

(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.

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
8 13

DATE WELL COMPLETED

MM DD YY
4 4 07
15 20

Depth of Well

22 400 26 5/31/07
(TO NEAREST FOOT) O.K. (BB)

COUNTY NUMBER

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

HO - 95 - 0782
28 29 30 31 32 33 34 35 36 37

OWNER

Toll Brothers

STREET OR RFD

last name first name
Bensworth way

SUBDIVISION

Edgewood Farms

SECTION

TOWN

Glennelg

LOT 26

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 FROM TO check if water bearing

DESCRIPTION (Use additional sheets if needed)	FEET FROM	TO	check if water bearing
Brown Sandy Mica Soil	0	18	
Brown Weathered Sand Rock	18	42	
Hard Gray Rock	42	400	✓
WATER BEARING AT 175 FT. + 340 FT.			

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT BENTONITE CLAY

NO. OF BAGS 18 NO. OF POUNDS 108

GALLONS OF WATER 108

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 48 ft.
TOP 52 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

cases types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER

MAIN CASING TYPE PL
Nominal diameter top (main) casing (nearest inch)! 6
Total depth of main casing (nearest foot) 48
60 61 63 64 66 70

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

SCREEN RECORD

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

DEPTH (nearest ft.)

DEPTH (nearest ft.)	DEPTH (nearest ft.)
1 8 9 11 15 17 21	48 400
2 23 24 26 30 32 36	
3 38 39 41 45 47 51	

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 12.0

METHOD USED TO MEASURE PUMPING RATE Timer/Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 50 ft.

WHEN PUMPING 57 ft.

TYPE OF PUMP USED (for test)

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

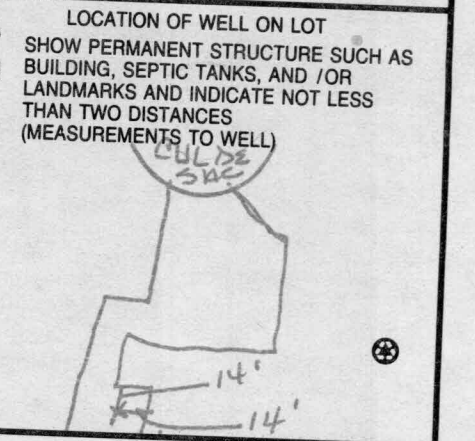
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE

- below } (nearest foot) 1 50 51



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO

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 MWD 355

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) T W Q

70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 9338

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

526283

please type

HO-95-0782 fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

Toll Brothers Owner First Name 34
1164 Columbia Gateway Dr. Ste 230 Street or RFD 55
Columbia MD 21046 Town State Zip 76

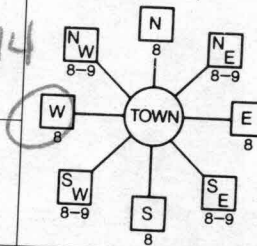
LOCATION OF WELL

Howard COUNTY 21
Edgewood Farms SUBDIVISION 42
SECTION 44 46 LOT 36 48 50
Colenel NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78

DRILLER INFORMATION

Michael Barlow MW D 355 Driller's Name License No. 81
Barlow Well Drilling Srv Firm Name
533 Underwood Ln, Bel Air, Md Address
Munroe Signature 3/13/07 Date

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Bensworth Way NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST
530 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: 21 BLK: 22 PARCEL 90

WELL INFORMATION

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)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
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) A518964 COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S 41
DATE ISSUED 3/30/07 Brian Baker 3/30/2008 EXP. DATE
518 000 EAST GRID 793 000 NORTH GRID 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

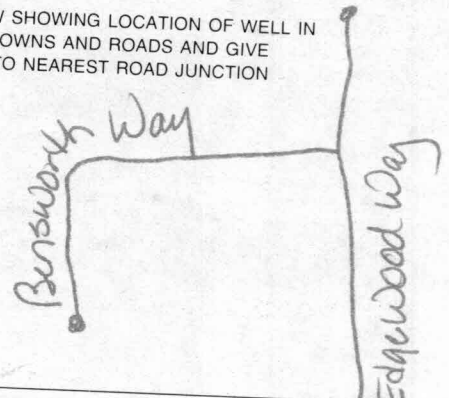
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 7983
N 52018

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



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 DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

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

APPROP. PERMIT NUMBER HO 2006-G004
PERMIT No. HO-95-0782

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



MICHAEL BARLOW WELL DRILLING & SERVICE, INC.
 522 Underwood Lane Bel Air, Maryland 21014
 (410) 838-6910 Fax (410) 838-3582

