

C1 0834

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 22 500 28

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho-95-1270

OWNER Smith Development STREET OR RFD Lime Kiln Rd TOWN Fulton SUBDIVISION Lime Kiln Valley SECTION LOT 16

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Sol. Brown Shale, Gray Rock, Water at 215', Well # 1, 500' Dry (Back P. 168), 500-40' Drill cuttings, 40-0 Cement.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS 11, NO. OF POUNDS 1100, GALLONS OF WATER 66, DEPTH OF GROUT SEAL 0 to 40 ft.

CASING RECORD: MAIN CASING TYPE PL, Nominal diameter 6 inch, Total depth 40 feet.

OTHER CASING (if used) table with columns for diameter and depth.

SCREEN RECORD: screen type or open hole (ST), insert appropriate code below.

NUMBER OF UNSUCCESSFUL WELLS: 1

WELL HYDROFRACTURED (Y)

CIRCLE APPROPRIATE LETTER: A, E, P

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...

DRILLERS LIC. NO. 1 M SD 162

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 AW D 706

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

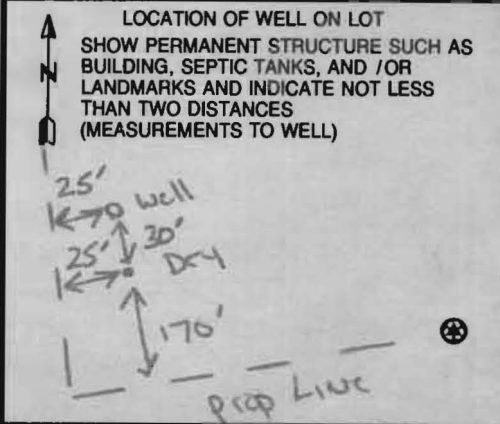
DEPTH (nearest ft.) table with columns 1-6 and rows A, C, H, S, R, E, N. Includes handwritten entries: Ho 40, 500.

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 6, PUMPING RATE 1.2 gal. per min., METHOD USED TO MEASURE PUMPING RATE Submersible, WATER LEVEL 36 ft. BEFORE PUMPING, 312 ft. WHEN PUMPING, TYPE OF PUMP USED (for test) S submersible.

PUMP INSTALLED: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED S, CAPACITY: GALLONS PER MINUTE 31, PUMP HORSE POWER 37, PUMP COLUMN LENGTH 43, CASING HEIGHT 49, LAND SURFACE 1 (nearest foot).



B 1 9840
1 2 3 6

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
527237 please type

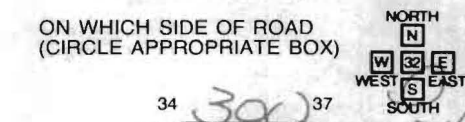
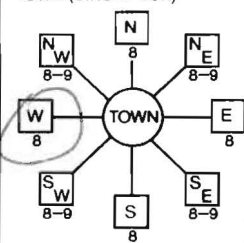
STATE PERMIT NUMBER
MD-95-1270
70 79
fill in this form completely

Date Received (APA)
8 MM DD YY 13
OWNER INFORMATION
15 Brantly Development Last Name Owner First Name 34
36 8835 N. Columbia 100 Pkwy Street or RFD 55
57 Columbia MD 21045 Town State Zip 76

B 3 LOCATION OF WELL
8 Howard COUNTY 21
23 Lime Kiln Valley SUBDIVISION 42
SECTION 44 46 LOT 48 50
52 Fulton NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 1 M I
73 76 77 78

DRILLER INFORMATION
Michael D. Isom MS D 162
Driller's Name License No. 81
G. Edgar Harr Sons' Corp.
Firm Name
12047 Ellis Road, Cockeysville 21030
Address
Signature Date 6/11/07

B 4
1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
Lime Kiln Road
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 300 37 DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: 45 BLK: 4 PARCEL 12



B 2 WELL INFORMATION
1 2
APPROX. PUMPING RATE 5
(GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED 750
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
Howard 1519584
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 9/23/07 9/25/08
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 480 000 EAST GRID 810 000
50 55 57 63

