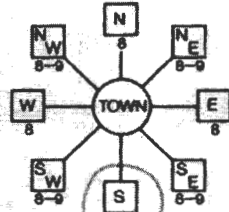


**B 1** 2199 SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND** STATE PERMIT NUMBER HO-95-2206  
**APPLICATION FOR PERMIT TO DRILL WELL** please type 535993 fill in this form completely

**OWNER INFORMATION**  
 Date Received (APA) 10 05 11  
 8 MM DD YY 13  
 15 Last Name Land Design + Development Owner First Name 34  
 36 Street or RFD 5300 Dorsey Hall Dr, Suite 102 55  
 57 Town Ellicott City MD 21043 State 72 Zip 76

**B 3** Howard LOCATION OF WELL  
 8 COUNTY Howard 21  
 23 SUBDIVISION Jeff Harrison Property 42  
 SECTION Parcel A LOT 48 50  
 52 NEAREST TOWN Mt Airy 71  
 MILES FROM TOWN (enter 0 if in town) 1 MI 73 76 77 78

**DRILLER INFORMATION**  
 Driller's Name Michael Barlow MD 355 76 License No. 81  
 Firm Name Barlow Well Drilling  
 Address 522 Underwood Lane 21044  
 Signature [Signature] Date 9/27/11

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
  
 11 NEAR WHAT ROAD 18321 Penn shop Rd 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 1000  
 34 WEST 37 EAST  
 DISTANCE FROM ROAD 57 ENTER FT OR MI 38 39  
 TAX MAP: 6 BLK: 4 PARCEL 19

**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) 5  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 14 20

**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**  
 COUNTY NAME Howard COUNTY NO. 13 A510657  
 STATE SIGNATURE \_\_\_\_\_ INSERT S → 41  
 DATE ISSUED 10/19/2011 CO SIGNATURE Brian Baker EXP. DATE 10/19/2012  
 43 MM DD YY 48  
 NORTH GRID 550 000 EAST GRID 754 000  
 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET  
 24 28

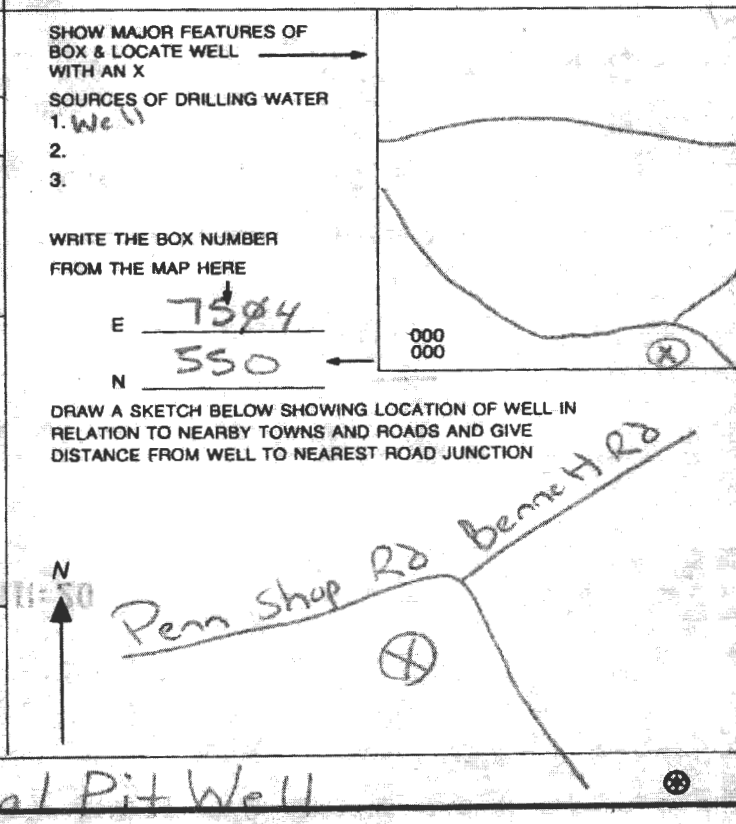
APPROXIMATE DIAMETER OF WELL 6 INCH  
 NEAREST INCH

