

C1 24970

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

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 MM DD YY

DATE WELL COMPLETED MM DD YY 09/10/2020

Depth of Well 500 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-20-0077

OWNER Heritage Land Development WELL SITE ADDRESS Heritage Ridge Rd. TOWN Woodbine SUBDIVISION Linden Grove SECTION LOT 33

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, BROWN SHALE, LIGHT BROWN SHALE, SOFT GRAY ROCK, MED GRAY ROCK, and storage: 675 gal.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N)

TYPE OF GROUTING MATERIAL (C) (B) CEMENT BENTONITE CLAY NO. OF BAGS 25 NO. OF POUNDS 1825 GALLONS OF WATER 125 DEPTH OF GROUT SEAL 0 to 70 ft.

CASING RECORD MAIN CASING TYPE PL Nominal diameter 6 Total depth 70 OTHER CASING (if used) PL 4 1/2 160 160

SCREEN RECORD screen type or open hole (S) (B) (H) (P) (O) (T) STEEL BRASS OPEN HOLE PLASTIC BRONZE OTHER

DEPTH (nearest ft.) HO 70 500

NUMBER OF UNSUCCESSFUL WELLS: 0 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. WRA 113 D 113

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) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 4.0 METHOD USED TO MEASURE PUMPING RATE Wash/Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 40 ft. WHEN PUMPING 296 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES) (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) (+) above 49 LAND SURFACE (nearest foot) 1 50 51 (-) below

LATITUDE 39.32975 LONGITUDE 77.06066 (DEFAULT COORD. WGS 84)

NOTES:

TAG-9/10/20

B 1 68361

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

507894-T please type

40-20-0027 fill in this form completely 79

Date Received (APA) 07/20/20

OWNER INFORMATION

Heritage Land Development, PO Box 482, Lisbon Md 21765

B 3

LOCATION OF WELL

Howard County, Linden Grove, Heritage Ridge Rd, Woodbine

DRILLER INFORMATION

Michael Barlow MW D 355, Barlow Well Drilling, 500 Underwood Ln, Bel Air, Md 21014

B 4

SOURCES OF DRILLING WATER

- Well, 8/18/20, cement

Heritage Ridge Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD

ENTER FT OR MI

TAX MAP: 8 BLK: 1 PARCEL 5

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

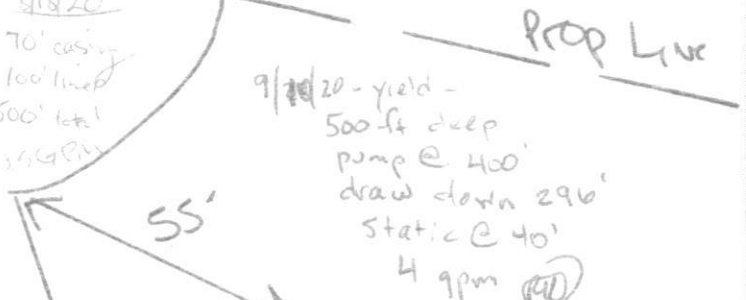
Howard County, State Signature, Date Issued 07/21/20, Co Signature Susan Thomas, Exp. Date 07/21/21

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation, Farming, Industrial, Commercial, Dewatering, Public Water Supply Well, Test, Observation, Monitoring, Open Loop Geothermal, Closed Loop Geothermal

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



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.

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 deepen an existing well

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER H02017G002(01)

PERMIT No. 40-20-0027

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



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: Fogles Well Pump & Water Treatment LLC Telephone #: 410 795 1535  
Address: JPO 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 Fogle License# MSD776

\*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: TJH Brothers Telephone #: \_\_\_\_\_  
Subdivision: Linden Grove Lot #: 33 Well Tag #: HO-20-0027 **(ST)**  
Site Address: 1450 Heritage Ridge Rd  
Woodbine, MD 21797

Submersible Pump Data

Make: Grundfos  
Model #: 1058E15-290  
Pump Capacity: 10  
Well Yield: 4

Pitless Adapter

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

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 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: Trippe 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" PEX pipe  
PSI: 200 (160 psi min)  
Depth of supply line: 36" (36" min)

