

C1 08192

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 4536689

ST/CO USE ONLY DATE RECEIVED MM DD YY 04 01 17

DATE WELL COMPLETED 03 27 13

Depth of Well 180

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 75-2487

OWNER RENO H.E. WELL SITE ADDRESS OFF RT. 149 TOWN BLOOMFIELD SHIP SUBDIVISION RENO SECTION LOT 2

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. Rows include Top Soil, Clay, Brown Shale, Blue Slate, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS 11 NO. OF POUNDS 66

CASING RECORD

MAIN CASING TYPE PL Nominal diameter 6 Total depth 40

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

SCREEN RECORD

screen type or open hole (ST, BR, HO, PL, OT)

DEPTH (nearest ft.)

Table with columns: E, A, C, H, S, R, E, N and depth values.

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 3 PUMPING RATE 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL 23 BEFORE PUMPING 17/20 WHEN PUMPING 45/25

PUMP INSTALLED

DRILLER INSTALLED PUMP YES NO TYPE OF PUMP INSTALLED PLACE IN BOX 29 CAPACITY: GALLONS PER MINUTE 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH 43 47 CASING HEIGHT above below LAND SURFACE 2 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO 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. 1 M SD 117 DRILLERS SIGNATURE

LIC. NO. 1 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

LATITUDE 39.31163 LONGITUDE 76.99498 (DEFAULT COORD. WGS 84) NOTES:

B 1 14974

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO - 95 - 2481

fill in this form completely

544526 A please type

Date Received (ABA)

02 05 13

OWNER INFORMATION

REN FRO HE JR. 13765 Rt. 144 West FRIEND Ship MD. 21294

B 3

LOCATION OF WELL

Howard COUNTY REN FRO Property SUBDIVISION 2 SECTION 44 46 LOT 48 50 West FRIEND Ship NEAREST TOWN

DRILLER INFORMATION

Ralph E. MAYNE MSD 117 Driller's Name License No. 81 RALPH MAYNE WELL DRILLING Firm Name 17024 HARDY Rd Mt. Airy MD. 21777 Address Signature Date 2/4/13

B 4

SOURCES OF DRILLING WATER

- 1. well

Off Rt. 144 STREET ADDRESS

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



700 DISTANCE FROM ROAD

ENTER FT OR MI

TAX MAP: 15 BLK: PARCEL 178

B 2

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled)
- 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 A536689 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 02/20/2013 CO SIGNATURE EXP. DATE 2/20/14

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) AIR-ROTary (circled) JETTED ROTARY (Hydraulic Rotary) Jetted & DRIVEN Drive-POINT
- CABLE REVERSE-ROTary
- other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled)
- 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

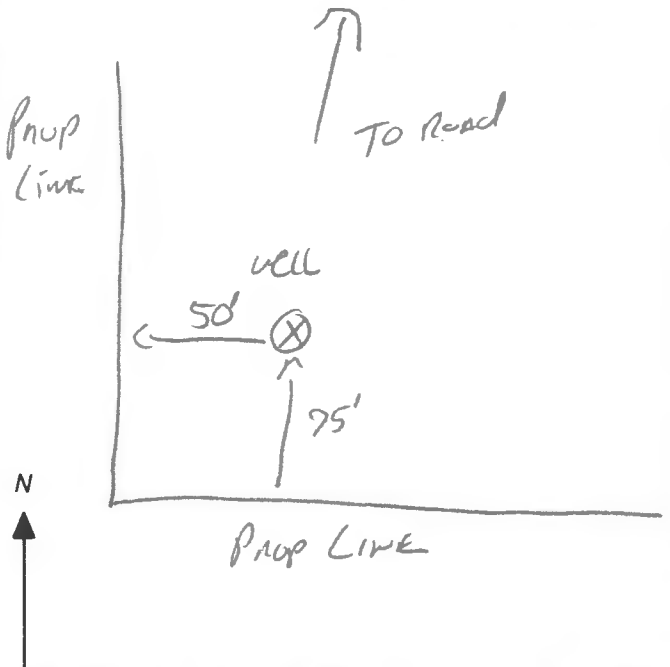
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER G

