

C1 61873

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)

ST/CO USE ONLY DATE Received MM DD YY 10 16 2009

DATE WELL COMPLETED MM DD YY 09 05 19 APPROVED [Signature] Depth of Well 22 600 26 (TO NEAREST FOOT)

COUNTY NUMBER [Handwritten]

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-18-0087

OWNER Elm Street Development WELL SITE ADDRESS last name Green Bridge Rd first name TOWN Dayton SUBDIVISION Simpson Property SECTION LOT 44

WELL LOG Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Soil, Brown shale, med GRAY Rock.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED [Y] [N] 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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE 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. M D 355 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) 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 [CM] BENTONITE CLAY [BC] NO. OF BAGS 30 NO. OF POUNDS 2250 GALLONS OF WATER 180 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 75 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 75

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole (insert appropriate code below) [ST] [BR] [HO] [PL] [OT]

DEPTH (nearest ft.) HO 75 600

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 6 HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min.) 1.0 METHOD USED TO MEASURE PUMPING RATE water/bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 37 ft. WHEN PUMPING 159 ft. TYPE OF PUMP USED (for test) [S] submersible

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES 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 LAND SURFACE [-] below 1 (nearest foot)

LATITUDE 39.23185 LONGITUDE 77.00204 (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. 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.

TAC: 6/1/19
STATE PERMIT NUMBER
Ho-18-0087

B 1 63120

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

fill in this form completely

564793R

Date Received (APA) 03/19/19
8 MM DD YY 13

OWNER INFORMATION
15 Last Name: Elm Street Development
Owner
34 First Name: [blank]
36 Street or RFD: 1355 Beverly Road
55
57 Town: McLean VA 22101
70 State 72 Zip 76

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

DRILLER INFORMATION
Michael Barbow MW D 355
76 Driller's Name 81 License No.
Barbow Well Drilling
522 Anderson Ave 21014
Address
Signature Date 3-12-19

B 4 SOURCES OF DRILLING WATER
1. well
2.
3. Green Bridge Road
11 STREET ADDRESS 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
2450
34 1500 37
DISTANCE FROM ROAD FT
ENTER FT OR MI 38 39
TAX MAP: 27 BLK: 18 PARCEL

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

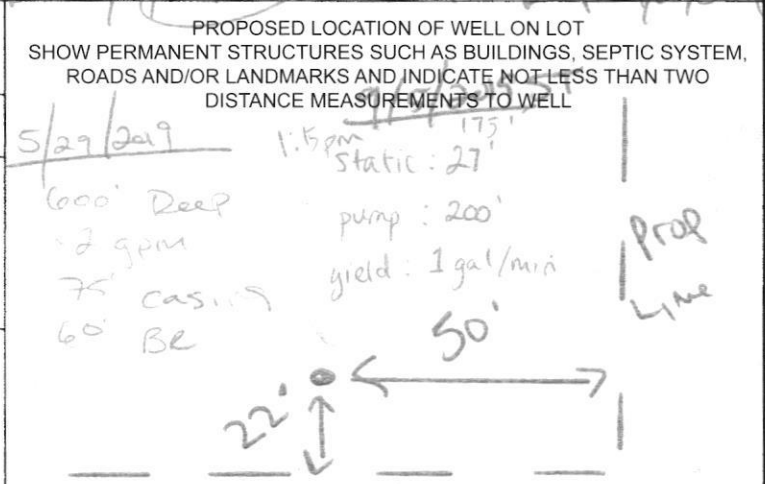
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 I INDUSTRIAL, COMMERCIAL, DEWATERING
 P PUBLIC WATER SUPPLY WELL
 T TEST, OBSERVATION, MONITORING
 O OPEN LOOP GEOTHERMAL
 C CLOSED LOOP GEOTHERMAL

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
 43 MM DD YY 48 CO SIGNATURE EXP. DATE 05/17/2020
 Dan: 5/28/2019

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)
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL
 Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 D 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-2017-0001
 PERMIT No. Ho-18-0087
 70 71 72 73 74 75 76 77 78 79

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



MICHAEL BARLOW WELL DRILLING & SERVICE, INC.
 522 Underwood Lane Bel Air, Maryland 21014
 (410) 838-6910 Fax (410) 838-3582

