

C1 0330

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 A515042

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 22 600 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-95-0286

OWNER Toll Brothers STREET OR RFD Fox River Drive TOWN Ellicott City SUBDIVISION Benedict Farm SECTION LOT 8

WELL LOG table with columns for DESCRIPTION, FEET (FROM, TO), and check if water bearing. Includes handwritten entries: Brown shale, Gravel, Lime stone.

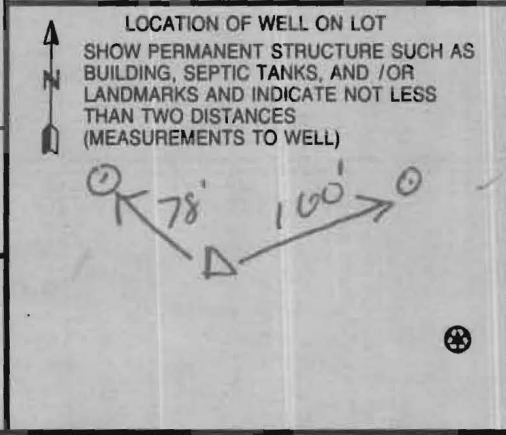
GROUTING RECORD, CASING RECORD, SCREEN RECORD, MAIN CASING TYPE, OTHER CASING (if used) sections.

PUMPING TEST section including HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED.

PUMP INSTALLED section including DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.

WELL HYDROFRACTURED, CIRCLE APPROPRIATE LETTER (A, E, P), TEST WELL CONVERTED TO PRODUCTION WELL.

DEPTH (nearest ft.) table with columns for casing depth and slot size.



DRILLERS LIC. NO., DRILLERS SIGNATURE, LIC. NO., SITE SUPERVISOR, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) section with fields for T, W, Q, 70, 72, 74, 75, 76.

B 1	0734	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b> please type 524353	STATE PERMIT NUMBER <u>HO-95-0286</u> <small>fill in this form completely</small>
-----	------	--------------------------------	---	---

**OWNER INFORMATION**

Date Received (APA) 03 15 06

8 MM DD YY 13

15 Last Name Toll Brothers Owner First Name 34

36 Street or RFD 14324 Tradehia Rd 55

57 Town Glenelg md 70 State 21737 Zip 76

**LOCATION OF WELL**

B 3

8 COUNTY Howard 21

23 SUBDIVISION Benedict farm 42

SECTION 44 46 LOT 8 50

52 NEAREST TOWN Columbia 71

MILES FROM TOWN (enter 0 if in town) 3 M I 73 76 77 78

**DRILLER INFORMATION**

Driller's Name Allen Compton M S D 009 76 License No. 81

Firm Name Eagles Well Drilling

Address 580 Obrecht Rd

Signature [Signature] Date 3-14-06

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

B 4

1 2

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

11 NEAR WHAT ROAD Fox River Drive 30

34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: 29 BLK: 9 PARCEL 28

**WELL INFORMATION**

B 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)**

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22  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 (13) A515042

COUNTY NAME COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED 3/16/2006 Brian Baker 3/16/2007

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 510 0 0 0 EAST GRID 825 0 0 0

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

39  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 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 HO2003G006

PERMIT No. HO-95-0286

70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 
- 
- 

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8265

N 510

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

Clarksville Pike

Handwood Rd

Rt. 108

6/6/06

Radium Sample

000 Taken During

000 Yield Test.

BB

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

B 1	<b>6583</b>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> please type	STATE PERMIT NUMBER  70 <u>          </u> 79 <i>fill in this form completely</i>
-----	-------------	--------------------------------	--	---

**OWNER INFORMATION**

Date Received (APA) \_\_\_\_\_  
8 MM DD YY 13

15 Last Name Toll Brothers Owner First Name \_\_\_\_\_ 34

36 1164 Columbia Gateway Dr. Suite 230 Street or RFD 55

57 Columbia, MD. 21046 Town 70 State 72 Zip 76

**LOCATION OF WELL**

B 3 Howard COUNTY 21

23 Benedict Farms SUBDIVISION 42

SECTION 44 LOT 8

52 Clarksville NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M I  
73 76 77 78

**DRILLER INFORMATION**

Driller's Name Michael Barlow License No. MD D 355 76 81

Firm Name Michael Barlow Well Drilling Co.

