

memorandum

To:	Wellfleet Board of Health memb	PERSITE SET ALS A LINCOLD RECORDS AND A RECORD AND A RECORD A RECORD A RECORD A RECORD AND A REC	
From:	Michelle Borghi		
Re:	Request for variance	CC:	
Date:	January 22, 2023		

Collins Property 49 & 57 Tecumseh Road Map 28 Parcels 166 & 165

Regulation: 504 Private water wells are to be located on the property served.

A variance is requested to locate a well on 49 Tecumseh Road to service the home on 57 Tecumseh Road. Both lots are owned by the same owner. The existing well servicing 57 Tecumseh Road did not have suitable water quality, in particular a tannins issue. Water results and well information attached.

Facsimile: 508-240-1003

www.desmondwelldrilling.com

ENVIROTECH LABORATORIES, INC. MA CERT. NO.: M-MA 063

8 Jan Sebastian Drive Unit 12 Sandwich, MA 02563 (508)888-6460 1-800-339-6460 FAX (508)888-6446

Client Name:

Desmond Well Drilling

Desmond Well Drilling

Location:

Address:

PO Box 2783

49 Tecumseh Rd

Orleans, MA

Wellfleet, MA

02653

Lab Number:

Collected By:

DW-230172 01/13/23

Sample Type:

New Well

Date Received: Well Specs:

to the latest to the second to	,	C 404 2007 175 5			e	
Location Source	Date Collected	Time Collected		Car	uments -	
Locusion Source	Politi Samuran da kana ang ang kanana ang ka			V. 100 Philips (4.5)		
A	01/12/23	13:45		\	Nell	
4 - 1 - B - 1 - 1 - 1		(-1	55 - A-1- 5 - 1999		The	for the second second second
Analysis Requested	Units	Recommended Limits	Analysis Resul	Method	Date Analyzea	Analyzed By
		A			12 27	
<u>Tannins</u>	mg/L	N/A	0.32	SM5550B	01/19/2023	IP

Comments:

All samples were analyzed within the established guidelines of US EPA approved methods with all requirements met, unless otherwise noted at the end of a given sample's analytical results.

We certify that the following results are true and accurate to the best of our knowledge.

"melal Scan

1/20/2023 Date

Ronald J. Saari Laboratory Director

ENVIROTECH LABORATORIES, INC. MA CERT. NO.: M-MA 063

8 Jan Sebastian Drive Unit 12 Sandwich, MA 02563 (508)888-6460 1-800-339-6460 FAX (508)888-6446

Client Name:

Desmond Well Drilling

Location:

Address:

PO Box 2783

49 Tecumseh Rd

Orleans, MA

Wellfleet, MA

02653

Lab Number:

Collected By:

DW-225285

Desmond Well Drilling

Date Received:

12/20/22

Sample Type:

Existing Well

Well Specs:

Static 11, Depth

Location Source	Date Collected	Time Collected		Com	ments :	
Analysis Requested	Units	Recommended Limits	Analysis Resul	Method	Date Analyzed	Analyzed By
Hq	pH units	6.5-8.5	5.74	SM 4500-H-B	12/20/2022	KB
Specific Conductance	umhos/cm	500	464	EPA 120.1	12/20/2022	KB
Nitrite-N	mg/L	1.00	<0.006	EPA 300.0	12/22/2022	KF
Nitrate-N	mg/L	10.0	0.16	EPA 300.0	12/22/2022	KF
Sodium	mg/L	20.0	80	EPA 200.7	12/27/2022	KB
Total Iron	mg/L	0.3	0.12	EPA 200.7	12/27/2022	KB
Manganese	mg/L	0.05	0.115	EPA 200.7	12/27/2022	КВ
Total Coliform (Presence/Absence)	Present/Absent	Absent	Absent	SM9223B	12/20/2022	IP @ 17:15

Comments:

Low pH indicates high corrosive characteristics.

Sodium level is not a health hazard, but if on a low Sodium diet, consult a physician before drinking

Over a lifetime, the EPA recommends that people drink water with manganese levels less than 0.3 mg/L and over the short term, EPA recommends that people limit their consumption of water with levels over 1.0 mg/L

Low pH indicates high corrosive characteristics.

