

C1 07539

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A50617-B

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED MM DD YY 11 28 99

Depth of Well 405 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-99-2488

OWNER HAMILTON REED BDR last name 11376 BARLEY FIELD WY first name TOWN WOODFORDS GRANT SECTION I LOT 35

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandy Sand Stone, MICKA, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD form with fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for casing types (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER), DEPTH (nearest ft.).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: YES (Y) NO (N)

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

DRILLERS LIC. NO. 1 M SD 116 1, DRILLERS SIGNATURE, LIC. NO. 1 MS D 117 1

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

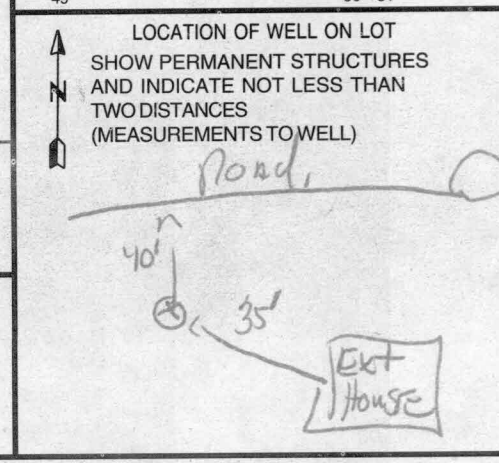
DEPTH (nearest ft.) table with columns 1-21 and rows E, A, C, H, S, R, C, 3, E, E, N.

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

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



Date Received (APA) _____
OWNER INFORMATION
 8 MM DD YY 13
Hamelton Reed
 15 Last Name Owner First Name 34
10805 Hickory Ridge Dr.
 36 Street or RFD 55
Columbia MO 21044
 57 Town 70 State 72 Zip 76

B 3 Howard LOCATION OF WELL
 8 COUNTY 21
Woodfords Grant
 23 SUBDIVISION 42
 SECTION I LOT 35
 44 46 48 50
MARIOTTSVILLE
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) 1 M I
 73 76 77 78

DRILLER INFORMATION
Ralph MAYNE M S D 116
 Driller's Name 76 License No. 81
Ralph MAYNE well DRILLING
 Firm Name
9120 Brown Church Rd. W.H. Arig
 Address
Ralph Mayne 11-16-99
 Signature Date

B 4 BARKEY FIELD
 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) MARIOTTSVILLE
 11 NEAR WHAT ROAD 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 34 40 37
 DISTANCE FROM ROAD 40 FT
 ENTER FT OR MI 38 39
 TAX MAP: _____ BLK: _____ PARCEL _____

B 2 **WELL INFORMATION**
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5
 8 500 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 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
 G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A50617-B
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 11/17/99 C. Will 11/16/00
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH GRID 548 0 0 0 EAST GRID 0828 0 0 0
 50 55 57 63

APPROXIMATE DEPTH OF WELL 150 FEET
 24 28
 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 2.
 3.
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E 830 828
 N 550 548
 000
 000

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 DEEPEENED WELLS (CIRCLE APPROPRIATE BOX)
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 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 DEEPEEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 Ho - 94 - 0922 52

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

 N
 ← 1/2 mi →
 BARKEY FIELD WAY MARIOTTSVILLE RD

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER 54 G A P 63
 PERMIT No. Ho - 94 - 2488
 70 71 72 73 74 75 76 77 78 79

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2488
 Location of property (road) 11376 BANLEY FIELD WAY
 Subdivision WOODFORDS GRANT Lot 35 Block Plat Sec.
 Well Driller RALPH MAYNE Owner HAMILTON ROAD BLDG

Depth of well 405'
 Distance of measuring point (M.P.) above ground 2 ft
 Static water level (S.W.L.) below M.P. 37

