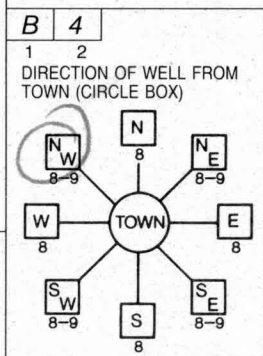


B 1 5790 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL STATE PERMIT NUMBER HO-94-4105
 1 2 3 6 70 fill in this form completely 79
 W521563 please print or type

Date Received (APA) 11/04/04
 8 MM DD YY 13
 OWNER INFORMATION
 15 Last Name Thompson Builder's Inc
 Owner First Name 34
 36 6300 Woodside Ct. Suite A
 Street or RFD 55
 57 Columbia MD 21046
 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
 8 COUNTY Howard 21
 23 SUBDIVISION HOPKINS CHOICE 42
 SECTION 44 46 LOT 21 48 50
 52 GLENELG NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) I M I 73 76 77 78

DRILLER INFORMATION
 76 Driller's Name Ralph E. Maywe MS D 112 License No. 81
 Firm Name Ralph E. Maywe Inc
 Address 17024 Handy Rd Mt Airy MD 21771
 Signature Ralph E. Maywe Date 10-10-04



11 NEAR WHAT ROAD Patterson Farm Ct. 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 34 225 37
 DISTANCE FROM ROAD ENTER FT OR MI 38 39
 TAX MAP: 21 BLK: 12 PARCEL 111

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME Howard COUNTY NO. 9517937
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 2/10/06
 43 MM DD YY 48 CO SIGNATURE [Signature] EXP. DATE 2/10/06
 NORTH GRID 522 0 0 0 EAST GRID 798 0 0 0
 50 55 57 63

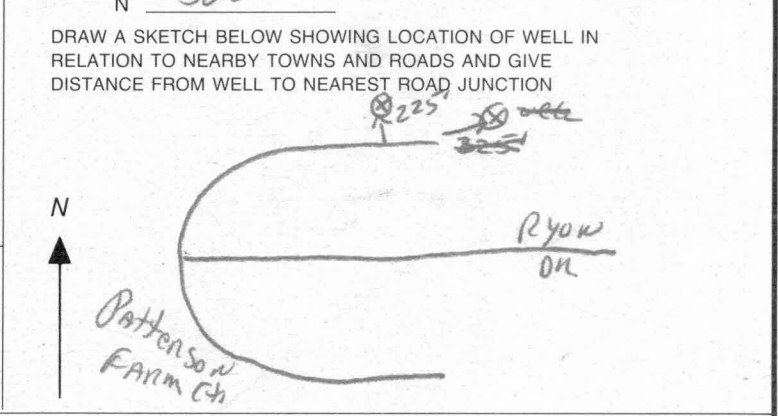
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 GEO-THERMAL

APPROXIMATE DEPTH OF WELL 150 FEET
 24 28
 APPROXIMATE DIAMETER OF WELL 64 NEAREST INCH

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 800 798
 N 522
 000 000

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)
 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 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 HO2604 GAP 011/01
 54 63
 PERMIT No. HO-94-4105
 70 71 72 73 74 75 76 77 78 79

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 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: Eagles Well Drilling Telephone #: 443-609-4195
Address: P.O. Box 302
Woodbine md 21797

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

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

Name (Print): Allen Compton License# MSD009

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

Name of Property Owner: Toll Brothers Telephone #: 410-320-0223
Subdivision: Hopkins Choice Lot #: 21 Well Tag #: HO-94-4105
Site Address: 14115 Patterson Farm Ct
Glenn Dale Md.

Submersible Pump Data

Make: Crawford
Model #: ISS0807-180
Pump Capacity: 7 GPM
Well Yield: 5 GPM

Pitless Adapter

Make: Campbell
Model#: N10
Depth: 36" (36" min)
NSF/WSC approved: yes

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 260 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house

Type: 1" Black Plastic
PSI: 160 (160 psi min)
Depth of supply line: 42" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
Length of sleeve (5' minimum from foundation): 5'
Sleeve 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: Allen Compton date: 4/4/12

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

Date Insp. Requested: _____ Date Insp. Approved: _____ Inspector: _____

Inspection Data: Pitless adapter watertight & 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 Not Glued
Safety rope not outside of well cap/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 Spotty

4/10/2012 BB

MD STATE GRID
P.155

LOT 22

*2/10/05 - Well site staked by
John C. Mellema, Inc.*

LOT 21

N583077
E1310790

PRESERVATION
PARCEL 'C'

1172.78'

1" E

AREA

WELL LOCATION PLAN

LOT 21

HOPKINS CHOICE SUBDIVISION

4th ELECTION DISTRICT, TAX MAP # 21, GRID 12, ZONE : RR-DEO PARCEL 111
HOWARD COUNTY, MARYLAND

1" = 50'
SCALE :

10-21-04
DATE :

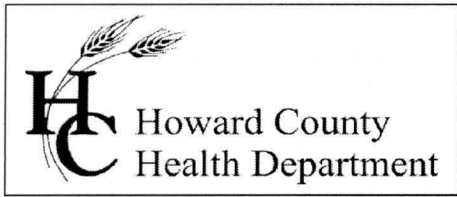
PREPARED BY :

American Land Development
and Engineering, Inc.

10749 BIRMINGHAM WAY
WOODSTOCK, MD. 21163
TEL. (410) 465-7903
FAX. (410) 465-3845

CONTRACT No.

FILE No.



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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – February 3rd, 2013

August 3rd, 2012

Homeowner
 14115 Patterson Farm Court
 Dayton, MD 21036

**RE: Hopkins Choice, Lot 21
 14115 Patterson Farm Court
 Building Permit: B12000356
 Well Permit: HO-94-4105**

Dear Homeowner:

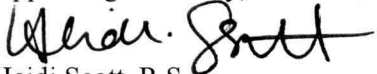
This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **8/3/2012**. Final approval of the well line connection to the dwelling was granted on **4/10/2012**. The well construction was completed on **5/5/2005**. Water samples were collected on **7/20/2012**.

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. 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-94-4105. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the Annotated Code of Maryland, Environment Article, 9-1311, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,


 Heidi Scott, R.S.
 Environmental Sanitarian
 Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
 Community Hygiene Program
 File

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Fancytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 85423 Account #: 1930
Reference: Toll Brothers Company: Fogle's Well Drilling
Location: 14115 Patterson Farm Court Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 7/20/2012 1406 Site: Kitchen Sink Tap
Date/Time Rec'd: 7/20/2012 1520 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.7
Collected By: J. Fogle 1974JF Well #: HO-94-4105

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	7/21/2012 / 1000 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	7/21/2012 / 1000 / CCH
Nitrate	5.07	mg/L	10	601	7/20/2012 / 1700 / CCH
Turbidity	1.68	NTU	<10	SM18 2130B	7/20/2012 / 1624 / JKW
Sand	NS	mg/L	5	Visual/Gravimetric	7/20/2012 / 1624 / JKW

Results OK
8-3-12 HB

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 & Chlorine level tested in lab

Reason for Test : Use & Occupancy

Date Reported: 7/23/2012