

C1 6626 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 13

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

ST/CO USE ONLY DATE Received MM DO YY 04 27 06 DATE WELL COMPLETED MM DO YY 04 27 06 Depth of Well 22 180 26 9/13/06 (TO NEAREST FOOT) O.K. (BB) PERMIT NO. FROM "PERMIT TO DRILL WELL" 10 95-0062

OWNER JTS Corp last name first name STREET OR RFD Masque Park Ct TOWN Coltone SUBDIVISION 2 SECTION 21/12/12 LOT 28

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandstone, MICKA, Sandstone, MICKA.

GROUTING RECORD form with fields for GROUTING MATERIAL (CM, BC), NO. OF BAGS (29), NO. OF POUNDS (1900), GALLONS OF WATER (174), DEPTH OF GROUT SEAL.

CASING RECORD form with fields for MAIN CASING TYPE (PL), Nominal diameter (6), Total depth of main casing (75).

OTHER CASING (if used) form with fields for diameter and depth.

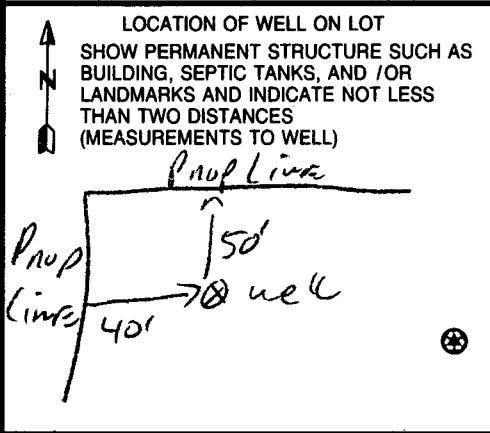
SCREEN RECORD form with fields for screen type (HO), diameter of screen (73), and slot size.

DEPTH (nearest ft.) form with fields for casing height (+) and depth (-) relative to land surface.

MDE USE ONLY form with fields for GRAVEL PACK, TELESCOPE CASING, LOG INDICATOR, and OTHER DATA.

PUMPING TEST form with fields for HOURS PUMPED (3), PUMPING RATE (10), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL, TYPE OF PUMP USED (S).

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED (29), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (+) and depth (-) relative to land surface.



Administrative section including NUMBER OF UNSUCCESSFUL WELLS (0), WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P), DRILLERS LIC. NO. (M S D L L 2), DRILLERS SIGNATURE, LIC. NO. (D), and SITE SUPERVISOR information.

B 1 8930

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 522472 please type

STATE PERMIT NUMBER HD-95-0062 fill in this form completely 79

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

J.T.S. Copp Owner First Name 34 8800 Centre Park M. Suite 209 Street or RFD 55 Columbia MD. 21045 Town 70 State 72 Zip 76

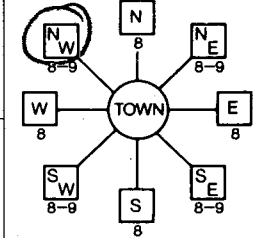
B 3 LOCATION OF WELL

Howard COUNTY 21 Mus Grove Farm SUBDIVISION 42 SECTION 44 46 LOT 28 48 50 GLEWELG NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

DRILLER INFORMATION

Ralph E Mayne MS D117 Driller's Name 76 License No. 81 Ralph E Mayne Inc Firm Name 17024 Handy Rd Mt Airy MD. 21771 Address 7/21/05 Signature 5-14-05 Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Mus Grove Farm Ct. NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST DISTANCE FROM ROAD 200 FT ENTER FT OR MI 38 39 TAX MAP: 21 BLK: 12 PARCEL 12

B 2 WELL INFORMATION APPROX. PUMPING RATE 5 GAL. PER MIN. 8 12 AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY 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 COUNTY NAME 13 COUNTY NO. STATE SIGNATURE DATE ISSUED 6/20/05 EXP. DATE 6/20/06 CO SIGNATURE NORTH GRID 524 000 EAST GRID 798 000

