

C1 6516

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 AS17420

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED MM DD YY 09 22 05

Depth of Well 22 140 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" MD-94-4184

OWNER Boarder Builders last name first name STREET OR RFD Running Fence Ln TOWN Clarksville SUBDIVISION Walnut Woods SECTION LOT 25

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 (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Top Soil, Clay, Sand Stone, White Micka, Sand Stone, White Micka, Sand Stone, Micka.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 8 NO. OF POUNDS 200 GALLONS OF WATER 48 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 23 BOTTOM 58 ft.

CASING RECORD

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 25

OTHER CASING (if used)

Table with columns: diameter inch, depth (feet) from, to

SCREEN RECORD

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

DEPTH (nearest ft.)

Table with columns: A, C, H, S, R, E, N. Rows include HO 23 140, PL -5 80, PL 100 140. SLOT SIZE 1 20 2 3 DIAMETER OF SCREEN 4" (NEAREST INCH)

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

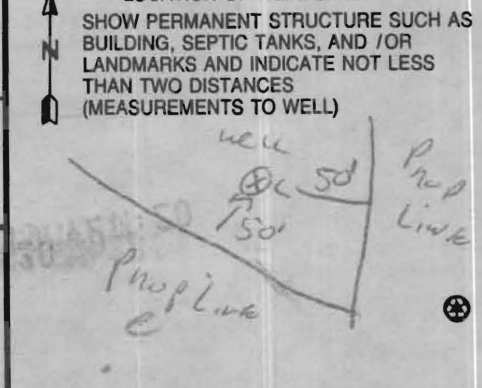
PUMPING TEST

HOURS PUMPED (nearest hour) 2 8 9 PUMPING RATE (gal. per min.) 25 11 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 17 20 ft. WHEN PUMPING 140 22 25 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 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)

LOCATION OF WELL ON LOT



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES Y NO 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 SD 112

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. D

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

B 1 8988

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HD 94-4184 fill in this form completely

522054 please type

Date Received (APA)

03 28 05

OWNER INFORMATION

GOODIER Builders Inc 10705 Charter Dr. Suite 320 Columbia MD 21044

B 3 LOCATION OF WELL

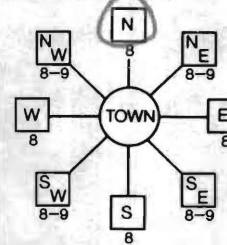
Howard COUNTY WALNUT GROVE SECTION 25 CLARKSVILLE NEAREST TOWN 2 MILES FROM TOWN

DRILLER INFORMATION

Ralph E. Mayne MSD 117 Firm Name: Ralph E. Mayne Inc Address: 17024 Handy Rd Mt Airy MD 21771 Date: 3-26-05

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Running Fence Ct. NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 250 ENTER FT OR MI TAX MAP: 28 BLK: 18 PARCEL 74

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled) 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 COUNTY AS17420 STATE SIGNATURE DATE ISSUED 4/25/05 CO SIGNATURE EXP. DATE 4/25/06 NORTH GRID 507 000 EAST GRID 816 000

APPROXIMATE DEPTH OF WELL 150 FEET

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

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (circled) 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 deepen an existing well

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROX. PERMIT NUMBER PERMIT No. HD-94-4184

SPECIAL CONDITIONS

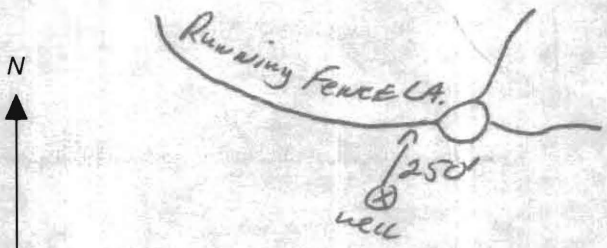
Well to be converted to potable supply 6 ft P will be needed

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 510 816 N 815 507

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





**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: Walnut Grove Lot #: 25 Well Tag #: HO - 94 - 4184  
Site Address: 12237 Running Fence Lane  
Clarksville, MD 21029