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 12 GPM
 Total time 30 min to reach pumping water level 275 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <u>5</u> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	275 ft	45 Sec		1.8 GPM
8:45	275 ft	45 Sec		1.8 GPM
9:00	275 ft	45 Sec		1.8 GPM
9:15	275 "	45 "		1.8 "
9:30	275 "	45 "		1.8 "
9:45	275 "	45 "		1.8 "
10:00	275 ft	45 Sec		1.8 GPM
10:15	275 ft	45 Sec		1.8 GPM
10:30	275 ft	45 Sec		1.8 GPM
10:45	275 "	45 "		1.8 "
11:00	275 "	45 "		1.8 "
11:15	275 "	45 "		1.8 "
11:30	275 ft	45 Sec		1.8 GPM
11:45	275 ft	45 Sec		1.8 GPM
12:00	275 ft	45 Sec		1.8 GPM
12:15	275 "	45 "		1.8 "
12:30	275 "	45 "		1.8 "
12:45	275 "	45 "		1.8 "
1:00	275 ft	45 Sec		1.8 GPM
1:15	275 ft	45 Sec		1.8 GPM
1:30	275 ft	45 Sec		1.8 GPM
1:45	275 "	45 "		1.8 "
2:00	275 "	45 "		1.8 "
2:15	275 ft	45 Sec		1.8 GPM
2:30	275 ft	45 Sec		1.8 GPM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
~~XXXXXXXXXX~~ 410-313-2640

11-23-99
AM

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date _____

Name of Installer CLARKE P & H Inc

Telephone 410-489-4029

License Number 3808

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber 3808

Name of Property Owner Hamilton Reed

Telephone 410-480-9105

Subdivision Woodlands Grant Lot # 35

Well Tag # HO-99-2988

Site Address 11376 Barley Field Way

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
- Make IACCUZZI
- Model # _____
- Capacity 3 GPM
- Pump exceeds well capacity Yes _____ No _____
- If Yes, is low pressure cutoff switch installed? Yes _____ No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards Other _____

Motor

- Horsepower 1-HP
- RPM _____
- Voltage 220
 - 110 _____
 - 220

Pitless Adapter

- Make HARWARD
- Model # PT 802
- Depth 42"

Tank

- Capacity 42
- Pressure relief valve? 25/6

Piping

- Type Plastic
- Size 1"
- NSF and/or BOCA Code approved _____
- Depth of supply line 42"

Well data

- Depth 405 ft.
- Yield 1 3/4 GPM
- Static water level 37 ft.
- Will water supply be disinfected by installer? NO attached as of 4/27/01

11/23/99 WPI O.K. Welltag missing.
Old well not abandoned, (BB) or hooked up

Well Tag not missing.

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Bernith Clarke

Date: NOV-22-99

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

December 7, 1999

Cindy and Bill Floyd
11376 Barley Field Way
Marriottsville, MD 21104

RE: Woodford's Grant, Lot - 35
11376 Barley Field Way
BP # B00118014
Well Permit #: HO-94-2488

Dear Mr. and Mrs. Floyd:

This is to advise you that the septic system for the above referenced property has been installed and inspected. Final approval of the septic system was granted on November 12, 1999.

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-94-2488. 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: November 29 and December 7, 1999
Date of Well Completion: November 20, 1999

Respectfully,
Steven R. Krieg
Steven R. Krieg
Registered Environmental Sanitarian
Approving Authority
Wells and Septic Program

SRK
cc: Building Inspector's Office
File

Mr. & Mrs. William R. Floyd
11376 Barley Field Way
Marriottsville, MD 21104-1339
410-442-5133

April 24, 2001

Steve Krieg
Howard County Director of Finance
3525-H Ellicott Mills
Ellicott City, MD 21043

Dear Steve:

First, I would like to say thank you for releasing our pool permit.

At your request, I am enclosing our check number 7379 in the amount of \$80. We are not quite sure exactly what the \$80 is for, as the well (HO-94-0922) that we will be using to water the lawn has been there for several years. When we moved into our new home on December 1, 1999, We were told, by Howard County, that we could utilize the well for outside watering purposes and, at that time, there were no charges involved. - Discussed w/Cindy Floyd

We have received an acceptable quote from Cornwell Plumbing to hook up the well for outside watering purposes. They will begin work within the next two weeks. We will be sure that the County inspects the work prior to capping the well. doing the WPI

In addition, we have also discovered that the well for our in-home use (HO-94-2488) which failed it's first potability test, should have been tested again six months later. We were unaware of this and now are concerned with the dangers of unsafe water for our family of 7. You asked that I wait a month before requesting the test, but we would prefer to do it as quickly as possible. Please send us the necessary information. - Called Cindy Floyd on 5/1/01 SRW

Sincerely,

Cindy Lee Floyd
Cindy Lee Floyd