**METHOD OF DRILLING** (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 CABLE REVERSE-ROTARY Drive-POINT  
 other \_\_\_\_\_

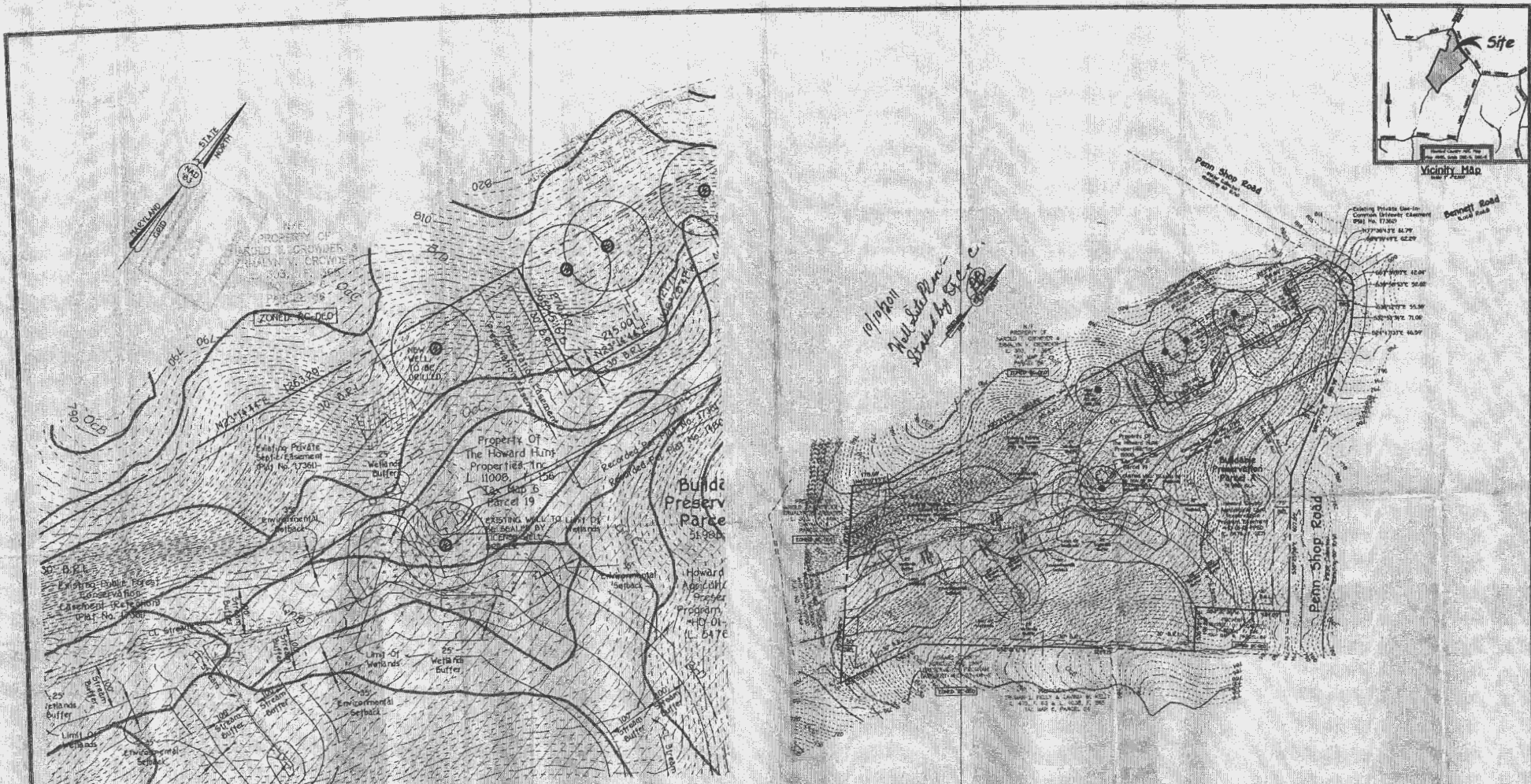
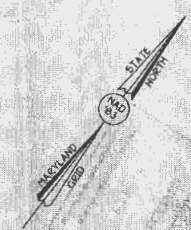
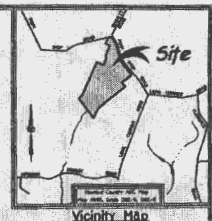
**REPLACEMENT OR DEEPEMED WELLS** (CIRCLE APPROPRIATE BOX)  
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED Pit Well  
 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 D THIS WELL WILL DEEPEMED AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_  
 PERMIT No. HO-95-2206  
 70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS**  
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEETS IF NEEDED  
Abandon and Seal Pit Well







