

C 1 3101 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A517336

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 table with columns for DESCRIPTION, FEET (FROM, TO), and check if water bearing

GROUTING RECORD section including CEMENT, BENTONITE CLAY, NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD section including MAIN CASING TYPE, Nominal diameter, Total depth

OTHER CASING (if used) section including diameter, depth

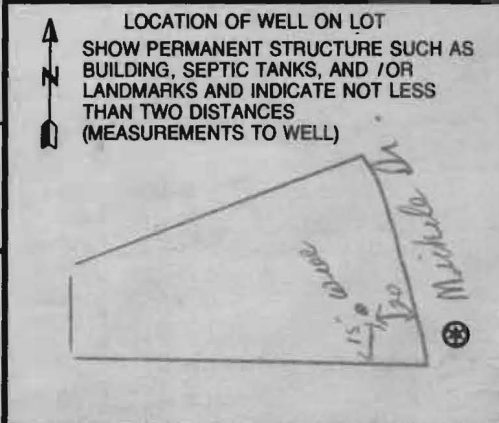
SCREEN RECORD section including screen type or open hole, insert appropriate code below

PUMPING TEST section including HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED

PUMP INSTALLED section including DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT

WELL HYDROFRACTURED, CIRCLE APPROPRIATE LETTER, TEST WELL CONVERTED TO PRODUCTION WELL

DEPTH (nearest ft.) table, E A C H S C 3 R E E N, SLOT SIZE, DIAMETER OF SCREEN



I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04, DRILLERS LIC. NO., DRILLERS SIGNATURE, LIC. NO., SITE SUPERVISOR

GRAVEL PACK, MDE USE ONLY, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

B 1 1076

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

527950

please type

140 - 95 - 1517
fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

15 Last Name Owner First Name 34
Wasfield, Jr. Kennard

36 Street or RFD 55
P.O. Box 30

57 Town 70 State 72 Zip 76
Stenely Md. 21737

B 3

LOCATION OF WELL

8 COUNTY 21
Howard

23 SUBDIVISION 42
The Wasfields II

SECTION 44 46 LOT 48 50
2 21

52 NEAREST TOWN 71
Dayton

MILES FROM TOWN (enter 0 if in town) 73 4 M I 76 77 78

DRILLER INFORMATION

Driller's Name 76 License No. 81
Joseph L. Mayne M 5 D 024

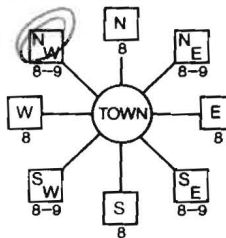
Firm Name
Joseph L. Mayne Well Drilling

Address
5512 Ridge Rd. Mt. Airy, Md. 21771

Signature Date
Joseph L. Mayne 12-10-07

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD 30
Michele Dr.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 20 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39
20 FT

TAX MAP: 27 BLK: 23 PARCEL 114

B 2

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20
500

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
- GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A 517336
COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 2/7/08
43 MM DD YY 48 CO SIGNATURE EXP. DATE 2/9/08

NORTH GRID 516 000 EAST GRID 0795 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 24 28 FEET
300

APPROXIMATE DIAMETER OF WELL NEAREST INCH
6

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE 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) 41 52

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

APPROP. PERMIT NUMBER 1402006G009

PERMIT No. 140-95-1517
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS Please Refer to memo...

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. well
- 2.
- 3.

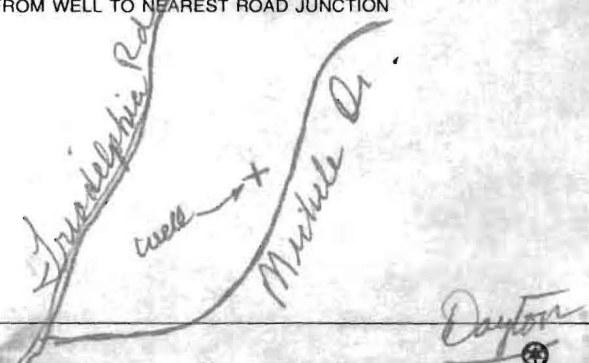
WRITE THE BOX NUMBER FROM THE MAP HERE

E 7985

N 5106

000
000

N



**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: Robert L. Feezer Co., Inc. Telephone #: 410-781-4655
Address: 6321 Barnett Avenue
Sykesville, 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): Robert L. Feezer License# 2122

***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: NV Homes Telephone #: 410-379-5956
Subdivision: Warfield Estates II Lot #: 21 Well Tag #: HO - 95 - 1517
Site Address: 14879 Michele Drive
Glenelg, MD 21737

Submersible Pump Data

Make: Sta-Rite
Model #: S10P4HS07221-01
Pump Capacity ¹⁰ _____ GPM
Well Yield: ¹⁰ _____ GPM

Pitless Adapter

Make: Campbell
Model#: PT800
Depth: 42" (36" min)
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

Depth of well encountered at time of pump installation: 280 (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 N/A

Piping to house

Type: Poly
PSI: 200 (160 psi min)
Depth of supply line: 42" (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.

