

**C1** 52474 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

ST/CO USE ONLY DATE RECEIVED 09/11/17 DATE WELL COMPLETED 09/08/17 Depth of Well 500 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-17-0107

OWNER Elm Street Development WELL SITE ADDRESS HAVILAND MILL RD TOWN CLARKSVILLE SUBDIVISION MILL CREEK SECTION \_\_\_\_\_ LOT 10

**WELL LOG**  
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
SOIL	0	6	
SANDY			
Brown Shale	6	15	
Tan Shale	15	38	
Hard Gray Rock	38	500	✓
		71	✓
Attempt #1 - 500' Dry Hole			
Attempt #2 - 600' Dry Hole			
Dry Holes Abandoned			

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

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

NO. OF BAGS 16 NO. OF POUNDS 1200

GALLONS OF WATER 80

DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 40 ft.  
(enter 0 if from surface)

**CASING RECORD**

casing types insert appropriate code below

ST STEEL CO CONCRETE  
PL PLASTIC OT OTHER

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 40

60 61 63 64 66 70

**OTHER CASING (if used)**

EACH CASING	diameter inch	depth (feet) from	to

**SCREEN RECORD**

screen type or open hole (insert appropriate code below)

ST STEEL BR BRASS HO OPEN HOLE  
PL PLASTIC OT OTHER

**C2** DEPTH (nearest ft.)

HO 40 500

8 9 11 15 17 21  
23 24 26 30 32 36  
38 39 41 45 47 51

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

70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76 \_\_\_\_\_

TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3** **PUMPING TEST**

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 1.0

METHOD USED TO MEASURE PUMPING RATE Watch/Bucket

WATER LEVEL (distance from land surface)  
BEFORE PUMPING 44 ft.  
WHEN PUMPING 146 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 (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 \_\_\_\_\_ 36 \_\_\_\_\_

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 } 1 (nearest foot)

LATITUDE 39 1 8439  
LONGITUDE 77 60011  
(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. 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.

NUMBER OF UNSUCCESSFUL WELLS: 2

WELL HYDROFRACTURED Y N

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

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. MD 355  
DRILLERS SIGNATURE Daniel Buz  
LIC. NO. DR 109

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

B 1 32967

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 559843-I please type

STATE PERMIT NUMBER HO-17-0107 fill in this form completely

OWNER INFORMATION Date Received (APA) 11/16/16 ELM STREET DEVELOPMENT 1355 BEVERLY RD, Suite 240 McClean VA 22101

LOCATION OF WELL HOWARD MILL CREEK CLARKSVILLE

DRILLER INFORMATION MICHAEL BARLOW MW D355 BARLOW WELL DRILLING 522 UNDERWOOD LANE 21014 MD 11/3/16

SOURCES OF DRILLING WATER Well

HAVLAND MILL RD ON WHICH SIDE OF ROAD DISTANCE FROM ROAD 1200 FT TAX MAP: 39 BLK: 6 PARCEL: 0001

WELL INFORMATION APPROX. PUMPING RATE 5 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 750 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD 546326-I 13 3/2/17 3/2/18

USE FOR WATER DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

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 3/17 5/24 3/20 5/16 5/23

METHOD OF DRILLING (circle one) BORED (or Augered) AIR-ROTary CABLE other JETTED AIR-PERCussion ROTARY (Hydraulic Rotary) Drive-POINT

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL

Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER HO 2016 G002 PERMIT No. HO-17-0107

SPECIAL CONDITIONS SEE ATTACHED MEMO



**MICHAEL BARLOW WELL DRILLING & SERVICE, INC.**

522 Underwood Lane  
(410) 838-6910

Bel Air, Maryland 21014  
Fax (410) 838-3582

**WELL YIELD REPORT**

Date Test Completed:	July 19, 2017		
Well Depth:	500	feet	
Customer	Elm Street Development	Permit #	HO-17-0107
Road	Haviland Mill Road	Subdivision	Mill Creek
City	Clarksville	Section	
State	Maryland	Lot #	10

