

C1 5193 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

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

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY 10 23 07

Depth of Well 22 400 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho-95-1287

OWNER Brantly Development last name first name TOWN Fulton STREET OR RFD Lime K. In Rd SUBDIVISION Lime K. In Valley SECTION LOT 38

WELL LOG Not required for driven wells

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

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Soil, Brown shale, Soft shale, Gray Rock, and Water at 120'.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 15 NO. OF POUNDS 1500 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 60 BOTTOM 58 ft.

CASING RECORD

ST CO PL OT MAIN CASING TYPE PL 60 61 63 64 66 65 70

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

SCREEN RECORD

ST BR HO PL OT DEPTH (nearest ft.) HO 65 400

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

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 S D 162 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 A W D 766 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

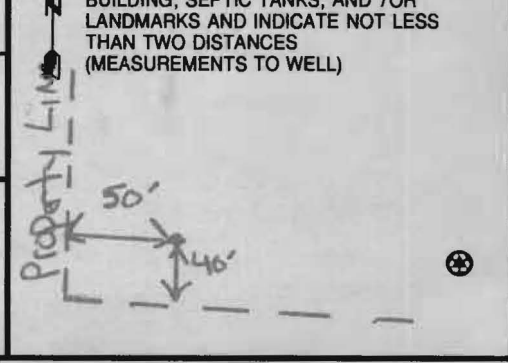
PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 15.0 METHOD USED TO MEASURE PUMPING RATE submersible WATER LEVEL (distance from land surface) BEFORE PUMPING 55 ft. WHEN PUMPING 262 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (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) 50 51

LOCATION OF WELL ON LOT



B 1 9877
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please type

STATE PERMIT NUMBER
110-95-1287
fill in this form completely 79

Date Received (APA)
8 MM DD YY 13
OWNER INFORMATION
15 Last Name Owner First Name 34
8835 N. Columbia 100 Pkwy
36 Street or RFD 55
Columbia MD 21045
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
8 COUNTY 21
Howard
23 SUBDIVISION
Lime Kiln Valley
SECTION 44 46 LOT 38 48 50
Fulton
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 MI
73 76 77 78

DRILLER INFORMATION
Michael Ison M SD 162
76 Driller's Name 81 License No.
G Edgar Harr Sons Corp
Firm Name
12047 Falls Rd 21030
Address
Signature Date 7/23/07

B 4
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
Lime Kiln Rd
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W EAST E
SOUTH S
34 200 37 DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: 45 BLK: 4 PARCEL 12

B 2 WELL INFORMATION
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)
 D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 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 AS19 584
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 10/2/07 10/2/08
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH 481 000 EAST GRID 811 000
GRID 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
24 28
APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

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 8101
N 4801
8000
8000

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)
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL
 Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 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

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
N
Lime Kiln Rd
Browns Bridge
⊗

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER 110 2004 G 013/02
PERMIT No. 110-95-1287
70 71 72 73 74 75 76 77 78 79

