

C1 | 07657 | SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.
 COUNTY NUMBER A513199A

ST/CO USE ONLY
 DATE Received
 MM DD YY
 8 13

DATE WELL COMPLETED
 MM DD YY
 10 22 00

Depth of Well
 22 325 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
H0-94-2601

OWNER Brantwood LLC first name
 STREET OR RFD Argent TOWN Ellicott City
 SUBDIVISION Brantwood SECTION 2/2 LOT 1

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	
Sand	0	76	
Gray Mica	76	325	✓

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 25 NO. OF POUNDS 2350
 GALLONS OF WATER 150
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 72 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) 80
 60 61 63 64 66 70

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

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. MS D224
 DRILLERS SIGNATURE Joseph P. Mayne
 (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. D

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

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

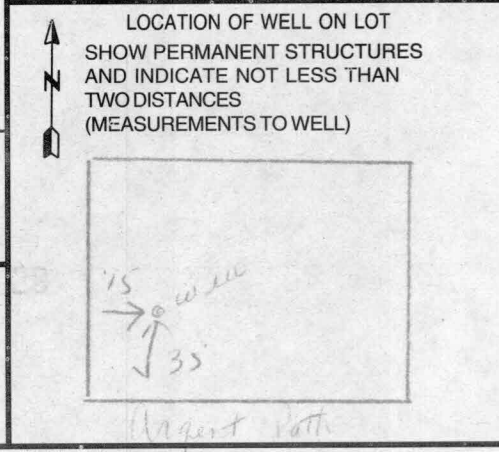
SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 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
 PUMPING RATE (gal. per min.) 5.5
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 24 ft.
 WHEN PUMPING 163 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 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 } 2 (nearest foot)



B 1 08183

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-2601
fill in this form completely

Date Received (APA) 021800
8 MM DD YY 13

OWNER INFORMATION

Brantwood, L.L.C.
15 Last Name Owner First Name 34
8835 - P Columbia 100 Parkway
36 Street or RFD 55
Columbia, MD 21045
57 Town 70 State 72 Zip 76

B 3

LOCATION OF WELL

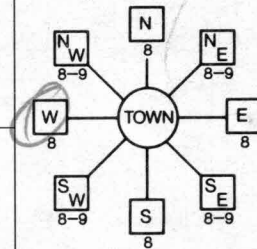
Howard
8 COUNTY 21
Brantwood
23 SUBDIVISION 42
SECTION 2 LOT 1 Area 2
44 46 48 50
Pine Orchard
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 M I
73 76 77 78

DRILLER INFORMATION

Robert L. Cline M W D 139
Driller's Name 76 License No. 81
Cline & Duvall, Inc.
Firm Name
8093 Hillmark Ct., Frederick, MD 21704
Address
Robert L. Cline 2/16/00
Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Argent Path
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N E S WEST EAST SOUTH
34 15 37
DISTANCE FROM ROAD SA.
ENTER FT OR MI 38 39
TAX MAP: 23 BLK: _____ PARCEL _____

B 2

WELL INFORMATION

5
APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
300
AVERAGE DAILY QUANTITY NEEDED (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 County A513199A
COUNTY NAME COUNTY NO.
STATE SIGNATURE _____ INSERT S → 41
DATE ISSUED 022800 A.M.C.M.D. 2/28/01
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 520 000 EAST GRID 820 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 250 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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 DEEPEINED 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 DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52

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

APPROP. PERMIT NUMBER HO 98 G A P 6003
54 63
PERMIT No. HO-94-2601
70 71 72 73 74 75 76 77 78 79

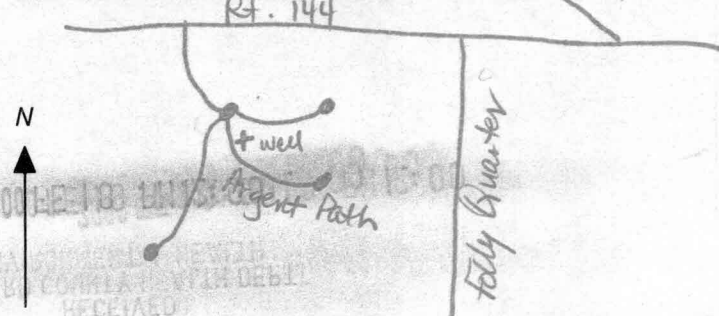
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER
1. well
 - 2.
 - 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820
N 520

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 -

Existing Public Stormwater Management, Drainage, & Utility Easement Access.

