

C1 0147

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A 517904

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-95-0174

OWNER Selfridge Builders last name Meadow Mill Dr first name TOWN Glenely SUBDIVISION Clarks Meadow SECTION LOT 3

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 include Top Soil, Sandy, Sand Stone MICKA, Sand Stone MICKA.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 22 NO. OF POUNDS 2200 GALLONS OF WATER 132 DEPTH OF GROUT SEAL 30+

CASING RECORD

MAIN CASING TYPE PL Nominal diameter 6 Total depth 83

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) (O) (T) (O) (T)

DEPTH (nearest ft.)

Table for depth measurements with columns for depth intervals and values.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

- 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. MSD 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)

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

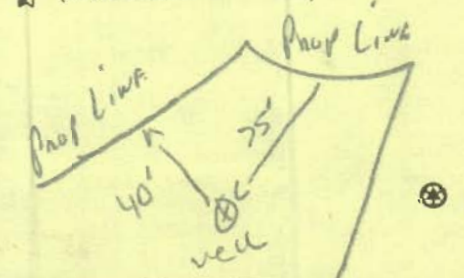
HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 40 TYPE OF PUMP USED (for test) S submersible

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)

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 8979

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-0174

523626

please type

fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

Selfridge Builders
14045 Gared Drive
Glenwood MD 21738

B 3

LOCATION OF WELL

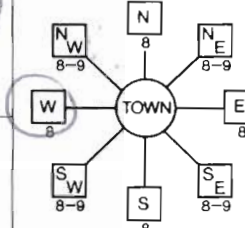
Howard
Clarks Meadow
Glenelg
MILES FROM TOWN

DRILLER INFORMATION

Ralph E. Mayne M S D 117
Ralph E. Mayne INC
17024 Hardy Rd. MT. Airy MD 21771

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



MEADOW MILL WAY
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD
DISTANCE FROM ROAD
ENTER FT OR MI
TAX MAP: 21 BLK: PARCEL 222

B 2

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 A517904
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 11/29/05
CO SIGNATURE Daniel A. Loughton 11/30/06
EXP. DATE
NORTH GRID 520 000 EAST GRID 794 000

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
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 DEEPEMED 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 HO 20036016 (A)

PERMIT No. HO-95-0174

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

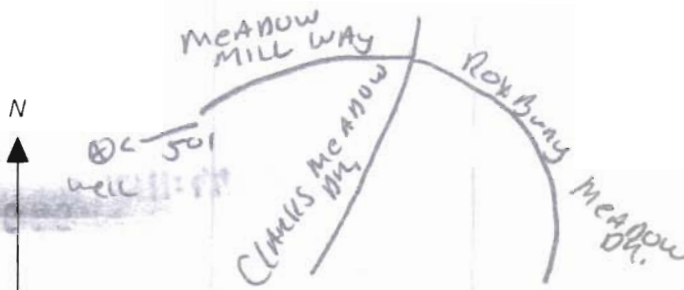
SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

580 794

295 520

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



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: NATIONAL WATER SERVICE Telephone #: 301-854-1353
Address: P.O. BOX 138
ASHLTON, MD 20541

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): DAVID RYCKE License#: RI 0145

*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: JENRIDGE BUILDERS Telephone #: 410-531-8930
Subdivision: CLARKS MEADOW Lot #: 3 Well Tag #: HO-95-0174
Site Address: 14413 Meadow Mill Way
GLENWOOD, MD 21738

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Grundfos Make: BTI Two piece watertight cap: [checked]
Model #: 15 SQE BT-180 Model #: PA Screened, vented well cap:
Pump Capacity 15 GPM Depth: 36 (36" min) Cap secured to casing: [checked]
Well Yield: 10 GPM NSF/WSC approved: Conduit min 18" B.G.: [checked]
Depth of well encountered at time of pump installation: 180 (feet) Conduit secured to well cap: [checked]
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