All samples were analyzed within the established guidelines of US EPA approved methods with all requirements met,

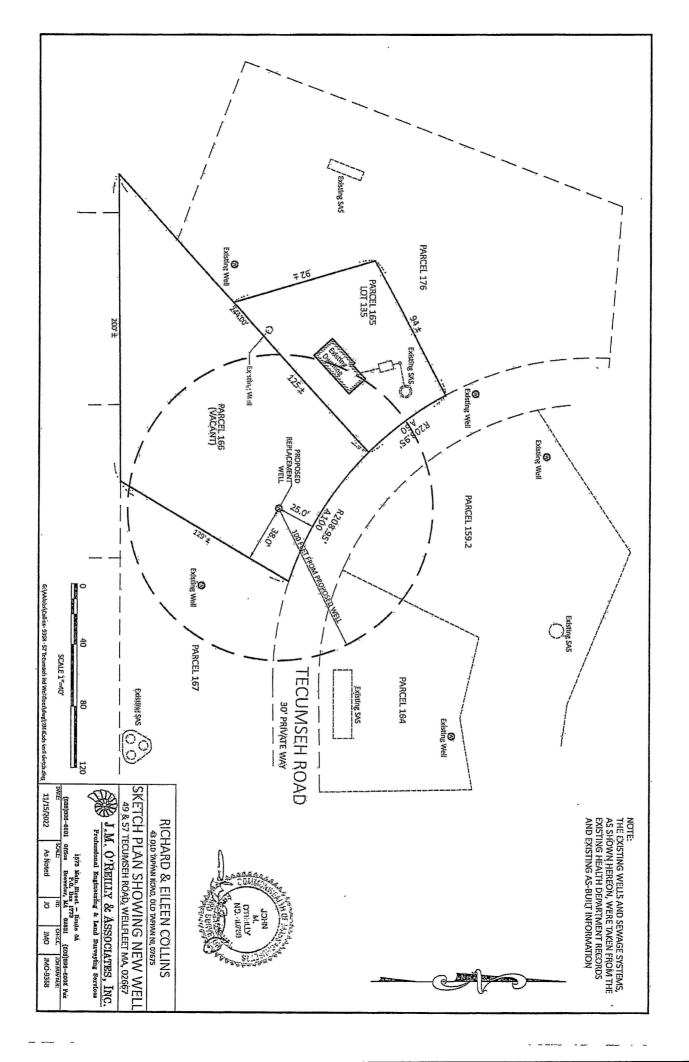
unless otherwise noted at the end of a given sample's analytical results.

We certify that the following results are true and accurate to the best of our knowledge.

Water meets EPA standards and is suitable for drinking for parameters tested.

Ronald J. Saari Laboratory Director

1/16/2023





Town of Wellfleet THE COMMONWEALTH OF MASSACHUSETTS

Permit

...3265.....

Board of Health

Well Permit

This is to Certify that								
Desmon	Desmond Well Drilling, Inc. (Collins)							
57 Tecumseh Rd (28/165)								
Is Hereby Granted A Permit For	Consumption Well							
	This permit is granted in conformity with the Statues and ordinances relating therto, and permit Expires 11/23/23 unless sooner suspended or revoked.							
Approved by the Health Departme	ent 11/23/22							
	Hillary H. Greenberg							
	Hillary Greenberg - Lemos							
	Health & Conservation Agent							



Massachusetts Department of Environmental Protection

Bureau of Resource Protection Well Completion Reports

Well Driller

Please specify work performed:		Address at well location:			
New Well		Street Number:	Street Name:		
	49	57	TECUMSEH RD		
Please specify well type:	• •	Building Lot#:	Assessor's Map #:		
Domestic			28		
		Assessor's Lot#:	ZIP Code:		
Number Of Wells:		165	02667		
		City/Town:			
Well Location		WELLFLEET			
In public right-of-way:		GPS			
C Yes C No		North:	West:		
		41.91599	07.02425		
Subdivision/Property/Description:					
		Mailing Address:			
		click here if same	if same as well location address		
Property Owner:		Street Number:	Street Name:		
RICHARD COLLINS		57	TECUMSEH RD		
		City/Town:	State:		
Engineering Firm:		WELLFLEET	MASSACHUSETTS		
		ZIP Code:			
		02667			
		Board of health permit obtained:			
		quired			
		Permit Number:	Date Issued:		
		3265	11/23/2022		



