

C1 1355 SEQUENCE NO. (MDE USE ONLY)
 1 2 3 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 A51984

ST/CO USE ONLY DATE Received MM DD YY 06 08 11
 DATE WELL COMPLETED MAY 25 2011
 Depth of Well 22 505 26 (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 95 - 2124

OWNER NV HOMES MARYLAND EAST DIVISION
 STREET OR RFD 6085 MARSHALEE DR SUITE 130 TOWN ELKRIDGE MD 21075
 SUBDIVISION LIME KILN VALLEY SECTION LOT 2

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	
DIRT	0	1	
SOFT BR MICA	1	20	
HD BR & BLUE MICA SCHIST	20	30	
HD BLK SCHIST	30	37	
HD BR SCHIST	37	39	X
HD BLK SCHIST LACED WHITE SANDSTONE	39	370	
HD BLK & WHITE & BR SANDSTONE	370	377	X
HD BLK & BLUE WHITE SANDSTONE	377	505	

GROUTING RECORD (yes no) Y N
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 19 NO. OF POUNDS 1786
 GALLONS OF WATER 114
 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 60 BOTTOM 58 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) 62
 60 61 63 64 66 70

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

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

NUMBER OF UNSUCCESSFUL WELLS: 3
 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 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. 1 M W D 296
 DRILLERS SIGNATURE Ronald Byker
 (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. 1 M W D 296

E A C H S C R E E N	DEPTH (nearest ft.)	
	1	2
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

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 8 9
 8.5
 PUMPING RATE (gal. per min.) 11 15
 METHOD USED TO MEASURE PUMPING RATE BUCKET
 WATER LEVEL (distance from land surface) BEFORE PUMPING 32 ft. WHEN PUMPING 318 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 (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
 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 - below LAND SURFACE 2 (nearest foot) 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)
 Lime kiln Rd
 1150' x well

B 1 9545

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER

HO-95-2124 fill in this form completely

Date Received (APA)

5/4/2011

OWNER INFORMATION

NV HOMES MARYLAND EAST DIVISION 6085 marshalee drive suite 130 ELKRIDGE MARYLAND 21075

B 3

LOCATION OF WELL

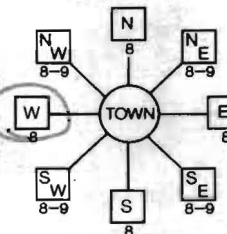
HOWARD COUNTY LIME KILN VALLEY FULTON NEAREST TOWN MILES FROM TOWN

DRILLER INFORMATION

RONALD KYKER M W D 296 WESTMINSTER WELL DRILL INC P.O. BOX 861 WESTMINSTER MD 21157 MAY 3 2011

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



12767 LIME KILN RD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 40 BLK: 21 PARCEL 114

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 500 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) INDUSTRIAL, COMMERCIAL, DEWATERING PUBLIC WATER SUPPLY WELL TEST, OBSERVATION, MONITORING GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13) A51984 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 5/9/2011 CO SIGNATURE EXP. DATE NORTH GRID 480 EAST GRID 812

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

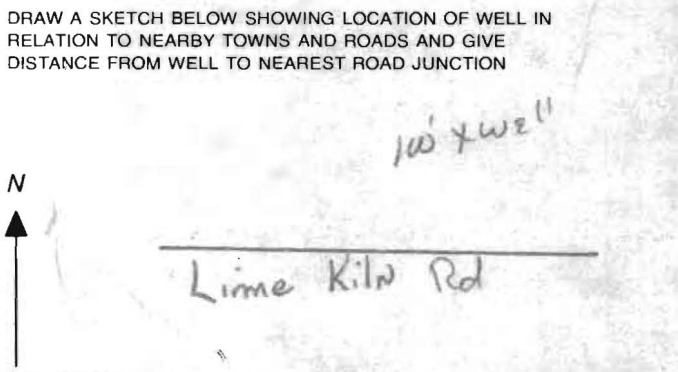
METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 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 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 DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. CITY 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 812 N 480



Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER HO2004G013 PERMIT No. HO-95-2124

SPECIAL CONDITIONS Must Use at Least 50' of Well Casing

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 #: 410-781-4855
Address: 6321 Barnett Avenue
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: NV Homes Telephone #: 410-379-5958
Subdivision: Maple Woods Lot #: 2 Well Tag #: HO - 95 - 2124
Site Address: 12787 Lime Kiln Road
Highland, MD 20777