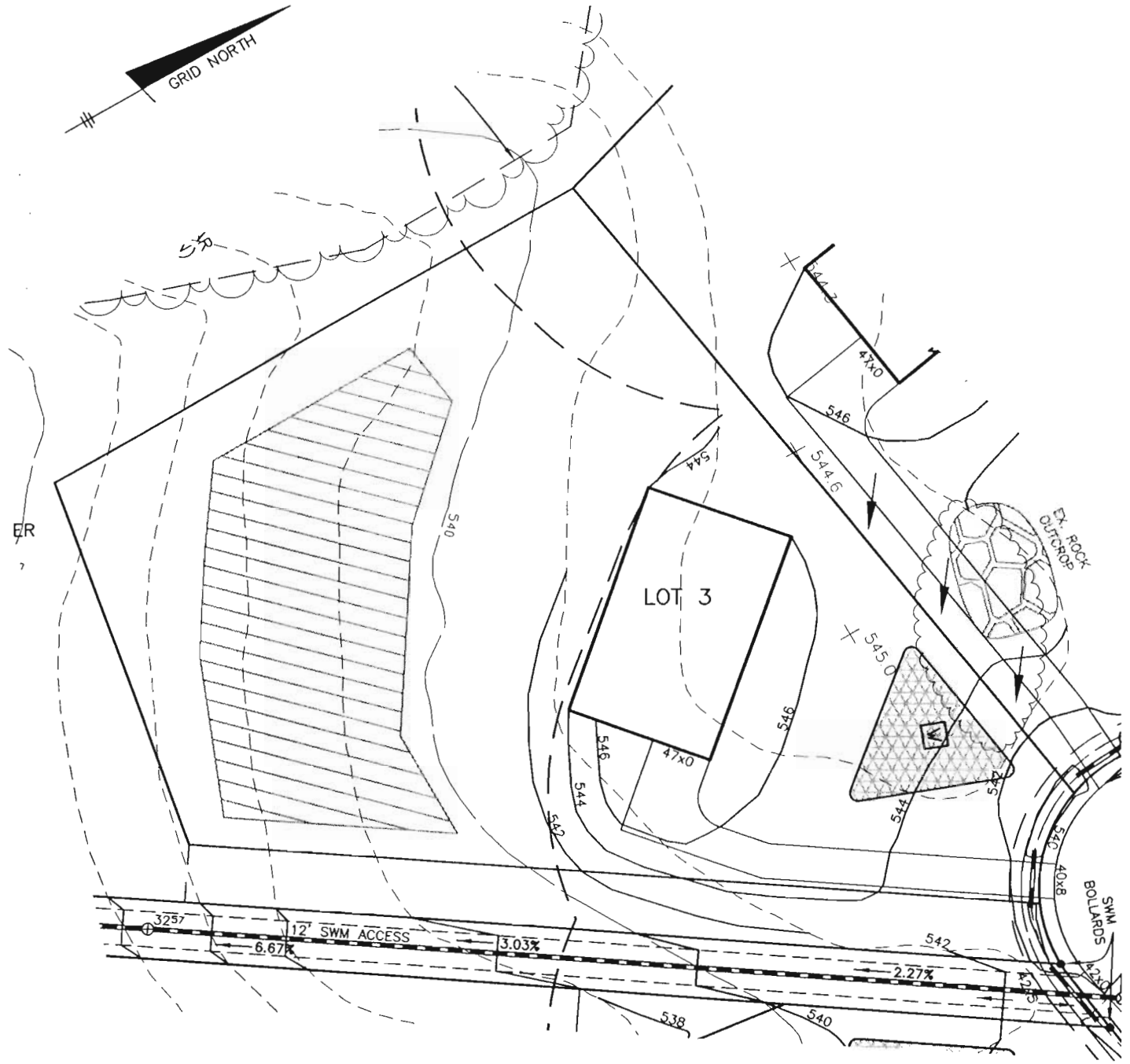
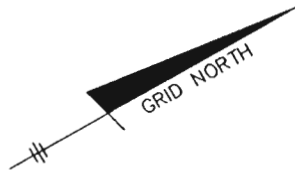
Piping to house House Connection
Type: AQUANET PVC sleeve to undisturbed soil at wall penetration: [checked]
PSI: 160 (160 psi min) Approximate length of sleeve: 6 ft
Depth of supply line: 36 (36" min) Sleeve caulked and sealed properly: [checked]


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 date 10/1/07

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

Date Insp. Requested: 8/20/07 Date Insp. Approved: 8/20/07 Inspector: (KW)
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade [checked]
Two piece cap installed and attached to casing securely [checked]
Elec. conduit extends at least 18" below grade/attached to cap properly [checked]
Safety rope not seen outside of well cap/casing [checked]
Correct well tag attached properly and casing 8" above finished grade [checked]
Water supply line sleeved adequately at house connection [checked]
Adequate grout observed below pitless adapter [checked]



 WELL LOCATION

 1500 SF WELL BOX

BENCHMARK

ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418
ELLICOTT CITY, MARYLAND 21043

PHONE: 410-465-6105 FAX: 410-465-6644

P:\1736 Clark's Meadow\dwg\70 well permits.dwg, 10/24/2005 5:48:27 PM

CLARKS MEADOW

LOT 3

F-06-029
WELL PERMIT EXHIBIT

SCALE: 1" = 50'

DATE: 10-24-05

PARCEL 31
WINDRIDGE FARMS
LOTS 1-26

DORSEY MILL RD.

