

C1 42346

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, WELL SITE ADDRESS, SUBDIVISION, SECTION, LOT

WELL LOG

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: rock to Brown clay, saprolite, Gray schist, White, Gray schist.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N), TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (ST, PL), Nominal diameter top (main) casing, Total depth of main casing

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

SCREEN RECORD

screen type or open hole (ST, BR, HO, PL, OT), insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS, WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER (A, E, P) 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., DRILLERS SIGNATURE, LIC. NO.

DEPTH (nearest ft.) HO 60 330

DIAMETER OF SCREEN (NEAREST INCH) 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

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 3, PUMPING RATE (gal. per min.) 15, METHOD USED TO MEASURE PUMPING RATE 1 gal, WATER LEVEL (distance from land surface) BEFORE PUMPING 7 ft, WHEN PUMPING 12 ft, TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES/NO), 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 02 (nearest foot)

LATITUDE 39.1510620, LONGITUDE 76.9555588 (DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04.

B 1 39470

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

Ho - 15 - 0394

fill in this form completely

Date Received (APA)

OWNER INFORMATION

Alpenstock LLC, 8361 Reservoir Rd, Freeton Md 20759

B 3

LOCATION OF WELL

Howard County, Riverview Subdivision, Highland Nearest Town

DRILLER INFORMATION

Allen Compton, MS D 009, Eagles Well Drilling, LLC, P.O. Box 202 Woodbine Md 21797

B 4

SOURCES OF DRILLING WATER

- Well Water, H.C.H.D., No one on site, Portland heat type III, 330' deep, 601 casing

8061 Browns Bridge Rd, ON WHICH SIDE OF ROAD, DISTANCE FROM ROAD, TAX MAP: 0045 BLK: 0005 PARCEL 0062

B 2

WELL INFORMATION

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation, Farming, Industrial, Commercial, Dewatering, Public Water Supply Well, Test, Observation, Monitoring, Open Loop Geothermal, Closed Loop Geothermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard County, State Signature, Date Issued 12/19/16, CO Signature, Exp. Date 12/19/17

APPROXIMATE DEPTH OF WELL 300 FEET, APPROXIMATE DIAMETER OF WELL 6 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)

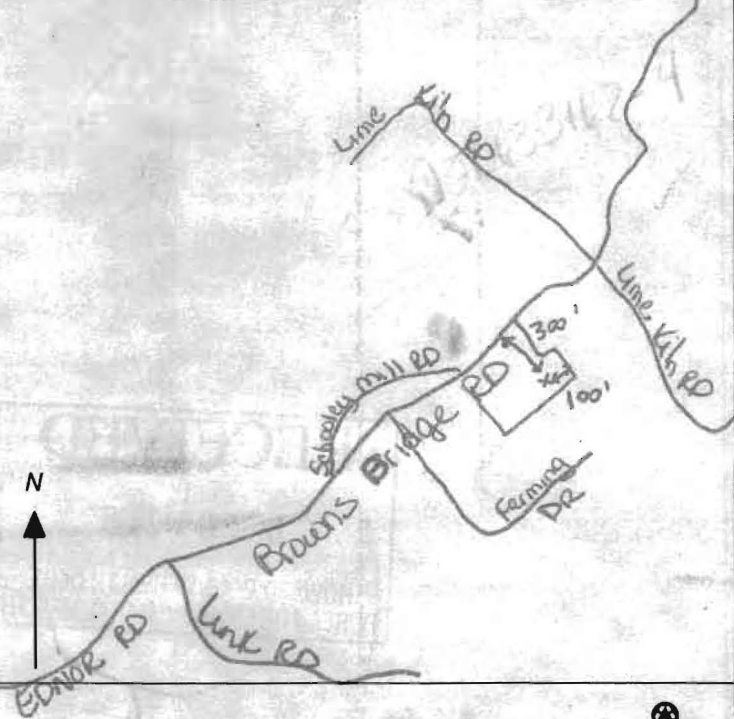
- This well will not replace an existing well, This well will replace a well that will be abandoned and sealed, This well will replace a well that will be used as a standby-contact local approving authority for policy on standby wells, This well will deepen an existing well

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

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

APPROP. PERMIT NUMBER G, PERMIT No. HO - 15 - 0394

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



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 #: 301-854-1333  
Address: P.O. Box 138  
ASHTON, MD 20861