NOTE: SEWER HOUSE TO BE LOCATED FROM THE HOUSE 4" PVC SCH 40.

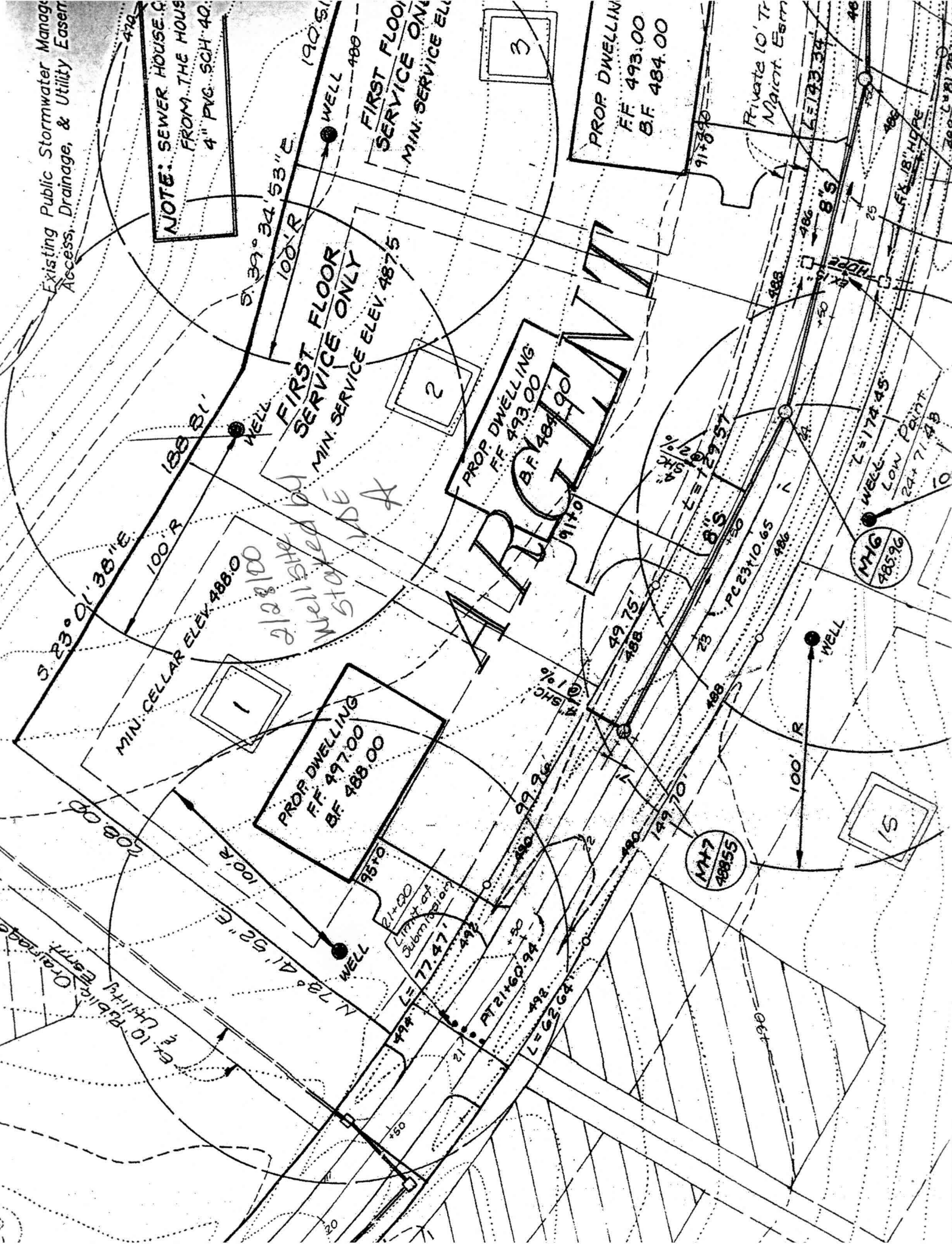
FIRST FLOOR SERVICE ONLY MIN. SERVICE ELEV. 487.5

