

C 1 3453

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, STREET OR RFD, SUBDIVISION, SECTION, TOWN, 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 (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes handwritten entries like 'Hard Tan gray', 'Med hard Tan', etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N. TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC. NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD

MAIN CASING TYPE, Nominal diameter top (main) casing, Total depth of main casing. Includes handwritten entries like 'PL', '60', '61', '63-84', '66', '70', '40'.

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole (insert appropriate code below) ST BR HO PL OT. Includes handwritten entries like 'ST', 'BR', 'HO', 'PL', 'OT'.

DEPTH (nearest ft.)

Table for depth with columns for slot size and diameter of screen. Includes handwritten entries like 'DL', '40', '100', '100', '500', '25', '5'.

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

C 3

PUMPING TEST

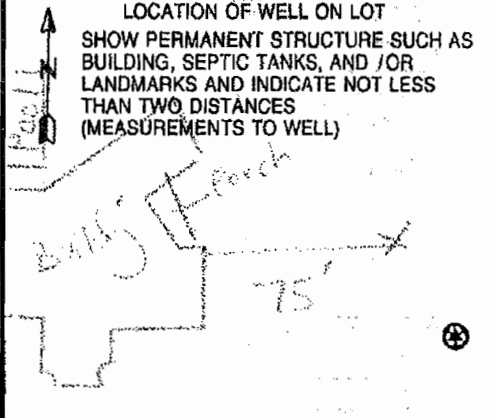
HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min.) 13.0. METHOD USED TO MEASURE PUMPING RATE. WATER LEVEL (distance from land surface) BEFORE PUMPING, WHEN PUMPING. TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible.

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) 25. PUMP HORSE POWER 3. PUMP COLUMN LENGTH (nearest ft.) 300. CASING HEIGHT (circle appropriate box and enter casing height) 4 above, LAND SURFACE, below (nearest foot).

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED YES Y NO 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 204. DRILLERS SIGNATURE David Kelly. LIC. NO. 1 MWD 564.

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

B 1 7150

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-1948 fill in this form completely

533296 please type

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

Calmont LLC Property
3639 Broadleaf Ct.
Glenwood MD 21738

B 3

LOCATION OF WELL

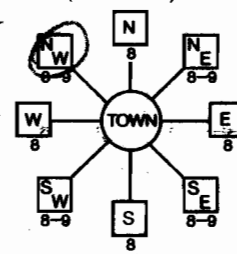
Howard
Colmont Property
Glenwood

DRILLER INFORMATION

David Kelly MWD 304
Jones Well Drilling, Inc.
3700 Rush Rd. Jarr-MD 2084

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



(14685) Carrs Mill Road

2000 FT
TAX MAP: 14 BLK: 9 PARCEL 59

B 2

WELL INFORMATION

APPROX. PUMPING RATE 5 GAL. PER MIN.
AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A529539
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 7/26/2010 Brian Baker 7/26/2011
CO SIGNATURE EXP. DATE
NORTH GRID 534 000 EAST GRID 791 000

- USE FOR WATER (CIRCLE APPROPRIATE BOX)
A 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

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 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)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y 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 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)
APPROP. PERMIT NUMBER G
PERMIT No. HO-95-1948

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

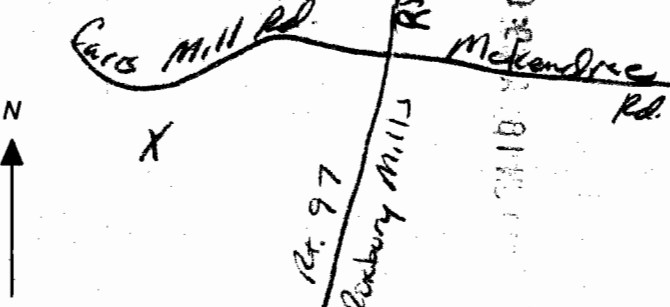
SOURCES OF DRILLING WATER

- 1.
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 7901
N 5304

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



SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD BE CONSULTED BEFORE DRILLING
Existing Well HO-94-4023 to Be Placed in Service for Irrigation @ COUNTY

