

C1 6587

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER 13

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 05 24 06

Depth of Well 140 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-95-0022

OWNER JTS Corp STREET OR RFD 1st name Marygrove Farm Ct TOWN Clonely SUBDIVISION SECTION 21/12/12 LOT 6

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 Top Soil, Sandstone, MICKA, Sandstone, MICKA.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (PL) Nominal diameter top (main) casing (6) Total depth of main casing (32)

OTHER CASING (if used)

Table for other casing with columns: diameter inch, depth (feet) from, to.

SCREEN RECORD

screen type or open hole (ST, BR, HO, PL, OT) insert appropriate code below

DEPTH (nearest ft.) 140

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" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 M D 112 DRILLERS SIGNATURE

LIC. NO. 1 D

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

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

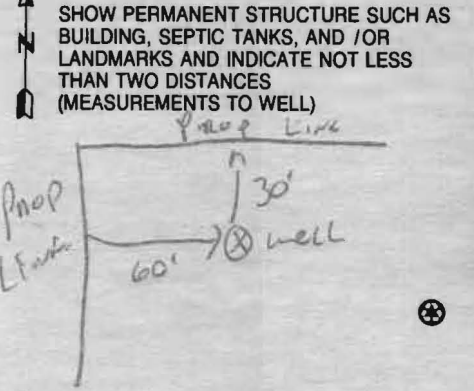
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 15 ft. WHEN PUMPING 17 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES (NO) 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) 31 PUMP HORSE POWER 37 PUMP COLUMN LENGTH (nearest ft.) 43 CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE - below 2 (nearest foot)

LOCATION OF WELL ON LOT



B 1 8908

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HD - 95 - 0022 fill in this form completely

522472 please type

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

J.T.S. Corp Owner First Name 34 8800 Centre Park Dr. Suite 209 Street or RFD 55 Columbia MD 21045 Town 57 State 70 Zip 76

B 3 LOCATION OF WELL

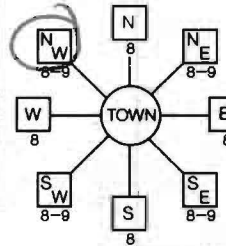
8 COUNTY Howard 21 Musgrove Farm 23 SUBDIVISION SECTION 44 46 LOT 6 48 50 GLEWELG 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 2 M 73 76 77 78

DRILLER INFORMATION

Ralph E. Mayne MS D 117 Driller's Name 76 License No. 81 Ralph E. Mayne Inc Firm Name 17024 Handy rd Mt Airy MD 21221 Address 76 E. Mayne 5-1405 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD Musgrove Ct. 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 225 37 DISTANCE FROM ROAD 41 ENTER FT OR MI 38 39

TAX MAP: 21 BLK: 12 PARCEL 12

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 13 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 6/2/05 6/2/06 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 524 000 EAST GRID 798 000 50 55 57 63

APPROXIMATE DEPTH OF WELL 150 FEET 24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

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)

- (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 DEEPEMED 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 HD 2005 G007 PERMIT No. HD 95 - 0022 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

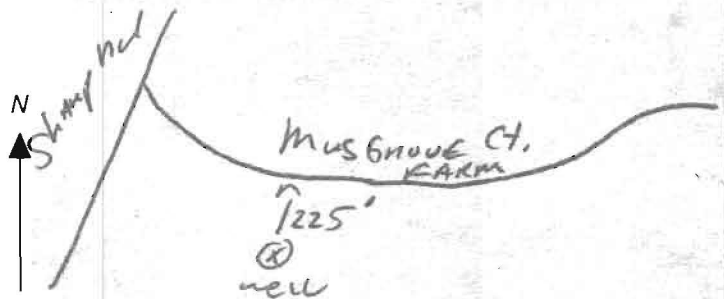
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 525 798 000 000 N 800 524

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 USE SEPARATE SHEET IF NEEDED

Allen: Mike

**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: Home Land Pump & Water Telephone #: 443-846-8659
Address: 335 Barley Circle
Warner, PA 17331

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:
Name (Print): Michael Dodd License# PI 0161

*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: Ryan Thomas Telephone #: 410-365-1325 (Pat)
Subdivision: Musgrave Farm Lot #: 6 Well Tag #: HO-95-0022
Site Address: 14322 Musgrave Farm
Glenwood, MD 21737

| | | |
|--|--|--|
| Submersible Pump Data | Pitless Adapter | Well Cap and Electric Conduit |
| Make: <u>Grundfos</u> | Make: <u>Camell</u> | Two piece watertight cap: <input checked="" type="checkbox"/> |
| Model #: <u>1550E07180</u> | Model#: <u>PAB00</u> | Screened, vented well cap: <input checked="" type="checkbox"/> |
| Pump Capacity <u>15</u> GPM | Depth: <u>100</u> (36" min) | Cap secured to casing: <input checked="" type="checkbox"/> |
| Well Yield: <u>25</u> GPM | NSF approved: <input type="checkbox"/> | Conduit min 1 1/2" B.G.: <input checked="" type="checkbox"/> |
| Depth of well encountered at time of pump installation: <u>80</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
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