Submersible Pump Data

Make: Grundfos
Model #: 1 HP
Pump Capacity 5 GPM
Well Yield: 8.5 GPM

Pitless Adapter

Make: Campbell
Model #: PT800
Depth: 42" (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 18" B.G.: Yes

Depth of well encountered at time of pump installation: 505 (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, 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 N/A

Piping to house

Type: Poly
PSI: 200 (160 psi min)
Depth of supply line: 42" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: Yes
Length of sleeve(5' minimum from foundation): 10'
Sleeve 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.

Robert L. Feezer Signature of company representative responsible for installation 9/19/2011 date

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

Date Insp. Requested: Date Insp. Approved: 8/23/11 Inspector: (KW)
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 outside of well cap/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

**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 Barnett Avenue
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: NV Homes Telephone #: 410-379-5956
Subdivision: Maple Woods Lot #: 2 Well Tag #: HO - 95 - 2124
Site Address: 12767 Lime Kiln Road
Highland, MD 20777

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>Yes</u>
Model #: <u>1 HP</u>	Model#: <u>PT800</u>	Screened, vented well cap: <u>Yes</u>
Pump Capacity ⁵ _____ GPM	Depth: <u>42"</u> (36" min)	Cap secured to casing: <u>Yes</u>
Well Yield: <u>8.5</u> GPM	NSF/WSC approved: <u>Yes</u>	Conduit min 18" B.G.: <u>Yes</u>
Depth of well encountered at time of pump installation: ⁵⁰⁵ _____ (feet)		Conduit secured to well cap: <u>Yes</u>
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 <u>inside of well casing</u> <i>N/A</i>		

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

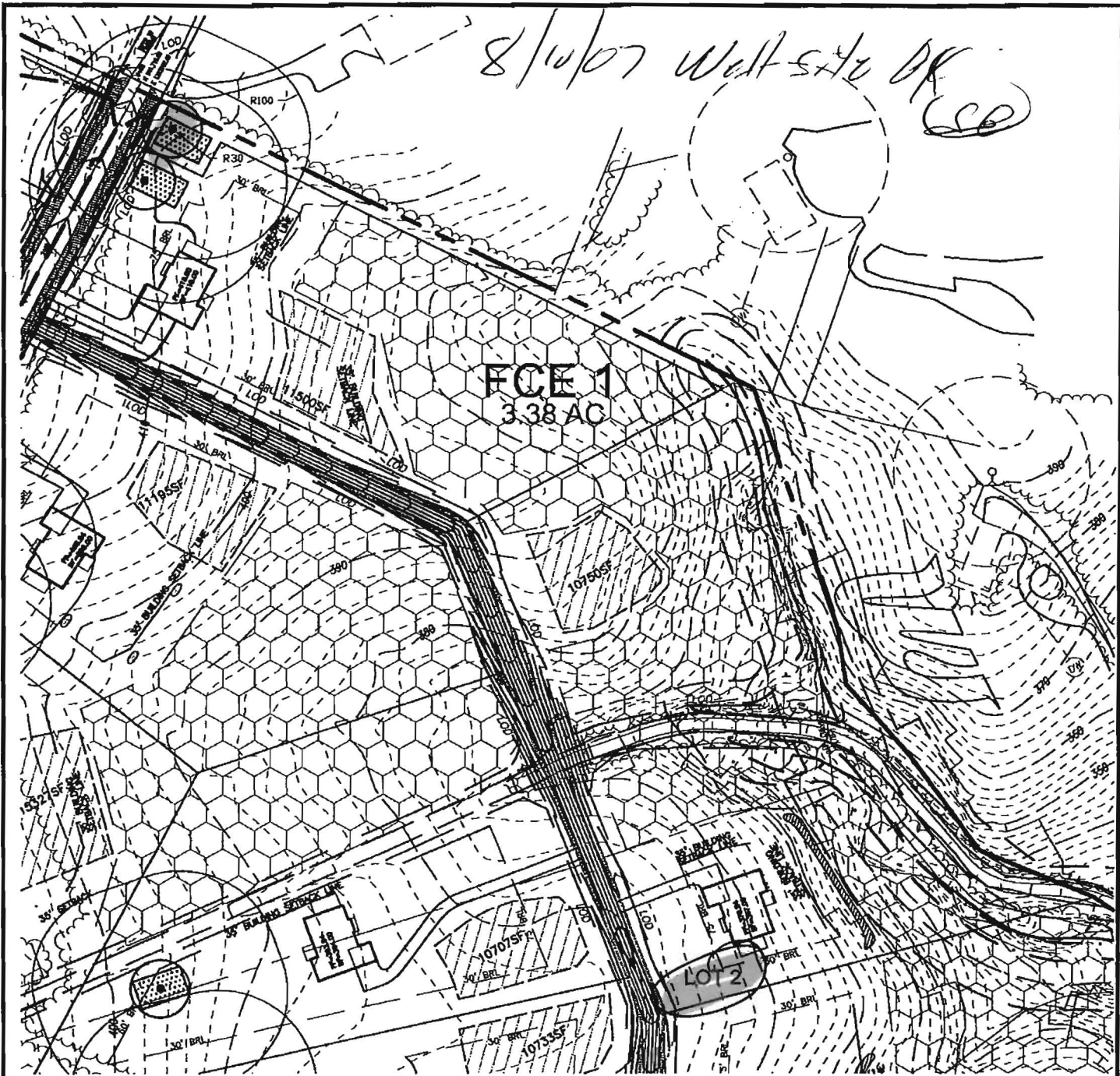
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Robert L. Feezer Digital signed by Robert L. Feezer
DN: cn=Robert L. Feezer, ou=Howard County Health Department, email=rlf@hcd.org, c=US
Date: 2011.09.19 15:39:01 -0500 9/19/2011
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: _____ Inspector: _____
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 outside of well cap/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 _____