APPROXIMATE DEPTH OF WELL 150 FEET 24 28

APPROXIMATE DIAMETER OF WELL 69 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 DEEPEMED AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

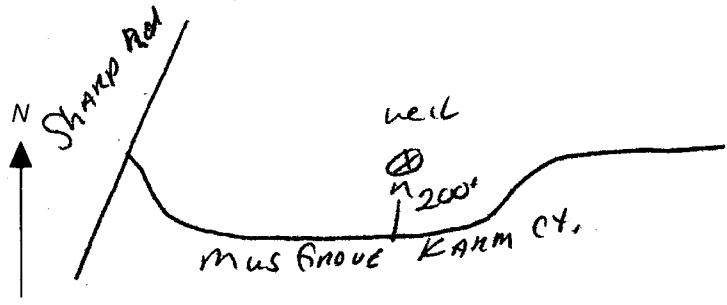
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 525 799 N 800 524

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 HD 2005 G 002 PERMIT No. HD-95-0062 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0062
 Location of property (road) Marysville Farm Ct
 Subdivision Marysville Farm Lot 20 Block 12 Plat 21 Sec. Per. A
 Well Driller Ralph Mague Owner T. T. S. Corp
 Depth of well 150
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 32'

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 10 GPM
 Total time 15 min to reach pumping water level 56' 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 5 gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) |
|-------------------------------|------------------------|---|------------------------------|--------------------------------------|
| 8:30 | 32' | 6 Sec | | 10 GPM |
| | | | Test Started | |
| 8:45 | 56' | 6 Sec | | 10 GPM |
| 9:00 | 56' | 6 Sec | | 10 GPM |
| 9:15 | 56' | 6 Sec | | 10 GPM |
| 9:30 | 56' | 6 " | | 10 " |
| 9:45 | 56' | 6 " | | 10 " |
| 10:00 | 56' | 6 " | | 10 " |
| 10:15 | 56' | 6 Sec | | 10 GPM |
| 10:30 | 56' | 6 Sec | | 10 GPM |
| 10:45 | 56' | 6 Sec | | 10 GPM |
| 11:00 | 56' | 6 " | | 10 " |
| 11:15 | 56' | 6 " | | 10 " |
| 11:30 | 56' | 6 Sec | | 10 GPM |
| 11:45 | 56' | 6 Sec | | 10 GPM |
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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 LLC Telephone #: 443-609-4195
Address: 1425 Woodbine Rd
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 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: Ryan Herms Telephone #: 410-776-0980
Subdivision: Musgrove Farm Lot #: 28 Well Tag #: HO-95-0062
Site Address: 14323 Musgrove Farm Ct
Chesley Md

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Cummins Make: Cummins Two piece watertight cap: yes
Model #: 1550007-180 Model #: N/A Screened, vented well cap: yes
Pump Capacity: 15 GPM Depth: 42 (36" min) Cap secured to casing: yes
Well Yield: 8.5 GPM NSF approved: yes Conduit min 18" B.O.: yes
Depth of well encountered at time of pump installation: 180 (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 arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt N/A

Piping to house House Connection
Type: 1" Riser Plastic PVC sleeved to undisturbed soil at wall penetration: yes
PSI: 160 (160 psi min) Approximate length of sleeve (5 foot minimum): 5

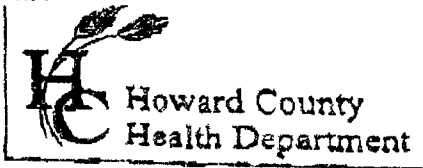
Depth of supply line: 42 (36" min). Sleeve caulked and sealed properly: yes

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:

Allen Compton 1-19-10
Signature of company representative responsible for installation date

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

Date Insp. Requested: _____ Date Insp. Approved: 1/13/2010 BB
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 ✓



3525 H Ellicott Mills Drive • Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2923 Toll Free 1-866-313-6300
website: www.hchealth.org

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

ATTENTION WELL DRILLERS!!!

