

C 1 52471

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 500

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-17-0119

OWNER: Elm Street Development, WELL SITE ADDRESS: Haviland Mill Rd, TOWN: Clarksville, SUBDIVISION: Mill Creek, SECTION: , LOT: 17

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. Includes entries for Soil, Red clay, Brown shale, Tan shale, Hard Gray Rock, and Backfilled.

GRROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC] NO. OF BAGS 20 NO. OF POUNDS 1500

CASING RECORD MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Nominal diameter of main casing (nearest foot) 55

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

SCREEN RECORD screen type or open hole insert appropriate code below [ST] [BR] [HO] [PL] [OT]

DEPTH (nearest ft.) 55 500

NUMBER OF UNSUCCESSFUL WELLS: 1 WELL HYDROFRACTURED Y N

CIRCLE APPROPRIATE LETTER 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. M D 355 DRILLERS SIGNATURE 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) TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 1.50 METHOD USED TO MEASURE PUMPING RATE 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

LATITUDE 39 18 43.7 LONGITUDE 76 99 60 (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 32974

SEQUENCE NO. (MDE USE ONLY)

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

STATE PERMIT NUMBER

HO -17 -0114 fill in this form completely

OWNER INFORMATION: Date Received (APA) 11/16/17, Michael Barlow, Elm Street Development, 1555 Beverly Rd, Suite 240, McClean, VA 22101

LOCATION OF WELL: Howard County, Mill Creek, Clarksville

DRILLER INFORMATION: Michael Barlow, Barlow Well Drilling, 522 Underwood Ln, Bel Air, MD

SOURCES OF DRILLING WATER: Well, Haviland Mill Rd, 1200 ft distance from road, Tax Map: 39, Blk: 6, Parcel: 0001

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

USE FOR WATER: DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: Howard 5462326-P, 3/16/17, A/A, 3/16/17

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

METHOD OF DRILLING: JETTED, AIR-ROTARY, AIR-PERCUSION, CABLE, REVERSE-ROTARY, DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS: 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-17-0114

PROPOSED LOCATION OF WELL ON LOT: dry hole, casing pulled, Prop Lines, 50', 12', 3/29/17 - dry hole on lot was sealed, 4/17/17 - via set up, drillers not on site, 4/17 - well grouted, 25 bags cement so far

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:	October 9, 2017		
Well Depth:	500	feet	
Customer	Elm Street Development	Permit #	HO-17-0114
Road	Haviland Mill Road	Subdivision	Mill Creek
City	Clarksville	Section	
State	Maryland	Lot #	17

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
9:00 AM	50	5	12.00
9:15 AM	131	15	4.00
9:30 AM	156	40	1.50
9:45 AM	156	40	1.50
10:00 AM	156	40	1.50
10:15 AM	156	40	1.50
10:30 AM	156	40	1.50
10:45 AM	156	40	1.50
11:00 AM	156	40	1.50
11:15 AM	156	40	1.50
11:30 AM	156	40	1.50
11:45 AM	156	40	1.50
12:00 PM	156	40	1.50
12:15 PM	156	40	1.50
12:30 PM	156	40	1.50
12:45 PM	156	40	1.50
1:00 PM	156	40	1.50
1:15 PM	156	40	1.50
1:30 PM	156	40	1.50
1:45 PM	156	40	1.50
2:00 PM	156	40	1.50
2:15 PM	156	40	1.50
2:30 PM	156	40	1.50
2:45 PM	156	40	1.50
3:00 PM	156	40	1.50
3:15 PM	156	40	1.50
3:30 PM	156	40	1.50
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.			



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 21, 2017

Well Depth: 500 feet

Customer	Elm Street Development	Permit #	HO-17-0114
Road	Haviland Mill Road	Subdivision	Mill Creek
City	Clarksville	Section	
State	Maryland	Lot #	17

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
9:30 AM	45	5	12.00
9:45 AM	120	40	1.50
10:00 AM	120	40	1.50
10:15 AM	120	40	1.50
10:30 AM	120	40	1.50
10:45 AM	120	40	1.50
11:00 AM	119	40	1.50
11:15 AM	119	40	1.50
11:30 AM	119	40	1.50
11:45 AM	119	40	1.50
12:00 PM	119	40	1.50
12:15 PM	119	40	1.50
12:30 PM	119	40	1.50
12:45 PM	119	40	1.50
1:00 PM	118	40	1.50
1:15 PM	118	40	1.50
1:30 PM	118	40	1.50
1:45 PM	118	40	1.50
2:00 PM	118	40	1.50
2:15 PM	118	40	1.50
2:30 PM	117	40	1.50
2:45 PM	117	40	1.50
3:00 PM	117	40	1.50
3:15 PM	117	40	1.50
3:30 PM	117	40	1.50
3:45 PM	117	40	1.50