*10/1/2011  
Well Site Plan  
Submitted by SDC, Inc.*

**Soils Legend**

SOIL	NAME	CLASS
B10	Brandy clayey loam, 10 to 20 percent slopes	E
B1F	Brandy-clayey loam, 10 to 20 percent slopes	L/C
C10	Clayey silt loam, 3 to 6 percent slopes	C
C1F	Clayey silt loam, 0 to 6 percent slopes	C
H1	Hagerstown silt loam, 0 to 2 percent slopes	D
C10	Clayey silt loam, 3 to 6 percent slopes	F
G1C	Clayey silt loam, 0 to 15 percent slopes	A

**NOTES:**  
 \* Hatched with hatched indicates  
 - May exclude hatched indicators  
 † Generally only within 500-foot threshold areas

**ATKINS COLLINS & CARTER, INC.**  
 2000 UNIVERSITY DRIVE, SUITE 100  
 ANNAPOLIS, MARYLAND 21403  
 PHONE: 410-291-1000  
 FAX: 410-291-1001  
 WWW.ACKC.COM

**Owner**  
 The Howard Hunt Properties, Inc.  
 2000 University Drive, Suite 100  
 Annapolis, Maryland 21403  
 410-291-1000

**Developer**  
 Lead Design & Development, Inc.  
 2000 University Drive, Suite 100  
 Annapolis, Maryland 21403  
 410-291-1000