8/10/07 Well site OK
CSD



SCALE: 1"=150'

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

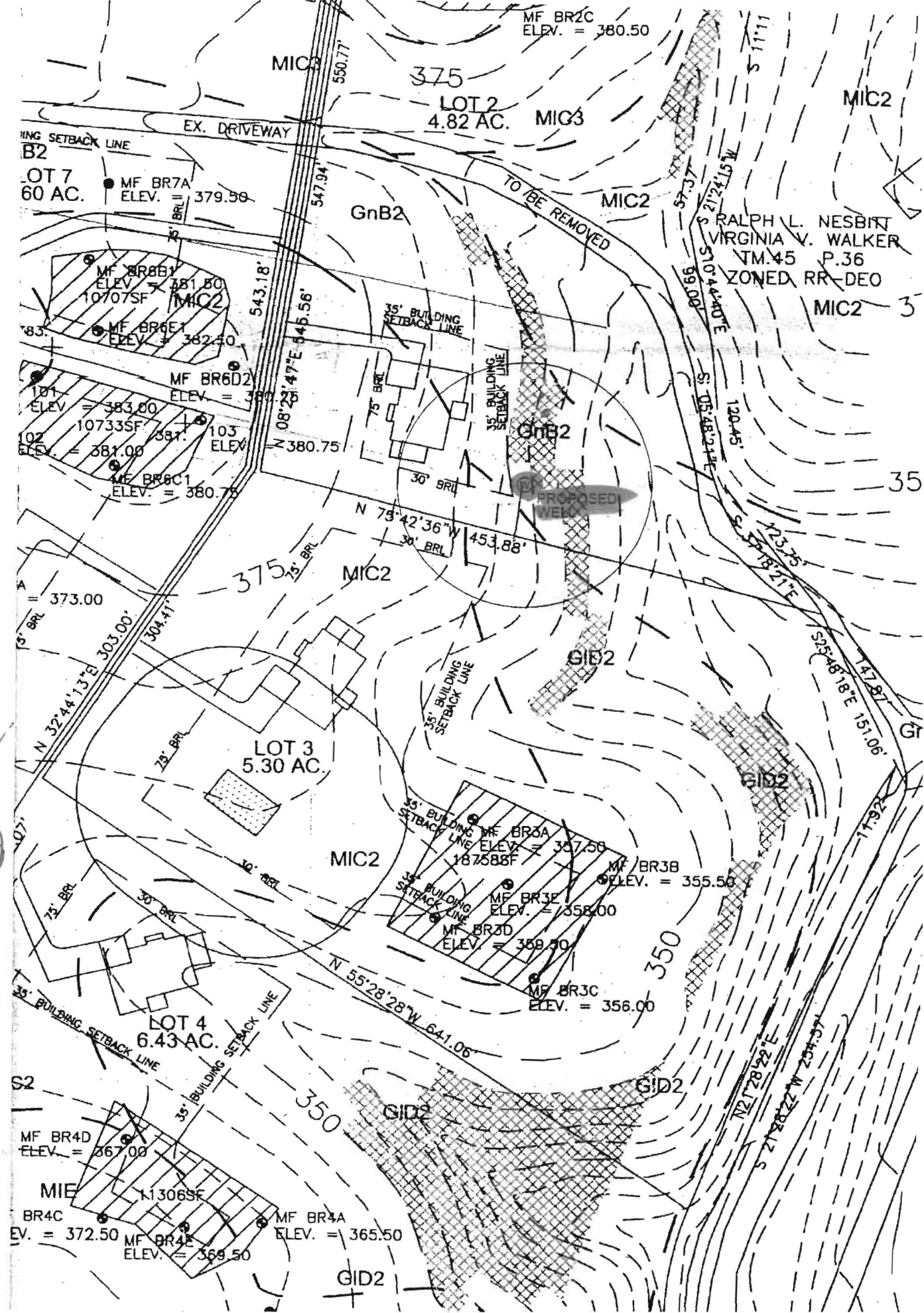
LIME KILN VALLEY II
 PHASE 1 & 2 (LOT 2)