(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# PI 0145

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: JAY SCHLUETER      Telephone #: 240-393-1287  
Subdivision: \_\_\_\_\_      Lot #: NA      Well Tag #: HO-15-0394  
Site Address: 8061 BROWNS BRIDGE Rd  
HIGHLAND MD 20777

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>✓</u>
Model #: <u>15 SQE 07-180</u>	Model#: <u>PA 800</u>	Screened, vented well cap: <u>✓</u>
Pump Capacity <u>15</u> GPM	Depth: <u>48</u> (36" min)	Cap secured to casing: <u>✓</u>
Well Yield: <u>15</u> GPM	NSF approved: _____	Conduit min 18" B.G.: <u>✓</u>
Depth of well encountered at time of pump installation: <u>330</u> (feet)		Conduit secured to well cap: <u>✓</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
Torque arrestors or Cable guards are required - Must circle one  
Safety rope, if used, attached to inside of well casing with eye bolt N/A

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>Poly</u>	PVC sleeved to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>5'</u>
Depth of supply line: <u>4'</u> (36" min)	Sleeve caulked and 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.

Signature of company representative responsible for installation \_\_\_\_\_ date 2/27/17

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

Date Insp. Requested: 2/24/17      Date Insp. Approved: 2/24/17 SC

Inspection Data: Pitless adapter and water supply line at least 36" below grade	<u>✓</u>
Two piece cap installed and attached to casing securely	<u>✓</u>
Elec. conduit extends at least 18" below grade/attached to cap properly	<u>✓</u>
Safety rope installed inside of well casing	<u>✓</u>
Correct well tag attached properly and casing 8" above finished grade	<u>✓</u>
Water supply line sleeved adequately at house connection	<u>✓</u>
Adequate grout observed below pitless adapter	<u>✓</u>

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

**SUBMIT COPIES OF COMPLETED FORM TO:**

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK  
 3/15/17 SC

DATE WELL ABANDONED: 2/28/17 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

HO-15-0394

\* PERMIT NUMBER OF REPLACEMENT WELL: \_\_\_\_\_

\* PERSON ABANDONING WELL: Allen Gimpf WELL DRILLER'S LICENSE NUMBER: \_\_\_\_\_

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Jay Schlueter

**SITE LOCATION MAP**

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: Highland  
 TAX MAP 0045 BLOCK 0005 PARCEL 0062  
 SUBDIVISION: Riverview  
 SECTION: \_\_\_\_\_ LOT: 1  
 STREET ADDRESS: 8061 Browns Bridge Rd.



LATITUDE 3 9 . 1509552

LONGITUDE 7 6 . 9557266

**LOG OF SEALING MATERIAL**

MATERIAL	FEET	
	FROM	TO
<u>Bentonite</u>	<u>0</u>	<u>50</u>

\* TYPE OF WELL BEING ABANDONED:

- DRILLED                       JETTED  
 BORED                           HAND DUG  
 OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC                       MUNICIPAL/PUBLIC  
 IRRIGATION                       INDUSTRIAL  
 TEST/OBSERVATION               GEOTHERMAL

**VOLUME OF MATERIAL USED**

16 bags

\* TYPE OF CASING:

- STEEL                               PLASTIC  
 CONCRETE                           OTHER (specify) \_\_\_\_\_

SIZE OF CASING: 5 INCHES IN DIAMETER

DEPTH OF WELL: 50 FEET DEEP

WAS ANY CASING REMOVED?  YES  NO

If yes, length removed, in feet: \_\_\_\_\_

WAS CASING RIPPED OR PERFORATED?  YES  NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