Massachusetts Department of Environmental Protection

Bureau of Resource Protection – Well Driller Program Well Completion Reports(General)

Well Driller - General Well Form

DRILLING N															
Overburde	n	В	edrock												
Auger		<u></u>	Choose	e Bedrock											
WELL LOG	OVER	BURDE	EN LITH	OLOGY			T		1					,	
From(ft)	To(ft)	d	Code		Color		Commen	t	Drop in o	drill	Extra fa drill rate		slow	Loss of flu	or addition id
0	15		Fine To	Coarse Si	Brown	S			C C	- 1	C Fas	t C Slo	ow	C	C s Addition
15	20		Medium	Sand 🔀	Brown	S			C C YES N	- 1	CFas	t Csid	ow	C	C s Addition
20	25		Fine To	Coarse Si	Brown	E			C C YES N	1	CFas	t C Sid	ow	C Los:	C s Addition
WELL LOG	BEDR	OCK L	ITHOLO	OGY											
From(ft)	To(ft)		Code		Comment		Drop in drill stem	Extra fa			s or ition of	1	isible l taining		Extra Large Chips
			Choose	Code 🔀			C C YES NO	C Fast	C Slow	Lo	C oss Additio		Yes		Tyes
ADDITIONA	AL WEL	L INFO	ORMAT	ION											
Developed				C No	Disinfected	i		⊙ Yes ⊜!	No						
Total Well I	Depth	2	25		Depth to Be	edro	ck								
Surface Se	al Type	e [None		Fracture E	nhan	cement	CYes 💽	No						
CASING			V is €	Casing above	ground?			From:	1 T	o:	0				
From	To)	· I	Туре			Thi	ckness				Diam	eter	Dr	iveshoe
0	22	2		Polyvinyl Ch	loride		So	hedule 40		¥1		4			Yes
SCREEN I]No Sc	reen													
From		То		1	ype					;	Slot Size		C	Diame	ter
22		25] [Stainless Steel Well I	Point					0.012		[4	1	
WATER-BE	ARING	ZONE	s n	RY WELL											
From		То		Yield (gp	m)										
11		25		12											
PERMANE	NT PUN	VIP (IF A	AVAILA	BLE)											
Pump Des	criptio	n		- Choose Descriptio	· 1 F	Hors	epower				Choos Horsepo				
Pump Intal	ke Dep	th (ft)			1	Nomi	inal Pump	Capacity ((gpm)						



Massachusetts Department of Environmental Protection

Bureau of Resource Protection – Well Driller Program Well Completion Reports(General)

ANNULAR SEAL / FILTER PACK

From	То	Material 1	Weight	Material 2	Weight		Method Of Placement
		Choose Material		Choose Material			- Choose One -

WELL TEST DATA

Date	Method	Yield (gpm)		Pumping Level (ft BGS)	Time To Recover (HH:MM)	Recovery (ft BGS)
12/20/2022	Constant Rate Pump	12	1:30	11.5	0:01	11

WATER LEVEL

Date Measured	Static Depth BGS (ft)	Flowing Rate (gpm)			
12/20/2022	11	12			

COMMENTS

WELL DRILLERS STATEMENT

This well was drilled or altered under my direct supervision, according to the applicable rules and regulations, and this report is complete and accurate to the best of my knowledge.

WILLIAM			Monitoring [M]	Supervising Driller	DESMOND,
DrillerURQUHART	Registration #	299	Monitoring [M]	Signature	THOMAS, E
DESMOND WELL				Date Job Complete	
Firm DRILLING, INC.	Rig Permit #	0551		Date 300 Complete	12/20/2022

NOTE: Well Completion Reports must be filed by the registered well driller within 30 days of well completion.