

C1 15938 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 A-520126

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED MM DD YY 03 29 06

DATE WELL COMPLETED MM DD YY 03 29 06

Depth of Well 22 160 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" NO. 55-0218

OWNER: Trinity Two County Partnership LLC West Friendship TOWN: FREDERICK RD SUBDIVISION: Terpapin Preserve SECTION: LOT: P.P.A

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandy, Sand Stone, MICKA, etc.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS (21), NO. OF POUNDS (450), GALLONS OF WATER (126), DEPTH OF GROUT SEAL (38 ft).

CASING RECORD: MAIN CASING TYPE (PL), Nominal diameter top (main) casing (6 inch), Total depth of main casing (61 feet).

OTHER CASING (if used) table with columns: diameter inch, depth (feet) from, to.

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

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER: A (ABANDONED AND SEALED), 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...

DRILLERS LIC. NO. 1 M SD 112 DRILLERS SIGNATURE: [Signature] LIC. NO. D

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

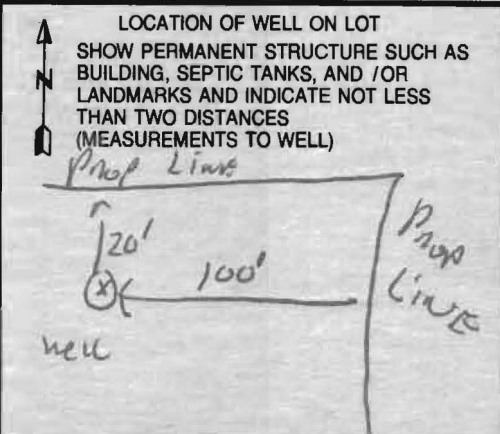
DEPTH (nearest ft.) table with columns: 1, 2, 3, 4, 5, 6, 7, 8, 9, 11, 15, 17, 21, 23, 24, 26, 30, 32, 36, 38, 39, 41, 45, 47, 51. Includes SLOT SIZE and DIAMETER OF SCREEN.

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 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (15 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (60 ft. before, 75 ft. when pumping), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED: DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31), PUMP HORSE POWER (37), PUMP COLUMN LENGTH (43), CASING HEIGHT (+ above, - below).



B 1 0949 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 523841

STATE PERMIT NUMBER HO-95-0218 fill in this form completely

DATE RECEIVED (APA) 12/21/05 OWNER INFORMATION Thirtly Two-Forty Partnership LLC 10749 FALLS RD. Ste 200 Lutherville MD 21093-7013

LOCATION OF WELL Howard TERRAPIN PRESERVE West Friendship MILES FROM TOWN 0

DRILLER INFORMATION RALPH E MAYNE M S D 117 RALPH E. MAYNE INC 17024 Hardy Rd. Mt. Airy MD 21271 Dec 13 2005

Clover Hill Drive 950 15 BLK 11 PARCEL 22

WELL INFORMATION APPROX. PUMPING RATE 5 AVERAGE DAILY QUANTITY NEEDED 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A520126 DATE ISSUED 1/11/06

USE FOR WATER DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6 1/2 INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 3/29/06 Pump + Grout BB

METHOD OF DRILLING (circle one) AIR-ROTARY

REPLACEMENT OR DEEPEMED WELLS THIS WELL WILL NOT REPLACE AN EXISTING WELL

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO-95-0218

SPECIAL CONDITIONS Existing well must be properly abandoned

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0218
 Location of property (road) Clover Hill Rd
 Subdivision Terrapin Preserve Lot 10A Block 11 Plat 15 Sec. Pa. 72
 Well Driller Ralph Mayne Owner 32-90 Partnership

Depth of well 160
 Distance of measuring point (M.P.) above ground 2R
 Static water level (S.W.L.) below M.P. 60R

I. High rate pumping -- reservoir drawdown

Time pump started 8:15 Pumping rate 15 GPM
 Total time 15 min to reach pumping water level 75 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:15	60 R	4 Sec		15 GPM
			Test Started	
8:30	75 R	4 Sec		15 GPM
8:45	75 R	4 Sec		15 GPM
9:00	75 R	4 Sec		15 GPM
9:15	75 "	4 "		15 "
9:30	75 "	4 "		15 "
9:45	75 "	4 "		15 "
10:00	75 R	4 Sec		15 GPM
10:15	75 R	4 Sec		15 GPM
10:30	75 R	4 Sec		15 GPM
10:45	75 "	4 "		15 "
11:00	75 "	4 "		15 "
11:15	75 R	4 "		15 GPM
11:30	75 R	4 Sec		15 GPM
11:45	75 R	4 Sec		
12:00	75 R	4 Sec		
12:15	75 R	4 Sec		
12:30	75 R	4 Sec		

