

C1 05842 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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER A515214-13

ST/CO USE ONLY DATE Received MM 12 DD 06 YY 12

DATE WELL COMPLETED MM 11 DD 09 YY 12 Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 95-2419

OWNER Stewart Kret Homes last name first name WELLSITE ADDRESS Owings Overlook TOWN Highland SUBDIVISION Owings Property SECTION LOT 219

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: Brown clay (0-4), Brown Lumpy-Mica (4-35), Gray Limestone (35-140), Quartz (140-141), Gray Limestone (141-225), Quartz (225-226), Gray Limestone (226-300).

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 15 NO. OF POUNDS 170 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 38 ft.

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

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) (ST) (06) (42)

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

SCREEN RECORD screen type or open hole (ST) (BR) (HO) (PL) (OT) STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER 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. 1 M 3D 009 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 D

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

DEPTH (nearest ft.) 42 300 E A C H S C R E E N SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 12 METHOD USED TO MEASURE PUMPING RATE 1 gal WATER LEVEL (distance from land surface) BEFORE PUMPING 17 20 ft. WHEN PUMPING 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 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 () below LAND SURFACE 01 (nearest foot)

LATITUDE 39.1817703 LONGITUDE 76.9630356 (DEFAULT COORD. WGS 84)

NOTES:

B 1 **09353**

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO -95 -2419

fill in this form completely

538003-G please type

Date Received (APA)

09/11/12

OWNER INFORMATION

8 MM DD YY 13
15 Last Name Owner First Name 34
Stewart Kret Homes
36 Street or RFD 55
7090 Samuel Morse DR.
57 Town 70 State 72 Zip 76
Columbia md 21046

B 3

LOCATION OF WELL

8 COUNTY 21
Howard
23 SUBDIVISION 42
Owings Property
SECTION 44 46 LOT 48 50
24
52 NEAREST TOWN 71
Highland

DRILLER INFORMATION

Driller's Name 76 License No. 81
Allen Compton M S D 009
Firm Name
Fogles Well Drilling LLC
Address
P.O. Box 202 Woodbine MD 21797
Signature Date
Allen Compton 8-28-12

B 4

SOURCES OF DRILLING WATER

1.
2.
3.

11 STREET ADDRESS 30
Owings Overlook Highland Rd
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST EAST
SOUTH
150'
34 250 37
DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: **21** BLK: **72** PARCEL

B 2

WELL INFORMATION

1 2
APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20
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
- OPEN LOOP GEOTHERMAL
- CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard **A515214** **13**
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED **10/09/12** **R-KT** **10/9/13**
43 MM DD YY 48 CO SIGNATURE EXP. DATE

APPROXIMATE DEPTH OF WELL **300** FEET
24 28

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
- other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

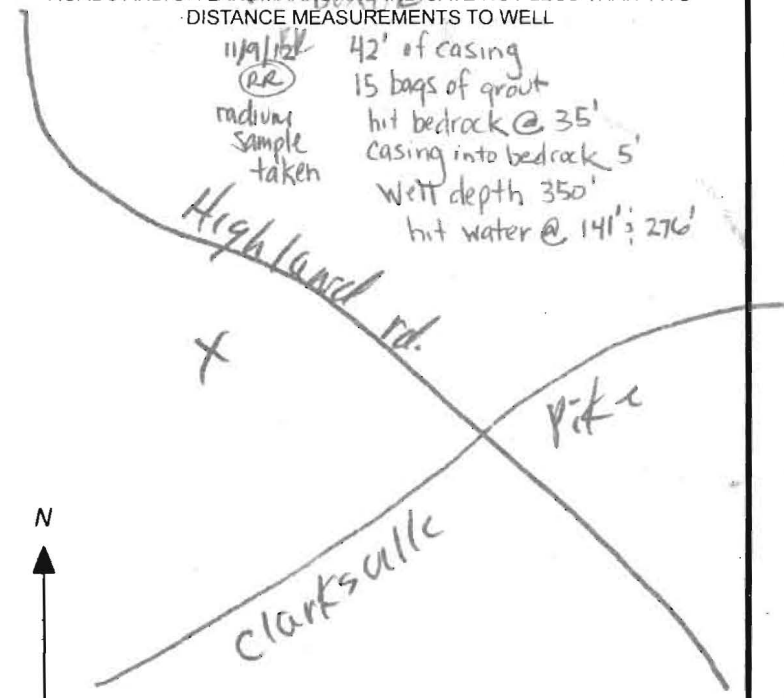
- THIS WELL WILL NOT REPLACE AN EXISTING WELL
 - THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 - THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 - THIS WELL WILL DEEPEM AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