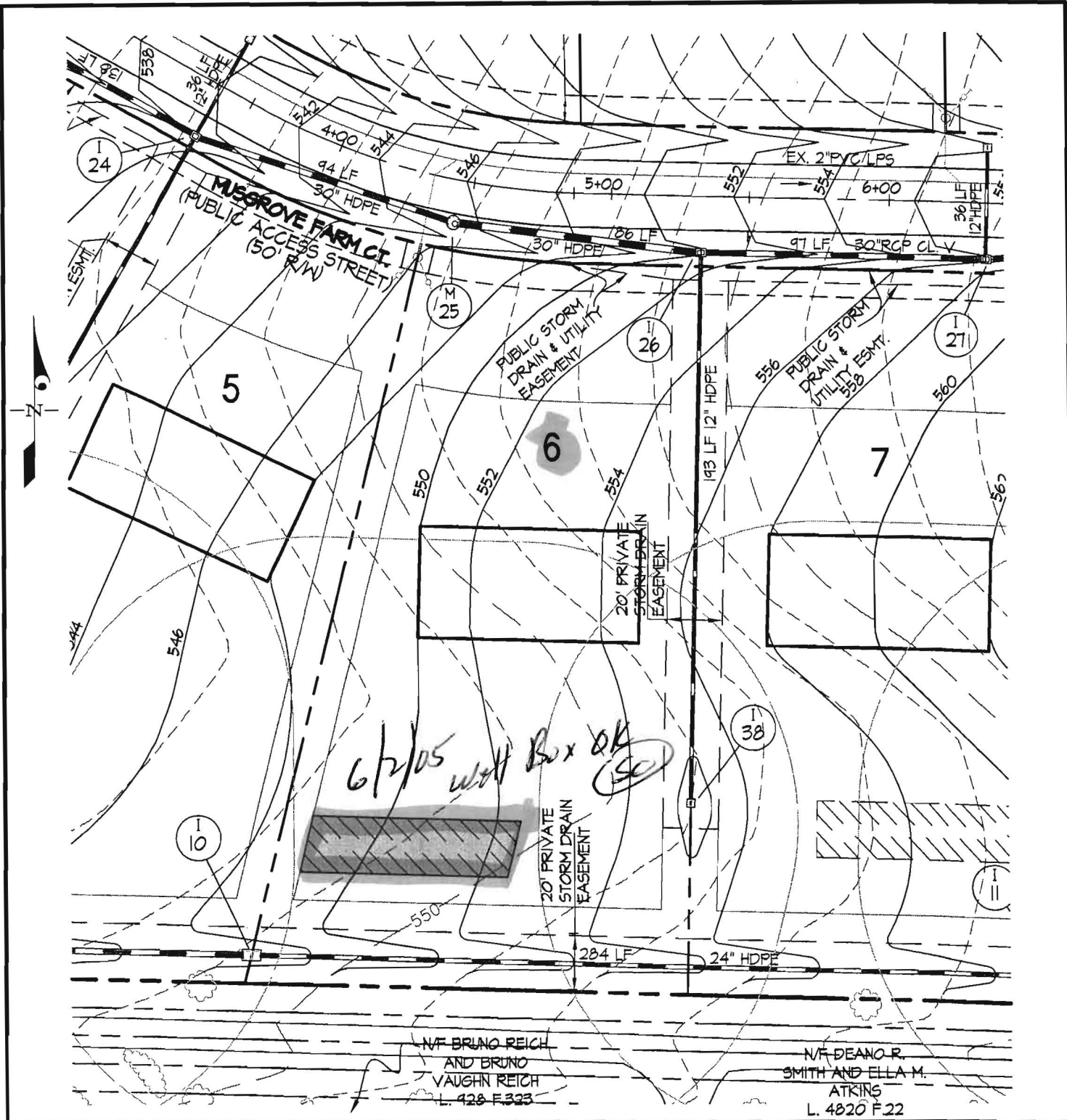
| | |
|---------------------------------------|--|
| Piping to house | House Connection |
| Type: <u>SUDRY HOE R/C</u> | PVC sleeved to undisturbed soil at wall penetration: <input checked="" type="checkbox"/> |
| PSI: <u>160</u> (160 psi min) | Approximate length of sleeve: <u>6'</u> |
| Depth of supply line: <u>36"</u> min) | Sleeve caulked and sealed properly: <input checked="" type="checkbox"/> |


