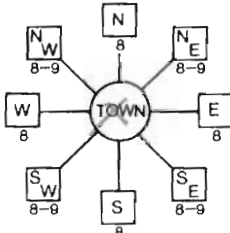
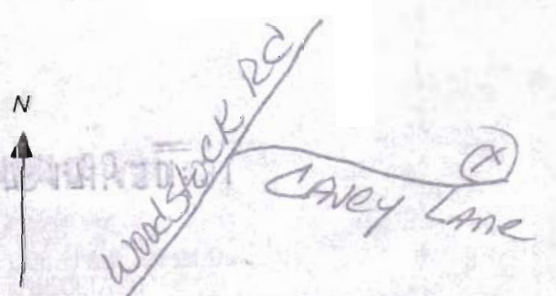


B 1 1 2 3 6 6453	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 524360 please type	STATE PERMIT NUMBER HO-95-0335 70 fill in this form completely 79
Date Received (APA) 3/17/06 8 MM DD YY 13 Elm Street Development 15 Last Name Owner First Name 34 5094 Dorsey Hall Drive, Suite 104 36 Street or RFD 55 Ellicott City MD 21042 57 Town 70 State 72 Zip 76		B 3 Howard 8 COUNTY 21 Saddlebrook Farm 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 Woodstock 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 73 0 M 76 77 78	
DRILLER INFORMATION Michael D. Isom M S D 162 Driller's Name 76 License No. 81 G. Edgar Harr/Sons' Corp. Firm Name 12047 Falls Road, Cockeysville 21030 Address Signature Date 2/20/06		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  Cavey Lane 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 11 BLK: 13 PARCEL 32	
B 2 1 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 750 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD 13 A516525 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 4/10/06 John A. King 4/11/07 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 50 544 000 55 EAST GRID 57 837 000 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 8307 N 5404 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL 24 28 FEET 250 APPROXIMATE DIAMETER OF WELL 24 28 INCH 2 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) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED 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)			
APPROX. PERMIT NUMBER HO2005G009(01) PERMIT No. HO-95-0335 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS <small>APPROPRIATE AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.</small>			

HARR WELL DRILLING

12047 FALLS ROAD
COCKEYSVILLE, MD 21030
410-252-4588

HOWARD COUNTY YIELD TEST REPORT

Date Test Performed: 6-06-06	Permit Number: HO - 95-0335
Address: Cavey Lane	Subdivision: Saddlebrook Farm L#5
Owner Name: Elm Street Devel	Election District:
Well Depth: 300 Ft	Static Water Level: 34 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5gallon bucket	Calculated Flow-Gallons Per Minute
0815	34 ft		17 sec	17.64
0830	112		20	15.00
0845	143		20	15.00
0900	173		20	15.00
0915	182		20	15.00
0930	200		23	13.04
0945	210		23	13.04
1000	214		25	12.00
1015	221		27	11.11
1030	225		29	10.34
1045	231		32	9.37
1100	231		32	9.37
1115	231		32	9.37

C1 3611

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received
MM DO YY

DATE WELL COMPLETED

MM DO YY
06 27 2006

Depth of Well

22 300 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO - 95 - 0335

28 29 30 31 32 33 34 35 36 37

OWNER Elm Street Development

STREET OR RFD last name Cavey Lane

SUBDIVISION Saddlebrook Farm

SECTION

LOT 5

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Overburden	0	40	
Gray Rock	40	300	x

water at 62'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 8 NO. OF POUNDS 800

GALLONS OF WATER 48

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below	STEEL		CONCRETE	
	ST	CO	PL	OT

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
PL	6	45

E A C H C A S I N G	OTHER CASING (if used)	
	diameter inch	depth (feet) from to

screen type or open hole (insert appropriate code below)	STEEL		BRASS		OPEN HOLE	
	ST	BR	PL	OT	HO	OT

C 2 DEPTH (nearest ft.)

1 2 HO 45 300

E 1 8 9 11 15 17 21

A 2 23 24 26 30 32 36

H 3 38 39 41 45 47 51

S 3 38 39 41 45 47 51

R 3 38 39 41 45 47 51

E 3 38 39 41 45 47 51

N 3 38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

56 60

from to

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

70 72 74 75 76

TELESCOPE LOG INDICATOR OTHER DATA

CASING

C 3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 9.37

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 34 ft.

