

C1 56749

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 MM DD 01 28 19

DATE WELL COMPLETED MM DD YY 01 18 19 APPROVED 2/22/2019

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-17-0354

OWNER Heritage Land Development WELL SITE ADDRESS Daisy Road TOWN Woodbine SUBDIVISION Linden Grove SECTION LOT 22

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Soil, Brown Shale, Soft Gray Rock, Med Gray Rock.

GROUTING RECORD form with fields for GROUTED (Y), TYPE OF MATERIAL (CM, BC), NO. OF BAGS (19), NO. OF POUNDS (1425), DEPTH OF GROUT SEAL (0 to 45).

CASING RECORD form with fields for MAIN CASING TYPE (PL), Nominal diameter (6), Total depth (45).

OTHER CASING (if used) table with columns for diameter and depth.

SCREEN RECORD form with fields for screen type (ST, BR, HO, PL, OT).

PUMPING TEST form with fields for HOURS PUMPED (3), PUMPING RATE (10.0), WATER LEVEL (26), TYPE OF PUMP USED (S).

WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P).

DEPTH (nearest ft.) table with columns for depth intervals and slot size.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY (31-35), PUMP HORSE POWER (37-41).

DRILLERS LIC. NO. MD 355, DRILLERS SIGNATURE, LIC. NO. WRD 113, SITE SUPERVISOR.

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

LATITUDE 39.32771, LONGITUDE 77.06174, (DEFAULT COORD. WGS 84), Pursuant to §10-624 of the State Govt. Article of the Maryland Code...

TAB = 02/22/2019

B 1	SEQUENCE NO. (MDE USE ONLY) 54275	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 563957-11 please type	STATE PERMIT NUMBER 10-17-0354 fill in this form completely
	1 2 3 6		70 79

OWNER INFORMATION

Date Received (APA) **07/13/18**

8 MM DD YY 13

15 Last Name **Heritage Land Development** Owner First Name **PO Box 482** 34

36 Street or RFD **Hispan MD 21765** 55

57 Town 70 State 72 Zip 76

LOCATION OF WELL

8 COUNTY **Howard** 21

23 SUBDIVISION **Kinden Grove** 42

SECTION **44** 46 LOT **22** 48 50

52 NEAREST TOWN **Woodbine** 71

DRILLER INFORMATION

Driller's Name **Michael Barbu MWD 355** 76 License No. 81

Firm Name **Barbu Well Drilling**

Address **522 Underwood Lane 2104**

Signature **[Signature]** Date **7/10/18**

SOURCES OF DRILLING WATER

1. **Well**

11 STREET ADDRESS **Daisy Road** 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH WEST EAST SOUTH

34 37 DISTANCE FROM ROAD **150** FT 38 39

ENTER FT OR MI

TAX MAP: **8** BLK: **7** PARCEL **5**

WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **750** 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

O OPEN LOOP GEOTHERMAL

C CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME **HOWARD** COUNTY NO. **XIII**

STATE SIGNATURE _____ INSERT S _____ 41

DATE ISSUED **09/17/18** CO SIGNATURE **[Signature]** EXP. DATE **09/17/19**

43 MM DD YY 48

DNI DON: 12/14/18 DNI DOG: 12/18/18

APPROXIMATE DEPTH OF WELL **300** FEET 24 28

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST INCH

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

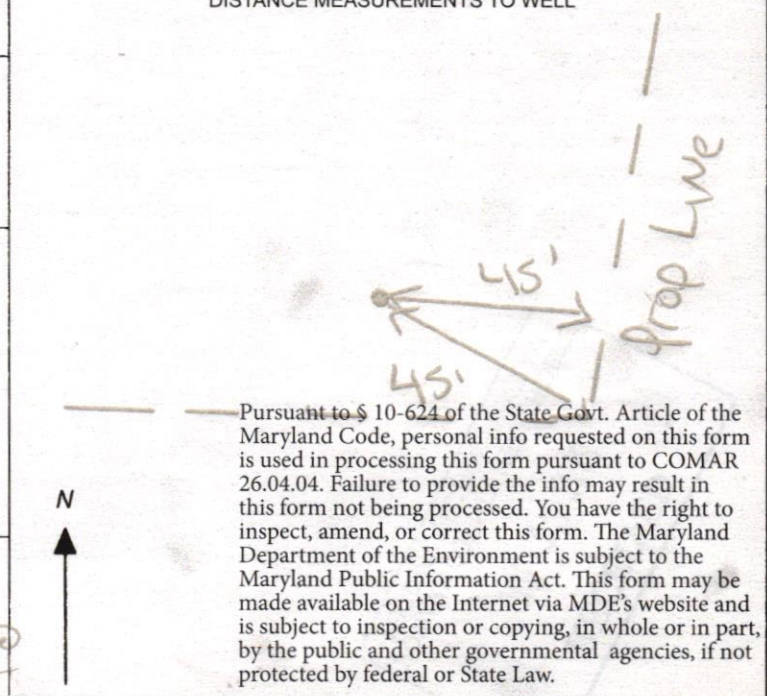
METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