WELL YIELD REPORT

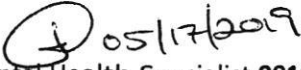
Date Test Completed:	September 5, 2019		
Well Depth:	600	feet	
Customer	Elm Street Development	Permit #	HO-16-0087
Road	Green Bridge Road	Subdivision	Simpson Property
City	Dayton	Section	
State	Maryland	Lot #	44

Time	Water Level feet Pump set at 200'	Time to Fill 1-gallon bucket seconds	G.P.M.
9:00 AM	37	5	12.00
9:15 AM	113	5	12.00
9:30 AM	186'	60	1.00
9:45 AM	185	60	1.00
10:00 AM	184	60	1.00
10:15 AM	183	60	1.00
10:30 AM	181	60	1.00
10:45 AM	180	60	1.00
11:00 AM	179	60	1.00
11:15 AM	178	60	1.00
11:30 AM	177	60	1.00
11:45 AM	176	60	1.00
12:00 PM	175	60	1.00
12:15 PM	174	60	1.00
12:30 PM	172	60	1.00
12:45 PM	171	60	1.00
1:00 PM	170	60	1.00
1:15 PM	169	60	1.00
1:30 PM	168	60	1.00
1:45 PM	167	60	1.00
2:00 PM	166	60	1.00
2:15 PM	165	60	1.00
2:30 PM	164	60	1.00
2:45 PM	163	60	1.00
3:00 PM	162	60	1.00
3:15 PM	161	60	1.00
3:30 PM	159	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.			

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 
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
TOTAL AREA	2,043,259 AC.	46.91	S.F.

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

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#: 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: Willow Creek Lot #: 44 Well Tag #: HO-18-0067
Site Address: 6945 Bricker Rd
Dayton, MD 21036

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Goulds</u>	Make: <u>Campbell +</u>	Two piece watertight cap: <u>VS</u>
Model #: <u>SHS10422</u>	Model#: <u>NA</u>	Screened, vented well cap: <u>VS</u>
Pump Capacity: <u>5</u>	GPM Depth: <u>30'</u> (36" min)	Cap secured to casing: <u>VS</u>
Well Yield: <u>1</u>	GPM NSF/WSC approved: <u>VS</u>	Conduit min 18" B.G.: <u>VS</u>
Depth of well encountered at time of pump installation: <u>600</u> (feet)		Conduit secured to well cap: <u>VS</u>
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 <u>inside of well casing</u> <u>NA</u>		

Piping to house	House Connection
Type: <u>1" PEX pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>VS</u>
PSI: <u>200</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>16</u>
Depth of supply line: <u>36"</u> (36" min)	Sleeve sealed properly: <u>VS</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: [Signature] date: 8/11/2022

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

Date Insp. Requested: <u>8/12/22</u>	Date Insp. Approved: <u>8/12/22</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"/>	

(Revised form 10/24/2018)
8/12/22 Well casing was broken during the house build but fogles replaced about 8' of casing - looks ok - (RR)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – APRIL 17, 2022

October 17, 2022

Homeowner
6045 Bricker Road
Dayton, MD 21036

RE: Willowshire, Lot 44
6045 Bricker Road
Building Permit: B22000449
Well Permit: HO-18-0087

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 **8/10/2022**. Final approval of the well line connection to the dwelling was granted on **8/12/2022**. The well construction was completed on **11/4/2019**. Water samples were collected on **10/11/2022, 10/14/2022**.

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-18-0087. 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

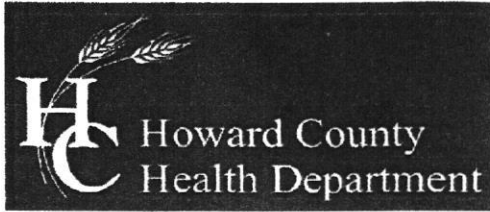
In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environment website which describes in further detail operation and maintenance of your septic system.

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



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:

Well Site Location:

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

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.