Allen Gimpf

MWD / MSD / MGS

CIRCLE ONE

2-28-17

DATE

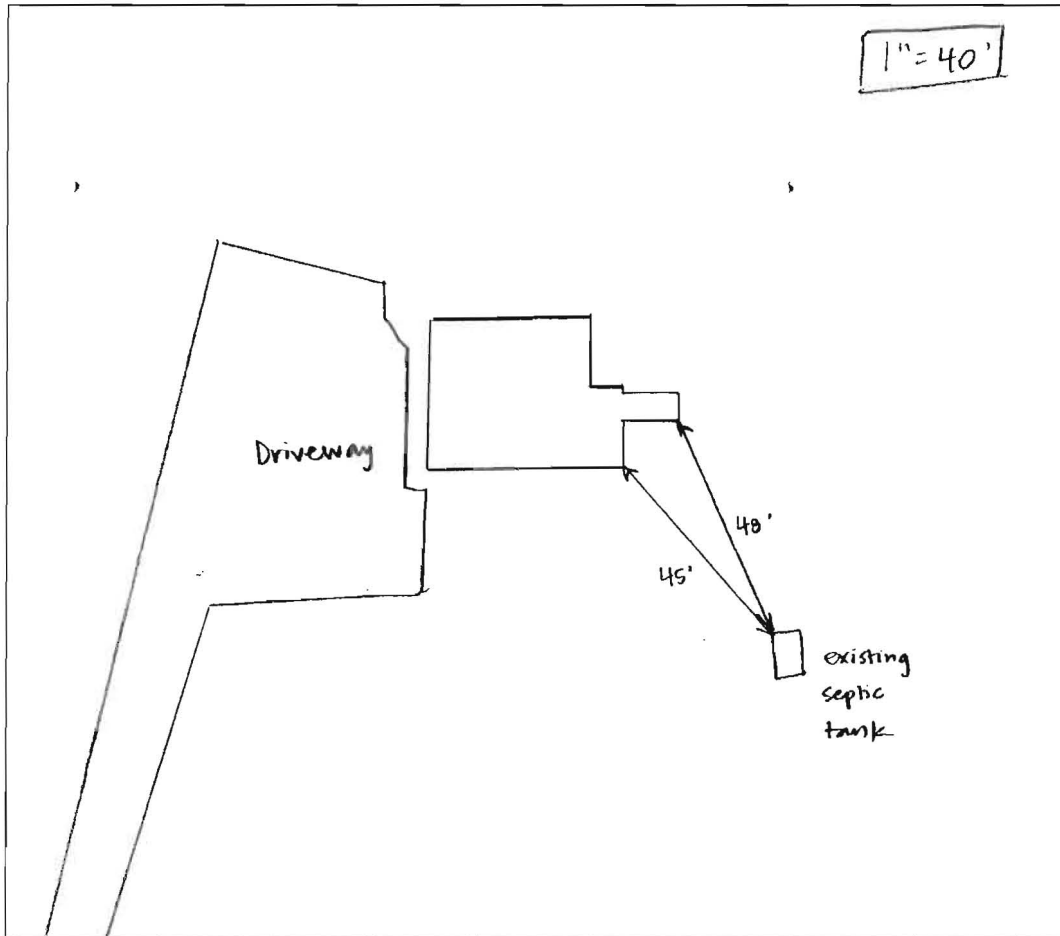
COUNTY

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

SITE INSPECTION SHEET

OWNER: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
ADDRESS: 9061 Browns Bridge Rd. CONTRACTOR: Fogle's  
\_\_\_\_\_ WELL TAG #: \_\_\_\_\_  
SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY #: \_\_\_\_\_  
PROPOSAL: \_\_\_\_\_

LOCATION DIAGRAM



COMMENTS: Met Allen Compton from Fogle's on site to determine if  
well box is accessible to well rig. Located existing septic tank on  
the property.

DATE: 12/16/16 INSPECTOR: Sarah Collins

380

J. THOMPSON  
PROPERTY  
PLAT NO. 19164

1" = 40'

MaC

S 33°36'20" W 461'

370

PROP. 1,500  
S.F. WELL BOX

ELEVATION  
19164

360

S 45°02'00" E 104.47'

EX WELL  
IN BSMT  
(TO BE  
ABANDONED)

N 33°25'34" E 85.00'

340

MaD

EX. 2 STY FIRM  
HSE W/BSMT

PROP. PORCH  
36.0'

APPROXIMATE  
OF SEPTIC SYS

EX WELL

NF  
LEONARD C. CABALLERO  
& JOHN M. GERWIG III  
L4109 F.440

225.80'

ASPHALT DRIVEWAY

75' STREAM BUFFER & BRL

BGE 223518

EX OR UTILITIES (N/A)

DO NOT REMOVE THIS TAG  
DEPARTMENT OF THE ENVIRONMENT  
WELL PERMIT NUMBER

HQ-15-0394

INFORMATION-GIVE NUMBER AND WRITE  
1800 WASHINGTON BLVD  
BALTIMORE, MARYLAND. 21230

BGE 500466 25' WETLAND BUFFER

BGE 172358

WETLANDS PER  
PLAT NO. 10592

100-YR. FLOODPLAIN  
PER PLAT NO. 10592

Well box approved  
12/19/16 SC

Well box staked by

Vanmar Associates, Inc.