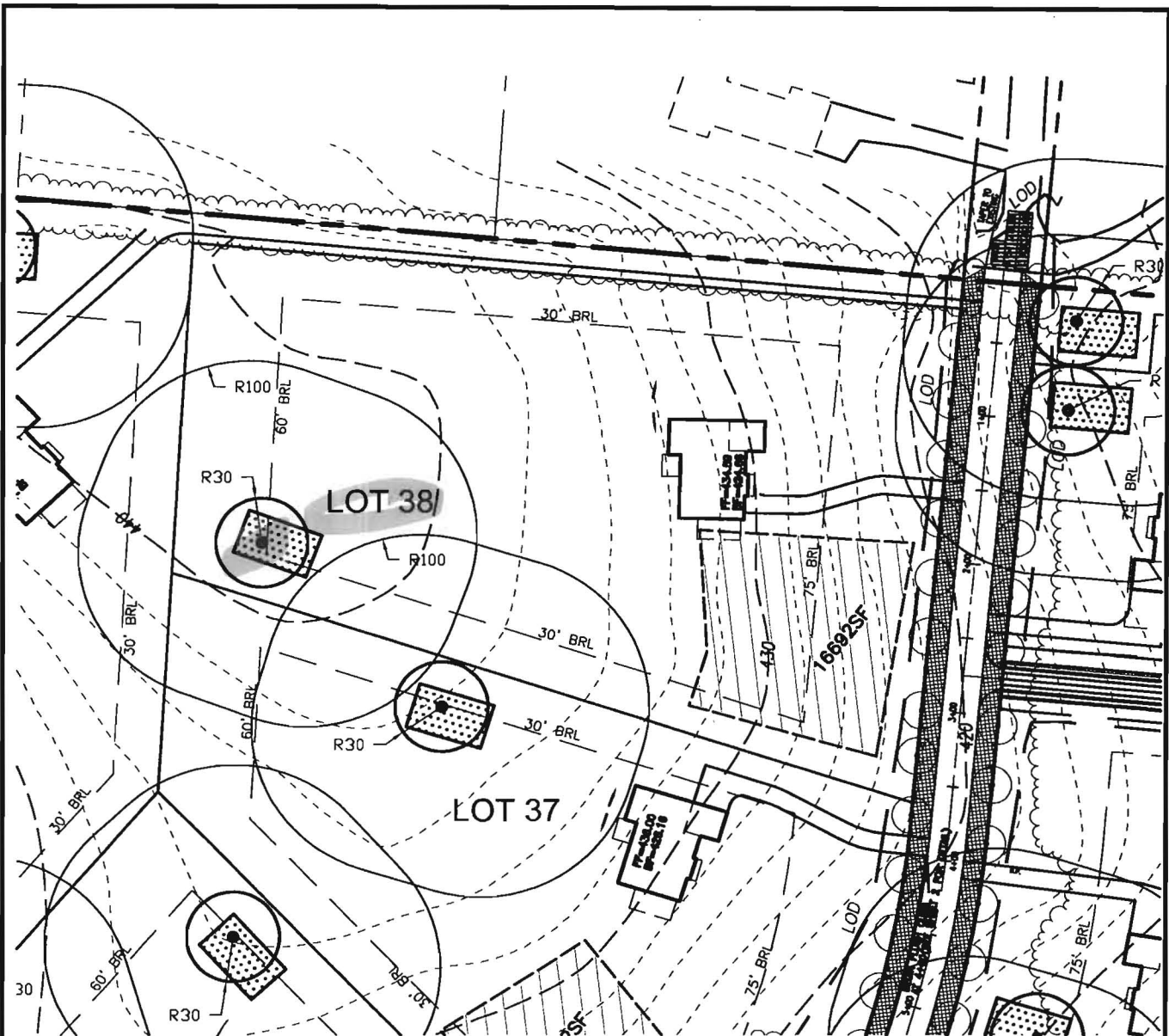
SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

HARR WELL DRILLING
 12047 FALLS ROAD
 COCKEYSVILLE, MD 21030
 410-252-4588

HOWARD COUNTY WELL YIELD TEST REPORT

Date Test Performed: 10-20-07 Permit Number: HO-95-1287
 Address: Lime Kiln Road Subdivision: Lime Kiln Valley lot 38
 Owner Name: Brantly Development Election District:
 Well Depth: 400' Static Water Level: 55'

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 5gallon bucket	Calculated Flow-Gallons Per Minute
0830	55 feet		18 sec	16.67 gpm
0845	111		18	16.67
0900	181		18	16.67
0915	224		19	15.79
0930	243		19	15.79
0945	262		20	15.00
1000	262		20	15.00
1015	262		20	15.00
1030	262		20	15.00
1045	262		20	15.00
1100	262		20	15.00
1115	262		20	15.00
1130	262		20	15.00
1145	262		20	15.00
1200	262		20	15.00
1215	262		20	15.00
1230	262		20	15.00
1245	262		20	15.00
1300	262		20	15.00
1315	262		20	15.00
1330	262		20	15.00
1345	262		20	15.00
1400	262		20	15.00
1415	262		20	15.00
1430	262		20	15.00



