

C-1 07798

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 13

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

DATE WELL COMPLETED MM DD YY 7-30-00 15 20

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0 - 94 - 2714 28 29 30 31 32 33 34 35 36 37

OWNER: BIG BRANCH OVERLOOK LLC last name first name STREET OR RFD: BIG BRANCH DRIVE TOWN: DAYTON SUBDIVISION: BIG BRANCH OVERLOOK SECTION: LOT: 40

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows: Brown shale (0-37), Gray (37-150), white (150-151), Gray (151-260), Flint (260-261), Gray (261-300)

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 9 NO. OF POUNDS 810 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 35(35) ft.

CASING RECORD

MAIN CASING TYPE: ST (STEEL) Nominal diameter top (main) casing (nearest inch): 06 Total depth of main casing (nearest foot): 42

OTHER CASING (if used)

Table for OTHER CASING with columns: diameter inch, depth (feet) from, to

SCREEN RECORD

screen type or open hole: HO (OPEN HOLE) insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED YES Y NO N

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.: MSD009

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: D

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

DEPTH (nearest ft.) 1 HO 35 300

Table for well depth with columns: E A C H S C R E E N and rows for different casing types

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH) from 56 to 60

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 07 8 9 PUMPING RATE (gal. per min.) 3.7 11 15 METHOD USED TO MEASURE PUMPING RATE 1 Gal WATER LEVEL (distance from land surface) BEFORE PUMPING 59 17 20 ft. WHEN PUMPING 183 22 25 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP 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) + above LAND SURFACE - below 02 (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

NO Survey stakes

B 1 13987 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER Ho - 94 - 2714 fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13 Big Branch Overlook LLC 15 Last Name Owner First Name 34 7164 Columbia Gateway Dr. Suite 230 36 Street or RFD 55 Columbia MD 21046 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

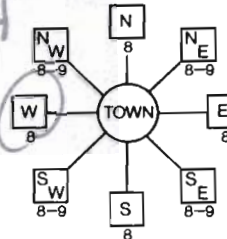
8 COUNTY Howard 21 Big Branch Overlook 14064 23 SUBDIVISION 42 SECTION 44 46 LOT 40 48 50 52 NEAREST TOWN Droyton 71 MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

DRILLER INFORMATION

Allen Compton M S D 009 76 Driller's Name License No. 81 Fogle's Well Drilling Firm Name 580 Obrecht Rd Sykesville Md 21784 Address 3-18-01 Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Big Branch Dr 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 30' 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 NORTH WEST EAST SOUTH

TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

- 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

Howard 13 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 05 26 00 Co. Signature 5/25/01 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 512 000 EAST GRID 0795 000 50 55 57 63

APPROXIMATE DEPTH OF WELL 24 300 28 FEET

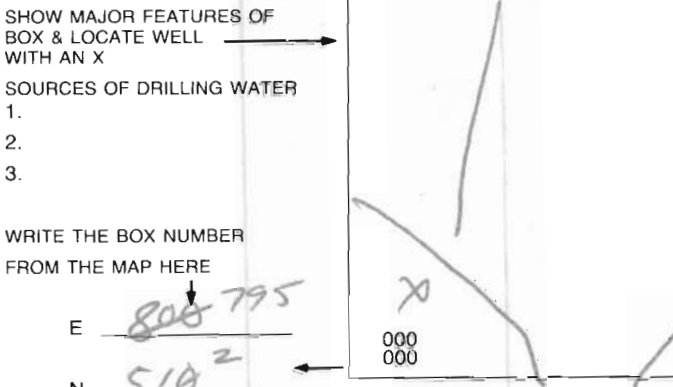
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT other

REPLACEMENT OR DEEPEMED 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 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 DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



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)

APPROX. PERMIT NUMBER 54 GAP 63 PERMIT No. Ho - 94 - 2714 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94 - 2714
 Location of property (road) Big Branch Drive
 Subdivision Big Branch Overlook Lot 40 Block _____ Plat _____ Sec. _____
 Well Driller Compton/Fogle Owner Big Branch Overlook LLC

Depth of well 300
 Distance of measuring point (M.P.) above ground 2
 Static water level (S.W.L.) below M.P. 59

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 8
 Total time 75 min to reach pumping water level 183 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 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	59	7.5		8
8:45	130	7.5		8
9:00	143	19		3.7
9:15	154	19		3.7
9:30	165	19		3.7
9:45	183	19		3.7
10:00	183	19		3.7
10:15	183	19		3.7
10:30	183	19		3.7
10:45	183	19		3.7
11:00	183	19		3.7
11:15	183	19		3.7
11:30	183	19		3.7
11:45	183	19		3.7
12:00	183	19		3.7
12:15	183	19		3.7
12:30	183	19		3.7
12:45	183	19		3.7
1:00	183	19		3.7
1:15	183	19		3.7
1:30	183	19		3.7
1:45	183	19		3.7
2:00	183	19		3.7
2:15	183	19		3.7

Carroll County Health Department
 Bureau of Environmental Health
 P.O. Box 845
 Westminster, Maryland 21158

Howard

Page ___ of ___

County File # 48003

Field Data Sheet
 Hydrogeologic Area (3) Well Yield Test

Maryland Well Permit No. HO CL 94 - 2634 Election District 2
 Owner _____ Location of Property _____
 (be specific)

Subdivision Big Branch overlook Section _____ Lot # 40
 Well Driller Allen Compton Depth of Well 300

Distance of Measuring Point (M.P.) below M.P. _____
 Static Water Level (S.W.L.) below M.P. _____
 High Rate Pumping -- reservoir drawdown
 Time Pump Started 8:30
 Pumping Rate 8

Total Time 75 min to reach pumping water level 183 feet below M.P.

