

C1 6625 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

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

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER 13

ST/CO USE ONLY DATE Received MM DD YY 04 27 06

DATE WELL COMPLETED MM DD YY 04 27 06 Depth of Well 22 140 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-95-0064

OWNER ITS Corp STREET OR RFD Morgan's Farm CT TOWN Glenady SUBDIVISION SECTION 21/12/12 LOT 27

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, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL (C) M BENTONITE CLAY (B) C CEMENT NO. OF BAGS 28 NO. OF POUNDS 2800 GALLONS OF WATER 168 DEPTH OF GROUT SEAL 30+

CASING RECORD

MAIN CASING TYPE PL Nominal diameter 6 Total depth 76

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole (S) T (B) R (H) O insert appropriate code below

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 55 TYPE OF PUMP USED (for test) S submersible

NUMBER OF UNSUCCESSFUL WELLS: 2

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER 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. 1 M SD 112 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

DEPTH (nearest ft.)

Table with columns: E A C H S R E E SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

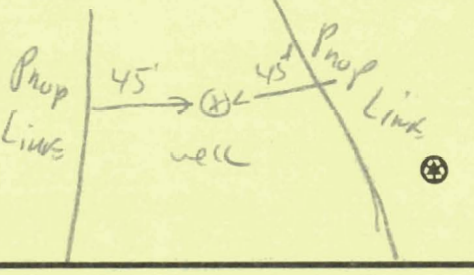
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

70 72 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (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 (49) LAND SURFACE (nearest foot) below (2) (50 51)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



B 1 8929

SEQUENCE NO. (MDE USE ONLY)

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

STATE PERMIT NUMBER

HD-95-0061 fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

S. Comp Owner First Name 34 8800 Centre Park Dr. Suite 205 Street or RFD 55 Columbia Md. 21045 Town 70 State 72 Zip 76

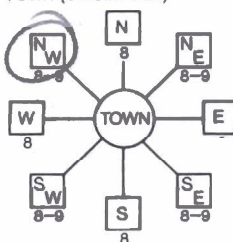
B 3 LOCATION OF WELL

Howard COUNTY 21 Musgrave Farm SUBDIVISION 42 SECTION 44 46 LOT 27 48 50 GLENELG NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

DRILLER INFORMATION

Ralph Mayne MS D112 Driller's Name 76 License No. 81 Ralph Mayne Inc Firm Name 17024 Handy Rd Mt. Airy MD 21224 Address 5-14-05 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Musgrave Farm Ct. NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH 34 175 37 DISTANCE FROM ROAD 41 ENTER FT OR MI 38 39 TAX MAP: 21 BLK: 12 PARCEL 12

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)

- D 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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME 13 COUNTY NO STATE SIGNATURE INSERT S DATE ISSUED 6/20/05 CO SIGNATURE 6/20/06 EXP. DATE NORTH GRID 524 000 EAST GRID 798 000

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 61 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
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 DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

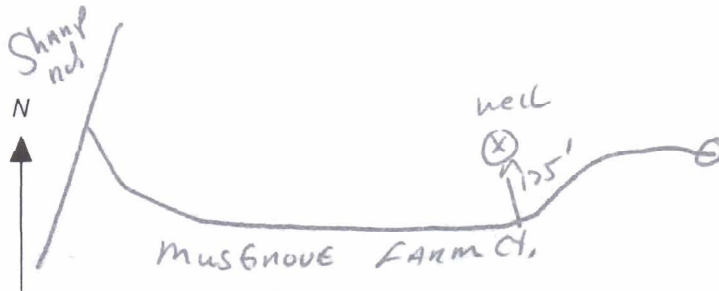
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER 1. well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 525 798 000 000 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 2005G 002 PERMIT No. HD-95-0061

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.



