

C1 16618

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

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER: Goodlier Baker Homes; WELL SITE ADDRESS: Hall shop; TOWN: Highland; SUBDIVISION: Schoutky Mill farm; SECTION: ; LOT: 8

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Light Brown loamy sand, Dark brown loamy sand, Gray Limestone, Quartz, and Limestone.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y); TYPE OF GROUTING MATERIAL: CEMENT (CM); BENTONITE CLAY (BC); NO. OF BAGS: 18; NO. OF POUNDS: 108; DEPTH OF GROUT SEAL: 0 ft. to 46 ft.

CASING RECORD: MAIN CASING TYPE: PL (PLASTIC); Nominal diameter: 06; Total depth of main casing: 49.

OTHER CASING (if used): diameter, depth (feet) from to.

SCREEN RECORD: screen type or open hole: HO (OPEN HOLE); insert appropriate code below.

DEPTH (nearest ft.): 49, 300; SLOT SIZE: 1, 2, 3; DIAMETER OF SCREEN: 56, 60.

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: 06; PUMPING RATE: 2.6 gal. per min.; METHOD USED TO MEASURE PUMPING RATE: 196L; WATER LEVEL: 37 ft. before, 278 ft. when pumping.

PUMP INSTALLED: DRILLER INSTALLED PUMP (YES/NO); TYPE OF PUMP INSTALLED: S (submersible); CAPACITY: 31-35 GALLONS PER MINUTE; PUMP HORSE POWER: 37-41; PUMP COLUMN LENGTH: 43-47.

LATITUDE 39.1690559; LONGITUDE 76.9571915; (DEFAULT COORD. WGS 84); NOTES:

NUMBER OF UNSUCCESSFUL WELLS: 0; WELL HYDROFRACTURED: Y; DRILLERS LIC. NO. M SD 009; DRILLERS SIGNATURE; LIC. NO. D; SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).

B 1 09350

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 538119.6

STATE PERMIT NUMBER

HO -95 -2443 fill in this form completely

Date Received (APA) 11/2/12

OWNER INFORMATION

Goodier Baker Homes 10751 Falls RD Suite 405 Lutherville, MD 21093

B 3

LOCATION OF WELL

Howard County Schoolly Mill Farm Highland

DRILLER INFORMATION

Allen Compton MS D 0099 Eagles Well Drilling, LLC P.O. Box 202 Woodbine MD Allen Compton 9-572

B 4

SOURCES OF DRILLING WATER

Hall Shop RD 610 FT DISTANCE FROM ROAD TAX MAP: 40

B 2

WELL INFORMATION

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

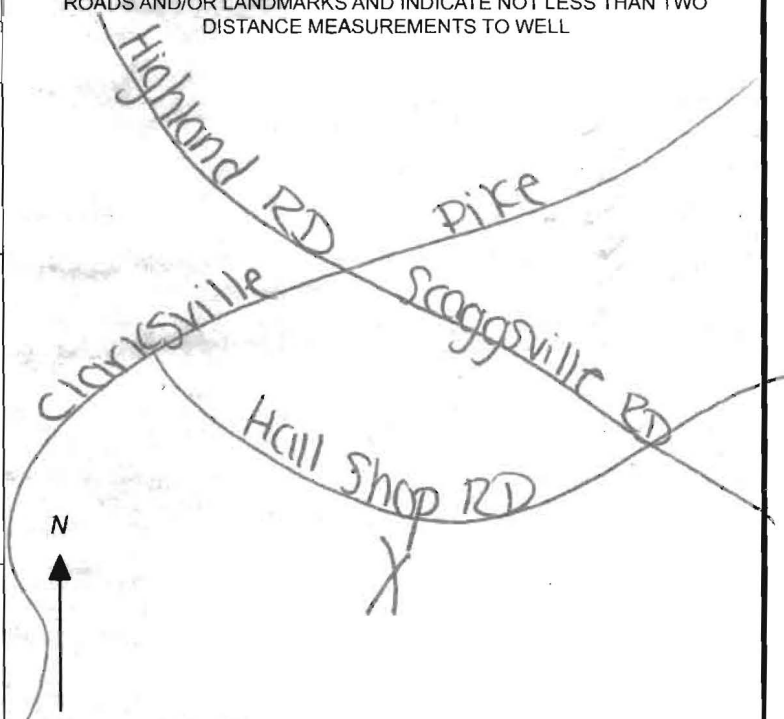
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A525118 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 11/20/2012 CO SIGNATURE EXP. DATE 11/20/13