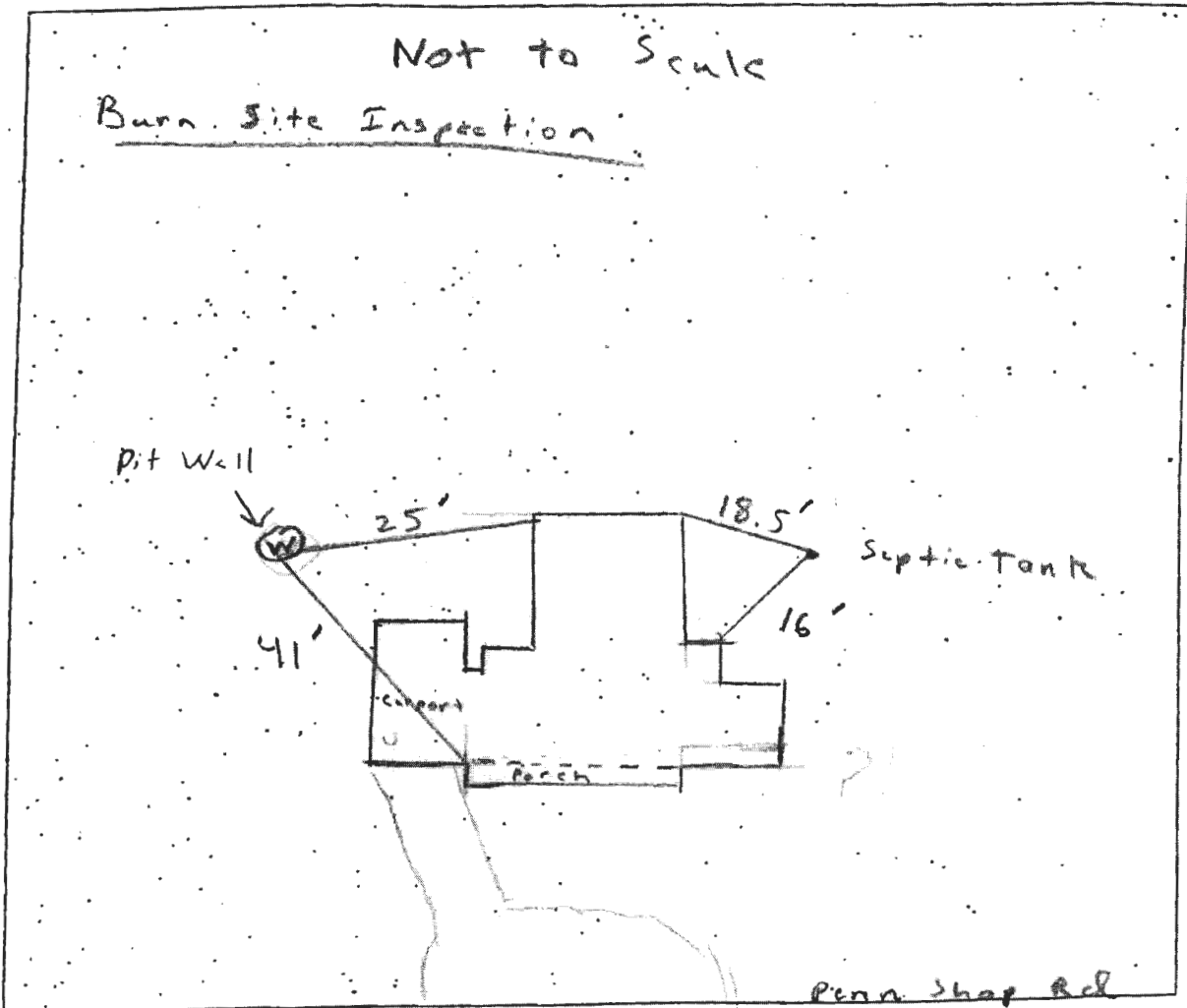
**WELL EXHIBIT**  
**Jeff Harrison Property**  
 Buildable Preservation Parcel A  
 PARCELS 10  
 HOWARD COUNTY, MARYLAND  
 DATE: AUGUST 28, 2010

TAX MAP '10  
 2009-2010-2011  
 FOURTH ELECTION DISTRICT  
 SCALE: 1"=100'

SITE INSPECTION SHEET

OWNER: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
ADDRESS: 18321 Penn Shop Rd CONTRACTOR: \_\_\_\_\_  
WELL TAG #: N/A  
SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY #: Howard  
PROPOSAL: \_\_\_\_\_

LOCATION DIAGRAM



COMMENTS: 3/1/11 Field located well and septic tanks. The well water line is 5ft from top of riser. Septic C/O is 1.5ft above grade and the outlet of septic tank is 5' from top of C/O. The inside of the home is completely damaged. The rear of the home suffered the most damage from the fire. The well and septic tank had viewable damage.

1" = 50'