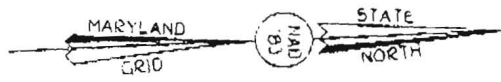
Robert L. Feezer Quality Control by Robert L. Feezer
2000 Howard County Health Department
10/4/2011 Signature of company representative responsible for installation date

Inspection called in 9/26/11 - Inspected 9/26/11

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

Date Insp. Requested: _____ Date Insp. Approved: 9/26/11 Inspector: (KW)
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

S13°21'22"E 48.42'



30' B.R.L.

LOT 21
40,389 Sq.Ft.

2/7/08
well sites
OK

OK
(initials)

N89°34'12"E 372.71'

N67°32'28"E 332.69'

10' B.R.L.

10' B.R.L.

50' B.R.L.

ALI

ALI

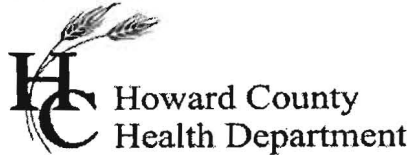
R=400.00' L=196.79'

MICHELE DRIVE

EXHIBIT TO ACCOMPANY
WELL PERMIT
LOT 21
THE WARFIELDS II
SECTION TWO
Lots 6 Thru 68,

Cemetery Open Space Lot 69, And
Buildable Preservation Parcel 'A' And
Non-Buildable Preservation Parcels 'B', Thru 'I'
Tax Map: 21, Grid 23, Parcel: 55
Tax Map: 27, Grid 5, Parcels: 56, 109 And 144
Fourth Election District
Howard County, Maryland
Date: December 6, 2007
F-07-040

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTRAL SQUARE OFFICE BUILDING • 10272 BALTIMORE NATIONAL PIKE
BELLGATE CITY MARYLAND 21042
(410) 481-2895



Bureau of Environmental Health
7178 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 L. Beilenson, M.D., M.P.H., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – April 7, 2012

October 11, 2011

Homeowner
14879 Michele Drive
Glenelg, MD 21037

**RE: The Warfields II, Lot 21
14879 Michele Drive
Building Permit: B11001632
Well Permit: HO-95-1517**

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 **09/27/2011**. Final approval of the well line connection to the dwelling was granted on **09/26/2011**. The well construction was completed on **03/07/2008**. Water samples were collected on **10/05/2011**.

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. 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-95-1517. 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

Jeff Williams
Program Supervisor
Well & Septic Program

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

Water Testing Laboratories

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

of Maryland, Inc.

N V Homes
C/O Robert Feezer Company
6321 Barnett Avenue
Sykesville, MD 21784

Reporting Date: 10/7/2011
Report #: K7619

Submitted Sample Address: 14879 Michele Drive
Glenelg, MD
Submitted Sample Source: Holding tank
Date / Time Collected: 10/5/2011 9:11 AM
Sample Type: Drinking Water
Sampler/Company: D. Pitts 4322DP, WTL of MD
Field Record: Chlorine residual: Absent Clear when drawn
Well #: HO-95-1517
Permit #: B11001632

Analytical Results

Parameter	Result	Units	Report Limit	MCL	Analytical Method
Total Coliforms	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
<i>E. Coli</i>	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
Nitrates + Nitrites	7.3	mg/L	1.0	10	EPA 353.2
Sand	Absent	P/A	Present/Absent	Present	Visual
Turbidity	ND	NTU	0.5	10	SM 2130B
pH	5.8	SU	0.1	6.5-8.5 (SMCL)	SM 4500 H ⁺ B

Notes:

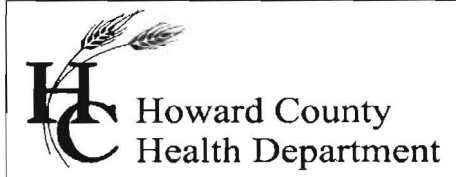
1. Bacteriological analysis of this sample indicates this water is **safe** for human consumption.
2. MCL is EPA's maximum contaminant level under primary drinking water regulations. SMCL is secondary maximum contaminant level and is the aesthetic quality only. If your result is above any MCL or SMCL, you may want to consider a water treatment system or a new well. Please check your local regulations for any restrictions or additional limits.
3. ND - Not Detected.
4. Sample received and examined within EPA's recommended holding time
5. Analyzed by Lab 214.
6. SM - Greenberg, Clesceri and Eaton, *Standard Methods for the Examination of Water and Wastewater*, 21st Ed.

Reported by,



C. Rodgers, Customer Service Representative

Reviewed by: _____



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TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

Friday, February 08, 2008

IMPORTANT

MEMORANDUM

To: WELL DRILLER,
FILE

From: Kevin Wolf, Sanitarian
Well and Septic Program

Re: The Warfield's II (F-07-040)
Lot 21

In order to preserve the quality of ground drinking water, a special condition has been set for lot 21 for the above referenced property. This condition requires the driller to seal off the upper strata by placing a certain amount of casing to the approximate depth below the very first water-bearing fracture OR a minimum of 75 feet (which ever comes first). For example, if you hit a water-bearing fracture at 53 feet, then there should be at least 55 feet of casing or enough casing to get below that fracture. **Any deviations to this condition are to be prior approved by the Health Department.**



Howard County
Health Department

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website: www.hchealth.org

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

Thursday, February 07, 2008

IMPORTANT

MEMORANDUM

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FILE

From: Kevin Wolf, Sanitarian
Well and Septic Program

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