

C1 6518

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER

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

ST/CO USE ONLY DATE Received DATE WELL COMPLETED Depth of Well PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER STREET OR RFD SUBDIVISION SECTION TOWN LOT

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing

GROUTING RECORD WELL HAS BEEN GROUTED TYPE OF GROUTING MATERIAL

CASING RECORD MAIN CASING TYPE Nominal diameter Total depth of main casing

OTHER CASING (if used) diameter depth (feet)

SCREEN RECORD screen type or open hole

500' Dry Hole Spaced w/ Rock Cuttings AND Cement Grout

NUMBER OF UNSUCCESSFUL WELLS: 1 WELL HYDROFRACTURED

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04

DRILLERS LIC. NO. 1 MWD 355 DRILLERS SIGNATURE LIC. NO. 1 D

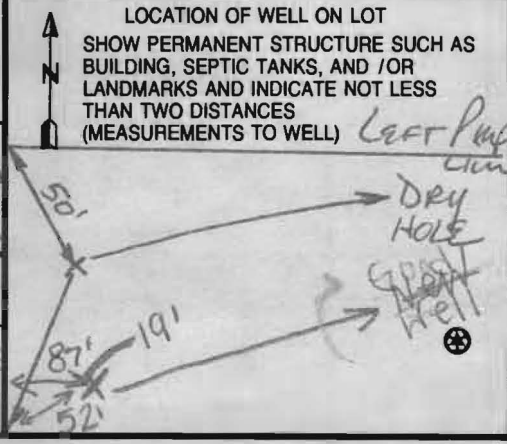
DEPTH (nearest ft.) A C H S R E N

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

PUMPING TEST HOURS PUMPED PUMPING RATE METHOD USED TO MEASURE PUMPING RATE

PUMP INSTALLED DRILLER INSTALLED PUMP TYPE OF PUMP INSTALLED PLACE



B 1 9333
1 2 3 6

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
526283 please type

STATE PERMIT NUMBER

Ho-95-1052
70 fill in this form completely 79

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

Toll Brothers
114 Columbia Gateway Dr. Ste 230
Columbia MD 21046

B 3

LOCATION OF WELL

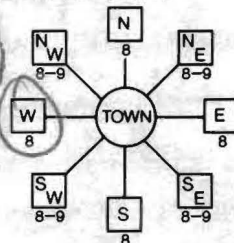
Howard
Edgewood Farms
Glencig
2 MI
MILES FROM TOWN (enter 0 if in town)

DRILLER INFORMATION

Michael Barlow MD 355
Michael Barlow Well Drilling Serv
538 Underwood Lane Bel Air MD
3/13/07 21014

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Edgewoods Way
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST EAST
SOUTH
34 30 37
DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: 21 BLK: 22 PARCEL 90

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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
DATE ISSUED 4/5/2007 Brian Bader 4/5/2008
NORTH GRID 519 000 EAST GRID 793 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH 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

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)

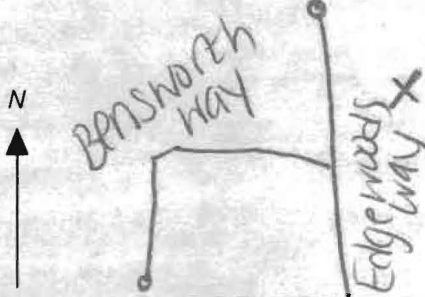
APPROX. PERMIT NUMBER H02006_G004
PERMIT No. H0-95-1052

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 7903
N 52019

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

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: Fogles Well Drilling LLC Telephone #: 410-795-5670
Address: PO Box 202 J
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): DAVID C FOGLE License # MSD226

*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 #: 410-489-2275
Subdivision: Triadelphia Crossing/Edgewood Lot #: 51 Well Tag #: HO-45-1052
Site Address: 14557 Edgewood Way
Greenbelt, MD 21737

