

C1 5146

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 300

PERMIT NO. FROM "PERMIT TO DRILL WELL" 95-1151

OWNER Land Design + Development Hunterbrooke Lane TOWN Fulton

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Overburden, Soft shale, Brown shale, Gray Rock, and Water at 93+243'.

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

CASING RECORD: casing types (Steel, Concrete, Plastic, Other), MAIN CASING TYPE (PL), Nominal diameter (6"), Total depth of main casing (70').

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

SCREEN RECORD: screen type or open hole (Steel, Brass, Plastic, Open Hole, Other), DEPTH (70, 300).

NUMBER OF UNSUCCESSFUL WELLS: 0

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. M 5D 562, DRILLERS SIGNATURE, LIC. NO. AW D 766, DRILLER: Darl Hale

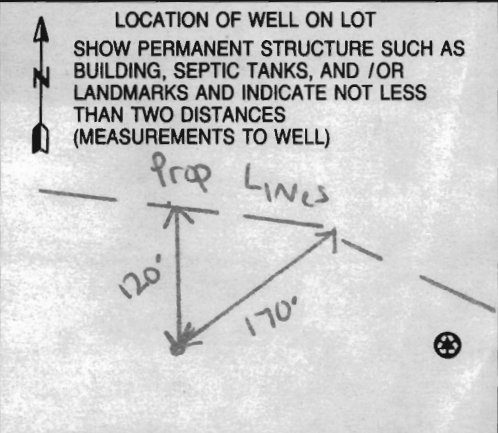
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (8.57), METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED (S submersible)

PUMP INSTALLED: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (above land surface)



B 1 8386

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 526668 please type

STATE PERMIT NUMBER 140-95-1151 fill in this form completely

Date Received (APA) 4/26/07

B 3 Howard LOCATION OF WELL

OWNER INFORMATION Land Design & Development 15 Last Name Owner First Name 34 5300 Dorsey Hall Drive 36 Street or RFD 55 Ellicott City MD 21043 57 Town 70 State 72 Zip 76

8 COUNTY 21 Dustin Property 23 SUBDIVISION 42 SECTION 44 46 LOT 3 48 50 Fulton 52 NEAREST TOWN 71

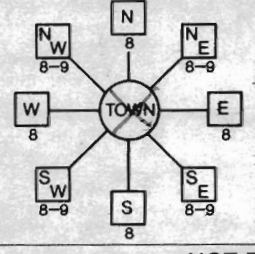
DRILLER INFORMATION

Michael D. Isom M SD 162 Driller's Name 76 License No. 81 G. Edgar Harr Sons' Corp. Firm Name 12047 Falls Road, Cockeysville 21030 Address 4/17/07 Date Signature

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

B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 750 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Hunterbrooke Lane 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH 34 1000 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 46 BLK: 2 PARCEL 103

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) A522884 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 6/15/07 CO SIGNATURE EXP. DATE 9/15/08 NORTH GRID 478 000 EAST GRID 0820 000

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL 5 INCH 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

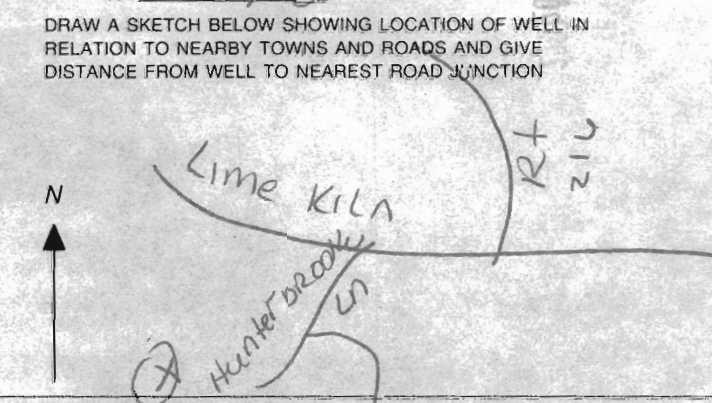
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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 DEEPEAN 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 G PERMIT No. 140-95-1151 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 820 N 478