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
9:45 AM	45	5	12.00
10:00 AM	108	6	10.00
10:15 AM	155	45	1.33
10:30 AM	175	60	1.00
10:45 AM	175	60	1.00
11:00 AM	175	60	1.00
11:15 AM	175	60	1.00
11:30 AM	175	60	1.00
11:45 AM	175	60	1.00
12:00 PM	175	60	1.00
12:15 PM	175	60	1.00
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12:45 PM	175	60	1.00
1:00 PM	175	60	1.00
1:15 PM	174	60	1.00
1:30 PM	174	60	1.00
1:45 PM	174	60	1.00
2:00 PM	174	60	1.00
2:15 PM	174	60	1.00
2:30 PM	174	60	1.00
2:45 PM	174	60	1.00
3:00 PM	174	60	1.00
3:15 PM	174	60	1.00
3:30 PM	174	60	1.00
3:45 PM	174	60	1.00
4:00 PM	174	60	1.00
4:15 PM	174	60	1.00
This yield test report is for informational purposes only. Please note the yield may increase or decrease over time and the GPM indicated above is not a guarantee.			

HOWARD COUNTY HEALTH DEPARTMENT  
 BUREAU OF ENVIRONMENTAL HEALTH  
 WELL & SEPTIC PROGRAM  
 TEL: (410)513-1771 FAX: (410)513-2648

Information Form for the Installation of the Well Pump, Pileless Adapter, and Supply Line

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: Fogles Well Pump & Water Treatment, LLC Telephone #: 410 795 9670  
 Address: 1580 Obrecht Rd  
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): David C. Fogle 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: NUR INC Telephone #: 240-755-7378  
 Subdivision: MILL CREEK Lot #: 10 Well Tag #: HO-17-0107 ✓ 12/13/2018 (w)  
 Site Address: 13958 Mill Creek Ct  
Clarksville, MD 21029

<u>Submersible Pump Data</u>	<u>Pileless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Goulds</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>5H510422</u>	Model #: <u>N/A</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36"</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>1</u> GPM	NSF/WSC approved: <u>YES</u>	Conduit min 1" R.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>500'</u> (feet)	Conduit secured to well cap: <u>YES</u>	

If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.8.4  
 Torque wrenches, 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>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>200/160 psi min</u>	Length of sleeve (5' minimum from foundation): <u>6'</u>
Depth of supply line: <u>36"</u> (36" min)	Sleeve sealed properly: <u>YES</u>

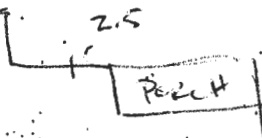
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: David C. Fogle date: 12/13/18

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

Date Insp Requested: 12/13/2018 Date Insp Approved: 12/13/2018 Inspector: D  
 Inspection Data: Pileless adapter watertight & water supply line at least 36" below grade ✓ 40 12/13/2018 (w)  
 Two piece cap installed and attached to casing securely ✓  
 Elec. conduit extends at least 18" below grade/attached to cap properly ✓ 36" 12/13/2018 (w)  
 Safety rope not outside of well cap/casing ✓  
 Correct well tag attached properly and casing 8" above finished grade ✓ 19.5" 12/13/2018 (w)  
 Water supply line sleeved adequately at house connection ✓ 8.5' 12/13/2018 (w)  
 Adequate grout observed below pileless adapter ✓

Ex House  
 12/13/2018 (w)



**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – AUGUST 1, 2019**

February 1, 2019

Homeowner  
13858 Mill Creek Court  
Clarksville, MD 21029

**RE: Mill Creek, Lot 10**  
**13858 Mill Creek Court**  
**Building Permit: B18003411**  
**Well Permit: HO-17-0107**

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 **1/3/2019**. Final approval of the well line connection to the dwelling was granted on **12/13/2018**. The well construction was completed on **7/8/2017**. Water samples were collected on **1/30/2019**.

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-17-0107. 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:

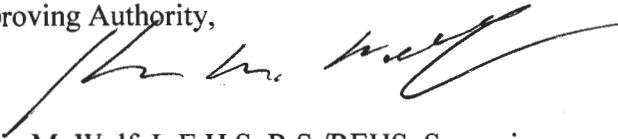
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

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

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



Kevin M. Wolf, L.E.H.S, R.S./REHS, Supervisor  
Groundwater Management Section  
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits  
Community Hygiene Program  
File

\*\*\*\*\*  
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

DATE WELL ABANDONED: 7/8/17 (month/day/year)

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

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

HO-17 - 0107

\* PERSON ABANDONING WELL: Michael Barkow WELL DRILLER'S LICENSE NUMBER: 355

CIRCLE MWD / MSD / MGD

\* OWNER'S NAME: Elm Street Development

SITE LOCATION MAP

\* WELL LOCATION:  
COUNTY: Howard  
NEAREST TOWN: CLARKSVILLE  
TAX MAP 39 BLOCK 6 PARCEL 0001  
SUBDIVISION: Mill Creek  
SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_  
STREET ADDRESS: HAVILAND MILL RD