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

APPROP. PERMIT NUMBER **G**

PERMIT No. **HO -95 -2419**

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

Radium Sample required at yield test

Lot 24

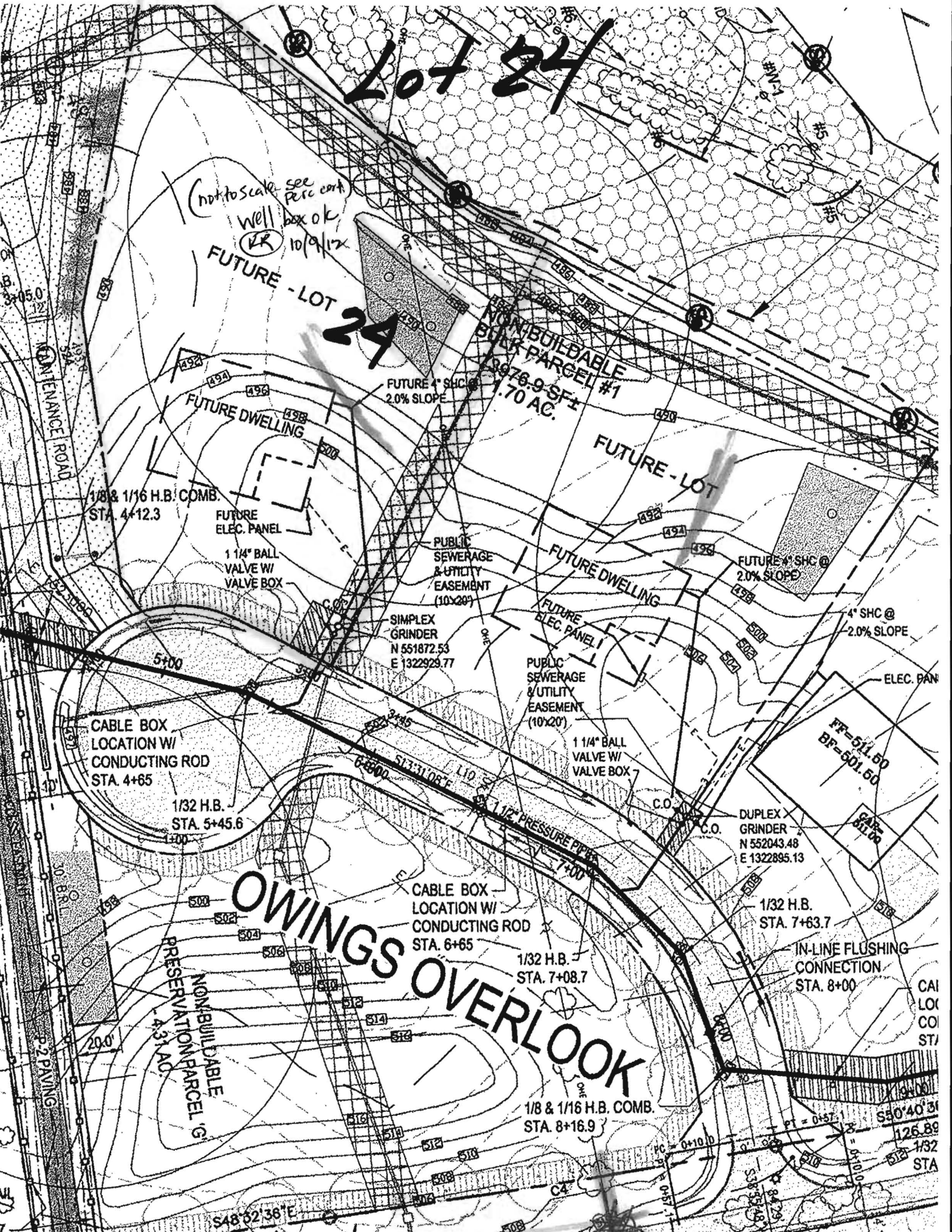
(not to scale see perc cert)
Well box OK
KR 10/9/17