ELEVATION =
515.0

Ø8-PIPE
100
MW-11
HO-94-4219

SWMF

LOT 1

LOT 2

LOT 3

LOT 4

LOT 5

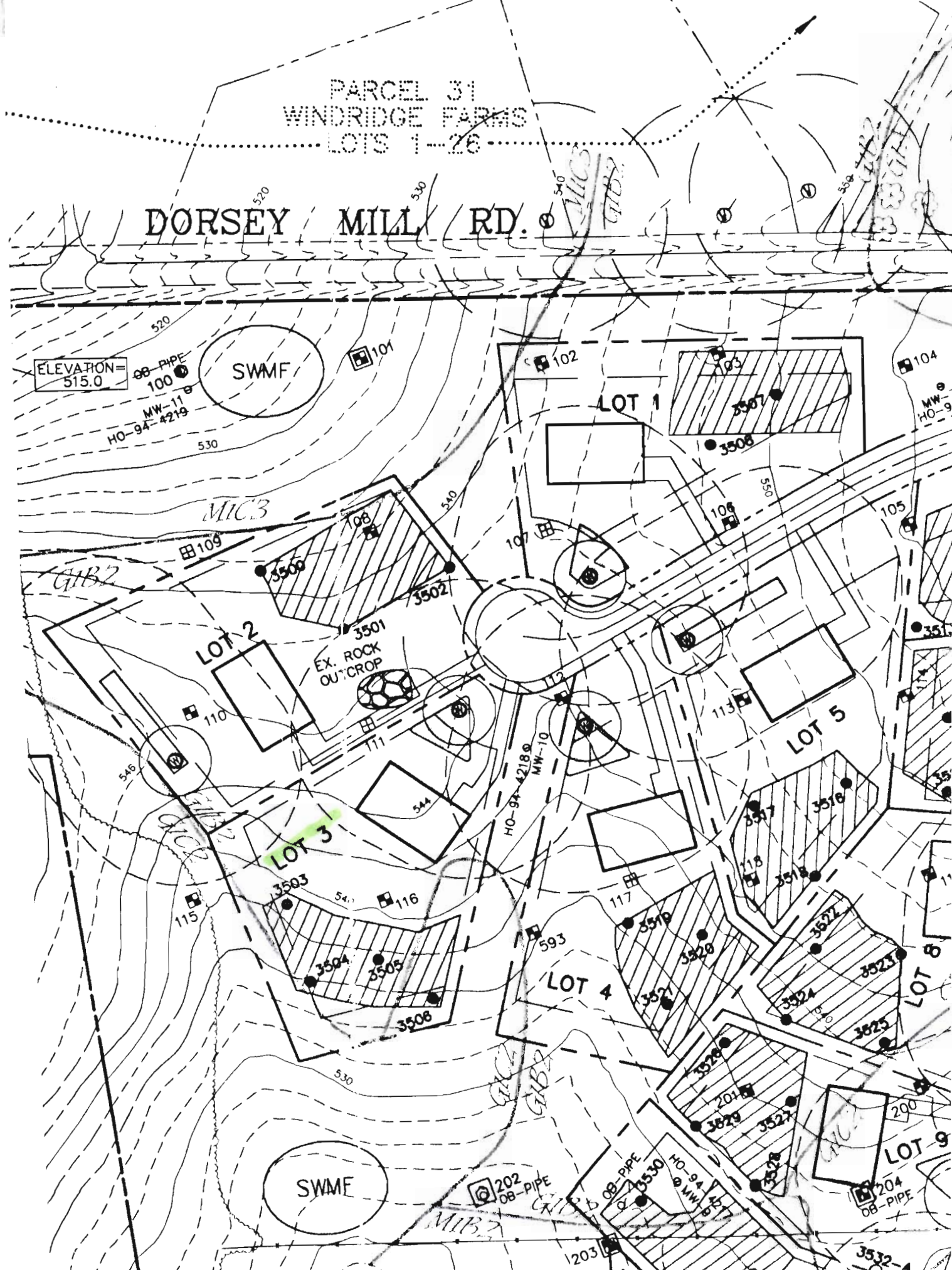
LOT 6

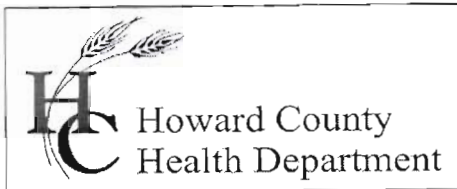
LOT 9

SWMF

Ø8-PIPE
202
Ø8-PIPE
204

Ø8-PIPE
204
Ø8-PIPE
204





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

January 22, 2008

Steve Poore & Lisa Lenderman
2115 Whitman Way
Marriottsville, MD 21104

SENT BY FACSIMILE 410-531-8939

RE: Clarks Meadow, Lot 3
14413 Meadow Mill Way
Glenwood, MD 21738
BP #: B07001169
Well Permit # HO-95-0174

Dear Steve and Lisa:

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 08/22/2007.**
Final approval of the well line connection to the dwelling was approved on 08/20/2007.