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)313-1771 FAX: (410)313-2648**

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 5670
Address: 580 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: NVR INC Telephone #: 240-755-7378
Subdivision: Mill Creek Lot #: 17 Well Tag #: HO-17-0114
Site Address: 13865 Mill Creek Ct
Clarksville, MD 21024

<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>1P510422</u>	Model #: <u>NA</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36" (36" min)</u>	Cap secured to casing: <u>YES</u>
Well Yield: <u>1.5</u> GPM	NSE/WSC approved: <u>YES</u>	Conduit min 1 1/2" E.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>500 (feet)</u>		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 17.2.4		
Torque arrestors, Cable guards, or other acceptable method used - Must circle one		
Safety rope, if used, attached to Incess rope adapter or other acceptable method inside of well casing: <u>NA</u>		

<u>Piping in 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>74 (150 psi min)</u>	Length of sleeve (5" minimum from foundation): <u>6'</u>
Depth of supply line: <u>36" (36" min)</u>	Sleeve sealed properly: <u>YES</u>

The water supply line is required to be at least 18" 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: [Signature] Date: 4/15/19

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

Date Insp. Requested: _____	Date Insp. Approved: _____	Inspector: _____
Inspection Data:	Pileless 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 pileless adapter	_____

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – DECEMBER 20, 2019

June 20, 2019

Homeowner
13865 Mill Creek Court
Clarksville, MD 21029

**RE: Mill Creek, Lot 17
13865 Mill Creek Court
Building Permit: B19000356
Well Permit: HO-17-0114**

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 **6/13/2019**. Final approval of the well line connection to the dwelling was granted on **4/15/2019**. The well construction was completed on **7/21/2017**. Water samples were collected on **5/23/2019, 6/3/2019, 6/18/2019**.

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-17-0114. 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>

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 Environment's website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



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

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

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 #: 130265 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 5/23/2019 0726 Site: Pressure Tank
Date/Time Rec'd: 5/23/2019 1345 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.2
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/24/2019 / 0900 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/24/2019 / 0900 / RER
Nitrate	3.08	mg/L	10	601	5/23/2019 / 1550 / RER
Turbidity	43.1	NTU	<10	SM20 2130B	5/23/2019 / 1600 / RER
Sand	Present	mg/L	5	Visual/Gravimetric	5/23/2019 / 1600 / RER
Iron	1.75	mg/L	0.3*	FR, 45 (126)	5/24/2019 / 1120 / RER

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 4 NS = None Seen (NS indicates less than 5 mg/L)
- 5 NTU = Nephelometric Turbidity Units
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 Sample collected by client, analyzed as received
- 8 ND:None Detected
- 9 Visual well check: Sealed, vented cap
- 10 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000356

Date Reported: 5/24/2019

Reviewed By: 

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 #: 130841 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/18/2019 0920 Site: Pressure Tank
Date/Time Rec'd: 6/18/2019 1440 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.0
Collected By: J. Evans 7411JE Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sand	NS	mg/L	5	Visual/Gravimetric	6/19/2019 / 0700 / CRS

NOTES

- 1 NS = None Seen (NS indicates less than 5 mg/L)
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000356

Date Reported: 6/19/2019

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 #: 130446 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/3/2019 1000 Site: Pressure Tank
Date/Time Rec'd: 6/4/2019 0915 Treatment: **
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Turbidity	1.53	NTU	<10	SM20 2130B	6/4/2019 / 1000 / CRS
Iron	0.02	mg/l.	0.3*	FR, 45 (126)	6/5/2019 / 1000 / RER

NOTES

- 1 **Prior to Sediment Filter/Iron Handler Softener
- 2 *SMCL = Secondary Maximum Contaminant Level
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND:None Detected
- 7 Visual well check: Sealed, vented cap
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000356

Date Reported: 6/5/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 818-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 130447 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/3/2019 1000 Site: Kitchen Tap
Date/Time Rec'd: 6/4/2019 0915 Treatment: Sediment Filter/Iron Handler Softener
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Iron	<0.01	mg/L	0.3*	FR 45 (126)	6/5/2019 / 1000 / RER
Turbidity	0.19	NTU	<10	SM20 2130B	6/4/2019 / 1000 / CRS

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 NTU = Nephelometric Turbidity Units
- 3 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 Sample collected by client, analyzed as received
- 5 ND:None Detected
- 6 Visual well check: Sealed, vented cap
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000356

Date Reported: 6/5/2019

 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: 7/21/17 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL:

HO-17-0114

* PERSON ABANDONING WELL: Michael Barlow 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: 17
 STREET ADDRESS: HAVILAND Mill RD

Drilled within STATED
 Well Area

LATITUDE 3 9.18441

LONGITUDE 7 6.99948

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Drill Cuttings	500	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

VOLUME OF MATERIAL USED

525 lbs Cement GROUT

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) DRY Hole

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 500 FEET DEEP

WAS ANY CASING REMOVED? YES NO

If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES NO

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.