Drilled within Staked Well Area

LATITUDE 39.18433

LONGITUDE 77.00029

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Drill Cuttings	600	25
Cement GROUT	25	0

\* TYPE OF WELL BEING ABANDONED:

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

\* USE CODE:

- DOMESTIC  MUNICIPAL/PUBLIC
- IRRIGATION  INDUSTRIAL
- TEST/OBSERVATION  GEOTHERMAL

\* TYPE OF CASING:

- STEEL  PLASTIC
- CONCRETE  OTHER (specify) Dry Hole

VOLUME OF MATERIAL USED

450 lbs Cement GROUT

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 600 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# 355

CIRCLE MWD / MSD / MGS

12/18/17 DATE

COUNTY \_\_\_\_\_

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**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

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

**REPORT OF ANALYSIS**

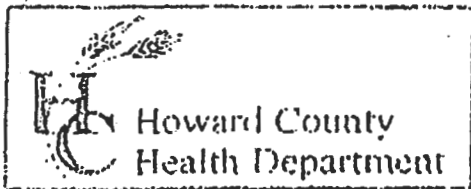
Laboratory ID #: 128254 Account #: 1933  
 Reference: Mill Creek Lot 10 Company: Fogles Well Pump & Treatment  
 Location: 13858 Mill Creek Court Requested By: Dave Fogle  
 Clarksville, MD 21029 Source: Well Water  
 Date/ Time Collected: 1/30/2019 1250 Site: Pressure Tank  
 Date/Time Rec'd: 1/30/2019 1530 Treatment: None  
 Chlorine ppm: Free: ND Total: ND pH: 5.8  
 Collected By: B. Wilkerson 9315BW Well #: HO-17-0107

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	1/31/2019 / 1000 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	1/31/2019 / 1000 / RER
Nitrate	3.53	mg/L	10	601	1/30/2019 / 1555 / RER
Turbidity	2.50	NTU	<10	SM20 2130B	1/30/2019 / 1600 / RER
Sand	NS	mg/L	5	Visual/Gravimetric	1/30/2019 / 1600 / RER

**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 Sample collected by client, analyzed as received
- 7 ND:None Detected
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 9 Visual well check: Sealed, vented cap

**Reason for Test :** Use & Occupancy**Building Permit # :** 18003411Date Reported: 1/31/2019



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:

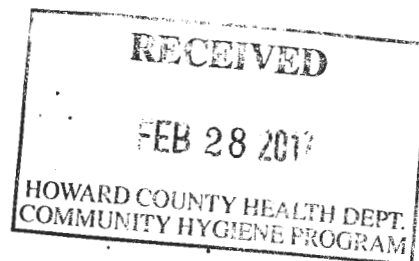
INDIVIDUAL well sites have been staked for mill creek

The well site has been staked by Bohler Engineering,  
(professional land surveyor or company employing professional land surveyors)  
on 2/24/17 (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 6/10/03





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

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

LOT 10

**MEMORANDUM**

**TO:** Barlow Well Drilling

**FROM:** Ryan Rappaport, L.E.H.S. (RR)  
Well and Septic Program

**DATE:** March 1, 2017

**RE:** **State Water Appropriation and Use Permit for Crawford Property/Mill Creek Subdivision #HO2016G002(01) & Special Conditions**

The State Water Appropriation and Use Permit for the Crawford Property/Mill Creek Subdivision has a requirement regarding well spacing and testing:

*15. The Permittee shall conduct simultaneous yield tests of wells closer than 100 feet apart, if at least one of the wells is on a lot less than one acre in size. The yield testing shall be conducted to ensure that the minimum yield requirements of COMAR 26.04.04.26 are met. In the event that a well that has been tested simultaneously with other wells does not meet minimum yield standards, the Permittee may relocate a well so as to achieve the 100-foot separation distance, deepen or otherwise modify the well to improve its yield or drill a second well to be used in tandem to meet the minimum yield standards during simultaneous testing. All wells shall comply with well construction standards.*

