

C1 3488

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

COUNTY NUMBER (13) A514619

ST/CO USE ONLY

DATE Received
MM DD YY

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 300 26 0/3/05
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER Preserve at Waverly Glen, LLC
STREET OR RFD Tompkins Way TOWN Woodstock
SUBDIVISION Preserve at Waverly Glen SECTION LOT Pres. Par. A

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

check
if water
bearing

Top Soil	0	2	
Sandy	2	15	
Sand Stone	15	25	
MICKA	25	45	
Sand Stone	45	50	U
MICKA	50	180	
FLint Rock	180	185	U
MICKA	185	300	

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 BCNO. OF BAGS 12 NO. OF POUNDS 1200GALLONS OF WATER 72

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30+ ft.
48 TOP 52 ft. 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST
STEELCO
CONCRETEPL
PLASTICOT
OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)PL 6 32
60 61 63 64 66 70E
A
C
H
C
A
S
I
N
G

OTHER CASING (if used)

diameter depth (feet)
inch from to
 screen type
or open hole

SCREEN RECORD

(insert
appropriate
code
below)ST
STEELBR
BRASSHO
OPENPL
BRONZEOT
HOLEPL
PLASTICOT
OTHER

C 2

DEPTH (nearest ft.)

1 2 HO 30 300

E 1 8 9 11 15 17 21

A 2 23 24 26 30 32 36

C 3 38 39 41 45 47 51

R 38 39 41 45 47 51

E 38 39 41 45 47 51

N 38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER (NEAREST INCH)

56 60

from to

GRAVEL PACK IF WELL DRILLED
WAS FLOWING WELL
INSERT F IN BOX 68MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3PUMPING RATE (gal. per min.) 10METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 50 ft.WHEN PUMPING 110 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine

C centrifugal R rotary O (describe below)

J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP 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

- below

(nearest foot) 2 50 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)

Prop 55' well

Line 125'

Prop Line

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes

Y

no

N

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

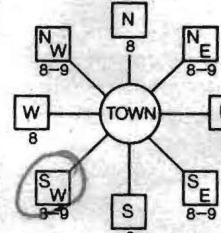
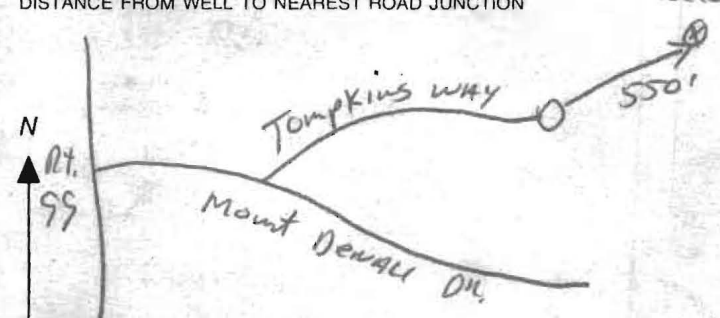
E ELECTRIC LOG OBTAINED

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 117

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. DSITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

B 1 1 2 3 6 5728	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-3947 70 fill in this form completely 79
Date Received (APA) 8 MM DD YY 13 Preservation at Waverly Glen 15 Last Name Owner First Name 34 3625 Park Ave 36 Street or RFD 55 Ellicott City MD 21043 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL 8 COUNTY 21 Howard The Preserve at Waverly Glen 23 SUBDIVISION 42 Preservation Parcel SECTION 44 46 LOT A 48 50 Woodstock 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) I M I 73 76 77 78	
DRILLER INFORMATION 76 Driller's Name 81 License No. Ralph E. Mayne M S D 117 Firm Name Ralph E. Mayne Inc Address 17024 Handy Rd Mt Airy MD 21771 Signature Date [Signature] 9-18-03		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 30 NEAR WHAT ROAD Tompkins Way ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST 34 550 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 10 BLK: 23 PARCEL 102+ 304	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard (13) A514619 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 5/11/04 Brian Baker 5/11/2005 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 542 000 EAST GRID 832 000 50 55 57 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 542832 N 830542 000 000	
APPROXIMATE DEPTH OF WELL 150 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		6/3/04 8:30 No Insp (50)	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 36 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
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) APPROP. PERMIT NUMBER H02003 G A P 005(01) 54 63 PERMIT No. 40-94-3947 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

Well Permit No. HO - 94-3947.