FUTURE - LOT

24

NON-BUILDABLE
BULK PARCEL #1
3976.9 SF ±
.70 AC.

FUTURE - LOT



1/8 & 1/16 H.B. COMB.
STA. 4+12.3

FUTURE ELEC. PANEL

1 1/4" BALL VALVE W/ VALVE BOX

FUTURE 4" SHC @ 2.0% SLOPE

PUBLIC SEWERAGE & UTILITY EASEMENT (10x20')

SIMPLEX GRINDER
N 551872.53
E 1322929.77

FUTURE ELEC. PANEL

PUBLIC SEWERAGE & UTILITY EASEMENT (10x20')

1 1/4" BALL VALVE W/ VALVE BOX

FUTURE 4" SHC @ 2.0% SLOPE

4" SHC @ 2.0% SLOPE

CABLE BOX LOCATION W/ CONDUCTING ROD
STA. 4+65

1/32 H.B.
STA. 5+45.6

CABLE BOX LOCATION W/ CONDUCTING ROD
STA. 6+65

1/32 H.B.
STA. 7+08.7

1/32 H.B.
STA. 7+63.7

IN-LINE FLUSHING CONNECTION
STA. 8+00

1/8 & 1/16 H.B. COMB.
STA. 8+16.9

NON-BUILDABLE
PRESERVATION PARCEL #1
4.31 AC.

FF=511.50
BF=501.50

DUPLEX GRINDER
N 552043.48
E 1322895.13

CAI
LOC
CO
ST/

PT = 0+57.1
S50°40'31"
126.89
1/32
STA

S48°52'36"E

PC = 0+10.0

SA = 53.45

EA = 29.1



I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED UPON THE INFORMATION PROVIDED TO ME BY THE APPLICANT AND HIS AGENTS AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

ERIC MARIS, PROPERTY LINE SURVEYOR
DATE: 2/23/08

APPROVED FOR PRIVATE WATER AND SANITARY SEWERAGE SYSTEMS FOR LOTS 17-21, FUTURE LOT 22 AND NON-BUILDABLE PRESERVATION PARCELS FOR LOT 22, HOWARD COUNTY HEALTH DEPARTMENT.
DATE: 2/23/2008
HOWARD COUNTY HEALTH OFFICER

OWNERS / DEVELOPERS:
RANING BROOK LLC
8000 WOODSIDE COURT
COLUMBIA, MD 21046
ATTN: TRACY THOMPSON
PHONE: (410) 882-2788
FAX: (410) 882-9747

LEGEND:

- EXISTING CONTOURS
- PROPERTY LINE
- EXISTING TREELINE
- PROP. WELL LOCATION
- GENERIC HOUSE LAYOUT
- PROP. SEPTIC FIELD
- PROPOSED SHARED SEPTIC AREA
- FOREST CONSERVATION EASEMENT
- PERC TEST HOLE PASSED / SOIL BORING
- PERC HOLE FAILED



