

C1 08143

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

COUNTY NUMBER A536787

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-2485

DATE RECEIVED MM 04 DD 19 YY 03

MM 04 DD 04 YY 13

22 450 26 (TO NEAREST FOOT)

OK sealed AG

28 29 30 31 32 33 34 35 36 37

OWNER ZEPH REALTY WELL SITE ADDRESS FLORENCE Rd TOWN LISBOW MD SUBDIVISION NOREEN GORDON PROP SECTION LOT 1/4

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL (C) M BENTONITE CLAY (B) C NO. OF BAGS 19 NO. OF POUNDS 1920 GALLONS OF WATER 114 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 23 ft. WHEN PUMPING 175 ft. TYPE OF PUMP USED (for test) S submersible

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, Brown Slate, Blue Slate, etc.

CASING RECORD (S) T STEEL (C) O CONCRETE (P) L PLASTIC (O) T OTHER

MAIN CASING TYPE (S) T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 52

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

SCREEN RECORD (S) T STEEL (B) R BRASS (H) O HOLE (P) L PLASTIC (O) T OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

C2 DEPTH (nearest ft.)

Table with columns: A C H S R E E N, 8 9 11 15 17 21 23 24 26 30 32 36 38 39 41 45 47 51. Includes SLOT SIZE and DIAMETER OF SCREEN.

PUMP INSTALLED

DRILLER INSTALLED PUMP (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

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...

DRILLERS LIC. NO. 1 M S D 112 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. D

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C1 08143

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 A 536 787

ST/CO USE ONLY DATE Received MM DD YY 04 19 03

DATE WELL COMPLETED MM DD YY 04 04 03

Depth of Well 22 450 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 170-95-2485

OWNER last name first name TOWN 21530W MD

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Brown SLATE, Blue SLATE, etc.

GROUTING RECORD YES NO Y N TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes Y no 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"

DRILLERS LIC. NO. M S D 192 DRILLERS SIGNATURE

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

DEPTH (nearest ft.) table with columns 1-24 and rows A-N

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 (nearest hour) 6 PUMPING RATE (gal. per min.) 2

PUMP INSTALLED DRILLER INSTALLED PUMP YES NO

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE 2 (nearest foot)

LATITUDE 39.32157 LONGITUDE 77.15991 (DEFAULT COORD. WGS 84)

NOTES:

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

ST/CO USE ONLY DATE Received MM DD YY 04 19 03 DATE WELL COMPLETED MM DD YY 04 04 13 Depth of Well 22 450 26 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-95-2485

OWNER ZEPH Realty last name first name TOWN LISBOW MD WELL SITE ADDRESS Florence Rd SUBDIVISION NORCEW GORDON TRAP SECTION LOT 10/A

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown SLATE	2	25	✓
Brown SLATE	25	35	✓
Blue SLATE	35	65	
Brown SLATE	65	70	✓
Blue SLATE	70	450	

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 19 NO. OF POUNDS 750
GALLONS OF WATER 11.4
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30 ft. (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
ST STEEL **CO** CONCRETE **PL** PLASTIC **OT** OTHER
MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 52

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

SCREEN RECORD
screen type or open hole insert appropriate code below
ST STEEL **BR** BRASS **HO** OPEN HOLE **PL** PLASTIC **OT** OTHER

C 2 DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 **PUMPING TEST**
HOURS PUMPED (nearest hour) 6
PUMPING RATE (gal. per min.) 2
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface) BEFORE PUMPING 23 ft. WHEN PUMPING 175 ft.
TYPE OF PUMP USED (for test) **A** air **P** piston **T** turbine **C** centrifugal **R** rotary **O** other (describe below) **J** jet **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 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height) **+** above LAND SURFACE **-** below 2 (nearest foot)

LATITUDE 39.32157
LONGITUDE 77.1199
(DEFAULT COORD. WGS 84)

NOTES:

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED **Y** **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. M S D 177
DRILLERS SIGNATURE
LIC. NO. D

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

RECEIVED

SEP 30 2013

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM

TEL: (410)313-1771 FAX: (410)313-2648

HOWARD COUNTY HEALTH DEPT.

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: Fogles Well Drilling LLC Telephone #: 443-609-4195
Address: PO Box 202
Woodbine, MD 21797

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

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

Name (Print): Allen Compton License# MSD009

*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: Alan Mougey Telephone #: 240-375-8241
Subdivision: _____ Lot #: _____ Well Tag #: HO-95-2485
Site Address: 2720 Florence Rd
Woodbine, MD 21797

Submersible Pump Data

Make: Goulds
Model #: 731310422C
Pump Capacity: 7 GPM
Well Yield: 20pm GPM

Pitless Adapter

Make: Campbell
Model#: N/A
Depth: 30" (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 1 1/2" B.G.: YES

Depth of well encountered at time of pump installation: 450 (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 adaptor or other acceptable method inside of well casing NA

Piping to house

Type: 1" poly pipe
PSI: 160 (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): 5'
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.

