia Cert. No. 00444
MDOT WBE Cert. No.: 91-158