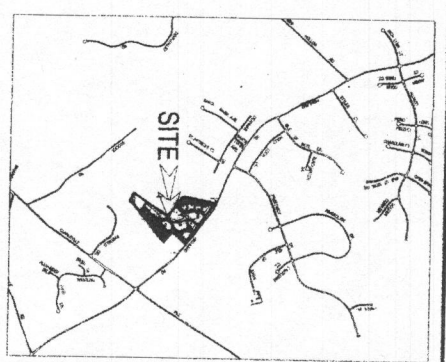
PLAN

SCALE: 1" = 100'

MICHAEL JOHN P. & ELLEN G.
SECT. 17, LOT 1
REC'D - AGRICULTURAL

MICHAEL JOHN P. & ELLEN G.
F-40 LOT 1
REC'D - AGRICULTURAL

MICHAEL JOHN P. & ELLEN G.
F-40 LOT 2
REC'D - AGRICULTURAL



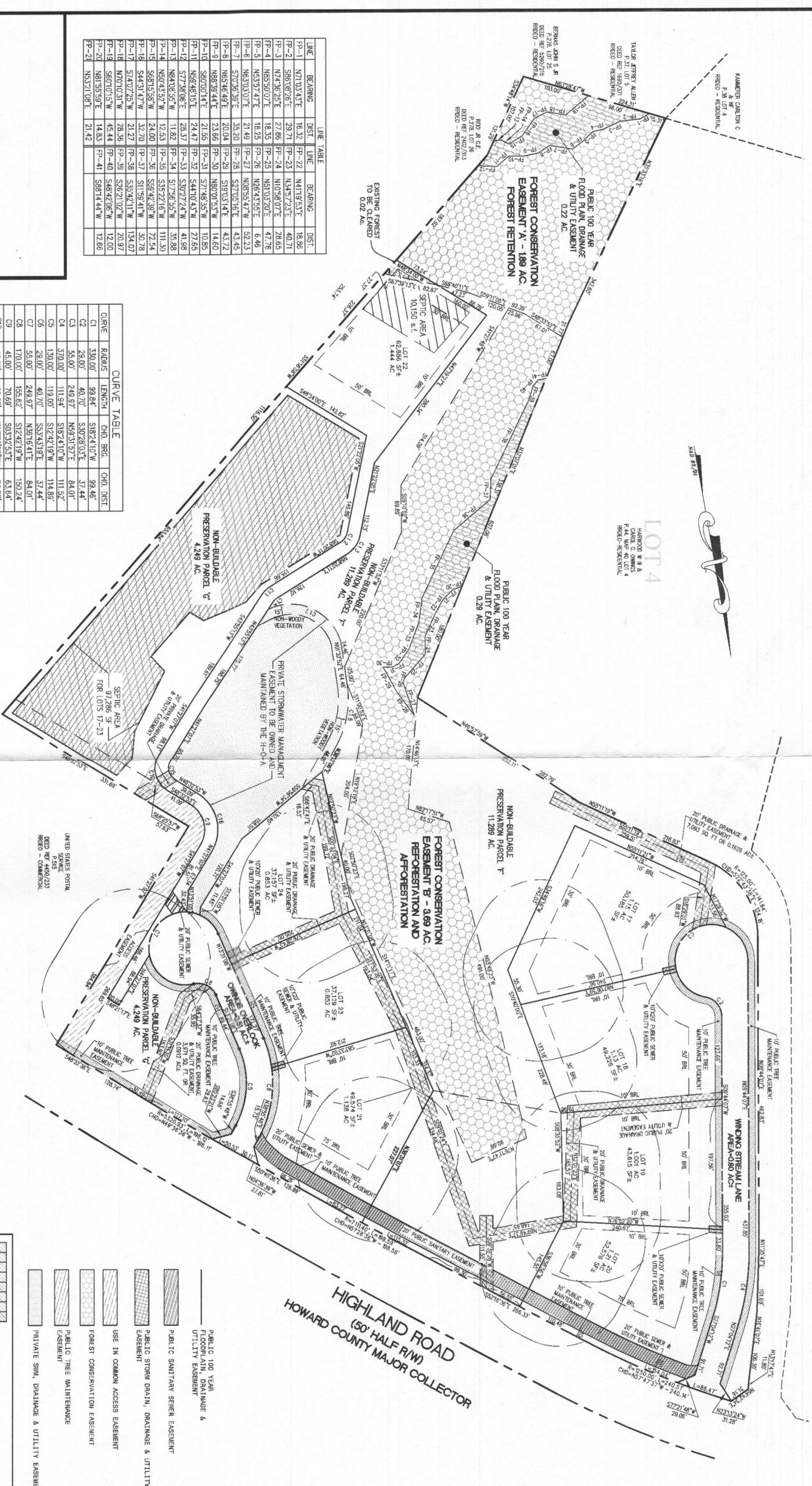
VICINITY MAP
SCALE: 1" = 2000'

