

C 1 08158

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER A-520448 A 520385

ST/CO USE ONLY DATE RECEIVED MM DD YY 07 11 12

DATE WELL COMPLETED MM DD YY 08 29 12

Depth of Well 22 205 26 10/3/2012

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-2355

OWNER Land Marketing Consultants WELL SITE ADDRESS HAYLAND PARKWAY TOWN CLACKSVILLE MD. SUBDIVISION WALNUT CREEK SECTION LOT 64

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, Clay, Sand Stone, White mica, Sand Stone, White mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 16 NO. OF POUNDS 1600

CASING RECORD (S) (T) (C) (O) (P) (L) (O) (T) MAIN CASING TYPE PL Nominal diameter 6 Total depth 38

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

SCREEN RECORD (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) screen type or open hole (S) (T) (B) (R) (H) (O) (P) (L) (O) (T)

DEPTH (nearest ft.) 1 2 HO 36 205

C 3

PUMPING TEST HOURS PUMPED 3 PUMPING RATE 8.5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL 27 BEFORE PUMPING WHEN PUMPING 32 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP YES (NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 CAPACITY: GALLONS PER MINUTE 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) (+) above (2) LAND SURFACE (-) below (2) (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER A 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. M SD 117 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. SD

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 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

LATITUDE 39.14.273 LONGITUDE 76.56.510 (DEFAULT COORD. WGS 84) NOTES:

B 1 14946

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO -95 -2355

fill in this form completely

538031-G please type

Date Received (APA)

08 06 12

OWNER INFORMATION

8 MM DD YY 13
Land Marketing Consultants
15 Last Name Owner First Name 34
PO Box 482
36 Street or RFD 55
LCS Bow MD. 21765
57 Town 70 State 72 Zip 76

B 3

LOCATION OF WELL

Howard
8 COUNTY 21
Walnut Creek
23 SUBDIVISION 42
SECTION 44 46 LOT 64 48 50
CLARKSVILLE
52 NEAREST TOWN 71

DRILLER INFORMATION

Ralph E Mayne M S D 117
Driller's Name 76 License No. 81
Ralph Mayne Well Drilling
Firm Name
17024 Handy Rd Mt. Airy MD. 21771
Address
Ralph E Mayne 4/14/12
Signature Date

B 4

SOURCES OF DRILLING WATER

1. well
2.
3.

Hayland Farm way
11 STREET ADDRESS 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 250 37
DISTANCE FROM ROAD
ENTER FT OR MI 38 39

TAX MAP: 28 BLK: 11 PARCEL 49

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5
8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 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
- OPEN LOOP GEOTHERMAL
- CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A520448 13
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S →
DATE ISSUED 08/17/12 R-AT 8/17/13
43 MM DD YY 48 CD SIGNATURE EXP. DATE 41

APPROXIMATE DEPTH OF WELL 150 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6" 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 _____

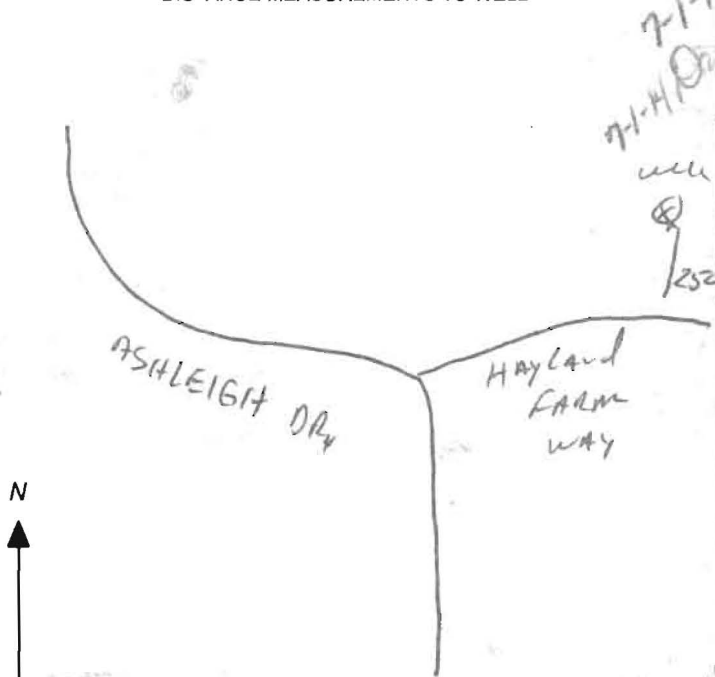
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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 _____ 52

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

APPROP. PERMIT NUMBER HO 2006G020
PERMIT No. HO -95 -2355
70 71 72 73 74 75 76 77 78 79

PROPOSED LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED-

Radium sample required at yield test/100' apart All wells must be at least 100' apart