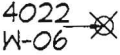

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] date: 1-5-09

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

| | |
|---|---|
| Date Insp. Requested: _____ | Date Insp. Approved: <u>11/25/08</u> <u>[Signature]</u> |
| Inspection Data: | |
| Pitless adapter and water supply line at least 36" below grade | <input checked="" type="checkbox"/> |
| Two piece cap installed and attached to casing securely | <input checked="" type="checkbox"/> |
| Elec. conduit extends at least 18" below grade/attached to cap properly | <input checked="" type="checkbox"/> |
| Safety rope installed inside of well casing | <input checked="" type="checkbox"/> |
| Correct well tag attached properly and casing 8" above finished grade | <input checked="" type="checkbox"/> |
| Water supply line sleeved adequately at house connection | <input checked="" type="checkbox"/> |
| Adequate grout observed below pitless adapter | <input checked="" type="checkbox"/> |

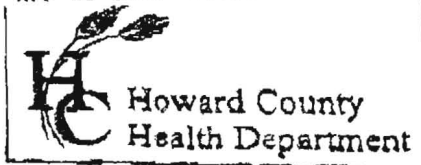


| | | |
|---|----------------------|---|
| LEGEND | | |
|  | CONCEPTUAL HOUSE BOX |  4022 W-06 WELL SURVEY POINT |
|  | WELL BOX | |

WELL LOCATION EXHIBIT - LOT 6

MUSGROVE FARM
 Lots 1 thru 30, Buildable Preservation Parcels 'A',
 and Non-Buildable Preservation Parcels 'C' and 'D'

GLW GUTSCHICK LITTLE & WEBER, P.A.
 CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS
 3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK
 BURTONSVILLE, MARYLAND 20866
 TEL: 301-421-4024 BALT: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186



3525 H Ellicott Mills Drive • Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2923 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

ATTENTION WELL DRILLERS!!!

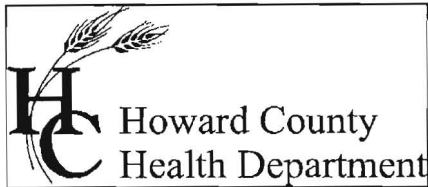
Muscrow Farm

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by Gutschick Little & Weber PA on 05/25/05 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(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

January 6, 2009

Occupant
14322 Musgrove Farm Court
Glenwood, MD 21738

SENT VIA FACSIMILE 410-796-7094

RE: Musgrove Farm, Lot 6
BP# B08001058
Well Tag #: HO-95-0022

Dear Sir:

This is to advise you that the septic house connection and grinder pump for the above referenced property has been installed and inspected. **Final approval of these was granted on 12/06/2009. Final approval of the well line connection to the dwelling was approved on 11/25/2008.**

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, is a copy 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 410-313-1771.

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-95-0023. 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: 01/02/2009
Date of Well Completion: 05/04/2006

Approving Authority,

Brian Baker, Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File

Environmental Testing Lab Inc.

108 Old Solomons Island Rd
Annapolis, MD 21401



3430 Rockefeller Ct
Waldorf, MD 20602

*State Certified Water Quality
Laboratory # 106*

*State Certified Water Quality
Laboratory # 139*

REPORT OF ANALYSIS

Tim Shotzberger
Home Land Septics
308 Liberty Road
Baltimore, MD 21221

Lab Number: 80936
Date Received: 1/2/09 14:05
Project: HO-95-0022

Sample No: 80936-01 Sampled: 1/2/2009 1:30:00 PM
Client ID: Ryan Homes (NVR) Sampler: 8065TS Shotzberger
Musgrove Farm Lot #6
14322 Musgrove Farm
Ct
Glenwood, MD 21737

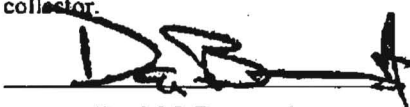
Sample Point: Master Bath

| Parameter | Method | Result | Units | RL | Test Date | Analyst |
|-------------------------|-----------|-------------|-----------|-----|-----------|---------|
| Bacteria-Total Coliform | SM 9223 | Absent/PASS | Per/100ml | 1 | 1/2/2009 | LH |
| Clarity | Visual | Clear | | | 1/2/2009 | |
| Nitrate + Nitrite as N | EPA 353.2 | 9.6 | mg/l | 1.1 | 1/5/2009 | PM |
| Sand | Visual | 0 | g/L | | 1/2/2009 | |
| Turbidity | EPA 180.1 | < 0.5 | NTU | 0.5 | 1/5/2009 | PM |
| Bacteria-E.coli | SM 9223 | Absent/PASS | Per/100ml | 1 | 1/2/2009 | LH |

Notes:

- 80936-01 Maximum Contaminant Level in Drinking Water for Nitrate+Nitrite is 10.0 mg/L, Nitrate-N 10.0 mg/L and Nitrite-N 1.0 mg/L as established by the US EPA.
80936-01 No chlorine present at the time of collection as reported by the sample collector.

Reviewed and Approved by: _____


Daniel J. Brumsted
Laboratory Director