

C1 34417

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, WELL SITE ADDRESS, TOWN, SUBDIVISION, SECTION, LOT

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. Includes entries like Fill-Topsoil, Brn Sand & Clay, Tan Weathered Rock, Gray Rock, Brn Rock, Gray Rock with depths.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC] NO. OF BAGS 20 NO. OF POUNDS 7800 GALLONS OF WATER 110 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 57 ft.

CASING RECORD

MAIN CASING TYPE [ST] Nominal diameter top (main) casing (nearest inch)! 6" Total depth of main casing (nearest foot) 57'

OTHER CASING (if used)

SCREEN RECORD screen type or open hole [ST] [BR] [HO] [PL] [OT]

DEPTH (nearest ft.) 57 300

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 11 METHOD USED TO MEASURE PUMPING RATE Timex Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 ft. WHEN PUMPING 100 ft. TYPE OF PUMP USED (for test) [A] air [P] piston [T] turbine [C] centrifugal [R] rotary [O] other [J] jet [S] submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES 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)

NUMBER OF UNSUCCESSFUL WELLS: 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.

DRILLERS LIC. NO. 1 MWD 553 DRILLER'S SIGNATURE LIC. NO. 1 35 D 144

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

LATITUDE 39.15333 LONGITUDE 76.95305 (DEFAULT COORD. WGS 84)

NOTES: front

B 1 36050

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 555804 B

STATE PERMIT NUMBER

HO-15-0047 fill in this form completely

Date Received (APA)

04/15/15

OWNER INFORMATION

Monroe Thomas + Kim. 12671 Lime Kiln Road Fulton MD 20759

B 3

LOCATION OF WELL

Howard Howard 23 SUBDIVISION Fulton 52 NEAREST TOWN

DRILLER INFORMATION

C John Hess MWD 553 Allied Environmental Services 20 Box 29 Annapolis Junction MD 20701

B 4

SOURCES OF DRILLING WATER

1. Public

12665 2665 Lime Kiln Rd ON WHICH SIDE OF ROAD DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 40 BLK: 23 PARCEL 244

B 2

WELL INFORMATION

APPROX. PUMPING RATE 10 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 1000 GAL. PER DAY

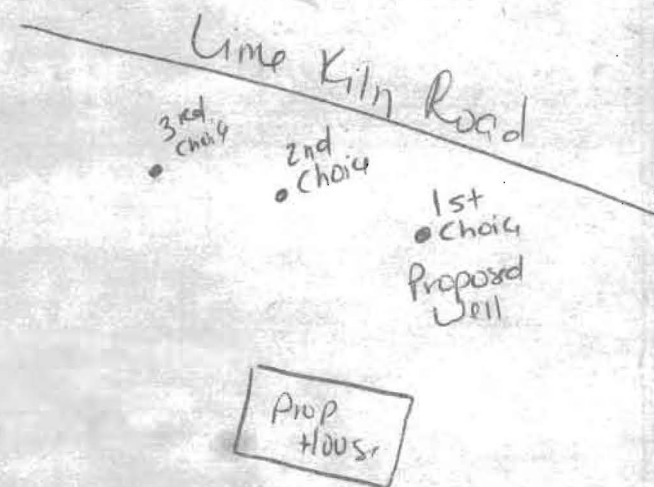
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A545055 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 4/24/15 CO SIGNATURE EXP. DATE 4/24/16

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 OPEN LOOP GEOTHERMAL CLOSED LOOP GEOTHERMAL

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

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

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

APPROX. PERMIT NUMBER G

PERMIT No. HO-15-0047

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

410 259 5910

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: K.H. Plumbing, Inc. Telephone #: 410-259-5910
Address: 470 Dotsie Dr.
Westminster, MD 21158

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Keith Hundertmark License# 8300

*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: Carrigan Homes Telephone #: 410-465-7755
Subdivision: _____ Lot #: _____ Well Tag #: HO-15-0047 ✓
Site Address: 12665 Lime Rich Rd.
Fulton, MD 20759

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Goulds → Make: American Granby Two piece watertight cap: _____
Model #: 5G507422C → Model #: DT800NL Screened, vented well cap:
Pump Capacity: 5 GPM Depth: 42" (36" min) Cap secured to casing: yes
Well Yield: 11 GPM NSF/WSC 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, 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