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: Jones Well Drilling Inc Telephone #: 410-692-6981
Address: 3700 Rush Rd
Jarrettsville 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): HARVEY KNOPP License# MWD 509

*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: Colman, LLC Telephone #: 410-571-7707
Subdivision: Colman LLC Property Lot #: 1 Well Tag #: HO-95-1998
Site Address: 14625 Carls Mill Rd
Glennwood, MD

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Grundfos</u>	Make: <u>Midwest</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>25530-15</u>	Model#: <u>S-20</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity <u>25</u> GPM	Depth: <u>40</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>3</u> GPM	NSF approved: <input checked="" type="checkbox"/>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>50</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4 - constant pressure system has protection for no water
~~Torque arrestors or Cable guards are required - Must circle one~~
Safety rope, if used, attached to inside of well casing with eye bolt N/A

Piping to house <u>NSF-PW</u>	House Connection
Type: <u>PE 50R9-2"</u>	PVC sleeved to undisturbed soil at well penetration: <input checked="" type="checkbox"/>
PSI: <u>200</u> (160 psi min)	Approximate length of sleeve: <u>5</u> ^{OK}
Depth of supply line: <u>35</u> (36" min)	Sleeve caulked and sealed properly: <input checked="" type="checkbox"/> (PUMCO)

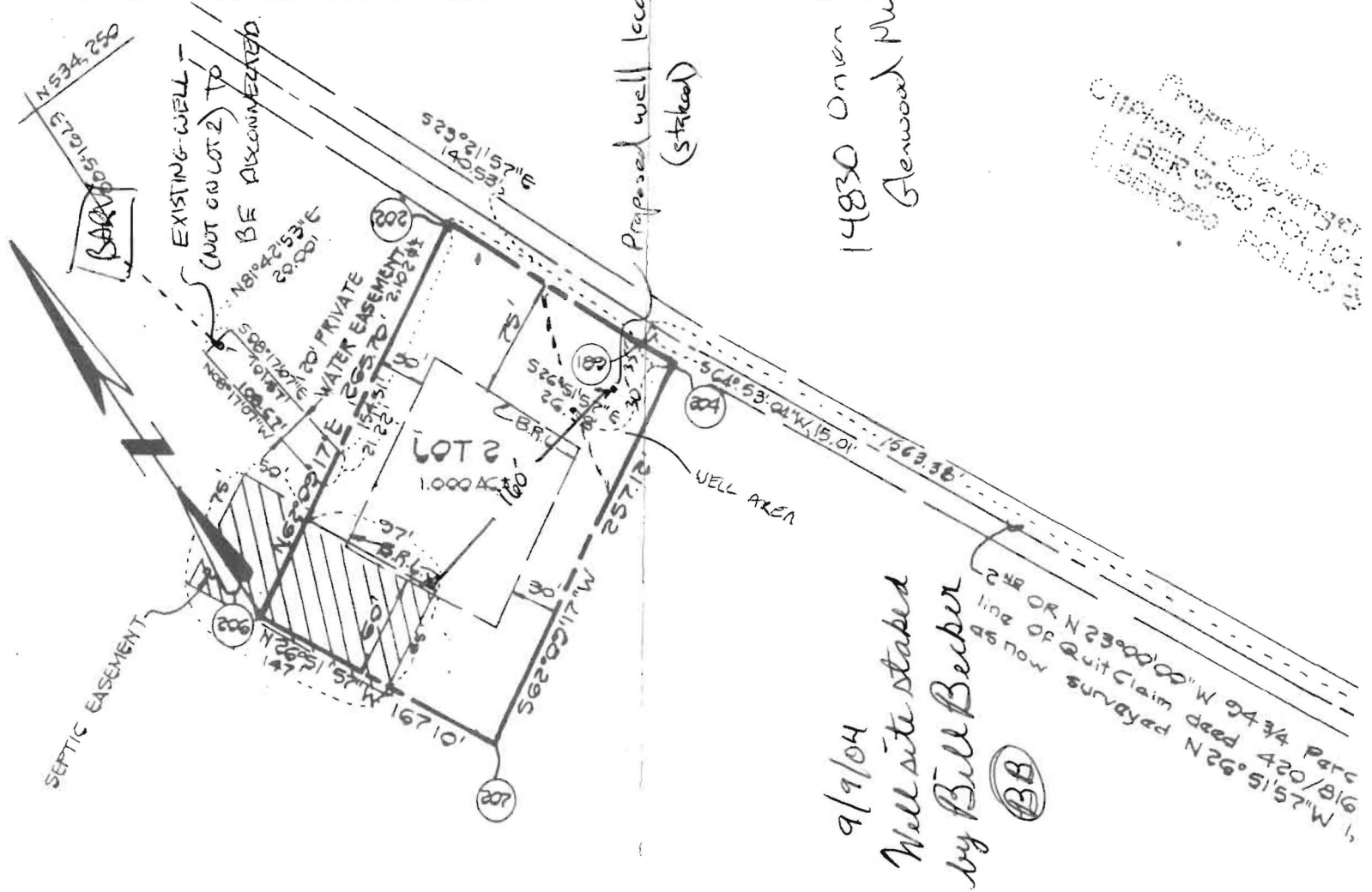
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: David Kelly VP date: 6-24-11