GENERAL NOTES

1. ALL SHOWN HOUSE SITES COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
2. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
3. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 1000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT. INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE PROHIBITED. PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME EFFECTIVE UPON RECORDATION OF THIS PLAN. THE HEALTH DEPARTMENT SHALL BECOME THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES TO THE PRIVATE SEWERAGE EASEMENT. RECONSTRUCTION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
4. THIS AREA DESIGNATES THE PRIVATE SEWERAGE EASEMENT REQUIRED BY THE IMPROVEMENTS OF THE ENVIRONMENT FOR SHARED SEWERAGE DISPOSAL. AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UNLESS THE PUBLIC SEWER SYSTEM THE COUNTY HEALTH OFFICERS SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR EASEMENT TO THE PRIVATE SEWERAGE EASEMENT. RECONSTRUCTION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY. THE (2) LOTS REQUIRES 10,000 SF (11,000 SF PROVIDED).
5. EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
6. ALL WELLS SHALL BE DELETED PRIOR TO FINAL PERC APPROVAL. IT IS THE DEVELOPER'S RESPONSIBILITY TO SCHEDULE THE WELL DRILLING PRIOR TO FINAL PERC SUBMISSION. IT WILL NOT BE CONSIDERED GOVERNMENT DELAY IF THE WELL DRILLING OCCURS UPON THE HEALTH DEPARTMENT SIGNATURE OF THE RECORD PLAT.
7. A GROUND WATER APPROPRIATION PERMIT MUST BE OBTAINED PRIOR TO SUBMITTING THE RECORD PLAT FOR SIGNATURE.
8. THE CONTOURS AND ELEVATIONS SHOWN HEREON ARE BASED ON AERIAL PHOTOGRAPHY BY AIR SURVEY PHOTOGRAMMETRIC MAPPING SERVICES (AMMS) IN 2001.
9. THE BOARD OF HEALTH'S STATION HEREON ARE BASED ON A SURVEY BY ERIC MARIS, SURVEYOR, L.S., JANUARY 2002.
10. THE SPECIFICATIONS FOR THE DRAIN FIELDS WILL BE DESIGNED IN ACCORDANCE WITH HEALTH DEPARTMENT CRITERIA ADOPTED ON SEPTEMBER 1, 2002.
11. ALL SHARED SEPTIC SYSTEM PERC HOLES AND THE DESIGN OF THE SYSTEM SHALL BE DEPENDENT UPON MOODING STUDY RESULTS.
12. APPLICATION TO No. 51214 PERC LOCATION ARE BASED ON PERC TESTING DATED APRIL 21, 2001.

REVISED PERCOLATION CERTIFICATION PLAT

OWINGS PROPERTY, LOT 5
AND NON-BUILDABLE PRESERVATION PARCEL F & G
5th ELECTION DISTRICT HOWARD COUNTY, MD.



