

C1 61879 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 RTT

ST/CO USE ONLY DATE RECEIVED 10/16/2009

DATE WELL COMPLETED 01/10/10 Depth of Well 600

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-116-0076

OWNER Elm Street Development WELL SITE ADDRESS Green Bridge Rd TOWN Dayton SUBDIVISION Simpson Property SECTION     LOT 29

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

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS (27), NO. OF POUNDS (2025), DEPTH OF GROUT SEAL (63)

CASING RECORD: MAIN CASING TYPE (ST), Nominal diameter (6), Total depth of main casing (63)

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

SCREEN RECORD: screen type or open hole (ST), BRONZE (BR), PLASTIC (PL)

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y)

DEPTH (nearest ft.) HO 63 600

CIRCLE APPROPRIATE LETTER: A, E, P

SLOT SIZE 1, 2, 3

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04

DIAMETER OF SCREEN (NEAREST INCH) 56 60

DRILLERS LIC. NO. M D 355 DRILLERS SIGNATURE WRD 113

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

PUMPING TEST: HOURS PUMPED (7), PUMPING RATE (1.2), WATER LEVEL (198), TYPE OF PUMP USED (S)

PUMP INSTALLED: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31)

LATITUDE 39.23300 LONGITUDE 77.00063 (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.

SEQUENCE NO. (MODE USE ONLY) **01 61879**  
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3 & 8 ON ALL CARDS.  
 DATE RECEIVED **10 16 2019**

**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 **WDC**  
 PERMIT NO. **10-16-0076**

DATE WELL COMPLETED **10 16 2019**  
 DEPTH OF WELL (TO NEAREST FOOT) **200**  
 OWNER **Sim Street Development**  
 WELL SITE ADDRESS **Green Dr. 200**  
 SUBDIVISION **Sim Street Development**  
 SECTION **200**  
 TOWN **200**  
 LOT **200**

**WELL LOG**  
 Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET	
	FROM	TO
Rock	0	20
Red clay	20	200
Strata	200	200
Brown soil	200	200
Soil	200	200

**GRouting RECORD**  
 WELL HAS BEEN GROUTED (Check appropriate box)  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT  
 BENTONITE CLAY  
 NO. OF BAGS **25**  
 GALLONS OF WATER **132**  
 DEPTH OF GROUT SEAL (to nearest foot) **0**  
 from 0 ft from surface (enter 0 ft from surface)  
 TOP 48 ft to BOTTOM 28 ft

**CASING RECORD**  
 casing types insert appropriate code below  
 MAIN CASING TYPE **ST**  
 Nominal diameter of main casing (nearest inch) **2**  
 Total depth of main casing (nearest foot) **200**

**SCREEN RECORD**  
 screen type of open hole insert appropriate code below  
 STEEL  
 BRASS  
 BRONZE  
 PLASTIC  
 HOLE  
 OTHER

**ACCAID**  
 OTHER CASING (if used) diameter depth (feet) to

**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **1.5**  
 PUMPING RATE (gal. per min.) **1.5**  
 METHOD USED TO MEASURE PUMPING RATE **Water Bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **55**  
 WHEN PUMPING **18**  
 TYPE OF PUMP USED (for test)  
 A piston  
 B centrifugal  
 C rotary  
 D submersible  
 E turbine  
 F other (describe below)

**PUMP INSTALLED**  
 DRIVER INSTALLED PUMP (circle) YES  NO   
 IF DRIVER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS  
 TYPE OF PUMP INSTALLED **2**  
 PUMP HORSE POWER **37**  
 PUMP COLUMN LENGTH (nearest ft.) **43**  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **36**  
 Casing height (circle appropriate box and enter casing height) **+**  
 LAND SURFACE **1**  
 (nearest foot) **21**

NUMBER OF UNSUCCESSFUL WELLS: **0**

WELL HYDROFRACURED **Y**

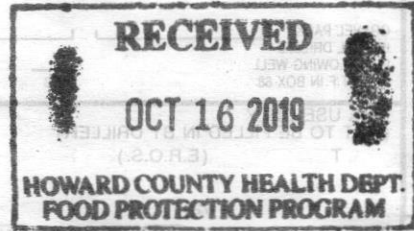
CIRCLE APPROPRIATE LETTER  
 A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
 E ELECTRIC LOG OBTAINED  
 P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04 "WELL CONSTRUCTION" AND ACCORDANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC NO. **MD 322**  
 DRILLERS SIGNATURE **[Signature]**  
 (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC NO. **MD 113**  
 SITE SUPERVISOR (sign. of drill or journeyman responsible for sitework if different from permittee)  
 TELESCOPE INDICATOR  
 LOG INDICATOR  
 OTHER DATA

PERMIT NO. **10-16-0076**  
 FROM "PERMIT TO DRILL WELL"  
 COUNTY **WDC**  
 NUMBER **10-16-0076**

PERMIT NO. 10-16-0076 of the State Gov. Article of the Planning 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, correct, 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 subject to inspection or copying in whole or in part by the public and other government agencies.



