



B 1 0868

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-0125 fill in this form completely

523426 please type

Date Received (APA) 10/5/2005

OWNER INFORMATION

Owner: PulTe Homes, Street: 1501 S Edgewood ST, Baltimore MD 21227

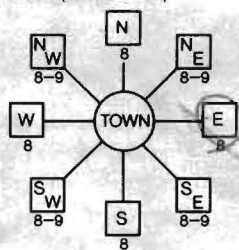
LOCATION OF WELL

Howard COUNTY, Badlocks East SUBDIVISION, SECTION 44-46, LOT 18, NEAREST TOWN: Glenely

DRILLER INFORMATION

Driller's Name: Allen Compton, License No. M S D 009, Firm Name: Fogles Well Drilling, Address: 580 Obrecht rd.

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: 13584 Julia Manor Way, ON WHICH SIDE OF ROAD: NORTH, DISTANCE FROM ROAD: 160 FT, TAX MAP: 22, BLK: 8, PARCEL: 7

WELL INFORMATION

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

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 COUNTY NAME, A511503 COUNTY NO., DATE ISSUED: 10/7/2005, CO SIGNATURE: Brian Baber, EXP. DATE: 10/7/2006, NORTH GRID: 525 000, EAST GRID: 805 000

APPROXIMATE DEPTH OF WELL: 300 FEET

APPROXIMATE DIAMETER OF WELL: 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTary, JETTED AIR-PERCussion, Jetted & DRIVEN ROTARY (Hydraulic Rotary), DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL, THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED (circled), 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): HO-94-3917

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

APPROX. PERMIT NUMBER: HO2002G009, PERMIT No.: HO-95-0125

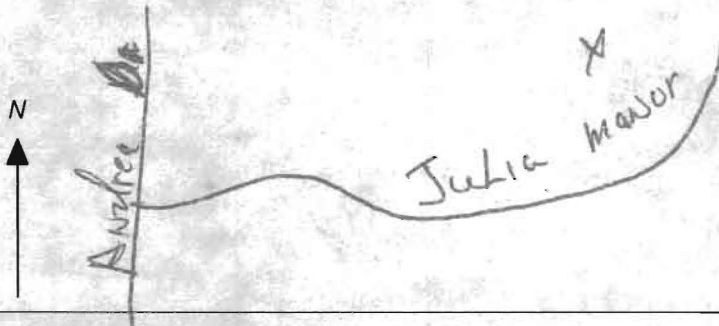
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