<b><u>Submersible Pump Data</u></b>	<b><u>Pitless Adapter</u></b>	<b><u>Well Cap and Electric Conduit</u></b>
Make: <u>Sta-Rite</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>Yes</u>
Model #: <u>S10P4HS07221</u>	Model#: <u>PT800</u>	Screened, vented well cap: <u>Yes</u>
Pump Capacity <sup>10</sup> <u>        </u> GPM	Depth: <u>42"</u> (36" min)	Cap secured to casing: <u>Yes</u>
Well Yield: <sup>10</sup> <u>        </u> GPM	NSF/WSC approved: <u>Yes</u>	Conduit min 18" B.G.: <u>Yes</u>
Depth of well encountered at time of pump installation: <u>140</u> (feet)		Conduit secured to well cap: <u>Yes</u>
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 <u>inside of well casing</u> <u>N/A</u>		

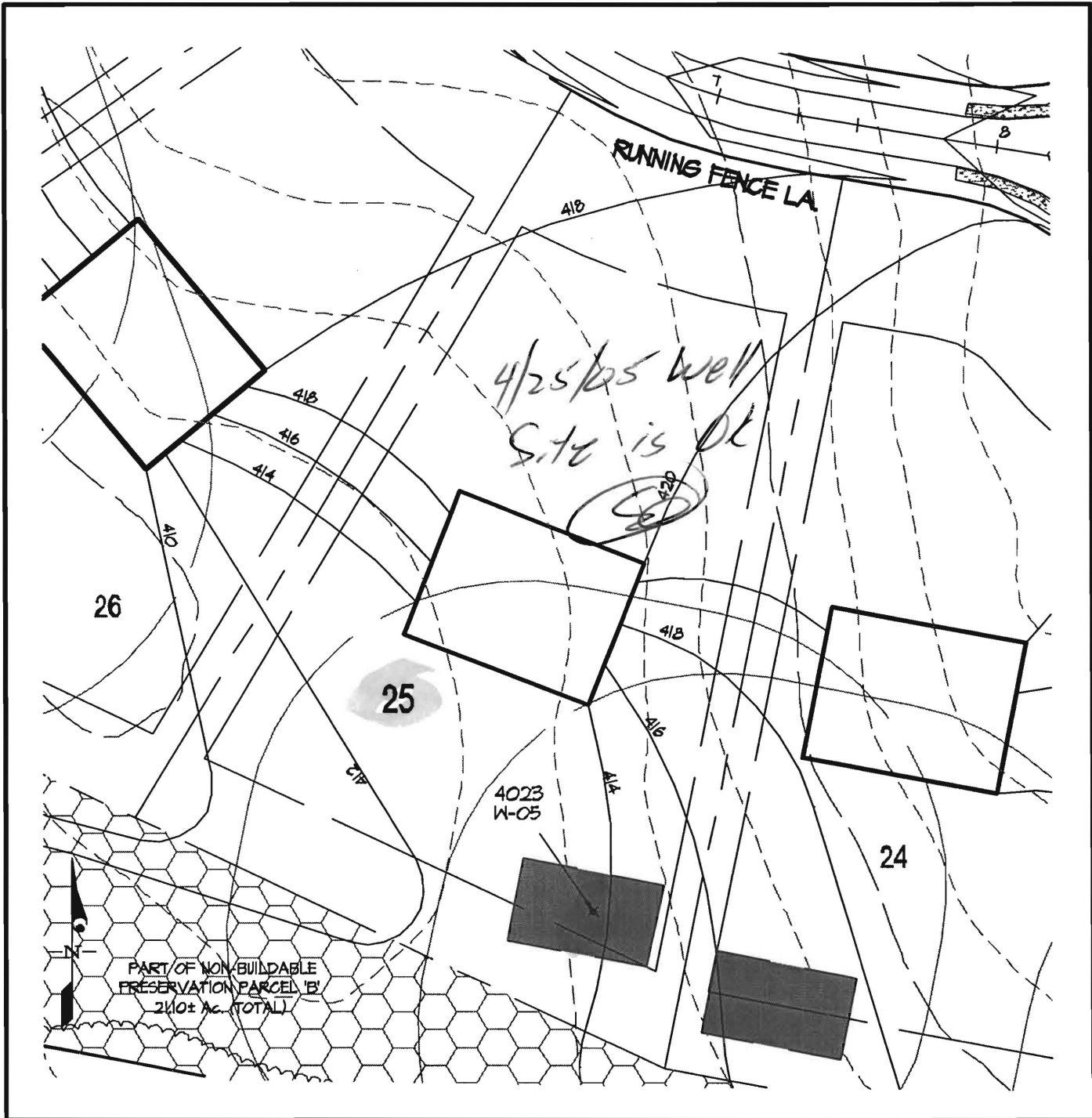
<b><u>Piping to house</u></b>	<b><u>House Connection</u></b>
Type: <u>Poly</u>	PVC sleeve to undisturbed soil at wall penetration: <u>Yes</u>
PSI: <u>200</u> (160 psi min)	Length of sleeve(5' minimum from foundation): <u>10'</u>
Depth of supply line: <u>42"</u> (36" min)	Sleeve sealed properly: <u>Yes</u>