95-1052
Painted over tag

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Maker: Grundfos Make: Camco II Two piece watertight cap: YES
Model #: ESG107180 Model #: N/A Screened, vented well cap: YES
Pump Capacity: 15 GPM Depth: 36" (36" min) Cap secured to casing: YES
Well Yield: 8.5 GPM NSF/WSC approved: YES Conduit min 1 1/2" B.G.: YES
Depth of well encountered at time of pump installation: 245 (feet) Conduit secured to well cap: YES
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque anastous, 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

Piping to house House Connection
Type: 1" poly pipe PVC sleeve to undisturbed soil at wall penetration: YES
PSI: 200 (180 psi min) Length of sleeve (5' minimum from foundation): 5
Depth of supply line: 36" (36" min) 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: David Fogle date: 1-5-15

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

Date Insp. Requested: 1/5/15 Date Insp. Approved: 1/8/15 Inspector: SC
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 ✓
Safety rope not outside of well cap/casing ✓
Correct well tag attached properly and casing 3" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓

Tag not 0" above grade
Connection covered w/ water
1/5/15 SC



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

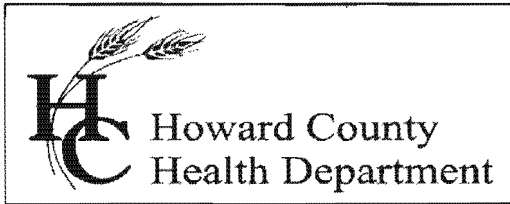
WELL YIELD REPORT

Date Test Completed: April 16, 2007

Well Depth: 245 feet

Customer	<u>Toll Brothers</u>	Permit #	<u>HO-95-0752</u>
Road	<u>Edgewoods Way</u>	Subdivision	<u>Edgewood Farms</u>
City	<u>Glenelg</u>	Section	
State	<u>Maryland</u>	Lot #	<u>51</u>

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
9:30 AM	35	7	8.57
9:45 AM	40	7	8.57
10:00 AM	54	7	8.57
10:15 AM	54	7	8.57
10:30 AM	54	7	8.57
10:45 AM	54	7	8.57
11:00 AM	54	7	8.57
11:15 AM	54	7	8.57
11:30 AM	54	7	8.57
11:45 AM	54	7	8.57
12:00 PM	54	7	8.57
12:15 PM	54	7	8.57
12:30 PM	54	7	8.57



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date - DECEMBER 1, 2015

June 1, 2015

Homeowner
14552 Edgewoods Way
Glenelg, MD 21737

RE: The Reserve @ Triadelphia Crossing, Lot 51
14552 Edgewoods Way
Building Permit: B14002849
Well Permit: HO-95-1052

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 **5/29/2015**. Final approval of the well line connection to the dwelling was granted on **1/8/2015**. The well construction was completed on **4/16/2007**. Water samples were collected on **4/9/2015, 4/20/2015, 4/30/2015, 5/5/2015, & 5/27/2015**.

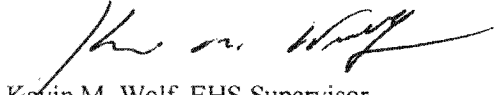
The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit **HO-95-1052**. 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,

A handwritten signature in black ink, appearing to read "Kevin M. Wolf". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Kevin M. Wolf, EHS Supervisor
Environmental Health Specialist
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
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 #: 99845 Account #: 1930
Reference: Toll Brothers Lot 51 Company: Fogle's Well Drilling
Location: 14552 Edgewoods Way Requested By: Dave Fogle
Glenelg, MD 21737 Source: Well Water
Date/ Time Collected: 4/9/2015 1247 Site: Laundry Room Sink
Date/Time Rec'd: 4/9/2015 1410 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.4
Collected By: J. Fogle 1974JF Well #: HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	13.7	MPN/ 100 ml	<1.0	SM18 9223	4/10/2015 / 0830 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	4/10/2015 / 0830 / LLO
Nitrate	6.90	mg/L	10	601	4/10/2015 / 1600 / CCH
Turbidity	0.74	NTU	<10	SM18 2130B	4/10/2015 / 1800 / CCH
Sand	NS	mg/L	5	Visual/Gravimetric	4/10/2015 / 1800 / CCH