E 805, N 525

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

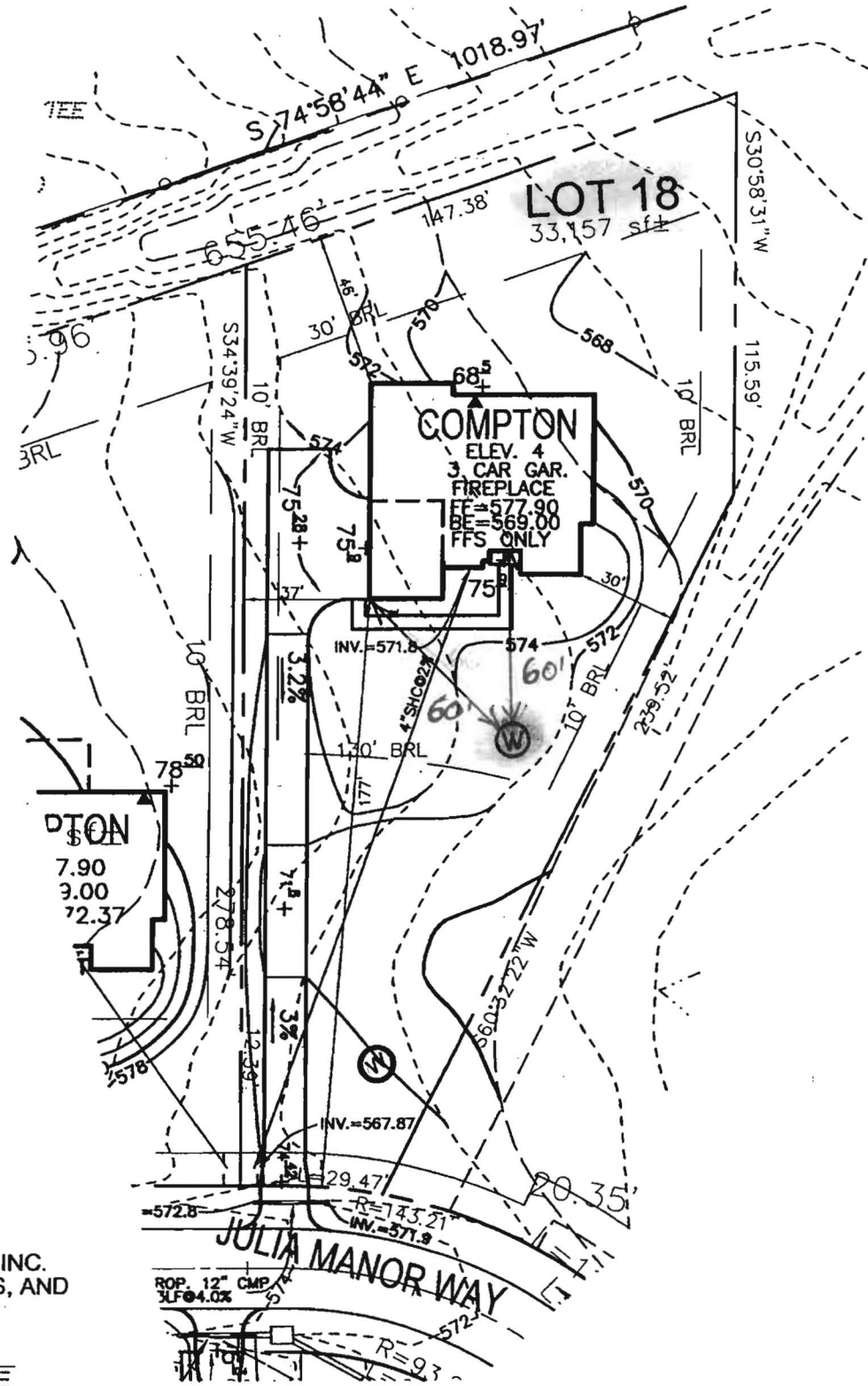


SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



10/6/05  
 Location of  
 Surveyor's  
 Stake  
 (BB)  
 Maryland State Grid Meridian



THE EXISTING WELL SHOWN ON THIS PLAN (TAG #H094-3917) HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC. PROFESSIONAL LAND SURVEYORS, AND IS ACCURATELY SHOWN.

MARK C. MARTIN, LS #10884 DATE

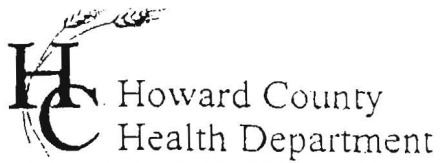
SCALE 1"=50'  
 DRAWN BY CMH  
 CHECKED BY JCO  
 DATE JANUARY, 2005  
 W. O. # 2034058  
 SHEET# 1 OF 1

TAX MAP 22 3RD ELECTION DISTRICT

PULTE HOMES  
 PADDOCKS EAST  
 LOT 18

PARCEL 7 HOWARD COUNTY, MARYLAND

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



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:

- The well site has been staked by Robert H. Vogel,  
 (professional land surveyor or company employing professional land surveyors)  
 on 10-4-05 (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



**HOWARD COUNTY HEALTH DEPARTMENT**

523426

DATE  
10 / 05 / 05

Received From \_\_\_\_\_ PHONE # 410 775 2

CASH  
 CHECK  
 NO. 8203  
 For Credit Card - Reimbursement  
2005-19 - Public Works  
4  
 \_\_\_\_\_ Dollars

\$ 80.00

Received By \_\_\_\_\_

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: Fogles Well Drilling Telephone #: 410-795-5670  
Address: 580 Obercht Rd  
Sykesville Md 21784

(Must circle one) Licensed Plumber  Licensed Well Driller  Licensed Well Pump Installer

License # and name of individual responsible for the field installation:  
Name (Print): Allen Compton License# MSD009

\*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: Pud to Home Telephone #: \_\_\_\_\_  
Subdivision: The Paddocks East Lot #: 18 Well Tag #: HO-95-0125  
Site Address: 13584 Julia Manor Way

Submersible Pump Data                      Pitless Adapter                      Well Cap and Electric Conduit  
Make: Goulds                                      Make: Campbell                                      Two piece watertight cap: yes  
Model #: 75B07422                                      Model#: N/A                                      Screened, vented well cap: yes  
Pump Capacity 7 GPM                                      Depth: 36 (36" min)                                      Cap secured to casing: yes  
Well Yield: 15 GPM                                      NSF approved: yes                                      Conduit min 18" B.G.: yes  
Depth of well encountered at time of pump installation: 300 (feet)                                      Conduit secured to well cap: yes  
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 N/A

Piping to house                                      House Connection  
Type: 1" Black Plastic                                      PVC sleeved to undisturbed soil at wall penetration: yes  
PSI: 160 (160 psi min)                                      Approximate length of sleeve: 5  
Depth of supply line: 42 (36" min)                                      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.