Signature of company representative responsible for installation: Allen Compton date: 9-27-13

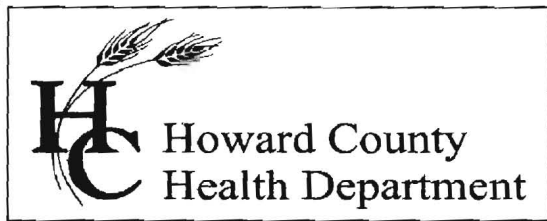
For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 9/30/13 Date Insp. Approved: 11/1/13 Inspector: RT (RW)

- 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

~~Co-ring on well cap not placed properly - it is on the outside of 2 bolts of the well cap)~~
OK (RW) 9/30/13

s/lc/H
OK
AG



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-1771 | Fax: 410-313-2648
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 – November 16, 2014

May 16, 2014

Alan Mougey
638 Hoods Mill Road
Woodbine, MD 21797

**RE: Noreen Gordon Property, Lot 112
2720 Florence Road
Building Permit: B13001258
Well Permit: HO-95-2485**

Dear Homeowner:

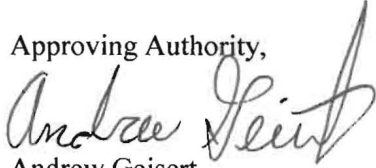
This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **November 1, 2013**. Final approval of the well line connection to the dwelling was granted on **November 1, 2013**. The well construction was completed on **April 4, 2013**. Water samples were collected on **April 2, 2013**.

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-95-2485. 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,



Andrew Geisert
Environmental Sanitarian
Well & Septic Program

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

OK 5/16/14
(AG)



CATOCTIN LABS, INC.

8605 APPLE'S CHURCH ROAD
THURMONT, MARYLAND 21788 1312
(301) 663-5223
FAX (301) 271-9060

Gordon/ Zepp

Reporting Date: April 4, 2013

Date/Time Collected: April 2, 2013 at 1230 hours

Field Sample ID: Well #HO-95-2485

Collected By: Charles Zepp

Received In Lab: April 2, 2013 at 1317 hours

Received from: Zepp Realty, Inc.
4012 Salem Bottom Road
Westminster, Maryland 21157

Project Name: Parcel 112, Florence Road
Woodbine, Maryland 21797

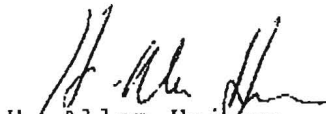
ANALYSES

ANALYSIS	RESULTS pCi/L	ANALYSIS DATE/TIME	STANDARD METHODS	ANALYST
Radon in Water	2,227	04/03/13 0830	Sm7500-RnB (Modified)	HAH

**EPA Proposed Level of Radon in Water is 4,000 pCi/L for Private Wells.

**10,000 pCi/L of radon in water will raise the level of radon in the air by 1.0 pCi/L.

Respectfully Submitted,
Catoctin Labs, Inc.


H. Allen Haines
Laboratory Director



CATOCTIN LABS, INC.
3009 APPLES CHURCH ROAD
THURMONT, MARYLAND 21788-1312
(301) 663-5323
FAX (301) 271-9060

FIELD RECORD

Customer: Zepp Realty, Inc.
Parcel 112, Florence Road
Woodbine, MD 21797

Date: March 28, 2013
Time: 13:00
Type:4

County: Howard
Source: Well
Well No: HO-95-2485
Bottle No: 2MPN

Residual Cl: 0.00
Iced: Yes
pH: 6.5
EPA acceptable range for pH is 6.5 - 8.5

Reason For Sample: Real Estate Transaction
Treatment: Raw
Collector: Owner

State Certification No: N/A

NOTE: Catoctin Labs, Inc. will not be responsible for any sample result if the sample was collected or transported by non-affiliated personnel.

LABORATORY RECORD

Received: 14:10 3/28/2013 Examined: 14:10 03/28, 03/29

PARAMETER	METHOD	U.S. EPA Drinking Water Recommendations	SAMPLE RESULTS
MPN Total Coliform	SM 9223 (E)	<1MPN/100ml	<1 MPN/100ml
MPN E. coli	SM 9223 (E)	<1MPN/100ml	<1 MPN/100ml
Nitrate	EPA 353.2	10.0 mg/L Maximum	5.9 mg/L
Sand	SM 2540 F	No Trace	0.1 mg/L
Turbidity	SM 2130 B	5.0 NTU Max 10.0 COMAR	104 NTU

5/16/14
ok
AG

Bacteriological analysis of this sample, on this specified date, indicates the water is **SAFE** for human consumption, according to APHA/EPA Standards.

