

C1 56737 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)

COUNTY NUMBER XIII

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 12 26 18 APPROVED 02/21/2019

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho-17-0344

OWNER Heritage Land Development WELL SITE ADDRESS Daisy Road TOWN Woodbine SUBDIVISION Linden Grove SECTION LOT 5

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 Soil, Tan Shale, Brown Shale, Hard Gray Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (CM) (BC) NO. OF BAGS 34 NO. OF POUNDS 2550

CASING RECORD

MAIN CASING TYPE PL Nominal diameter 6 Total depth 88

OTHER CASING (if used) diameter depth (feet) from to

SCREEN RECORD screen type or open hole (ST) (BR) (HO) (PL) (OT)

DEPTH (nearest ft.) 88 400

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2.0 METHOD USED TO MEASURE PUMPING RATE Watch/Bucket

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES) (NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 M WD 355 DRILLERS SIGNATURE LIC. NO. 1 D WR 109

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

LATITUDE 39.32761 LONGITUDE 77.06466 (DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04.

B 1	SEQUENCE NO. (MDE USE ONLY) 54290	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 563957-1 please type	STATE PERMIT NUMBER 40-17-0344 70 fill in this form completely 79
Date Received (APA) 07/13/18 8 MM DD YY 13		B 3 LOCATION OF WELL	
OWNER INFORMATION		8 COUNTY Howard 21	
15 Last Name Heritage Land Development Owner First Name 34		23 SUBDIVISION Linden Grove 42	
36 Street or RFD Po Box 482 55		SECTION 5 LOT 5 44 46 48 50	
57 Town Lisbon 70 State MD 72 Zip 21765 76		52 NEAREST TOWN Woodbine 71	
DRILLER INFORMATION		B 4 SOURCES OF DRILLING WATER	
Driller's Name Michael Barlow 76 License No. MWD 355 81		1. Well	
Firm Name Barlow Well Drilling		2.	
Address 522 Underwood Lane 21047		3.	
Signature [Signature] 7/10/18 Date		11 STREET ADDRESS DAISY ROAD 30	
B 2 WELL INFORMATION		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	
1 APPROX. PUMPING RATE (GAL. PER MIN.) 5 12		NORTH <input type="radio"/> WEST <input checked="" type="radio"/> EAST <input type="radio"/> SOUTH <input type="radio"/>	
2 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 14 20		34 DISTANCE FROM ROAD 1000 37	
		ENTER FT OR MI FT 38 39	
		TAX MAP: 8 BLK: 7 PARCEL 5	
USE FOR WATER (CIRCLE APPROPRIATE BOX)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
<input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION		COUNTY NAME HOWARD COUNTY NO. 11	
<input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)		STATE SIGNATURE _____ INSERT S → 41	
<input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING		DATE ISSUED 09/17/18 43 MM DD YY 48	
<input type="radio"/> PUBLIC WATER SUPPLY WELL		CO SIGNATURE [Signature] EXP. DATE _____	
<input type="radio"/> TEST, OBSERVATION, MONITORING		DON: DOG: 11/8/18 @ 124.12/2018	
<input type="radio"/> OPEN LOOP GEOTHERMAL			
<input type="radio"/> CLOSED LOOP GEOTHERMAL			
APPROXIMATE DEPTH OF WELL 300 FEET 24 28		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 DIAMETER OF WELL 6 NEAREST INCH			
METHOD OF DRILLING (circle one)			
30 BORED (or Augered) <input type="radio"/> JETTED <input checked="" type="radio"/> Jetted & DRIVEN <input type="radio"/>			
37 AIR-ROTary <input type="radio"/> AIR-PERCussion <input checked="" type="radio"/> ROTARY (Hydraulic Rotary) <input type="radio"/>			
CABLE <input type="radio"/> REVerse-ROTary <input type="radio"/> DRive-POINT <input type="radio"/>			
other _____			
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)			
<input type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL			
<input checked="" type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED			
<input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS			
<input type="radio"/> 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 402017G002			
PERMIT No. 40-17-0344 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS			
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			



MICHAEL BARLOW WELL DRILLING & SERVICE, INC.
 522 Underwood Lane Bel Air, Maryland 21014
 (410) 838-6910 Fax (410) 838-3582

WELL YIELD REPORT

Date Test Completed:	December 26, 2018		
Well Depth:	400	feet	
Customer	Heritage Land Development	Permit #	HO-17-0344
Road	Daisy Road	Subdivision	Linden Grove
City	Woodbine	Section	
State	Maryland	Lot #	5

Time	Water Level feet PUMP SET AT 200'	Time to Fill 1-gallon bucket seconds	G.P.M.
10:00 AM	33	4	15.00
10:15 AM	140	10	6.00
10:30 AM	175	30	2.00
10:45 AM	175	30	2.00
11:00 AM	175	30	2.00
11:15 AM	175	30	2.00
11:30 AM	175	30	2.00
11:45 AM	175	30	2.00
12:00 PM	174	30	2.00
12:15 PM	174	30	2.00
12:30 PM	174	30	2.00
12:45 PM	174	30	2.00
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2:45 PM	174	30	2.00
3:00 PM	174	30	2.00
3:15 PM	173	30	2.00
3:30 PM	173	30	2.00
3:45 PM	173	30	2.00
4:00 PM	173	30	2.00
4:15 PM	173	30	2.00
4:30 PM	173	30	2.00

This yield test report is for informational purposes only. Please note the yield may increase or decrease over time and the GPM indicated above is not a guarantee.

