

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

1839 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)

COUNTY NUMBER A-35101

DATE RECEIVED

DATE WELL COMPLETED 062689

DEPTH OF WELL (TO NEAREST FOOT) 225

PERMIT NO. FROM "PERMIT TO DRILL WELL" HC-21-1100

OWNER: minor Richard last name first name TOWN: Highland Md. STREET OR RFD: Lime Kiln Rd. SUBDIVISION: Lime Kiln VALLEY SECTION: TOWN: LOT 3 New 37

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. Rows include Top Soil, Sandy, Sand Stone, Micka, Sand Stone, Micka.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 5 NO. OF POUNDS 500 GALLONS OF WATER 30 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 29 ft.

CASING RECORD MAIN CASING TYPE PL Nominal diameter 6 inches Total depth 42 feet OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) 225 SLOT SIZE 1 2 3 DIAMETER OF SCREEN 6 inches

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 273 DRILLERS SIGNATURE: Ralph Mayne

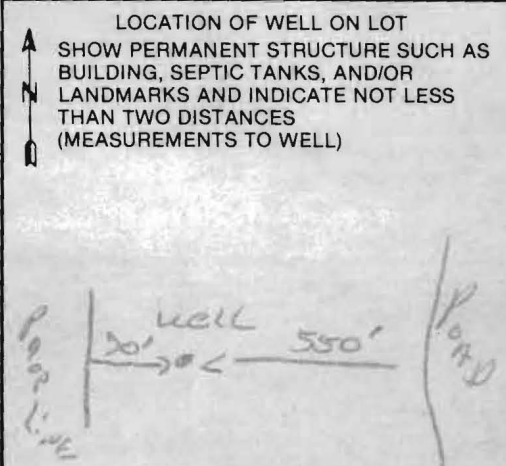
WELL SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 35 WHEN PUMPING 95 TYPE OF PUMP USED (for test) C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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 } 32 (nearest foot)



B 1 8901

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

70 10-81-1100 79 fill in this form completely

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

please print or type

Date Received

6/26/85 9:30

060385

OWNER INFORMATION

11 MATOR KILBARD 15 Last Name 34 Owner First Name

36 2910 OLD CHAPEL RD 55 Street or RFD

57 BOWIE 70 State 72 20715 76 Zip

B 3

LOCATION OF WELL

8 HOWARD 21 COUNTY

23 TIME KILB EST 42 SUBDIVISION

SECTION 44 LOT 48 50

52 HIGHLAND 71 NEAREST TOWN

73 2 MI 76 77 78 MILES FROM TOWN (enter 0 if in town)

DRILLER INFORMATION

Ralph Mayne 77 License No. 80 273

Driller's Name

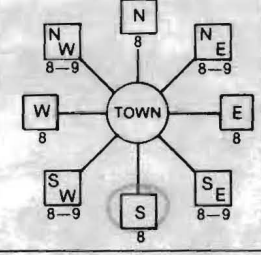
Firm Name

Address

Signature Date

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 21 TIME KILB RD 30 NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 550 37 DISTANCE FROM ROAD

ENTER FT OR MI 38 39

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- [D] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
[F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
[I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
[P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
[T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD 435101 COUNTY NAME COUNTY NO.

OEP SIGNATURE DATE ISSUED STATE HEALTH INSERT S 41

7/6/985 CO SIGNATURE EXP. DATE

NORTH GRID 482000 EAST GRID 0811000

APPROXIMATE DEPTH OF WELL 150 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)

- [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
[D] THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 70-81-1100 52

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER 54 G A P 63

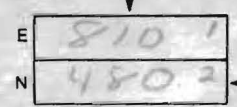
FORCE 67 68 WRITE INITIALS IN BOX PERMIT No. 70 71 72 73 74 75 76 77 78 79