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 pH tested in lab, chlorine level tested on site
- 8 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 14002849

Date Reported: 4/13/2015

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 #:	100910	Account #:	1930
Reference:	Toll Brothers Lot 51	Company:	Fogle's Well Drilling
Location:	14552 Edgewoods Way Glenelg, MD 21737	Requested By:	Dave Fogle
Date/ Time Collected:	5/27/2015 1018	Source:	Well Water
Date/Time Rec'd:	5/27/2015 1300	Site:	Laundry Room Sink
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	J. Fogle 1974JF	pH:	5.6
		Well #:	HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	5/28/2015 / 0900 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	5/28/2015 / 0900 / CCH

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH and Chlorine level tested in lab
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy
Building Permit # : 14002849

Date Reported: 5/29/2015

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 #: 100416 Account #: 1930
Reference: Toll Brothers Lot 51 Company: Fogle's Well Drilling
Location: 14552 Edgewoods Way Requested By: Dave Fogle
Glenelg, MD 21737 Source: Well Water
Date/ Time Collected: 5/5/2015 1426 Site: Laundry Room Sink
Date/Time Rec'd: 5/5/2015 1530 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.2
Collected By: J. Fogle 1974JF Well #: HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	5.3	MPN/ 100 ml	<1.0	SM18 9223	5/6/2015 / 0945 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	5/6/2015 / 0945 / CCH

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH tested in lab, chlorine level tested on site
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy
Building Permit # : 14002849

Date Reported: 5/6/2015

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 #: 100375 Account #: 1930
Reference: Toll Brothers Lot 51 Company: Fogle's Well Drilling
Location: 14552 Edgewoods Way Requested By: Dave Fogle
Glenelg, MD 21737 Source: Well Water
Date/ Time Collected: 4/30/2015 1211 Site: Laundry Room Sink
Date/Time Rec'd: 4/30/2015 1330 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.3
Collected By: J. Fogle 1974JF Well #: HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	7.5	MPN/ 100 ml	<1.0	SM18 9223	5/1/2015 / 0830 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	5/1/2015 / 0830 / CCH

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH tested in lab, chlorine level tested on site
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy
Building Permit # : 14002849

Date Reported: 5/1/2015

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 #: 100025 Account #: 1930
Reference: Toll Brothers Lot 51 Company: Fogle's Well Drilling
Location: 14552 Edgewoods Way Requested By: Dave Fogle
Glenelg, MD 21737 Source: Well Water
Date/ Time Collected: 4/20/2015 1436 Site: Laundry Room Sink
Date/Time Rec'd: 4/20/2015 1550 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.4
Collected By: J. Fogle 1974JF Well #: HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	25.4	MPN/ 100 ml	<1.0	SM18 9223	4/21/2015 / 1015 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	4/21/2015 / 1015 / LLO

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH tested in lab, chlorine level tested on site
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 14002849

Date Reported: 4/21/2015

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

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Reference: Toll Brothers Lot 51 Company: Fogle's Well Drilling
Location: 14552 Edgewoods Way Requested By: Dave Fogle
Glenelg, MD 21737 Source: Well Water
Date/ Time Collected: 4/9/2015 1247 Site: Laundry Room Sink
Date/Time Rec'd: 4/9/2015 1410 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.4
Collected By: J. Fogle 1974JF Well #: HO-95-1052

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	13.7	MPN/ 100 ml	<1.0	SM18 9223	4/10/2015 / 0830 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	4/10/2015 / 0830 / LLO
Nitrate	6.90	mg/L	10	601	4/10/2015 / 1600 / CCH
Turbidity	0.74	NTU	<10	SM18 2130B	4/10/2015 / 1800 / CCH
Sand	NS	mg/L	5	Visual/Gravimetric	4/10/2015 / 1800 / CCH