Address 522 Underwood Ln. Belair

Signature [Signature] Date 2/1/09

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

B 4

1 2

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

11 Road 'B' off Route 108 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 20 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

**WELL INFORMATION**

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)**

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

Fogles drilled the well

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

COUNTY NAME \_\_\_\_\_ COUNTY NO. \_\_\_\_\_

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED \_\_\_\_\_

43 MM DD YY 48 CO SIGNATURE \_\_\_\_\_ EXP. DATE \_\_\_\_\_

NORTH GRID 50 000 EAST GRID 57 000

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL \_\_\_\_\_ INCH 6 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 DEEPEINED 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

39  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 DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 \_\_\_\_\_ 52

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

APPROP. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_

PERMIT No. \_\_\_\_\_ 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8215

N 510

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

RD. C  
RD. D  
RD. A  
Rt. 108

**SPECIAL CONDITIONS**

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0286  
 Location of property (road) Fox River Drive  
 Subdivision Benedict Farm Lot 8 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller Fogles/Compton Owner Tall Brothers

Depth of well 600  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 22'

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 15  
 Total time 15 MIN. to reach pumping water level 161' 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)
7:30	22	4		15
7:45	161	26		2.3
8:00	161	26		2.3
8:15	161	26		2.3
8:30	161	26		2.3
8:45	161	26		2.3
9:00	161	26		2.3
9:15	161	26		2.3
9:30	161	26		2.3
9:45	161	26		2.3
10:00	161	26		2.3
10:15	161	26		2.3
10:30	161	26		2.3
10:45	161	26		2.3
11:00	161	26		2.3
11:15	161	26		2.3
11:30	161	26		2.3
11:45	161	26		2.3
12:00	161	26		2.3
12:15	161	26		2.3
12:30	161	26		2.3
12:45	161	26		2.3
1:00	161	26		2.3
1:15	161	26		2.3
HD-224:30	161	26		2.3
1:45	161	26		2.3



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 Telephone #: 410-795-5670  
Address: 588 Orchard Rd  
Salesville, Md 21784

(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# MSD 009

\*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: Toll Brothers Telephone #:  
Subdivision: Potomant Chase Lot #: 8 Well Tag #: HO 95-0309  
Site Address: 11507 Fox River Dr

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit  
Make: Crawford Make: Centrol Two piece watertight cap: yes  
Model #: 15502 10-250 Model#: pk Screened, vented well cap: yes  
Pump Capacity 15 GPM Depth: 36 (36" min) Cap secured to casing: yes  
Well Yield: 2.6 GPM NSF approved: yes Conduit min 18" B.G.: yes  
Depth of well encountered at time of pump installation: 100 (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" Black PVC PVC sleeved to undisturbed soil at wall penetration: yes  
PSI: 160 (160 psi min) Approximate length of sleeve: 5  
Depth of supply line: 42 (36" min) Sleeve caulked and sealed properly: yes