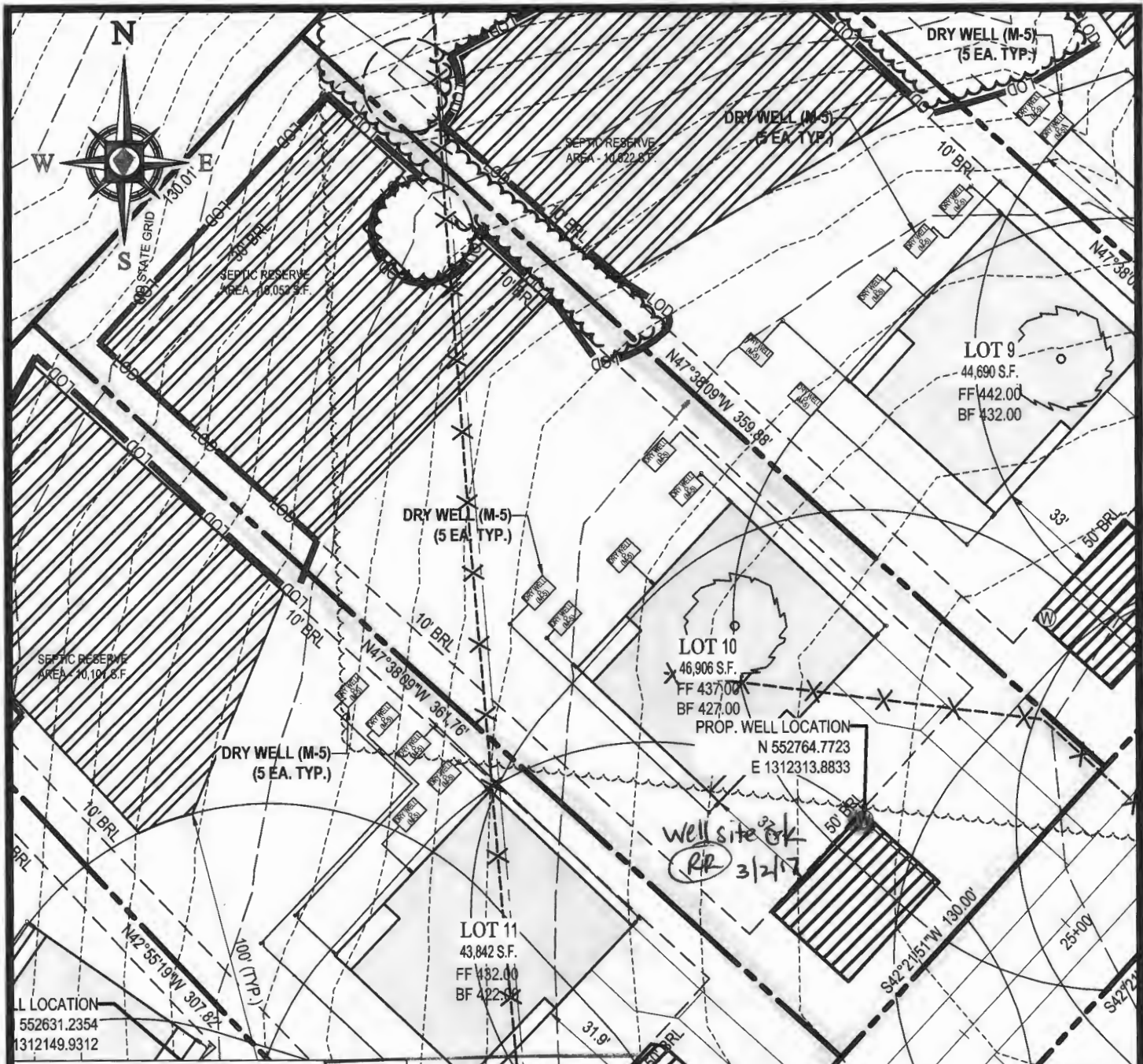
The lots of the Crawford Property/Mill Creek Subdivision that are less than an acre are lots 2, 3, 12, 13 and 18. If a well on one of these lots is within 100' of another well, a simultaneous yield test of both wells will be required.

**SPECIAL CONDITIONS**





- All drilling, grouting and yields must be called into the Health Department for inspection. Call 410-313-1771 for scheduling.
- Since all 23 lots have the well locations staked and not the lot's well boxes it is required that if during the drilling a dry hole is encountered, the Health Department must be notified immediately before any additional drilling is completed on that particular lot.
- The wells on lots 1, 7, 15 and 19 will require TDS, sodium and chloride water samples during the yield test.
- The wells on lots 20 and 21 must be drilled using steel casing that extends to at least 50 feet depth or 10 feet into competent bedrock, whichever is deeper.