DH 2109

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 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: PHS Division of Burgess Telephone #: 410-861-4090
Address: 900A Wakefield Valley Rd, Inc
New Windsor MD 21776

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): Patrick J. Heburn License# 4409

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Douglas Homes Telephone #: 410-740-0522
Subdivision: Terra Pin Reserve Lot #: A Well Tag #: HO-95-0218
Site Address: 12672 Freedom Road
West Friendship MD 21794

Submersible Pump Data

Make: Goulds
Model #: 5GS 0542AC
Pump Capacity: 5 GPM
Well Yield: 2 GPM

Pitless Adapter

Make: Campbell
Model #: PA 8006X1
Depth: 36" min
NSF approved: [checked]

Well Cap and Electric Conduit

Two piece watertight cap: [checked]
Screened, vented well cap:
Cap secured to casing:
Conduit min 1 1/2" B.G.:
Conduit secured to well cap:

Depth of well encountered at time of pump installation: 160 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house

Type: 1" Flex
PSI: 200 (160 psi min)
Depth of supply line: 36" min

House Connection

PVC sleeved to undisturbed soil at wall penetration: [checked]
Approximate length of sleeve: 5
Sleeve caulked and 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: [Signature] date: 8/11/08

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

Date Insp. Requested: Date Insp. Approved: 8/12/08 [Signature]
Inspection Data: Pitless adapter and 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 installed inside of well casing [checked]
Correct well tag attached properly and casing 3" above finished grade [checked]
Water supply line sleeved adequately at house connection [checked]
Adequate grout observed below pitless adapter [checked]