PERMIT No. HO - 95 - 2481

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



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: Michael Runk Plumbing & Htg Telephone #: 410-781-6791
 Address: 6307 Barnett Ave.
Sykesville, MD 21784

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer
 License # and name of individual responsible for the field installation: 9698
 Name (Print): Michael Runk License# 9698

*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: Michael Fick Telephone #: 443-340-4291
 Subdivision: _____ Lot #: 2 Well Tag #: HO-75-2487
 Site Address: 13783 Frederick Rd
West Friendship, MD 21794

Submersible Pump Data

Make: Cummins
 Model #: 6F1050E01
 Pump Capacity: 7 gal/min
 Well Yield: 10 gal/min

Pitless Adapter

Make: Boshart +
 Model#: BOP-100-35
 GPM Depth: 42" (36" min)
 GPM NSF/WSC approved: _____

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.: 60"
 Conduit secured to well cap: Yes

Depth of well encountered at time of pump installation: 180 (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

Piping to house

Type: Poly
 PSI: 200 (160 psi min)
 Depth of supply line: 42" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: 10 ft
 Length of sleeve (5' minimum from foundation): 10 ft
 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.

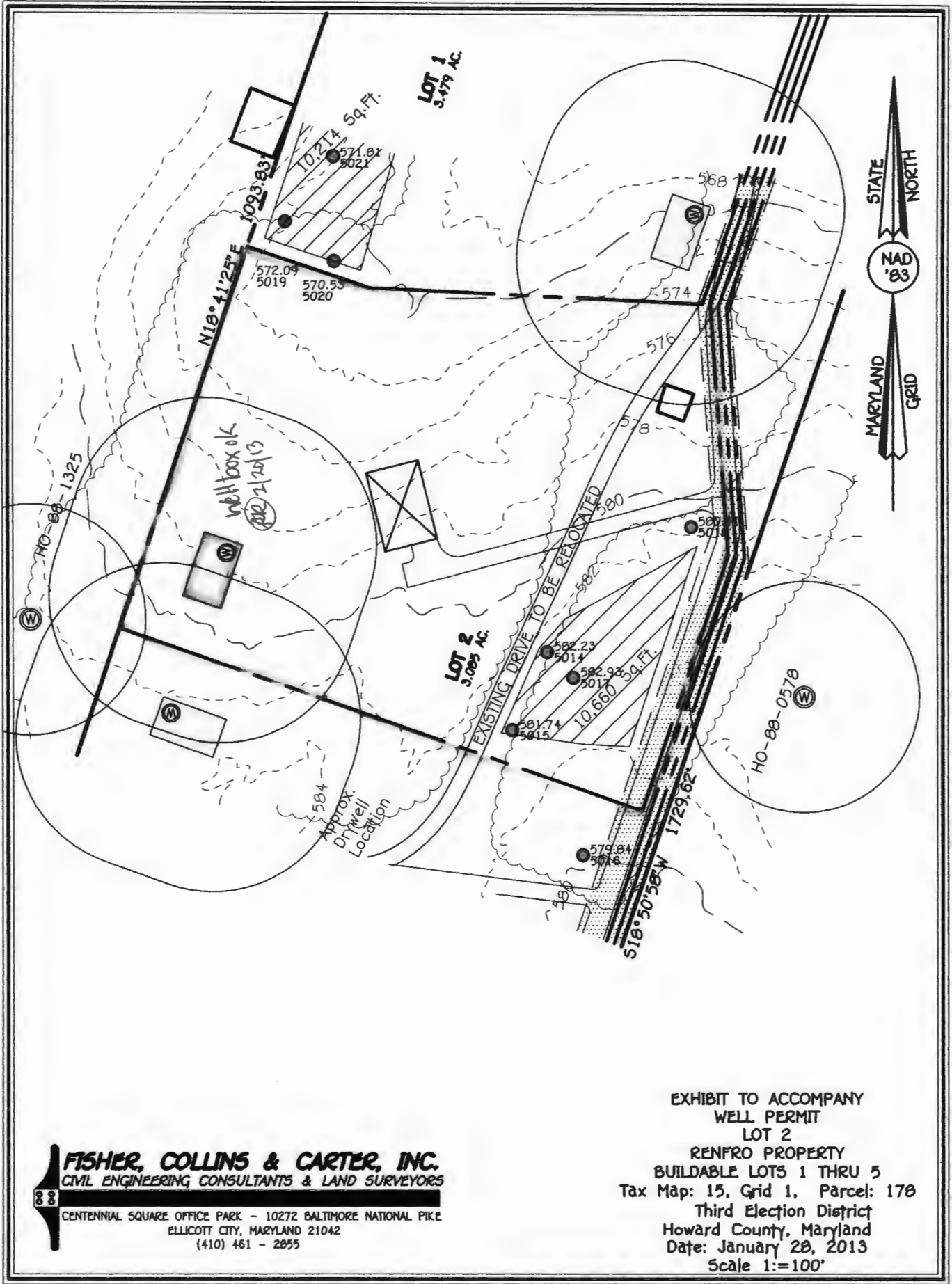
[Signature] _____ date 12/13/22
 Signature of company representative responsible for installation