TAC = 09/10/2019

**B 1** 63170 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 204793-C STATE PERMIT NUMBER HO-18-0076  
fill in this form completely

**B 3** OWNER INFORMATION  
Date Received (APA) 05/17/19  
8 MM DD YY 13  
Elm Street Development  
15 Last Name Owner First Name 34  
1355 Beverly Road  
36 Street or RFD 55  
McLean VA 22101  
57 Town 70 State 72 Zip 76

**B 3** LOCATION OF WELL  
Howard  
8 COUNTY 21  
Simpson Property  
23 SUBDIVISION 42  
SECTION 44 46 LOT 48 50  
29  
Daxton  
52 NEAREST TOWN 71

**DRILLER INFORMATION**  
Michael Barlow M W D 355  
76 Driller's Name License No. 81  
Barlow Well Drilling  
522 Underwood Lane 2014  
Address  
Signature Date 3-12-19

**B 4** SOURCES OF DRILLING WATER  
1. well  
11 STREET ADDRESS 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
2750  
34 37  
DISTANCE FROM ROAD FT  
ENTER FT OR MI 38 39  
TAX MAP: 27 BLK: 18 PARCEL

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

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
Howard  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S → 41  
DATE ISSUED 05/17/2019 05/17/2020  
43 MM DD YY 48 CO SIGNATURE EXP. DATE  
Don: 6/17/2019 Doc: 6/20/2019 Day: 09/10/2019

**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

**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  
6/18/2019  
460 → 600'  
BR @ 50'  
63' steel casing  
6/17/2019  
300 gal 3/4"  
9/10/19  
pump depth 225' static 28'  
pump 198'  
well 11 gal/min  
45'  
20'

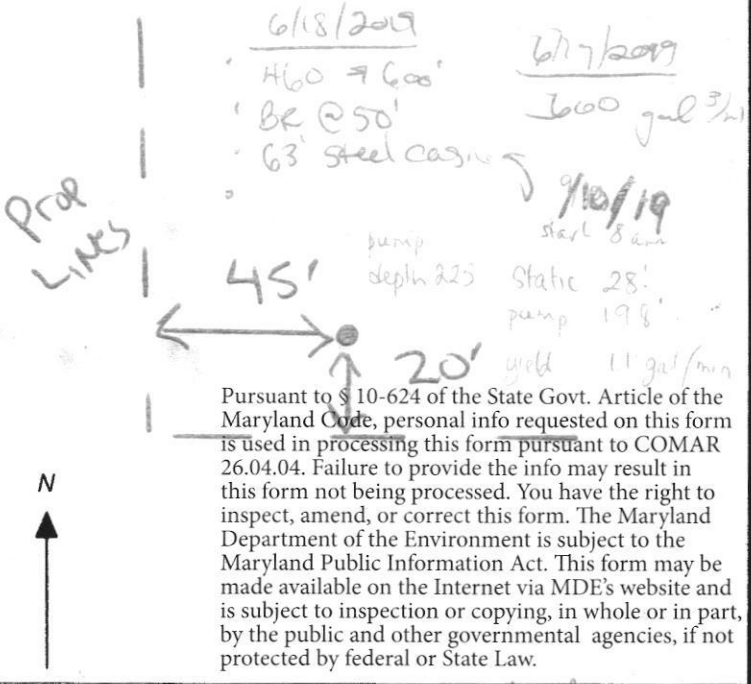
APPROXIMATE DEPTH OF WELL 300 FEET  
24 28  
APPROXIMATE DIAMETER OF WELL 6 INCH  
NEAREST INCH

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

**REPLACEMENT OR DEEPEINED 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  
39  
 THIS WELL WILL DEEPEIN AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52

**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**  
APPROP. PERMIT NUMBER HO2017G001  
PERMIT No. HO-18-0076  
70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS**  
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED- SEE ATT MEMO UPDATE 5/17/2019



LOCAL CODE NO. \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

COUNTY NO. \_\_\_\_\_

PROPERTY NAME \_\_\_\_\_

STATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

LOCAL CODE NO. \_\_\_\_\_

PROPERTY NAME \_\_\_\_\_

STATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

FOR PROPOSED STRUCTURES WITH A CAPACITY OF 100 GALLONS OR MORE, THE DISTANCE FROM THE WELL TO THE STRUCTURE SHALL BE AT LEAST \_\_\_\_\_ FEET.

