

C1 6503

(MDE USE ONLY)

# STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY  
PLEASE TYPE

45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER (13) A515042

1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY  
DATE RECEIVED  
MM DD YY  
8 13

DATE WELL COMPLETED  
MM DD YY  
15 5-13-05

Depth of Well  
22 405 26 7/6/05  
(TO NEAREST FOOT) O.K. (BB)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
HO-94-4171

OWNER Toll Brothers Inc. last name first name  
STREET OR RFD Rt. 108 and Homewood Rd. TOWN Ellicott City  
SUBDIVISION Benedict Farm SECTION \_\_\_\_\_ LOT 41

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Dirt	0	16	
Hard Cray	16	67	
Med Tan	67	70	-
Hard Cray	70	144	
Med Cray	144	146	
Hard Cray	146	373	
Med Cray	373	380	✓
Hard Cray	380	405	
Dray Hole	0	605	
Semirow/Rock Casing & Cement Grout			

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS 5 NO. OF POUNDS 470  
 GALLONS OF WATER 30  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 20 ft.  
 (enter 0 if from surface)

CASING RECORD  
 casing types insert appropriate code below  
**ST** STEEL **CO** CONCRETE  
**PL** PLASTIC **OT** OTHER  
 MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 20  
 60 61 63 64 66 70

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

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

DEPTH (nearest ft.)  
 1 20 2 405  
 A C H S R E N  
 8 9 11 15 17 21  
 23 24 26 30 32 36  
 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 CASING LOG INDICATOR OTHER DATA

PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 8 9  
 PUMPING RATE (gal. per min.) 10  
 11 15  
 METHOD USED TO MEASURE PUMPING RATE Timer Method  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 57 ft.  
 17 20  
 WHEN PUMPING 136 ft.  
 22 25  
 TYPE OF PUMP USED (for test)  
**A** air **P** piston **T** turbine  
 27 27 27  
**C** centrifugal **R** rotary **O** other (describe below)  
 27 27 27  
**J** jet **S** submersible  
 27 27

PUMP INSTALLED  
 DRILLER INSTALLED PUMP (CIRCLE) (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 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  
**-** below } 2 (nearest foot)  
 49 51

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: 1 (605)  
 WELL HYDROFRACTURED **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 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 LIC. NO. M D 355  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC. NO. M D 553

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

B 1 5323

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 521983

STATE PERMIT NUMBER

HO-94-4171 fill in this form completely

Date Received (APA) 4/15/2005

OWNER INFORMATION

8 MM DD YY 13 TOLL BROTHERS INC. 15 Last Name Owner First Name 34 7164 COLUMBIN GARDEN DR. S.W. 230 36 Street or RFD 55 COLUMBIN MD 21046 57 Town 70 State 72 Zip 76

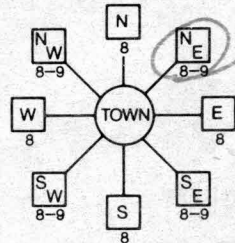
LOCATION OF WELL

B 3 Abwano 8 COUNTY 21 BENEDICT FARM 23 SUBDIVISION 42 SECTION 44 46 LOT 41 48 50 CLARKVILLE 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 73 76 77 78

DRILLER INFORMATION

Michael Barlow M D 355 76 License No. 81 Michael Barlow Well Drilling Inc 522 Underwood Lane, Bel Air MD. 21014 2/8/05

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Road A off Route 108 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 375 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 29 BLK: 9 PARCEL 28

B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A515042 COUNTY NAME COUNTY No. STATE SIGNATURE INSERT S 41 DATE ISSUED 4/21/2005 Brian Baber 4/21/2006 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 510 000 55 EAST GRID 826 000 57 63

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 30 CABLE REVERSE-ROTary Drive-POINT 37 other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEM 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)

APPROP. PERMIT NUMBER H02003G006 PERMIT No. H0-94-4171 70 71 72 73 74 75 76 77 78 79

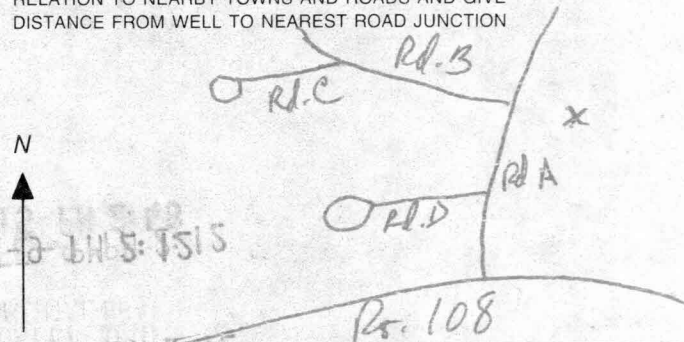
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER 1. 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 826 N 510 000 000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED The Health Dept Must Collect a Water Sample During The Yield Test @ COUNTY



F 7/23/07

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: Fogles Well Drilling Telephone #: 410-795-5670  
Address: 588 Obrecht Rd  
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:  
Name (Print): Allen Compton License# 015D009