SPECIAL CONDITIONS

**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: Brandon Smith Contractors Telephone #: 410-489-6909  
Address: 6604 Carleton Ct  
Laurel MD 20707

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

License # and name of individual responsible for the field installation:

Name (Print): Brandon Smith License# UTL 09218

**\*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: \_\_\_\_\_ Telephone #: 410-596-6112  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO-95-1151 ✓  
Site Address: 8068 Hunterbrook Lane  
Fulton MD 20759

**Submersible Pump Data**

**Pitless Adapter**

**Well Cap and Electric Conduit**

Make: \_\_\_\_\_ Make: \_\_\_\_\_ Two piece watertight cap: \_\_\_\_\_  
Model #: \_\_\_\_\_ Model#: \_\_\_\_\_ Screened, vented well cap: \_\_\_\_\_  
Pump Capacity \_\_\_\_\_ GPM Depth: \_\_\_\_\_ (36" min) Cap secured to casing: \_\_\_\_\_  
Well Yield: \_\_\_\_\_ GPM NSF/WSC approved: \_\_\_\_\_ Conduit min 18" B.G.: \_\_\_\_\_  
Depth of well encountered at time of pump installation: \_\_\_\_\_ (feet) Conduit secured to well cap: \_\_\_\_\_  
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

**Piping to house**

**House Connection**

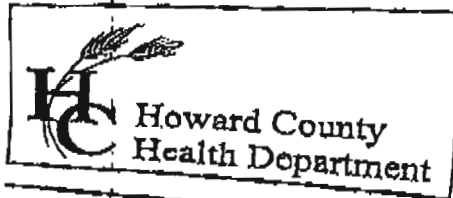
Type: \_\_\_\_\_ PVC sleeve to undisturbed soil at wall penetration: \_\_\_\_\_  
PSI: \_\_\_\_\_ (160 psi min) Length of sleeve(5' minimum from foundation): \_\_\_\_\_  
Depth of supply line: \_\_\_\_\_ (36" min) Sleeve sealed properly: \_\_\_\_\_

**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: Brandon Smith date 8-16-13

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 8-19-13 Inspector: (KJD)  
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 ✓



7178 Columbia Gateway Drive, Columbia, MD 21046  
 (410) 313-2640 Fax (410) 313-2640  
 TDD (410) 313-2323 Toll Free 1-866-313-2640  
 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:		
<u>Dustin Property</u>	<u>1-3</u>	<u>Hunterbrooke Lane</u>
Subdivision/Property Name	Lot#	Road Name

- The well site has been staked by Fisher, Collins + Carter,  
 (professional land surveyor or company employing professional land surveyors)  
 on \_\_\_\_\_ (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.