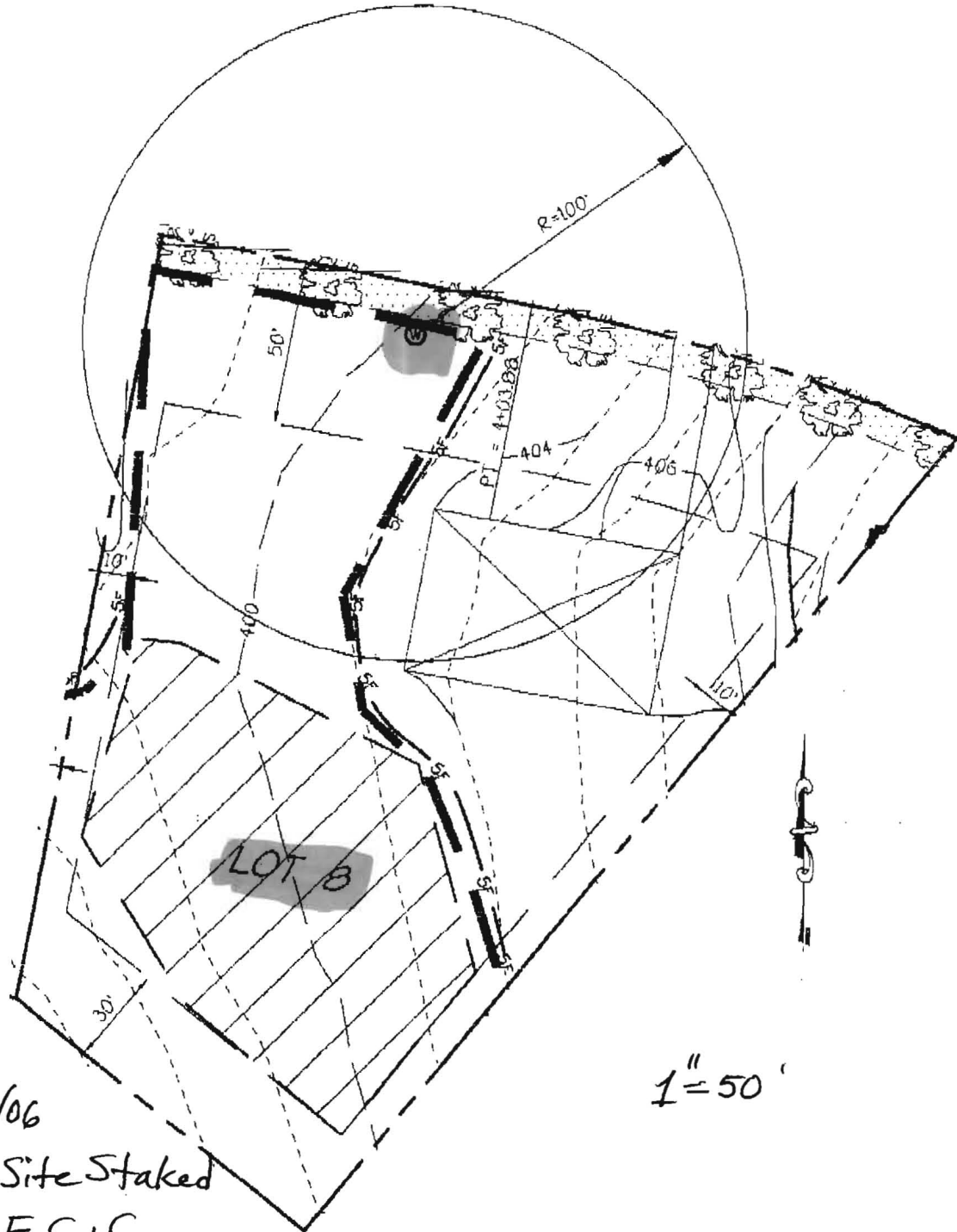
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Allen Compton 12/7/06  
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: KW/BB 12/6/06  
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 ✓

K:\SDSKPROJ\30754 Benedicil Farm\dwg\PHASE 1 - FINALS\30754 WELL LOCATION.dwg, 2/17/2006 1:15:56 PM, 1:1



3/16/06

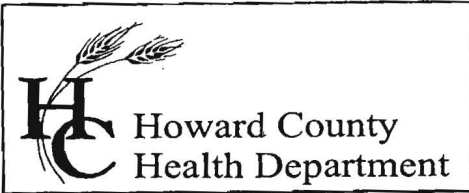
Well Site Staked  
By F.C+C.

BB

1" = 50'

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELLICOTT CITY, MARYLAND 21042  
 (410) 461 - 2855

WELL LOCATION PLAN  
 LOT-8  
 ZONED RC-DEO  
 TAX MAP No. 29 GRID No. 9 PARCEL No. 28  
 THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 SCALE 1" = 50' DATE: FEBRUARY 15, 2006



Bureau of Environmental Health  
7178 Columbia 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

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

January 27, 2007

Homeowner  
11507 Fox River Drive  
Ellicott City, MD 21042

RE: Homewood Crossing – Lot 8  
• 11507 Fox River Drive  
BP# B00160145  
Well Permit #HO-95-0286

Dear Homeowner:

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 December 5, 2006.

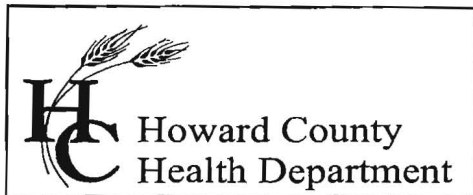
The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking.

The raw nitrate sample results were previously documented to be 12.1 ppm on January 2, 2007. A reverse osmosis unit has been installed to remove the excessive nitrate contamination. The treated water is accessible from a separate tap that is located on the upper right part of the kitchen sink. The nitrate treatment device appears to be operating as evidenced by the water sample results reported on January 10, 2007, which indicate a nitrate level of 3.0 ppm.

COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a permanent deviation to that section of the regulation on condition that the nitrate removal system effectively maintains the nitrate-nitrogen contaminant level of 10 ppm or less.

**Furthermore, it will be necessary for you to comply with the following conditions:**

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a laboratory, certified for water testing, perform an annual nitrate analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of the above condition.



Bureau of Environmental Health  
7178 Columbia 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)

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

**Interim Certificate of Potability**  
(Permanent Deviation for Nitrates)

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-95-0286. 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 satisfactory completion of the second bacteriological and nitrate tests to be taken by the health department within six months of the date of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment.**

Date of Water Sample(s): January 2 & 10, 2007  
Date of Well Completion: June 6, 2006

Approving Authority

Brian Baker, R.S.  
Well and Septic Program

cc: Building Inspector's office  
File

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

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

**REPORT OF ANALYSIS**

Laboratory ID #:	61963	Account #:	1930
Reference:	Toll Brothers Lot 8	Company:	Fogle's Well Drilling
Location:	11507 Fox River Drive Clarksville, MD 21029	Requested By:	Dave Fogle
Date/ Time Collected:	1/10/2007 1100	Source:	Well Water
Date/Time Rec'd:	1/10/2007 1445	Site:	R/O Tap
Chlorine ppm:	Free: 1.53 Total: 1.62	Treatment:	Reverse Osmosis
Collected By:	V.M. Fadoul 6804VF-FS	pH:	6.2
		Well #:	HO-95-0286

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME ANALYS
Nitrate	3.00	mg/L	10	601	1/11/2007 / 0940 / BCD

**NOTES**

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 pH tested on-site
- 4 Sample collected by client, analyzed as received
- 5 Chlorine level tested in lab

Reason for Test : Use & Occupancy  
 Building Permit # : B00160145

Date Reported: 1/11/2007

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Tanytown Rd. Westminster, MD (410) 848-0214 (410) 876-4334 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #:	61833	Account #:	1930
Reference:	Toll Brothers Lot 8	Company:	Fogle's Well Drilling
Location:	11507 Fox River Drive Clarksville, MD 21029	Requested By:	Dave Fogle
Date/ Time Collected:	1/2/2007 1300	Source:	Well Water
Date/Time Rec'd:	1/2/2007 1520	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	V.M. Fadoul 6804VF-FS	pH:	6.7
		Well #:	HO-95-0286

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYS
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	1/3/2007 / 0930 / AD/BD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	1/3/2007 / 0930 / AD/BD
Nitrate	12.1	mg/L	10	601	1/3/2007 / 1130 / BCD
Turbidity	2.97	NTU	<10	SM18 2130B	1/3/2007 / 0825 / AD/BD
Sand	NS	mg/L	5	Visual/Gravimetric	1/3/2007 / 0825 / AD/BD

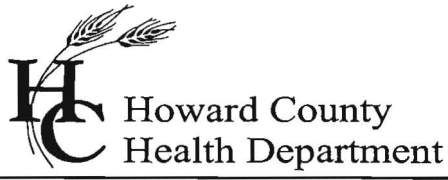
**NOTES**

- 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
- 7 Sample collected by client, analyzed as received
- 8 pH tested on-site

Reason for Test : Use & Occupancy  
 Building Permit # : B00160145

Date Reported: 1/3/2007

MD State Certification # 133



Bureau of Environmental Health  
7178 Columbia 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

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

July 5, 2006

Toll Brothers – Maryland Division  
7164 Columbia Gateway Drive  
Columbia, Maryland 21046

RE: Benedict Farm Subdivision, Lot 8  
Well Tag: HO-95-0286

To Whom It May Concern:

A sample was collected during a yield test on June 6, 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  $6.0 \pm 2.0$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $7.1 \pm 1.5$  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 **MCL** of 50 pCi/L. At the time of 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 & Occupancy. However, other standard (potability) testing will still be necessary.

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,

Bert Nixon, Deputy Director  
Bureau of Environmental Health

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