6" Tank Cleanout

EXISTING  
DWELLING  
TO REMAIN

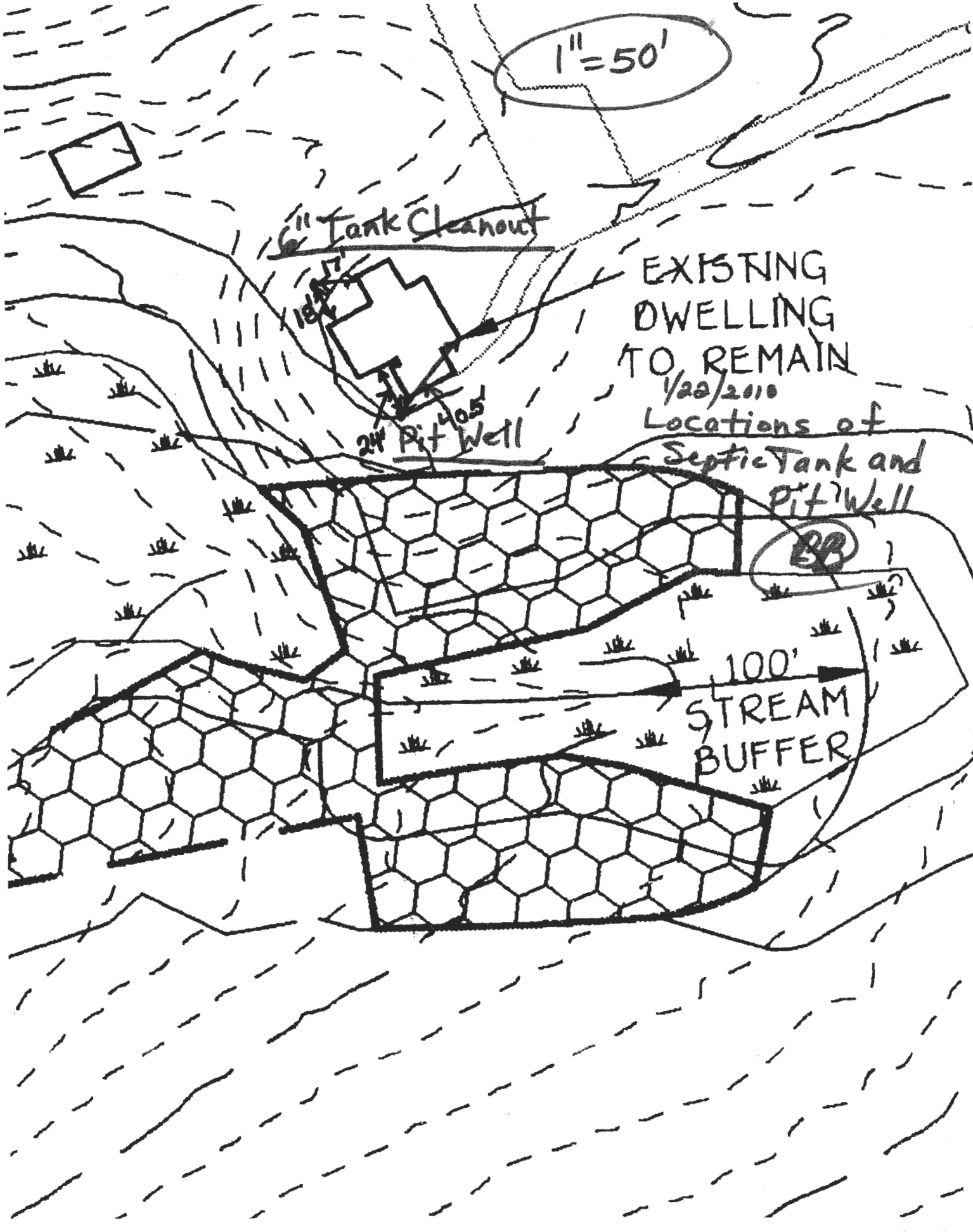
1/22/2010

Locations of  
Septic Tank and  
Pit Well

24" Pit Well

BB

100'  
STREAM  
BUFFER





**TRACE LABORATORIES, INC**  
 5 North Park Drive  
 Hunt Valley, MD 21030 USA  
 Telephone: 410/584-9099 / Fax: 410/584-9117  
 Website: www.trace-labs.com / Email: info@trace-labs.com

Maryland State Certified Laboratory #318

**CERTIFICATE OF ANALYSIS**

**Requester:**

Trae Reuwer  
 Waverly Builders & Developers  
 5300 Dorsey Hall Drive, Suite 102  
 Ellicott City, Maryland 21042

S/O Number: 85907

Report Date: July 16, 2012

Property Sampled: 18321 Penn Shop Road, 21771  
 Sample Location: Kitchen Tap  
 Residual Chlorine: <0.1 mg/L

Building Permit #: B11003474  
 Sampler ID #: 4723TL  
 Samples Iced: Yes

County: Howard  
 Map: 6

Subdivision: Jeff Harrison Property  
 Parcel: 19

Lot #: Par A

Date/Time Collected in Field: July 13, 2012 @ 1:45 pm  
 Date/Time Received in Lab: July 13, 2012 @ 3:37 pm