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
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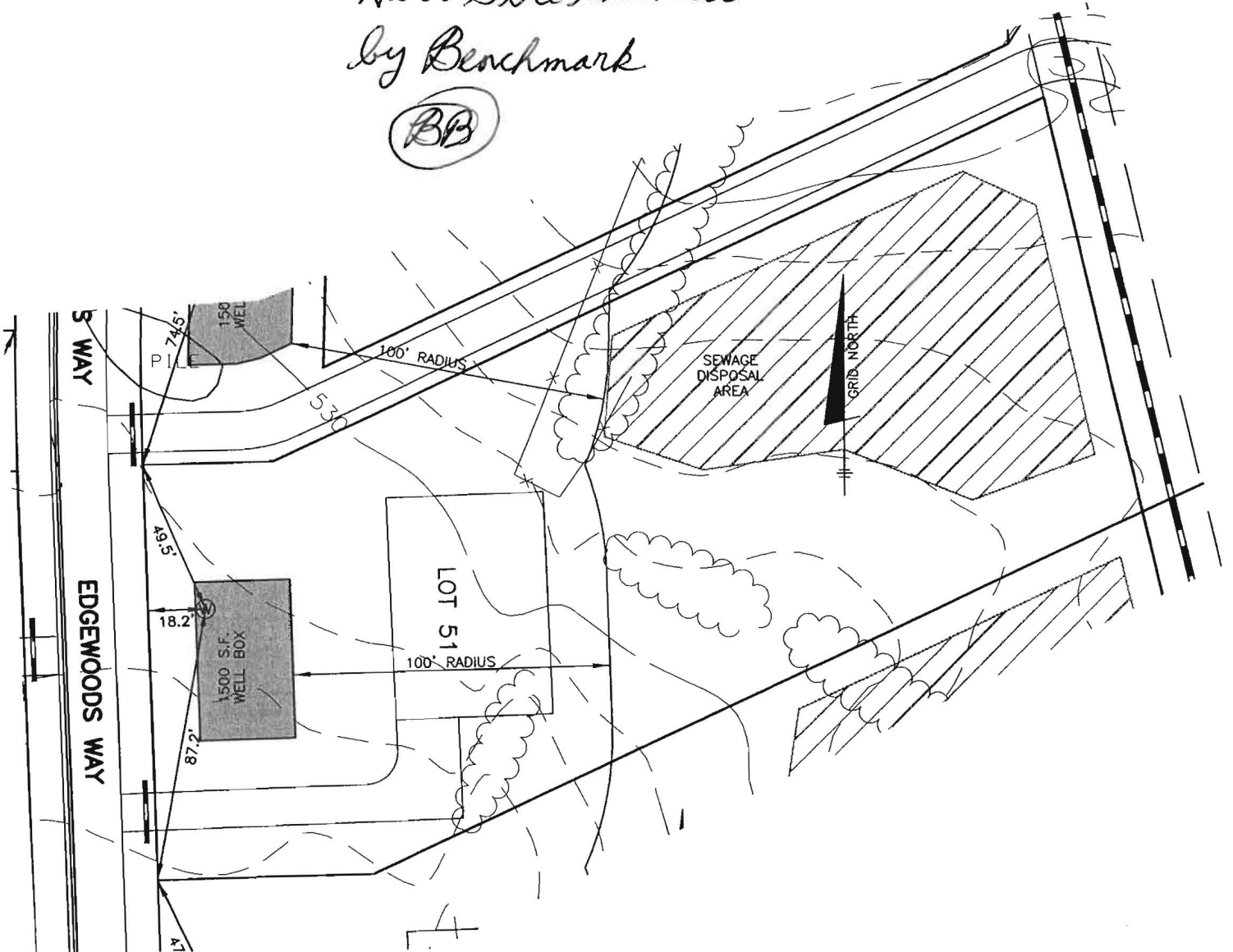
Reason for Test : Use & Occupancy

