

0463

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

NUMBER IS TO BE PUNCHED ON ALL CARDS

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER R# 43493

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 072793 Time expired for F.C.O.P. compliance

INDEXED

PERMIT NO. FROM "PERMIT TO DRILL WELL" A0-92-0409

OWNER STAFFORD SCOTT last name first name STREET OR RFD SCOTT ROAD TOWN GLENDEN SUBDIVISION COUNTRY SPRINGS SECTION LOT 21

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, Clay, Br. Shale, Tan Slate, Br. Micaceous Sandstone, Tan Micaceous Sandstone, Granite, Tan micaceous Sandstone, Br. Sandstone, Granite, Fractured Granite, Granite, Fractured Granite.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 17 NO. OF POUNDS 1700

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 60 61 Total depth of main casing (nearest foot) 57 1 60 61

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE BRONZE HOLE PL OT PLASTIC OTHER

DEPTH (nearest ft.) 1 H0 49 160 2 3

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 IDENT. NO. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

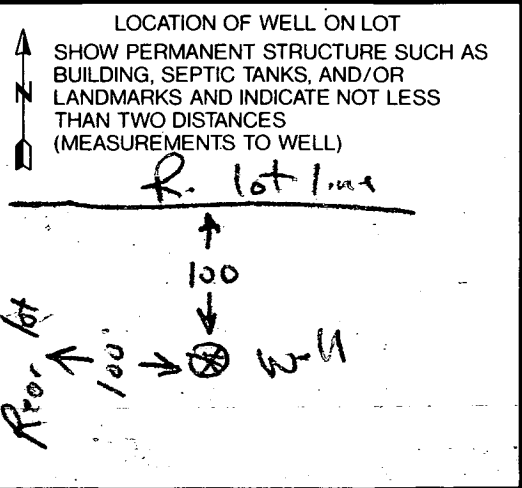
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE



CASSELL TESTING, INC.
 ENVIRONMENTAL SAMPLING AND TESTING
 10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030
 (410) 252-7742

REPORT DATE: May 28, 1994

County Howard

Lab Number 94-2418

Sample iced Yes
 Residual Cl₂ <0.1 mg/L

cc: County Health Dept. Yes

CERTIFICATE OF ANALYSIS

Maryland State Certified Water Quality
 Laboratory No. 115

REQUESTER: Mr. Preston Pairo
 8223 Chandler Court
 Ellicott City, Maryland 21043

Property Sampled: U&O: 15058 Scottswood Court

Station Sampled: Kitchen tap

Date/Time Sampled: May 27, 1994 11:05 am

Owner, Telephone No.: Pairo

Subdivision Name: Country Springs

Building Permit No.: 50823

Well Number: HO 92-0409

Tax Map #:

Parcel #:

Sampler: E. Hause #94-312

Lot Number: 21 ✓

Observation: Satisfactory

6/6/94 + 6/7/94
with [unclear] in well
property file [unclear] in [unclear]

RESULTS OF ANALYSIS:

Parameter	Result	Method	MCL	
Nitrate	13.0 mg/L as N	ISE	10.0 mg/L as N	HIGH
Turbidity	<1.0 NTU	EPA 180.1	10.0 NTU	Pass
pH	6.2 Units	EPA 150.1	6.5-8.5 Units	
Sand	Negative		Negative	
Total Coliform	Absent	ONPG-MMO MUG	Absent	Pass

Based upon coliform bacteriological standards, the above results indicate that at the time the sample was collected, this water sample was SAFE for drinking purposes.

6/7/94 discussed with Mr. C. [unclear] seen in Mr. C.'s office [unclear]

Sharon K. Cassell

Sharon K. Cassell

* MCL = Maximum Contamination

CASSELL TESTING, INC.
ENVIRONMENTAL SAMPLING AND TESTING
10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030
(410) 252-7742

REPORT DATE: May 17, 1995

County Howard

Lab Number 95-1715

Sample iced Yes
Residual Cl₂ <0.1 mg/L

cc: County Health Dept. Yes

CERTIFICATE OF ANALYSIS

Maryland State Certified Water Quality
Laboratory No. 115

REQUESTER: Mr. Preston Pairo
15058 Scottswood Court
Woodbine, Maryland 21797

Property Sampled: U&O: 15058 Scottswood Court, retest

Station Sampled: Hallway tap

Tax Map #:

Date/Time Sampled: May 16, 1995 12:30 pm

Parcel #:

Owner, Telephone No.: Pairo

Sampler: E. Hause #94-312

Subdivision Name: Country Springs

Lot Number: 21

Building Permit No.: 50823

Well Number: HO 92-0409

Observation: Satisfactory
1-piece cap

RESULTS OF ANALYSIS:

Parameter	Result	Method	MCL	
Nitrate	12.2 mg/L as N	ISE	10.0 mg/L as N	HIGH
Turbidity	<1.0 NTU	EPA 180.1	10.0 NTU	Pass
pH	6.4 Units	EPA 150.1	6.5-8.5 Units	
Sand	Negative		Negative	
Total Coliform	Absent	ONPG-MMO MUG	Absent	Pass

Based upon coliform bacteriological standards, the above results indicate that at the time the sample was collected, this water sample was SAFE for drinking purposes.

Heather R. Beam

Heather R. Beam



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

June 6, 1995

Mr. Preston Pairo
15058 Scottswood Court
Woodbine, Maryland 21797

RE: Country Springs, Lot #21
15058 Scottswood Court
Well Permit #HO-92-0409

Dear Mr. Pairo:

This to advise you that the septic system for the above referenced property was installed, inspected and approved on April 5, 1994.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

The nitrate sample result was documented to be 13.0 ppm May 27, 1994, and 12.2 ppm May 16, 1995. A nitrate device has not been installed to treat the excessive nitrate contamination. COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a temporary deviation to that section of the regulation on condition that the nitrate removal system is installed within a period of 30 days from receipt of this letter. The nitrate removal system must effectively maintain the nitrate-nitrogen contaminant level below 10 parts per million.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a yearly nitrate analysis be performed.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of the above condition.

Mr. Preston Pairo

Country Springs, Lot #21

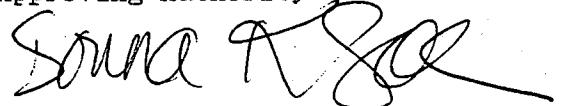
INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit HO-92-0409. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological and nitrate tests which are to be taken by the county health department within six months of the date of this letter. Additionally, this certificate may become final upon acceptance by the owner of the requirement to install a nitrate removal device and conditions pertaining to the device. The well owner accepts his responsibilities under COMAR 26.04.04.10.

Date of Well Completion: July 28, 1993
Dates of Water Samples: May 27, 1994
May 16, 1995

Approving Authority



Donna K. Soe, Sanitarian
Water and Sewerage Program

DKS

cc: Building Inspector's office
file