R=840.00' L=81.15'

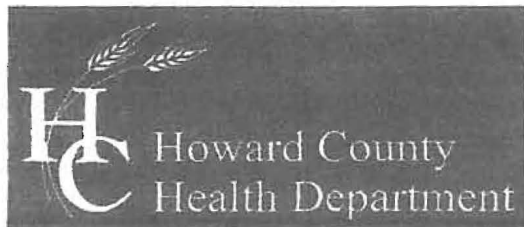
N 34'

12/16/16

8061 Browns Bridge Road

Existing septic tank on site





**Bureau of Environmental Health**

8930 Stanford Boulevard, Columbia, MD 21045

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

**Dr. Maura J. Rossman, M.D., 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:

Riverview                      1                      Browns Bridge Rd  
Subdivision/Property Name      Lot #                      Road Name

The well site has been staked by Vanmar Associates, Inc.  
(professional land surveyor or company employing professional land surveyors)  
on 11-28-16 (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.



Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045  
Main: 410-313-2640 | Fax: 410-313-2648  
TDD 410-313-2323 | Toll Free 1-866-313-6300  
[www.hchealth.org](http://www.hchealth.org)

Maura J. Rossman, M.D., Health Officer

March 15, 2017

Alpenstock, LLC  
8361 Reservoir Road  
Fulton, MD 20759

RE: **Replacement Well Sampling**  
8061 Browns Bridge Road  
#HO-15-0394

Dear Alpenstock, LLC,

According to our records, your replacement well has been connected to the dwelling. We request that you contact the Community Hygiene Program at **(410) 313-1773** to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (*COMAR 26.04.04*). This sampling includes testing for bacteria, nitrates, turbidity, and sand. There is currently **no charge** for the sampling and it is to your benefit to have it tested.

Sampling of the new well should be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment. If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office.

The old well on the property was abandoned by Fogle's Well Drilling on 2/28/17. The driller submitted documentation to the Health Department.

Feel free to contact me with any questions.

Sincerely,

A handwritten signature in cursive script that reads 'Sarah Collins'.

Sarah Collins, L.E.H.S.  
Howard County Health Department  
[SCollins@howardcountymd.gov](mailto:SCollins@howardcountymd.gov)  
410-313-6287

Cc: Community Hygiene Program  
File

## Oswald, Hank

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**From:** Theresa Miller <Theresa@foglesinc.com>  
**Sent:** Thursday, March 02, 2017 1:27 PM  
**To:** Oswald, Hank  
**Cc:** 'Jay Schlueter'  
**Subject:** Browns Bridge Rd  
**Attachments:** Browns Bridge Aband.pdf

Hank,

Jay Schueter asked me to send you over a copy of the abandonment report for 8061 Browns Bridge Rd. I will put the original in the mail today to your attention. Let me know if you have any questions or concerns.

Thanks  
Theresa  
443-609-4195

**Oswald, Hank**

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**From:** Oswald, Hank  
**Sent:** Wednesday, January 11, 2017 9:36 AM  
**To:** ron@vanmar.com  
**Cc:** jayschlueter@juno.com  
**Subject:** Perc Cert Revision\_8061 Browns Bridge Road  
**Attachments:** Brown Bridge\_New Well Sites.pdf

Hi Ron:

I've been informed that the drill rig cannot access the designated well box area on this site due steep slopes etc. However, the drill rig does have access along the driveway and this area would be at least 200 feet down gradient of the neighboring septic systems. With that said, the perc cert plan and the septic plan will need to be revised. Also, we will need a variance application from the homeowner for the proposed down gradient well sites prior to moving forward with the well and septic system installation. Please see attachment for the proposed location of the new well site plus 2 alternate well sites.

Should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, L.E.H.S.  
Howard County Health Department  
Bureau of Environmental Health  
Well & Septic Program  
8930 Stanford Boulevard  
Columbia, MD 21045  
410.313.1786 (Office)  
410.313.2648 (Fax)