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# 355

MWD MSD / MGS

CIRCLE ONE

12/18/17

DATE


COUNTY

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

LOT 17

MEMORANDUM

TO: Barlow Well Drilling

FROM: Ryan Rappaport, L.E.H.S. 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.

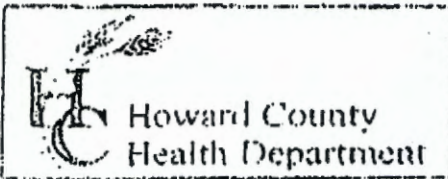
The lots of the Crawford Property/Mill Creek Subdivision that are less than an acre are lots 2, 3, 12, 13 and 18. If a well on one of these lots is within 100' of another well, a simultaneous yield test of both wells will be required.

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.

Cc: File



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:

All individual well sites for lots 2-23 of Mill Creek are staked + properly labeled

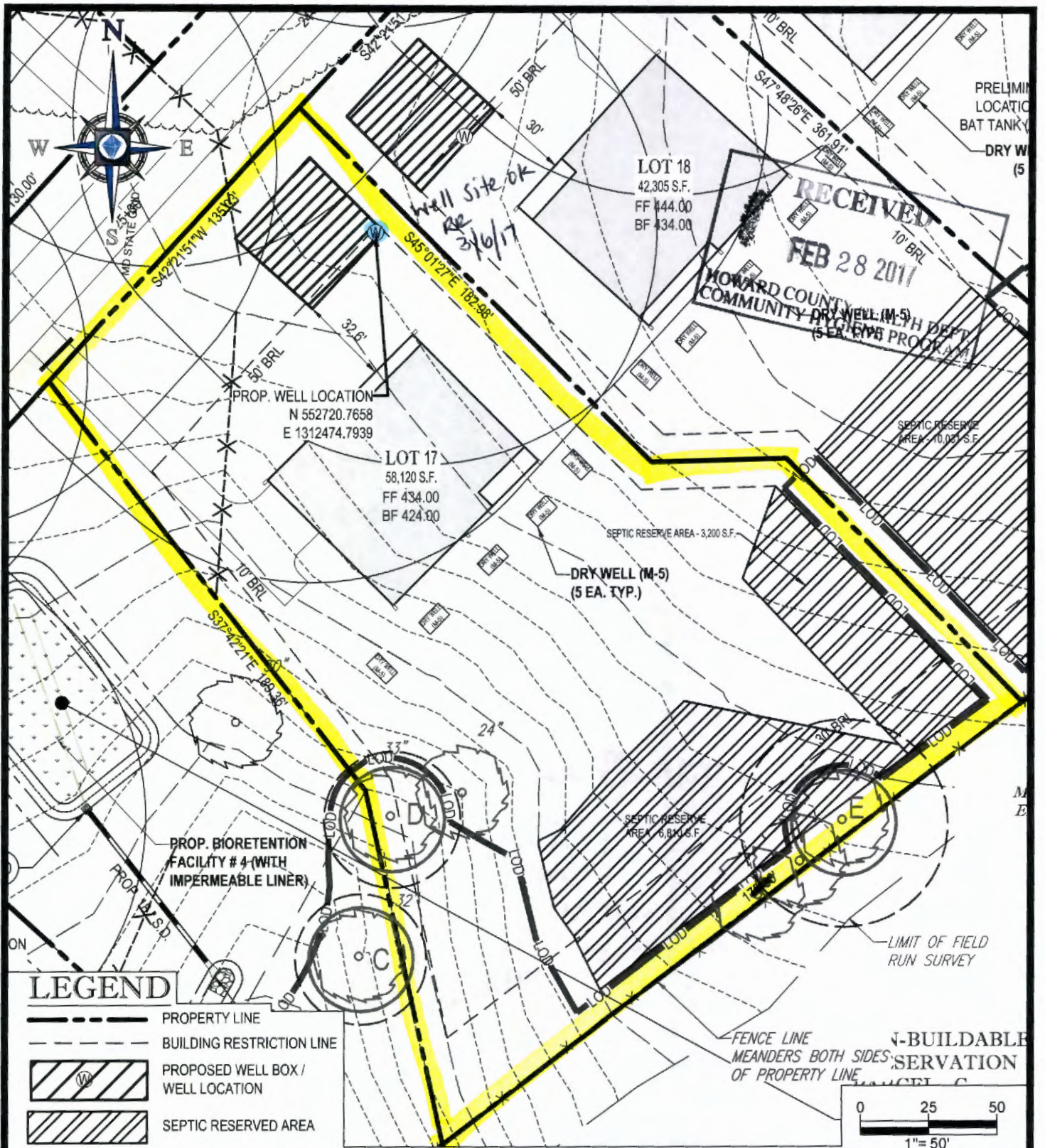
The well site has been staked by Bohler Engineering, (professional land surveyor or company employing professional land surveyors) on 3/3/17 (date) and does not require a site inspection.