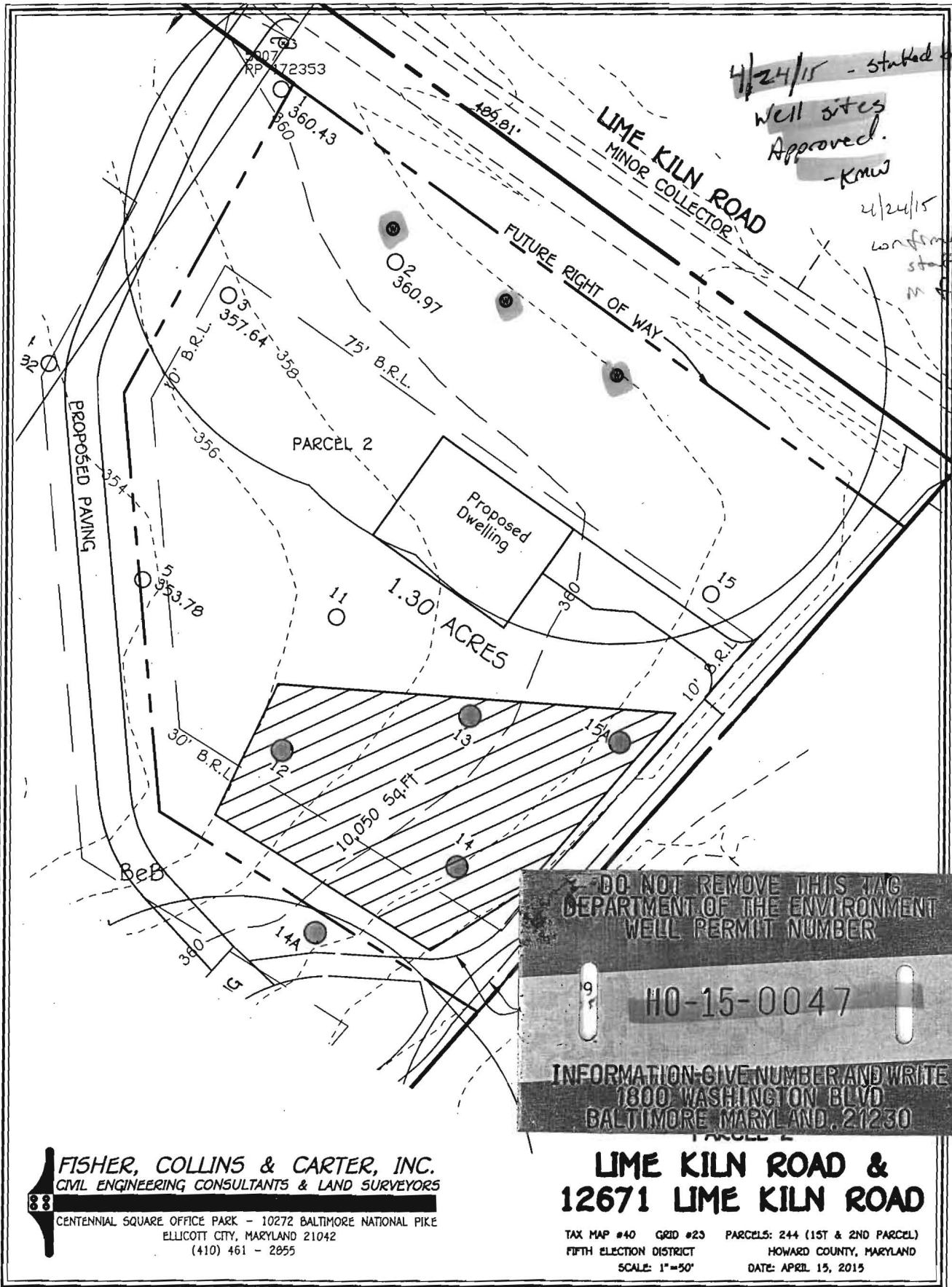
Piping to house House Connection
Type: Poly 1" IPS-PE 3408 PVC sleeve to undisturbed soil at wall penetration: yes
PSI: 160 (160 psi min) Length of sleeve (5' minimum from foundation): 7'
Depth of supply line: 42" (36" min) Sleeve sealed properly: yes

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: Keith Hundertmark date: 1-25-17

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

Date Insp. Requested: 02/10/2017 Date Insp. Approved: 02/10/2017 Inspector: [Signature]
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade 48" 2017/02/10 (u)
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly 44" 2017/02/10 (u)
Safety rope not outside of well cap/casing
Correct well tag attached properly and casing 8" above finished grade 16" 2017/02/10 (u)
Water supply line sleeved adequately at house connection 20' 2017/02/10 (u)
Adequate grout observed below pitless adapter