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 OPEN LOOP GEOTHERMAL CLOSED LOOP GEOTHERMAL

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



APPROXIMATE DEPTH OF WELL 300 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)

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

APPROX. PERMIT NUMBER G

PERMIT No. HO -95 -2443

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED-

Radon Sample Required @ yield test.

Yield Test Data Sheet

County File # _____

MD Well Permit #: 40-95-2443

Subdivision Name: Schooley Mill Farm

Section _____ Lot # 8

Street Address: Hall shop rd

Measuring Point (MP) Description: Top of casing
(for ex. "Top of casing")

Distance from MP to ground surface 2 ft.

Well Depth 300 ft.

Well Driller: Fogles

Must be submitted with the State of Maryland Well Completion Report

Submit to: _____

| | | | |
|------------------------------------|--------------------------------------|--|---|
| Pump Start Time <u>8:15</u> | Static Water level: <u>37</u> ft. | Pumping Rate () Time to fill <u>5</u> gal. bucket () Flow meter reading (if used) | Calculated Flow (gallons per minute) <u>12</u> |
| TIME | WATER LEVEL BELOW M.P. | | |

| Water level and pumping rate must be recorded every 15 minutes | | | |
|--|--------------|----------------|--------------------------|
| 1 | <u>8:15</u> | <u>37</u> ft. | <u>25</u> <u>12</u> GPM |
| 2 | <u>8:30</u> | <u>115</u> ft. | <u>25</u> <u>12</u> GPM |
| 3 | <u>8:45</u> | <u>161</u> ft. | <u>30</u> <u>10</u> GPM |
| 4 | <u>9:00</u> | <u>229</u> ft. | <u>30</u> <u>10</u> GPM |
| 5 | <u>9:15</u> | <u>278</u> ft. | <u>30</u> <u>10</u> GPM |
| 6 | | ft. | <u>19 gal bucket</u> GPM |
| 7 | <u>9:30</u> | <u>277</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 8 | <u>9:45</u> | <u>276</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 9 | <u>10:00</u> | <u>275</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 10 | <u>10:15</u> | <u>274</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 11 | <u>10:30</u> | <u>273</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 12 | <u>10:45</u> | <u>272</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 13 | <u>11:00</u> | <u>271</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 14 | <u>11:15</u> | <u>270</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 15 | <u>11:30</u> | <u>269</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 16 | <u>11:45</u> | <u>268</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 17 | <u>12:00</u> | <u>267</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 18 | <u>12:15</u> | <u>266</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 19 | <u>12:30</u> | <u>265</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 20 | <u>12:45</u> | <u>264</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 21 | <u>1:00</u> | <u>263</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 22 | <u>1:15</u> | <u>262</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 23 | <u>1:30</u> | <u>261</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 24 | <u>1:45</u> | <u>260</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 25 | <u>2:00</u> | <u>259</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 26 | <u>2:15</u> | <u>258</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 27 | <u>2:30</u> | <u>257</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 28 | <u>2:45</u> | <u>256</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 29 | <u>3:00</u> | <u>255</u> ft. | <u>23</u> <u>2.6</u> GPM |
| 30 | <u>3:15</u> | <u>254</u> ft. | <u>23</u> <u>2.6</u> GPM |
| | <u>3:30</u> | <u>253</u> ft. | <u>23</u> <u>2.6</u> GPM |

