

C1 24971

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.

COUNTY NUMBER

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER: Heritage Land Development; WELL SITE ADDRESS: Heritage Ridge Rd; TOWN: Woodbine; SUBDIVISION: Linden Grove; SECTION: ; LOT: 34

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries for Soil, Brown Shale, Soft Gray Rock, Med Gray Rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (23), NO. OF POUNDS (1725), GALLONS OF WATER (115), DEPTH OF GROUT SEAL (0 to 60 ft).

CASING RECORD: MAIN CASING TYPE (PL), Nominal diameter (6 inch), Total depth (60 foot). OTHER CASING (if used) PL 4 1/2 inch, 60 feet.

SCREEN RECORD: screen type or open hole (ST), insert appropriate code below.

DEPTH (nearest ft.) table with handwritten values: 60, 500.

NUMBER OF UNSUCCESSFUL WELLS: 0; WELL HYDROFRACTURED: Y

CIRCLE APPROPRIATE LETTER: A (Well abandoned and sealed), 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...

DRILLERS LIC. NO.: M D 355; DRILLERS SIGNATURE; LIC. NO.: WRD 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

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (429 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Watch/Bucket), WATER LEVEL (32 ft. before, 29.5 ft. when pumping), TYPE OF PUMP USED (S - submersible)

PUMP INSTALLED: DRILLER INSTALLED PUMP (NO), IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (49 above)

LATITUDE 39.32967; LONGITUDE 77.06207; (DEFAULT COORD. WGS 84)

NOTES:

TAG - 9/10/20

**B 1** 68362 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL STATE PERMIT NUMBER  
 507894-J please type Ho-20-0028  
 fill in this form completely

**OWNER INFORMATION**  
 Date Received (APA) 07/08/20  
 8 MM DD YY 13  
 Heritage Land Development  
 15 Last Name Owner First Name 34  
 PO Box 482  
 36 Street or RFD 55  
 Lisbon, Md 21765  
 57 Town 70 State 72 Zip 76

**B 3** LOCATION OF WELL  
 Howard  
 8 COUNTY 21  
 Linden Grove  
 23 SUBDIVISION 42  
 SECTION 44 46 LOT 34 48 50  
 Woodbine  
 52 NEAREST TOWN 71

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

**B 4** SOURCES OF DRILLING WATER  
 1. Well  
 2.  
 3. Heritage Ridge Rd  
 11 STREET ADDRESS 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  
 WEST EAST  
 SOUTH  
 34 40 37  
 DISTANCE FROM ROAD FT  
 ENTER FT OR MI 38 39  
 TAX MAP: 8 BLK: 7 PARCEL 5

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

**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**  
 Howard  
 COUNTY NAME COUNTY NO. 13  
 STATE SIGNATURE INSERT S → 41  
 DATE ISSUED 07/21/20  
 43 MM DD YY 48 CO SIGNATURE Susan Thomas EXP. DATE 07/21/21  
 DON: 8/25/20 (ST) DOG: DOY: 9/10/20 (M)

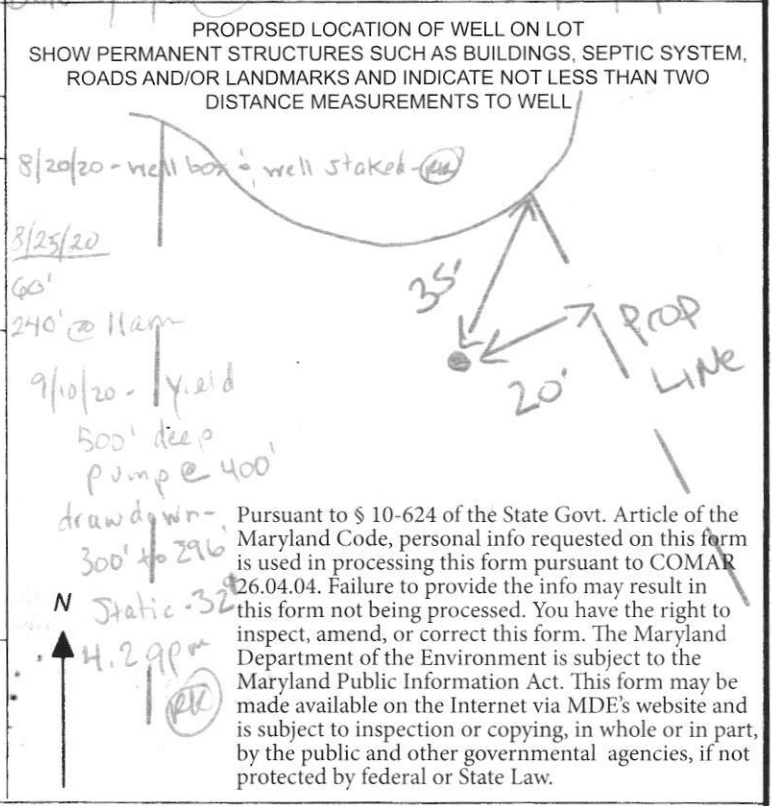
APPROXIMATE DEPTH OF WELL 300 FEET  
 24 28

APPROXIMATE DIAMETER OF WELL 6 INCH  
 NEAREST INCH

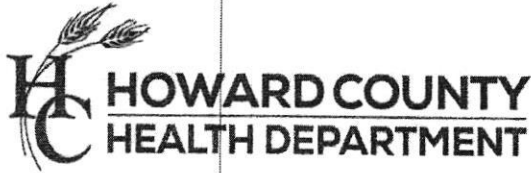
**METHOD OF DRILLING (circle one)**  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 CABLE REVerse-ROTary DRive-POINT  
 other

