

C1 24973

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

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, WELL SITE ADDRESS, SUBDIVISION, SECTION, TOWN, LOT

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 handwritten entries: Soil Brown Shale, Soft GRAY Rock, Med GRAY Rock.

Storage: 684 gal

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

CIRCLE APPROPRIATE LETTER A, E, P

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 113

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT, BENTONITE CLAY

CASING RECORD

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

OTHER CASING (if used) diameter, depth (feet)

SCREEN RECORD

DEPTH (nearest ft.)

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface) BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or 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)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE

LATITUDE 39.32981

LONGITUDE 77.06197 (DEFAULT COORD. WGS 84)

NOTES:



TAG: 8/20/20

**B 1** 68357 SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND** STATE PERMIT NUMBER  
**APPLICATION FOR PERMIT TO DRILL WELL** Ho - 20 - 0030  
 please type 50784-L 70 fill in this form completely 79

**OWNER INFORMATION**  
 Date Received (APA) 07/08/20  
 8 MM DD YY 13  
 15 Last Name First Name  
 Heritage Land Development  
 36 Street or RFD  
 PO BOX 482  
 57 Town 70 State 72 Zip 76  
 Lisbon Md 21765

**B 3** LOCATION OF WELL  
 8 COUNTY Howard 21  
 23 SUBDIVISION Linden Grove 42  
 SECTION 44 46 LOT 36 48 50  
 52 NEAREST TOWN Woodbine 71

**DRILLER INFORMATION**  
 Driller's Name Michael Barlow M W D 355  
 76 License No. 81  
 Firm Name Barlow Well Drilling  
 Address 522 Underwood Ln, Bel Air, Md 21034  
 Signature [Signature] Date 7-1-2020

**B 4** SOURCES OF DRILLING WATER  
 11 STREET ADDRESS Heritage Ridge Rd 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 34 40 37 NORTH SOUTH WEST EAST  
 DISTANCE FROM ROAD ENTER FT OR MI 38 39  
 TAX MAP: 8 BLK: 7 PARCEL 5

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

**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

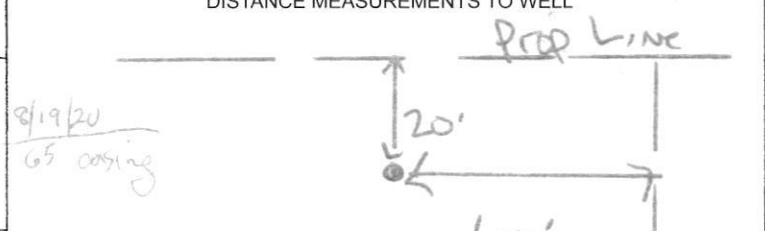
**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
 COUNTY NAME Howard 13 COUNTY NO.  
 STATE SIGNATURE [Signature] INSERT S → 41  
 DATE ISSUED 07/21/20 48 CO SIGNATURE Susan Thomas EXP. DATE 07/21/21  
 43 MM DD YY 48

APPROXIMATE DEPTH OF WELL 300 FEET  
 24 28

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

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

**METHOD OF DRILLING** (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)  
 37 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

8/19/20 440 @ 12pm  
 8/20/20 - 80' liner - 60' to 140' 500' deep  
 3 gpm bedrock @ 60' fractures to be grouted  
 2 1/2" = 445' (24)

**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**  
 APPROP. PERMIT NUMBER Ho 2017G002(01)  
 PERMIT No. Ho - 20 - 0030  
 70 71 72 73 74 75 76 77 78 79

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.

**SPECIAL CONDITIONS**  
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - No Cl, TDS samples required

WELL INFORMATION

WELL INFORMATION

NOT TO BE FILLED IN BY DRILLER

DATE OF DRILL

STATE

COUNTY

TOWNSHIP

SECTION

RANGE

WELL DEPTH

APPROXIMATE DIAMETER

METHOD OF DRILLING

REASON FOR DRILLING

WELL IDENTIFICATION

APPROVED AND

THIS WELL WILL BE

AS A STANDARD

FOR PRODUCTION

OR OTHER PURPOSES

WELL TO BE USED IN

CONNECTION WITH

PERMIT NO.