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

Time	Water Level below M.P.	Pumping Rate Time to fill <u>1</u> gal bkt	Flow Meter Reading (if used)	Calculated Flow (gallons per minute)
2:30	183	19		3.7
2:45	183	19		3.7
3:00	183	19		3.7
3:15	183	19		3.7
3:30	183	19		3.7
3:45	183	19		3.7

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: Fogles Well Drilling Telephone #: 410-795-5670
 Address: 580 Obrecht Rd
Sykesville, Md

(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# 0150009

*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 #: _____
 Subdivision: Tridelpia Ridge Lot #: 40 Well Tag #: HO - 99-2714
 Site Address: 14064 Big Branch Dr

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Red Jacket</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>75F211 8616</u>	Model#: <u>N/A</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>6</u> GPM	Depth: <u>42'</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>3.7</u> GPM	NSF/WSC approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>300</u> (feet)		Conduit secured to well cap: <u>yes</u>

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 N/A

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>1" Black Plastic</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>8'</u>
Depth of supply line: <u>42'</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

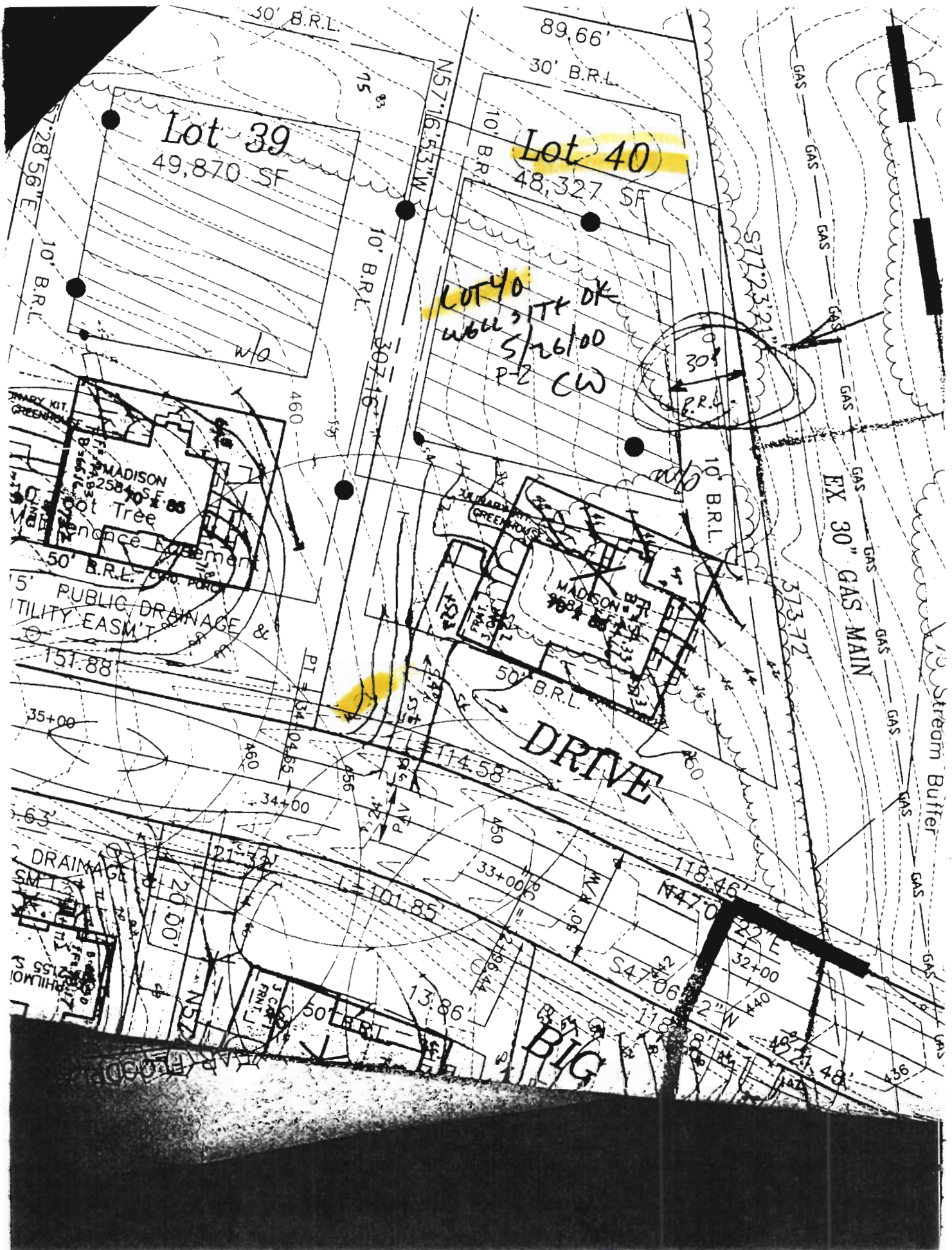
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Allen Compton date: 11/24/01

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

Date Insp. Requested: 11/9/01 Date Insp. Approved: 11/9/01 Inspector: (50) SRK

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope not seen outside of well cap/casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>



Lot 39
49,870 SF

Lot 40
48,327 SF

LOT 40
WELL, ITK DK
5/26/00
P-2 CW

DRIVE

BIG

EX 30" GAS MAIN

Stream Buffer

30' B.R.L.

89.66'

30' B.R.L.

N57°16'53"W

10' B.R.L.

307.16'

10' B.R.L.

373.72'

7°28'56"E

10' B.R.L.

460

460

35+00

34+00

63'

215.43'

20.00'

13.86'

118.46'

32+00

40'

48'

36'