House Connection

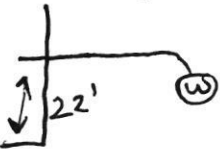
PVC sleeve to undisturbed soil at wall penetration: YES  
Length of sleeve (5' minimum from foundation): YES  
Sleeve sealed properly: YES

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

Signature of company representative responsible for installation: [Signature] date: 5/11/2022

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

Date Insp. Requested: 5/11/22 Date Insp. Approved: 5/11/22 Inspector: [Signature]  
Inspection Date: \_\_\_\_\_  
Pitless adapter watertight & water supply line at least 36" below grade ✓ 36"  
Two piece cap installed and attached to casing securely ✓  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓ 31"  
Safety rope not outside of well cap/casing ✓  
Correct well tag attached properly and casing 8" above finished grade ✓ 24"  
Water supply line sleeved adequately at house connection ✓ 10"  
Adequate grout observed below pitless adapter ✓



(Revised form 10/24/2018)

**INTERIM CERTIFICATE OF POTABILITY**  
**Expiration Date – MARCH 27, 2022**

September 27, 2022

Homeowner  
1450 Heritage Ridge Road  
Woodbine, MD 21797

**RE: Linden Grove, Lot 33**  
**1450 Heritage Ridge Rd**  
**Building Permit: B21003353**  
**Well Permit: HO-20-0027**

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 **6/16/2022**. Final approval of the well line connection to the dwelling was granted on **5/11/2022**. The well construction was completed on **9/10/2020**. Water samples were collected on **8/29/2022, 9/7/2022**.

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-20-0027. 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,



Groundwater Management Section  
Well & Septic Program

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



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:

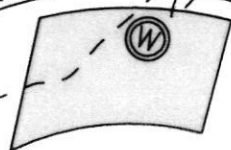
Well Site Location:

<u>Linden Grove</u>	<u>33</u>	<u>Heritage Ridge Rd.</u>
Subdivision/Property Name	Lot #	Road Name

- 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.

BRL



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

HO-20- 0027

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

Linden Grove,  
Lot 33

Approval 7/21/20 ST

Staked by FCC

75'

BRL

49,037 sq.ft. ±

PP NO

Heritage Ridge  
Road

10' BRL

10' BRL



50' BRL

75' BRL

428 / 429

10,266 SQ.FT.

PP NO

Lot 33

48,522 sq.ft. ±

427

425

426

Lot 34

49,343 sq.ft. ±

10' BRL

10' BRL

424

PP NO



**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2855

EXHIBIT TO ACCOMPANY WELL PERMIT

LOT 33

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

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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.**

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 154363 Account #: 1933  
Reference: Linden Grove Lot 33 Client: Fogle's Well Pump & Treatment  
Location: 1450 Heritage Ridge Road Requested By: Dave Fogle  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 9/7/2022 1015 Site: Kitchen Sink  
Date/Time Rec'd: 9/7/2022 1140 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.3  
Collected By: J. Evans 0309JE Well #: HO-20-0027

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	9/8/2022 / 1030 / TSD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	9/8/2022 / 1030 / TSD

### 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 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 # : B21003353

Date Reported: 9/8/2022

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 154147 Account #: 1933  
Reference: Linden Grove Lot 33 Client: Fogle's Well Pump & Treatment  
Location: 1450 Heritage Road Requested By: Dave Fogle  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 8/29/2022 0850 Site: Kitchen Sink  
Date/Time Rec'd: 8/29/2022 1158 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.4  
Collected By: J. Evans 0309JE Well #: HO-20-0027

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	94.5	MPN/ 100 ml	<1.0	SM20 9223B	8/30/2022 / 0900 / TSD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/30/2022 / 0900 / TSD
Nitrate.	6.21	mg/L	10	EPA 300.0	8/29/2022 / 1547 / TSD
Turbidity	0.79	NTU	<10	SM2130B	8/30/2022 / 0945 / TSD
Sand	ND	mg/L	5	Visual/Gravimetric	8/29/2022 / 1540 / TSD

### 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 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 # :** B21003353

Date Reported: 8/30/2022