FOR PROPOSED STRUCTURES WITH A CAPACITY OF 100 GALLONS OR MORE, THE DISTANCE FROM THE WELL TO THE STRUCTURE SHALL BE AT LEAST \_\_\_\_\_ FEET.

FOR PROPOSED STRUCTURES WITH A CAPACITY OF 100 GALLONS OR MORE, THE DISTANCE FROM THE WELL TO THE STRUCTURE SHALL BE AT LEAST \_\_\_\_\_ FEET.

FOR PROPOSED STRUCTURES WITH A CAPACITY OF 100 GALLONS OR MORE, THE DISTANCE FROM THE WELL TO THE STRUCTURE SHALL BE AT LEAST \_\_\_\_\_ FEET.

PROPERTY NAME \_\_\_\_\_

STATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

LOCAL CODE NO. \_\_\_\_\_

PROPERTY NAME \_\_\_\_\_

STATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

LOCAL CODE NO. \_\_\_\_\_

PROPERTY NAME \_\_\_\_\_

STATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

FOR PROPOSED STRUCTURES WITH A CAPACITY OF 100 GALLONS OR MORE, THE DISTANCE FROM THE WELL TO THE STRUCTURE SHALL BE AT LEAST \_\_\_\_\_ FEET.

METHOD OF DRILLING \_\_\_\_\_

APPROXIMATE DEPTH \_\_\_\_\_ FEET

APPROXIMATE TIME TO DRILL \_\_\_\_\_ HOURS

MANAGEMENT OF DEEPEST WELL

CHECK APPROXIMATE BOX

THIS WELL IS NOT RELEVANT TO EXISTING WELL

THIS WELL WILL BE DEEPER THAN EXISTING WELL THAT WILL BE ABANDONED OR DEEPEST

THIS WELL WILL BE DEEPER THAN EXISTING WELL THAT WILL BE USED AS A DEEPER WELL THAN EXISTING WELL THAT WILL BE ABANDONED OR DEEPEST

**RECEIVED**

MAR 19 2019

HOWARD COUNTY HEALTH DEPT.

FOOD PROTECTION PROGRAM



**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:	September 10, 2019		
Well Depth:	600	feet	<i>CABALLO 10/21/2019</i>
Customer	Elm Street Development	Permit #	HO-16-0076
Road	Green Bridge Road	Subdivision	Simpson Property
City	Dayton	Section	
State	Maryland	Lot #	29

Time	Water Level feet Pump set at 250'	Time to Fill 1-gallon bucket seconds	G.P.M.
8:00 AM	28	4	15.00
8:15 AM	127	4	15.00
8:30 AM	198	35	1.71
8:45 AM	205	56	1.07
9:00 AM	198'2"	50	1.20
9:15 AM	198'2"	50	1.20
9:30 AM	198'2"	50	1.20
9:45 AM	198'2"	50	1.20
10:00 AM	198'1"	50	1.20
10:15 AM	198'1"	50	1.20
10:30 AM	198'1"	50	1.20
10:45 AM	198'1"	50	1.20
11:00 AM	198'1"	50	1.20
11:15 AM	198'1"	50	1.20
11:30 AM	198'1"	50	1.20
11:45 AM	198'1"	50	1.20
12:00 PM	198'1"	50	1.20
12:15 PM	198'1"	50	1.20
12:30 PM	198'1"	50	1.20
12:45 PM	198'1"	50	1.20
1:00 PM	198'1"	50	1.20
1:15 PM	198'1"	50	1.20
1:30 PM	198'1"	50	1.20
1:45 PM	198'1"	50	1.20
2:00 PM	198'1"	50	1.20
2:15 PM	198'1"	50	1.20
2:30 PM	198'1"	50	1.20
2:45 PM	198'1"	50	1.20
3:00 PM	198'1"	50	1.20
3:15 PM	198'1"	50	1.20
3:30 PM	198'1"	50	1.20

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.