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

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: Fogle's Well Pump & Water Treatment, LLC Telephone #: 410 795 5670
Address: 580 Obrecht Rd
Sikesville 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): DAVID C FOGLE License #: MSD226

*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: Toll Brothers Telephone #: _____
Subdivision: Linden Grove Lot #: 5 Well Tag #: HO-17-0344 (S)
Site Address: 15621 Linden Grove Lane
Woodbine, MD 21797

Submersible Pump Data

Make: Grundfos
Model #: 104507422
Pump Capacity: 12
Well Yield: 2 gpm
Depth of well encountered at time of pump installation: 400 (feet)

Pitless Adapter

Make: Cambrell+
Model #: N/A
GPM Depth: 36" (36" min)
GPM NSF/WSC approved: Y/S

Well Cap and Electric Conduit

Two piece watertight cap: Y/S
Screened, vented well cap: Y/S
Cap secured to casing: Y/S
Conduit min 18" B.G.: Y/S
Conduit secured to well cap: Y/S

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Piping to house

Type: 1" poly pipe
PSI: 200 (160 psi min)
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: Y/S
Length of sleeve (5' minimum from foundation): 6'
Sleeve sealed properly: Y/S

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: 9/13/2021

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

Date Insp. Requested: 9/14/21 Date Insp. Approved: 9/14/21 Inspector: (S)
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

51"
26"
21"
10"



(Revised form 10/24/2018)



HOWARD COUNTY HEALTH DEPARTMENT

63957

DATE 7/31/18

615

Received From

Dr. [unclear] / [unclear]

PHONE #

CASH

CHECK

NO. 1100

For WCC Permit (15) Paper

one thousand four hundred Dollars

\$ 1400.00

Received By

[Signature]

INTERIM CERTIFICATE OF POTABILITY
Expiration Date – **SEPTEMBER 4, 2022**

March 4, 2022

Homeowner
15621 Linden Grove Lane
Woodbine, MD 21797

RE: Linden Grove, Lot 5
15621 Linden Grove Lane
Building Permit: B20004569
Well Permit: HO-17-0344

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 **10/22/2021**. Final approval of the well line connection to the dwelling was granted on **9/14/2021**. The well construction was completed on **12/26/2018**. Water samples were collected on **2/24/2022**.

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-17-0344. 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>



Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

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

In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a light blue horizontal line.

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor
Groundwater Management Section
Well & Septic Program

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



8930 Stanford Blvd, Columbia MD 21045
 (410) 313-6300 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.askhealth@howardcountymd.gov

Bert Nixon, Director

TO ALL INTERESTED PARTIES

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

(Signature) 09/14/2018

Well Site Location:

Linden Grove	5	Linden Grove
Subdivision/Property Name	Lot #	Road Name

The well site has been staked by Fisher, Collins and Carter,
 (professional land surveyor or company employing professional land surveyors)
 on 08/23/18 (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.