RECEIVED  
JUL 08 2020  
HOWARD COUNTY HEALTH DEPT.  
COMMUNITY HYGIENE PROGRAM

SPECIAL CONDITIONS



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

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: Foales Well Pump & water Treatment LLC Telephone #: 410 795 1535  
Address: PO Box 63  
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 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: Toll Brothers Telephone #: \_\_\_\_\_  
Subdivision: Linden Grove Lot #: 36 Well Tag #: HO-20-0030 ✓ 07/25/2022  
Site Address: 1438 Heritage Ridge Rd  
Woodbine, MD 21797

Submersible Pump Data

Maker: Goulds  
Model #: SHS10422  
Pump Capacity: 5  
Well Yield: 2.31

Pitless Adapter

Maker: Campbell +  
Model#: NA  
GPM Depth: 36" (36" min)  
GPM NSF/WSC approved: Y

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 500 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing NA

Piping to house

Type: 1" pvc pipe  
PSL 200 (160 psi min)  
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: Y  
Length of sleeve (5' minimum from foundation): 6'  
Sleeve sealed properly: Y

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: [Signature] date: 7/25/2022

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

Date Insp. Requested: 07/25/2022 Date Insp. Approved: 07/25/2022 Inspector: [Signature]

|  |   |
|--|---|
| Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade | <u>41"</u> <u>07/25/2022</u> <u>[Signature]</u> |
| Two piece cap installed and attached to casing securely                                  | <u>33"</u> <u>07/25/2022</u> <u>[Signature]</u> |
| Elec. conduit extends at least 18" below grade/attached to cap properly                  | <u>24"</u> <u>07/25/2022</u> <u>[Signature]</u> |
| 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  |   |

(Revised form 10/24/2018)



**INTERIM CERTIFICATE OF POTABILITY**  
**Expiration Date – APRIL 4, 2023**

October 4, 2022

Homeowner  
1438 Heritage Ridge Road  
Woodbine, MD 21797

**RE: Linden Grove, Lot 36**  
**1438 Heritage Ridge Rd**  
**Building Permit: B21003074**  
**Well Permit: HO-20-0030**

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 **10/4/2022**. Final approval of the well line connection to the dwelling was granted on **7/25/2022**. The well construction was completed on **9/16/2020**. Water samples were collected on **9/21/2022, 9/29/2022**.

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-20-0030. 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 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

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

**MEMORANDUM**

**TO: M. Barlow Well Drilling**  
522 Underwood Lane  
Bel Air, MD 21014

**FROM: Susan Thomas**  
Environmental Health Specialist  
Howard County Health Department  
**Well & Septic Program**

**RE: Linden Grove Lots 24-37 & 39**  
**Special Conditions for wells**

**DATE: July 21, 2020**

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**The following comments apply to the above referenced Well Permit Applications. Please read through and complete as needed.**

- A. The wells for the Linden Grove subdivision lots 24 thru 37 & 39 were staked with only one selected well site per the approved percolation certification plan signed 09/11/2018. If the well driller cannot confirm a successful well on this one well site, they will need to have the surveyor come back out and stake out the entire well box/alt well sites. This will need to be verified through the Health Department.**
- B. Lots 26, 30 & 36 will require samples for Sodium, Chloride and TDS to be collected at the time of the Yield Test.**



7178 Columbia Gateway Dr., Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

TO ALL INTERESTED PARTIES

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

Well Site Location:

|                                  |              |                           |
|----------------------------------|--------------|---------------------------|
| <u>Linden Grove</u>              | <u>36</u>    | <u>Heritage Ridge Rd.</u> |
| <b>Subdivision/Property Name</b> | <b>Lot #</b> | <b>Road Name</b>          |

- The well site has been staked by Fisher, Collins & Carter,  
(professional land surveyor or company employing professional land surveyors)  
on 06/16/20 (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.