~~Other Note~~

**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: HomeLand Pump and Water Telephone #: 413-846-8659  
Address: 335 Bulley Cir  
Hanover, PA 17231

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Michael Dudd License# PT0161

\*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 Homes Telephone #: 410-972-5799  
Subdivision: Musgrave Farms Lot #: 27 Well Tag #: HO-95-00601  
Site Address: 14329 Musgrave Farm Ct  
Glenely MD

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Grundfos</u>	Make: <u>Carlisle</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>15SDA1180</u>	Model #: <u>PA200</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity: <u>15</u> GPM	Depth: <u>4.2</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>2.5</u> GPM	NSF approved: <u>ye</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>1.21</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

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 \_\_\_\_\_

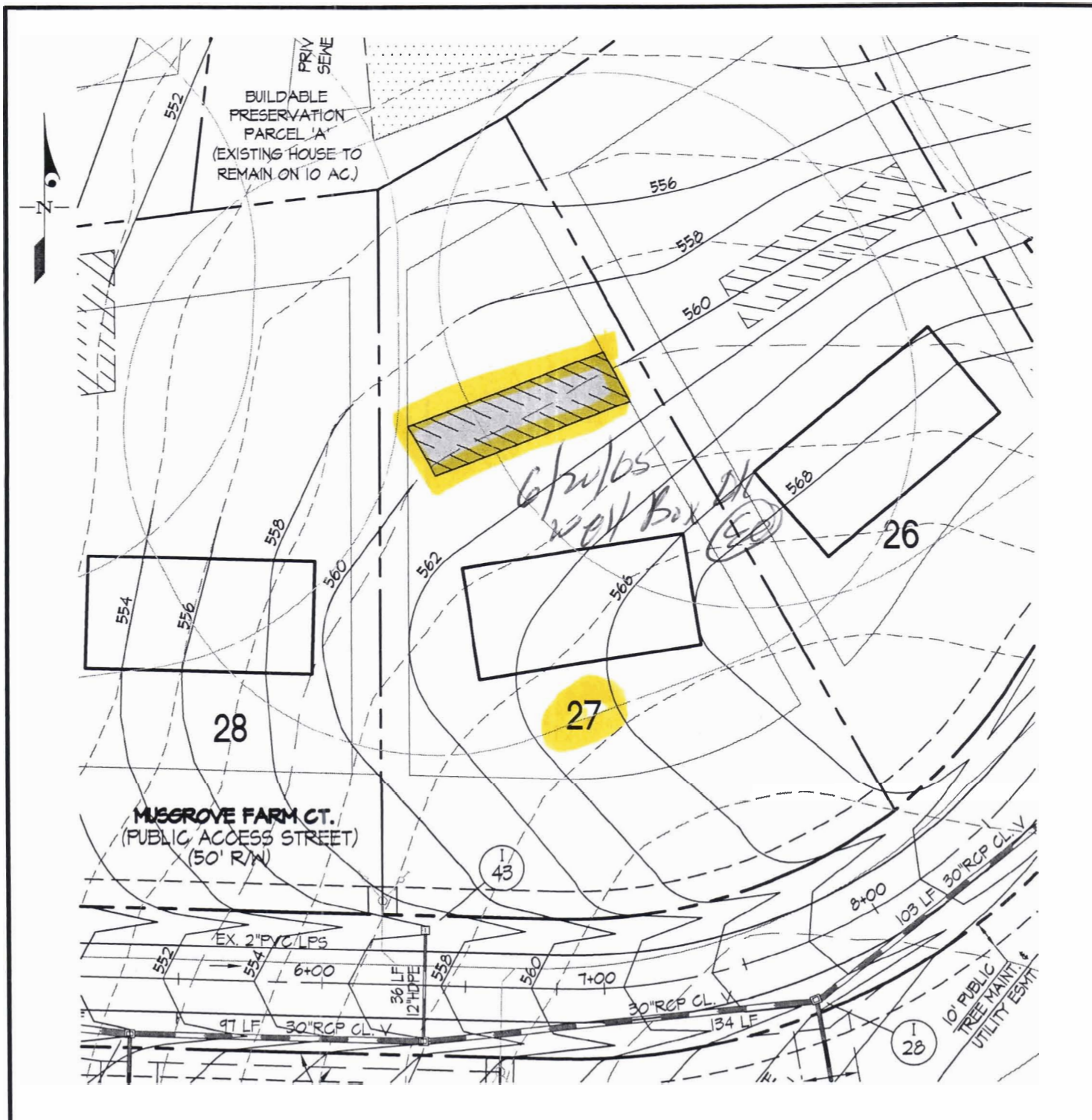
<b>Piping to house</b>	<b>House Connection</b>
Type: <u>SIDRY HDEPA2</u>	PVC sleeved to undisturbed soil at wall penetration: <input checked="" type="checkbox"/>
PSI: <input checked="" type="checkbox"/> (160 psi min)	Approximate length of sleeve: <u>6</u>
Depth of supply line: <input checked="" type="checkbox"/> (36" min)	Sleeve caulked and sealed properly: <input checked="" type="checkbox"/>