37 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

39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D 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 **H02017-G002**

PERMIT No. **10-17-0354**

70 71 72 73 74 75 76 77 78 79

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: Foales Well Pump & Water Treatment, LLC Telephone #: 410 795 5670
Address: 580 Obrecht Rd
Sixesville 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. Foale License# MSD7226

*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 #: 27 Well Tag #: HO - 17 - 0354 (S)
Site Address: 15608 Linden Grove Lane
Woodbine, MD 21797

Submersible Pump Data

Make: Grundfos
Model #: ESGGE01-180
Pump Capacity: 15
Well Yield: 10

Pitless Adapter

Make: Campbell
Model#: NA
GPM Depth: 36" (36" min)
GPM NSF/WSC 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: 300 (feet)
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 NA

Piping to house

Type: 1" poly pipe
PSL: 20 (160 psi min)
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
Length of sleeve (5' minimum from foundation): 10'
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: [Signature] date: 7/20/2021

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

Date Insp. Requested: 7/21/21 Date Insp. Approved: 10/26/21 Inspector: SG
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 ✓

36"
34"
19' 7" tag will be braided.
OK

(Revised form 10/24/2018)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – April 27, 2021

October 27, 2021

Homeowner
15608 Linden Grove Lane
Woodbine, MD 21797

RE: Linden Grove, Lot 22
15608 Linden Grove Lane
Building Permit: B2100407
Well Permit: HO-17-0354

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 **10/15/2021**. Final approval of the well line connection to the dwelling was granted on **10/26/2021**. The well construction was completed on **1/18/2019**. Water samples were collected on **10/22/2021**.

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-17-0354. 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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 148249 Account #: 1933
Reference: Linden Grove Lot 22 Client: Fogle's Well Pump & Treatment
Location: 15608 Linden Grove Lane Requested By: Dave Fogle
Woodbine, MD 21797 Source: Well Water
Date/ Time Collected: 10/22/2021 1033 Site: Kitchen
Date/Time Rec'd: 10/22/2021 1117 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: D. Fogle 0037DF Well #: HO-17-0354

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/23/2021 / 1630 / BCD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/23/2021 / 1630 / BCD
Nitrate	2.80	mg/L	10	601	10/22/2021 / 1210 / CRS
Turbidity	0.94	NTU	<10	SM20 2130B	10/22/2021 / 1350 / MEH
Sand	ND	mg/L	5	Visual/Gravimetric	10/22/2021 / 1520 / CRS

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 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B21000407

Date Reported: 10/25/2021

Wolf, Kevin

From: Wolf, Kevin
Sent: Saturday, January 12, 2019 3:31 PM
To: Mike Isom; Martin, Sharhonda; Cabahug, Joseph; Collins, Sarah
Subject: Re: Saturday 1/12

Mike,

I am sorry I was out sick Friday. I am just seeing this email and I know you are aware that we do not allow drilling activities on weekends other than those jobs in particular cases already discussed with the Health Department prior or in emergency "out of water" cases.

Kevin

----- Original message -----

From: Mike Isom <misom@mbwd.us>
Date: 1/11/19 5:23 PM (GMT-05:00)
To: "Martin, Sharhonda" <smmartin@howardcountymd.gov>, "Wolf, Kevin" <KWolf@howardcountymd.gov>, "Cabahug, Joseph" <jcabahug@howardcountymd.gov>, "Collins, Sarah" <SCollins@howardcountymd.gov>
Subject: Saturday 1/12

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

We will be yield testing lots 18, 19 & 22 at Linden Grove tomorrow. Should be on site by 9:30

