

C1 3885

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS 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 A45626

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3855

OWNER TOLL BROTHERS STREET OR RFD 3705 JENNINGS CHAPEL TOWN WOODBINE SUBDIVISION DOERER PROPERTY SECTION LOT

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Brown shale, Gray Limestone, Brown, Gray Limestone, White, Gray Limestone.

GROUTING RECORD form with fields for YES/NO, CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for STEEL (ST), CONCRETE (CO), PLASTIC (PL), OTHER (OT), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for STEEL (ST), BRASS (BR), OPEN HOLE (HO), PLASTIC (PL), OTHER (OT), screen type or open hole.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES (Y) NO (N)

CIRCLE APPROPRIATE LETTER A, E, P

DRILLERS LIC. NO. MSD 009, DRILLER SIGNATURE, LIC. NO. D

SITE SUPERVISOR responsible for sitework if different from permittee

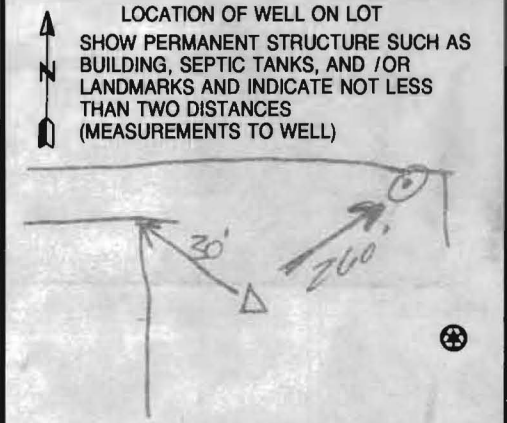
DEPTH (nearest ft.) table with columns 1-21, 23-26, 30-32, 36-39, 41-44, 45-47, 51-54. Includes SLOT SIZE and DIAMETER OF SCREEN.

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

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



B 1 0955  
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-3855  
fill in this form completely

W519654 please type 50

Date Received (APA)

11-7-03  
8 MM DD YY 13

OWNER INFORMATION

Toll Brothers  
15 Last Name Owner First Name 34  
15143 Saoling Ridge Dr  
36 Street or RFD 55  
Doylen, Md 21036  
57 Town 70 State 72 Zip 76

B 3

LOCATION OF WELL

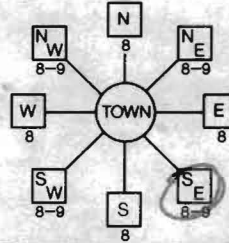
Howard  
8 COUNTY 21  
Jennings Chapel  
23 SUBDIVISION 42  
SECTION 44 46 LOT 48 50  
Woodbine  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 8 MI  
73 76 77 78

DRILLER INFORMATION

Allen Compton M S D 009  
76 Driller's Name License No. 81  
Fogles Well Drilling  
Firm Name  
580 Obrecht RD  
Address  
Date 11-5-03  
Signature

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



3765 Jennings Chapel  
11 NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH N  
WEST W EAST E  
SOUTH S  
34 250 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 FT  
TAX MAP: 20 BLK: 12 PARCEL 123

B 2

WELL INFORMATION

APPROX. PUMPING RATE 5  
(GAL. PER MIN.) 8 12  
AVERAGE DAILY QUANTITY NEEDED 500  
(GAL. PER DAY) 14 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  
COUNTY NAME A45626  
COUNTY NO.  
STATE SIGNATURE INSERT S → 41  
DATE ISSUED 11-18-03  
43 MM DD YY 48 CO SIGNATURE Steve R. King 11/18/04 EXP. DATE  
NORTH GRID 50 523 000 55 EAST GRID 57 779 000 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  
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
- 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