LINE TABLE

LINE	BEARING	DIST.	LINE	BEARING	DIST.
FP-1	N103°34'E	16.32	FP-22	N41°03'34"E	18.86
FP-2	S85°02'36"E	29.71	FP-23	N43°57'23"E	40.71
FP-3	N74°30'25"E	27.68	FP-24	N10°58'07"E	28.65
FP-4	N65°50'07"E	18.53	FP-25	N51°03'20"E	47.78
FP-5	N63°57'47"E	18.25	FP-26	N28°43'55"E	6.46
FP-6	N63°03'07"E	21.49	FP-27	N08°54'47"W	52.23
FP-7	S70°35'39"E	35.20	FP-28	S27°05'16"E	43.45
FP-8	N65°46'49"E	20.04	FP-29	S19°03'14"E	44.72
FP-9	N68°52'44"E	23.66	FP-30	N80°01'53"W	14.60
FP-10	S80°00'14"E	21.55	FP-31	S71°48'35"W	10.65
FP-11	N68°48'15"E	24.47	FP-32	S44°10'43"W	41.88
FP-12	S77°38'06"E	28.37	FP-33	S30°27'24"W	41.88
FP-13	N64°08'55"W	12.53	FP-34	S17°56'55"W	35.88
FP-14	N63°04'32"W	24.00	FP-35	S35°22'16"W	111.30
FP-15	S68°15'38"W	24.00	FP-36	S59°42'39"W	72.54
FP-16	S44°51'47"W	32.70	FP-37	S11°59'41"W	30.78
FP-17	S74°07'25"W	21.27	FP-38	S35°42'11"W	134.07
FP-18	N70°10'31"W	28.36	FP-39	S26°21'02"W	20.97
FP-19	S60°10'51"W	45.44	FP-40	S48°42'06"W	12.00
FP-20	N81°55'59"E	14.63	FP-41	S88°14'44"W	12.66
FP-21	N63°21'08"E	21.42			

CURVE TABLE

CURVE	RADIUS	LENGTH	CHD. BEG.	CHD. DIST.
C1	330.00'	99.94'	S18°24'10"W	99.46'
C2	29.00'	49.20'	S30°28'03"E	37.46'
C3	55.00'	249.97'	N69°31'57"E	84.07'
C4	370.00'	111.94'	S18°24'10"W	111.57'
C5	130.00'	119.00'	S12°42'19"W	114.89'
C6	29.00'	40.70'	S53°43'19"E	37.44'
C7	55.00'	249.97'	N53°43'19"E	84.07'
C8	170.00'	155.62'	S12°42'19"W	150.24'
C9	45.00'	70.69'	S03°32'33"E	63.64'
C10	40.00'	62.83'	N03°32'33"W	56.57'
C11	40.00'	17.05'	N65°07'42"E	16.92'
C12	22.00'	16.03'	S44°51'08"W	17.53'
C13	40.00'	32.79'	S44°51'08"W	31.88'
C14	22.00'	9.38'	N50°17'42"E	9.30'
C15	22.00'	34.56'	N63°32'53"W	31.11'
C16	65.00'	102.10'	S03°32'33"E	91.92'
C17	79.40'	135.99'	S6°50'11"E	118.97'
C18	143.31'	97.51'	S19°33'38"W	94.64'

Howard County Health Department
 APPROVED: For Public Water and Sewerage Systems

Signature of Platting Surveyor _____ Date _____
 (Name of Firm or Partnership that Owns The Property Being Recorded by this Plat) _____ Date _____
 Stewart Kret _____ Date _____
 (Owner)