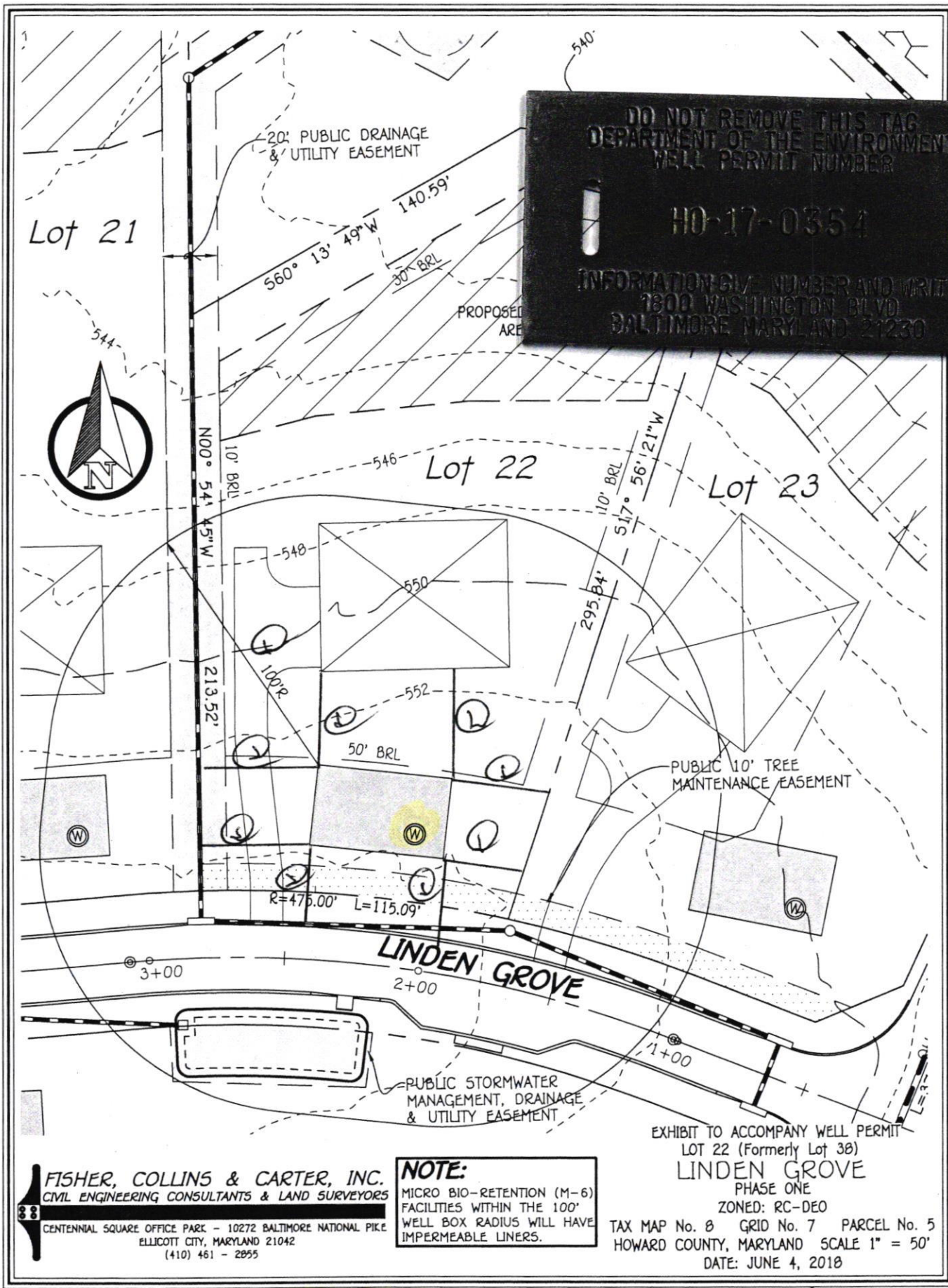
Given the weather forecast, we will not be yield testing at the Hyman Property on Monday. I will update you on that schedule Monday.

--

Sincerely,

Michael Isom
Project Manager
Michael Barlow Well Drilling Service
Phone: (410) 838-6910
Fax: (410) 838-3582
522 Underwood Lane
Bel Air, MD 21014
www.michaelbarlowwelldrilling.com
www.thermalloopcorp.com
[Click HERE to like us on Facebook!](#)

DO NOT REMOVE THIS TAG
 DEPARTMENT OF THE ENVIRONMENT
 WELL PERMIT NUMBER
 HO-17-0354
 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 - 2855

NOTE:
 MICRO BIO-RETENTION (M-6)
 FACILITIES WITHIN THE 100'
 WELL BOX RADIUS WILL HAVE
 IMPERMEABLE LINERS.