Feel free to contact me with any questions at 410-313-1781 or [RRappaport@howardcountymd.gov](mailto:RRappaport@howardcountymd.gov).

Cc: File



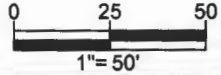
**LEGEND**

-  PROPERTY LINE
-  BUILDING RESTRICTION LINE
-  PROPOSED WELL BOX / WELL LOCATION
-  SEPTIC RESERVED AREA

RECEIVED  
50' BRL  
FEB 28 2017

HOWARD COUNTY HEALTH DEPT.  
COMMUNITY HYGIENE PROGRAM

HO-17-0107



PROJECT NAME: **MILL CREEK SUBDIVISION**  
**PROPOSED LOTS 1-23 & NONBUILDABLE PRESERVATION PARCEL A - G**  
 6780 HAVILAND MILL ROAD, CLARKSVILLE, MD

SHEET TITLE: **WELL EXHIBIT - LOT 10**  
 1 OF 1

SCALE: 1" = 50'	DATE: 11-01-16	CAD ID: EX0	PROJECT NUMBER: MD142038
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**BOHLER**  
ENGINEERING

22636 DAVIS DRIVE, SUITE 250 STERLING, VA 20164  
 PHONE: (703) 709-9500 FAX: (703) 709-9501



**GROUTING**

TREMIE LENGTH:                      TREMIE DIAMETER:                      PRODUCT USED: **B C** BAG WEIGHT:

MAKE UP WATER pH:                      THERMALLY ENHANCED: **Y N**                      TYPE/WEIGHT OF ADDITIVE:

GALLONS OF WATER USED PER BAG:                      MUD WEIGHT AT START:

MUD WEIGHT AT END:                      NUMBER OF BAGS USED:

NOTES:

**WELL DEVELOPMENT/YIELD/REWORKING**

METHODS USED: **S SB J OP C**                      DURATION:                      FINAL STATIC & YIELD:

HYDROFRACTURED: **Y N**                      SINGLE OR ZONE PACKER: **S Z**                      DEPTH OF PACKER SETS:

TOTAL GALLONS OF WATER USED:                      ESTIMATED YIELD OF FLOW BACK:

DEVELOPMENT NOTES:

**UPPER TERMINAL/PUMP INSTALLATION**

GROUT PRESENT IN ANNULAR SPACE: **Y N**                      PUMP IDENTIFICATION:

DROP PIPE DESCRIPTION:                      DEPTH/LOCATION OF CHECK VALVES:

PITLESS, CONDUIT PIPE & WATER SERVICE LINE DEPTH:                      SAFETY ROPE: **Y N**

ELECTRICAL CABLE DESCRIPTION:                      PROPER CAP & STICK UP: **Y N**

STATIC WATER LEVEL:                      PUMP SET DEPTH:                      TAG ON WELL: **Y N**

**GENERAL NOTES**

STATE OF MARYLAND WELL INSPECTION SHEET

DATE: 05/15/2017 COUNTY: Howard

WELL TAG #:

ONSITE START TIME: 11:40 Am

END OF INSPECTION TIME: 12:24

LATITUDE/LONGITUDE:

COPY OF PERMIT ONSITE  Y  N

WELL DRILLING PERSONNEL: Dan Barlow  
Brandon

GOVERNMENT PERSONNEL:

Joseph Cabahug

OTHERS:

CONSTRUCTION 05/15/2017  Drilled slightly out of staked box. See GAD note  
LOCATION CONSISTENT WITH PLAN:  Y  N CHLORINE PRESENT IN MAKE UP WATER: Y N

BIT/STABILIZER SIZE: 9" PENETRATION RATE: DNI

NOTES:

Air Rotary - Roller cone - NOT on site for commencement of drilling

6 1/4" I.D silverline Pvc - 1120 SDK-27.6  
Well casing \*X  
IC-2 impact class 300 ft. Lb @ 32°F  
\*X [ASTM F-480 NSF-WC]  
SLM 15 NC 04/27/17 23:28  
Made in USA

> 40ft of casing

drilling brown to gray  
Bedrock - gray

CASING/SCREEN 05/15/2017

LENGTH/SIZE/ASTM# OF CASING SET: ASTM F-480 NSF-WC

LENGTH/SIZE/ASTM# OF LINER: DNI

SCREEN LENGTH/SLOT SIZE/ASTM#: DNI

DEPTH SET:

NOTES:

See specs in construction notes  
on site for setting of casing