**RECEIVED**

**OCT 16 2019**

**HOWARD COUNTY HEALTH DEPT.  
FOOD PROTECTION PROGRAM**

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: P.O. Box 03  
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#: MSD2220

\*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: Willow Creek Lot #: 29 Well Tag #: HO-~~18~~-0070  
Site Address: 7012 Colt Place 18 ✓ 08/31/2022  
Dayton, MD 21036

Submersible Pump Data  
Make: Goulds  
Model #: 5HS10422c  
Pump Capacity: 5 gpm  
Well Yield: 1.2 gpm

Pitless Adapter  
Make: Campbell +  
Model #: N/A  
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" R.G.: Yes  
Conduit secured to well cap: Yes

Depth of well encountered at time of pump installation: (100) feet  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.R.4  
Must circle one: Torque restrictors / Cable guards / Other acceptable method used

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

Piping to house  
Type: 1" poly pipe  
PSI: 200 (150 psi min)  
Depth of supply line: 30" (36" min)

House Connection  
PVC sleeve to undisturbed soil at wall penetration: Yes  
Length of sleeve (5' minimum from foundation): 6'  
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: 8/31/2022

For Health Department Use Only - Not to be completed by Installer  
Date Insp. Requested: 08/31/2022 Date Insp. Approved: 08/31/2022 Inspector: [Signature]  
Inspection Data:  
Pitless adapter watertight & water supply line at least 36" below grade ✓ 50" 08/31/2022 [Signature]  
Two piece cap installed and attached to casing securely ✓ 45" 08/31/2022 [Signature]  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓ 27" 08/31/2022 [Signature]  
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)  
[Stamp: HoCo 08/31/22 MR]



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

**INTERIM CERTIFICATE OF POTABILITY**  
Expiration Date – JUNE 7, 2023

December 7, 2022

Homeowner  
7012 Colt Place  
Dayton, MD 21036

**RE: Willowshire, Lot 29**  
**7012 Colt Place**  
**Building Permit: B22000466**  
**Well Permit: HO-18-0076**

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 **12/7/2022**. Final approval of the well line connection to the dwelling was granted on **8/31/2022**. The well construction was completed on **9/10/2019**. Water samples were collected on **11/17/2022, 12/5/2022**.

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-18-0076. 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  
410.313.2640 - Voice/Relay  
410.313.2648 - Fax  
1.866.313.6300 - Toll Free

---

**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 #: 156095 Account #: 1933  
Reference: Willow Creek Lot 29 Client: Fogle's Well Pump & Treatment  
Location: 7012 Colt Place Requested By: Dave Fogle  
Dayton, MD 21036 Source: Well Water  
Date/ Time Collected: 12/5/2022 1111 Site: Kitchen Sink Tap  
Date/Time Rec'd: 12/5/2022 1335 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.9  
Collected By: J. Smith 2896JS Well #: HO-16-0076

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM20 9223B	12/6/2022 / 0830 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	12/6/2022 / 0830 / CRS
Turbidity	<0.30 ✓	NTU	<10	SM2130B	12/6/2022 / 0810 / TSD
Iron	<0.02 ✓	mg/L	0.3*	Hach 8146	12/6/2022 / 0940 / TSD

### NOTES:

- 1 \*SMCL = Secondary Maximum Contaminant Level
- 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 # : B22000466

Date Reported: 12/6/2022

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 155857 Account #: 1933  
Reference: Willow Creek Lot 29 Client: Fogle's Well Pump & Treatment  
Location: 7012 Colt Place Requested By: Dave Fogle  
Dayton, MD 21036 Source: Well Water  
Date/ Time Collected: 11/17/2022 1030 Site: Kitchen Sink Tap  
Date/Time Rec'd: 11/17/2022 1449 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.1  
Collected By: J. Smith 2896JS Well #: HO-16-0076

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	12.4	MPN/ 100 ml	<1.0	SM20 9223B	11/18/2022 / 0915 / TSD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	11/18/2022 / 0915 / TSD
Nitrate.	<0.40	mg/L	10	EPA 300.0	11/18/2022 / 0004 / TSD
Turbidity	23.7	NTU	<10	SM2130B	11/18/2022 / 0950 / MEW
Iron	2.12	mg/L	0.3*	Hach 8146	11/18/2022 / 1020 / MEW
Sand	ND	mg/L	5	Visual/Gravimetric	11/17/2022 / 1545 / TSD