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



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







OK MR 4/8/04

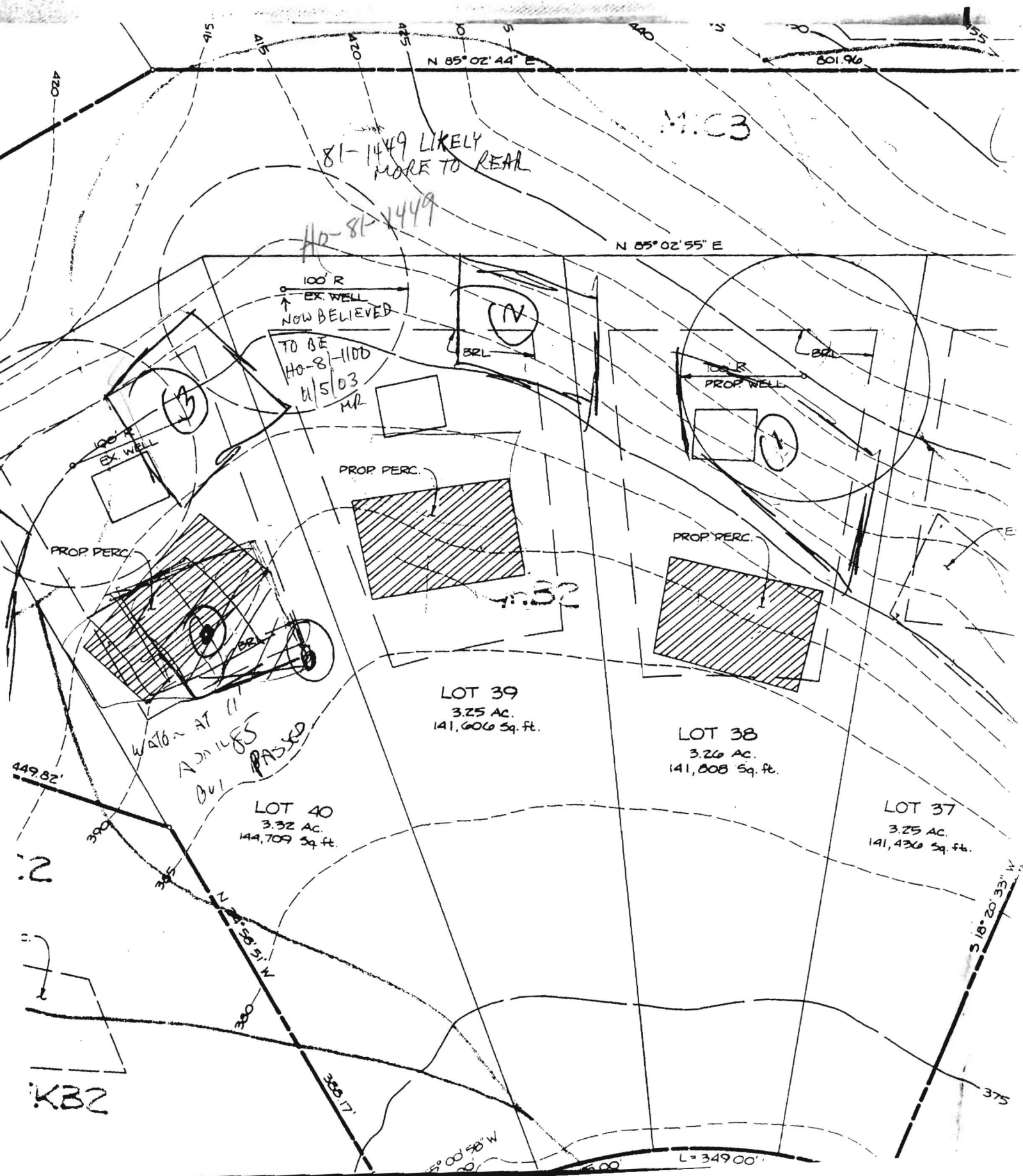
**HARR WELL DRILLING**  
12047 FALLS ROAD  
COCKEYSVILLE, MD 21020  
410-252-4588

**HOWARD COUNTY YIELD TEST REPORT**

Date Test Performed: 4-01-04  
Address: Lime Kiln Road  
Owner Name: Altieri Homes  
Well Depth: 225 feet

Permit Number: HO-81-1100  
Subdivision: Lime Kiln lot 37  
Election District:  
Static Water Level: 35'

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5 gallon bucket	Calculated Flow-Gallons Per Minute
0715	35 feet		19 sec	15.79 gpm
0730	39		19	15.79
0745	41		20	15.00
0800	43		21	14.28
0815	43		21	14.28
0830	43		21	14.28
0845	43		21	14.28
0900	43		21	14.28
0915	43		21	14.28
0930	43		21	14.28
0945	43		21	14.28
1000	43		21	14.28
1015	43		21	14.28



81-1449 LIKELY MORE TO REAR

HO-81-1449

TO BE HO-81-1100 4/5/03 MR

WATER AT 11 AMILUES DUL PASSED

LOT 39  
3.25 AC.  
141,606 Sq. ft.