Building Permit # : 14002849

Date Reported: 4/13/2015

4/5/07
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 51

F-06-108

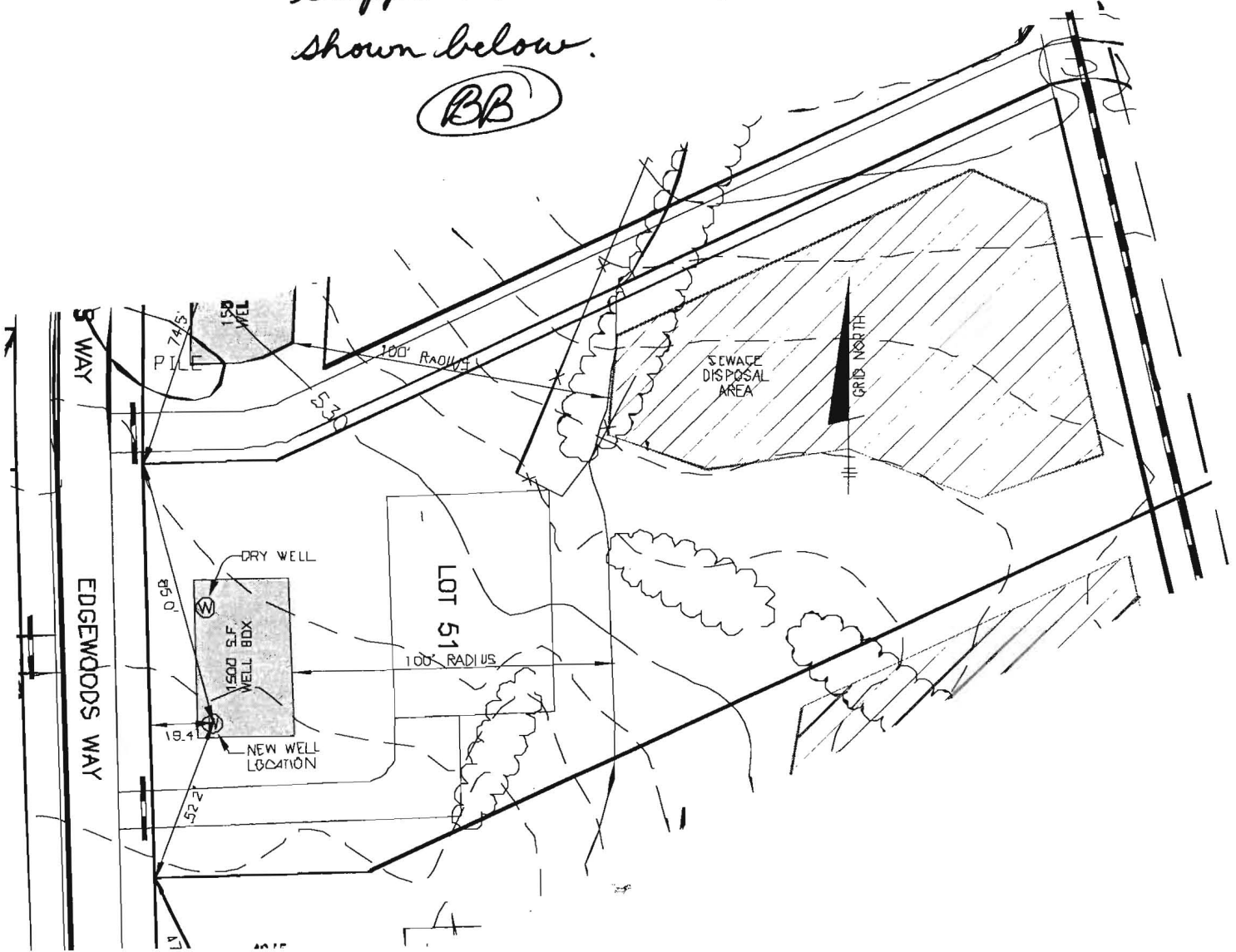
SCALE: 1" = 50'

DATE: 10-10-06

4/5/07

Dry hole at original location.
Supposed to drill next at location
shown below.

BB



BENCHMARK

ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 41B

ELLCOTT CITY, MARYLAND 21043

PHONE: 410-465-6105

FAX: 410-465-6644

EDGEWOOD FARM

WELL LOCATION PLAN

LOT 51

F-06-108

SCALE: 1" = 50'

DATE: 04-05-07