

373-13

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Framingham Planning Board  
Town Hall  
Framingham, MA 01721

By Hand Delivery

June 3, 2013

Re: Board of Health Letter of May 30, 2013 and your request for an extension for BOH issues.

Dear Members of the Planning Board:

We are in receipt of the BOH letter, above referenced, forwarded by the Planning Department and the Planning Departments request to grant an extension until October to deal with wells and testing. We do not wish an extension on this project.

My client does not feel as if there is sufficient justification for the BOH position. The process for the lot development is separate and distinct from the Subdivision. The Subdivision Control Law deals with municipal infrastructure and not with individual lots and the wells proposed thereon.

Wells are drilled in preparation for a building permit according to the Framingham Board of Health Well Regulations. The idea of requiring 8 wells be drilled and impacts be evaluated is violative of the law, regulations, and procedures currently applied by the BOH, not only for a Subdivision but for the actual lot development process and would appear to be totally arbitrary, and discriminatory.

Wells that have been drilled in the area most recently have been shown to be sufficient (two additional wells have just been completed on Nixon Road lots across the street which are satisfactory...those results are attached).

In direct response to the Framingham Health Department/Board of Health Response to Connorstone letter of May 13, 2012, May 13, 2013 we respond as follows:

**Potable Water Wells**

The BOH is requesting “[T]he applicant should install wells of sufficient capacity and propose a test plan for review by the FBH to determine whether neighboring wells are impacted.”

Connorstone responds- This is not provided for in the FBH Well Regulations.

**Septic Systems**

Connorstone responds- So noted.

**Existing Structures**

Connorstone responds- So noted.

## MEPA

Connorstone responds- So noted.

### 1. Maximum Yield Estimate

Connorstone responds- We are confused as to what regulations apply to wells where there seems to be a different criteria for wells being drilled at other locations on Nixon Road. Title 5 flows have been the only flow criteria for those wells. The documents provided in applications for a well installation are (1) a septic design plan showing 110 gallons per bedroom (2) the Septic Permit application noting the same, and (3) an Application for Permit to Construct a Well. The required gpm delivery must be..... *"The water system shall be able to deliver 5 gallons per minute for four hours continuous running."* Section 2. E. 2 FBOH Well Regulations. Accordingly, and in consideration of the wells nearby it is abundantly clear the FBOH is implicating a different criteria for this project.

### 2. Well Flow Demand Breakdown (Irrigation)

Connorstone responds- There will be no separate irrigation well. Water for irrigation of lawns would come from the domestic well and account for 1" per week over the anticipated ½ acres of landscaped lot or approximately 1.2 gpm. This is on the worst week scenario where there is no rainfall. Sensors in the irrigation system detect an proportion irrigation.

### 3. Fire Water Supply

Connorstone responds- When and if a well is installed for a cistern, if a cistern is required, that well will be tested in accordance with the FBOH Well Regulations.

### 4. Perchlorate sampling

Connorstone responds- So noted.

### 5. Cistern

Connorstone Responds- There will be no cross connection; the well will only serve the cistern. A backflow prevented can be installed.

## Text of Subdivision Application

### 1. Regulatory Impacts/Triggers

Connorstone responds- If there is a second phase implicating MEPA review, such an application will be filed in accordance with the law(s) and regulations.

### 2. Water Balance

Connorstone responds- There would be no measurable evaporation from a holding pond in the stormwater systems as they are designed to infiltrate within a period of time of less than 72 hours.

### 3. Potential Well Yield

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The Developer responds- The offer of a bond was roundly rejected at the meeting where this was discussed and that any bond would be needed to bring municipal water to the site.

4. Impact on Neighboring Wells

Connorstone responds- The USGS model clearly does not apply to rock formation wells. In the Preface section, at page iii, the second line, second sentence states "*The program simulates axial-symmetric flow...*" emphasis added. Axial-symmetric flow involves vectors of flow on an axis typically radial to the well, in a symmetric pattern, this is not found in rock fissures and is thus not an applicable model.

5. Mosquito Vector Control

Connorstone responds- It is likely the O&M would be the responsibility of the Homeowners Association if the road is private, otherwise the drainage infrastructure would be a public works.

6. Water Balance

Connorstone responds- No water balance is required by the regulations.

7. Groundwater Modeling

Connorstone responds- So noted.

8. Bedrock Discrepancy

Connorstone responds- The rock "fragments" were misclassified by the driller. Granite and Gneiss are so closely similar as fragments (from drilling) only a trained geologist could tell the difference visually.

9. Stormwater Pollution Prevention Plan

Connorstone responds- The SPPP refers to the construction drawings.