Location of property (road) Tompkins Way
Subdivision Preserve at Waverly Glen Lot P.P. A Block Plat Sec.
Well Driller Ralph Mayne Owner Preserve at Waverly Glen, LLC

Depth of well 300

Distance of measuring point (M.P.) above ground 20

Static water level (S.W.L.) below M.P. 50

Time pump started 92:00

Pumping rate 10 GPM

Total time 15 min to reach pumping water level 110 ft. below M.P.

[illegible]

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

Company Name: S.K. Plumbing & Heating Inc Telephone #: 410-775-0562
Address: 1220 F.S.K. Hwy
Keymer MD 21757

Name of Property Owner: Trinity Homes Telephone #: 410-313-8722
Subdivision: Preserve At Laverly Glen Lot #: 202A Well Tag #: HO-94-3947
Site Address: 10928 Tompkins Way
Woodstock MD 21163

Conduit secured to well cap: Yes

date

Adequate grout observed below pitless adapter

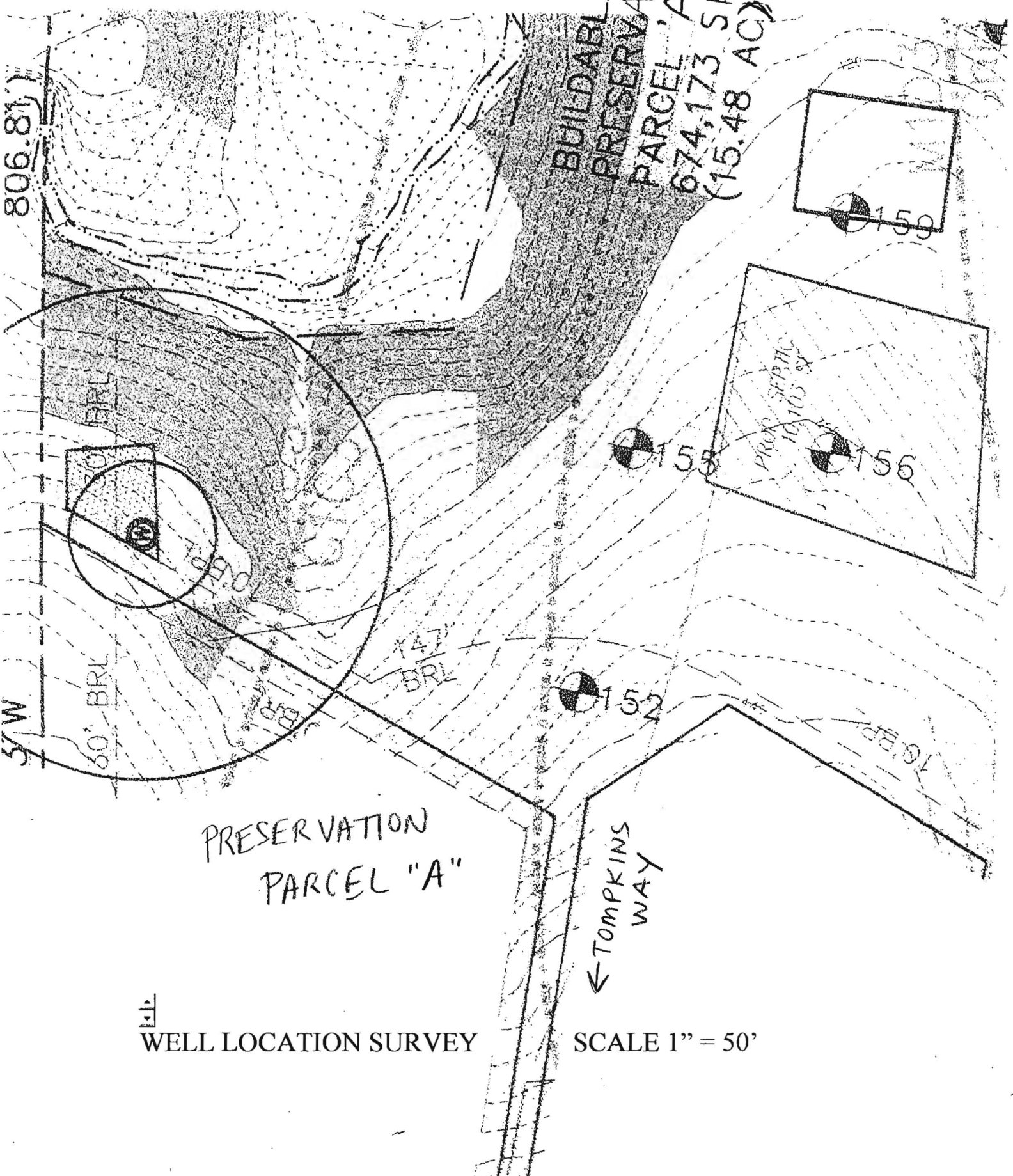
Sleevd
Under
Driveway

5/11/04 Well site staked by Frederick
Ward + Assoc.

PRESERVE AT WAVERLY GLEN

BUILDABLE
PRESERVATION
PARCEL "A"
674,173 SF
(15.48 AC)

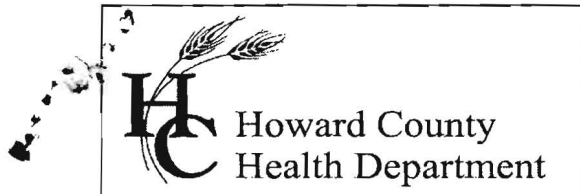
BB



PRESERVATION
PARCEL "A"

WELL LOCATION SURVEY

SCALE 1" = 50'



7178 Columbia Gateway Drive, Columbia Maryland 21046
(410) 313-1771 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Pennv E. Borenstein. M.D.. M.P.H.. Health Officer

March 8, 2007

Trinity Quality Homes, Inc.
3675 Park Avenue, #301
Ellicott City, MD 21043

SENT VIA FACSIMILE 410-313-8731

RE: The Preserve at Waverly Glen, PP-A
10928 Tompkins Way
Woodstock, MD 21163
BP #: B00154003
Well Permit # HO-94-3947

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 02/22/2007. Final approval of the well line connection to the dwelling was approved on 06/19/2006.**

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-94-3947. 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: 02/28/2007