### 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 NTU = Nephelometric Turbidity Units
- 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 Visual well check: Sealed, vented cap
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : B22000466

Date Reported: 11/18/2022

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

**MEMORANDUM**

**TO: Michael Barlow Well Drilling**  
**Attn: Michael Barlow MWD 355**  
522 Underwood Lane  
Bel Air, MD 21014

**FROM: Joseph Cabahug** *J Cabahug*  
Licensed Environmental Health Specialist **001997**  
Howard County Health Department  
**Well & Septic Program**

**RE: Simpson and Denault Well Permit Special Conditions**

**DATE: 05/17/2019**

This memorandum serves to inform the driller serving The Simpson and Denault Subdivision for construction of a new potable wells for residential use of the special conditions associated with the release of the well permits.

In accordance with current approved Percolation Certification (signed 03/27/2019), the following conditions apply:

**Note 15(d)** Wells installed on **Lots 2 – 8, 12 – 14, 23, 26 – 34, 38, and 39** must be installed as steel casing to depth of at least 50' below the soil surface or 10 feet into competent bedrock, whichever is deeper.

In accordance with the Water Appropriation and Use Permit (**HO2017G001(01)**), the following conditions apply:

**Page 3, Section 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 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 the well construction requirements.

**Lots 26, 28, 38 – 44**

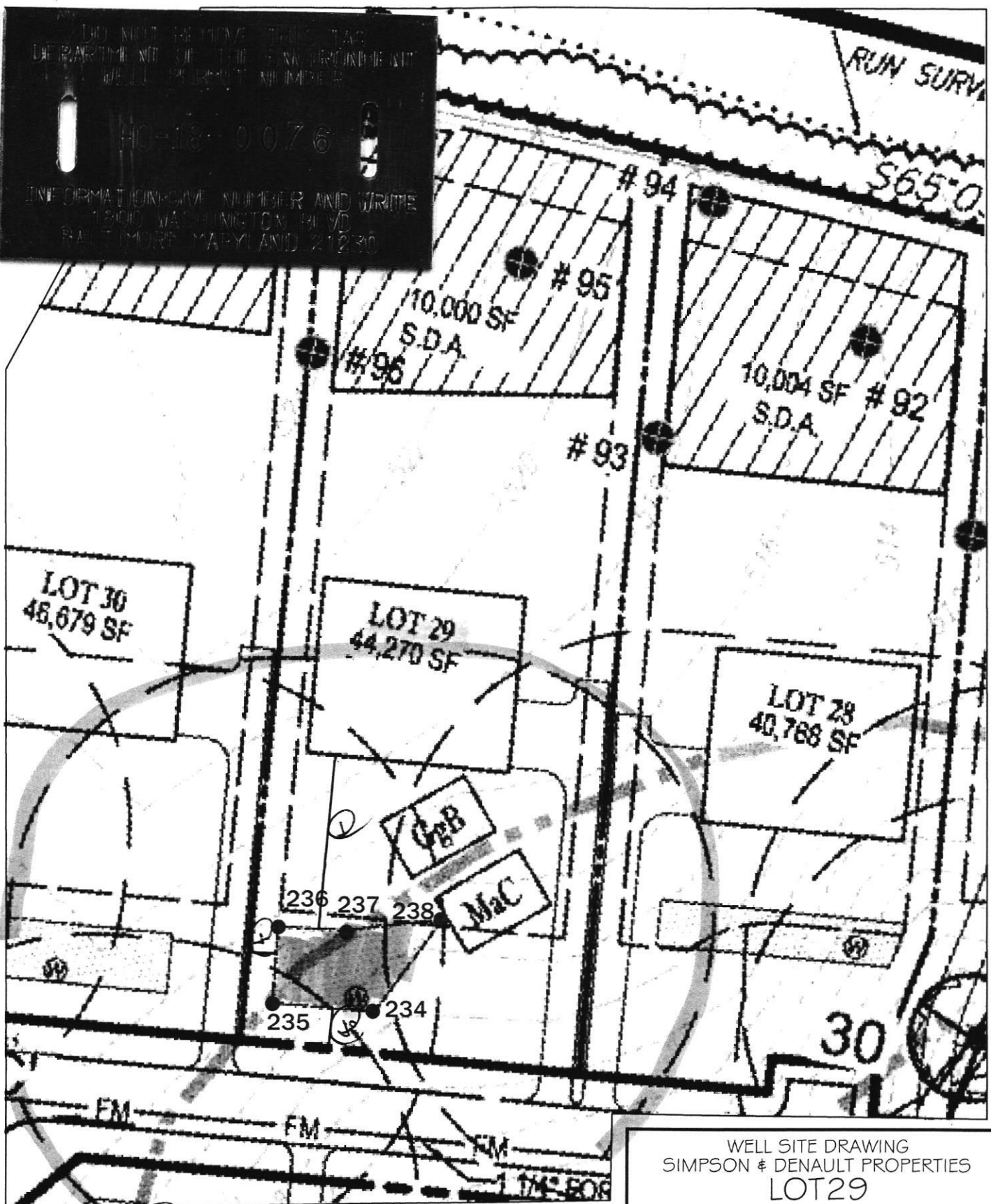
Maura J. Rossman, M.D., Health Officer

Lots that are less than one acre are shown below.

MINIMUM LOT SIZE CHART			
LOT No.	GROSS AREA (SF)	PIPE STEM	NET AREA
1	54,825		54825
2	59,641		59641
3	55,018		55018