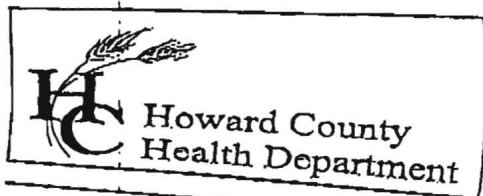
PROPOSED WELL LOCATION EXHIBIT

TAX MAP 40 & 45
 5TH ELECTION DISTRICT

PARCEL 114 & 12
 HOWARD COUNTY, MARYLAND

3/25/2011
Sketch
O.K.
BB





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:

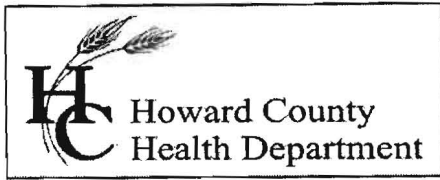
Well Site Location:	LOTS	
<u>Lime Kiln Valley II</u>	<u>1-37</u>	<u>Lime Kiln Rd</u>
Subdivision/Property Name	Lot#	Road Name

The well site has been staked by Robert Vogle
 (professional land surveyor or company employing professional land surveyors)
 on _____ (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 L. Beilenson, M.D., M.P.H., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – April 11, 2012

October 11, 2011

Homeowner
12767 Lime Kiln Road
Highland, MD 20777

**RE: Lime Kiln Valley, Lot 2
12767 Lime Kiln Road
Building Permit: B11001299
Well Permit: HO-95-2124**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **10/07/2011**. Final approval of the well line connection to the dwelling was granted on **08/23/2011**. The well construction was completed on **05/25/2011**. Water samples were collected on **10/03/2011**.

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. 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-95-2124. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the Annotated Code of Maryland, Environment Article, 9-1311, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,

Jeff Williams
Program Supervisor
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File

Water Testing Laboratories

of Maryland, Inc.

P.O. Box 712
Stevensville, MD 21666
410-643-7711

Feezer Company
6085 Marshalee Drive
Elkridge, MD 21075

Reporting Date: 10/7/2011
Report #: K7615

Submitted Sample Address: 12767 Lime Kiln Road
Highland, MD 20777
Submitted Sample Source: Holding tank
Date / Time Collected: 10/3/2011 9:59 AM
Sample Type: Drinking Water
Sampler/Company: D. Pitts 4322DP, WTL of MD
Field Record: Chlorine residual: Absent Clear when drawn
Well #: Too Muddy
Permit #: B11001299

