

C1 0252

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 13

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

3/22/01 OK BB

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-94-2932

DATE Received MM DD YY 8 13

03-10-2001

22 225 26 (TO NEAREST FOOT)

OWNER Dale Thompson Builders Preservation Court TOWN Fulton SUBDIVISION Pindell Woods SECTION 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: Tan sandy micasilts (0-70'), Grey med. hard mica rock (70'-225'), water at 180'

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N)

TYPE OF GROUTING MATERIAL (C) (B) NO. OF BAGS 19 NO. OF POUNDS 1786 GALLONS OF WATER 114 DEPTH OF GROUT SEAL (to nearest foot) from 0' to 75'

CASING RECORD casing types insert appropriate code below (S) (C) (P) (O) STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot) P 6 75'

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole (S) (B) (H) (P) (O) STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER 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...

DRILLERS LIC. NO. M WD 355 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M WD 350 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2 DEPTH (nearest ft.)

Table with columns: Casing depth (ft.) from 8 to 51. Values: 75, 225

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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.) 10 METHOD USED TO MEASURE PUMPING RATE water bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 36 WHEN PUMPING 111 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (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

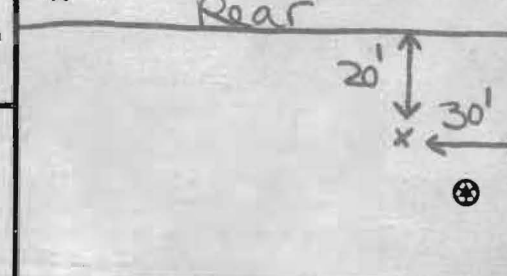
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height) (+) above (-) below LAND SURFACE 2' (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)



B 1 03173

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-2932

W514687 please print or type

fill in this form completely

Date Received (APA)

12/2/00

OWNER INFORMATION

DALE Thompson Builders
10300 Woodside Court
Columbia Maryland 21045

LOCATION OF WELL

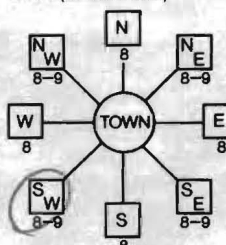
Howard
Pindell Woods
Simpsonville

DRILLER INFORMATION

Michael Barlow MW D 355
MICHAEL Barlow Well Drilling Inc
582 Underwood Lane Bel Air Md

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Preservation
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



210
DISTANCE FROM ROAD
ENTER FT OR MI

TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE 5
AVERAGE DAILY QUANTITY NEEDED 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
COUNTY NAME COUNTY NO.
STATE SIGNATURE
DATE ISSUED
CO SIGNATURE EXP. DATE
NORTH GRID 488 0 0 0 EAST GRID 0823 0 0 0

APPROXIMATE DEPTH OF WELL 260 FEET

APPROXIMATE DIAMETER OF WELL 6 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

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)

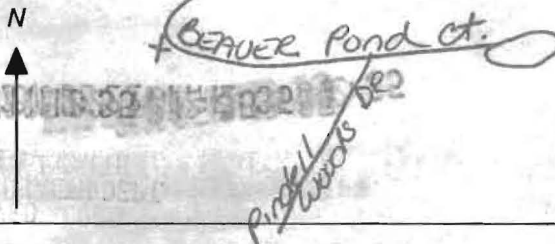
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

8203
49082

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



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

APPROP. PERMIT NUMBER HO 000 GAP 012(01)
PERMIT No. HO-94-2932

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED





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: WILLOUGHBY PLUMBING Telephone #: 410-781-7051  
Address: 16203 PATRICK DR  
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): CHRIS WILLOUGHBY License# 6992

\*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: Mr. Morrison Telephone #: 410-995-10730  
Subdivision: Griddle Woods Lot #: 10 Well Tag #: HO 94-2932  
Site Address: 7213 PRESERVATION CT  
FULTON, MD 20759

3/01  
Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit  
Make: JACOZZI Make: HALVARD Two piece watertight cap:   
Model #: \_\_\_\_\_ Model#: \_\_\_\_\_ Screened, vented well cap:   
Pump Capacity 6 GPM Depth: 48" (36" min) Cap secured to casing:   
Well Yield: 1000 GPM NSF/WSC approved: \_\_\_\_\_ Conduit min 18" B.G.:   
Depth of well encountered at time of pump installation 25 (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