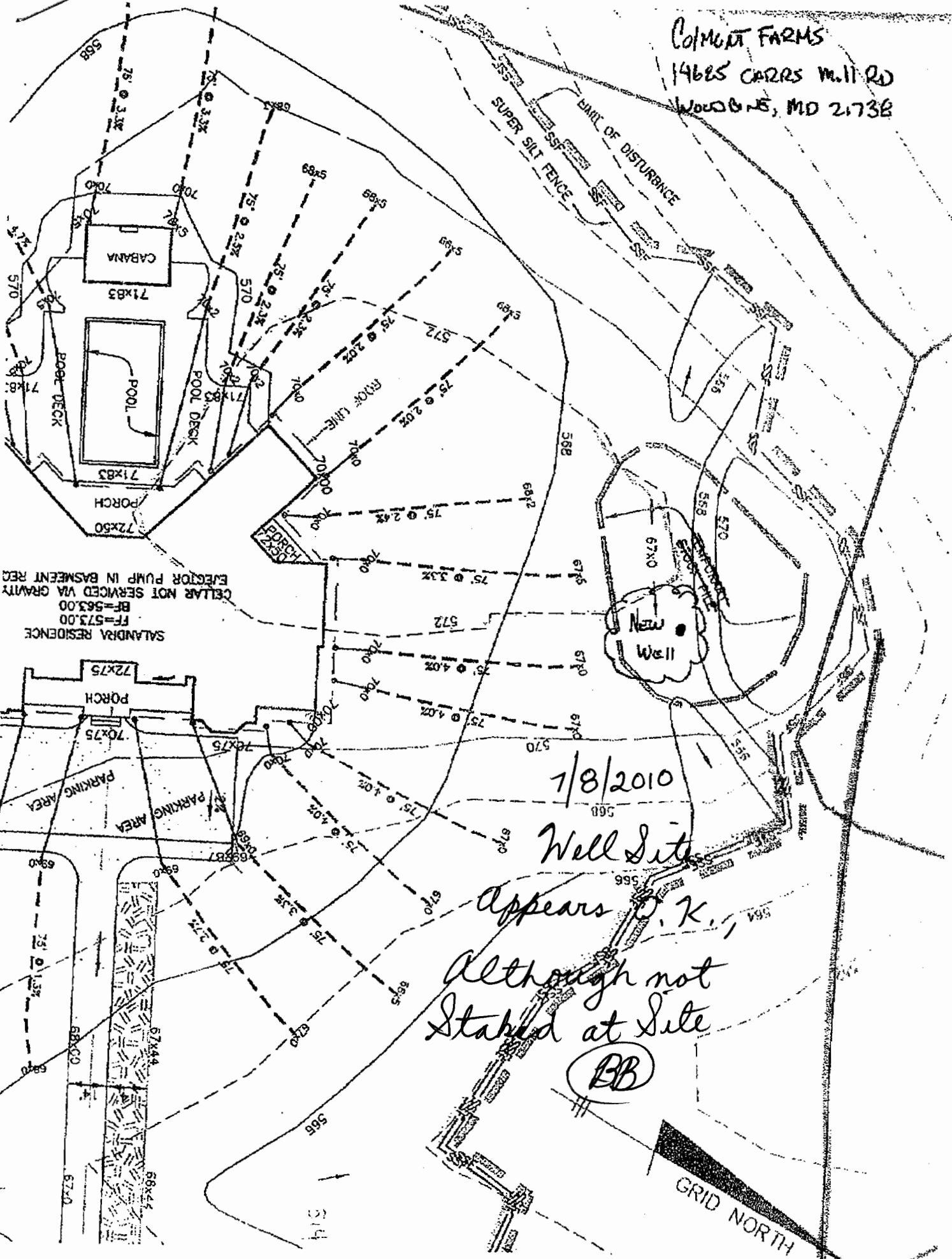
For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: _____ Date Insp. Approved: 6/27/11 (KW)
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