WHEN PUMPING 231 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine

C centrifugal R rotary O other (describe below)

J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES or NO) YES NO

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 (nearest foot)

- below

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no
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
WELLI 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 S D 162

DRILLER'S SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. AWD 766

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

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

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: Ta-County Pump Service, Inc. Telephone #: 301-431-0330
Address: 6711 Old Baltimore Rd
Seemsboro, Md 21713

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): William E. Griffith

License #: 20135

*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: Sherry Thelie

Telephone #:

Subdivision: Saddle Creek Farms

Lot #:

Well Tag #: HO-95-0335

Site Address: 10157 Saddle Creek Farm Trail

in Woodstock Md

Submersible Pump Data

Make: Sta-Rite

Model #:

Pump Capacity: 7 GPM

Well Yield: 9.37 GPM

Depth of well encountered at time of pump installation: _____ (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Pitless Adapter

Make: American Bruny

Model #: PT 200

Depth: 20" (36" min)

NSF/WSC approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: YES

Screened, vented well cap: YES

Cap secured to casing: YES

Conduit min 1 1/2" B.G.: YES

Conduit secured to well cap: YES

Piping to house

Type: PVC

PSI: 160 (160 psi min)

Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at well penetration: YES

Approximate length of sleeve: 10 ft

Sleeve caulked and 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 of company representative responsible for installation: William E. Griffith

date: 7-20-2007

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

Date Insp. Requested: 7/24/07 Date Insp. Approved: 10/26/07 Inspector: (SW)

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 seen outside of well cap/casing ✓
Correct well tag attached properly and casing 3" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓

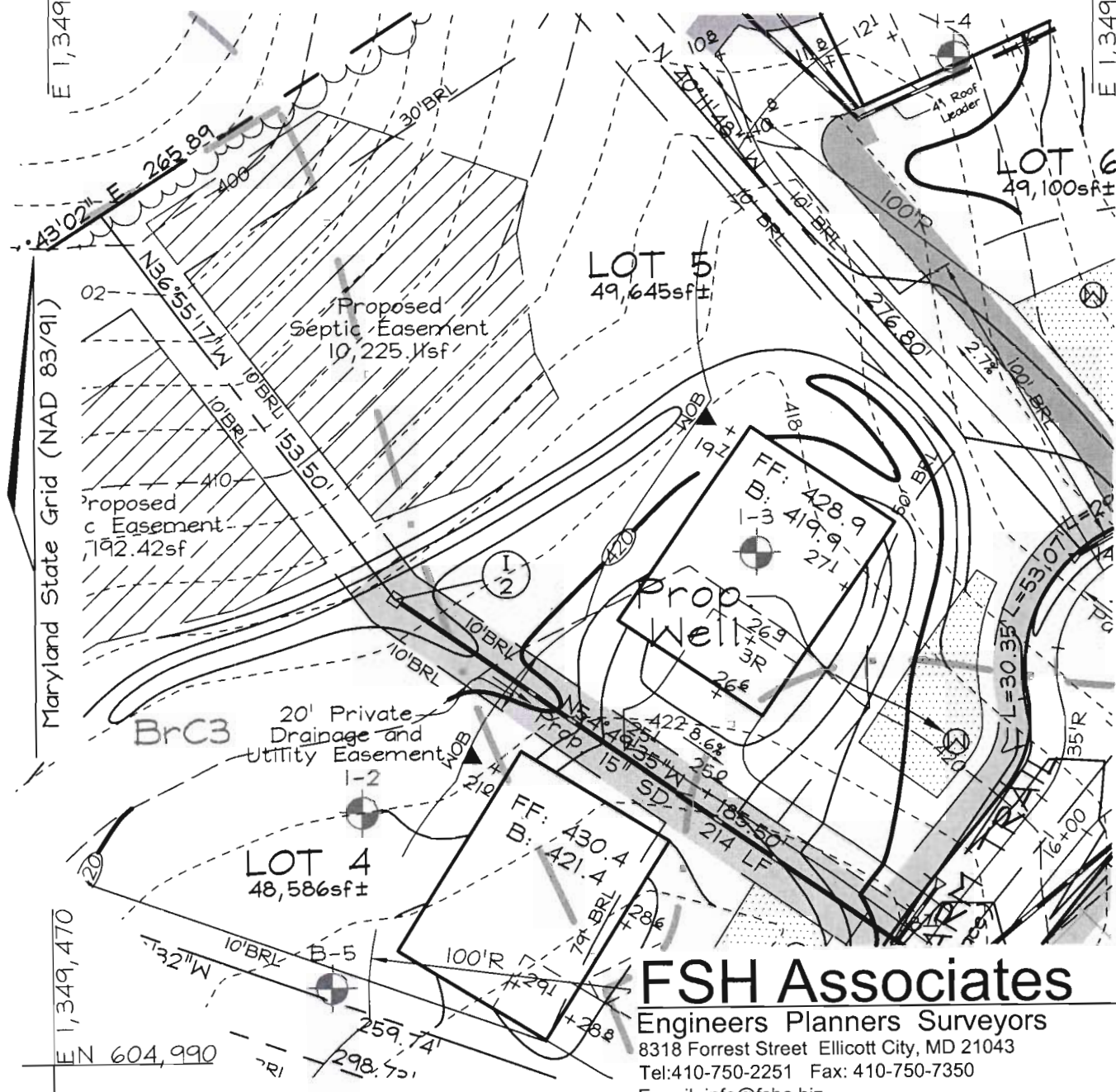
Pitless 30" below grade

* Asked to see final grade and pitless depth.

OK

(Signature)

N 605,350



FSH Associates

Engineers Planners Surveyors

8318 Forrest Street Ellicott City, MD 21043

Tel: 410-750-2251 Fax: 410-750-7350

E-mail: info@fsha.biz

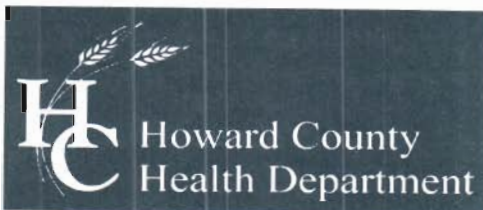
DESIGN BY: PS
DRAWN BY: CD
CHECKED BY: ZYF
SCALE: 1"=50'
DATE: Mar. 13, 2006
W.O. No.: 3165
SHEET No.: 4 OF 11

WELL PERMIT PLAN SADDLEBROOK FARM

LOT 5

TAX MAP 11 GRID 13
3RD ELECTION DISTRICT

PARCELS 19 & 32
HOWARD COUNTY, MARYLAND



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

10/26/2007

Homeowner
10157 Saddlebrook Farm Trail
Woodstock, MD 21163

SENT VIA FACSIMILE 410-

RE: Saddlebrook Farms - Lot 5
10157 ~~15217~~ Frederick Road Saddlebrook Farm Trail
Woodstock, MD 21163
BP # B07000515
Well Permit # HO-95-0335

Dear Sir/Madam:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 7/26/2007. Final approval of the well line connection to the dwelling was approved on 10/26/2007.**

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. The water sample results were found to be in compliance with COMAR water quality standards.

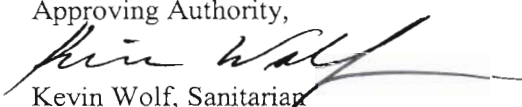
INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-95-0335. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 10/2/2007
Date of Well Completion: 6/27/2006

Approving Authority,


Kevin Wolf, Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File



Howard County
Health Department

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

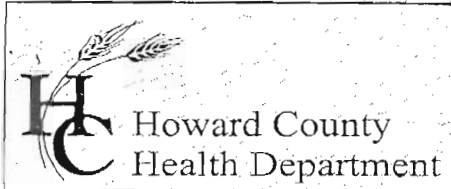
ATTENTION WELL DRILLERS!!!

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

- ☒ The well site has been staked by FSH Inc
on Saddlebrook Farm 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



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046
(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

June 26, 2006

Shalehearth L.C.
6820 Elm Street
Suite 200
McLean, Virginia 22101

RE: Saddlebrook Farm Lot 5
Well Tag: HO-95-0335

To Whom It May Concern:

A sample was collected from a yield test on June 6, 2006 and submitted to GPL Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. In turn, this can provide information regarding naturally occurring radiation (i.e., Radionuclides) that may exist in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of 0.7 ± 1.0 picocuries/liter (pCi/L); while the **Gross Beta** level was 4.6 ± 1.4 pCi/L. Both the **Gross Alpha** and **Gross Beta** were below the maximum contaminant levels (MCL's) of 15 pCi/L and 50 pCi/L respectively. At the time of testing and with respect to these parameters, the future well water supply appears safe for all uses. No additional testing for these parameters will be required to secure the future Use & Occupancy. However, other standard (potability) testing will still be necessary.