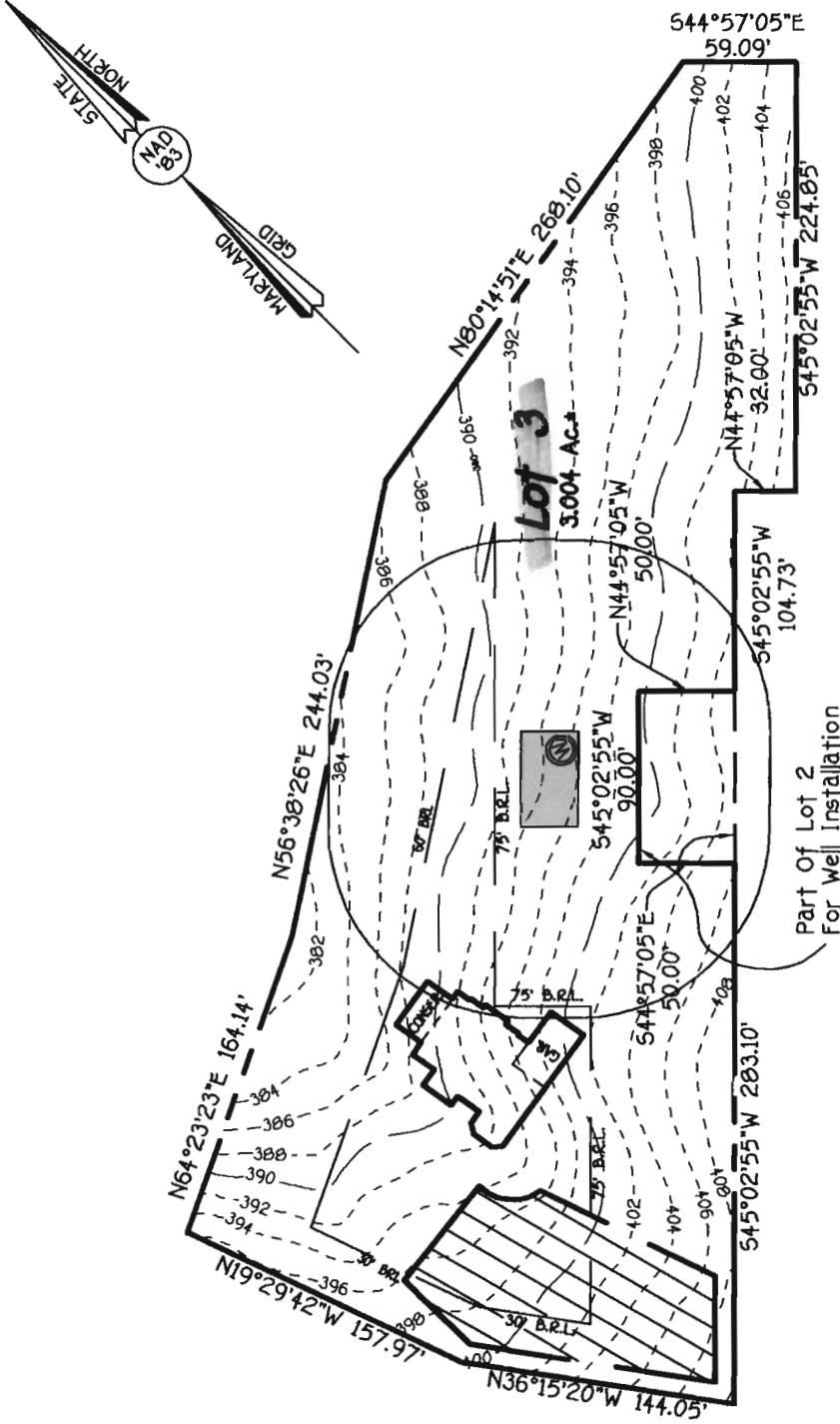
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/05

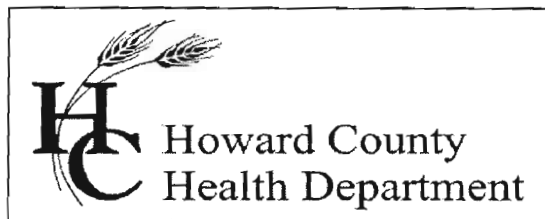
I:\105072\dwg\05072 Well Exhibit For Lot 3.dwg, 4/30/2007 7:22:40 AM, 1:100

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2855

EXHIBIT TO ACCOMPANY  
WELL PERMIT  
LOT 3  
DUSTIN PROPERTY  
TAX MAP 46 GRID 1 & 2 PARCELS 103 & 184  
HOWARD COUNTY, MARYLAND  
SCALE 1"=100'  
DATE APRIL 6, 2007



6/14/07  
well Box OK.  
staked by  
FCC  
*(Kee)*



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
Main: 410-313-6300 | Fax: 410-313-6303  
TDD 410-313-2323 | Toll Free 1-866-313-6300  
www.hchealth.org  
Facebook: www.facebook.com/hocohealth  
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

## INTERIM CERTIFICATE OF POTABILITY

Expiration Date – March 1, 2014

October 1, 2013

Homeowner  
8068 Hunterbrooke Drive  
Fulton, Maryland, MD 20759

**RE: Dustin Property, Lot #3  
8068 Hunterbrooke Drive  
Building Permit: BB13000165  
Well Permit: HO-95-1151**

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 **9/23/13**. Final approval of the well line connection to the dwelling was granted on **8/19/13**. The well construction was completed on **7/30/07**. Water samples were collected on **9/9/13**.