4	41,925		41925
5	40,840		40840
6	55,788		55788
7	55,833		55833
8	45,774		45774
9	42,992		42992
10	44,020		44020
11	42,068		42068
12	40,362		40362
13	41,330		41330
14	56,648	6700	49948
15	40,459		40459
16	49,871		49871
17	40,003		40003
18	40,443		40443
19	40,461		40461
20	40,461		40461
21	40,218		40218
22	54,686		54686
23	55,798		55798
24	44,052	1375	42677
25	41,612	2906	38706
26	48,488	5322	43166
27	46,396		46396
28	40,768		40768
29	44,270		44270
30	44,589		44589
31	46,366		46366
32	49,299		49299
33	47,918		47918
34	52,931		52931
35	54,827	2518	52309
36	44,800	3617	41183
37	55,035	4441	50595
38	33,223	2913	30310
39	31,227		31227
40	35,865		35865
41	40,100		40100
42	34,182		34182
43	41,390		41390
44	41,360		41360
45	45,097		45097
<b>TOTAL AREA</b>	<b>2,043,259</b>	<b>AC.</b>	<b>46.91</b>
			<b>S.F.</b>

Please reach out to the Howard County Health Department – Bureau of the Environment with further questions.

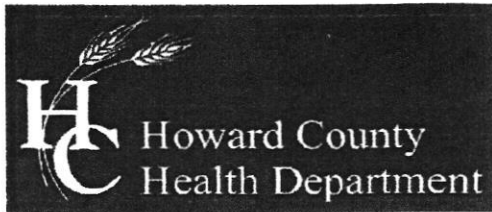
DO NOT REMOVE THIS TAG  
 DEPARTMENT OF THE ENVIRONMENT  
 WELL IDENTIFICATION NUMBER  
**HO-18-0076**  
 INFORMATION: CALL NUMBER AND WRITE  
 1800 WASHINGTON BLVD  
 BALTIMORE, MARYLAND 21230



WELL SITE DRAWING  
 SIMPSON & DENAULT PROPERTIES  
 LOT 29  
 TAX MAP 27 GRID 18  
 PARCELS 34, 36, 98, 111, & 112  
 5TH ELECTION DIST.  
 HOWARD COUNTY, MD.  
 SCALE: 1"=50' DATE: 2/21/19

APPROVED (signature) 001997  
 5/17/2015  
 STAKE BY SHAN+LANE  
 HO-18-0076

SHANABERGER & LANE  
 8726 TOWN AND COUNTRY BLVD., SUITE 201  
 ELLICOTT CITY, MD. 21043  
 (410)461-9563 FAX: (410)461-9693



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., 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:

Lot #'s 1, 2, 3, 4, 7, 8, 9, 10, 11, 14, PARCEL 'C', 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45

Well Site Location:

SIMPSON/DENAULT
Subdivision/Property Name

Lot #

GREEN BRIDGE RD.
Road Name

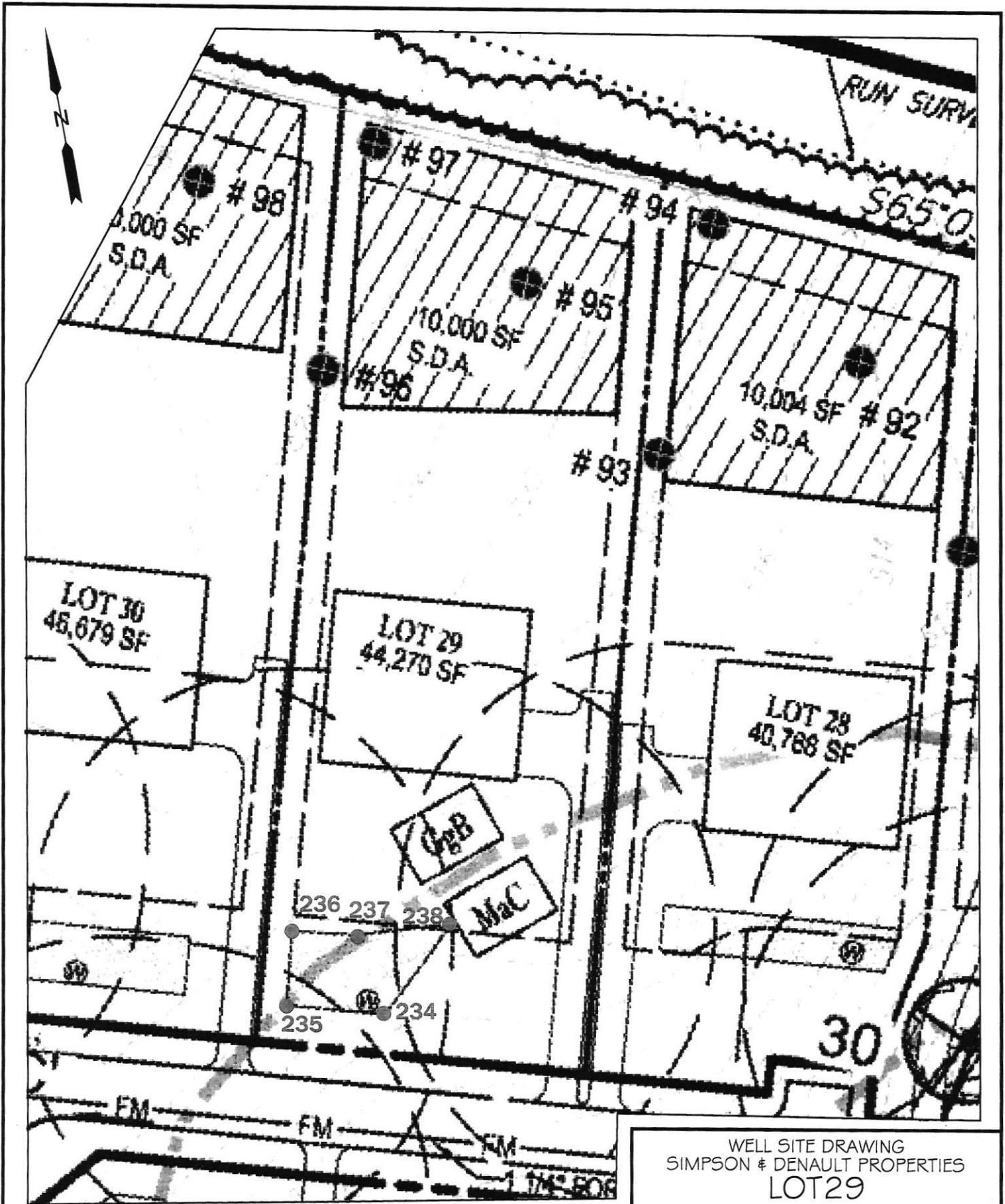
X The well site has been staked by SHANABERGER & LANE
(professional land surveyor or company employing professional land surveyors)
on 1/9/19 (date) and does not require a site inspection.

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 4/22/14





SHANABERGER & LANE  
 8726 TOWN AND COUNTRY BLVD., SUITE 201  
 ELLICOTT CITY, MD. 21043  
 (410)461-9563 FAX: (410)461-9693

WELL SITE DRAWING  
 SIMPSON & DENAULT PROPERTIES  
 LOT 29

TAX MAP 27 GRID 18  
 PARCELS 34, 36, 98, 111, & 112  
 5TH ELECTION DIST.  
 HOWARD COUNTY, MD.  
 SCALE: 1"=50' DATE: 2/21/19