A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions.

Sincerely,

Bert Nixon, Deputy Director
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater
Well & Septic File
Zac Fish; FSH Associates, 8318 Forrest St., E.C., MD 21043

Send Report To:

Howard County
Environmental
Health

Shalehearth, L.C.

DHMH - 6820 Elm Street Suite 200

Division: McLean, Virginia 22101

RADIA 703.734.9730

201 W. Preston

John M. I

LABORATORY

CC: FSH Associates

Attn: Zac Fish

8318 Forrest Street

Ellicott City, MD 21043

410.750.2251

SF5BB0335

Sample Bottle No. A: 1 No. B: 3 Field Blank Bottle No. A: 1 Field Blank Bottle No. B: 3

Plant/Site Name: 10290 Cavey Lane County: Howard

Sample Source: Saddlebrook Farm - Lots Location: Well # HO-95-0335
(well no., lab sink, sample tap, etc.)

County: 1 3 Plant No. 1 2 3 4 5 6 7 8 9 0

CHECK (one per box)

Drinking Water
Landfill
Stream
Other

Community
Non-community
Private
Other

Source (raw water)
Distribution (treated)
MCL

Emergency
Routine
Recheck
Special

Collector: Brian Baker

Telephone No: (410) 313-2643

Date Collected: 6/16/2006

Time Collected: 11:30 a.m. p.m.

Nitric Acid Preserved: Yes ☒ No ☐

Iced: Yes ☐ No ☒

Submitters Code: ☐ ☐ Federal Project: ☐ Field Data:

Remarks: Sample Taken During Well Yield Test pH Chlorine

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	606042-001	0.7 ± 1.0	6/12/06
✓	Gross Beta	4100		4.6 ± 1.4	
	Radon-222 Bottle A	4004			
	Radon-222 Bottle B	4004			
	Field Blank A	4004			
	Field Blank B	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: / /

Supervisor:

Analytical Summary Report

Client Name:	Howard County Health Department	Client Sample ID:	SF5BB0335
Receipt Date/Time:	06/07/2006	Lab Sample ID:	606042-001-001-1/1
Prepared Date/Time:	6/9/06	Sample Matrix:	WATER
Analysis Date/Time:	6/9/06 10:31	Analytical Method:	ALPHA/BETA BY METHOD 900.0

Isotope	Result	Uncertainty 2σ	MDA	Q
Gross Alpha	0.6927 pCi/L	± 0.9698 pCi/L	2.2060 pCi/L	U
Gross Beta	4.5867 pCi/L	± 1.3608 pCi/L	2.3716 pCi/L	



FREDERICKTOWNE LABS
ENVIRONMENTAL TESTING

LABS Inc.

3020 Ventrie Court • P.O. BOX 245 • Myeraville, MD 21773 • 800-332-3340 • FAX 301-293-2366
www.fredericktownelabs.com • info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 3948 - 171-1

Field Record

Site visit performed on: Tuesday, **October 02, 2007** 10:00 AM
by: Daniel Barnette State ID No. 8897DB
Affiliation: Tri-County Pump Service
Property Owner: Craftsmark Homes
Property Address: Lot 5
Saddlebrook Farm Trail
Woodstock, MD 21163
Sample Source: Kitchen Sink
Field pH: 6.8
Res. Cl.: 0.0 mg/l

Laboratory Report

Sample Received at laboratory: 10/2/07 11:35 AM

Bacteriological results:

Total Colif. (/100ml)	E.coli. (/100ml)	Date/Time Analysis Started	Method	Analyst
<1	<1	10/2/07 1:29 PM	9223B	JD

Bacteriological analysis of this sample indicates the water is safe for human consumption.
Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen	<0.1 mg/l	10	10/3/07	300.0	PH
Sand	<2 mg/l	5	10/3/07	0.065mm Filter	JD
Turbidity	1.1 NTU	10	10/2/07	180.1	PW



OK for use

OK for use

Verified by: M. A. Miller / gmp 10/9/07
Date