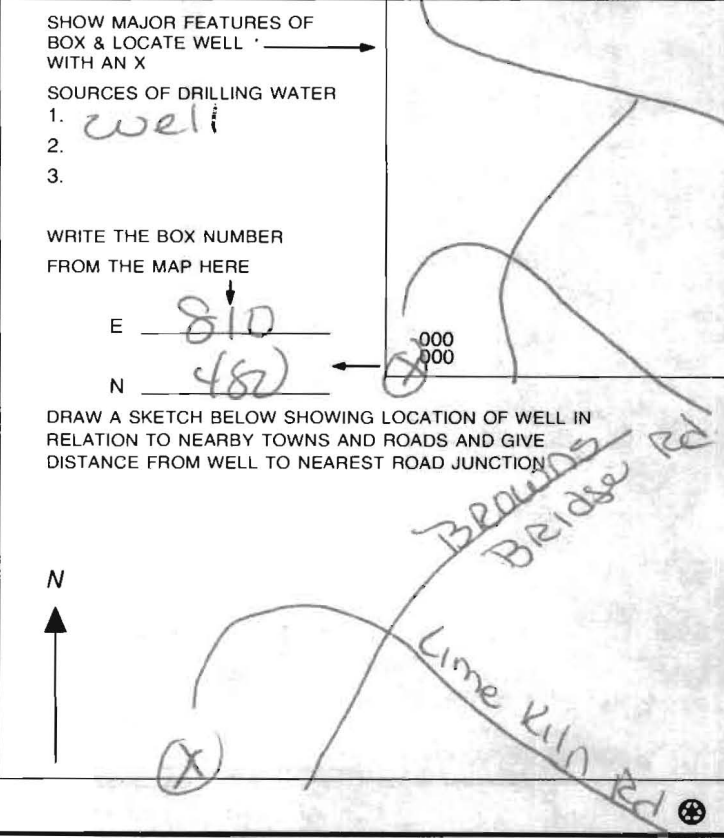
APPROXIMATE DEPTH OF WELL 350 FEET
24 28
APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

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)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEAN 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 MD 2004 G 013(02)
PERMIT No. MD-95-1270
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



HARR WELL DRILLING

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

HOWARD COUNTY WELL YIELD TEST REPORT

Date Test Performed: 12-21-07
Address: Lime Kiln Road
Owner: Brantly Development
Well Depth: 500 Ft

Permit Number: HO-95-1270
Subdivision: Lime Kiln lot 16
Election District:
Static Water Level: 36 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 1 gallon bucket	Calculated Flow-Gallons Per Minute
0845	36 ft		4 sec	15.00 gpm
0900	142		5	12.00
0915	199		6	10.00
0930	284		9	6.67
0945	290		13	4.62
1000	310		28	2.14
1015	310		28	2.14
1030	310		28	2.14
1045	310		28	2.14
1100	312		50	1.20
1115	312		50	1.20
1130	312		50	1.20
1145	312		50	1.20
1200	312		50	1.20
1215	312		50	1.20
1230	312		50	1.20
1245	312		50	1.20
1300	312		50	1.20
1315	312		50	1.20
1330	312		50	1.20
1345	312		50	1.20
1400	312		50	1.20
1415	312		50	1.20
1430	312		50	1.20
1445	312		50	1.20
1500	312		50	1.20
1515	312		50	1.20
1530	312		50	1.20

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 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: Robert L. Feezer Co. Inc Telephone #: 410-781-4655
Address: 6321 Barnhart Ave,
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): Robert L. Feezer License# 2122

*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: MV HOMES Telephone #: 410-379-5956
Subdivision: MAPLE WOODS Lot #: 16 Well Tag #: HO-95-1270
Site Address: 12851 Lime Kiln Rd
FULTON, MD 20759

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: STA-RITE Make: Campbell Two piece watertight cap: [checked]
Model #: S10 P4HS10221-01 Model#: PT800 Screened, vented well cap: [checked]
Pump Capacity 10 GPM Depth: 42" (36" min) Cap secured to casing: [checked]
Well Yield: 1.2 GPM NSF/WSC approved: [checked] Conduit min 18" B.G.: [checked]
Depth of well encountered at time of pump installation: 500 (feet) Conduit secured to well cap: [checked]
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