COORDINATE TABLE		
PT.	NORTH	EAST
189	533919.777	791728.760
202	534048.778	791673.028
204	533895.705	791740.954
206	533924.673	791438.092
207	533775.608	791513.605



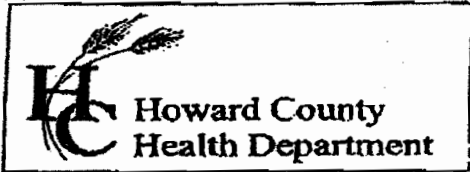
COLMONT FARMS
14625 CARRS MILL RD
WOODBINE, MD 21738



SALADINA RESIDENCE
FF=573.00
BF=563.00
EJECTOR PUMP IN BASEMENT REQ
CELLAR NOT SERVICED VIA GRAVITY

1/8/2010
Well Site
Appears O.K.
Although not
Staked at Site
BB

GRID NORTH



7178 Columbia Gateway Drive, Columbia MD 21046
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Penny E. Borenstein, 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: 14685 Carrs Mill Road

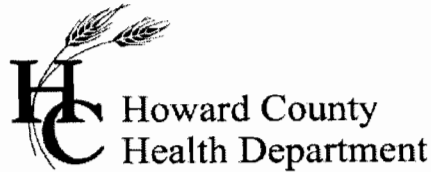
Subdivision/Property Name Lot# Road Name

The well site has been staked by Benchmark
 (professional land surveyor or company employing professional land surveyors)
 on 6-15-10 (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



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
Website: www.hchealth.org

Peter Beilenson, M.D., M.P.H., Health Officer

June 30, 2011

Homeowner
14685 Carrs Mill Road
Glenwood, MD 21738

RE: Colmont Property, Lot 1
BP #: B09000853
Well Permit # HO-95-1948

Dear Sir:

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 **06/21/2011**. Final approval of the well line connection to the dwelling was approved on **06/27/2011**.

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.

Enclosed with this certificate, are copies of the septic permit and the as-built, along with important information regarding the use and maintenance of your septic system. Please read through carefully and thoroughly. Any questions regarding your well and/or septic, please call this office for guidance 410-313-1792.

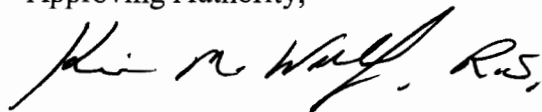
INTERIM CERTIFICATE OF POTABILITY

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-95-1948. 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) 313-1792 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 04/06/2011
Date of Well Completion: 08/12/2010

Approving Authority,



Kevin M. Wolf, R.S./R.E.H.S.
Environmental Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File

JOSEPH L. MAYNE WELL DRILLING

5512 Ridge Road
MT. AIRY, MARYLAND 21771

10-29-08

Howard County Health Department
Bureau Of Environmental Health
7178 Columbia Gateway Drive
Columbia, Md 21046

Well repair for existing well at 14675 Carrs Mill Rd.
Glenwood, Md 21738 for Colmont Farm.
Weld 5'6" steel casing and well cap.
Well has been extended above ground level.

Truly

Joseph L. Mayne

Lic. MSD 024