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-95-1151. 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,

A handwritten signature in cursive script that reads "Dana Bernard".

Dana Bernard, REHS/ RS  
Environmental Sanitarian  
Well & Septic Program

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

Stephen Blaes  
3500 Manor Ln

Friday, September 20, 2013

Ellicott City, MD 21042  
Attention: Stephen Blaes

## FINAL Certificate of Analysis

Report for Lab No: 10329, 10441.  
Sampling by Martel.

P.O. Number: Prepaid, Check #3842

Project Identification: 8068 Hunterbrooke Lane, Fulton, MD

MARTEL NO.	CLIENT SAMPLE IDENTIFICATION	Sample Date/Time			
10329 000001	Hose bib next to pressure tank, grab	09/09/2013 11:45			
Compound	Test Value	Test Unit	Method	Detection Limit	Analysis Date/Time/Initial
Total Coliform, Quantitray	3	mpn/100ml	SM 9223 B-94	1	09/09/2013 14:59 MA
Chlorine (total residual)	<0.02	mg/l	SM 4500Cl-G	0.02	09/09/2013 11:45 TM
Nitrate Nitrogen	<2.0	mg/l	SM 4500-NO3 D00	2.0	09/09/2013 15:30 BJ
Turbidity	1.3	ntu	SM 2130 B-01	0.05	09/10/2013 16:15 KM
Escherichia Coli, Quantitray	<1	mpn/100ml	SM 9223 B-94	1	09/09/2013 14:59 MA

MARTEL NO.	CLIENT SAMPLE IDENTIFICATION	Sample Date/Time			
10441 000001	Hose Bib Next to Pressure Tank	09/13/2013 09:45			
Compound	Test Value	Test Unit	Method	Detection Limit	Analysis Date/Time/Initial
Total Coliform, Quantitray	<1	mpn/100ml	SM 9223 B-94	1	09/13/2013 15:21 MA
Chlorine (total residual)	<0.1	mg/l	SM 4500Cl-G	0.1	09/13/2013 09:45 CD

retest

→ BUILDING PERMIT # B13000165

Results OK  
9/25/13 HS

8930 STANFORD BLVD.  
COLUMBIA

# MARTEL



**Stephen Blaes**  
3500 Manor Ln

Friday, September 20, 2013

Ellicott City, MD 21042

**Attention: Stephen Blaes**

Report for Lab No: 10329, 10441.

Sampling by Martel.

P.O. Number: Prepaid, Check #3842

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**FINAL**

***Certificate of Analysis***

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Chlorine (total residual)	<0.1	mg/l	SM 4500Cl-G	0.1	09/13/2013 09:45 CD

**Martel Laboratories JDS Inc.**

BLAESS

Page 1 OF 2

1025 Cromwell Bridge Road - Baltimore, Maryland 21286  
PH 410-825-7790 FAX 410-821-1054

Questions, comments or concerns? Contact your Martel representative or email [martel@martellabs.com](mailto:martel@martellabs.com)

09/20/2013

# MARTEL



## Certificate of Analysis

Martel Laboratories *JDS* Inc.

SMPLOG03

1025 Cromwell Bridge Road - Baltimore, Maryland 21286  
PH 410-825-7790 FAX 410-821-1054 EMAIL: martel@martellabs.com

BLAESS

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09/20/2013  
stdshdl.frx

### Notes and references:

40CFR141=U.S. "Code of Federal Regulations", Title 40, Protection of the Environment, Part 141, National Primary Drinking Water Regulations. SM="Standard Methods for the Examination of Water and Wastewater", American Public Health Association, American Water Works Association, and Water Environment Federation. Year in method code is approved date.

All samples tested were in acceptable condition, unless otherwise noted.  
The results presented herein relate only to the samples or items tested.

  
Project Manager