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.

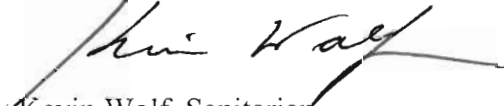
INTERIM CERTIFICATE OF POTABILITY

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-95-0174. 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 Sample: 12/28/2007, 01/10/2008 & 01/18/2008
Date of Well Completion: 02/14/2006

Approving Authority,



Kevin Wolf, Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File

CERTIFICATE OF ANALYSIS



Requester:
James H. Selfridge Builders, Inc
Attn: Bob
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 66628
Report Date: January 2, 2008

**Trace Laboratories, Inc.
Maryland**

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

Maryland State Certified
Water Quality Laboratory
No. 318

ISO 9001:2000



PERRY JOHNSON
REGISTRARS, INC.
Cert No. C2005-01504

Property Sampled: 14413 Meadow Mill Way, 21737
County: Howard
Subdivision: Clark Meadow
Lot #: 2
Building Permit #: B07001169
Tax Map #: 21
Parcel #: 271
Date/Time Collected: December 28, 2007 at 9:20 am
Date/Time Received: December 28, 2007 at 1:00 pm
Sample Location: Pressure Tank
Sampler ID: 6308KW
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes
Well Tag Number: HO-95-0174
Well Condition: 2-Piece Cap
Satisfactory

Water Conditioning/Treatment: None

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	8.3 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	12 NTU	EPA 180.1	10 NTU	Pass
Iron	1.0 mg/L as Fe		*0.3 mg/L as Fe	***
pH	6.1 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

Note: The high turbidity in this water sample is most likely caused by the elevated iron level.

Allison R. Milburn
 Manager-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.

CERTIFICATE OF ANALYSIS



Trace Laboratories, Inc.
Maryland

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

ISO 9001:2000



Cert No. C2005-01504

Requester:
James H. Selfridge Builders, Inc
Attn: Bob
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 66727
Report Date: January 11, 2008

Property Sampled: 14413 Meadow Mill Way, 21737

County: Howard
Subdivision: Clark Meadow
Lot #: 2
Building Permit #: B07001169
Tax Map #: 21
Parcel #: 271

Date/Time Collected: January 10, 2008 at 10:15 am
Date/Time Received: January 10, 2008 at 11:05 am

Sample Location: Mop Sink Tap
Sampler ID: 5745KC
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

Well Tag Number: HO-95-0174
Well Condition: 2-Piece Cap
Satisfactory

Water Conditioning/Treatment: Sediment Filter *Treated?*

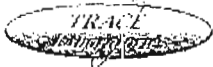
PARAMETER	RESULT	METHOD	MCL	
Turbidity	<1.0 NTU	EPA 180.1	10 NTU	Pass

Sampler, Kate Cannon, says sediment filter was functioning when sample was taken. mlb 1/14/08

Allison R. Milburn
Allison R. Milburn
Manager-Drinking Water Testing

MCL=Maximum Contamination Level

CERTIFICATE OF ANALYSIS



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Maryland

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

Maryland State Certified
Water Quality Laboratory
No. 318

ISO 9001:2000



Cert No. C2005-01504

Requester:
James H. Selfridge Builders, Inc
Attn: Bob
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 66866
Report Date: January 21, 2008

Property Sampled: 14413 Meadow Mill Way, 21737

County: Howard
Subdivision: Clark Meadow
Lot #: 2
Building Permit #: B07001169
Tax Map #: 21
Parcel #: 271

Date/Time Collected: January 18, 2008 at 11:05 am
Date/Time Received: January 18, 2008 at 2:30 pm

Sample Location: Bathroom Tap
Sampler ID: 6308KW
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

Well Tag Number: HO-95-0174
Well Condition: 2-Piece Cap
Satisfactory

Water Conditioning/Treatment: None

PARAMETER	RESULT	METHOD	MCL	
Turbidity	<1.0 NTU	EPA 180.1	10 NTU	Pass

Allison R. Milburn
Manager-Drinking Water Testing

MCL=Maximum Contamination Level