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: \_\_\_\_\_ date: 8/12/08

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

Date Insp. Requested: 8-28-08 Date Insp. Approved: 8-29-08 Kevin  
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   
(KW)



**LEGEND**



CONCEPTUAL HOUSE BOX

4022  
W-27



WELL SURVEY POINT

WELL BOX

**WELL LOCATION EXHIBIT - LOT 27**

**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

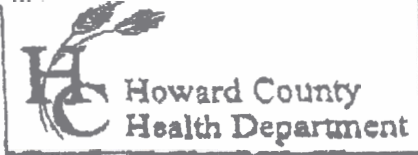
APR., 2005

1 OF 1

MAY-10-2005 16:49  
APR-26-2005 17:04

J. THOMAS SCRIVENER  
J. THOMAS SCRIVENER

410 964 2620 P.02  
410 964 2620 P.02



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

**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

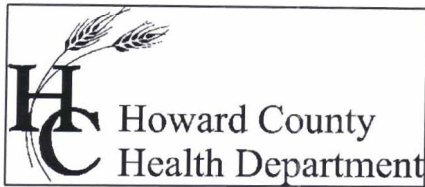
APR 26 2005 04:55PM P2

FAX NO. : 4104899734

FROM : RALPH HAYNE WELL DRILLING

TOTAL P.02

TOTAL P.02



Bureau of Environmental Health  
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132  
(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

September 25, 2008

Ryan Homes (NVR, Inc.)  
6085 Marshalee Drive, Ste. 130  
Elkridge, MD 21075

SENT VIA FACSIMILE 410-796-7094

RE: Musgrove Farm, Lot 27  
14329 Musgrove Farm Court  
Glenwood, MD 21738  
BP# B08001632  
Well Tag #: HO-95-0061

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 09/24/2008. Final approval of the well line connection to the dwelling was approved on 08/29/2008.**

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.

#### 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-95-0061. 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: 09/19/2008  
Date of Well Completion: 04/27/2006

Approving Authority,

Stuart Oster, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File

# Environmental Testing Lab Inc.

108 Old Solomons Island Rd  
Annapolis, MD 21401



3430 Rockefeller Ct  
Waldorf, MD 20602

State Certified Water Quality  
Laboratory # 106

State Certified Water Quality  
Laboratory # 139

## REPORT OF ANALYSIS

September 23, 2008

Tim Shotzberger  
Home Land Septics  
308 Liberty Road  
Baltimore, MD 21221

Lab Number: 79556  
Date Received: 9/19/08 13:45  
Project: HO-95-0061

Sample No: 79556-01                      Sampled: 9/19/2008 11:00:00 A  
Client ID: Lot 27 Musgrove Farm      Sampler: 8065TS Shotzberger  
                  14329 Musgrove Farm  
                  Ct  
                  Glenwood, MD 21737

Parameter	Method	Result	Units	MDL	Test Date	Analyst
Bacteria-Total Coliform	SM 9223	Absent/PASS	per 100 ml	1	9/19/2008	DB
Bacteria-E.coli	SM 9223	Absent/PASS	per 100 ml	1	9/19/2008	DB
pH	Field	* 6.0	pH Units		9/19/2008	
Nitrate + Nitrite as N	EPA 353.2	7.22	mg/l	0.05	9/23/2008	PM
Turbidity	EPA 180.1	< 0.5	NTU's	0.5	9/23/2008	PM
Sand	Visual	0	g/L		9/19/2008	
Clarity	Field	Clear			9/19/2008	

**Notes:**

- 79556-01 -No chlorine was present at the time of collection as reported by the sample collector. PH results provided by sample collector.
- The Maximum Contaminate Levels are as follows: PH 6.5-8.5, Iron 0.3, Nitrate/Nitrite 10.0, Turbidity 10.0.
- An " \* " next to a result means the result exceeded the Maximum Contaminate Level as established by the EPA.
- " < " = Less Than ; " > " = Greater Than.
- Nitrate/Nitrite are "Primary Contaminates"; Health related, enforceable. Iron,pH,Turbidity are "Secondary Contaminates" Non-Health related, non-enforceable.

Reviewed and Approved by:

Daniel J. Brumsted  
Laboratory Director