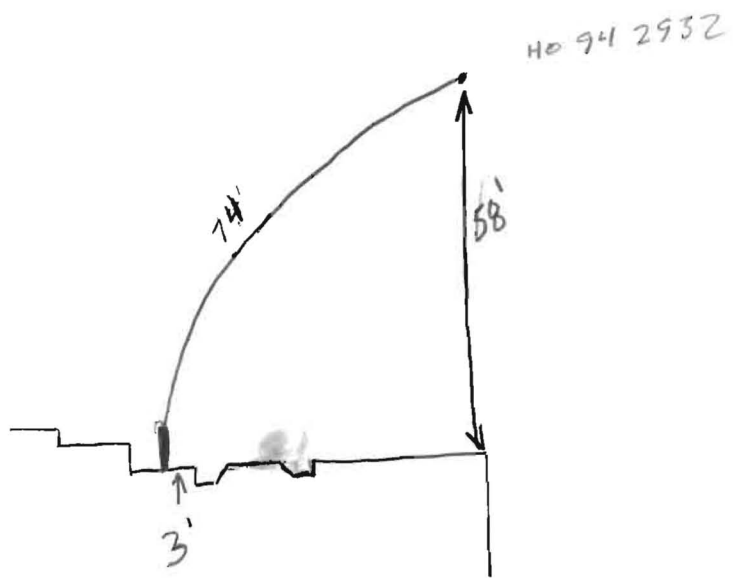
Piping to house House Connection  
Type: CRESTLINE PVC sleeve to undisturbed soil at wall penetration:   
PSI: 1" (160 psi min) Approximate length of sleeve: 6'  
Depth of supply line:  (36" min) Sleeve caulked and sealed properly:

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: Chris Willoughby date: 7/14/05

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

Date Insp. Requested: 7/21/05 Date Insp. Approved: 7/21/05 Inspector: GAC  
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 seen 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



**CASSELL TESTING, INC.**

ENVIRONMENTAL SAMPLING AND TESTING  
10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211  
(410) 252-7742

REPORT DATE: Nov 18, 2005

County Howard

Lab Number 06-1182

Sample iced Yes

Residual Cl<sub>2</sub> <0.1 mg/L Yes

cc: County Health Dept. Yes

**CERTIFICATE OF ANALYSIS**

Maryland State Certified Water Quality

Laboratory No. 115

REQUESTER: Dale Thompson Builders  
6300 Woodside Court  
Columbia, Maryland 21046

Property Sampled: U&amp;D: 7213 Preservation Court

Station Sampled: Kitchen and Pressure tank taps

Tax Map #: 41

Date/Time Sampled: Nov 17, 2005 10:55 am

Parcel #: 274

Owner, Telephone No.:

Sampler: 67246P

Subdivision Name: Pindell Woods

Lot Number: 6

Building Permit No.: 800151836

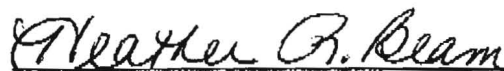
Well Number: HO-94-2932

Observation: 2-Piece Cap  
Satisfactory**RESULTS OF ANALYSIS:**

PARAMETER	RESULT	METHOD	*MCL/**SMCL	
Nitrate	<1.0 mg/L as N	SM 4500D	*10 mg/L as N	Pass
Turbidity (Raw)	<1.0 NTU	EPA 180.1	*10 NTU	Pass
pH	6.3 Units	EPA 150.1	**6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	Absent	SM 9223B	*Absent	SAFE
E. coli (18 Hour Test)	Absent	SM 9223B	*Absent	SAFE

Treatment/Conditioning: Sediment Filter

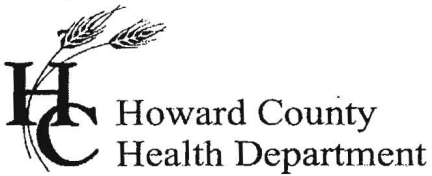
\*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, odor, or color) in drinking water.



Heather R. Beam

\*MCL = Maximum Contamination Level

\*\*SMCL = Secondary Maximum Contamination Level



7178 Columbia Gateway Drive, Columbia Maryland 21046  
(410) 313-1771 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

November 22, 2005

Dale Thompson Builders  
6300 Woodside Court  
Columbia, MD 21046

*SENT VIA FACSIMILE 301-381-8747 - 410-995-6736*

RE: Pindell Woods, Lot 6  
7213 Preservation Court  
Fulton, MD 20759  
BP #: B00151836  
Well Permit # HO-94-2932

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 11/22/2005. Final approval of the well line connection to the dwelling was approved on 7/21/2005.**

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.