N 596,520

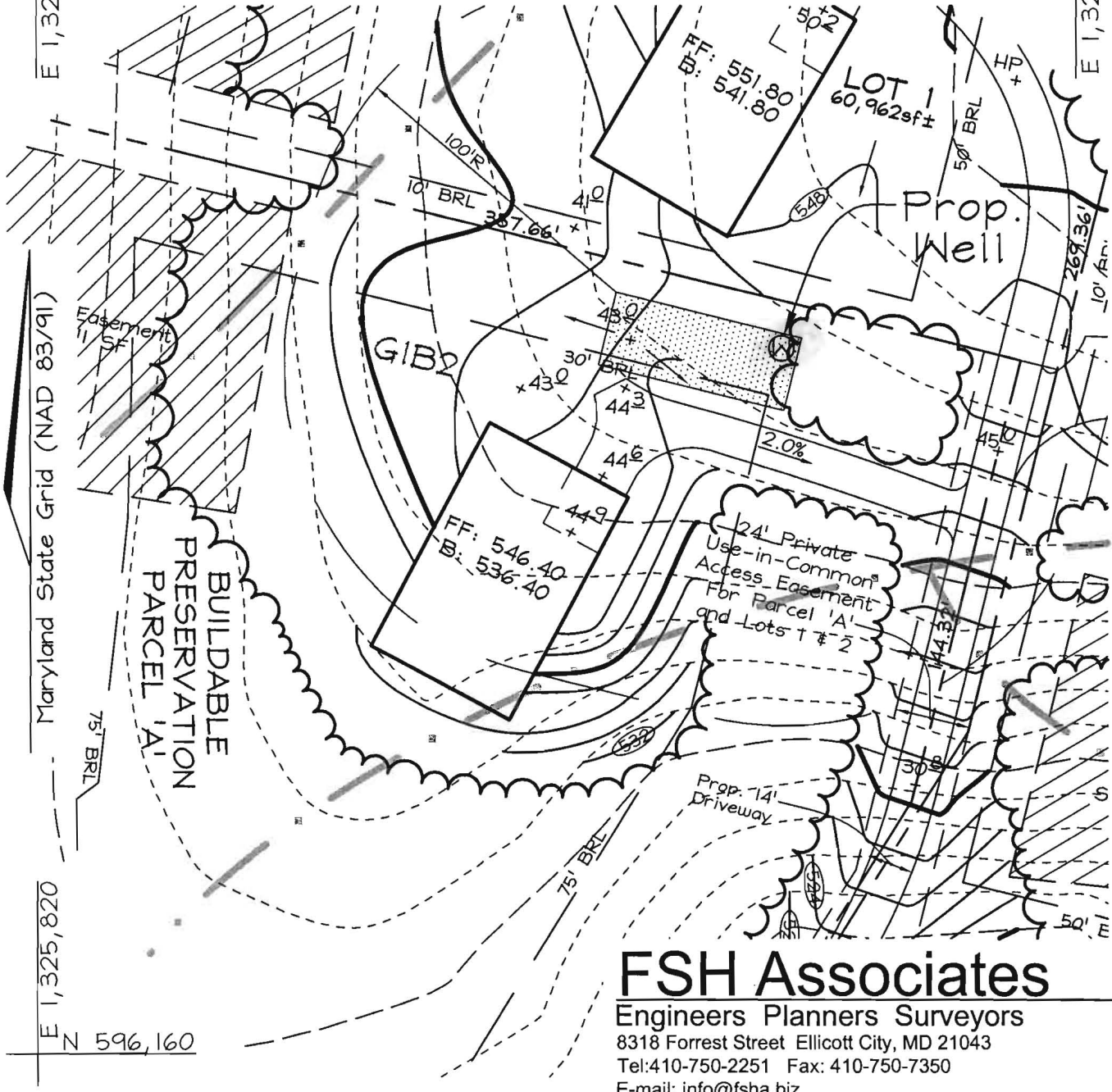
N 596,520

E 1,325,820

E 1,326,150

Note:
The proposed well shown on this plan will be
staked out in the field by FSH Associates,
Professional Surveyor prior to well drilling.

1/11/06 well site
OK (signature)



FSH Associates

Engineers Planners Surveyors
8318 Forrest Street Ellicott City, MD 21043
Tel: 410-750-2251 Fax: 410-750-7350
E-mail: info@fsha.biz

DESIGN BY: PS
 DRAWN BY: CD
 CHECKED BY: ZYF
 SCALE: 1"=50'
 DATE: Nov. 03, 2005
 W.O. No.: 3229
 SHEET No.: 1 OF 1

WELL PERMIT PLAN TERRAPIN PRESERVE

BUILDABLE PRESERVATION PARCEL "A"

TAX MAP 15 GRID II
3RD ELECTION DISTRICT

PARCEL 72
HOWARD COUNTY, MARYLAND



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

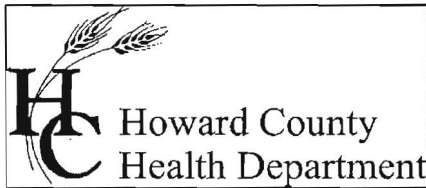
ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by FSH ASSOCIATES INC on NOV 23 2005 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN Lots 1- to 5~~4~~ and Preservation Parcel A
TERRAPIN Preserve Sub-



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(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

February 5, 2009

Homeowner
12672 Frederick Road
West Friendship, MD 21794

SENT VIA FACSIMILE 410-740-0525

RE: Terrapin Preserve, Parcel A
12672 Frederick Road
BP# B08000505
Well Tag #: HO-95-0218

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 07/11/08. Final approval of the well line connection to the dwelling was approved on 8/12/08.**

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.

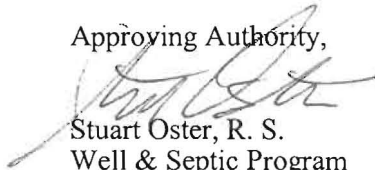
INTERIM CERTIFICATE OF POTABILITY

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-95-0218. 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) 313-1792 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 02/04/2009
Date of Well Completion: 03/29/2006

Approving Authority,


Stuart Oster, R. S.
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File

From: TRACE LABS INC

4105849117

02/05/2009 15:11

#107 P.001/001



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.trace-labs.com / Email: info@trace-labs.com

Maryland State Certified Laboratory # 318

CERTIFICATE OF ANALYSIS

Requester:
 Douglas Homes
 5034 Dorsey Hall Drive Suite 102
 Ellicott City, Maryland 21041

S/O Number: 71333
Report Date: February 5, 2009

Property Sampled: 12672 Frederick Road, 21794

County: Howard
Subdivision: Terrapin Preserve **Tax Map #:** 15
Lot #: Par A **Parcel #:** 72
Building Permit #: B800505

Date/Time Collected: February 4, 2009 at 10:45 am
Date/Time Received: February 4, 2009 at 11:30 am

Sample Location: Kitchen Tap **Samples Iced:** Yes
Sampler ID: 9813AM **Residual Cl₂ <0.1 mg/L:** Yes

Well Tag Number: HO-95-0218
Well Condition: 2-Piece Cap
 Satisfactory

Water Conditioning/Treatment: None

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	1.5 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	<1.0 NTU	EPA 180.1	10 NTU	Pass
pH	6.1 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.