

C1 6527 SEQUENCE NO. (MDE USE ONLY)  
 1 2 3 4  
 (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

ST/CO USE ONLY DATE Received MM DD YY DATE WELL COMPLETED MM DD YY Depth of Well 22 200 26 6/11/07 PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-95-1059  
 8 13 15 20 (TO NEAREST FOOT) O.K. (BB) 28 29 30 31 32 33 34 35 36 37

OWNER Toll Brothers last name first name STREET OR RFD Edgebrook Way TOWN Greenleaf  
 SUBDIVISION Edgebrook Farms SECTION LOT 59

**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	
BROWN SANDY SOIL	0	22	
MEDIUM HARD BROWN SAND ROCK	22	30	
SOFT BROWN WEATHERED SAND ROCK	30	50	
HARD GRAY ROCK	50	200	
WATER BEARING AT 87 FT. & 165 FT.			

**GROUTING RECORD** yes no  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  Y  N  
 TYPE OF GROUTING MATERIAL (Circle one) CEMENT  CM BENTONITE CLAY  BC  
 NO. OF BAGS <sup>45 46</sup> 18 NO. OF POUNDS <sup>45 46</sup> 1672  
 GALLONS OF WATER 108  
 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 54 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 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)  
 PL 6 54  
 60 61 63 64 66 67 70

**OTHER CASING (if used)**  
 diameter depth (feet) from to  
 A C H I N G

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
 ST STEEL  BR BRASS  HO OPEN HOLE  
 PL PLASTIC  OT OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0  
 WELL HYDROFRACTURED  Y  N

**C 2** DEPTH (nearest ft.)

1	2	3	4	5	6
8	9	11	15	17	21
23	24	26	30	32	36
38	39	41	45	47	51

DEPTH (nearest ft.)  
 1 2 3 4 5 6  
 40 54 200

CIRCLE APPROPRIATE LETTER  
 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 28.04.04 "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. MWD 355  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC. NO. D

SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) from to  
 56 60 68

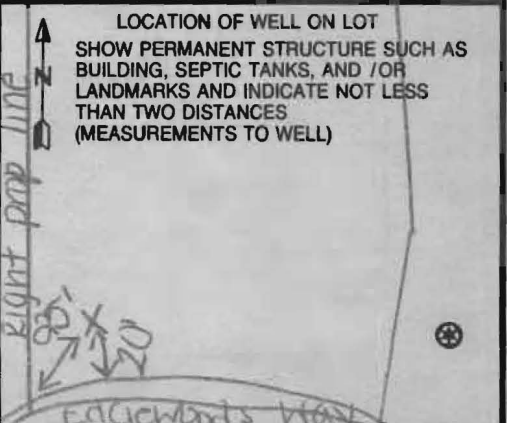
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68  
 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) W Q  
 70 72 74 75 76

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3** **PUMPING TEST**  
 1 2  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min.) 12  
 METHOD USED TO MEASURE PUMPING RATE timer/bucket  
 WATER LEVEL (distance from land surface) BEFORE PUMPING 40 ft. WHEN PUMPING 109 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) LAND SURFACE (nearest foot)  
 + above }  
 - below }



B 1 9375  
1 2 3 6

SEQUENCE NO.  
(MDE USE ONLY)

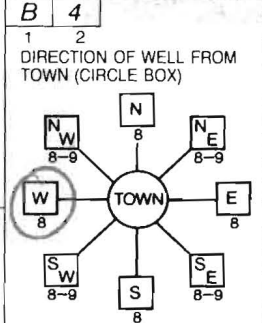
STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
526283 please type

STATE PERMIT NUMBER  
HO-95-1059  
70 fill in this form completely 79

Date Received (APA)  
8 MM DD YY 13  
OWNER INFORMATION  
15 Last Name 34 First Name  
36 Street or RFD 55  
57 Town 70 State 72 Zip 76  
Toll Brothers  
2164 Columbia Gateway Dr. Ste 230  
Columbia MD 21046

B 3 LOCATION OF WELL  
8 COUNTY 21  
23 SUBDIVISION 42  
SECTION 44 46 LOT 48 50  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 2 2/10  
73 76 77 78

DRILLER INFORMATION  
61 Driller's Name 76 License No. 81  
Firm Name  
Address  
Signature Date  
Michael Barlow MWD 355  
Barlow Well Drilling Srvc  
533 Underwood Ln, Bel Air, Md  
3/13/07 21014