4/25/07 Well site OK (S)

SCALE: 1"=100'

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET ELLICOTT CITY, MD 21043 TEL: 410.461.7666 FAX: 410.461.8961

WELL PLAT LEGEND	
	SEPTIC EASEMENT
	PROPOSED WELL AREA

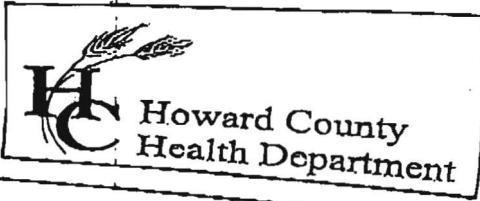
SCALE: AS SHOWN
 DRAWN BY: JCO
 CHECKED BY: RHV
 DATE: JUNE 2007
 PROJECT NO.: 04-21
 SHEET NO. 1 OF 1

**LIME KILN VALLEY II
 PHASE 1 & 2 (LOT 38)**

PROPOSED WELL LOCATION EXHIBIT

TAX MAP 40 & 45
 5TH ELECTION DISTRICT

PARCEL 114 & 12
 HOWARD COUNTY, MARYLAND



7178 Columbia Gateway Drive, Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2640
 TDD (410) 313-2323 Toll Free 1-866-312-2640
 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:

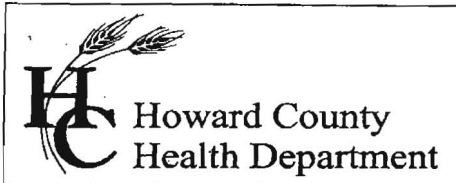
<u>Lime KILN VALLEY</u>	<u>1-39</u>	<u>Lime KILN VALLEY</u>
Subdivision/Property Name	Lot#	Road Name

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

December 17, 2008

Homeowner
12800 Lime Kiln Road
Fulton, MD 20759

RE: Maple Woods, Lot 38
12800 Lime Kiln Rd.
BP # B08001250
Well Permit # HO-95-1287

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 12/2/2008. Final approval of the well line connection to the dwelling was approved on 11/10/2008.**

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.

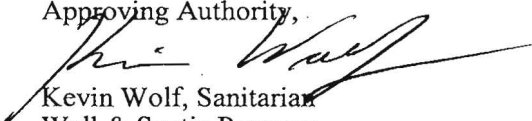
INTERIM CERTIFICATE OF POTABILITY

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-95-1287. 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: 12/15/2008
Date of Well Completion: 10/23/2007

Approving Authority,


Kevin Wolf, Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File



TRACE LABORATORIES, INC
 A Methode Electronics, Inc. Company
 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
 Attn: Buddy
 6085 Marshalee Drive Suite 130
 Elkridge, Maryland 21075

S/O Number: 70883
Report Date: December 16, 2008

Property Sampled: 12800 Lime Kiln Road, 20777

County: Howard
Subdivision: Maple Woods
Lot #: 38
Building Permit #: B08001250

Tax Map #: 40
Parcel #: 114

Date/Time Collected: December 15, 2008 at 10:14 am
Date/Time Received: December 15, 2008 at 5:25 pm


Sample Location: Pressure Tank Tap
Sampler ID: 5745KC

Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

Well Tag Number: HO-95-1287
Well Condition: 2-Piece Cap
 Satisfactory

Water Conditioning/Treatment: Neutralizer

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	1.8 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	<1.0 NTU	EPA 180.1	10 NTU	Pass
pH	8.0 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


 Allison R. Milburn
 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.