WELL YIELD REPORT

Date Test Completed: April 4, 2007

Well Depth: 400 feet

Customer	Toll Brothers	Permit #	HO-95-0782
Road	Edgewoods Way	Subdivision	Edgewood Farms
City	Glenelg	Section	
State	Maryland	Lot #	26

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
9:00 AM			
9:15 AM	50	5	12.00
9:30 AM	53	5	12.00
9:45 AM	57	5	12.00
10:00 AM	57	5	12.00
10:15 AM	57	5	12.00
10:30 AM	57	5	12.00
10:45 AM	57	5	12.00
11:00 AM	57	5	12.00
11:15 AM	57	5	12.00
11:30 AM	57	5	12.00
11:45 AM	57	5	12.00
12:00 PM	57	5	12.00
12:15 PM	57	5	12.00
12:30 PM	57	5	12.00

Act: Mike

**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: Home Land Pump Water Telephone #: 413-346-8659
Address: 535 Garsley Circle
Harwood, PA 17331

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

License # and name of individual responsible for the field installation:
Name (Print): Michael Dodo License # PT10161

*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: Toll Brothers Telephone #: 201-373-0835 Bldg #
Subdivision: The Respected Trinitary Lot #: 26 Well Tag #: HO-95-0782 ✓
Site Address: 14341 Boshworth Way (crossing)
Glenely, MD 21739

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Grundfos Make: Cummins Two piece watertight cap:
Model #: 15500-0780 Model: PA 80C Screened, vented well cap:
Pump Capacity: 15 GPM Depth: 1/2 (36" min) Cap secured to casing:
Well Yield: 8 GPM NSF approved: Conduit min 1 1/2" B.G.:
Depth of well encountered at time of pump installation: 40 (feet) Conduit secured to well cap:
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque inverters 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: DR 7HO3 P/E
PSI: 160 (160 psi min)
Depth of supply line: 2 (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration:
Approximate length of sleeve: 12'
Sleeve caulked and sealed properly:

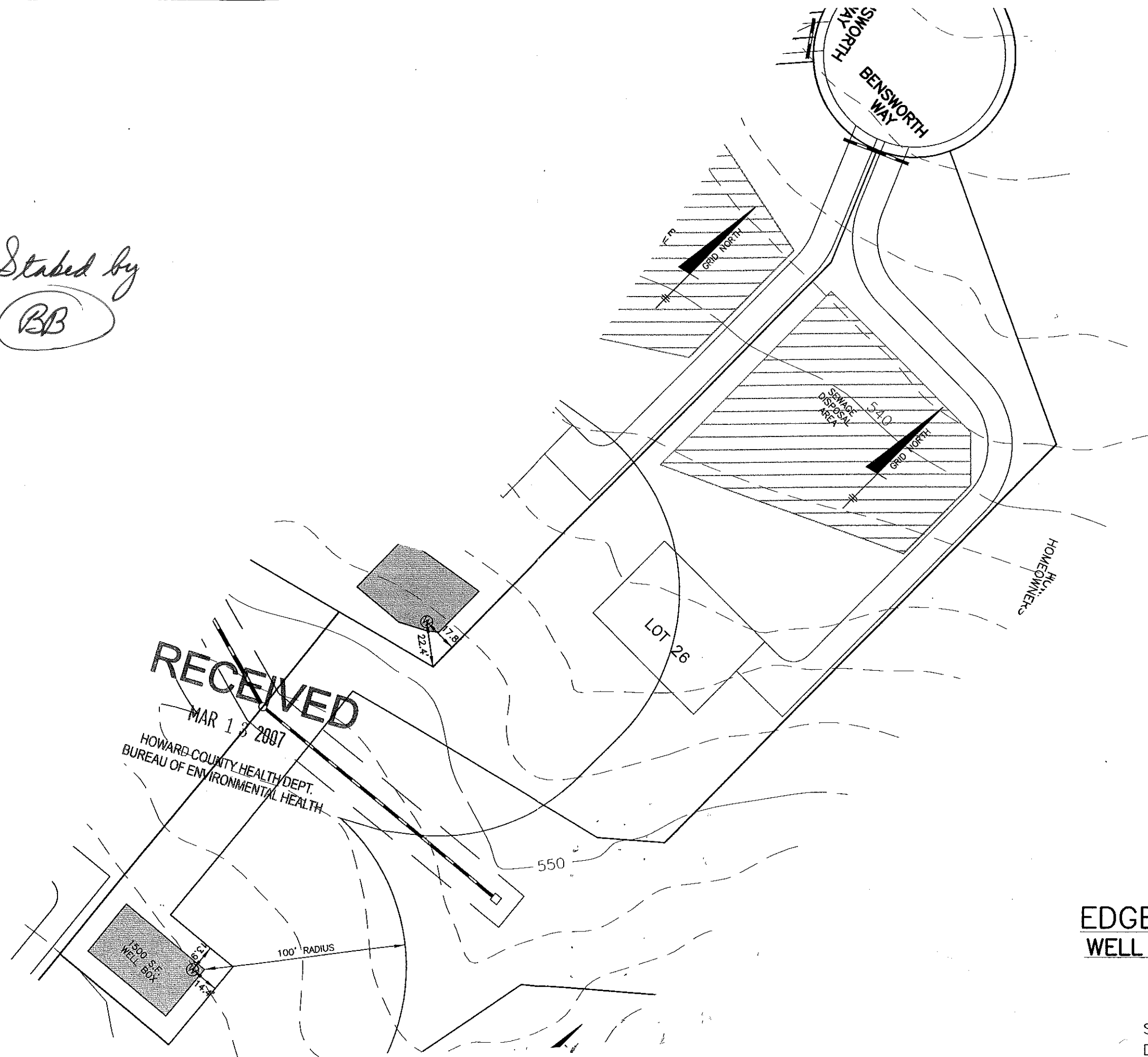
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] date: 11/18/08