B 4  
1 2  
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
11 NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
34 35 37  
DISTANCE FROM ROAD  
ENTER FT OR MI 38 39  
TAX MAP: 21 BLK: 22 PARCEL 90

B 2 WELL INFORMATION  
1 2  
APPROX. PUMPING RATE (GAL. PER MIN.) 5  
8 12  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500  
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
22  
 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 (13) A518964  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S  
DATE ISSUED 4/8/2007 Brian Baker 4/8/2008  
43 MM DD YY 48 CO SIGNATURE EXP. DATE  
NORTH GRID 518 000 EAST GRID 793 000  
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.  
2.  
3.  
WRITE THE BOX NUMBER FROM THE MAP HERE  
E 793  
N 5218



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)  
39  
 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 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 HO-2006-G-004  
PERMIT No. HO-95-1059  
70 71 72 73 74 75 76 77 78 79

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



**MICHAEL BARLOW WELL DRILLING & SERVICE, INC.**

**522 Underwood Lane  
(410) 838-6910**

**Bel Air, Maryland 21014  
Fax (410) 838-3582**

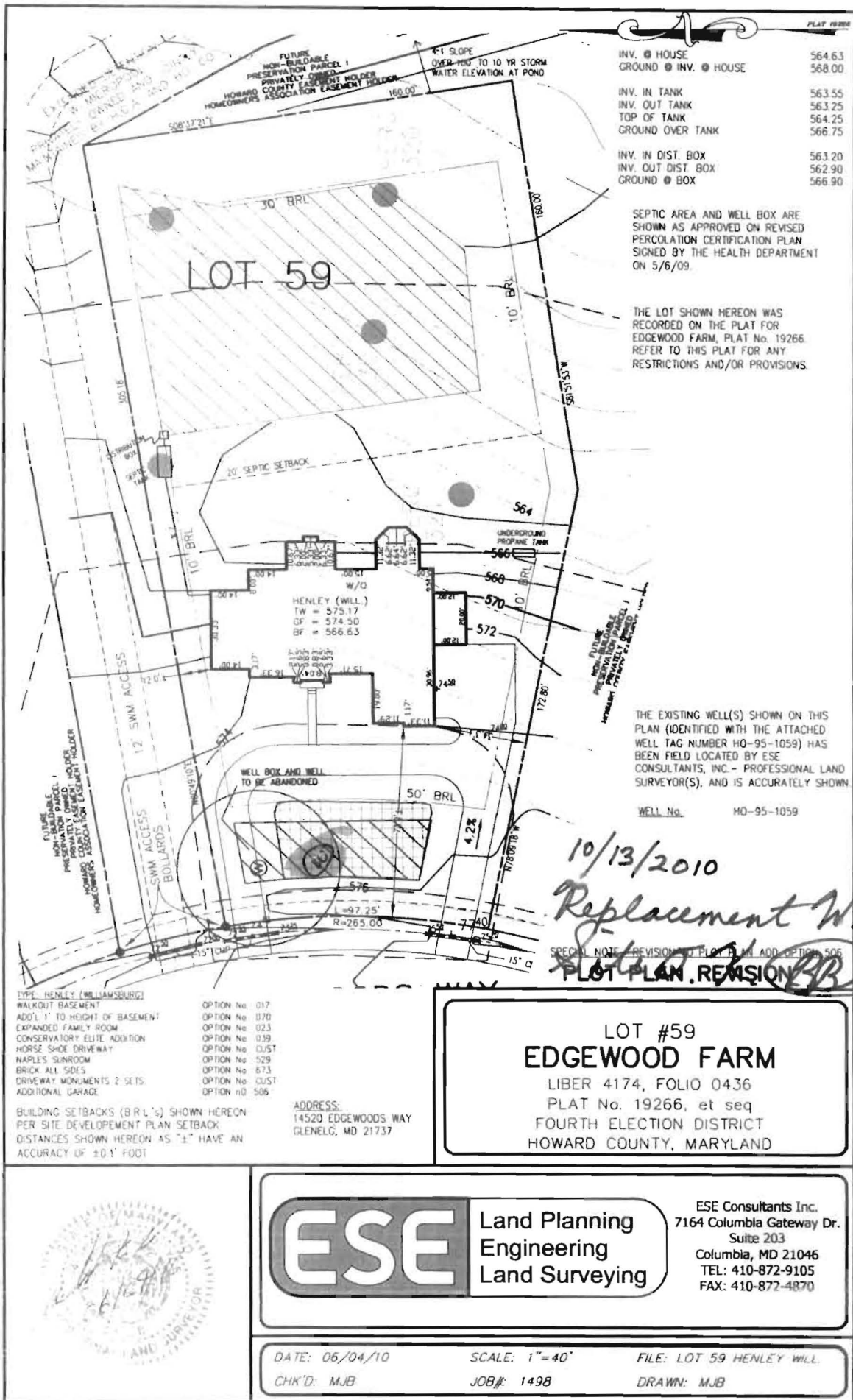
**WELL YIELD REPORT**

Date Test Completed: April 16, 2007

Well Depth: 200 feet

Customer	Toll Brothers	Permit #	HO-95-1059
Road	Edgewoods Way	Subdivision	Edgewood Farms
City	Glenelg	Section	
State	Maryland	Lot #	59

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
1:15 PM	40	5	12.00
1:30 PM	69	5	12.00
1:45 PM	69	5	12.00
2:00 PM	69	5	12.00
2:15 PM	69	5	12.00
2:30 PM	69	5	12.00
2:45 PM	69	5	12.00
3:00 PM	69	5	12.00
3:15 PM	69	5	12.00
3:30 PM	69	5	12.00
3:45 PM	69	5	12.00
4:00 PM	69	5	12.00
4:15 PM	69	5	12.00



PLAT 19266

INV. HOUSE	564.63
GROUND INV. HOUSE	568.00
INV. IN TANK	563.55
INV. OUT TANK	563.25
TOP OF TANK	564.25
GROUND OVER TANK	566.75
INV. IN DIST. BOX	563.20