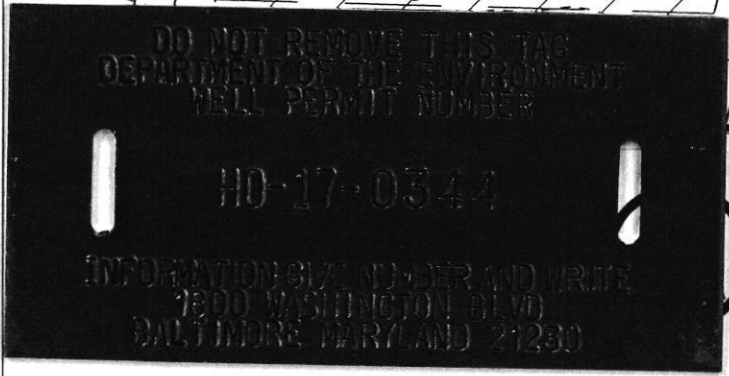
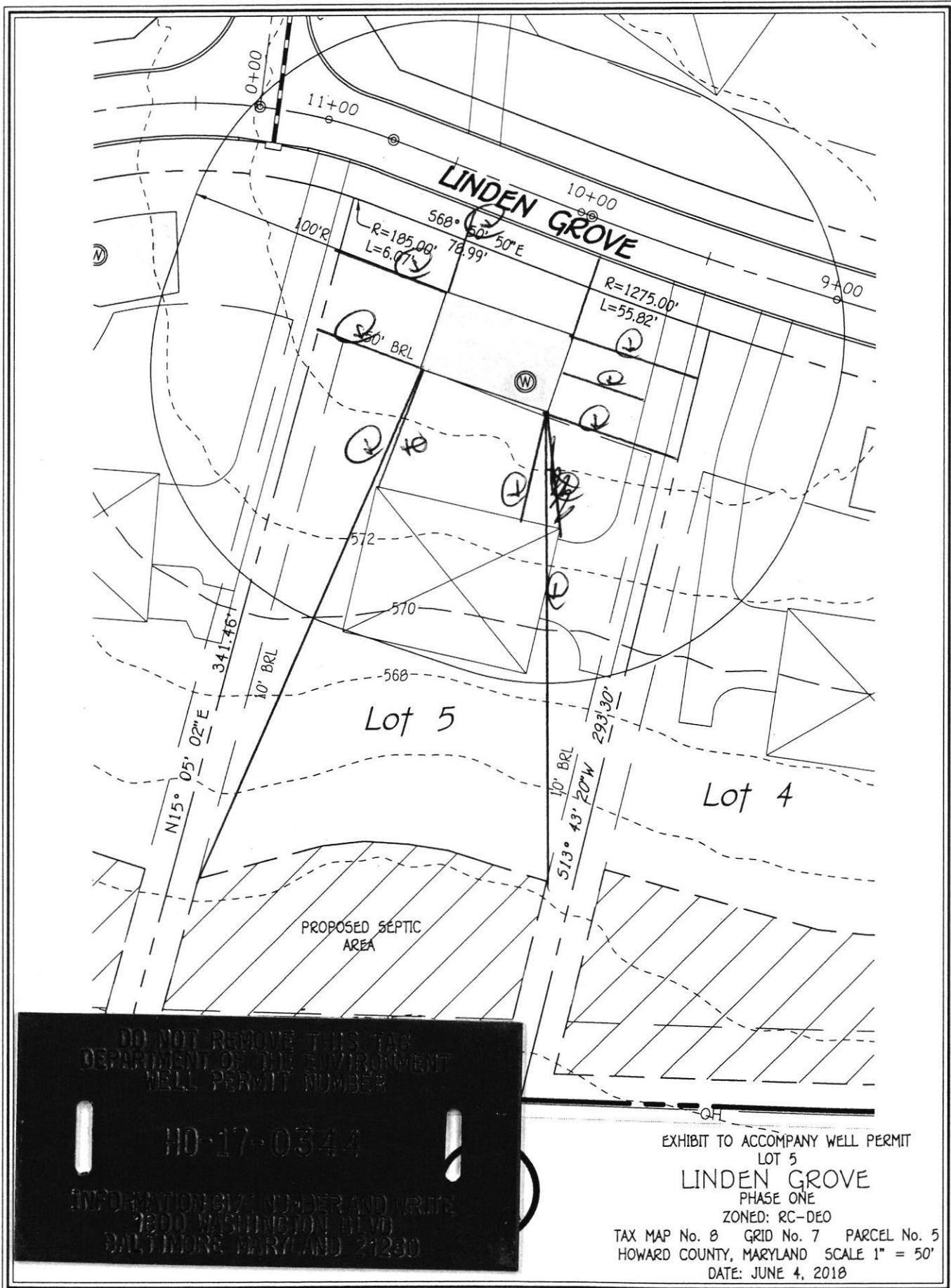


EXHIBIT TO ACCOMPANY WELL PERMIT
 LOT 5
LINDEN GROVE
 PHASE ONE
 ZONED: RC-DEO
 TAX MAP No. 8 GRID No. 7 PARCEL No. 5
 HOWARD COUNTY, MARYLAND SCALE 1" = 50'
 DATE: JUNE 4, 2018

LINDEN GROVE LOT 5
 APPROVED 7/25/2018 @ 01:09:47 w/ SP-17-003 Signed 3/22/18
 SIGNED BY EAC

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #: 150659 Account #: 1933
Reference: Linden Grove Lot 5 Client: Fogle's Well Pump & Treatment
Location: 15621 Linden Grove Lane Requested By: Dave Fogle
Woodbine, MD 21797 Source: Well Water
Date/ Time Collected: 2/24/2022 0900 Site: Kitchen Sink
Date/Time Rec'd: 2/24/2022 1112 Treatment: None ✓
Chlorine ppm: Free: ND Total: ND pH: 6.7
Collected By: B. Wilkerson 9315BW Well #: HO-17-0344

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM20 9223B	2/25/2022 / 0830 / MEH
Bacteria, E. coli, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM20 9223B	2/25/2022 / 0830 / MEH
Nitrate	5.11 ✓	mg/L	10	Hach 10206	2/25/2022 / 0840 / CRS
Turbidity	0.53 ✓	NTU	<10	SM2130B	2/25/2022 / 0930 / MEH
Sand	ND ✓	mg/L	5	Visual/Gravimetric	2/24/2022 / 1545 / TSD

NOTES:

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NTU = Nephelometric Turbidity Units
- 4 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 Sample collected by client, analyzed as received
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B20004569

Date Reported: 2/25/2022