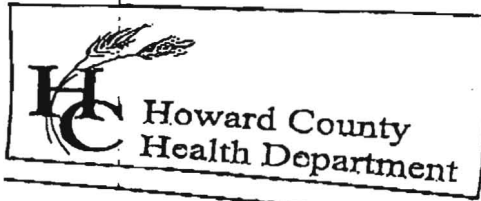
Piping to house House Connection
Type: Poly PVC sleeve to undisturbed soil at wall penetration: [checked]
PSI: 200 (160 psi min) Length of sleeve (5' minimum from foundation): 10'
Depth of supply line: 42" (36" min) Sleeve sealed properly: [checked]

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: Robert L. Feezer date: 4/12/11
GROUND WORK COMPLETED 4/5/11

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

Date Insp. Requested: Date Insp. Approved: 4/6/2011 Inspector: [signature]
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade [checked]
Two piece cap installed and attached to casing securely [checked]
Elec. conduit extends at least 18" below grade/attached to cap properly [checked]
Safety rope not outside of well cap/casing [checked]
Correct well tag attached properly and casing 8" above finished grade [checked]
Water supply line sleeved adequately at house connection [checked]
Adequate grout observed below pitless adapter [checked]



7178 Columbia Gateway Drive, Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2640
 TDD (410) 313-2323 Toll Free 1-866-313-2640
 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

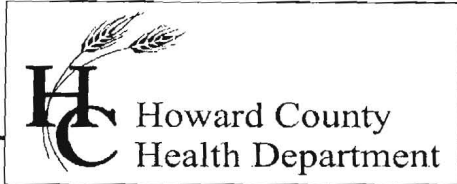
Well Site Location:
 Lime KILN VALLEY 1-39 Lime KILN VALLEY
 Subdivision/Property Name Lot# Road Name

The well site has been staked by ^{sites} Robert Vogel Inc,
 (professional land surveyor or company employing professional land surveyors)
 on 7/24/07 (date) and does not require a site inspection.

The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/05



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

May 6, 2011

Homeowner
12851 Lime Kiln Road
Woodbine, MD 21797

RE: Lime Kiln Valley, Lot 16
12851 Lime Kiln Road
BP #: B10003890
Well Tag: HO-95-1270

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 04/11/2011. Final approval of the well line connection to the dwelling was approved on 04/06/2011.**

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.

Enclosed with this certificate, is a copy of the septic permit and the as-built along with important information regarding the use and maintenance of your septic system. Please read through carefully and thoroughly. Any questions regarding your well and/or septic, please call this office for guidance 410-313-1771.

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-95-1270. 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: 04/25/2011
Date of Well Completion: 12/21/2007

Approving Authority,



Brian Baker, R. S.
Environmental Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Hygiene Program
File

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Date of Well Completion: 12/21/2007

Approving Authority,

A handwritten signature in cursive script that reads "Brian Baker".

Brian Baker, R. S.
Environmental Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Hygiene Program
File



TRACE LABORATORIES, INC

5 North Park Drive

Hunt Valley, MD 21030 USA

Telephone: 410/584-9099 / Fax: 410/584-9117

Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

NV Homes, Inc.
6085 Marshalee Drive Suite 130
Elkridge, Maryland 21075

S/O Number: 81102

Report Date: April 26, 2011

Property Sampled: 12851 Lime Kiln Road, 20777
Sample Location: Pressure Tank
Residual Chlorine: <0.1 mg/L

Building Permit #: B10003890
Sampler ID #: 9813AM
Samples Iced: Yes

County: Howard
Map: 40

Subdivision: Maple Woods
Parcel: 114

Lot #: 16

Date/Time Collected in Field: April 25, 2011 @ 11:20 am
Date/Time Received in Lab: April 25, 2011 @ 3:30 pm

Well Tag #: HO-95-1270
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Neutralizer

Table with 5 columns: PARAMETER, METHOD, MCL/*SMCL, RESULT, PASS/FAIL. Rows include Total Coliform, E. coli, Nitrate, Turbidity, pH, and Sand.

Signature of Sarah D. Brammer

Sarah D. Brammer
Quality/Office Manager

MCL: Maximum Contamination Level, an enforceable level established by the EPA
*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA
***A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



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Hunt Valley, MD 21030 USA

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Signature of Sarah D. Brammer

Sarah D. Brammer
Quality/Office Manager

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