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Toll Brothers Telephone #: \_\_\_\_\_  
Subdivision: Palmyra Ct Cirase Lot #: 41 Well Tag #: HO-94-4101  
Site Address: 4912 Valley View Overlook

Submersible Pump Data                      Pitless Adapter                      Well Cap and Electric Conduit  
Make: Grundfos                              Make: Cornwall                              Two piece watertight cap: yes  
Model #: 1550E10-250                      Model#: N/A                                  Screened, vented well cap: yes  
Pump Capacity 15 GPM                      Depth: 36 (36" min)                      Cap secured to casing: yes  
Well Yield: 10 GPM                          NSF approved: yes                          Conduit min 18" B.G.: yes  
Depth of well encountered at time of pump installation: 405(feet)                      Conduit secured to well cap: yes  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
Torque arrestors or Cable guards are required - Must circle one  
Safety rope, if used, attached to inside of well casing with eye bolt: N/A

Piping to house                                      House Connection  
Type: 1" Black Pvc                                      PVC sleeved to undisturbed soil at wall penetration: yes  
PSI: 160 (160 psi min)                                      Approximate length of sleeve: 5  
Depth of supply line: 42(36" min)                                      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.

Allen Compton                                      11/23/07  
Signature of company representative responsible for installation                      date

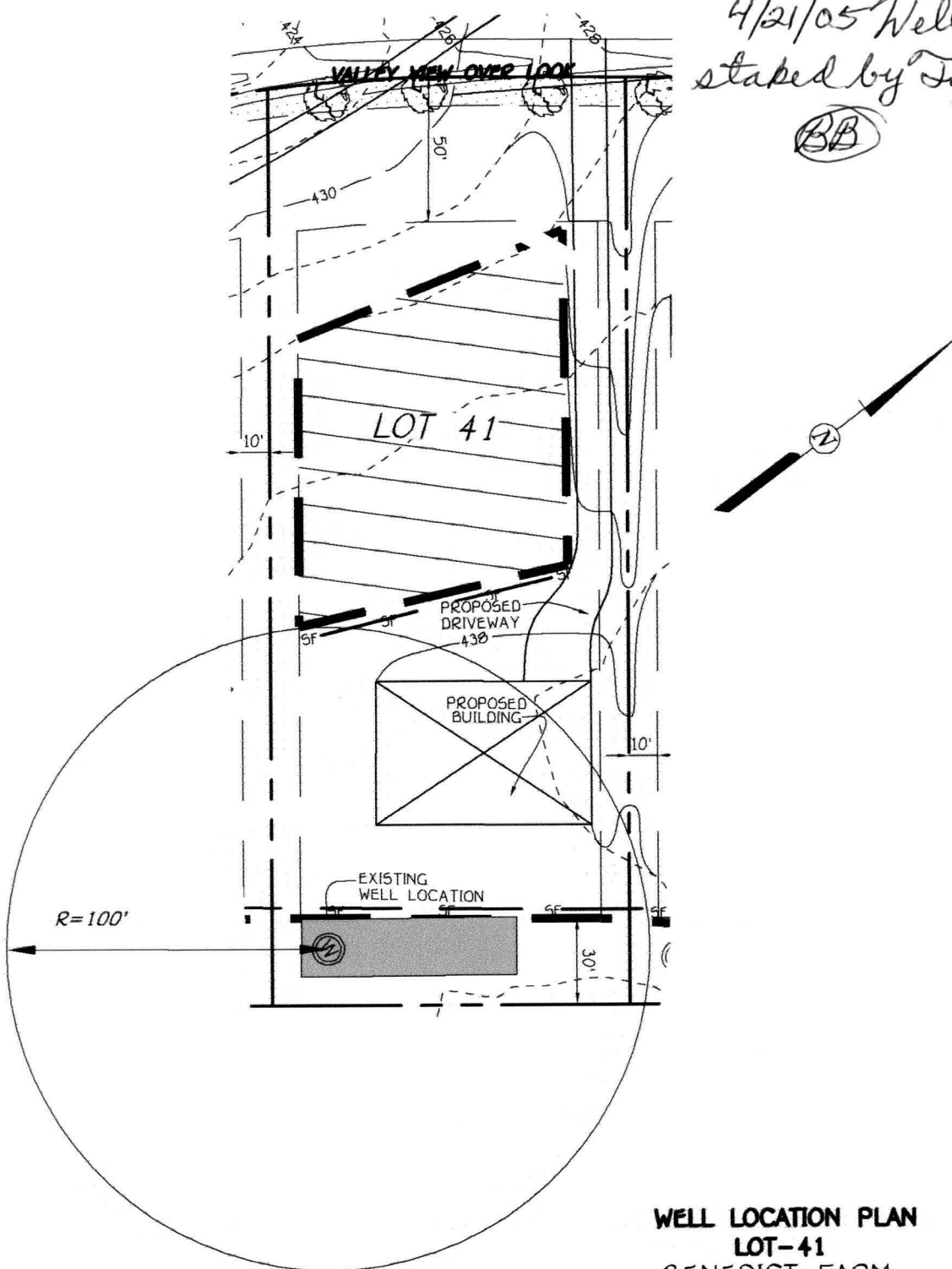
For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 5/22/07 BB  
Inspection Data: Pitless adapter and 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 installed inside of well 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

K:\ISDKPRO\J30754 Benedict Farm\dwg\PHASE I - FINAL\J30754 WELL STAKE OUT - LOTS 11, 16, 20, 26, 31, 34, 35, 38, 41.dwg, 4/15/2005 10:15:37 AM

4/21/05 Well site  
staked by F, C, C.