INV. OUT DIST. BOX	562.90
GROUND BOX	566.90

SEPTIC AREA AND WELL BOX ARE SHOWN AS APPROVED ON REVISED PERCOLATION CERTIFICATION PLAN SIGNED BY THE HEALTH DEPARTMENT ON 5/6/09.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR EDGEWOOD FARM, PLAT No. 19266. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-1059) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC. - PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN

WELL No. HO-95-1059

10/13/2010  
 Replacement Well  
 SPECIAL NOTE: REVISION TO PLAT PLAN ADD OPTION 506  
 PLOT PLAN REVISION BB

- TYPE: HENLEY (WILLIAMSBURG)
- WALKOUT BASEMENT
  - ADDT. 1" TO HEIGHT OF BASEMENT
  - EXPANDED FAMILY ROOM
  - CONSERVATORY ELITE ADDITION
  - HORSE SHOE DRIVEWAY
  - NAPLES SUNROOM
  - BRICK ALL SIDES
  - DRIVEWAY MONUMENTS 2 SETS
  - ADDITIONAL GARAGE

- OPTION No. 017
- OPTION No. 020
- OPTION No. 023
- OPTION No. 039
- OPTION No. 037
- OPTION No. 529
- OPTION No. 673
- OPTION No. 037
- OPTION No. 506

BUILDING SETBACKS (BRL'S) SHOWN HEREON PER SITE DEVELOPMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT

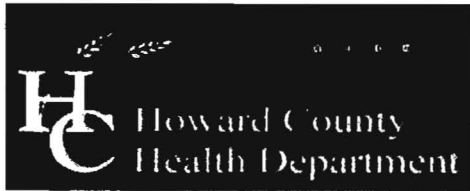
ADDRESS:  
 14520 EDGEWOODS WAY  
 GLENELG, MD 21737

LOT #59  
 EDGEWOOD FARM  
 LIBER 4174, FOLIO 0436  
 PLAT No. 19266, et seq  
 FOURTH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND



ESE Consultants Inc.  
 7164 Columbia Gateway Dr.  
 Suite 203  
 Columbia, MD 21046  
 TEL: 410-872-9105  
 FAX: 410-872-4870

DATE: 06/04/10      SCALE: 1"=40'      FILE: LOT 59 HENLEY WILL.  
 CHK'D: MJB      JOB#: 1498      DRAWN: MJB



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(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

### 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:  
Triadelphia Xing      59      Edgewoods Way  
Subdivision/Property Name      Lot#      Road Name

The well site has been staked by \_\_\_\_\_,  
(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