

B 1 0861

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 523427

STATE PERMIT NUMBER HD-95-0167 fill in this form completely

Date Received (APA) 10/03/05

OWNER INFORMATION

Zaccagnini Zack 3239 Eleanor Garden way Blenheim md 21338

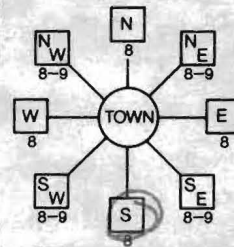
LOCATION OF WELL

Howard County C-Hail Tract SECTION 44 46 LOT 35 48 50 Daisy Woodbine NEAREST TOWN MILES FROM TOWN 2

DRILLER INFORMATION

Alden Compton MS D 009 Eagles Well Drilling 580 Obrecht rd. 10/3/05

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Eleanor's Garden way NEAR WHAT ROAD ON WHICH SIDE OF ROAD NORTH 34 50 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 20 BLK: 12 PARCEL 139

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

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 County 1514952-6 STATE SIGNATURE DATE ISSUED 10/20/05 CO SIGNATURE EXP. DATE 10/20/06 NORTH GRID 526 000 EAST GRID 780 000

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 8 INCH NEAREST

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

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 780 N 5286

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



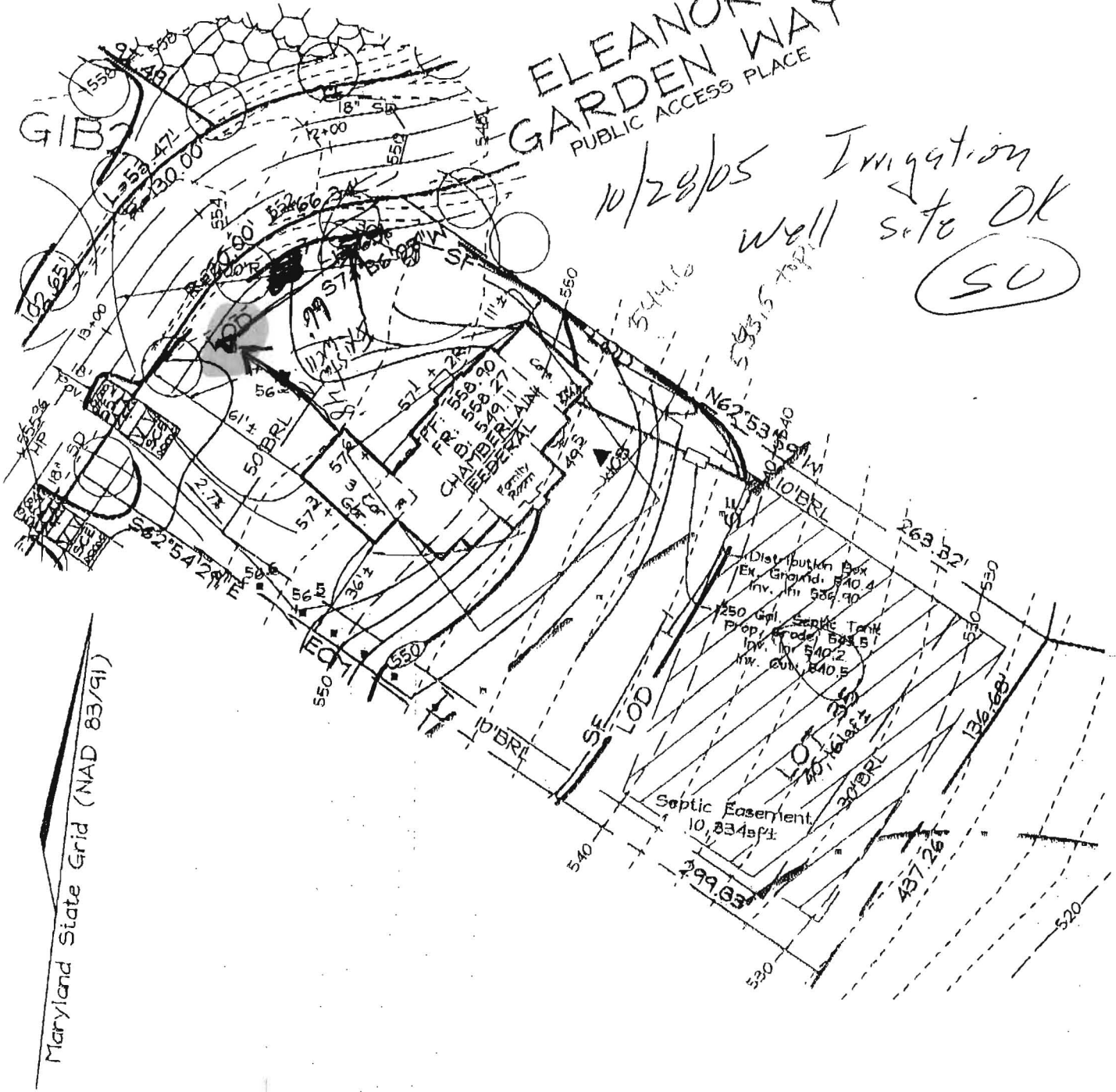
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G PERMIT No. HD-95-0167