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: Tri-County Pump Service, Inc Telephone #: 301.831.8331
Address: 6711 Old Marlboro Pike
Passapatanz, Md 21113

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:
Name (Print): William E. Griffith License #: 20135

*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: Craftmark Homes Telephone #: 702-932-0513
Subdivision: Walnut Lot #: 64 Well Tag #: HO-95-135
Site Address: Highland Forest by 5009 Lindora Ct
Ellicott City, Md

Submersible Pump Data

Make: Shark
Model #: SP450721
Pump Capacity: 7 GPM
Well Yield: 10 GPM

Pitless Adapter

Make: American County
Model #: PT 800
Depth: 36 (36" min)
NSF/WSC approved: Y

Well Cap and Electric Conduit

Two piece watertight cap: Y
Screened, vented well cap: Y
Cap secured to casing: Y
Conduit min 18" B.G.: Y

Depth of well encountered at time of pump installation: 185 (feet) Conduit secured to well cap: Y

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.3.4

Torque arrestors, 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

Piping to house

Type: PVC
PSI: 20 (160 psi min)
Depth of supply line: 36 (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: 20
Length of sleeve(s* minimum from foundation): 20
Sleeve sealed properly: Y

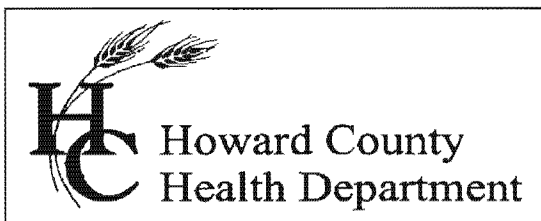
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: William E. Griffith date: 7-29-2011

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

Date Insp. Requested: _____ Date Insp. Approved: 7/30/11 Inspector: BBD

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 ✓



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1771 | 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 – May 13, 2015

November 13, 2014

Homeowner
5009 Lindera Court
Ellicott City, MD 21765

**RE: Walnut Creek, Lot # 64
5009 Lindera Court
Building Permit: B14001673
Well Permit: HO-95-2355**

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 **11/13/2014**. Final approval of the well line connection to the dwelling was granted on **7/30/2014**. The well construction was completed on **8/29/2012**. Water samples were collected on **8/29/2012 and 11/5/2014**.

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.

Gross Alpha and Beta samples were also collected on **8/29/2012**. Results showed a Gross Alpha level of **3.6 ± 1.9 pCi/L** and **Gross Beta** level of **5.3 ± 2.0 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

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-95-2355. 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 certified water quality 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,

Hank Oswald

Hank Oswald, L.E.H.S.
Environmental Sanitarian
Well & Septic Program

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

Martin, Sharhonda

From: Baucom, Scott
Sent: Tuesday, October 28, 2014 3:31 PM
To: Day, Lori; Wolf, Kevin
Cc: Hart, Amy; Rocco, Anthony; Tuder, Matt; Baker, Brian; Martin, Sharhonda; Williams, Jeffrey; Bozzell, Duane
Subject: CORRECTION - U&O Release 5009 Lindera Court

Corrected Subject Line

On the morning of October 28th, Duane Bozzell observed the start-up of a Sewage Grinder Pump at the Walnut Creek Shared Septic System:

Craftmark Homes
Walnut Creek, Contract 4530, Lot #64,
5009 Lindera Court
Ellicott City, MD 21042

The Sewage Grinder Pump test was successful ; the Bureau of Utilities releases its hold on this property for U&O.

Scott Baucom
Operations Supervisor I
Howard County DPW, Bureau of Utilities
8270 Old Montgomery Rd.
Columbia, MD 21045
Office (410) 313-4975
FAX (410) 313-4989



Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventris Court • P.O. BOX 245 • Myersville, MD 21773 • 800-352-9340 • FAX 301-293-3368
 www.fredericktownelabs.com • info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 3948 - 1195-1

Field Record

Site visit performed on: Wednesday, November 05, 2014 2:30 PM
 by: Chris Taylor State ID No. 9379CT
 Affiliation: Tri-County Pump Service
 Property Owner: Craftmark Homes
 Property Address: Lot 64
 5009 Lindera Court
 Ellicott City, MD
 Sample Source: Powder Room
 Well No.: HO-95-2355
 Field pH: 7.1
 Total Res. Cl.: 0.0 mg/l

Laboratory Report

Sample Received at laboratory: 11/6/2014 8:51 AM

Bacteriological results:

Total Colif. (/100ml)	E.coli.(/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
<1	<1	11/06/14	12:48	11/07/14	07:49	9223B	JD