NOTES:

**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: Schooley Mill Farm Lot #: 8 Well Tag #: HO - 95 - 2443 ✓
Site Address: 13018 Highgrove Road
Highland, MD 20777

| | | |
|---|---|---|
| <u>Submersible Pump Data</u> | <u>Pitless Adapter</u> | <u>Well Cap and Electric Conduit</u> |
| Make: <u>Berkeley</u> | Make: <u>Boshart</u> | Two piece watertight cap: <u>Yes</u> |
| Model #: <u>B7P4MS07221</u> | Model#: <u>P-100-SS</u> | Screened, vented well cap: <u>Yes</u> |
| Pump Capacity <u>7</u> GPM | Depth: <u>42"</u> (36" min) | Cap secured to casing: <u>Yes</u> |
| Well Yield: <u>2.6</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>300</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 inside of well casing N/A

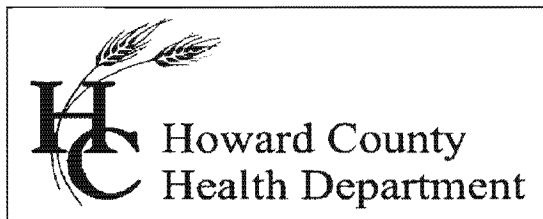
| | |
|--|--|
| <u>Piping to house</u> | <u>House Connection</u> |
| Type: <u>Poly</u> | PVC sleeve to undisturbed soil at wall penetration: <u>Yes</u> |
| PSI: <u>200</u> (160 psi min) | Length of sleeve(5' minimum from foundation): <u>10'</u> |
| Depth of supply line: <u>42"</u> (36" min) | Sleeve 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 July 14, 2014
Signature of company representative responsible for installation date

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

Date Insp. Requested: 7/16/14 (88) Date Insp. Approved: 7/21/14 Inspector: (KW)
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 ✓



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 – March 20, 2015

October 20, 2014

Homeowner
13018 Highgrove
Highland, Maryland 20777

**RE: Schooley Mill Farm, Lot #8
13018 Highgrove
Building Permit: B14001021
Well Permit: HO-95-2443**

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 **10/18/2014**. Final approval of the well line connection to the dwelling was granted on **7/21/14**. The well construction was completed on **1/29/2013**. Water samples were collected on **9/23/2014**.

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-95-2443. 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 black ink that reads "Dana Bernard". The signature is written in a cursive style with a large initial "D".

Dana Bernard
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
 Attn: Rick Cross
 6321 Barnett Avenue
 Sykesville, Maryland 21784

S/O Number: 94360

Report Date: September 9, 2014

Property Sampled: 13018 Highgrove Road, 20777
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B14001021
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard **Subdivision:** Schooley Mill Farm **Lot #:** 8

Date/Time Collected in Field: September 8, 2014 1:42 pm
Date/Time Received in Lab: September 8, 2014 3:56 pm

Well Tag #: HO-95-2443
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: N/A – Raw Sample

*No OK
 DB
 10/20/14*

| PARAMETER | METHOD | MCL/*SMCL | RESULT | COMMENT |
|-----------------------|--------------------------|----------------|----------------|---------------|
| Total Coliform | SM 9223B | Absent | PRESENT | FAIL ✓ |
| <i>E. coli</i> | SM 9223B | Absent | Absent | Pass |
| Nitrate | SM 4500-NO3D | 10 mg/L as N | 4.9 mg/L as N | Pass |
| Turbidity | EPA 180.1 | 10 NTU | <1.0 NTU | Pass |
| pH (Field) | SM 4500-H ⁺ B | *6.5-8.5 Units | 6.3 Units | *** |
| Sand | | Absent | Absent | Pass |

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

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.