- 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

RECEIVED
 MAR -6 2017
 HOWARD COUNTY HEALTH DEPT.
 COMMUNITY HYGIENE PROGRAM



LEGEND

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

PROJECT NAME: **MILL CREEK SUBDIVISION**
PROPOSED LOTS 1-23 & NONBUILDABLE PRESERVATION PARCEL A - G H0-17-0114
 6780 HAVILAND MILL ROAD, CLARKSVILLE, MD

SHEET TITLE: **WELL EXHIBIT - LOT 17**
 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

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 #: 130265 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: **13865 Mill Creek Court** Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 5/23/2019 0726 Site: Pressure Tank
Date/Time Rec'd: 5/23/2019 1345 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.2
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/24/2019 / 0900 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/24/2019 / 0900 / RER
Nitrate	3.08	mg/L	10	601	5/23/2019 / 1550 / RER
Turbidity	<u>43.1</u>	NTU	<10	SM20 2130B	5/23/2019 / 1600 / RER
Sand	<u>Present</u>	mg/L	5	Visual/Gravimetric	5/23/2019 / 1600 / RER
Iron	1.75	mg/L	0.3*	FR, 45 (126)	5/24/2019 / 1120 / RER

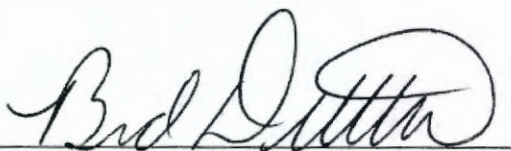
NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 4 NS = None Seen (NS indicates less than 5 mg/L)
- 5 NTU = Nephelometric Turbidity Units
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 Sample collected by client, analyzed as received
- 8 ND:None Detected
- 9 Visual well check: Sealed, vented cap
- 10 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000356

Date Reported: 5/24/2019

Reviewed By:



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 #: 130446 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/3/2019 1000 Site: Pressure Tank
Date/Time Rec'd: 6/4/2019 0915 Treatment: **
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Turbidity	1.53	NTU	<10	SM20 2130B	6/4/2019 / 1000 / CRS
Iron	0.02	mg/L	0.3*	FR, 45 (126)	6/5/2019 / 1000 / RER

NOTES

- 1 **Prior to Sediment Filter/Iron Handler Softener
- 2 *SMCL = Secondary Maximum Contaminant Level
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND:None Detected
- 7 Visual well check: Sealed, vented cap
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000356

Date Reported: 6/5/2019

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 #: 130447 Account #: 1933
Reference: Mill Creek Lot 17 Company: Fogles Well Pump & Treatment
Location: 13865 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/3/2019 1000 Site: Kitchen Tap
Date/Time Rec'd: 6/4/2019 0915 Treatment: Sediment Filter/Iron Handler Softener
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: B. Wilkerson 9315BW Well #: HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Iron	<0.01	mg/L	0.3*	FR, 45 (126)	6/5/2019 / 1000 / RER
Turbidity	0.49	NTU	<10	SM20 2130B	6/4/2019 / 1000 / CRS

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 NTU = Nephelometric Turbidity Units
- 3 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 Sample collected by client, analyzed as received
- 5 ND:None Detected
- 6 Visual well check: Sealed, vented cap
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000356

Date Reported: 6/5/2019

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 #:	130841	Account #:	1933
Reference:	Mill Creek Lot 17	Company:	Fogles Well Pump & Treatment
Location:	13865 Mill Creek Court Clarksville, MD 21029	Requested By:	Dave Fogle
Date/ Time Collected:	6/18/2019 0920	Source:	Well Water
Date/Time Rec'd:	6/18/2019 1440	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	J. Evans 7411JE	pH:	7.0
		Well #:	HO-17-0114

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sand	NS	mg/L	5	Visual/Gravimetric	6/19/2019 / 0700 / CRS

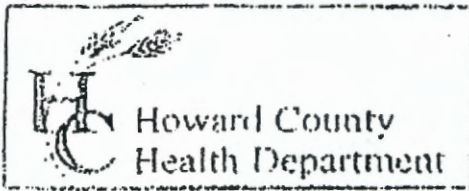
NOTES

- 1 NS = None Seen (NS indicates less than 5 mg/L)
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000356

Date Reported: 6/19/2019



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

RECEIVED
FEB 28 2017
HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM