

C 1 3748

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.

COUNTY NUMBER

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

ST/CO USE ONLY

DATE Received MM DD YY

DATE WELL COMPLETED

MM DD YY 4/18/06

Depth of Well

22 600 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

10-95-0314

OWNER JT'S CORPORATION last name Clarksville Pike (Md 108) first name Clarksville STREET OR RFD Macbeth Farm SECTION LOT 08

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. Includes entries like topsoil, reddish/orang clay, Gray Mica, Sandstone, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (ST, PL, CO, OT) Nominal diameter top (main) casing, Total depth of main casing

OTHER CASING (if used)

Table for other casing with columns for diameter and depth

SCREEN RECORD

screen type or open hole (ST, BR, HO, PL, OT) insert appropriate code below

DEPTH (nearest ft.)

Table for depth with columns for casing sections and slot size

C 3

PUMPING TEST

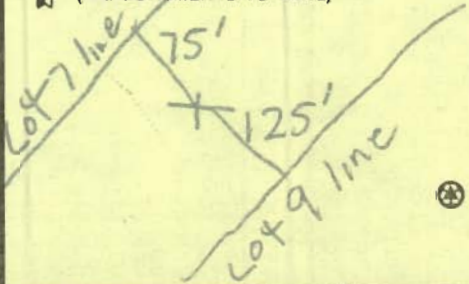
HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 57 WHEN PUMPING 181 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (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 PUMP HORSE POWER 37 PUMP COLUMN LENGTH (nearest ft.) 41 CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE - below 2 (nearest foot)

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)



DRILLERS LIC. NO. MWD 040

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. JWD 727

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

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

B 1 0741

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

10-95-0314

524124 please type

fill in this form completely

Date Received (APA) 02 24 06

OWNER INFORMATION 10163

J T S Corporation
8808 Centre Park Drive S209
Columbia, Md 21045

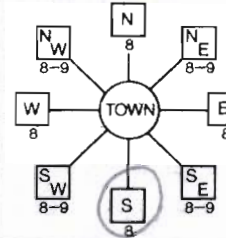
LOCATION OF WELL

Howard
Macbeth Farm
Clarksville
MILES FROM TOWN (enter 0 if in town) 1

DRILLER INFORMATION

George F. Easterday
L. Franklin Easterday, Inc.
9265 Brown Church Rd., MT. Airy, Md. 21771
2/23/2006

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Clarksville Pike (Md 108)

NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD Ft. 500+
TAX MAP: 34 BLK: 24 PARCEL 90

WELL INFORMATION

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

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
STATE SIGNATURE
DATE ISSUED 3/2/06
NORTH GRID 50 000
EAST GRID 816 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered)
AIR-ROTary
CABLE

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

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

WRITE THE BOX NUMBER FROM THE MAP HERE

810 6
490 4

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 14 E 10



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

APPROP. PERMIT NUMBER
PERMIT No. 10-95-0314

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Handwritten note: Radium Sample @ yield test



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: Robert L. Feezer Co. Inc Telephone #: 410-781-4655  
Address: 6321 Barnduff Ave.  
Sykesville, MD

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Robert L. Feezer License# 2122

\*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: NV. Hamps Telephone #: 410-379-5956  
Subdivision: CLARKVILLE OULY LOCK Lot #: 8 Well Tag #: HO-95-0314  
Site Address: 1244 MacBETH FARM LANE  
CLARKVILLE, MD 21029

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit  
Make: STA-RT-TE Make: Campbell Two piece watertight cap:   
Model #: SSP VHS15221 Model #: PT 800 Screened, vented well cap:   
Pump Capacity: 5 GPM Depth: 42" (36" min) Cap secured to casing:   
Well Yield: 4 GPM NSF approved:  Conduit min 18" E.G.:   
Depth of well encountered at time of pump installation: 600 (feet) Conduit secured to well cap:   
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

Piping to house House Connection  
Type: Poly PVC sleeved to undisturbed soil at wall penetration:   
PSI: 200 (160 psi min) Approximate length of sleeve: 10'  
Depth of supply line: 42 (36" min) Sleeve caulked and sealed properly:

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: Robert L. Feezer date: 10/19/07 Called for inspection 9/24/07

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

Date Insp. Requested: 9/25/07 Date Insp. Approved: 9/25/07 (Ka)  
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

N 555,140

N 555,140

E 1,328,230

E 1,328,560

Note:  
The proposed well shown on this plan will be staked out in the field by FSH Associates, Professional Surveyor prior to well drilling.

Prop. Well

LOT 7  
42,644sf±

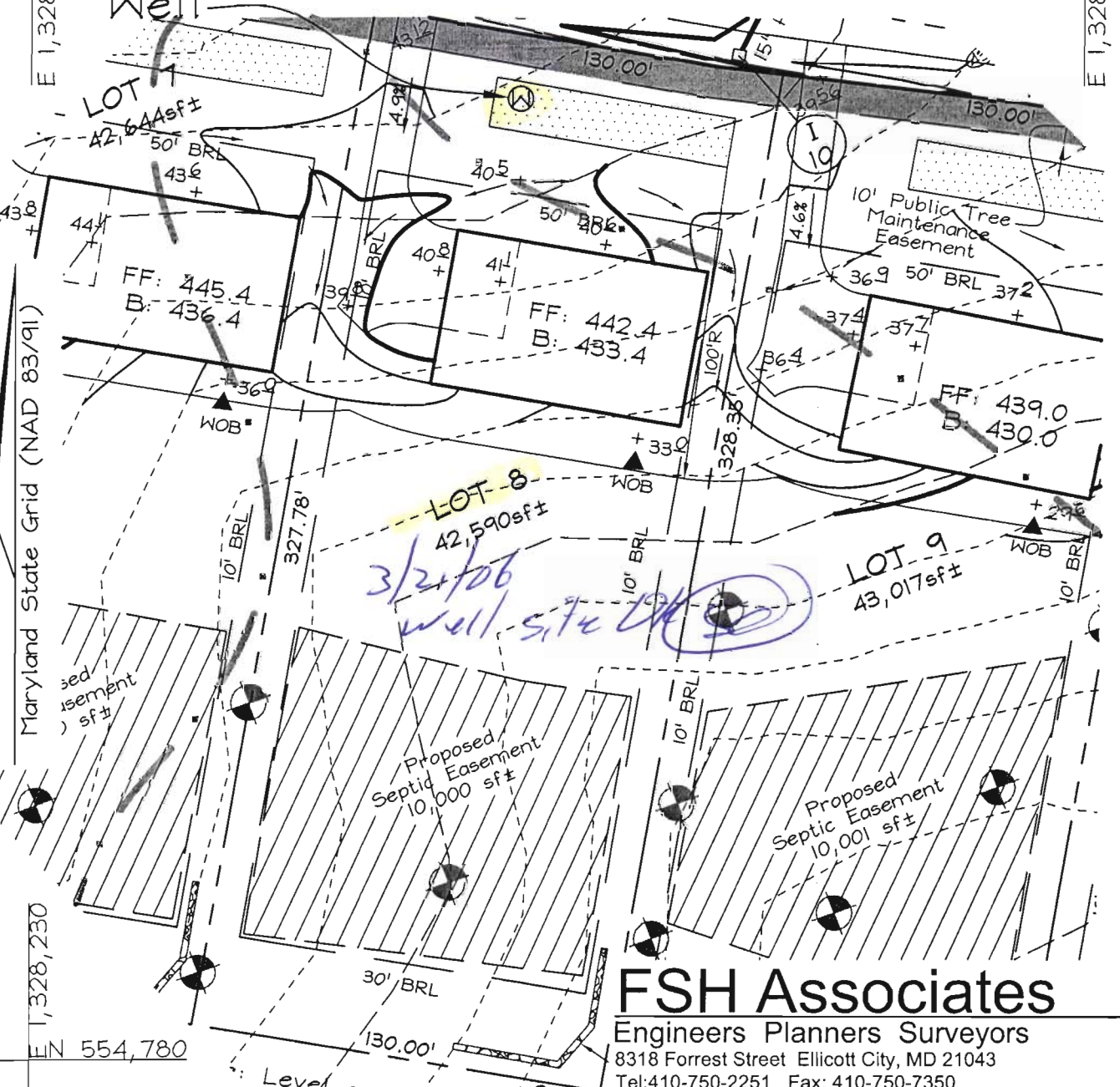
LOT 8  
42,590sf±

LOT 9  
43,017sf±

Maryland State Grid (NAD 83/91)

E 1,328,230

N 554,780



**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

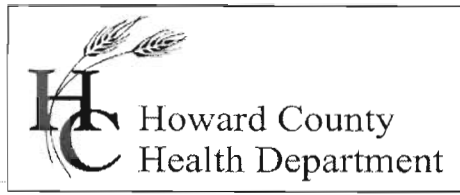
DESIGN BY: PS  
 DRAWN BY: CD  
 CHECKED BY: ZYF  
 SCALE: 1"=50'  
 DATE: Feb. 9, 2006  
 W.O. No.: 3165  
 SHEET No.: 8 OF 35

# WELL PERMIT PLAN MACBETH FARM

LOT 8

TAX MAP 34 GRID 18 & 24  
 4TH ELECTION DISTRICT

PARCEL 90  
 HOWARD COUNTY, MARYLAND



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](http://www.hchealth.org)

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

November 27, 2007

NV Homes, Inc.  
6085 Marshalee Drive, Suite 130  
Elkridge, MD 21075

RE: Clarksville Overlook, Lot 8  
12844 Macbeth Farm Lane  
Clarksville, MD 21029  
BP #: B07002389  
Well Permit # HO-95-0314

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 11/07/2007.** **Final approval of the well line connection to the dwelling was approved on 11/27/2007.**

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.

Also, Gross Alpha and Beta sample was collected on 04/26/2006. The Gross Alpha result exceeded its maximum contaminant level (MCL) of 15 pCi/L. In order to meet compliance, a water treatment device (Softener) was installed. Also, post treatment Radium 226/228 samples were collected on 10/24/2007. Both findings were below the combined 226/228 MCL of 5pCi/l. At the time of the testing and with respect to these parameters, the future well water supply appears safe for all uses. No additional testing **for these parameters** will be required to secure the future Use and Occupancy.

However, this treatment system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence to assure future compliance.

## 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-95-0314. 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.**

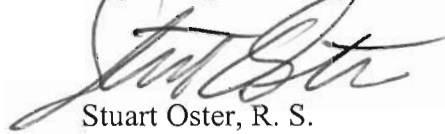
Date of Water Samples: 10/24/2007, 10/31/2007 11/14/2007 & 10/18/2007

Date of Samples for Gross Alpha and Gross Beta: 04/26/2006

Date of Samples for Radium 226/228 10/24/2007

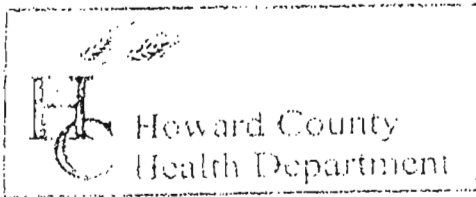
Date of Well Completion: 04/18/2006

Approving Authority



Stuart Oster, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File



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 F.S.H. ASSOCIATES,  
 (professional land surveyor or company employing professional land surveyors)  
 on 2-20-06 (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

JTS CORPORATION  
 LOTS 1-35 MACBETH FARM



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(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

July 14, 2008

NVR, Inc.  
Attn: Tim Naughton  
6085 Marthalee Drive  
Suite 130  
Elkridge, MD 21075

RE: Clarksville Overlook, Lot#8  
Well Tag: HO-95-1630

To Whom It May Concern:

A sample was collected during a yield test on June 16, 2008 and submitted to 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 (GA / GB)** 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  $26.0 \pm 4.0$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $10.0 \pm 2.0$  pCi/L. The **Gross Alpha** result was above its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its target value of 50 pCi/L (roughly equivalent to the **annual dose rate of 4 millirem/year**).

Since the **Gross Alpha** finding exceeded its **MCL**, additional testing for **Radium** will be necessary to verify existing levels prior to occupancy. Alternatively, you may install treatment designed to reduce **Gross Alpha, Gross Beta and Radium**, plus provide post treated results (short and long term **GAGB**, plus **Radium**) confirming that levels are in conformance with existing standards. **Additionally**, the owners will be required to sign an "AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN ON-SITE TREATMENT SYSTEM" as part of the Use and Occupancy process. Moreover, keep in mind that the standard potability parameters required for occupancy will still be needed.

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 or concerns.

Sincerely,

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

Bert Nixon, Director  
Bureau of Environmental Health

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

Send Report To:

Bert Nixon

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: 140-95-1630 No. B: \_\_\_\_\_ Field Blank Bottle No. A: \_\_\_\_\_ No. B: \_\_\_\_\_

Plant/Site Name: Clarksville Overlook Lot B County: Howard

Sample Source: Macbeth Form LR Location: 140-95-1630  
(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: 6/1/08

Time Collected: 11:30 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:   Federal Project:  Field Data: \_\_\_\_\_

Remarks: Sample collected @ End of Yield. pH \_\_\_\_\_ Chlorine \_\_\_\_\_

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	2740	26±4	06/19/08
✓	Gross Beta	4100	2740	10±2	11
	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: 06/17/08

Supervisor: B. Wise



Analytical Summary Report

Client Name:	Howard County Health Department	Client Sample ID:	HOGCMBF8426
Receipt Date/Time:	04/27/2006	Lab Sample ID:	604185-001-001-1/1
Prepared Date/Time:	04/28/2006	Sample Matrix:	WATER
Analysis Date/Time:	4/28/06 14:24	Analytical Method:	ALPHA/BETA BY METHOD 900.0

Isotope	Result	Uncertainty $2\sigma$	MDA	Q
Gross Alpha	30.0631 pCi/L	$\pm 2.8264$ pCi/L	0.5886 pCi/L	
Gross Beta	6.9194 pCi/L	$\pm 1.2330$ pCi/L	1.6790 pCi/L	



Howard County  
Health Department

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046  
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TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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

June 5, 2006

JTS Corporation  
5300 Dorsey Hall Drive  
Suite 200  
Ellicott City, Maryland 21042

RE: MacBeth Farm Lot 8  
Well Tag: HO-95-0314

To Whom It May Concern:

A sample was collected from a yield test on April 26, 2006 and submitted to GPL 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  $30.1 \pm 2.8$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $7.0 \pm 1.2$  pCi/L. The **Gross Alpha** result exceeded its maximum contaminant level (MCL) of 15 pCi/L, while the **Gross Beta** level was below its MCL of 50 pCi/L.

Since the **Gross Alpha** finding exceeded its MCL, additional testing for **Radium** will be necessary prior to occupancy to verify existing levels. Alternatively, you may install treatment designed to reduce **Gross Alpha**, **Gross Beta** and **Radium**, plus provide post treated results confirming that levels are in conformance with existing standards.

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 or to discuss additional testing requirements.

Sincerely,

Bert Nixon, Deputy Director  
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater  
Well & Septic property file

# CERTIFICATE OF ANALYSIS



**Requester:**  
 NV Homes, Inc.  
 Attn: Buddy  
 6085 Marshalee Drive Suite 130  
 Elkridge, Maryland 21075

**S/O Number:** 65810  
**Report Date:** November 13, 2007

**Trace Laboratories, Inc.  
 Maryland**

5 North Park Drive  
 Hunt Valley, MD 21030  
 Telephone: 410/252-7742  
 Telephone: 410/584-9099  
 Fax: 410/584-9117  
 Email: [tracelab@comcast.net](mailto:tracelab@comcast.net)  
[www.tracelabs.com](http://www.tracelabs.com)

**Property Sampled:** 12844 Macbeth Farm Lane  
**County:** Howard  
**Subdivision:** Clarksville Overlook **Tax Map #:** 34  
**Lot #:** 8 **Parcel #:** 90  
**Building Permit #:** B07002389  
**Date/Time Collected:** October 24, 2007 at 12:00 pm  
**Date/Time Received:** October 24, 2007 at 2:50 pm

Maryland State Certified  
 Water Quality Laboratory  
 No. 318

**Sample Location:** Pressure Tank Tap  
**Sampler ID:** 5745KC  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

ISO 9001:2000



**Well Tag Number:** HO-95-0314  
**Well Condition:** 2-Piece Cap  
 Satisfactory

**Water Conditioning/Treatment:** None



Cert No. C2005-01504

PARAMETER	RESULT	METHOD	DETECTION LIMIT
Radium 226	0.9 +/- 0.2 pCi/L	EPA 903.1	0.2 pCi/L
Radium 228	1.1 +/- 0.7 pCi/L	EPA Ra-05	1.0 pCi/L
Uranium	15.7 +/- 2.4 pCi/L	EPA 908.0	0.8 pCi/L

Allison R. Milburn  
 Manager-Drinking Water Testing

# CERTIFICATE OF ANALYSIS



**Trace Laboratories, Inc.**  
Maryland

5 North Park Drive  
Hunt Valley, MD 21030  
Telephone: 410/252-7742  
Telephone: 410/584-9099  
Fax: 410/584-9117  
Email: tracclab@connex.net  
www.tracclabs.com

Maryland State Certified  
Water Quality Laboratory  
No. 318

ISO 9001:2000



Cert No. C2005-01504

**Requester:**  
NV Homes, Inc  
Attn: Buddy  
6085 Marshalee Drive Suite 130  
Elkridge, Maryland 21075

**S/O Number:** 65810  
**Report Date:** October 25, 2007

**Property Sampled:** 12844 Macbeth Farm Lane

**County:** Howard  
**Subdivision:** Clarksville Overlook **Tax Map #:** 34  
**Lot #:** 8 **Parcel #:** 90  
**Building Permit #:** B07002389

**Date/Time Collected:** October 24, 2007 at 12:00 pm  
**Date/Time Received:** October 24, 2007 at 2:50 pm

**Sample Location:** Pressure Tank Tap  
**Sampler ID:** 5745KC  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0314  
**Well Condition:** 2-Piece Cap  
Satisfactory

**Water Conditioning/Treatment:** None

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	4.6 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	<1.0 NTU	EPA 180.1	10 NTU	Pass
pH	7.4 Units	EPA 150.1	*6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	PRESENT	SM 9223B	Absent	FAIL
E.coli	Absent	SM 9223B	Absent	

*Kate Cammen Fox*  
Allison R. Milburn  
Manager- Drinking Water Testing

MCL=Maximum Contamination Level

\*SMCL=Secondary Maximum Contamination Level

\*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.

### CERTIFICATE OF ANALYSIS



**Requester:**  
 NV Homes, Inc  
 Attn: Buddy  
 6085 Marshalee Drive Suite 130  
 Elkridge, Maryland 21075

**S/O Number:** 65906  
**Report Date:** November 1, 2007

**Trace Laboratories, Inc.**  
 Maryland

**Property Sampled:** 12844 Macbeth Farm Lane, Retest #1

5 North Park Drive  
 Hunt Valley, MD 21030  
 Telephone: 410/252-7742  
 Telephone: 410/584-9099  
 Fax: 410/584-9117  
 Email: tracelab@connex.net  
 www.tracelabs.com

**County:** Howard  
**Subdivision:** Clarksville Overlook **Tax Map #:** 34  
**Lot #:** 8 **Parcel #:** 90  
**Building Permit #:** B07002389

**Date/Time Collected:** October 31, 2007 at 11:33 am  
**Date/Time Received:** October 31, 2007 at 2:00 pm

Maryland State Certified  
 Water Quality Laboratory  
 No. 318

**Sample Location:** Pressure Tank Tap  
**Sampler ID:** 6308KW  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0314  
**Well Condition:** 2-Piece Cap  
 Satisfactory

**Water Conditioning/Treatment:** None

ISO 9001:2000



PERRY JOHNSON  
 REGISTRARS, INC.

Cert No. C2005-01504

PARAMETER	RESULT	METHOD	MCL	
Total Coliform	PRESENT	SM 9223B	Absent	FAIL
E.coli	Absent	SM 9223B	Absent	

*Kate Cannon FOR*  
 Allison R. Milburn  
 Manager- Drinking Water Testing

MCL=Maximum Contamination Level

# CERTIFICATE OF ANALYSIS


**Trace Laboratories, Inc.  
Maryland**

5 North Park Drive  
Hunt Valley, MD 21030  
Telephone: 410/252-7742  
Telephone: 410/584-9099  
Fax: 410/584-9117  
Email: tracelab@connex.net  
www.tracelabs.com

Maryland State Certified  
Water Quality Laboratory  
No. 318

**ISO 9001:2000**


Registered Firm


 PERRY JOHNSON  
REGISTRARS, INC.

Cert No. C2005-01504

**Requester:**  
NV Homes, Inc  
Attn: Buddy  
6085 Marshalee Drive Suite 130  
Elkridge, Maryland 21075

**S/O Number:** 66111  
**Report Date:** November 15, 2007

**Property Sampled:** 12844 Macbeth Farm Lane, Retest #2

**County:** Howard  
**Subdivision:** Clarksville Overlook **Tax Map #:** 34  
**Lot #:** 8 **Parcel #:** 90  
**Building Permit #:** B07002389

**Date/Time Collected:** November 14, 2007 at 12:10 pm  
**Date/Time Received:** November 14, 2007 at 2:45 pm

**Sample Location:** Pressure Tank Tap  
**Sampler ID:** 6308KW  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0314  
**Well Condition:** 2-Piece Cap  
Satisfactory

**Water Conditioning/Treatment:** None

PARAMETER	RESULT	METHOD	MCL	
Total Coliform	PRESENT	SM 9223B	Absent	FAIL
E.coli	Absent	SM 9223B	Absent	

Allison R. Milburn  
 Manager- Drinking Water Testing

# CERTIFICATE OF ANALYSIS



**Requester:**  
 NV Homes, Inc  
 Attn: Buddy  
 6085 Marshalee Drive Suite 130  
 Elkridge, Maryland 21075

**S/O Number:** 66226  
**Report Date:** November 27, 2007

**Trace Laboratories, Inc.**  
 Maryland

5 North Park Drive  
 Hunt Valley, MD 21030  
 Telephone: 410/252-7742  
 Telephone: 410/584-9099  
 Fax: 410/584-9117  
 Email: [tracelab@connexl.net](mailto:tracelab@connexl.net)  
[www.tracelabs.com](http://www.tracelabs.com)

Maryland State Certified  
 Water Quality Laboratory  
 No. 318



Cert No. C2005-01504

**Property Sampled:** 12844 Macbeth Farm Lane

**County:** Howard  
**Subdivision:** Clarksville Overlook **Tax Map #:** 34  
**Lot #:** 8 **Parcel #:** 90  
**Building Permit #:** B07002389

**Date/Time Collected:** November 26, 2007 at 3:25 pm  
**Date/Time Received:** November 26, 2007 at 4:35 pm

**Sample Location:** Pressure Tank Tap  
**Sampler ID:** 5745KC  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0314  
**Well Condition:** 2-Piece Cap  
 Satisfactory

**Water Conditioning/Treatment:** Neutralizer, Softener, both unplugged

PARAMETER	RESULT	METHOD	MCL	
Total Coliform	Absent	SM 9223B	Absent	Pass
E.coli	Absent	SM 9223B	Absent	Pass

*Allison R. Milburn*  
 Allison R. Milburn  
 Manager- Drinking Water Testing

MCL=Maximum Contamination Level

CLARKSVILLE OVERLOOK  
(MACBETH FARM)  
Lot # 8

**AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL  
WITH AN ON-SITE TREATMENT SYSTEM**

This agreement is entered into by and between the Howard County Health Department ("the Health Department") and Robert + Lisa Berg ("the Owner").

WHEREAS, the Owner owns a tract of land at street address 12844 MacBeth Farm Lane, \_\_\_\_\_ and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # \_\_\_\_\_, Block # \_\_\_\_\_, Parcel # \_\_\_\_\_, Deed Reference # \_\_\_\_\_ and Tax Account # \_\_\_\_\_ ("the Property").

WHEREAS, the Property lacks an available public drinking water source and is required to have an individual well as the source of drinking water for the residence of the property.

WHEREAS, the Owner has installed a residential drinking well under well permit \_\_\_\_\_ that has been tested by the Health Department (or a private laboratory certified to perform testing) for radionuclide particles. The results of the tests have shown that the gross alpha particle content and/or the gross beta particle content and/or the combined radium 226/228 levels exceeds the standards of 15 picocuries per liter (pCi /L), 4 millirems per year (mrem/yr) and/or 5pCi/L respectively.

WHEREAS, The Maryland Department of the Environment (MDE) has promulgated rules and regulations under which a Certificate of Potability may be issued and has delegated the authority to issue such Certificate to the Health Department.

WHEREAS, MDE regulations permit the Health Department to issue as a special condition, a permanent deviation to the Certificate of Potability for individual wells where treatment has been installed to meet the maximum contaminate levels (MCL's) for radionuclides.

WHEREAS, MDE has determined that radium can be effectively removed from the drinking water by the use of treatment devices (e.g., ion exchange or reverse osmosis).

WHEREAS, the Owner is requesting that the Health Department issue a Certificate of Potability contingent upon installation and maintenance of a water treatment device to reduce radionuclides.

WHEREAS, neither the Owner nor the Health Department has knowledge of an alternative safe source of water for the Property.

DELIVERED BY TOM HERBERT w/ NV HOMES.  
Lot # 8 @ CLARKSVILLE OVERLOOK (MACBETH FARM)