4/24/15 - started by FCC
 Well sites Approved.
 - kmw
 4/24/15
 work started on field

DO NOT REMOVE THIS TAG
 DEPARTMENT OF THE ENVIRONMENT
 WELL PERMIT NUMBER

HO-15-0047

INFORMATION-GIVE NUMBER AND WRITE
 1800 WASHINGTON BLVD
 BALTIMORE MARYLAND, 21230

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
 ELLICOTT CITY, MARYLAND 21042
 (410) 461 - 2055

**LIME KILN ROAD &
 12671 LIME KILN ROAD**

TAX MAP #40 GRID #23 PARCELS: 244 (1ST & 2ND PARCEL)
 FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1"=50' DATE: APRIL 15, 2015

Water Testing Laboratories

P.O. Box 712
Stevensville, MD 21666
410-643-7711

of Maryland, Inc.

Carrigan Homes, Inc.
9812 Caitlins Court
Ellicott City, Md 21042

Reporting Date: 3/15/2017
Report #: M4926

Submitted Sample Address: 12665 Lime Kiln Road
Fulton, MD 20759

Submitted Sample Source: Garage Utility Sink-Well cap intact & no devices used

Date / Time Collected: 3/13/2017 09:05 AM

Sample Type: Drinking Water

Sampler/Company: K. Lee 4827KL, WTL of MD

Field Record: Chlorine residual: Absent Clear when drawn pH: 8.1

Well Tag #: HO-15-0047

OK
K. Lee
4/14/17

Analytical Results

Parameter	Result	Units	Report Limit	Standard	Standard Type
Total Coliform Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
<i>E. Coli</i> Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
Nitrate as N	ND	mg/L	0.5	10	EPA Primary MCL
Sand	Absent	mg/L or Absent	mg/L or Absent	< 5 mg/L*	MD Well Reg.
Turbidity	1.0	NTU	0.5	< 10 NTU*	MD Well Reg.

Notes:

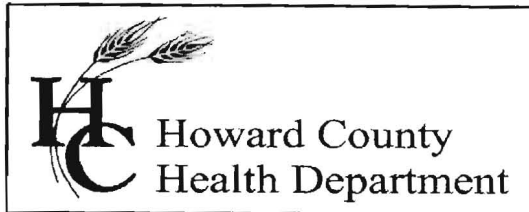
- Bacteriological analysis of this sample indicates this water is safe for human consumption.
- Results in **BOLD** exceed the MCL, Action Level or MD well regulation.
- Samples received and examined within EPA's recommended holding times.
- MCL - Maximum Contaminant Level
- ND - Not Detected.
- * Sand and turbidity standard for new wells - See Code of Maryland Regulations (COMAR) 26.04.04.16E(5). If sand is present, it is analyzed to determine amount of sand in mg/L.
- MCL Type -
EPA Primary: The maximum contaminant level which is the highest level of contaminant that is allowed in drinking water. Primary MCLs are enforceable standards.
EPA Secondary: Non enforceable guidelines regulating contaminants that cause cosmetic effects (such as skin or tooth discoloration) or aesthetic effects (such as taste or odor) in drinking water.
Action Level: Defined in treatment techniques which are required processes intended to reduce the level of a contaminant in drinking water.
- We certify that the analyses performed for this report are accurate, and that the laboratory tests were conducted by methods approved by the US Environmental Protection Agency and the Maryland Department of the Environment.

Reported by,

Christen Rodgers

C. Rodgers, Assistant Lab Manager, Microbiology

Reviewed by: *SMS*



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-2640 | 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 – OCTOBER 10th, 2017

April 10, 2017

Homeowner
12665 Lime Kiln Road
Fulton, MD 20759

**RE: Monroe Property, P. 2
12665 Lime Kiln Road
Building Permit: B16003979
Well Permit: HO-15-0047**

Dear Homeowner:

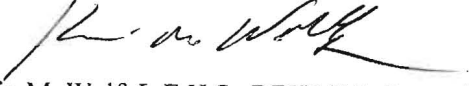
This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **2/14/2017**. Final approval of the well line connection to the dwelling was granted on **2/10/2017**. The well construction was completed on **5/4/2015**. Water samples were collected on **3/13/2017**.

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-15-0047. 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 "Kevin M. Wolf". The signature is fluid and cursive, with a long horizontal stroke at the end.

Kevin M. Wolf, L.E.H.S., REHS/RS, Supervisor
Groundwater Management Section
Well & Septic Program

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