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

Date Insp. Requested: _____ Date Insp. Approved: 11/16/2008 (initials)
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

3/30/07
Well Site Staked by
Benchmark. (BB)



BENCHMARK
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.
8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418
ELLCOTT CITY, MARYLAND 21043
PHONE: 410-465-6105 FAX: 410-465-6644

EDGEWOOD FARM
WELL LOCATION PLAN
LOT 26
F-06-108
SCALE: 1" = 50'
DATE: 10-10-06

MATCH LINE SEE SHEET 2

NON-BUILDABLE
PRESERVATION PARCEL D
ATED TO HOMEOWNERS ASSOCIATION
PRESERVATION EASEMENT
STORMWATER MANAGEMENT EASEMENT
WARD COUNTY EASEMENT HOLDER
0.22 AC. (this sheet)
3.20 AC. (total)

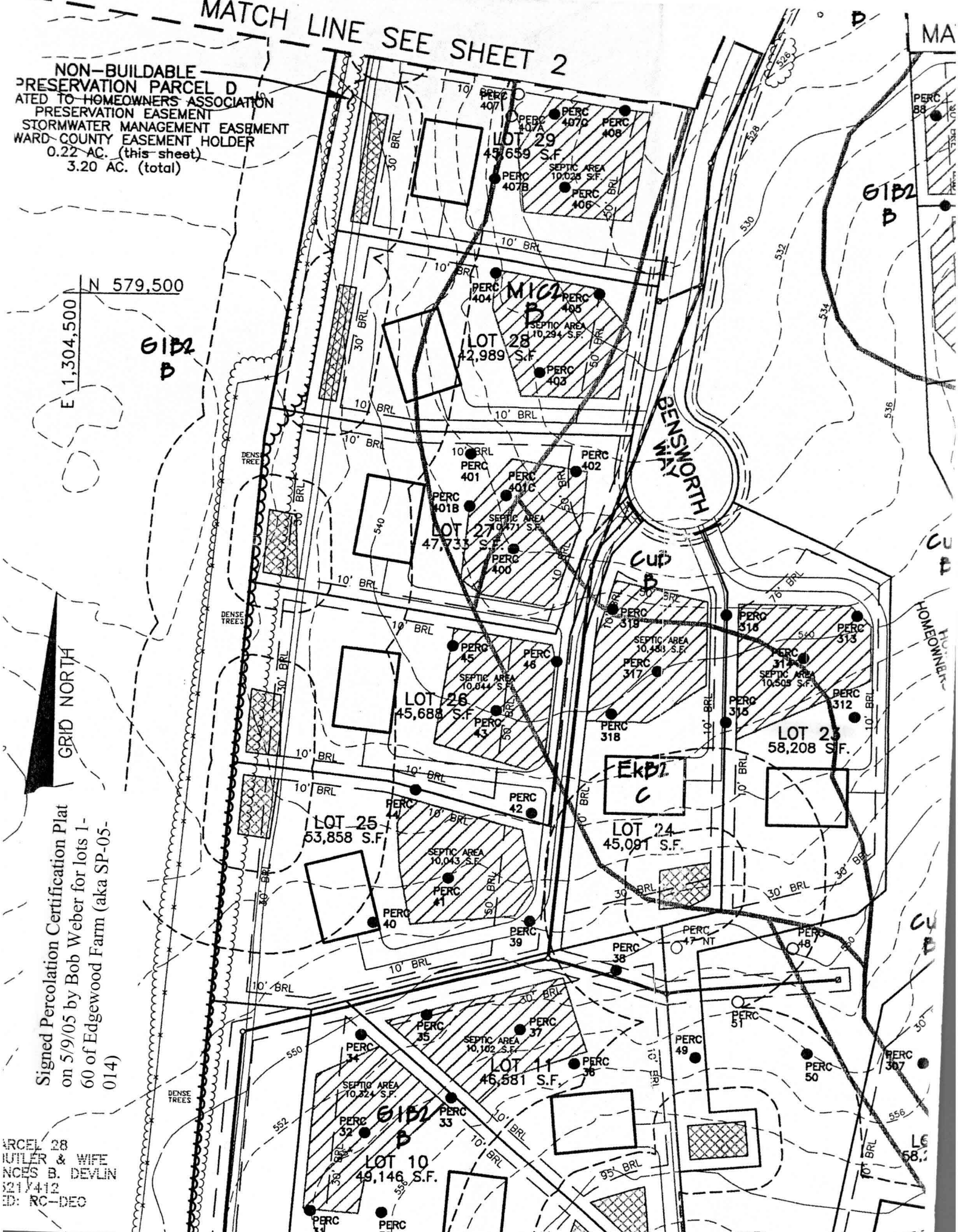
N 579,500
E 1,304,500

G1B2
D

GRID NORTH

Signed Percolation Certification Plat
on 5/9/05 by Bob Weber for lots 1-
60 of Edgewood Farm (aka SP-05-
014)

PARCEL 28
MULLER & WIFE
NCS B. DEVLIN
321Y412
ED: RC-DEC



PERC 88

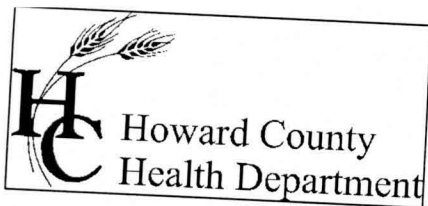
G1B2
D

CU

HOMEOWNERS

CU

LC
58.2



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

March 12, 2009

Occupant
14331 Bensworth Way
Glenelg, MD 21737

SENT VIA FACSIMILE 410-489-2278

RE: Edgewood Farm, Lot 26
The Reserve @ Triadelphia Crossing
14331 Bensworth Way
Glenelg, MD 21737
BP # B08002162
Well Permit #HO-95-0782

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 11/24/2008. Final approval of the well line connection to the dwelling was approved on 11/10/2008.**