10. Regulatory Concordance

Connorstone responds- So noted.

11. Soil Management Details

Connorstone responds- The Erosion Control plan submitted specifies cover and silt control for stockpiles.

12. House Demolition

Connorstone responds- So noted.

Very truly,

  
George Connors

Encl. two well reports

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## WELL DRILLER

**Please specify work performed:**

New Well

**Please specify well type:**

Domestic

**Number Of Wells:**

**Well Location**

**In public right-of-way:**

Yes  No

**Subdivision/Property/Description:**

**Property Owner:**

METROWEST HOLDING L

**Engineering Firm:**

GEORGE CONNORS

**Address at well location:**

Street Number: 52B Street Name: NIXON  
Building Lot#: Assessor's Map #:  
Assessor's Lot#: ZIP Code: 01701

**City/Town:**

FRAMINGHAM

**GPS**

North: 42.20584 West: 71.28721

**Mailing Address:**

click here if same as well location address  
Street Number: 23 Street Name: MILL  
City/Town: NATICK State: MASSACHUSETTS  
ZIP Code: 01760

**Board of health permit obtained:**

Yes  Not Required

Permit Number: 2012 06W Date Issued: 5/9/2013



## Well Driller - General Well Form

### DRILLING METHOD

Overburden  Bedrock

### WELL LOG OVERBURDEN LITHOLOGY

From (ft)	To(ft)	Code	Color	Comment	Drop in drill stem	Extra fast or slow drill rate	Loss or addition of fluid
<input type="text" value="0"/>	<input type="text" value="20"/>	<input type="text" value="Gravel"/>	<input type="text" value="Brown"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition

### WELL LOG BEDROCK LITHOLOGY

From (ft)	To(ft)	Code	Comment	Drop in drill stem	Extra fast or slow drill rate	Loss or addition of fluid	Visible Rust Staining	Extra Large Chips
<input type="text" value="20"/>	<input type="text" value="100"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="100"/>	<input type="text" value="200"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="200"/>	<input type="text" value="300"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="300"/>	<input type="text" value="400"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="400"/>	<input type="text" value="500"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes

### ADDITIONAL WELL INFORMATION

Developed  Yes  No Disinfected  Yes  No

Total Well Depth  Depth to Bedrock

Surface Seal Type  Fracture Enhancement  Yes  No

CASING  Is Casing above ground? From:  To:

From	To	Type	Thickness	Diameter	Driveshoe
<input type="text" value="0"/>	<input type="text" value="30"/>	<input type="text" value="Steel"/>	<input type="text" value="17#"/>	<input type="text" value="6"/>	<input checked="" type="checkbox"/> Yes

SCREEN  No Screen

From	To	Type	Slot Size	Diameter
<input type="text"/>	<input type="text"/>	<input type="text" value="--- Choose Screen Type ---"/>	<input type="text"/>	<input type="text"/>

WATER-BEARING ZONES  DRY WELL

From	To	Yield (gpm)
<input type="text" value="420"/>	<input type="text" value="422"/>	<input type="text" value="6"/>

### PERMANENT PUMP (IF AVAILABLE)

Pump Description  Horsepower



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

Pump Intake Depth (ft)

Nominal Pump Capacity (gpm)

ANNULAR SEAL / FILTER PACK

From	To	Material 1	Weight	Material 2	Weight	Water (gal)	Batches	Method Of Placement
<input type="text"/>	<input type="text"/>	Choose Material	<input type="text"/>	Choose Material	<input type="text"/>	<input type="text"/>	<input type="text"/>	-- Choose One --

WELL TEST DATA

Date	Method	Yield (gpm)	Time Pumped (HH:MM)	Pumping Level (ft BGS)	Time To Recover (HH:MM)	Recovery (ft BGS)
5/28/2013	Constant Rate Pump	7.3	05:00	300	24:00	8

WATER LEVEL

Date Measured	Static Depth BGS (ft)	Flowing Rate (gpm)
5/29/2013	8	

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 a knowledge.

Driller  Registration #  Monitoring  Supervising Drill   
Firm  Rig Permit #  Date Job Compl

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

APPLICATION FEE \$100.00

DATE 3-4-13 BOARD OF HEALTH RECEIVED  
FRAMINGHAM, MASSACHUSETTS RECEIVED

APPLICATION FOR PERMIT TO CONSTRUCT A WELL MAY 09 2013

I hereby petition the Board of Health of Framingham, Mass. for a permit to construct a well. BY: \_\_\_\_\_

Address of Property: St. # 52B Nixon Road, Framingham, MA 01701

Name of Applicant Derek Dube, Construction Supervisor Tel. No. 508-889-4020

Address of Owner 23 Mill Street, Natick, MA 01760

Name of Well Driller LaFramboise Water Service, Inc. Tel. No. 1-800-644-2327

Owner if different MetroWest Holdings, LLC. PAUL R. CROFT, Manager

A plot plan shall be submitted with this application as required by the Framingham Board of Health in the "Minimum Sanitation Standard for Private and Semi-Public Water Supply".