RECEIVED  
JUL 08 2020  
HOWARD COUNTY HEALTH DEPT.  
COMMUNITY HYGIENE PROGRAM

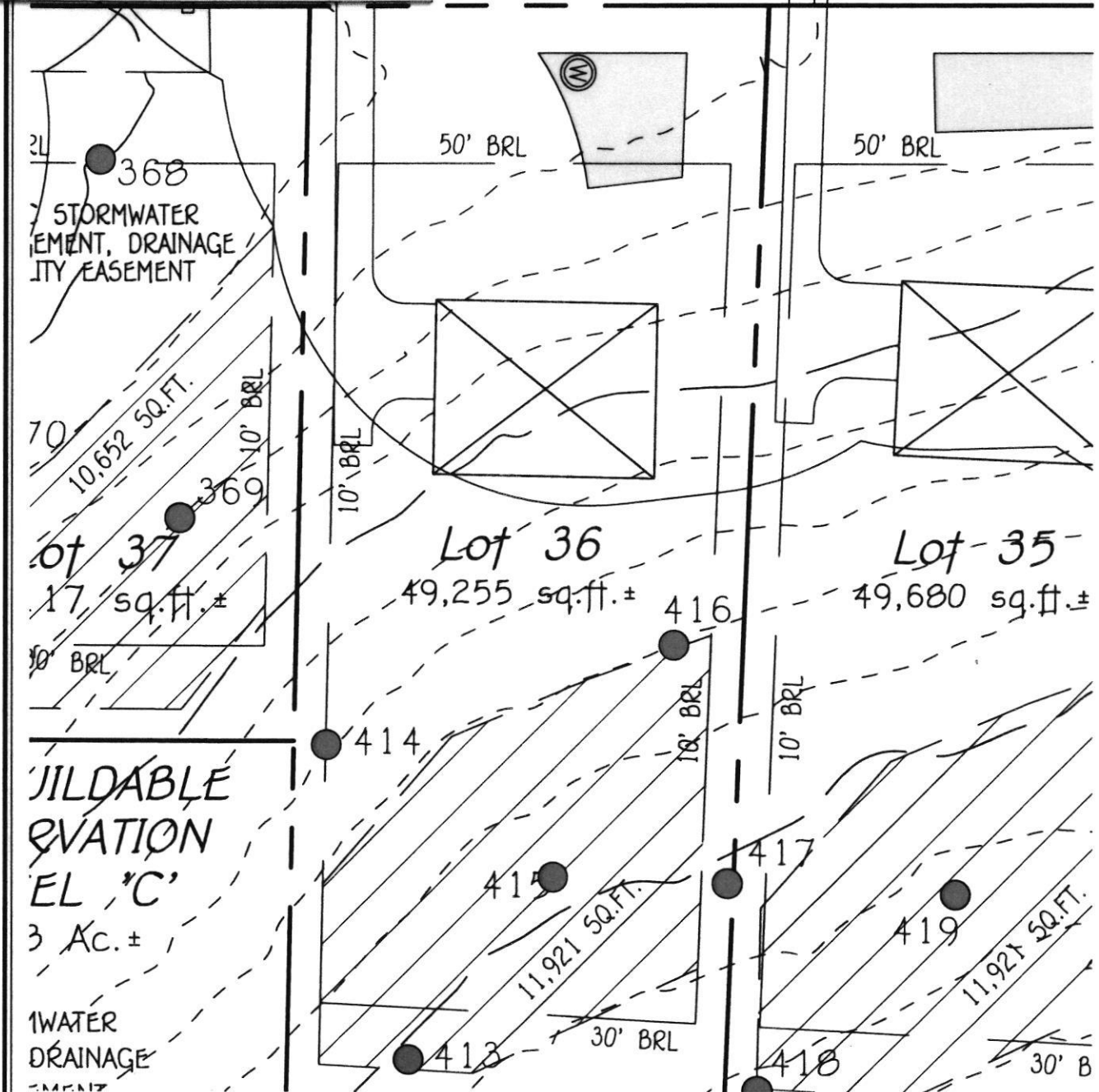
DO NOT REMOVE THIS TAG  
DEPARTMENT OF THE ENVIRONMENT  
WELL PERMIT NUMBER

HO-20-0030

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

Linden Grove, Lot 36  
Approved 7/21/20 ST

Staked by FCC



TILDABLE  
ELEVATION  
EL 'C'  
3 AC. ±

1 WATER  
DRAINAGE

FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2955



EXHIBIT TO ACCOMPANY WELL PERMIT

LOT 36  
LINDEN GROVE  
PHASE TWO

ZONED: RC-DEO

TAX MAP No. 8 GRID No. 7 PARCEL No. 5  
HOWARD COUNTY, MARYLAND SCALE 1" = 50'  
DATE: MAY 6, 2020

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 154871 Account #: 1933  
Reference: Linden Grove Lot 36 Client: Fogle's Well Pump & Treatment  
Location: 1438 Heritage Ridge Road Requested By: Dave Fogle  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 9/29/2022 1119 Site: Kitchen Sink Tap  
Date/Time Rec'd: 9/29/2022 1315 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.9  
Collected By: J. Smith 2896JS Well #: HO-20-0030

| PARAMETERS                     | RESULTS | UNITS       | REFERENCE | METHOD             | DATE/TIME/ANALYST      |
|--------------------------------|---------|-------------|-----------|--------------------|------------------------|
| Bacteria, Coliform, Total, MPN | <1.0    | MPN/ 100 ml | <1.0      | SM20 9223B         | 9/30/2022 / 0820 / TSD |
| Bacteria, E. coli, MPN         | <1.0    | MPN/ 100 ml | <1.0      | SM20 9223B         | 9/30/2022 / 0820 / TSD |
| Sand                           | ND      | mg/L        | 5         | Visual/Gravimetric | 9/29/2022 / 1450 / MEW |