Well Tag #: HO-95-2206  
 Well Condition: 2-Piece Cap, Satisfactory

*Results OK  
 7-20-12 HS*

Water Treatment/Conditioning: None

PARAMETER	METHOD	MCL/*SMCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	Absent	Pass
E. coli	SM 9223B	Absent	Absent	Pass
Nitrate	SM 4500D	10 mg/L as N	3.0 mg/L as N	Pass
Turbidity	EPA 180.1	10 NTU	1.1 NTU	Pass
pH	EPA 150.1	*6.5-8.5 Units	6.5 Units	***
Sand		Absent	Absent	Pass

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

*Katherine C. Higgs*  
 Katherine Higgs  
 Manager - Drinking Water Group

MCL: Maximum Contamination Level, an enforceable level established by the EPA  
 \*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA  
 \*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.

# Water Testing Laboratories

P.O. Box 712  
Stevensville, MD 21666  
410-643-7711

of Maryland, Inc.

Donald Reuwer  
5300 Dorsey Hall Drive  
Ellicott City, MD 21042

Reporting Date: 6/22/2012  
Report #: K8498

Submitted Sample Address: 18321 Penn Shop Road  
Mt. Airy, mD 21771  
Submitted Sample Source: Outside faucet  
Date / Time Collected: 6/20/2012 11:11 AM  
Sample Type: Drinking Water  
Sampler/Company: D. Pitts 4322DP, WTL of MD  
Field Record: Chlorine residual: Absent Clear when drawn  
Well #: HO-95-2206

*Bad bacteria !!  
Rest-OK 7-10-12  
HS*

## Analytical Results

Parameter	Result	Units	Report Limit	MCL	Analytical Method
Total Coliforms	<b>Present</b>	Coliforms/100 ml	Present/Absent	Present	SM 9223B
<i>E. Coli</i>	<b>Absent</b>	Coliforms/100 ml	Present/Absent	Present	SM 9223B
Nitrates + Nitrites	7.2	mg/L	1.0	10	EPA 353.2
Sand	<b>Absent</b>	P/A	Present/Absent	Present	Visual
Turbidity	1.3	NTU	0.5	10	SM 2130B
pH	6.6	SU	0.1	6.5-8.5 (SMCL)	SM 4500 H <sup>+</sup> B

Notes:

- Bacteriological analysis of this sample indicates this water is **unsafe** for human consumption.
- MCL is EPA's maximum contaminant level under primary drinking water regulations. SMCL is secondary maximum contaminant level and is the aesthetic quality only. If your result is above any MCL or SMCL, you may want to consider a water treatment system or a new well. Please check your local regulations for any restrictions or additional limits.
- ND - Not Detected.
- Sample received and examined within EPA's recommended holding time.
- Analyzed by Lab 214.
- SM - Greenberg, Clesceri and Eaton, *Standard Methods for the Examination of Water and Wastewater*, 21<sup>st</sup> Ed.

Reported by,

*Christen Rodgers*

C. Rodgers, Customer Service Representative

Reviewed by: *JNB*

<b>C1</b> 13703	SEQUENCE NO (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER	
ST/CO USE ONLY DATE RECEIVED MM DD YY 02 02 02	DATE WELL COMPLETED MM DD YY 01 24 02	Depth of Well 25 300 26 2/29/02 (TO NEAREST FOOT) <b>OK</b>	PERMIT NO. FROM "PERMIT TO DRILL WELL" No. 95-2206

OWNER Land Design & Development  
 WELL SITE ADDRESS 18321 Peninsula Rd TOWN 1774 Ave  
 SUBDIVISION Jeff Harrison Park SECTION \_\_\_\_\_ LOT Parcel A

WELL LOG			
Not required for driven wells			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			
DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Soil	0	10	
Clay	10	19	
Brown shale	19	52	
Soft gray Rock	52	75	
med. gray Rock	75	140	✓
Soft gray Rock	140	170	
med. gray Rock	170	230	✓