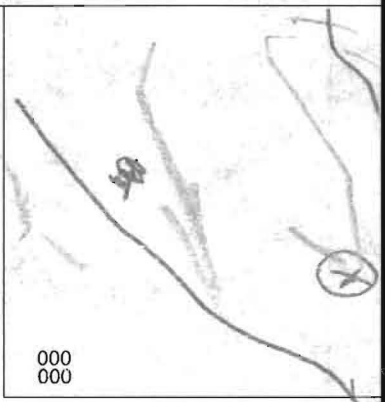
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER - - - - - G - - - - -  
PERMIT No. HO-94-3855  
70 71 72 73 74 75 76 77 78 79

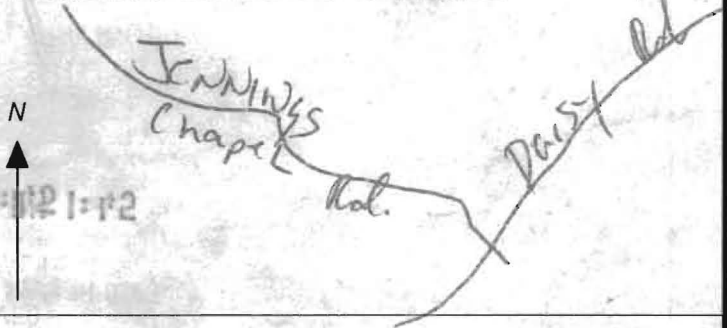
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER  
1.  
2.  
3.

WRITE THE BOX NUMBER FROM THE MAP HERE  
E 7800  
N 5203



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

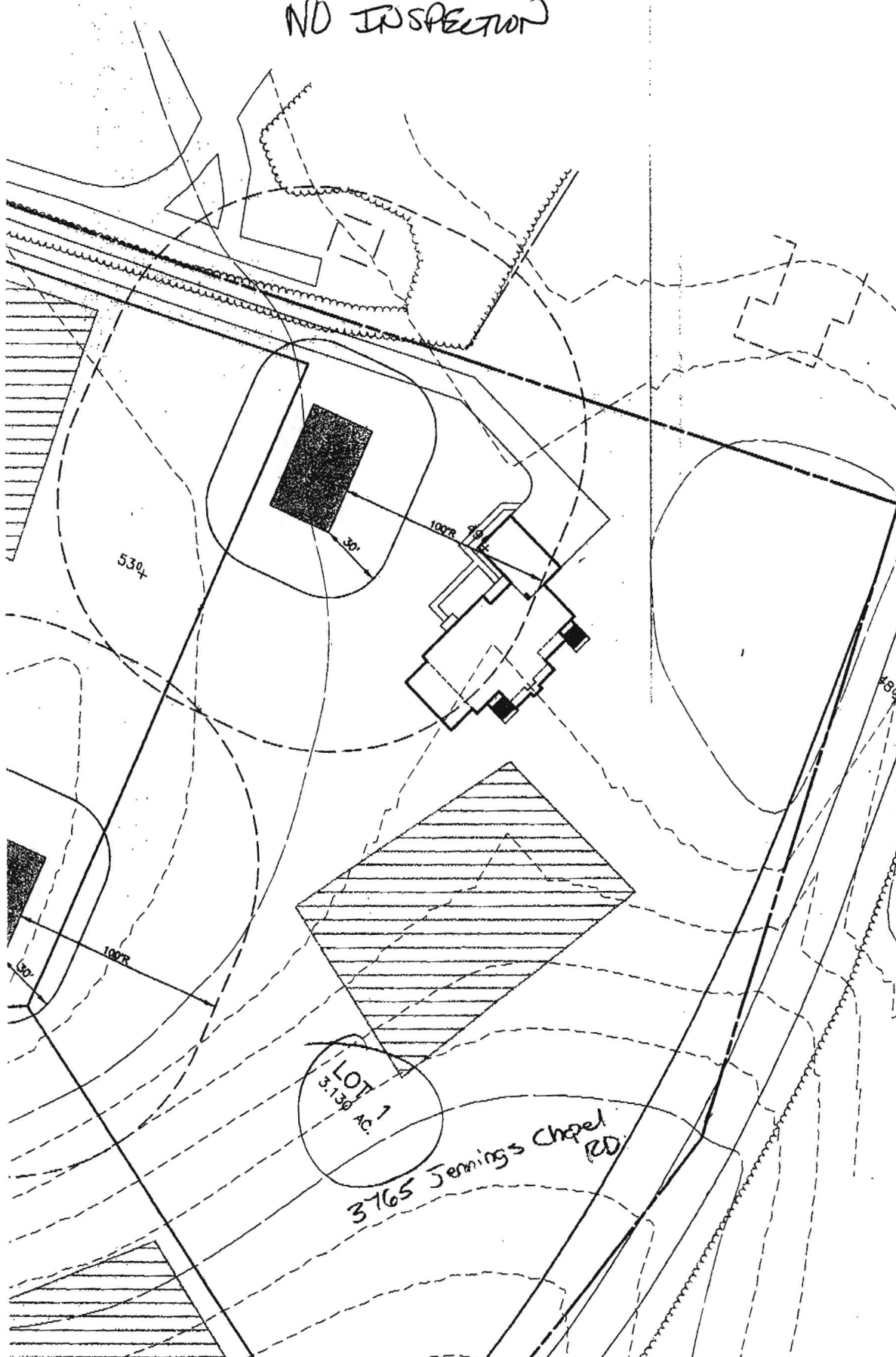
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