### 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 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 # : B21003074

Date Reported: 9/30/2022

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 154697 Account #: 1933  
Reference: Linden Grove 36 Client: Fogle's Well Pump & Treatment  
Location: 1438 Heritage Road Requested By: Dave Fogle  
Hagerstown, MD 21747 Source: Well Water  
Date/ Time Collected: 9/21/2022 1210 Site: Pressure Tank  
Date/Time Rec'd: 9/21/2022 1316 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.1  
Collected By: J. Evans 0309JE Well #: HO-20-0030

| PARAMETERS                     | RESULTS | UNITS       | REFERENCE | METHOD             | DATE/TIME/ANALYST      |
|--------------------------------|---------|-------------|-----------|--------------------|------------------------|
| Bacteria, Coliform, Total, MPN | 27.1    | MPN/ 100 ml | <1.0      | SM20 9223B         | 9/22/2022 / 1030 / CRS |
| Bacteria, E. coli, MPN         | <1.0    | MPN/ 100 ml | <1.0      | SM20 9223B         | 9/22/2022 / 1030 / CRS |
| Nitrate.                       | 7.67    | mg/L        | 10        | EPA 300.0          | 9/21/2022 / 1939 / CRS |
| Turbidity                      | 1.39    | NTU         | <10       | SM2130B            | 9/21/2022 / 1620 / MEW |
| Sand                           | >5      | mg/L        | 5         | Visual/Gravimetric | 9/22/2022 / 1130 / CRS |

### 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 NTU = Nephelometric Turbidity Units
- 4 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 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 # : B21003074

Date Reported: 9/22/2022