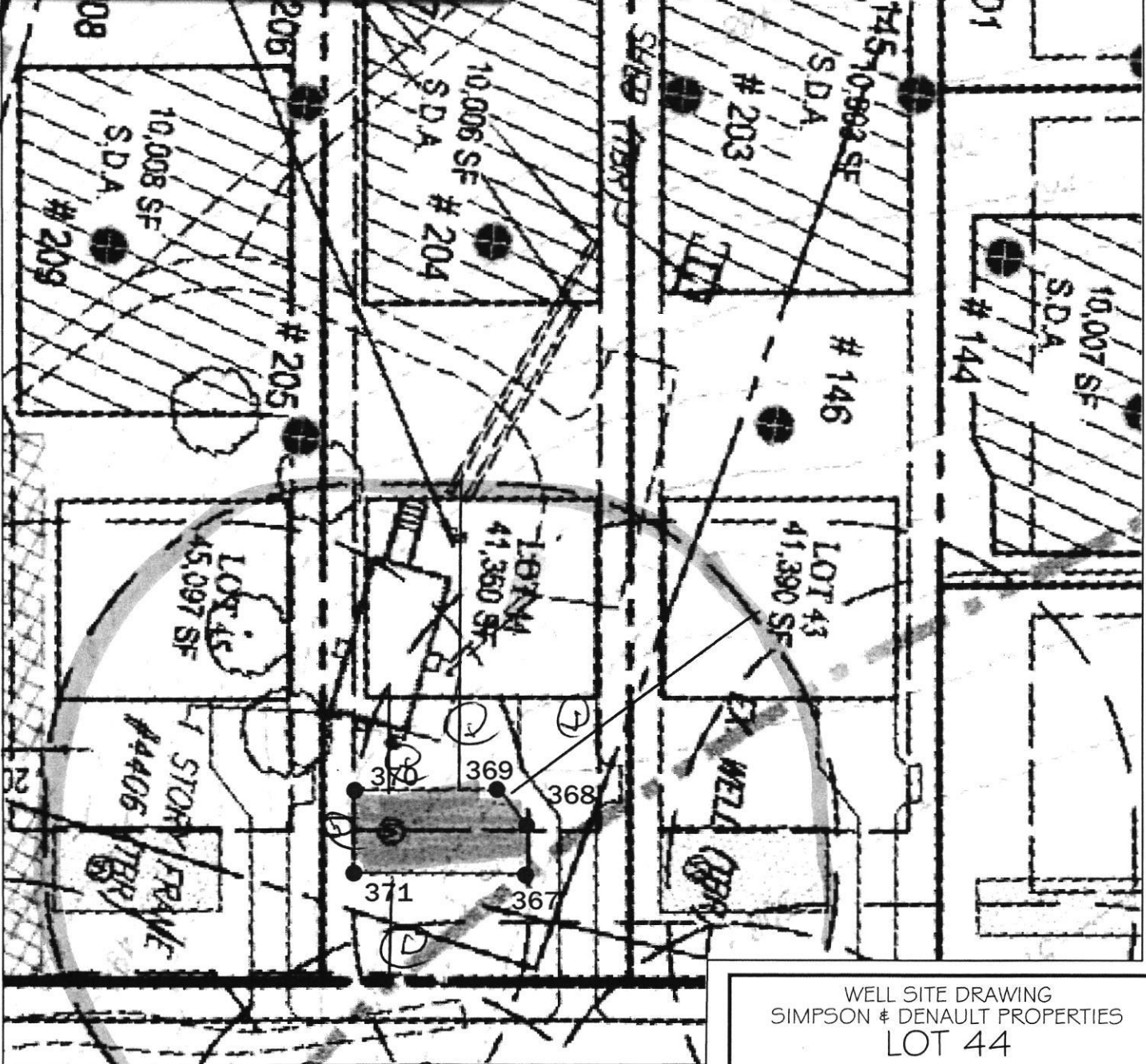
The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

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



NOT BEYOND THE TAG
 DEPARTMENT OF THE ENVIRONMENT
 INFORMATION-GIVE NUMBER AND WRITE
 1-800-WASHINGTON BLVD
 BALTIMORE, MARYLAND 21201