**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      Copyright Robert L. Feezer  
10000 Robert L. Feezer Dr.  
Sykesville, MD 21784  
Date: 01/11/11 to 1/18/12 0207      November 30, 2011  
Signature of company representative responsible for installation      date

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 12/1/11 Inspector: DD  
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 ✓



**LEGEND**



CONCEPTUAL HOUSE BOX

4022  
W-05

WELL SURVEY POINT



WELL BOX

**WELL LOCATION EXHIBIT - LOT 25**

**WALNUT GROVE**

Lots 1 thru 88, and Preservation Parcels "A" thru "G"  
and Non-Buildable Bulk Parcel "H"

**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

SCALE: 1"=50'

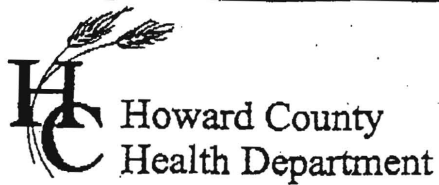
ZONING: RC/RR-DEO

TAX MAP/GRID: 28-18/17

GLW JOB NO: 00153

APR., 2005

1 OF 1



3525 H Ellicott Mills Drive • Ellicott City, MD 21043  
(410) 313-2640 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

## ATTENTION WELL DRILLERS!!!

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 on 3/16/05 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



Howard County  
Health Department

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 – June 26, 3012

January 26, 2012

Homeowner  
12237 Running Fence Lane  
Clarksville, Maryland, 21029

**RE: Walnut Grove, Lot # 25**  
**12237 Running Fence Lane**  
**Building Permit: B11002607**  
**Well Permit: HO-94-4184**

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 **11/28/11**. Final approval of the well line connection to the dwelling was granted on **12/1/11**. The well construction was completed on **09/22/05**. Water samples were collected on **1/6/12**.

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.

Gross Alpha and Beta samples were also collected on **9/25/06**. Results showed a Gross Alpha level of **2.4 ± 1.2 pCi/L** and **Gross Beta** level of **3.5 ± 1.0 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the MCL of 50pCi/L. At the time of testing and with respect to these parameters, the well water is safe for all uses.

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-94-4184. 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 certified water quality 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,



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

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



**TRACE LABORATORIES, INC**  
 5 North Park Drive  
 Hunt Valley, MD 21030 USA  
 Telephone: 410/584-9099 / Fax: 410/584-9117  
 Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

**CERTIFICATE OF ANALYSIS**

**Requester:**

Robert L Feezer Company  
 6321 Barnett Avenue  
 Sykesville, Maryland 21784

**S/O Number:** 83833

**Report Date:** January 6, 2012

*Retest #1*

**Property Sampled:** 12237 Running Fence Lane, 21029  
**Sample Location:** Pressure Tank Tap  
**Residual Chlorine:** <0.1 mg/L

**Building Permit #:** B11002607  
**Sampler ID #:** 0765AR  
**Samples Iced:** Yes

**County:** Howard  
**Map:** 28

**Subdivision:** Walnut Grove  
**Parcel:** 74

**Lot #:** 25

**Date/Time Collected in Field:** January 5, 2012 @ 11:00 AM  
**Date/Time Received in Lab:** January 5, 2012 @ 2:00 PM

**Well Tag #:** HO-94-4184  
**Well Condition:** 2-Piece Cap, Satisfactory

**Water Treatment/Conditioning:** Neutralizer (Not in Use)

PARAMETER	METHOD	MCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	Absent	Pass
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass

*Katherine C. Higgs*  
 Katherine C. Higgs  
 Manager – Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA  
 \*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA  
 \*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



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Maryland State Certified Laboratory #318

**CERTIFICATE OF ANALYSIS**

**Requester:**

Robert L Feezer Company  
 6321 Barnett Avenue  
 Sykesville, Maryland 21784

**S/O Number:** 83775

**Report Date:** December 29, 2011

**Property Sampled:** 12237 Running Fence Lane, 21029  
**Sample Location:** Pressure Tank Tap  
**Residual Chlorine:** <0.1 mg/L

**Building Permit #:** B11002607  
**Sampler ID #:** 0765AR  
**Samples Iced:** Yes

**County:** Howard  
**Map:** 28

**Subdivision:** Walnut Grove  
**Parcel:** 74

**Lot #:** 25

**Date/Time Collected in Field:** December 28, 2011 @ 12:50 PM

**Date/Time Received in Lab:** December 28, 2011 @ 3:30 PM

**Well Tag #:** HO-94-4184

**Well Condition:** 2-Piece Cap, Satisfactory

**Water Treatment/Conditioning:** Neutralizer (Not in Use)

PARAMETER	METHOD	MCL/*SMCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	PRESENT	FAIL
E. coli	SM 9223B	Absent	Absent	Pass
Nitrate	SM 4500D	10 mg/L as N	5.4 mg/L as N	Pass
Turbidity	EPA 180.1	10 NTU	<1.0 NTU	Pass
pH	EPA 150.1	*6.5-8.5 Units	7.6 Units	***
Sand		Absent	Absent	Pass

*Katherine C. Higgs*  
 Katherine C. Higgs  
 Manager – Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA  
 \*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA  
 \*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



Howard County  
Health Department

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website: www.hchealth.org

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

October 16, 2006

Walnut Grove, LLC  
10705 Charter Drive  
Suite 320  
Columbia, Maryland 21044

*Running Fence Ln*

RE: Walnut Grove Subdivision, Lot 25  
Well Tag: HO-94-4184

To Whom It May Concern:

A sample was collected during a yield test on September 25, 2006 and submitted to GPL Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of  $2.4 \pm 1.2$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $3.5 \pm 1.0$  pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its target value of 50 pCi/L (roughly equivalent to the **annual dose rate of 4 millirems/year**). At the time of testing and with respect to these parameters, the future well water supply appears safe for all uses. No additional testing for these parameters will be required to secure the future Use & Occupancy. However, other standard (potability) testing will still be necessary.

A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions or concerns.

Sincerely,

Bert Nixon, Deputy Director  
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater  
✓ Well & Septic property file

Send Report To:

Howard Co.  
Env. Health

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**

201 W. Preston Street, Baltimore, Maryland 21201

*John M. DeBoy, Dr. P.H., Director*

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: WK 25 RW 4184 No. B: \_\_\_\_\_ Field Blank Bottle No. A: \_\_\_\_\_ No. B: \_\_\_\_\_

Plant/Site Name: Walnut Grove County: Howard

Sample Source: Roadside Fence Ln Location: 460-94-4184  
(well no., lab sink, sample tap, etc.)

County:  1  3 Plant No.

CHECK (one per box)

Drinking Water   
Landfill   
Stream   
Other

Community   
Non-community   
Private   
Other

Source (raw water)   
Distribution (treated)   
MCL

Emergency   
Routine   
Recheck   
Special

Collector: Kevin Wolf

Telephone No: 410-313-2645

Date Collected: 9/25/06

Time Collected: 10:15 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:   Federal Project:  Field Data: \_\_\_\_\_  
pH \_\_\_\_\_ Chlorine \_\_\_\_\_

Remarks: \_\_\_\_\_

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	<u>607131-003</u>	<u>2.4 ± 1.2</u>	<u>9/29/06</u>
✓	Gross Beta	4100		<u>3.5 ± 1.0</u>	
	Radon-222 Bottle A	4004			
	Radon-222 Bottle B	4004			
	Field Blank A	4004			
	Field Blank B	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Supervisor: \_\_\_\_\_