SPECIAL CONDITIONS

ELEANORS GARDEN WAY
PUBLIC ACCESS PLACE

10/28/05 Irrigation well site OK
SU



Maryland State Grid (NAD 83/91)

OWNER/DEVELOPER

Toll MD II, LP
7164 Columbia Gateway Drive
Suite 230
Columbia, Maryland 21046
410.872.9185

FSH Associates

Engineers Planners Surveyors
8318 Forrest Street Ellicott City, MD 21043
Tel: 410-750-2251 Fax: 410-750-7350
E-mail: Info@fsha.biz

Note: 1. See Approved Grading Plan GP-04-39 for Entire Site.
2. The existing well shown on this plan (identified with the attached well tag number: HO-94-3571) has been field located by C. B. Miller professional surveyor and is accurately shown.

DESIGN BY: PS
DRAWN BY: PS
CHECKED BY: ZYF
SCALE: 1"=50'
DATE: March 15, 2005
W.O. No.: 3217
SHEET No.: 1 OF 1

**LOT RESITE
LOT 35
CATTAIL TRACE**

TAX MAPS 13, 14, 20 & 21
GRIDS 7, 12, 19 & 24
4TH ELECTION DISTRICT

PARCELS 20, 67 & 312
HOWARD COUNTY, MARYLAND

GP-04-39



Howard County
Health Department

3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by Fogles well,
(professional land surveyor or company employing professional land surveyors)
on 10-3-05 (date) and does not require a site inspection.
- The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

MARYLAND DEPARTMENT OF THE ENVIRONMENT
WATER MANAGEMENT ADMINISTRATION - WATER RIGHTS DIVISION
 1800 Washington Boulevard • Baltimore, Maryland 21230
 (410) 537-3000 • 1-800-633-6101 • <http://www.mde.state.md.us>

New Application Change in Existing Permit Application Number _____

APPLICATION FOR A PERMIT TO APPROPRIATE AND USE WATERS OF THE STATE FOR AGRICULTURAL PURPOSES

Please complete this form carefully. A complete application will ensure faster processing. Help is available by calling the Water Rights Division at (410)631-3591 or your local extension agent. The Water Management Administration will work with you to develop estimates of water use. The assigned project manager will contact you to obtain additional information, such as acres irrigated, types of animals watered.

Zack Zaccagnini
 Applicant's Name _____ Daytime Telephone Number _____
3239 Eleanor Garden Way Glenwood Md 21738
 Applicant's Address (Street) (City) (State) (Zip Code)

County of Water Use Howard

Location of Water Use
 Same as Above Address
 Other location (Specify) _____

INCLUSION OF TAX MAP INFORMATION OR A DETAILED LOCATION MAP WILL EXPEDITE PROCESSING OF YOUR APPLICATION.

Tax Map Information _____
 (Page) (Block) (Parcel Number)

TYPE OF APPLICATION (Check All That Apply)

- New Application
- Change in Existing Permit
- Required Permit (10,000 gallons per day or more averaged over a year)
- Voluntary Permit (less than 10,000 gallons per day averaged over a year)

PURPOSE (check all that apply)

SOURCE (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Field Crop Irrigation | <input type="checkbox"/> Surface Water (stream, river lake, pond) |
| <input type="checkbox"/> Vegetable Irrigation | <input checked="" type="checkbox"/> Ground Water (<u>wells</u> , groundwater pond) |
| <input type="checkbox"/> Livestock/Poultry Watering | <input type="checkbox"/> Spring |
| <input type="checkbox"/> Aquiculture | |
| <input type="checkbox"/> Horticultural Operation (specify) _____ | |
| <input checked="" type="checkbox"/> Other (specify) <u>Lawn - Trees - Shrubs</u> | |

SIGNATURE Allen Compton
 PLEASE PRINT (Name) Fogles Well (Title) V.P. (Date) 10-4-05