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
 Attn: Rick Cross
 6321 Barnett Avenue
 Sykesville, Maryland 21784

S/O Number: 94535

Report Date: September 24, 2014

Bacteria Retest #1

Property Sampled: 13018 Highgrove Road, 20777
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B14001021
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard

Subdivision: Schooley Mill Farm

Lot #: 8

Date/Time Collected in Field: September 23, 2014 11:40 am

Date/Time Received in Lab: September 23, 2014 3:15 pm

Well Tag #: HO-95-2443

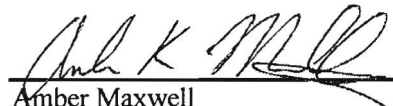
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: N/A – Raw Sample

*OK
 AS
 10-20-14*

| PARAMETER | METHOD | MCL | RESULT | COMMENT |
|----------------|----------|--------|--------|---------|
| Total Coliform | SM 9223B | Absent | Absent | Pass |
| <i>E. coli</i> | SM 9223B | Absent | Absent | Pass |

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.


 Amber Maxwell
 Water Quality Analyst



Send Report To:

Bert Nixon

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

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: HO-95-2443 No. B: _____ Field Blank Bottle No. 1: HOFBKW12913 No B: _____

Plant/Site Name: Schooley Mill County: Howard

Sample Source: Hall Shop Rd Lot 8 Location: HO-95-2443
(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: Heidi Scott

Telephone No.: 410-313-6287

Date Collected: 1/29/13

Time Collected: 1030 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 Analyzed | Date Reported |
|---|-----------------------|----------|----------------|-----------------|---------------|---------------|
| ✓ | Gross Alpha | 4000 | | | | |
| ✓ | Gross Beta | 4100 | | | | |
| | 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: _____

Send Report To:

Bret Nixon

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

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: — No. B: — Field Blank Bottle No. 1: HOFBKW12913 No B: —

Plant/Site Name: HCHD County: Howard

Sample Source: Distilled H₂O Location: Lab
(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: K. Wolf Telephone No.: 410-313-2645

Date Collected: 1/21/13 Time Collected: — a.m. — p.m.