LOT 38  
3.26 AC.  
141,008 Sq. ft.

LOT 40  
3.32 AC.  
144,709 Sq. ft.

LOT 37  
3.25 AC.  
141,436 Sq. ft.

KB2

L=349.00'

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 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: Columbia Plumbing Telephone #: 443-250-6189  
Address: 9017 Rd Blenheim Rd Suit 203  
Columbia md. 21045

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Kevin DiMaggio License# 8594 State

\*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: Alfred Homes Telephone #: 410-715-4500  
Subdivision: Lionc KIN Lot #: 37 Well Tag #: HO-81-1100  
Site Address: 12732 Lionc KIN Rd

Submersible Pump Data

Make: Jacuzzi  
Model #: YS  
Pump Capacity 5 GPM  
Well Yield: 15 GPM

Pitless Adapter

Make: American Brunner  
Model #: PT 800  
Depth: 4' (36" min)  
NSF approved: yes

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

Depth of well encountered at time of pump installation: 220(feet)  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
Torque arrestors or Cable guards are required - Must circle one  
Safety rope, if used, attached to inside of well casing with eye bolt no

Piping to house

Type: Plastic  
PSI: 200 (160 psi min)  
Depth of supply line: 4' (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: yes  
Approximate length of sleeve: 2'  
Sleeve caulked and sealed properly: yes

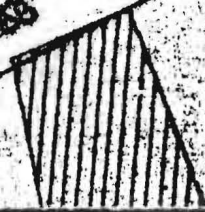
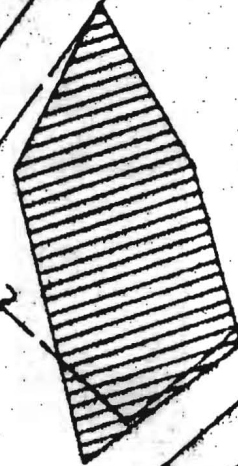
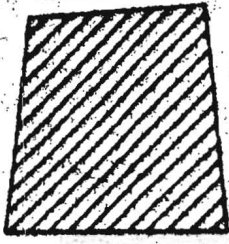
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] date: 9/27/09

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 6/10/04 BB  
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