OWNERS CERTIFICATE

SK HOMES AT HIGHLAND OWINGS, LLC, Owner of the Property Shown and Described Hereon, Herby Adopts this Plan of Subdivision, and in Consideration of the Approval of this Final Plat by the Office of Planning and Zoning, Establish the Minimum Building Restriction Lines and Grant unto Howard County, Maryland, Its Successors and Assigns, (1) The Right to Lay, Construct and Maintain Sewers, Drains, Water Pipes and Other Municipal Utilities and Services, In and Under All Roads and Street Right-of-Ways and The Specific Easement Areas Shown Hereon; (2) The Right to Require Dedication For Public Use The Beds of The Streets and/or Roads and Flood Plains and Open Space Where Applicable, and For Good and Other Valuable Consideration, Hereby Grant the Right and Flood Plains, Storm Drainage Facilities and Open Space Where Applicable; (3) The Right to Require Dedication of Waterways and Drainage Easements For the Specific Purpose of Their Construction, Repair and Maintenance; and (4) That No Building Or Similar Structure Or Any Kind Shall Be Erected On Or Over The Said Easements and Right-Of-Ways.

Witness My/Our Hands This Day Of June, 2012.

By: Stewart Kret _____ Date _____
 Witness _____

SURVEYORS CERTIFICATE

I Herby Certify That The Final Plat Shown Hereon is Correct; That It is a Resubdivision of Part of Lot 5, As Shown On A Plat of Subdivision Entitled, "Hempwood W. Owings Property, Lots 3, 4 & 5, Sheets 1 and 2 of Numbers 5689 and 5670; Said Part of Lot 5 Being All of The Land Conveyed By Our SAsH Holding, by Deed Dated December 29, 2011 and Recorded Among Said Land Records in Liber 13705, Folio 310, and That All Monuments Are In Place Or Will Be In Place Prior To The Acceptance of This Plat. The Subdivision by Howard County as Shown, in Accordance With The Annotated Code of Maryland, as Amended.

C. Vernon Kelly
 Professional Land Surveyor
 Maryland License No. 10977 (Exp. 7/25/2014)

Date _____

Recorded As Plat _____ on _____ Among The Land Records of Howard County, Maryland.

OWINGS PROPERTY - LOT 5

Subdivision Record Plat

LOT 5 - 22.7 AC. NON-BUILDABLE PRESERVATION H. PLANNED UNIT DEVELOPMENT (PUD) OWINGS PROPERTY, 5th ELECTION DISTRICT, HOWARD COUNTY, MARYLAND

SCALE: 1"=100'

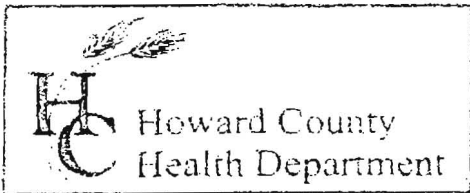
DATE: August 21, 2012

SHEET 2 OF 2

PREPARED BY: **AB CONSULTANTS, INC.**
 9450 ANNAPOLIS ROAD
 LANHAM, MARYLAND 20706
 PHONE: (301) 306-3091
 FAX: (301) 306-3092

- PUBLIC 100 YEAR FLOODPLAIN, DRAINAGE & UTILITY EASEMENT
- PUBLIC SANITARY SEWER EASEMENT
- PUBLIC STORM DRAIN, DRAINAGE & UTILITY EASEMENT
- USE IN COMMON ACCESS EASEMENT
- FOREST CONSERVATION EASEMENT
- PUBLIC TREE MAINTENANCE EASEMENT
- PRIVATE SWM, DRAINAGE & UTILITY EASEMENT

This Area Designates A Private Sewerage Easement of At Least 10,000 Square Feet or 110,000 Square Feet Per Lot For Shared Use of The Property Shown and Described Hereon. The Easement is to be used for the collection, conveyance, treatment and disposal of sanitary sewage. The Easement shall be subject to the terms and conditions of the Private Sewerage Easement Agreement, a copy of which is attached hereto. The Easement shall be subject to the terms and conditions of the Private Sewerage Easement Agreement, a copy of which is attached hereto. The Easement shall be subject to the terms and conditions of the Private Sewerage Easement Agreement, a copy of which is attached hereto.