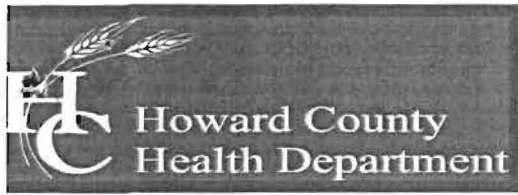
Bacteriological analysis of this sample indicates the water is safe for human consumption and meets federal, state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result	Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen - RUS	0.6	mg/l	10	11/6/2014	300.0	PH
Sand - RUSH	<2	mg/l	5	11/6/2014	0.085mmFilter	JD
Turbidity - RUSH	0.8	NTU'	10	11/6/2014	180.1	KB

Reported by: Edna Mellott 11/7/14
 Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
 Maryland Cert. No. 116 Virginia Cert. No. 00444
 MDOT WBE Cert. No.: 91-158



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

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

Maura Rossman, M.D., Acting Health Officer

October 11, 2012

Heritage Realty & Land Management
Attn. Tim Feaga
15950 North Avenue, P.O. Box 482
Lisbon, Maryland 21765

RE: Walnut Creek Lot 64
Hayland Farm Way
Well Tag: HO - 95 - 2355

Dear Mr. Feaga:

A sample was collected during a yield test on August 29, 2012 and submitted to the Department of Health & Mental Hygiene Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of 3.6 ± 1.9 picocuries/liter (pCi/L), while the **Gross Beta** level was 5.3 ± 2.0 pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply meets EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions.

Sincerely,

A handwritten signature in cursive script that reads 'Bert Nixon'.

Bert Nixon, Director
Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.
Well & Septic property file



7178 Columbia Gateway Dr., 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. Bielensohn, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

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

Well Site Location:

<u>Walnut Creek</u>	<u>64</u>	<u>Hayland Farm Way</u>
Subdivision/Property Name	Lot #	Road Name

The well site has been staked by Fisher, Collins, and Carter, Inc.,
(professional land surveyor or company employing professional land surveyors)
on 04/22/12 (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 3/11/07

Send Report To:

Bert Nixon

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY

201 W. Preston Street, Baltimore, Maryland 21201
John M. DeBoy, Dr. P. H., Director

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: HO 95 2355 No. B: — Field Blank Bottle No. 1: PBKW 82912 No B: —

Plant/Site Name: Welsh Creek - Lot (64) County: Howard

Sample Source: Hayland Farm Way Location: HO-95-2355
(well no, lab sink, sample tap, etc.)

County: 1 3 Plant No.

CHECK (one per box)

Drinking Water	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>
Stream	<input type="checkbox"/>
Other	<input type="checkbox"/>

Community	<input type="checkbox"/>
Non-community	<input type="checkbox"/>
Private	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Source (raw water)	<input checked="" type="checkbox"/>
Distribution (treated)	<input type="checkbox"/>
MCL	<input type="checkbox"/>

Emergency	<input type="checkbox"/>
Routine	<input checked="" type="checkbox"/>
Recheck	<input type="checkbox"/>
Special	<input type="checkbox"/>

Collector: K. Wolf

Telephone No.: 410-313-2645

Date Collected: 8/29/12

Time Collected: _____ a.m. 2:00 p.m.

Nitric Acid Preserved: Yes No

Iced: Yes No

Submitters Code:

Federal Project:

Field Data: _____
pH _____ Chlorine _____

Remarks: Sample collected during yield test.

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000				
✓	Gross Beta	4100				
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: ___/___/___

Supervisor: _____

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373

Send Report To:

Bert Nixon
Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
John M. DeBoy, Dr. P. H., Director

E000450 2302

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: H0952355 No. B: — Field Blank Bottle No. 1: FBKW82912 No B: —

Plant/Site Name: Wahvut Creek - Lot (C4) County: Howard

Sample Source: Hayland From Way Location: H0-95-2355
(well no, lab sink, sample tap, etc.)

County: 1 3 Plant No.

CHECK (one per box)

Drinking Water
Landfill
Stream
Other

Community
Non-community
Private
Other

Source (raw water)
Distribution (treated)
MCL

Emergency
Routine
Recheck
Special

Collector: K. Wolf

Telephone No.: 410-313-2645

Date Collected: 8/29/12

Time Collected: 2:00 a.m. 2:00 p.m.

Nitric Acid Preserved: Yes No

Iced: Yes No

Submitters Code:

Federal Project:

Field Data: — pH — Chlorine —

Remarks: Sample collected during yield test.

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	450	3.6 ± 1.9	9/4/12	9/5/12
✓	Gross Beta	4100	450	5.3 ± 2.0	+	+
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: 8/30/12

Supervisor: [Signature]

•Tel. No.: (410) 767 - 5537 •Fax No: (410) 333- 5373