PROP DWELLING FF 493.00 BF 484.00

PROP DWELLING FF 493.00 BF 484.00

PROP DWELLING FF 497.00 BF 488.00

MIN. CELLAR ELEV. 488.0



Wells to be installed by site owner

ARCELM

EX 10' Utility Easement

Private 10' Tr Maint. Easement

MH7 488.55

MHG 485.96

WELL LOW POINT 24+71.48

Limit of Submittal

20

**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: Van Sant Plumbing & Heating Telephone #: 301-829-0444
Address: 3 N. Main St
Mt Airy, MD 21771

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Harford Van Sant License# 1467

*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: NV Homes Telephone #: 301-858-0888
Subdivision: Brantwood Lot #: 2001 Well Tag #: HO-94-2601
Site Address: 3109 Argent Path
Ellicott City, MD 21042

Submersible Pump Data

Make: Goulds
Model #: 105B0722
Pump Capacity: _____ GPM
Well Yield: 5.5 GPM

Pitless Adapter

Make: Blax Campbell
Model #: 1
Depth: 42 (36" min)
NSF approved: Yes

Well Cap and Electric Conduit

Two piece watertight cap:
Screened, vented well cap:
Cap secured to casing:
Conduit min 18" B.G.:
Conduit secured to well cap:

Depth of well encountered at time of pump installation: 35 (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 NO

Piping to house

Type: Blue Helone
PSI: 30 (160 psi min)
Depth of supply line: 42 (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: 5
Approximate length of sleeve: 15
Sleeve caulked and 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.

Signature of company representative responsible for installation: Harford Van Sant date: 6.30.01

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

Date Insp. Requested: 6/27/01 Date Insp. Approved: 6/27/01 (DKC) SRK
Inspection Data: Pitless adapter and 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 installed inside of well 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

BRANTLY

25th Anniversary 1975-2000

Hugh F. Cole, Jr.
Chairman

John F. Liparini
President & CEO

December 11, 2000

Ms. Amy McMillen
Howard County Health Department
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Re: Brantwood Well Permits

Amy,

I am writing to inform you that we are going to transfer well permits for Lots 20, 21 & 22 in Section 2.1 and Lots 1 & 12 in Section 2.2. The permits are currently held by Cline and Duvall. We are transferring them to Joseph Mayne. We plan to start drilling Thursday or Friday of this week.

Please contact me at 410-977-0578 should you have any questions or comments. Thank you for your cooperation.

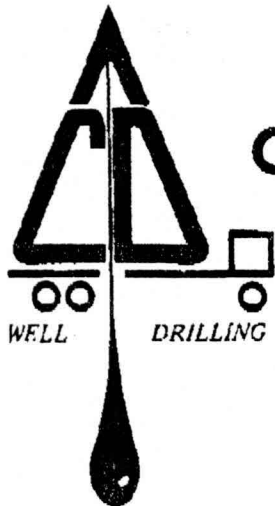
Sincerely,



Nicholas Liparini, for BWLLC

cc: Joseph Mayne

Brantly Development Group, Inc.
Real Estate Development



Cline & Duvall, Inc.

8093 Hillmark Court
Frederick, Maryland 21701
(301) 663-6095

12/11/00 - Spoke to
Betty Mayne of Joe
Mayne well drilling.
Joe Mayne agrees to
accept these permits.

SRK

December 11, 2000

Howard Co. Health Dept.
Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, MD 21043-4544
ATTN: Steve

RE: Brantwood Subdivision

This memo is to inform you that the following
well permits will be transferred to Joseph Mayne:

Brantwood Sec. 2 Area 1	Brantwood Sec. 2 Area 2
Lot 20 HO-94-2576	Lot 1 HO-94-2601
Lot 21 HO-94-2577	Lot 2 HO-94-2602
Lot 22 HO-94-2578	Lot 3 HO-94-2603
	Lot 4 HO-94-2604
	Lot 5 HO-94-2605
	Lot 6 HO-94-2606
	Lot 9 HO-94-2607
	Lot 10 HO-94-2608
	Lot 12 HO-94-2609

If you have any questions, please contact us.

Robert L. Cline

Robert L. Cline
Cline & Duvall, Inc.