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

Date Insp. Requested: _____ Date Insp. Approved: 12/13/2022 Inspector: SP
 Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
 Two piece cap installed and attached to casing securely ✓
 Elec. conduit extends at least 18" below grade/attached to cap properly ✓
 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)

I:\2011\11040\DWG\11040-3001Well EXHIBIT LOT 2.dwg, Model, 1/28/2013 11:07:55 AM, 1:100



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

EXHIBIT TO ACCOMPANY
 WELL PERMIT
 LOT 2
 RENFRO PROPERTY
 BUILDABLE LOTS 1 THRU 5
 Tax Map: 15, Grid 1, Parcel: 178
 Third Election District
 Howard County, Maryland
 Date: January 28, 2013
 Scale 1:100'



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 – February 25, 2024

August 25, 2023

Homeowner
13783 Frederick Road
West Friendship, MD 21794

**RE: Renfro Property, Lot 2
13783 Frederick Rd.
Building Permit: B22003377
Well Permit: HO-95-2481**

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 **8/4/2023**. Final approval of the well line connection to the dwelling was granted on **12/13/2022**. The well construction was completed on **3/27/2013**. Water samples were collected on **8/11/2023**.

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-95-2481. 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,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', written in a cursive style.

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 #: 160782 Account #: 7783
Reference: Fick Residence Client: Highlight Construction
Location: 13783 Frederick Road Requested By: Debbie Trombetta
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 8/11/2023 1109 Site: Pressure Tank
Date/Time Rec'd: 8/11/2023 1505 Treatment: Prior to Spin Down Separator
Chlorine ppm: Free: ND Total: ND pH: 5.4
Collected By: J. Yeager 0819JY Well #: HO-95-2481

| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|--------------------|------------------------|
| Bacteria, Coliform, Total, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 8/12/2023 / 1015 / LLO |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM20 9223B | 8/12/2023 / 1015 / LLO |
| Nitrate. | 4.17 | mg/L | 10 | EPA 300.0 | 8/11/2023 / 2056 / CRS |
| Sand | ND | mg/L | 5 | Visual/Gravimetric | 8/11/2023 / 1730 / CRS |
| Turbidity | <0.30 | NTU | <10 | SM2130B | 8/11/2023 / 1655 / 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 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 pH & Chlorine level tested on site
- 7 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B22003377

Date Reported: 8/14/2023



3525 H Ellicott Mills Drive • Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by Fisher-Collins-Carter on Jan 28 2013 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN OWNER NAME - H.E. RENFROW
Sub-NAME - RENFROW Prop. OFF MA 144
Lot # 2