Date of Well Completion: 06/03/2004

Approving Authority,

Brian Baker
Brian Baker, R. S.

cc: Building Inspector's Office
Community Health Services
File

CERTIFICATE OF ANALYSIS



Trace Laboratories, Inc.
Maryland

5 North Park Drive
Hunt Valley, MD 21030
Telephone: 410/252-7742
Telephone: 410/584-9099
Fax: 410/584-9117
Email: tracelab@connect.net
www.tracelabs.com

Maryland State Certified
Water Quality Laboratory
No. 318

ISO 9001:2000



Cert No. C2005-01504

Requester:
Trinity Homes/TBI Homes
3675 Park Avenue Suite 301
Ellicott City, Maryland 21043

S/O Number: 62268 & 62361+
Report Date: March 1, 2007
Amended Report March 8, 2007

Property Sampled: 10928 Tompkins Way

County: Howard
Subdivision: Preserve @ Waverly Glen
Lot #: 22
Building Permit #: B00154003
Tax Map #: 10
Parcel #: 330

Date/Time Collected: February 28, 2007 at 9:27 am
Date/Time Received: February 28, 2007 at 1:27 pm

Sample Location: Laundry Room Tap & Pressure Tank Tap+
Sampler ID: 6308KW
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

Well Tag Number: HO-94-3947
Well Condition: 2-Piece Cap
Satisfactory

Water Conditioning/Treatment: 2 Sediment Filters

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	<1.0 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity(Raw)+	<1.0 NTU	EPA 180.1	10 NTU	Pass
Turbidity(Treated)	<1.0 NTU	EPA 180.1	10 NTU	Pass
pH	6.4 Units	EPA 150.1	*6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	Absent	SM 9223B	Absent	Pass
E.coli	Absent	SM 9223B	Absent	Pass

+Raw sample collected on March 7, 2007 at 10:13 am.

Heather R. Beam
Manager-Drinking Water Testing

MCL=Maximum Contamination Level

*SMCL=Secondary Maximum Contamination Level

***A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.