

C1 0136

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 13 A41570

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-0152

OWNER Warfield Kennard STREET OR RFD 4347 Howard Road TOWN Dayton SUBDIVISION K+D Stables SECTION LOT 3

WELL LOG

GROUTING RECORD

C 3

PUMPING TEST

Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

HOURS PUMPED (nearest hour) 6

DESCRIPTION (Use additional sheets if needed) FEET FROM TO check if water bearing

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC

PUMPING RATE (gal. per min.) 2

Table with 3 columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Brown Shale (0-104) and Gray Mica Rock (104-400).

NO. OF BAGS 25 NO. OF POUNDS 2350 GALLONS OF WATER 150 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 99 ft.

METHOD USED TO MEASURE PUMPING RATE Bucket

CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER

WATER LEVEL (distance from land surface) BEFORE PUMPING 68 ft. WHEN PUMPING 360 ft.

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) PL 6 109

TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

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

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO

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

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

NUMBER OF UNSUCCESSFUL WELLS: 0

DEPTH (nearest ft.) HO 107 400

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

WELL HYDROFRACTURED YES Y NO N

E A C H S C 3 R E E N

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

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

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

PUMP HORSE POWER 37 41

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.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68

PUMP COLUMN LENGTH (nearest ft.) 43 47

DRILLERS LIC. NO. 1 MSD0224 DRILLERS SIGNATURE Joseph A. Mayne

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

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

LIC. NO. 1 D

70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

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) Howard Rd

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

Diagram showing well location on lot with distances to Howard Rd and a house.

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0152
 Location of property (road) 14347 Howard Road
 Subdivision K+D Stables Lot 3 Block _____ Plat _____ Sec. _____
 Well Driller Joseph Mayne Owner Kennard Warfield

Depth of well 400'
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 68'

I. High rate pumping -- reservoir drawdown

Time pump started 6:30 Pumping rate 209 gpm
 Total time 30 min to reach pumping water level 360 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <u>5</u> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
6:45	183	3 sec		20
7:00	360	4		15
7:15	360	30		2
7:30	360	30		2
7:45	359	30		2
8:00	359	30		2
8:15	359	30		2
8:30	359	30		2
8:45	359	30		2
9:00	359	30		2
9:15	359	30		2
9:30	359	30		2
9:45	359	30		2
10:00	359	30		2
10:15	359	30		2
10:30	359	30		2
10:45	359	30		2
11:00	359	30		2
11:15	359	30		2
11:30	359	30		2
11:45	359	30		2
12:00	359	30		2
12:15	359	30		2
12:30	359	30		2
12:45	359	30		2
1:00	359	30		2
HD-224 1:00	359	30		2
	359	30		2

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: Tri-County Pump Service, Inc. Telephone #: 301-432-0330
Address: 6711 Old National Pike
Bowling Green, Md 21713

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): William E. Griffith License# 20135
*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: Harry Truxel Telephone #: 301-251-3317
Subdivision: K+D Stables Lot #: 2003 Well Tag #: HO-
Site Address: 14347 Howard Rd
Danvers Md 21036

Submersible Pump Data **Pitless Adapter** **Well Cap and Electric Conduit**
Make: Sta. Lite Make: American Gravity Two piece watertight cap:
Model #: 7SP4E02HL-04 Model #: PT 800 Screened, vented well cap:
Pump Capacity: 1 GPM Depth: 36 (36" min) Cap secured to casing:
Well Yield: 2 GPM NSF/WSC approved: Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: 40 (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

Pipes to house **House Connection**
Type: 1" Poly PVC sleeve to undisturbed soil at wall penetration: YES
PSI: 160 (160 psi min) Approximate length of sleeve: 20 ft
Depth of supply line: 36 (36" min) Sleeve caulked and 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.

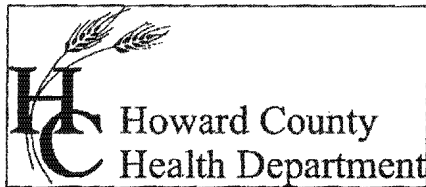
Signature of company representative responsible for installation: William E. Griffith date: 5-19-06

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

Date Insp. Requested: _____ Date Insp. Approved: 5/25/06 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 gromt observed below pitless adapter

5/22/06 + 5/23/06
Water Line
Only 2.5' Deep
Near Well.
35'-40' of Line
Needs to Be Dug
Deeper.
BB

Backfill
6" w/sand GAC
left sticker
5/25/06
Well line
dug deeper
3' or greater
@ all points.
GAC



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(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

July 28, 2006

Jeff Hyde
NV Homes
6085 Marshalee Drive
Elkridge, MD 21075

SENT VIA FACSIMILE 410-379-2430

~~FAKED~~ 7/28/06

RE: K & D Stables, Lot 3
14337 Howard Road
Glenelg, MD 21737
BP #: B00157572
Well Permit # HO-95-0152

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 7/17/2006. Final approval of the well line connection to the dwelling was approved on 5/25/2006.**

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-95-0152. 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: 7/20/2006
Date of Well Completion: 11/04/2005

Approving Authority,


Sara Feigel, R. S.
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File

emailed 7/28/06

CERTIFICATE OF ANALYSIS

Requester:
NV Homes, Inc
Attn: Buddy
6085 Marshalee Drive Suite 130
Elkridge, Maryland 21075

S/O Number: 07-1246
Report Date: June 21, 2006

Property Sampled: 14337 Howard Road

County: Howard
Subdivision: Warfield Estates
Lot #: 2003
Building Permit #: B00157572
Tax Map #: 21
Parcel #: 207


Date/Time Collected: July 20, 2006 at 11:35 am
Date/Time Received: July 20, 2006 at 1:00 pm

Sample Location: Pressure Tank Tap
Sampler ID: 6724GP
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

Well Tag Number: HO-95-0152
Well Condition: 2-Piece Cap
Satisfactory

Water Conditioning/Treatment: None

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	<1.0 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	3.5 NTU	EPA 180.1	10 NTU	Pass
pH	5.7 Units	EPA 150.1	*6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	Absent	SM 9223B	Absent	Pass
E.coli	Absent	SM 9223B	Absent	Pass



Laura T. Fedor
Drinking Water Testing

MCL=Maximum Contamination Level

*SMCL=Secondary Maximum Contamination Level

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



TRACE LABORATORIES

5 North Park Drive
Hunt Valley, MD 21030
Telephone: 410/252-7742
Telephone: 410/584-9099
Fax: 410/584-9117
Email:
tracelab@connex.net
www.tracelabs.com

Maryland State Certified
Water Quality Laboratory
No. 318