Allen Compton                                      12-7-05  
Signature of company representative responsible for installation                                      date

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 11/10/05 GAC  
Inspection Data: Pitless adapter and water supply line at least 36" below grade  BB  
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

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION  
 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 11-7-05 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 94 - 3917

\* PERMIT NUMBER OF REPLACEMENT WELL

HO - 95 - 0125

\* PERSON ABANDONING WELL: Allen Compton

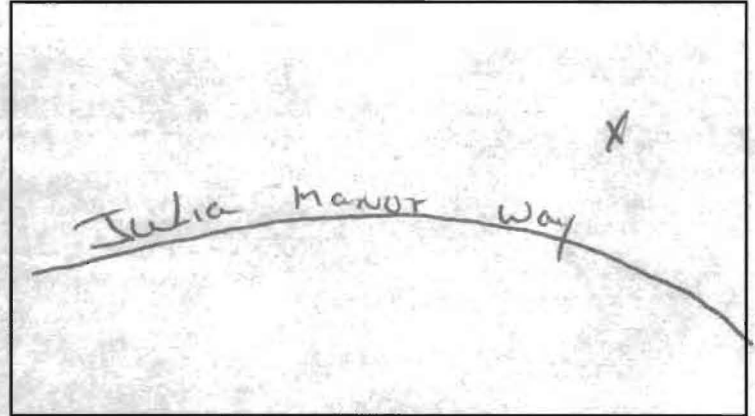
WELL DRILLERS LICENSE NUMBER: 009

\* OWNER'S NAME: Pulte Homes

CIRCLE: MWD/MSD/MGD

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: West Friendship  
 TAX MAP 22 BLOCK 8 PARCEL 7  
 SUBDIVISION: Beddocks East  
 SECTION: \_\_\_\_\_ LOT: 18  
 NEAREST ROAD: Julia Manor Way



\* TYPE OF WELL BEING ABANDONED:

- DRILLED \_\_\_\_\_ JETTED
- \_\_\_\_\_ BORED/AUGERED \_\_\_\_\_ HAND DUG
- \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC \_\_\_\_\_ MUNICIPAL/PUBLIC
- \_\_\_\_\_ IRRIGATION \_\_\_\_\_ INDUSTRIAL
- \_\_\_\_\_ TEST/OBSERVATION \_\_\_\_\_ GEOTHERMAL

\* TYPE OF CASING:

- STEEL \_\_\_\_\_ PLASTIC
- \_\_\_\_\_ CONCRETE \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 6" INCHES IN DIAMETER

\* DEPTH OF WELL: 300' FEET DEEP

\* WAS ANY CASING REMOVED?  YES \_\_\_\_\_ NO  
 if yes, length removed, in feet: 5'

\* WAS CASING RIPPED OR PERFORATED? \_\_\_\_\_ YES  NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Cement</u>	<u>0</u>	<u>300</u>
VOLUME OF MATERIAL USED		
<u>3 yds</u>		

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN Allen Compton LICENSE # 009

MWD/MSD/MGD  
 CIRCLE ONE

11-16-05  
 DATE





B 1 0988 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND STATE PERMIT NUMBER  
 1 2 3 6 APPLICATION FOR PERMIT TO DRILL WELL HO-94-3917  
 520092 please type 70 fill in this form completely 79

Date Received (APA) 3/11/2004  
 8 MM DD YY 13  
 OWNER INFORMATION  
 MORBERLEY Last Name Owner  
 Gatchew First Name  
 Summer Hill Farm RT194 Street or RFD  
 West Friendship MD 21774 Town State Zip

