

B 1 19398 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND STATE PERMIT NUMBER
 APPLICATION FOR PERMIT TO DRILL WELL
 559843-E please type HO - 17 - 0103
 fill in this form completely

Date Received (APA) 11/6/16
OWNER INFORMATION
 8 MM DD YY 13
 15 Last Name Owner First Name 34
 ELM STREET DEVELOPMENT
 36 Street or RFD 55
 355 BEVERLY RD, SUITE 240
 57 Town 70 State 72 Zip 76
 McCLEAN VA 22101

B 3 LOCATION OF WELL
 8 COUNTY 21
 HOWARD
 23 SUBDIVISION 42
 MILL CREEK
 SECTION 44 46 LOT 48 50
 52 NEAREST TOWN 71
 CLARKSVILLE

DRILLER INFORMATION
 76 Driller's Name 81 License No.
 MICHAEL BARLOW M ND 355
 Firm Name
 BARLOW WELL DRILLING
 Address
 512 UNDERWOOD LANE 21014
 Signature Date
 11/3/16

B 4 SOURCES OF DRILLING WATER
 11 STREET ADDRESS 30
 HAVILAND MILL RD
 34 37
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 DISTANCE FROM ROAD ENTER FT OR MI 38 39
 TAX MAP: 39 BLK: 6 PARCEL 000

B 2 WELL INFORMATION
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
 5
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20
 750

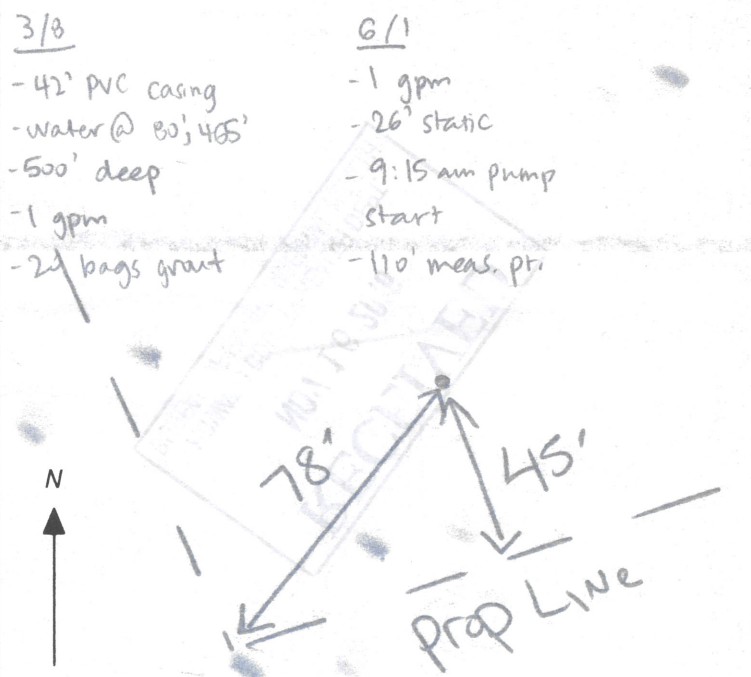
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 22 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 OPEN LOOP GEOTHERMAL
 CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME 546326-E COUNTY NO. 13
 STATE SIGNATURE INSERT S → 41
 DATE ISSUED 3/2/17
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 DON: 3/8/17 (SC) DOG: 3/8/17 (SC) DOY: 6/2/17 (SC)

APPROXIMATE DEPTH OF WELL 24 28
 300 FEET
 APPROXIMATE DIAMETER OF WELL NEAREST INCH
 6

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

METHOD OF DRILLING (circle one)
 30 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 37 CABLE REVERSE-ROTary Drive-POINT
 other



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 39 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 HO 2016G 002
 PERMIT No. HO - 17 - 0103
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS SEE ATTACHED MEMO



MICHAEL BARLOW WELL DRILLING & SERVICE, INC.

522 Underwood Lane

Bel Air, Maryland 21014

(410) 838-6910

Fax (410) 838-3582

WELL YIELD REPORT

| | | | |
|----------------------|------------------------|-------------|------------|
| Date Test Completed: | May 31, 2017 | | |
| Well Depth: | 500 | feet | |
| Customer | Elm Street Development | Permit # | HO-17-0103 |
| Road | Haviland Mill Road | Subdivision | Mill Creek |
| City | Clarksville | Section | |
| State | Maryland | Lot # | 6 |

| Time | Water Level feet | Time to Fill 1-gallon bucket seconds | G.P.M. |
|---|------------------|--------------------------------------|--------|
| 9:00 AM | 26 | 5 | 12.00 |
| 9:15 AM | 100 | 55 | 1.09 |
| 9:30 AM | 104 | 60 | 1.00 |
| 9:45 AM | 104 | 60 | 1.00 |
| 10:00 AM | 104 | 60 | 1.00 |
| 10:15 AM | 104 | 60 | 1.00 |
| 10:30 AM | 104 | 60 | 1.00 |
| 10:45 AM | 103 | 60 | 1.00 |
| 11:00 AM | 103 | 60 | 1.00 |
| 11:15 AM | 103 | 60 | 1.00 |
| 11:30 AM | 103 | 60 | 1.00 |
| 11:45 AM | 103 | 60 | 1.00 |
| 12:00 PM | 103 | 60 | 1.00 |
| 12:15 PM | 103 | 60 | 1.00 |
| 12:30 PM | 103 | 60 | 1.00 |
| 12:45 PM | 103 | 60 | 1.00 |
| 1:00 PM | 103 | 60 | 1.00 |
| 1:15 PM | 103 | 60 | 1.00 |
| 1:30 PM | 103 | 60 | 1.00 |
| 1:45 PM | 103 | 60 | 1.00 |
| 2:00 PM | 103 | 60 | 1.00 |
| 2:15 PM | 103 | 60 | 1.00 |
| 2:30 PM | 103 | 60 | 1.00 |
| 2:45 PM | 103 | 60 | 1.00 |
| 3:00 PM | 103 | 60 | 1.00 |
| 3:15 PM | 103 | 60 | 1.00 |
| 3:30 PM | 103 | 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)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: Foales Well Pumps & 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 Foale 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 #: _____
Subdivision: Mill Creek Lot #: 16 Well Tag #: HO-17-0103 ✓
Site Address: 13834 Mill Creek Ct
Clarksville, MD 21029