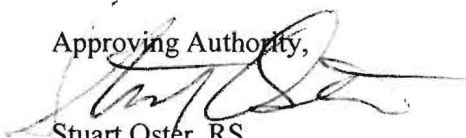
#### INTERIM CERTIFICATE OF POTABILITY

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-94-2932. 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.**

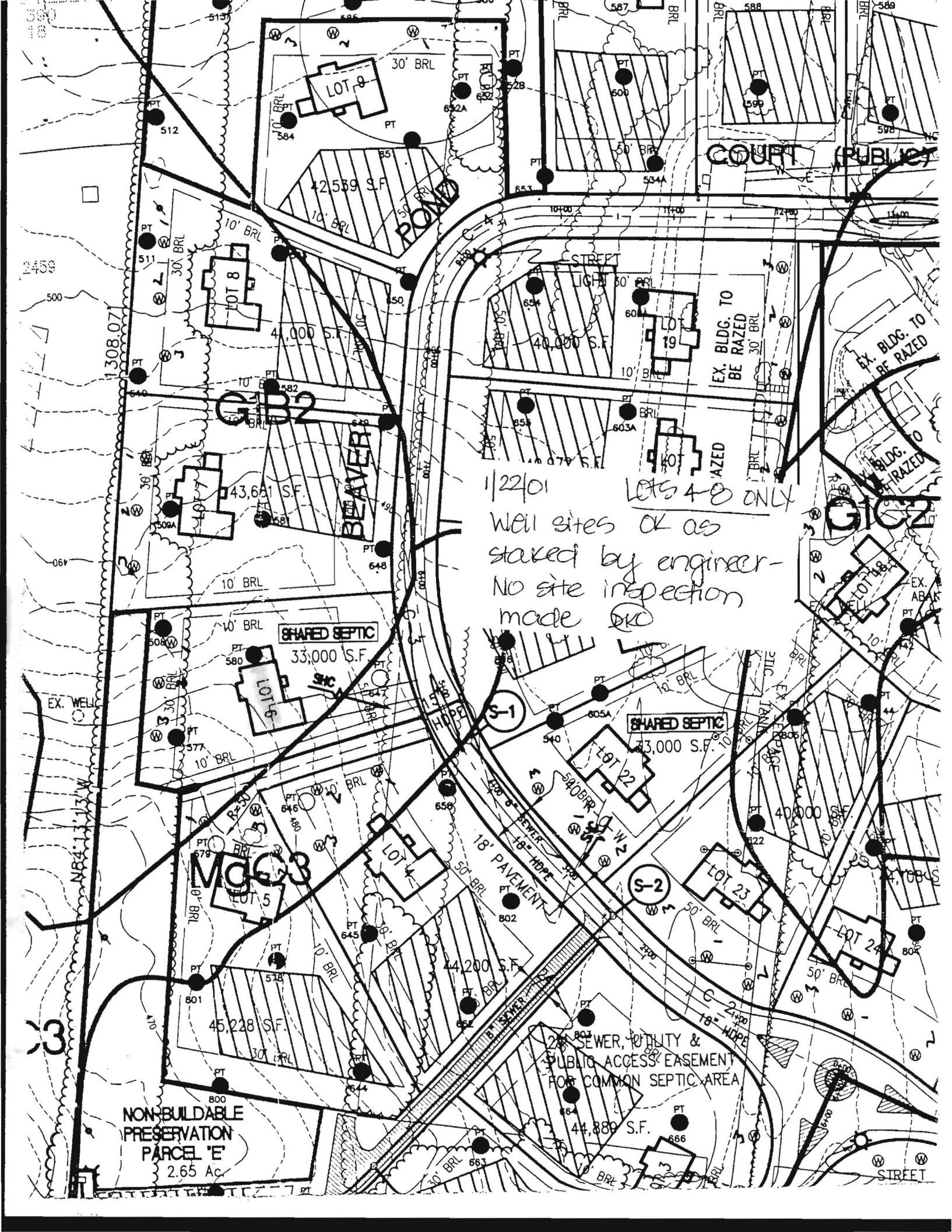
Date of Water Samples: 11/17/2005  
Date of Well Completion: 3/10/2001

Approving Authority,

  
Stuart Oster, RS  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services

File



COURT (PUBLIC)

GIC2

BEAVER ROAD

1/22/01  
Well sites OK as  
staked by engineer -  
No site inspection  
made DKO