(BB)



**WELL LOCATION PLAN  
LOT-41  
BENEDICT FARM  
PHASE 1**

**NON-BUILDABLE PRESERVATION PARCEL 'A' &  
NON-BUILDABLE BULK PARCELS 'B' THRU 'J'**

ZONED RC-DEO

TAX MAP No. 29 GRID No. 9 PARCEL No. 28  
THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: MARCH 29, 2005

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



Bureau of Environmental Health  
7178 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

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

August  
~~July~~ 16, 2007

Toll MD III, LP  
7164 Columbia Gateway Drive, #230  
Columbia, MD 21046

SENT VIA FACSIMILE 410-992-3234

RE: Benedict Farm, Lot 41  
Homewood Crossing  
4912 Valley View Overlook  
Ellicott City, MD 21042  
BP #: B06005967  
Well Permit # HO-94-4171

Dear Sir:

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 08/15/2007. Final approval of the well line connection to the dwelling was approved on 05/22/2007.**

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.

Also, Gross Alpha and Beta sample was collected on 08/03/2005. Both findings were below the maximum limit suggested by the EPA. At the time of the 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 and Occupancy.

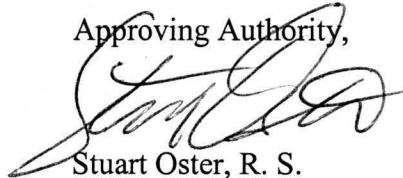
#### INTERIM CERTIFICATE OF POTABILITY

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-94-4171. 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: 08/01/2007  
Date of Samples for Gross Alpha and Gross Beta: 08/03/2005  
Date of Well Completion: 05/13/2005

Approving Authority,



Stuart Oster, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #:	64693	Account #:	1930
Reference:	Toll Brothers Lot 41	Company:	Fogle's Well Drilling
Location:	4912 Valley View Overlook Ellicott City, MD 21042	Requested By:	Dave Fogle
Date/ Time Collected:	8/1/2007 1000	Source:	Well Water
Date/Time Rec'd:	8/1/2007 1226	Site:	Well Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	V.M. Fadoul 6804VF-FS	pH:	6.3
		Well #:	HO-94-4171

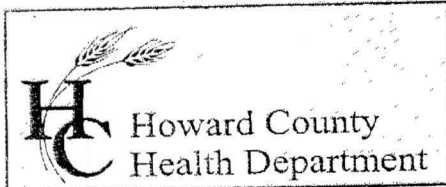
PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	8/2/2007 / 0820 / AD/BD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	8/2/2007 / 0820 / AD/BD
Nitrate	2.00	mg/L	10	601	8/2/2007 / 1545 / AD/BD
Turbidity	1.01	NTU	<10	SM18 2130B	8/2/2007 / 1455 / AD/BD
Sand	NS	mg/L	5	Visual/Gravimct	8/2/2007 / 1455 / AD/BD

**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 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 Sample collected by client, analyzed as received
- 8 pH tested on-site

Reason for Test : Use & Occupancy  
 Building Permit # : B06005967

Date Reported: 8/3/2007



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

August 10, 2005

Toll Brothers, Inc.  
7164 Columbia Gateway Drive, Suite 230  
Columbia, MD 21046

RE: Benedict Farm Subdivision, lot 41

Well Tag: HO-94-4171

To Whom It May Concern:

A sample was taken from a yield test on August 3, 2005 by Florida Radiochemistry Services, Inc. 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 activity in a water supply. In turn, this can provide information regarding naturally occurring radiation (i.e. Radionuclides) that may exist in your water supply.

Results from this screening revealed a Gross Alpha of  $1.2 \pm 0.6$  picocuries/liter (pCi/L); while the Gross Beta level was  $5.6 \pm 0.9$  pCi/L. The Gross Alpha result was below the maximum contaminant level (MCL) of 15 pCi/L, while the Gross Beta was below the MCL of 50 pCi/L.

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

Sincerely,

Bert Nixon, Assistant Director  
Bureau of Environmental Health

Eric Dougherty, MDE, Water Mgmt., Groundwater  
Well & Septic Property File

**Sample Login**

**Client:** Michael Barlow Well Drilling      **Date / Time Received** 08/03/05 13:24      **Work order #** 0808038

**Client Contact:** Michael Barlow

**Client P.O.**

**Project I.D.** Benedict Farms Homewood Prep

Lab Sample I.D.	Client Sample I.D.	Sample Date/Time	Analysis Requested
0808038-01	HO-04-4165	07/28/05	Gross Alpha / Beta
0808038-02	HO-04-4170	07/28/05	Gross Alpha / Beta
0808038-03	HO-04-4171	07/28/05	Gross Alpha / Beta