Analytical Results

Parameter	Result	Units	Report Limit	MCL	Analytical Method
Total Coliforms	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
<i>E. Coli</i>	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
Nitrates + Nitrites	1.3	mg/L	1.0	10	EPA 353.2
Sand	Absent	P/A	Present/Absent	Present	Visual
Turbidity	0.7	NTU	0.5	10	SM 2130B
pH	6.7	SU	0.1	6.5-8.5 (SMCL)	SM 4500 H ⁺ B

Notes:

1. Bacteriological analysis of this sample indicates this water is **safe** for human consumption.
2. MCL is EPA's maximum contaminant level under primary drinking water regulations. SMCL is secondary maximum contaminant level and is the aesthetic quality only. If your result is above any MCL or SMCL, you may want to consider a water treatment system or a new well. Please check your local regulations for any restrictions or additional limits.
3. ND - Not Detected.
4. Sample received and examined within EPA's recommended holding time
5. Analyzed by Lab 214.
6. SM - Greenberg, Clesceri and Eaton, *Standard Methods for the Examination of Water and Wastewater*, 21st Ed.

Reported by,



C. Rodgers, Customer Service Representative

Reviewed by: _____

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DRY WELL#1 ✓
HO-95-2124

DATE WELL ABANDONED: MAY 6-2011 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: RONALD KYKER

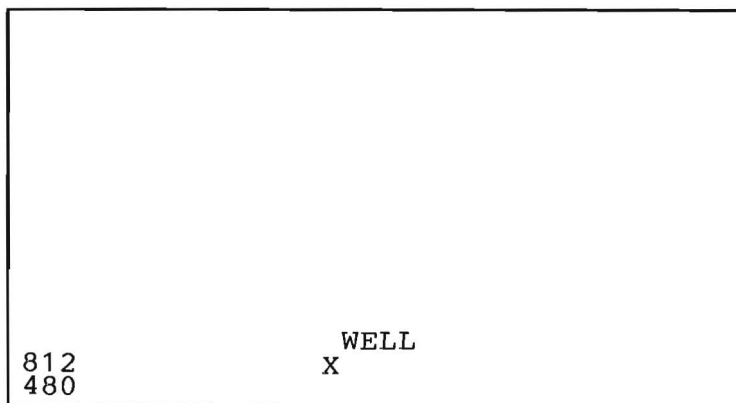
WELL DRILLERS LICENSE NUMBER: 296

* OWNER'S NAME: NV HOMES MD EAST DIVISION

CIRCLE: (MWD)MSD/MGD

SITE LOCATION MAP

* WELL LOCATION:
COUNTY: HOWARD
NEAREST TOWN: FULTON
TAX MAP 40-4 BLOCK 21 PARCEL 114
SUBDIVISION: LIME KILN VALLEY
SECTION: _____ LOT: 2
NEAREST ROAD: LIME KILN RD



* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGERED HAND DUG
- OTHER (specify) _____

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____
NONE

* SIZE OF CASING: _____ INCHES IN DIAMETER

* DEPTH OF WELL: 505 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
CONCRETE	0	505
VOLUME OF MATERIAL USED		

Ronald Kyker
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN
DENV 828 JULY 1997

296
LICENSE #

(MWD)MSD/MGD
CIRCLE ONE

MAY 6 2011
DATE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
 1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

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- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DRY WELL#1 ✓
 HO-95-2124

DATE WELL ABANDONED: MAY 6-2011 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: RONALD KYKER

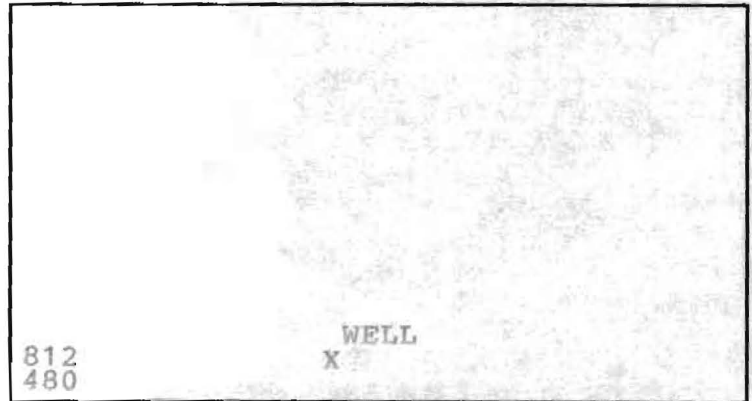
WELL DRILLERS LICENSE NUMBER: 296

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: NV HOMES MD EAST DIVISION

SITE LOCATION MAP

* WELL LOCATION:
 COUNTY: HOWARD
 NEAREST TOWN: FULTON
 TAX MAP 40-4 BLOCK 21 PARCEL 114
 SUBDIVISION: LIME KILN VALLEY
 SECTION: _____ LOT: 2
 NEAREST ROAD: LIME KILN RD



* TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED
- _____ BORED/AUGERED _____ HAND DUG
- _____ OTHER (specify) _____

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
CONCRETE	0	505
VOLUME OF MATERIAL USED		

* USE CODE:

- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:

- _____ STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify) _____
- _____ NONE

* SIZE OF CASING: _____ INCHES IN DIAMETER

* DEPTH OF WELL: 505 FEET DEEP

* WAS ANY CASING REMOVED? _____ YES _____ NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? _____ YES _____ NO

Ronald Kyker
 SIGNATURE- MASTER WELL DRILLER OR SUPERVISING SANITARIAN

296
 LICENSE #

MWD/MSD/MGD
 CIRCLE ONE

MAY 6 2011
 DATE

 WATER WELL ABANDONMENT-SEALING REPORT FORM

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- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DRY WELL #1
 HO-95-2124

DATE WELL ABANDONED: MAY 6-2011 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: RONALD KYKER

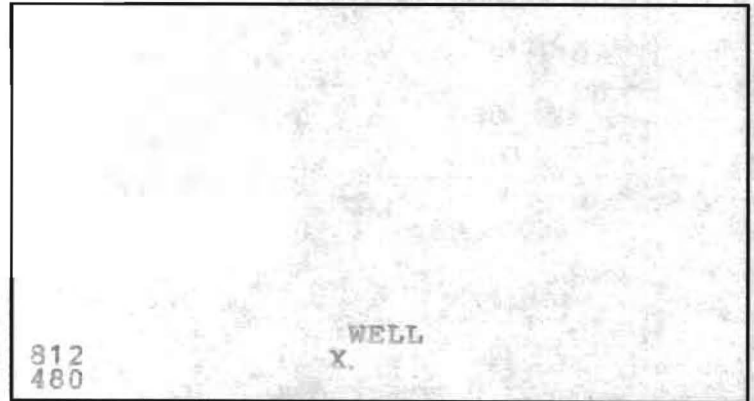
WELL DRILLERS LICENSE NUMBER: 296

* OWNER'S NAME: NV HOMES MD EAST DIVISION

CIRCLE: MWD/MSD/MGD

SITE LOCATION MAP

* WELL LOCATION:
 COUNTY: HOWARD
 NEAREST TOWN: FULTON
 TAX MAP 40-4 BLOCK 21 PARCEL 114
 SUBDIVISION: LIME KILN VALLEY
 SECTION: _____ LOT: 2
 NEAREST ROAD: LIME KILN RD



* TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED
- _____ BORED/AUGERED _____ HAND DUG
- _____ OTHER (specify) _____

* USE CODE:

- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:

- _____ STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify)
- _____ NONE

* SIZE OF CASING: _____ INCHES IN DIAMETER

* DEPTH OF WELL: 505 FEET DEEP

* WAS ANY CASING REMOVED? _____ YES _____ NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? _____ YES _____ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
CONCRETE	0	505
VOLUME OF MATERIAL USED		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE # 296

MWD/MSD/MGD
 CIRCLE ONE

MAY 6 2011
 DATE



MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
 1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DRY WELL#2 ✓
 HO-95-2124 ✓

DATE WELL ABANDONED: MAY 16-2011 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: RONALD KYKER

WELL DRILLERS LICENSE NUMBER: 296
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: NV HOMES MD EAST DIVISION

SITE LOCATION MAP

* WELL LOCATION: HOWARD
 COUNTY: _____
 NEAREST TOWN: FULTON
 TAX MAP 40 BLOCK 21 PARCEL 114
 SUBDIVISION: LIME KILN VALLEY
 SECTION: _____ LOT: 2
 NEAREST ROAD: LIME KILN RD



* TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED
- _____ BORED/AUGERED _____ HAND DUG
- _____ OTHER (specify) _____

* USE CODE:

- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:

- _____ STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify)
- _____ NONE

* SIZE OF CASING: _____ INCHES IN DIAMETER

* DEPTH OF WELL: 505 FEET DEEP

* WAS ANY CASING REMOVED? _____ YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? _____ YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
CONCRETE	0	505
VOLUME OF MATERIAL USED		

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN
Ronald Kyker
 DENV 828 JULY 1997

LICENSE # 296

CIRCLE ONE MWD/MSD/MGD DATE MAY 16 2011

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DRY WELL #2 ✓

HO-95-2124 ✓

DATE WELL ABANDONED: MAY 16-2011 ✓ (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

* PERMIT NUMBER OF REPLACEMENT WELL _____

* PERSON ABANDONING WELL: RONALD KYKER

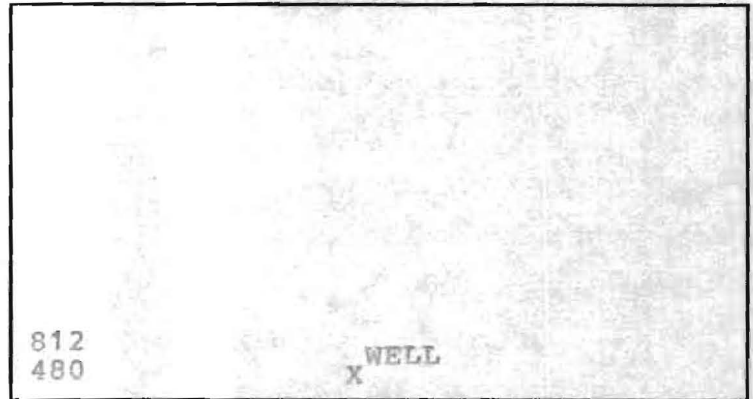
WELL DRILLERS LICENSE NUMBER: 296

* OWNER'S NAME: NV HOMES MD EAST DIVISION

CIRCLE: MWD/MSD/MGD

SITE LOCATION MAP

* WELL LOCATION: HOWARD
 COUNTY: _____
 NEAREST TOWN: FULTON
 TAX MAP 40 BLOCK 21 PARCEL 14
 SUBDIVISION: LIME KILN VALLEY
 SECTION: _____ LOT: 2
 NEAREST ROAD: LIME KILN RD



* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGERED HAND DUG
- OTHER (specify) _____

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____
- NONE

* SIZE OF CASING: _____ INCHES IN DIAMETER

* DEPTH OF WELL: 505 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
CONCRETE	0	505
VOLUME OF MATERIAL USED		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

Ronald Kyker

LICENSE # 296

CIRCLE ONE MWD/MSD/MGD

DATE May 16, 2011



November 19, 2010

**Howard County Environmental Health Department
Well & Septic Program**

7178 Columbia Gateway Drive
Columbia, Maryland 21046
Attn: Mr. Mike Davis

Re: Lime Kiln Valley II, Lot 2
12767 Lime Kiln Road
New Proposed Well Request

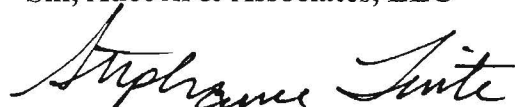
Dear Mr. Davis:

As per our discussion, we are enclosing two (2) redlined copies of the signed Percolation Certification Plan for the above referenced property. The purpose of these redlined plans is to investigate the possibility of drilling a new well for Lot 2 in the redlined location shown on the attached plans. The current well location would require a direction bore under a stream and wetlands for approximately 400 feet and require the installation of approximately 1200 feet of water house connection. See the attached final plat showing the stream, wetlands, and forest conservation areas on this lot.

We are requesting an assessment be performed that would determine whether pretreatment for the septic easements on Lots 6 and 7 would or would not be required for the proposed well location. NV Homes has buyers for Lots 6 and 7 and the houses are currently under construction. We are hoping due to the nature of the slope of the septic easements that pretreatment will not be required. If it is determined that pretreatment is required, we will not continue to pursue a new well location.

If you should have any additional questions or comments regarding this matter, please do not hesitate to contact our office or email me at stephanie@saaland.com.

Sincerely,
Sill, Adcock & Associates, LLC



Stephanie Tuite, RLA, PE, LEED AP

cc: Ryan Johnson, NV Homes