LOTS 4-8 ONLY

GIC2

SHARED SEPTIC

SHARED SEPTIC

GIC3

NON-BUILDABLE  
PRESERVATION  
PARCEL 'E'  
2.65 Ac

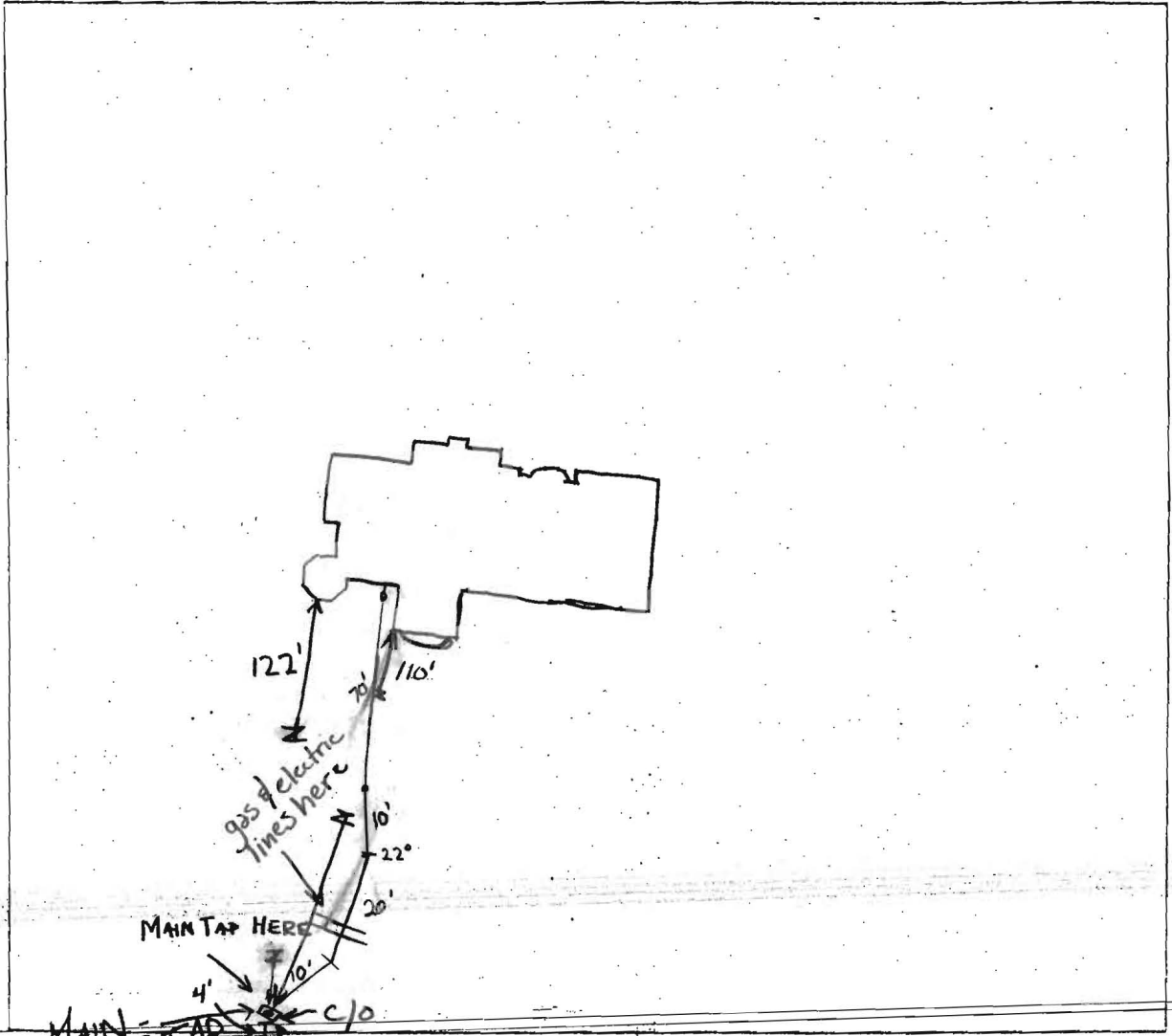
24" SEWER, UTILITY &  
PUBLIC ACCESS EASEMENT  
FOR COMMON SEPTIC AREA

STREET

DATE: 7/13/05

INSPECTOR: J. C. [Signature]

COMMENTS: Depth to tap is ~ 8'



MAIN SEWER TAP  
 PRES. CT.  
 C/O  
 SEWER MANHOLE  
 LOCATION DIAGRAM

SITE INSPECTION SHEET

OWNER:

ADDRESS: 7213 Preservation Ct.

PHONE #:

CONTRACTOR: Fogles -> Ricky

WELL TAG #: HO 94 2932

SUBDIVISION: Pindell Woods LOT: 6

COUNTY #:

PROPOSAL: Hookup to shared septic field