EXHIBIT TO ACCOMPANY WELL PERMIT
 LOT 22 (Formerly Lot 38)
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 22
 APPROVED 7/26/2018 #01997 VIA SP 17-003 (3/22/2018)
 STAKED BY FCC + FIS-092 Accessed 7/26/2018



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:

Well Site Location:

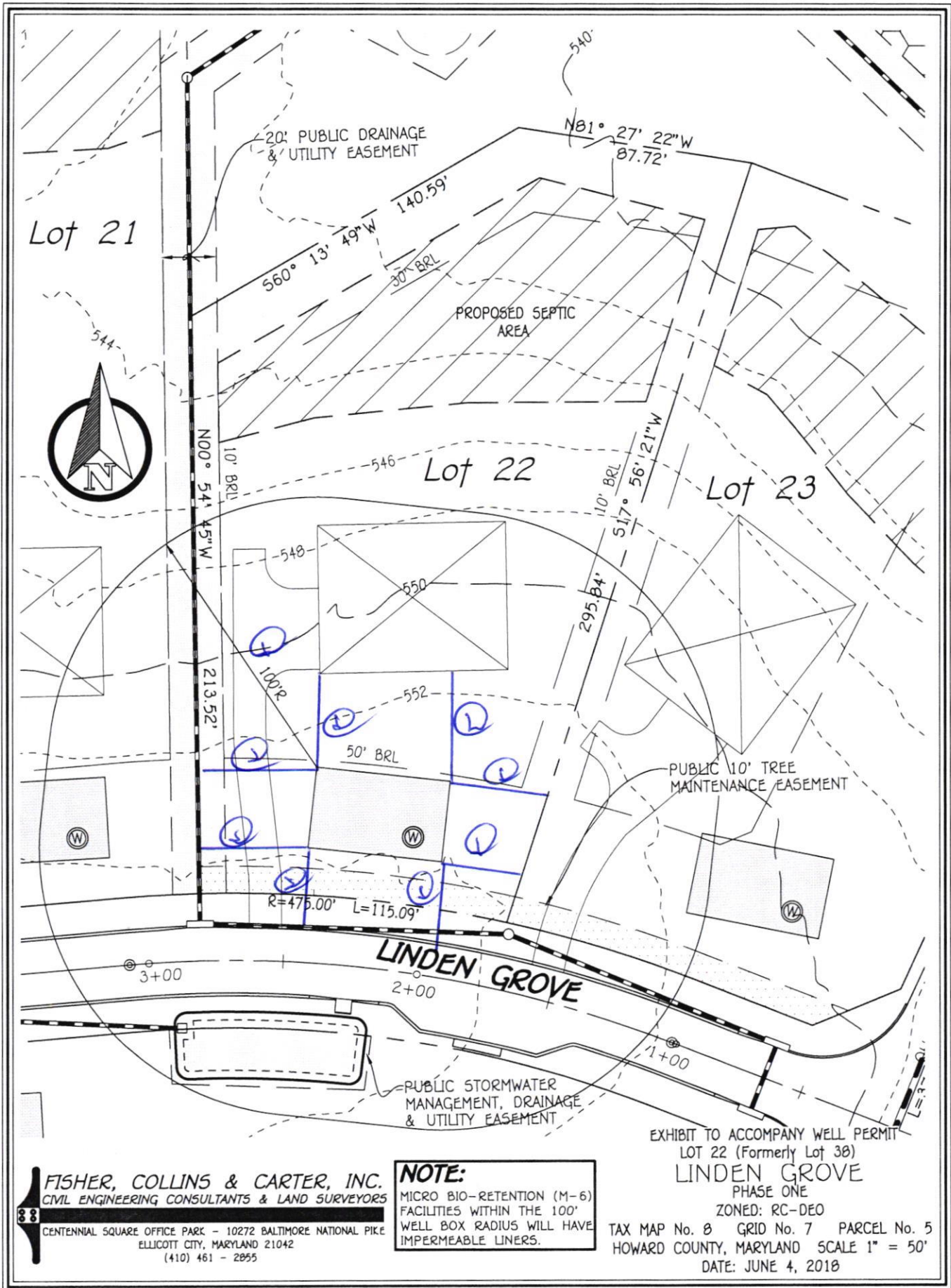
Linden Grove 22 Linden Grove
Subdivision/Property Name Lot # Road Name

(Handwritten circled 'P' and date 9/14/2018)

- 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.



FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
 ELLICOTT CITY, MARYLAND 21042
 (410) 461 - 2055

NOTE:
 MICRO BIO-RETENTION (M-6)
 FACILITIES WITHIN THE 100'
 WELL BOX RADIUS WILL HAVE
 IMPERMEABLE LINERS.

EXHIBIT TO ACCOMPANY WELL PERMIT
 LOT 22 (Formerly Lot 38)
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 22
 APPROVED 7/26/2018 #01997 VIA SP 17-003 (3/22/2018)
 STAKED BY FCC + F-18-092 Accessed 7/26/2018