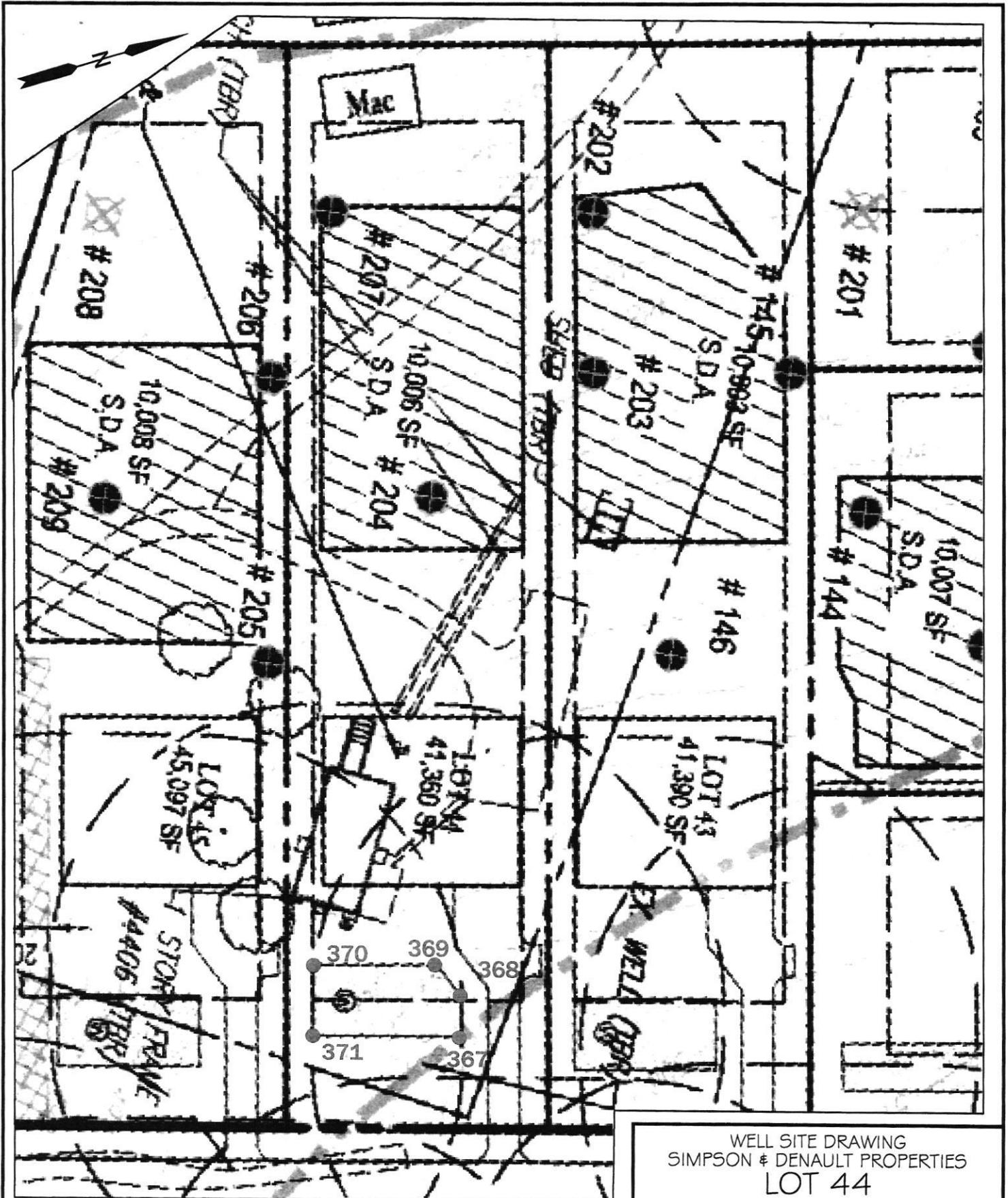


APPROVED 5/17/2019 (Signature)
 STATE BY SHAN/LANE
 Ho-18-0087

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 44

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



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 44

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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 155148 Account #: 1933
Reference: Willow Creek Lot 44 Client: Fogle's Well Pump & Treatment
Location: 6045 Bricker Road Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 10/11/2022 1230 Site: Pressure Tank
Date/Time Rec'd: 10/11/2022 1505 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.3
Collected By: J. Evans 0309JE Well #: HO-18-0087

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	>200.5	MPN/ 100 ml	<1.0	SM20 9223B	10/12/2022 / 1200 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/12/2022 / 1200 / CRS
Nitrate.	5.67	mg/L	10	EPA 300.0	10/11/2022 / 1929 / TSD
Turbidity	3.57	NTU	<10	SM2130B	10/11/2022 / 1605 / TSD
Sand	ND	mg/L	5	Visual/Gravimetric	10/11/2022 / 1605 / 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 tested on site; Chlorine level tested in lab

Reason for Test : Use & Occupancy

Building Permit # : 22000449

Date Reported: 10/12/2022