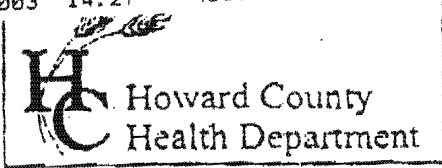






Well site STARTED BY LICENSED SURVEYOR  
NO INSPECTION





3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(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

TO ALL INTERESTED PARTIES

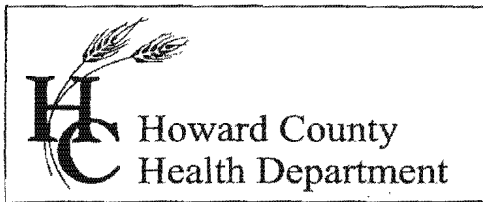
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by Benchmark  
(professional land surveyor or company employing professional land surveyors)  
on 11/14/03 (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 6/10/03

DOERER PROPERTY  
Lots 1, 2, + 3



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

April 25, 2006

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

**SENT VIA FACSIMILE 443-535-9297**

RE: Doerer Property, Lot 1  
3765 Jennings Chapel Road  
Woodbine, MD 21797  
BP #: B00149223  
Well Permit # HO-94-3855

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 04/25/2006. Final approval of the well line connection to the dwelling was approved on 01/04/2006.**

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-94-3855. 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: 04/21/2006  
Date of Well Completion: 12/02/2003

Approving Authority,

Brian Baker, 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 #:	58892	Account #:	1930
Reference:	Toll Brothers Lot 46	Company:	Fogle's Well Drilling
Location:	3765 Jennings Chapel Road Woodbine, MD 21797	Requested By:	Dave Fogle
Date/ Time Collected:	4/21/2006 1030	Source:	Well Water
Date/Time Rec'd:	4/21/2006 1451	Site:	Kitchen Sink Tap
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	V.M. Fadoul 6804VF-FS	pH:	6.2
		Well #:	HO-94-3855

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYS
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	4/22/2006 / 1000 / AD/CM
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	4/22/2006 / 1000 / AD/CM
Nitrate	1.16	mg/L	10	601	4/21/2006 / 1500 / CWM
Turbidity	2.12	NTU	<10	SM18 2130B	4/21/2006 / 1555 / AD/CM
Sand	NS	mg/L	5	Visual/Gravimetric	4/21/2006 / 1555 / AD/CM

**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 &amp; Occupancy

Building Permit # : B000149223

Date Reported: 4/24/2006