Analyst: [Signature] Date: March 29, 2013

Maryland State Certification Number 135

EPA Primary Secondary Radon Listing 2070100
EPA Individual Radon Listing 156520T



CATOCTIN LABS, INC.

8600 APPLE'S CHURCH ROAD
LILLSMONT, MARYLAND 21788-1312
(301) 663-5323
FAX (301) 271-9060

FIELD RECORD

Customer: Zepp Realty, Inc.
Parcel 112, Florence Road
Woodbine, MD 21797

Date: April 01, 2013
Time: 07:15
Type:4

County: Howard
Source: Well
Well No: HO-95-2485
Bottle No:

Residual Cl: 6.50
Iced: Yes
pH: 0.0
EPA acceptable range for pH is 6.5 - 8.5

Reason For Sample: Real Estate Transaction
Treatment: Raw
Collector: Owner

State Certification No: N/A

NOTE: Catoctin Labs, Inc. will not be responsible for any sample result if the sample was collected or transported by non-affiliated personnel.

LABORATORY RECORD

Received: 8:00 4/1/2013 Examined: 08:00 04/01, 04/02

PARAMETER	METHOD	U.S. EPA Drinking Water Recommendations	SAMPLE RESULTS
Turbidity	SM 2130 B	5.0 NTU Max 10.0 COMAR	51.9 NTU

Bacteriological analysis of this sample, on this specified date, indicates the water is ~~unsafe~~ **SAFE** for human consumption, according to APHA/EPA Standards.

Analyst Robert Haines Date: April 02, 2013

Maryland State Certification Number 135

EPA Primary Secondary Radon Listing 2070100
EPA Individual Radon Listing 150520T



CATOCTIN LABS, INC.

3609 APPLE'S CHURCH ROAD
THURMONT, MARYLAND 21788-1312
(301) 663-5323
FAX (301) 271-9060

FIELD RECORD

Customer: Zepp Realty, Inc.
Parcel 112, Florence Road
Woodbine, MD 21797

Date: April 02, 2013
Time: 12:30
Type:4

County: Howard

Residual Cl: 0.00

Source: Well

Iced: Yes

Well No: HO-95-2485

pH: 65.0

Bottle No:

EPA-acceptable range for pH is 6.5 - 8.5

Reason For Sample: Real Estate Transaction

Treatment: Raw

Collector: Owner

State Certification No: N/A

NOTE: Catoctin Labs, Inc. will not be responsible for any sample result if the sample was collected or transported by non-affiliated personnel.

LABORATORY RECORD

Received: 13:17 4/2/2013

Examined: 08:15 04/02, 04/03

PARAMETER

METHOD

U.S. EPA Drinking
Water Recommendations

SAMPLE RESULTS

Turbidity

SM 2130 B

5.0 NTU Max 10.0 COMAR

0.52 NTU

Bacteriological analysis of this sample, on this specified date, indicates the water is **SAFE** for human consumption, according to APHA/EPA Standards.

Analyst Robin Hauke

Date: April 03, 2013

Maryland State Certification Number 135

EPA Primary Secondary Radon Listing 2070100
EPA Individual Radon Listing 156520T

OK
5/16/14



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

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

August 24th, 2012

Noreen Gordon
2732 Jennings Chapel Road
Woodbine, MD 21797

**RE: Variance request
Noreen Gordon Property
6.655 Acres**

Dear Mrs. Gordon,

Maryland Department of the Environment has accepted our recommendation to approve the following variance request under the *Code of Maryland Regulations 26.04.02.05 (C)* to allow: the existing sewage disposal system serving 2740 Florence Road to be located upgradient from the proposed private water supply located on Florence Road, tax map 7, parcel 112. Due to the landscape position of the sewage areas and wells, the request was approved subject to the following conditions:

- The well on the subject parcel must be constructed using a steel well casing, which must be installed to a minimum depth of 50' below ground surface or 10' into competent bedrock; whichever is deeper.

If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-6287.

Sincerely,

A handwritten signature in black ink, appearing to read 'Heidi Scott', written over a horizontal line.

Heidi Scott, R.S.
Well & Septic Program

A handwritten signature in black ink, appearing to read 'Steven Krieg', written over a horizontal line.
Maryland Department of the Environment
Steven Krieg, R.S.

Cc: File
Property owner