The undersigned acknowledges that he must, before commencing construction or use of the system which is the subject matter of this application, secure any and all other permits which may be required by the Laws of the Town of Framingham and the Commonwealth of Massachusetts, and agrees to abide by all rules and regulations of the Town of Framingham and the Commonwealth of Massachusetts. The undersigned also understands that under Regulation 2.2 NO CONSTRUCTION OF THE FACILITIES WHICH THE WELL IS TO SERVE MAY BE PERFORMED UNTIL THE WELL IS INSTALLED, COMPLETED, AND INSPECTED, AND HAS BEEN DEMONSTRATED TO SUPPLY WATER OF THE QUALITY AND QUANTITY SPECIFIED IN THE "MINIMUM SANITATION STANDARD FOR PRIVATE AND SEMI PUBLIC WATER SUPPLY."

Date: 3-4-13 Signature of Applicant Derek A Dube

\*\*\*\*\*

PERMIT NO. 2012-06W

BOARD OF HEALTH  
FRAMINGHAM, MASSACHUSETTS  
PERMIT TO CONSTRUCT A WELL

This is to certify that Derek Dube

is hereby granted permission to install a well on the premises at 52B Nixon Road

in accordance with the above application, and in strict conformance with the requirements of the rules and regulations of the Board of Health and the Commonwealth of Massachusetts relating thereto.

Approved Recommended: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Granted May 9 ~~2013~~ XXXX 2013

\_\_\_\_\_  
Board of Health  
By: Public Health Administrator

\*\*\*\*\*

WELL DATA

Water Analysis: Received \_\_\_\_\_

Approved \_\_\_\_\_

Flow Data: Received \_\_\_\_\_

Approved \_\_\_\_\_



## WELL DRILLER

**Please specify work performed:**

New Well

**Please specify well type:**

Domestic

**Number Of Wells:**

**Well Location**

**In public right-of-way:**

Yes  No

**Subdivision/Property/Description:**

**Property Owner:**

METROWEST HOLDINGS

**Engineering Firm:**

**Address at well location:**

Street Number: 52C Street Name: NIXON  
Building Lot#: 52C Assessor's Map #:   
Assessor's Lot#: ZIP Code: 01701

**City/Town:**  
FRAMINGHAM

**GPS**  
North: 42.20572 West: 71.28687

**Mailing Address:**  
 click here if same as well location address

Street Number: 23 Street Name: MILL  
City/Town: NATICK State: MASSACHUSETTS  
ZIP Code: 01760

**Board of health permit obtained:**  
 Yes  Not Required  
Permit Number: 201207W Date Issued: 5/15/2013



## Well Driller - General Well Form

### DRILLING METHOD

Overburden  Bedrock

### WELL LOG OVERBURDEN LITHOLOGY

From (ft)	To(ft)	Code	Color	Comment	Drop in drill stem	Extra fast or slow drill rate	Loss or addition of fluid
<input type="text" value="0"/>	<input type="text" value="20"/>	<input type="text" value="Cobbles"/>	<input type="text" value="Brown"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition
<input type="text" value="20"/>	<input type="text" value="23"/>	<input type="text" value="Gravel"/>	<input type="text" value="Brown"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition

### WELL LOG BEDROCK LITHOLOGY

From (ft)	To(ft)	Code	Comment	Drop in drill stem	Extra fast or slow drill rate	Loss or addition of fluid	Visible Rust Staining	Extra Large Chips
<input type="text" value="23"/>	<input type="text" value="100"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="100"/>	<input type="text" value="200"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="200"/>	<input type="text" value="300"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="300"/>	<input type="text" value="400"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="text" value="400"/>	<input type="text" value="500"/>	<input type="text" value="Granite"/>	<input type="text"/>	<input checked="" type="checkbox"/> Yes	<input type="radio"/> Fast <input type="radio"/> Slow	<input type="radio"/> Loss <input type="radio"/> Addition	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes

### ADDITIONAL WELL INFORMATION

Developed  Yes  No      Disinfected  Yes  No

Total Well Depth       Depth to Bedrock

Surface Seal Type       Fracture Enhancement  Yes  No

CASING  Is Casing above ground?      From:       To:

From	To	Type	Thickness	Diameter	Driveshoe
<input type="text" value="0"/>	<input type="text" value="33"/>	<input type="text" value="Steel"/>	<input type="text" value="17#"/>	<input type="text" value="6"/>	<input checked="" type="checkbox"/> Yes

SCREEN  No Screen

From	To	Type	Slot Size	Diameter
<input type="text"/>	<input type="text"/>	<input type="text" value="--- Choose Screen Type ---"/>	<input type="text"/>	<input type="text"/>

WATER-BEARING ZONES  DRY WELL

From	To	Yield (gpm)
<input type="text" value="360"/>	<input type="text" value="365"/>	<input type="text" value="1"/>

PERMANENT PUMP (IF AVAILABLE)



**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection – Well Driller Program  
 Well Completion Reports(General)

Pump Description  Horsepower   
 Pump Intake Depth (ft)  Nominal Pump Capacity (gpm)

**ANNULAR SEAL / FILTER PACK**

From	To	Material 1	Weight	Material 2	Weight	Water (gal)	Batches	Method Of Placement
<input type="text"/>	<input type="text"/>	<input type="text" value="Choose Material"/>	<input type="text"/>	<input type="text" value="Choose Material"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="-- Choose One --"/>

**WELL TEST DATA**

Date	Method	Yield (gpm)	Time Pumped (HH:MM)	Pumping Level (ft BGS)	Time To Recover (HH:MM)	Recovery (ft BGS)
<input type="text" value="5/31/2013"/>	<input type="text" value="Constant Rate Pump"/>	<input type="text" value="2.3"/>	<input type="text" value="04:00"/>	<input type="text" value="9"/>	<input type="text" value="24:00"/>	<input type="text" value="9"/>

**WATER LEVEL**

Date Measured	Static Depth BGS (ft)	Flowing Rate (gpm)
<input type="text" value="6/1/2013"/>	<input type="text" value="9"/>	<input type="text" value="0"/>

**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 a knowledge.

Driller  Registration #  Monitoring  Supervising Drill   
 Firm  Rig Permit #  Date Job Compl

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

APPLICATION FEE \$100.00

DATE 5-9-13 BOARD OF HEALTH RECEIVED  
FRAMINGHAM, MASSACHUSETTS RECEIVED

APPLICATION FOR PERMIT TO CONSTRUCT A WELL

I hereby petition the Board of Health of Framingham, Mass. for a permit to construct a well. BY: \_\_\_\_\_  
Address of Property: St. # 52C Nixon Road Framingham, MA 01701  
Name of Applicant Derek Dube, Construction Supervisor Tel. No. 508-889-4030  
Address of Owner 23 Mill Street, Natick, MA 01760  
Name of Well Driller LaFramboise Water Service, Inc. Tel. No. 1-800-624-7327  
Owner if different MetroWest Holdings, LLC Paul A. Croft, Manager

A plot plan shall be submitted with this application as required by the Framingham Board of Health in the "Minimum Sanitation Standard for Private and Semi-Public Water Supply".

The undersigned acknowledges that he must, before commencing construction or use of the system which is the subject matter of this application, secure any and all other permits which may be required by the Laws of the Town of Framingham and the Commonwealth of Massachusetts, and agrees to abide by all rules and regulations of the Town of Framingham and the Commonwealth of Massachusetts. The undersigned also understands that under Regulation 2.2 NO CONSTRUCTION OF THE FACILITIES WHICH THE WELL IS TO SERVE MAY BE PERFORMED UNTIL THE WELL IS INSTALLED, COMPLETED, AND INSPECTED, AND HAS BEEN DEMONSTRATED TO SUPPLY WATER OF THE QUALITY AND QUANTITY SPECIFIED IN THE "MINIMUM SANITATION STANDARD FOR PRIVATE AND SEMI PUBLIC WATER SUPPLY."

Date: 5-9-13 Signature of Applicant Derek Dube

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PERMIT NO. 2012-07w

BOARD OF HEALTH  
FRAMINGHAM, MASSACHUSETTS  
PERMIT TO CONSTRUCT A WELL

This is to certify that Derek Dube

is hereby granted permission to install a well on the premises at 52C Nixon Rd  
Framingham, MA 01701

in accordance with the above application, and in strict conformance with the requirements of the rules and regulations of the Board of Health and the Commonwealth of Massachusetts relating thereto.

Approved Recommended: tw Date: 5/15/13

Permit Granted May 13 ~~200x~~ 2013

\_\_\_\_\_  
Board of Health  
By: Public Health Administrator

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WELL DATA

Water Analysis: Received \_\_\_\_\_

Approved \_\_\_\_\_

Flow Data: Received \_\_\_\_\_

Approved \_\_\_\_\_