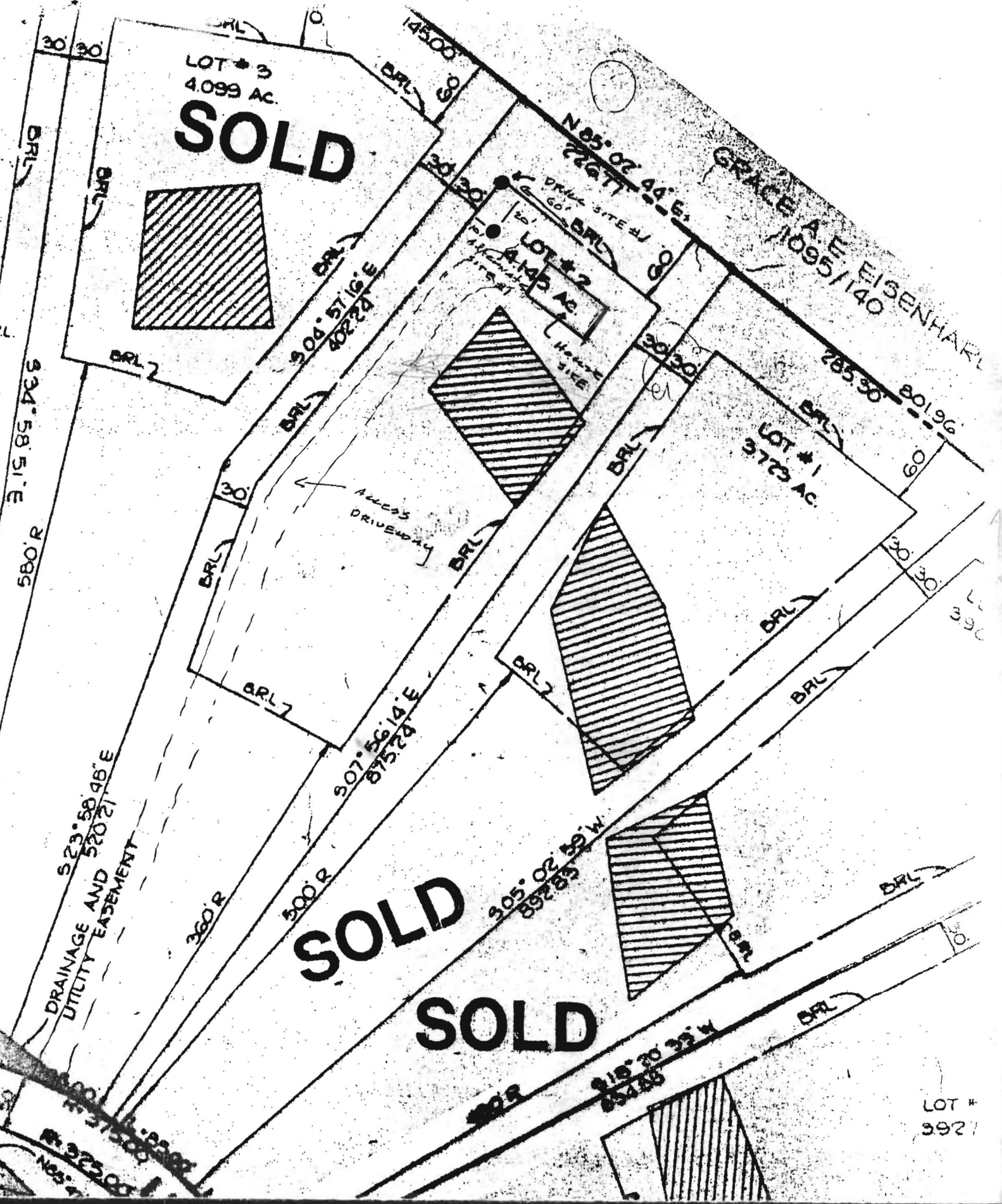
LOT # 3  
4.099 AC.  
**SOLD**



**SOLD**

**SOLD**

LOT #  
392



DRAINAGE AND  
UTILITY EASEMENT

ACCESS  
DRIVEWAY

GRACE A. E. EISENHART  
1095/140

523° 58' 48" E  
520.21'

334° 59' 51" E  
580.8

14500

N 85° 02' 30" E  
226.77' 60'

304° 57' 16" E  
402.24'

307° 56' 14" E  
875.24'

S 05° 02' 30" W  
58.28'

S 18° 30' 33" W  
854.68'

285.38' 801.96'

LOT # 1  
3.723 AC.

LOT # 2  
4.145 AC.

LOT # 3  
4.099 AC.

LOT #  
392

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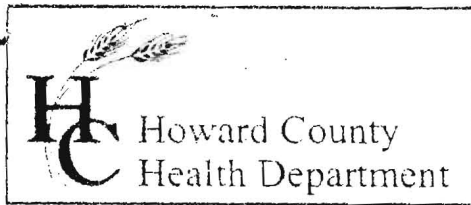
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3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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

September 29, 2004

Altieri Homes  
9017 Red Branch Road, Suite 201  
Columbia, MD 21045

**SENT VIA FACSIMILE 410-740-5809**

RE: **Lime Kiln Valley, Lot 37**  
**12732 Lime Kiln Road**  
**Highland, MD 20777**  
**BP # B00143890**  
**Well Permit # 81-1100**

Dear Sirs:

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 9/24/2004. Final approval of the well line connection to the dwelling was approved on 06/10/2004.**

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-81-1100. 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 Sample: 09/20/2004  
Date of Well Completion: 06/26/1985

Respectfully,

*Brian Baker*

Brian Baker, R. S.  
Well and Septic Program

cc: Building Inspector's Office  
Community Services Program  
File