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
Y <input checked="" type="checkbox"/>	N <input type="checkbox"/>
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT <b>CM</b>	BENTONITE CLAY <b>BC</b>
NO. OF BAGS <u>22</u>	NO. OF POUNDS <u>263</u>
GALLONS OF WATER <u>122</u>	
DEPTH OF GROUT SEAL (to nearest foot)	
from <u>0</u> TOP ft to <u>30</u> BOTTOM ft (enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below	<b>ST</b> STEEL	<b>CO</b> CONCRETE
	<b>PL</b> PLASTIC	<b>OT</b> OTHER
	MAIN CASING TYPE <u>PL</u>	Total depth of main casing (nearest foot) <u>80</u>
	Nominal diameter top (main) casing (nearest inch) <u>6</u>	

OTHER CASING (if used)	
EACH CASING	OTHER CASING (if used)
PL	diameter <u>4 1/2</u> inch depth (feet) <u>180</u>

SCREEN RECORD			
screen type or open hole insert appropriate code below	<b>ST</b> STEEL	<b>BR</b> BRASS	<b>HO</b> OPEN HOLE
	<b>PL</b> PLASTIC	<b>OT</b> OTHER	

DEPTH (nearest ft)	
<b>C2</b>	DEPTH (nearest ft)
1	<u>180</u> <u>300</u>
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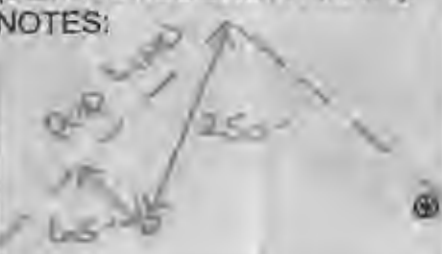
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 66	66
---	----

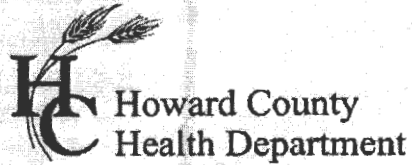
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)		
T (E.R.O.S.)	W Q	
70	72	74 75 76
TELESCOPE CASING	LOG INDICATOR	OTHER DATA

PUMPING TEST		
1	2	
HOURS PUMPED (nearest hour)	<u>3</u>	
PUMPING RATE (gal. per min.)	<u>60.0</u>	
METHOD USED TO MEASURE PUMPING RATE	<u>Submersible</u>	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	<u>31</u> ft	
WHEN PUMPING	<u>100</u> ft	
TYPE OF PUMP USED (for test)		
<b>A</b> air	<b>P</b> piston	<b>T</b> turbine
<b>C</b> centrifugal	<b>R</b> rotary	<b>O</b> other (describe below)
<b>J</b> jet	<b>S</b> submersible	

PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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 28	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	<u>20</u>
PUMP HORSE POWER	<u>2</u>
PUMP COLUMN LENGTH (nearest ft.)	<u>42</u>
CASING HEIGHT (circle appropriate box and enter casing height)	
<input checked="" type="checkbox"/> above	LAND SURFACE
<input type="checkbox"/> below	(nearest foot)

LATITUDE 39.20.584  
 LONGITUDE 77.09.619  
 (DEFAULT COORD. WGS 84)

NOTES:  




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

**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – January 20<sup>th</sup>, 2013**

July 20<sup>th</sup>, 2012

Homeowner  
18321 Penn Shop Road  
Mt. Airy, MD 21771

**RE: Jeff Harrison Property, Parcel A  
18321 Penn Shop Road  
Building Permit: B11003474  
Well Permit: HO-95-2206**

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 6/1/2012. Final approval of the well line connection to the dwelling was granted on 5/30/2012. The well construction was completed on 1/24/2012. Water samples were collected on 6/20/2012 & 7/13/2012.

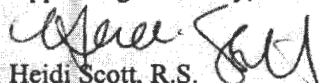
The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-2206. 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,

  
Heidi Scott, R.S.  
Environmental Sanitarian  
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits  
Community Hygiene Program  
File