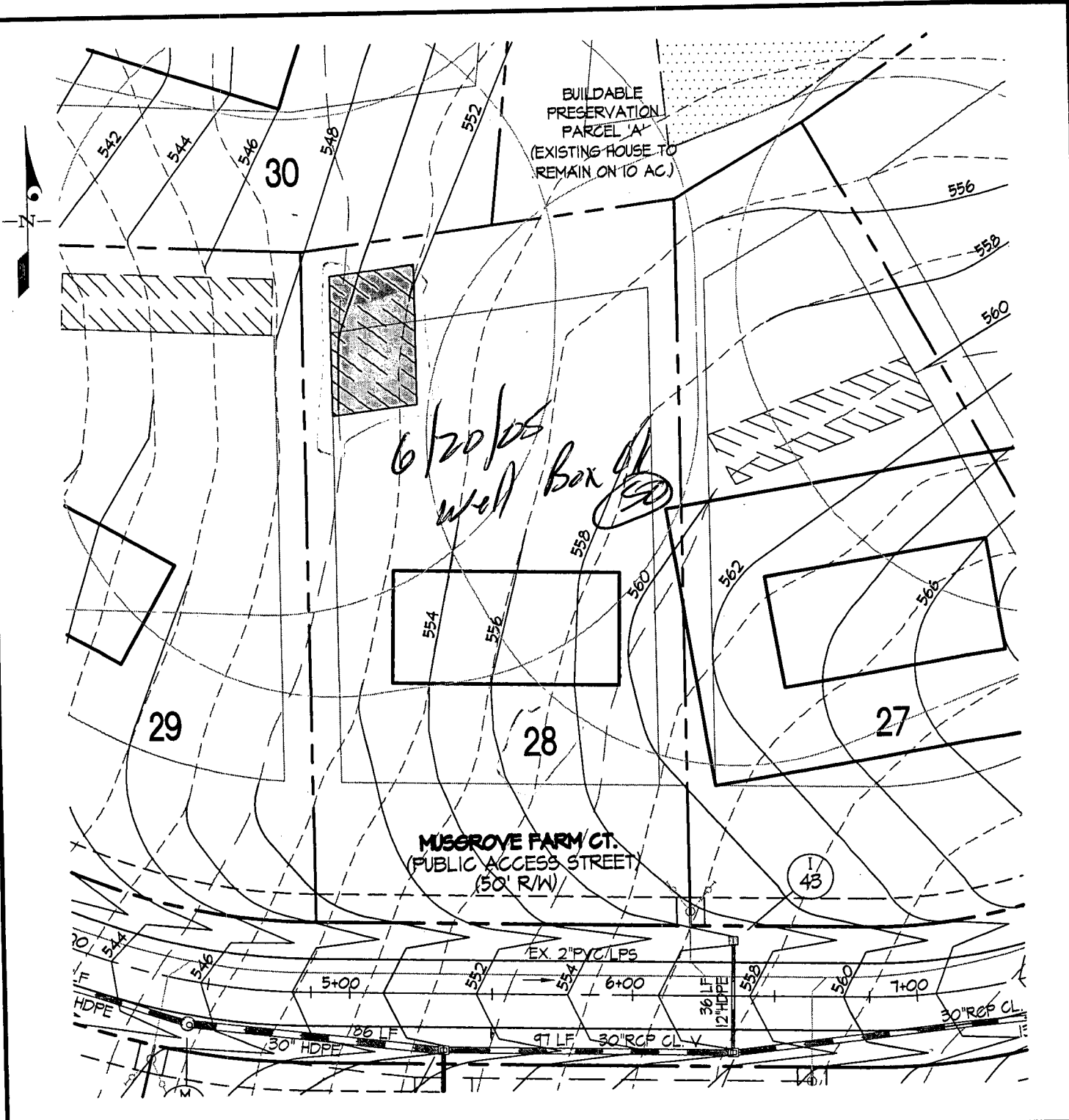
Muscrow Farm

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by Gutachick Little & Weber PA on 05/05/05 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN



LEGEND



CONCEPTUAL HOUSE BOX

4022
W-28



WELL SURVEY POINT

WELL BOX

WELL LOCATION EXHIBIT - LOT 28

MUSGROVE FARM

Lots 1 thru 30, Buildable Preservation Parcels 'A',
and Non-Buildable Preservation Parcels 'C' and 'D'

GLW GUTSCHICK LITTLE & WEBER, P.A.

CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS
3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK
BURTONSVILLE, MARYLAND 20866
TEL: 301-421-4024 BALT: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186

SCALE: 1"=50'

ZONING: RC/RR-DEO

TAX MAP/GRID: 22-12.22-1&7

GLW JOB NO: 01171

APR., 2005

1 OF 1

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 74850
Reference: Ryan Homes Lot #28
Location: 14323 Musgrove Farm Court
Glennelg, MD 21737
Date/ Time Collected: 4/9/2010 1300
Date/Time Rec'd: 4/9/2010 1545
Chlorine ppm: Free: ND Total: ND
Collected By: J. Fogle 1974JF
Account #: 1930
Company: Fogle's Well Drilling
Requested By: Dave Fogle
Source: Well Water
Site: Kitchen Sink Tap
Treatment: None
pH: 6.0
Well #: HO-95-0062

| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|--------------------|------------------------|
| Nitrate | <1.0 | mg/L | 10 | 601 | 4/9/2010 / 1545 / CWM |
| Turbidity | 0.81 | NTU | <10 | SM18 2130B | 4/9/2010 / 2200 / BCD |
| Sand | NS | mg/L | 5 | Visual/Gravimetric | 4/9/2010 / 2200 / BCD |
| Bacteria, Coliform, Total, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 4/10/2010 / 1000 / CCH |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 4/10/2010 / 1000 / 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; N/A: Not Available
- 7 Sample collected by client, analyzed as received
- 8 pH and Chlorine level tested in lab

Reason for Test : Use & Occupancy
Building Permit # : B09002500

Date Reported: 4/12/2010

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 #: | 74803 | Account #: | 1930 |
| Reference: | Ryan Homes Lot #28 | Company: | Fogle's Well Drilling |
| Location: | 14323 Musgrove Farm Court Glenelg, MD 21737 | Requested By: | Dave Fogle |
| Date/ Time Collected: | 4/7/2010 1130 | Source: | Well Water |
| Date/Time Rec'd: | 4/7/2010 1426 | Site: | Kitchen Sink Tap |
| Chlorine ppm: | Free: ND Total: ND | Treatment: | None |
| Collected By: | J. Fogle 1974JF | pH: | 6.2 |
| | | Well #: | N/A |

| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|--------------------|---------------------------|
| Bacteria, Coliform, Total, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 4/8/2010 / 0900 / KME |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 4/8/2010 / 0900 / KME |
| Nitrate | 3.73 | mg/L | 10 | 601 | 4/7/2010 / 1615 / BCD |
| Turbidity | 0.59 | NTU | <10 | SM18 2130B | 4/7/2010 / 1450 / KME/BCD |
| Sand | NS | mg/L | 5 | Visual/Gravimetric | 4/7/2010 / 1450 / KME/BCD |

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; N/A: Not Available
- 7 Sample collected by client, analyzed as received
- 8 pH and Chlorine level tested in lab

Reason for Test : Use & Occupancy

Building Permit # : B09002500

Date Reported: 4/8/2010



Howard County
Health Department

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 Beilenson, M.D., M.P.H., Health Officer

February 3, 2010

Homeowner
14323 Musgrove Farm Court
Glenwood, MD 21738

RE: Musgrove Farm, Lot 28
14323 Musgrove Farm Court
BP #: B09002500
Well Tag: HO-95-0062

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 1/26/2010. Final approval of the well line connection to the dwelling was approved on 1/13/2010.**

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-95-0062. 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) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 1/21/2010
Date of Well Completion: 04/27/2006

Approving Authority,



Brian Baker, R.S.
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File