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.

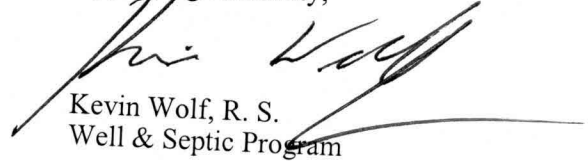
INTERIM CERTIFICATE OF POTABILITY

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-95-0782. 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: 03/10/2009
Date of Well Completion: 04/04/2007

Approving Authority,

A handwritten signature in black ink, appearing to read "Kevin Wolf", is written over a horizontal line. The signature is fluid and cursive.

Kevin Wolf, 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 #:	70441	Account #:	2333
Reference:	Toll Brothers Lot 26	Company:	Homeland Pump & Water
Location:	14331 Bensworth Way Glenelg, MD 21737	Requested By:	Mike Dodd
Date/ Time Collected:	3/10/2009 1030	Source:	Well Water
Date/Time Rec'd:	3/10/2009 1130	Site:	Kitchen Sink Tap
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	M. Dodd 6244MD	pH:	6.8
		Well #:	HO-95-0782

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total. MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	3/11/2009 / 0815 / CCH
Bacteria, E. coli. MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	3/11/2009 / 0815 / CCH
Nitrate	? <u>9.91</u>	mg/L	10	601	3/10/2009 / 1500 / CWM
Turbidity	1.85	NTU	<10	SM18 2130B	3/10/2009 / 1500 / CWM
Sand	NS	mg/l.	5	Visual/Gravimetr	3/10/2009 / 1500 / CWM

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 and Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : 08002162

Date Reported: 3/11/2009