Nitric Acid Preserved: Yes No Iced: Yes No

Submitters Code: Federal Project: Field Data: — pH — Chlorine —

Remarks: Field Blank Cross α , β

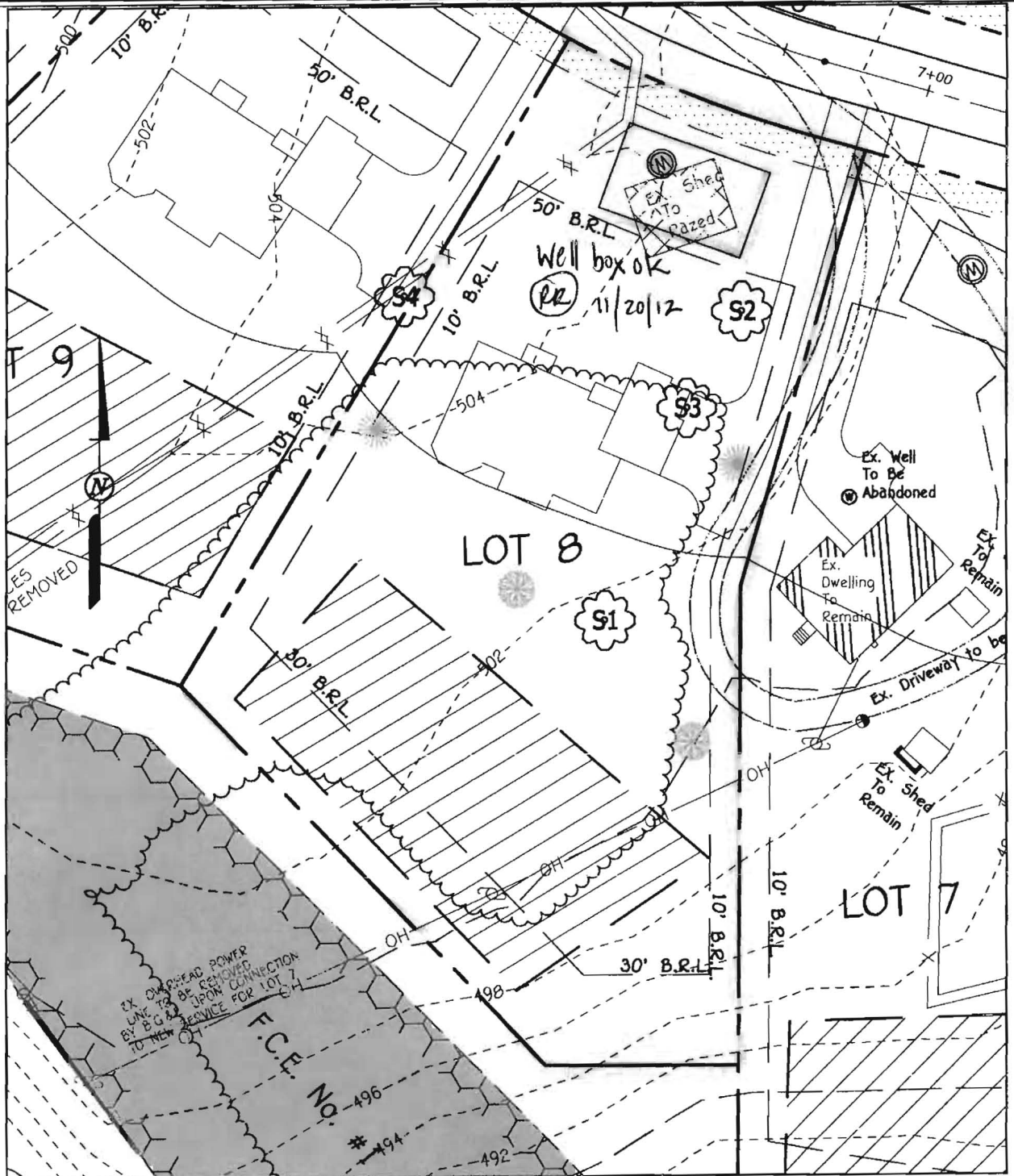
| ✓ | Test | EPA Code | Laboratory No. | Results (pCi/L) | Date Analyzed | Date Reported |
|---|-----------------------|----------|----------------|-----------------|---------------|---------------|
| | Gross Alpha | 4000 | | | | |
| | Gross Beta | 4100 | | | | |
| | Radon-222 Bottle A | 4004 | | | | |
| | 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: —

•Tel. No.: (410) 767-5537 •Fax No.: (410) 333-5373

I:\2005105037.dwg\FINAL\05037_well.mads.dwg - LOT 8_9/26/2012 2:23:00 PM, 1:1



WELL LOCATION INFORMATION:

NORTHING = 547,149.0132 EASTING = 1,324,489.5381
 LATITUDE = N39°10'08.49" LONGITUDE = W76°57'25.68"

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

LOT 8 WELL MAP
SCHOOLEY MILL FARM

BUILDABLE LOTS 1 - 11,
 BUILDABLE PRESERVATION PARCEL 'A' &
 NON-BUILDABLE PRESERVATION PARCELS 'B' - 'D'

ZONED: RR-DEO
 TAX MAP 40, GRID 10 & 11, PARCEL 115 & 149
 FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: SEPT. 26, 2012
 SHEET 8 OF 12



Bureau of Environmental Health
 7178 Columbia Gateway Drive, Columbia, MD 21046-3147
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2322 Toll Free 1-866-313-6380
 website: www.hchealth.org

Peter L. Beilenson, 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:
Schooley Mill Farm 8 Hall Shop RD
 Subdivision/Property Name Lot# Road Name

The well site has been staked by Fisher Collins & Carter INC
 (professional land surveyor or company employing professional land surveyors)
 on 8/20/12 (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 5/11/05