**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

**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**  
 APPROP. PERMIT NUMBER HO 20 17 G 0 02 (01)  
 PERMIT No. HO-20-0028  
 70 71 72 73 74 75 76 77 78 79







**Bureau of Environmental Health**  
 8930 Stanford Blvd | Columbia, MD 21045  
 410.313.2640 - Voice/Relay  
 410.313.2648 - Fax  
 1.866.313.6300 - Toll Free

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: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535  
 Address: P.O. Box 63  
 Woodbine, Maryland 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): Dave 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: Toll Brothers Telephone #: \_\_\_\_\_  
 Subdivision: Linden Grove Lot #: 34 Well Tag #: HO-20-0028  
 Site Address: 1446 Heritage Ridge Rd  
Woodbine, MD 21797

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Grundfos</u>	Make: Campbell	Two piece watertight cap: yes
Model #: <u>ISSQE10-290</u>	Model#: N/A	Screened, vented well cap: yes
Pump Capacity: <u>15</u>	GPM Depth: 36" (36" min)	Cap secured to casing: yes
Well Yield: <u>4.28 gpm</u>	GPM NSF/WSC approved: yes	Conduit min 18" B.G.: yes
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: yes
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
<b>Must circle one:</b> Torque arrestors / Cable guards / Other acceptable method used		
Safety rope, if used, attached to brass rope adapter or other acceptable method <u>inside of well casing</u> N/A		

<u>Piping to house</u>	<u>House Connection</u>
Type: 1" poly pipe	PVC sleeve to undisturbed soil at wall penetration: yes
PSI: 200 psi (160 psi min)	Length of sleeve (5' minimum from foundation): 6'
Depth of supply line: 36" (36" min)	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: 9/29/2022

**For Health Department Use Only – Not to be completed by Installer**

Date Insp. Requested: <u>9/30/22</u>	Date Insp. Approved: <u>9/30/22</u>	Inspector: <u>RR</u>
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade		<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely		<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly		<input checked="" type="checkbox"/>
Safety rope not outside of well cap/casing		<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade		<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection		<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter		<input checked="" type="checkbox"/>

**INTERIM CERTIFICATE OF POTABILITY**  
Expiration Date – JULY 11, 2023

January 11, 2023

Homeowner  
1446 Heritage Ridge Road  
Woodbine, MD 21797

**RE: Linden Grove, Lot 34  
1446 Heritage Ridge Rd  
Building Permit: B21003075  
Well Permit: HO-20-0028**

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 **11/1/2022**. Final approval of the well line connection to the dwelling was granted on **9/30/2022**. The well construction was completed on **9/10/2020**. Water samples were collected on **12/21/2022, 1/5/2023**.

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-20-0028. 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>



Bureau of Environmental Health  
8930 Stanford Blvd | Columbia, MD 21045  
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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,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a light blue horizontal line.

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

## REPORT OF ANALYSIS

Laboratory ID #: 156429 Account #: 1933  
Reference: Linden Grove Lot 34 Client: Fogle's Well Pump & Treatment  
Location: 1446 Heritage Ridge Road Requested By: Dave Fogle  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 12/21/2022 1425 Site: Kitchen Sink  
Date/Time Rec'd: 12/21/2022 1555 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.4  
Collected By: J. Evans 0309JE Well #: HO-20-0028

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	7.5	MPN/ 100 ml	<1.0	SM20 9223B	12/22/2022 / 1010 / TSD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	12/22/2022 / 1010 / TSD
Nitrate.	5.44	mg/L	10	EPA 300.0	12/22/2022 / 0031 / TSD
Turbidity	3.68	NTU	<10	SM2130B	12/21/2022 / 1030 / TSD
Sand	ND	mg/L	5	Visual/Gravimetric	12/21/2022 / 1615 / 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 ND:None Detected
- 6 Sample collected by client, analyzed as received
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : B21003075

Date Reported: 12/22/2022

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 156598 Account #: 1933  
Reference: Linden Grove Lot 34 Client: Fogle's Well Pump & Treatment  
Location: 1446 Heritage Ridge Road Requested By: Dave Fogle  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 1/5/2023 0845 Site: Kitchen Sink  
Date/Time Rec'd: 1/5/2023 1224 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.1  
Collected By: J. Evans 0309JE Well #: HO-20-0028

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	1/6/2023 / 0915 / MEW
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	1/6/2023 / 0915 / MEW

OK  
- Fogle

### 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 # : B21003075

Date Reported: 1/6/2023



Howard County  
Health Department

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:

Linden Grove	34	Heritage Ridge Rd.
<u>Subdivision/Property Name</u>	<u>Lot #</u>	<u>Road Name</u>

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.

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

HO-20-0028

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

Linden Grove, Lot 34

Approved 7/21/20 (ST)

Stated by FEE

Heritage Ridge Road

50' BRL

50' BRL

50' BRL

10' BRL

10' BRL

Lot 35  
49,680 sq.ft.±

Lot 34  
49,343 sq.ft.±

Lot  
48,522

420

424

419

11,921 SQ.FT.

42

11,722 SQ.FT.

422

30' BRL

30' BRL

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 34  
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.**