B 3 LOCATION OF WELL  
 8 COUNTY Howard  
 21  
 23 SUBDIVISION Radclicks East  
 42  
 SECTION 44 46 LOT 18 48 50  
 52 NEAREST TOWN Glenclg  
 71  
 MILES FROM TOWN (enter 0 if in town) 2 M 1  
 73 76 77 78

DRILLER INFORMATION  
 Allen Compton Driller's Name M S D 009 License No.  
 76 81  
 Eagles Well Drilling Firm Name  
 580 Obrecht Rd. Address  
 1-31-04 Date  
 Signature

B 4  
 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
 11 30 NEAR WHAT ROAD Sykesville Rd.  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH SOUTH WEST EAST  
 34 37 DISTANCE FROM ROAD 625 FT  
 ENTER FT OR MI 38 39  
 TAX MAP: 22 BLK: 8 PARCEL 7

B 2 WELL INFORMATION  
 1 2 APPROX. PUMPING RATE 5 GAL. PER MIN. 8 12  
 AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 22  DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 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 (13) A511503 COUNTY NAME COUNTY NO.  
 STATE SIGNATURE INSERT S → 41  
 DATE ISSUED 3/18/2004 Brian Baker 3/18/2005  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE  
 NORTH GRID 525 000 EAST GRID 805 000  
 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET 24 28  
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)  
 30 BORED (or Augered) JETTED Jetted & DRIVEN  
 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 CABLE REVERSE-ROTary Drive-POINT  
 other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 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 DEEPEM 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 HO2002G009  
 PERMIT No. HO-94-3917  
 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.  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E 8005  
 N 5205  
 000 000  
 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
 Burntwoods Rd. 32  
 N

SPECIAL CONDITIONS  
 31E APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Sealed