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

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by Jose Polanco Escalante Engineers (professional land surveyor or company employing professional land surveyors) on 8-28-12 (date) and does not require a site inspection.
Lot # 17-24
- 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 6/10/03

**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: _____ Telephone #: _____
Address: _____

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

***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: _____ Telephone #: _____
Subdivision: _____ Lot #: 24 Well Tag #: HO-95-2419
Site Address: 6818 Owings Overlook

Submersible Pump Data

Make: _____
Model #: _____
Pump Capacity _____ GPM
Well Yield: _____ GPM

Pitless Adapter

Make: _____
Model#: _____
Depth: _____ (36" min)
NSF/WSC approved: _____

Well Cap and Electric Conduit

Two piece watertight cap: _____
Screened, vented well cap: _____
Cap secured to casing: _____
Conduit min 18" B.G.: _____

Depth of well encountered at time of pump installation: _____ (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

Piping to house

Type: _____
PSI: _____ (160 psi min)
Depth of supply line: _____ (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: _____
Length of sleeve(5' minimum from foundation): _____
Sleeve sealed properly: _____

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 _____

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

Date Insp. Requested: _____ Date Insp. Approved: _____ Inspector: BB
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 _____

*Reinspection OK
per BB
8-26-14*

**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: Apple's Well Drilling LLC Telephone #: 410-795-5670
Address: J PO Box 202
Woodbine, MD 21797

(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 C Foyle License# MSD226

***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: Stewart Kret Telephone #: 410 312 5160
Subdivision: Owings Property Lot #: 24 Well Tag #: HO-95-2419
Site Address: 1618 Owings Overlook Way
Highland, MD 20777

Submersible Pump Data

Make: Grundfos
Model #: ISSQE107-180
Pump Capacity: 7 GPM
Well Yield: 4.5 GPM

Pitless Adapter

Make: Campbell
Model #: N/A
Depth: 36" (36" min)
NSF/WSC approved: yes

Well Cap and Electric Conduit

Two piece watertight cap: yes
Screened, vented well cap: yes
Cap secured to casing: yes
Conduit min 18" B.G.: yes
Conduit secured to well cap: yes

Depth of well encountered at time of pump installation: 300' (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.3.4

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

Piping to house

Type: 1" poly pipe
PSI: N/A (160 psi min)
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
Length of sleeve (5' minimum from foundation): 5'
Sleeve 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: David Foyle date: 5-27-14

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

Date Insp. Requested: _____ Date Insp. Approved: _____ Inspector: _____

- 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 3" above finished grade _____
- Water supply line sleeved adequately at house connection _____
- Adequate grout observed below pitless adapter _____

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 94798 Account #: 1930
Reference: Fogle's Well Drilling Company: Fogle's Well Drilling
Location: 6818 Owings Overlook Way Requested By: Dave Fogle
Highland, MD 20777 Source: Well Water
Date/ Time Collected: 6/19/2014 1440 Site: Pressure Tank ✓
Date/Time Rec'd: 6/19/2014 1530 Treatment: None ✓
Chlorine ppm: Free: ND ✓ Total: ND pH: 7.1
Collected By: J. Fogle 1974JF Well #: HO-95-2419

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM18 9223	6/20/2014 / 1015 / CCH
Bacteria, E. coli, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM18 9223	6/20/2014 / 1015 / CCH
Nitrate	<1.0 ✓	mg/L	10	601	6/20/2014 / 1100 / CCH
Turbidity	2.44 ✓	NTU	<10	SM18 2130B	6/20/2014 / 0845 / JKW
Sand	NS ✓	mg/L	5	Visual/Gravimetric	6/20/2014 / 0845 / JKW

OK JEB 6/26/2014

NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 Sample collected by client, analyzed as received
- 8 pH tested in lab, chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B13003599

Date Reported: 6/20/2014