

C1 1924

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A526195

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED OCT 17 08

Depth of Well 330 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 95 - 1686

OWNER LEVINE JON STREET OR RFD 4305 PLEASANT PATH TOWN LEVINE PROPERTY SECTION LOT 2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for DIRT, SOFT BR MICA, HD & SOFT BR MICA, HD BLUE MICA, LACED BR MICA, HD BLUE MICA, OPENING & GRAVEL, HD BLUE MICA.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y). TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS: 22. NO. OF POUNDS: 2068. GALLONS OF WATER: 132. DEPTH OF GROUT SEAL: 60 ft.

CASING RECORD. MAIN CASING TYPE: ST (STEEL). Nominal diameter top (main) casing: 6 inches. Total depth of main casing: 62 feet.

OTHER CASING (if used) section with diameter and depth fields.

SCREEN RECORD. SCREEN TYPE: HO (OPEN HOLE). SLOT SIZE: 1, 2, 3. DIAMETER OF SCREEN: 56 to 60 inches.

NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED: Y.

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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 M D 296. DRILLERS SIGNATURE: Ronald Kyker. LIC. NO. 1 M WD 296.

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

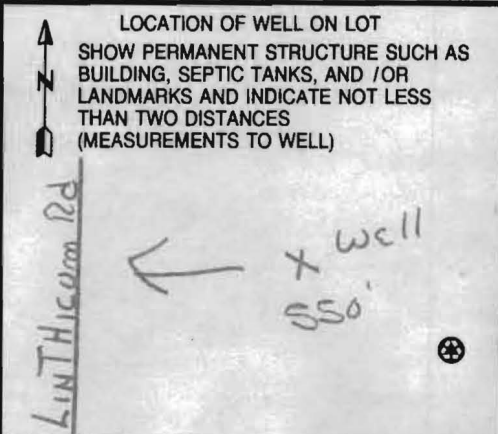
DEPTH (nearest ft.) table with columns for depth intervals (8-11, 15-17, 23-26, 30-32, 38-41, 45-47, 51) and rows for casing types (E, A, C, H, S, R, E, N).

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68. Values: 305, 330.

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER). T (E.R.O.S.), W Q. TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST. HOURS PUMPED: 3. PUMPING RATE: 25 gal. per min. METHOD USED TO MEASURE PUMPING RATE: BUCKET. WATER LEVEL: 39 ft. BEFORE PUMPING, 67 ft. WHEN PUMPING. TYPE OF PUMP USED: S (submersible).

PUMP INSTALLED. DRILLER INSTALLED PUMP: YES (NO). TYPE OF PUMP INSTALLED: S. CAPACITY: 31 to 35 gallons per minute. PUMP HORSE POWER: 37 to 41. PUMP COLUMN LENGTH: 43 to 47 feet. CASING HEIGHT: + above (49), - below (50, 51).



B 1 9772

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-1686

529561 please print or type

fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

LEVINE JON

4305 PLEASANT PATH

ELLCOTT CITY MARYLAND 21043

B 3

LOCATION OF WELL

HOWARD COUNTY

LEVINE PROPERTY

SECTION 44 46 LOT 2 48 50

DAYTON NEAREST TOWN

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

DRILLER INFORMATION

RONALD KYKER M W D 296

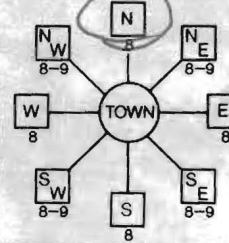
WESTMINSTER WELL DRILL INC

P.O. BOX 861 WESTMINSTER MD 21157

Ronald Kyker SEPT 5-08

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



LINTHICUM RD

11 NEAR WHAT ROAD 30

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

34 550 37 DISTANCE FROM ROAD FT

TAX MAP: 22 BLK: 18 PARCEL 217

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- 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 A526195

COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S

DATE ISSUED 10/6/09 CO SIGNATURE EXP. DATE 10/8/09

NORTH GRID 516 000 EAST GRID 802 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 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

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 DEEPEAN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

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

APPROX. PERMIT NUMBER

PERMIT No. HO-95-1686

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. CITY
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