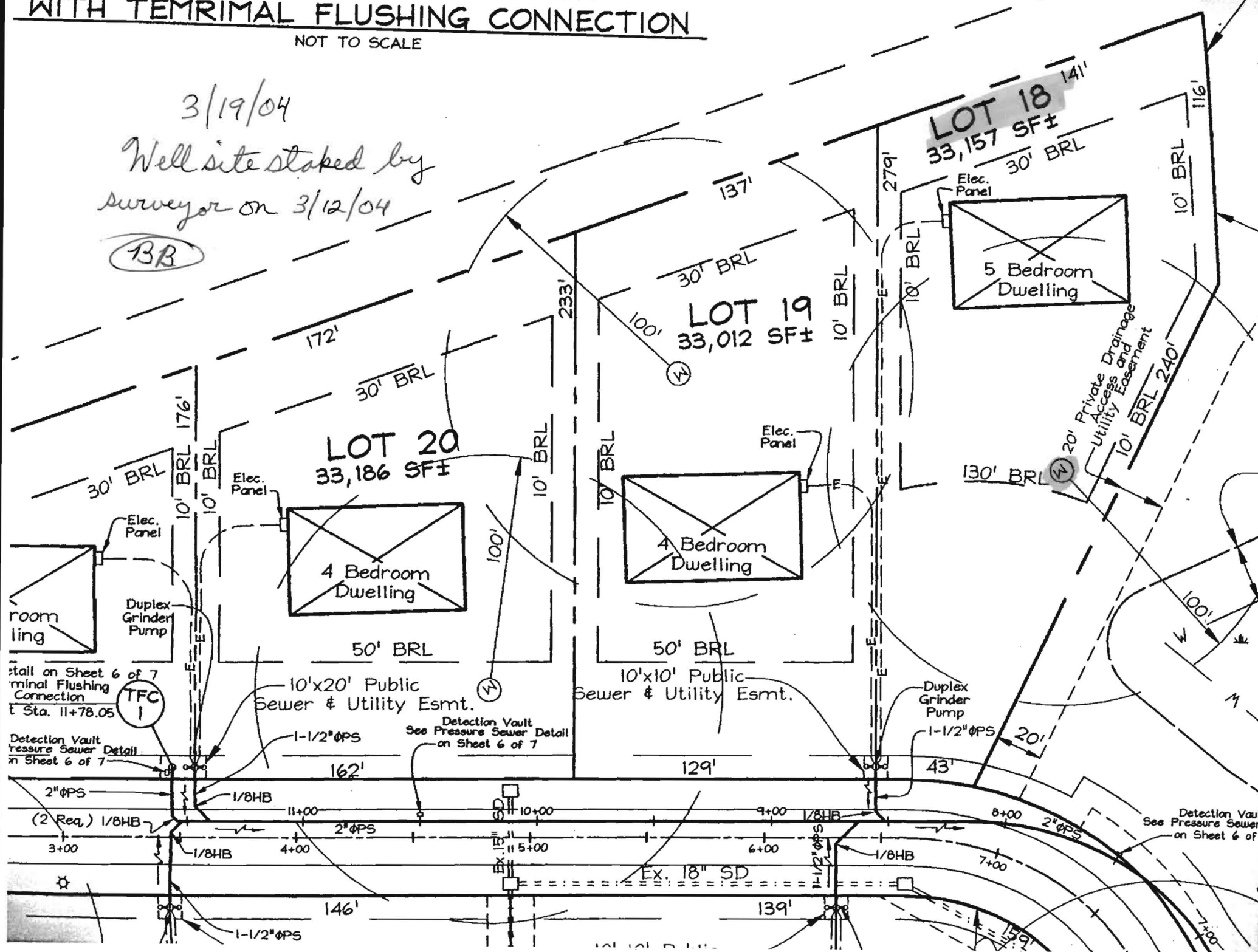
# GRINDER PUMP CONNECTION WITH TEMPRIMAL FLUSHING CONNECTION

NOT TO SCALE

3/19/04

Well site staked by surveyor on 3/12/04

BB



stall on Sheet 6 of 7  
Primal Flushing  
Connection  
Sta. 11+78.05

Detection Vault  
Pressure Sewer Detail  
on Sheet 6 of 7

Detection Vault  
See Pressure Sewer Detail  
on Sheet 6 of 7

Detection Vault  
See Pressure Sewer  
on Sheet 6 of 7

**CASELL TESTING, INC.**

ENVIRONMENTAL SAMPLING AND TESTING  
10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211  
(410) 252-7742

REPORT DATE: Nov 28, 2005

County Howard

Lab Number 06-1262

Sample iced Yes

Residual Cl<sub>2</sub> <0.1 mg/L Yes

cc: County Health Dept. Yes

**CERTIFICATE OF ANALYSIS**

Maryland State Certified Water Quality

Laboratory No. 115

REQUESTER: Pulte Home Corporation  
1501 South Edgewood Street  
Baltimore, Maryland 21227  
Attn: Accounts Receivable

Property Sampled: U&amp;D: 13584 Julia Manor Way

Station Sampled: Pressure Tank Tap &amp; Powder Room Tap Tax Map #: 22

Date/Time Sampled: Nov 23, 2005 11:40 am Parcel #: 7

Owner, Telephone No.: Chung Sampler: 5226SB

Subdivision Name: The Paddocks East Lot Number: 18

Building Permit No.: B00153012

Well Number: HD-95-0125 Observation: 2-Piece Cap  
Satisfactory**RESULTS OF ANALYSIS:**

PARAMETER	RESULT	METHOD	*MCL/**SMCL	
Nitrate	8.9 mg/L as N	SM 4500D	*10 mg/L as N	Pass
Turbidity (Raw)	1.6 NTU	EPA 180.1	*10 NTU	Pass
pH	6.3 Units	EPA 150.1	**6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	Absent	SM 9223B	*Absent	SAFE
E. coli (18 Hour Test)	Absent	SM 9223B	*Absent	SAFE

Treatment/Conditioning: Sediment Filter

\*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, odor, or color) in drinking water.



Heather R. Beam

\*MCL = Maximum Contamination Level

\*\*SMCL = Secondary Maximum Contamination Level



## HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 FAX (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

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

December 14, 2005

Pulte Homes  
1501 S. Edgewood Street  
Baltimore, MD 21227

**SENT VIA FACSIMILE 410-489-6057**

RE: Paddocks East, Lot 18  
13584 Julia Manor Way  
West Friendship, MD 21794  
BP # B00153012  
Well Tag # HO-95-0125

Dear Sirs or Madam:

This is to advise that the connection from the house to the street has been installed and inspected for the referenced property. A Shared Septic System serves this dwelling. **Final approval was granted on 10/26/2005 by HCHD for the house connection with approval from the Bureau of Utilities on 12/13/2005. Final approval of the well line connection to the dwelling was approved on 11/10/2005.**

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-95-0125. 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: 11/23/2005  
Date of Well Completion: 11/07/2005

Respectfully,

Stuart F. Oster, R. S.  
Well and Septic Program

cc: DILP, Building Inspectors Office  
File