| <u>Submersible Pump Data</u> | <u>Pileless Adapter</u> | <u>Well Cap and Electric Conduit</u> |
|------------------------------|------------------------------|---------------------------------------|
| Make: <u>Grundfos</u> | Make: <u>Campbell</u> | Two piece watertight cap: <u>YES</u> |
| Model #: <u>THS10422</u> | Model #: <u>NA</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 | NSE/WSC approved: <u>YES</u> | Conduit min 1" B.G.: <u>YES</u> |

Depth of well encountered at time of pump installation: 506 (act) Conduit secured to well cap: YES
If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.14

Tongue 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: NA

| <u>Finish 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>200</u> (50 psi min) | 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 Foale Date: 4/24/19

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

Date Insp Requested: 4/25/19 Date Insp Approved: 4/25/19 Inspector: SC
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 ✓

well line

→ move tag higher on casing
casing extended

Collins, Sarah

From: Collins, Sarah
Sent: Thursday, April 25, 2019 4:43 PM
To: Srour, Matthew
Subject: Mill Creek lot 6 well line

Hi Matt,

I passed the well line for lot 6 at Mill Creek, but the tag should be raised- it looks like it will get covered if the grade is raised. We'll check this prior to ICOP.

Thanks,
Sarah

Sarah Collins, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, MD 21045
410-313-6287
SCollins@howardcountymd.gov

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – DECEMBER 26, 2019

June 26, 2019

Homeowner
13834 Mill Creek Court
Clarksville, MD 21029

RE: Mill Creek, Lot 6
13834 Mill Creek Court
Building Permit: B19000290
Well Permit: HO-17-0103

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 **5/16/2019**. Final approval of the well line connection to the dwelling was granted on **4/25/2019**. The well construction was completed on **5/31/2017**. Water samples were collected on **6/17/2019, 6/24/2019**.

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-17-0103. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

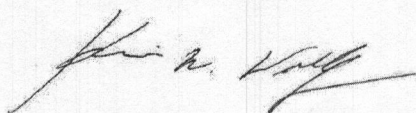
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will 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 Environments 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 #: 130799 Account #: 1933
Reference: Mill Creek Lot 6 Company: Fogles Well Pump & Treatment
Location: 13834 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/17/2019 1015 Site: Bathroom Sink
Date/Time Rec'd: 6/17/2019 1525 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.2
Collected By: J. Evans 7411JE Well #: HO-17-0103

| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|--------------------|------------------------|
| Bacteria, Coliform, Total, MPN | 1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 6/18/2019 / 1415 / RER |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 6/18/2019 / 1415 / RER |
| Nitrate | <1.0 | mg/L | 10 | 601 | 6/18/2019 / 0900 / CRS |
| Turbidity | 1.34 | NTU | <10 | SM20 2130B | 6/18/2019 / 0930 / CRS |
| Sand | NS | mg/L | 5 | Visual/Gravimetric | 6/18/2019 / 0930 / CRS |
| Iron | 0.10 | mg/L | 0.3* | FR, 45 (126) | 6/19/2019 / 1030 / CRS |

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 ND:None Detected
- 8 pH & Chlorine level tested on site
- 9 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy
Building Permit # : B19000290

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 #: 130984 Account #: 1933
Reference: Mill Creek Lot 6 Company: Fogles Well Pump & Treatment
Location: 13834 Mill Creek Court Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 6/24/2019 1045 Site: Kitchen Sink Tap
Date/Time Rec'd: 6/24/2019 1425 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.7
Collected By: J. Evans 7411JE Well #: HO-17-0103

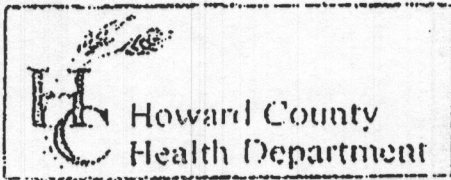
| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|------------|------------------------|
| Bacteria, Coliform, Total, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 6/25/2019 / 0900 / RER |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 6/25/2019 / 0900 / RER |

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 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 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 6 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy
Building Permit # : B19000290

Date Reported: 6/25/2019



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:

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

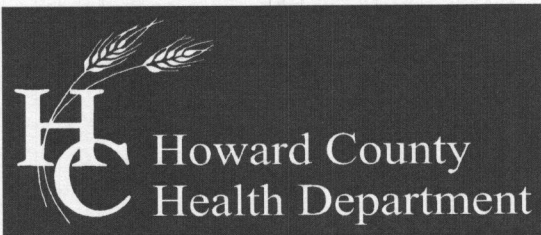
The well site has been staked by Bohler Engineering,
(professional land surveyor or company employing professional land surveyors)
on 3/3/17 (date) and does not require a site inspection.

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




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 6

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