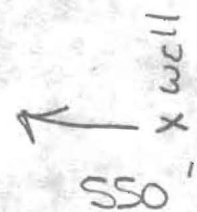
E 802
N 516

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



Linthicum Rd



Correct 10/21/08

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
(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

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

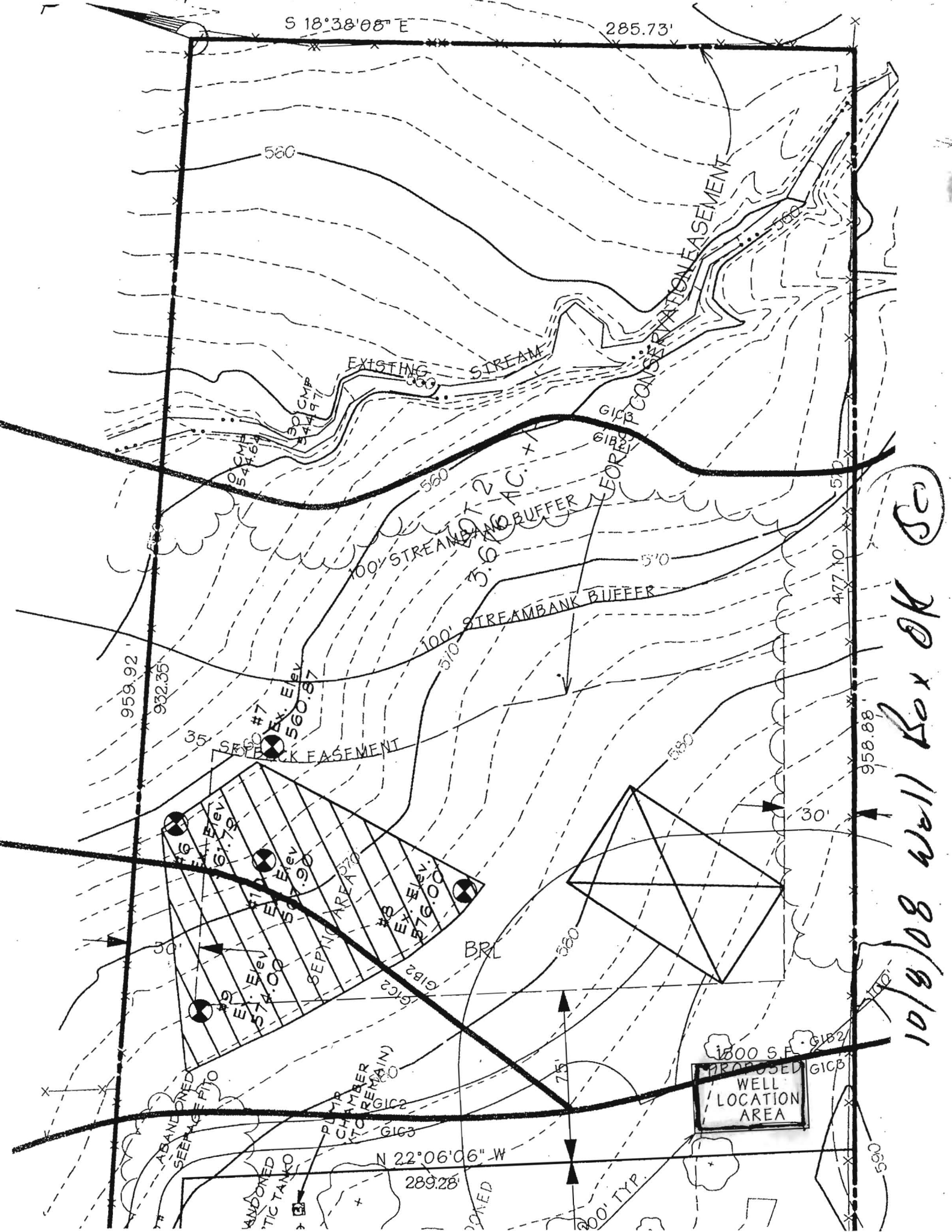
Well Site Location:
Levine 2 Linthicum
Subdivision/Property Name Lot# Road Name

- The well site has been staked by CLSI,
(professional land surveyor or company employing professional land surveyors)
on 9/19/08 (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



10/8/08 well loc OK SC

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: Barlow Well Drilling Telephone #: 410-838-6910
Address: 522 UNDERWOOD LANE
Bel Air MD 21014

(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 Barlow License# MWD355

*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: Colonial Design + Build Telephone #: 443-752-5621
Subdivision: Levine Property Lot #: 2 Well Tag #: EO-95-11680
Site Address: 4253 Luthicum Road
Dayton, MD

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Stark Make: Campbell Two piece watertight cap:
Model #: 7SP4D02 Model#: 9-800 Screened, vented well cap:
Pump Capacity 7 GPM Depth: 42" (36" min) Cap secured to casing:
Well Yield: 12 GPM NSF approved: YES Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: 320 (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 or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house House Connection
Type: 1" POU PVC sleeved to undisturbed soil at wall penetration: YES
PSI: 160 (160 psi min) Approximate length of sleeve: 6'
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.

[Signature] 3/31/14
Signature of company representative responsible for installation date

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

Date Insp. Requested: 4/14/14 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

RR 4/14/14
Well line
back f. 11ed
already
complete insp.
not possible

RD-215 (Rev. 8/00)

5/5/14 • Visual Inspection of installation depth +4' install depth.
• Pitless inspection not completed *
* Approved 5/5/14 AG

Geisert, Andrew

From: Geisert, Andrew
Sent: Wednesday, April 16, 2014 8:03 AM
To: 'Mike Isom'
Cc: Rappaport, Ryan; Williams, Jeffrey
Subject: RE: 4253 Linthicum Road in Dayton

Mike,

I'm sorry that this happened. I wasn't in the office Friday, so I'm not sure what happened and how you were missed. Regarding the Well Line Inspection, you know we want the trenches uncovered upon inspection. With that being said, you know we try to work with contractors. In this circumstance I would have been accepting of what you did, but you forgot to put a measuring tape down the trench to show on the picture the actual installation depths. I see that you have more than enough sleeve away from the house.

Had you put a measuring tape in the pictures for me to see I would have no problem approving the well line. What I'll need is just enough of an excavation (i.e. hand dig) to expose the pitless adaptor at the casing and the connection point into the house. If you can do that for us, I will send Ryan back out there to do a visual inspection.

Again, I apologize for whatever miscommunication happened Thursday/Friday. I will look in to who received the information and why it wasn't scheduled for the date you requested.

If you do have more to add, I will be in a seminar from 9am-3pm today, but feel free to e-mail me.

Andrew Geisert
Environmental Sanitarian Supervisor
Howard County Health Department
Bureau of Environmental Health
Office: 410-313-6287
Fax: 410-313-2648
ageisert@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

From: Mike Isom [mailto:misom@mbwd.us]
Sent: Tuesday, April 15, 2014 3:19 PM
To: Geisert, Andrew
Subject: 4253 Linthicum Road in Dayton

Mr. Geisert,

I spoke to Ryan today about the well pump inspection for the property at 4253 Linthicum Road in Dayton. He stopped by the site yesterday, but found our work was already backfilled. We installed the equipment on Friday the 11th and did backfill at the end of the day. We did not want to leave the ditch open for the weekend for liability purposes and the possibility of rain. We did wait for an inspector until 3pm that day before backfilling.

On Thursday morning the 10th, I faxed the Howard County information form to your office with a cover sheet requesting inspection on Friday the 11th. I also followed up with a voicemail to your office with the same request. Both the fax cover sheet and the voicemail asked for a return call if an inspection could not be conducted on Friday, but I did not receive a message back. Ryan indicated that it wasn't logged in for inspection until Monday and that I needed to speak to you about this.

I have attached pictures taken by our installation crew during the installation. Our ditch is 48" deep. We extended a 2" sleeve thru the wall out 60 feet because it passes under the driveway and sealed the end of the sleeve with a furnco fitting. The conduit is at least 18" below grade. The wall was sealed with hydraulic cement and bentonite. The well cap is a two piece unit and a torque arrestor was placed on the pump. All of the metal fittings (pitless, tank tee, adapters, clamps, etc) are stainless steel. A hole saw was used to cut the hole in the casing for the pitless adapter.

I will be sending a second email with additional pictures. Please review them and contact me. I would prefer not to excavate again, especially after the heavy rain today. If we need to provide more notice in the future, I will gladly do so.

----- Original Message -----

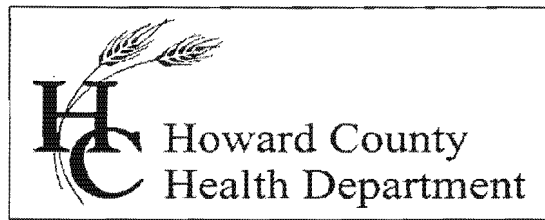
Subject:FWD:

Date:Tue, 15 Apr 2014 18:47:28 +0000

From:4106880261@vzwpix.com

To:Misom@Mbwd.Us

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Michael Isom
Project Manager
Barlow Well Drilling
(410) 838-6910
www.michaelbarlowwelldrilling.com



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-1771 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – DECEMBER 19, 2014

June 19, 2014

Homeowner
4253 Linthicum Road
Dayton, MD 21036

**RE: Levine Property, Lot 2
4253 Linthicum Road
Building Permit: B13002688
Well Permit: HO-95-1686**

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 **6/18/2014**. Final approval of the well line connection to the dwelling was granted on **4/14/2014**. The well construction was completed on **10/17/2008**. Water samples were collected on **5/13/2014 and 6/2/2014**.

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-95-1686. 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,

A handwritten signature in black ink, appearing to read "Robert Bricker". The signature is written in a cursive style with a large initial "R".

Robert Bricker, REHS/R.S., L.E.H.S.
Environmental Sanitarian
Well & Septic Program

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



TRACE LABORATORIES, INC
 5 North Park Drive
 Hunt Valley, MD 21030 USA
 Telephone: 410/584-9099 / Fax: 410/584-9117
 Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

S/O Number: 93198

Colonial Design & Build
 5241 Turkey Point Road
 North East, Maryland 21901

Report Date: June 3, 2014

Property Sampled: 4253 Linthicum Road, 21036 ✓
Sample Location: Pressure Tank Tap ✓
Residual Chlorine: <0.1 mg/L ✓

Building Permit #: B13002688
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard

Subdivision: Levine Prop

Lot #: 2

Date/Time Collected in Field: June 2, 2014 9:50 am

Date/Time Received in Lab: June 2, 2014 12:37 pm

Well Tag #: HO-95-1686

Well Condition: 2-Piece Cap, Satisfactory ✓

Water Treatment/Conditioning: None ✓

PARAMETER	METHOD	MCL	RESULT	COMMENT
Total Coliform	SM 9223B	Absent	Absent ✓	Pass
<i>E. coli</i>	SM 9223B	Absent	Absent ✓	Pass

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

OK
 Kume

Katherine C. Higgs
 Katherine C. Higgs
 Manager – Drinking Water Testing



TRACE LABORATORIES, INC

5 North Park Drive

Hunt Valley, MD 21030 USA

Telephone: 410/584-9099 / Fax: 410/584-9117

Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

S/O Number: 93079

Colonial Design & Build
5241 Turkey Point Road
North East, Maryland 21901

Report Date: May 14, 2014

Property Sampled: 4253 Linthicum Road, 21036
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B13002688
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard

Subdivision: Levine Prop

Lot #: 2

Date/Time Collected in Field: May 13, 2014 11:35 am

Date/Time Received in Lab: May 13, 2014 1:37 pm

Well Tag #: HO-95-1686

Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: None

Table with 5 columns: PARAMETER, METHOD, MCL/*SMCL, RESULT, COMMENT. Rows include Total Coliform (FAIL), E. coli (Pass), Nitrate (Pass), Turbidity (Pass), pH (Field) (***), and Sand (Pass).

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

Katherine C. Higgs (Signature)

Katherine C. Higgs
Manager - Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA

*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA

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



