C 1 | 2911 | SEQUENCE NO. (MDE USE ONLY)

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

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

OK

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

COUNTY NUMBER A 516063

ST/CO USE ONLY DATE Received MM DD YY 8 13

DATE WELL COMPLETED MM 3 DD 20 YY 06 (15 20)

Depth of Well 22 260' 26 (TO NEAREST FOOT)

5/5/06 GAL

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho - 95 - 0259 (28 29 30 31 32 33 34 35 36 37)

OWNER Horton (last name) R. O. (first name)

STREET OR RFD Heather Glen Way TOWN Clarksville Md

SUBDIVISION Turnbury Grove. SECTION LOT 16

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 FROM	FEET TO	check if water bearing
Sand	0	53	
Gray Mica Rock	53	260	✓

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes Y no 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.: MSD 024

Joseph L Wayne
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: MSD 027

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y (44) no N (44)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM (45 46) BENTONITE CLAY BC (45 46)

NO. OF BAGS 15 NO. OF POUNDS 1410

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 (48 TOP 52) ft. to 53 (54 BOTTOM 58) ft.

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

ST STEEL | CO CONCRETE | PL PLASTIC | OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
ST (60 61)	6 (63 64)	57 (66 70)

EACH CASING — OTHER CASING (if used)

	diameter inch	depth (feet) from	depth (feet) to

SCREEN RECORD
screen type or open hole insert appropriate code below

ST STEEL | BR BRASS BRONZE | HO OPEN HOLE | PL PLASTIC | OT OTHER

C 2 (1 2)

DEPTH (nearest ft.)

EACH SCREEN		from	to
1	Ho (8 9)	55 (11 15)	260 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (70) ____ TELESCOPE CASING

(E.R.O.S.) (72) ____ LOG INDICATOR

W Q (74 75 76) ____ OTHER DATA

C 3 (1 2)

PUMPING TEST
HOURS PUMPED (nearest hour) 3 (8 9)

PUMPING RATE (gal. per min.) 6 (11 15)

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 3 (17 20) ft.

WHEN PUMPING 127 (22 25) ft.

TYPE OF PUMP USED (for test)

A air (27) | P piston (27) | T turbine (27)

C centrifugal (27) | R rotary (27) | O other (describe below) (27)

J jet (27) | S submersible (27)

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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. (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31 35)

PUMP HORSE POWER (37 41)

PUMP COLUMN LENGTH (nearest ft.) (43 47)

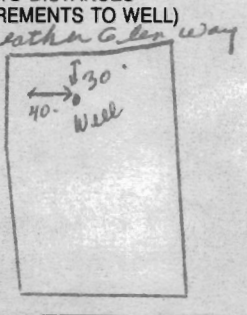
CASING HEIGHT (circle appropriate box and enter casing height)

+ (49) above | – (49) below LAND SURFACE

(50 51) (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)



DENV-CR00

COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 | 1458 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

523944 please type

STATE PERMIT NUMBER: HO-95-0259

fill in this form completely

Date Received (APA): 01 20 06 (MM DD YY)

OWNER INFORMATION

Horton | R. | O.
Last Name | Owner | First Name

1370 Piccard Drive
Street or RFD

Rockville | Md. | 20850
Town | State | Zip

DRILLER INFORMATION

Joseph L. Mayne | MSD 024
Driller's Name | License No.

Joseph L. Mayne Well Drilling
Firm Name

5512 Ridge Rd Mt. Airy Md. 21771
Address

Joseph L Mayne | 1-6-06
Signature | Date

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, COMMERICIAL, DEWATERING
- [P] PUBLIC WATER SUPPLY WELL
- [T] TEST, OBSERVATION, MONITORING
- [G] GEO-THERMAL

APPROXIMATE DEPTH OF WELL: 300 FEET

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 DEEPENED 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
- [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 DEEPENED (IF AVAILABLE):

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

APPROP. PERMIT NUMBER: H02006G003

PERMIT No. HO-95-0259

B 3 LOCATION OF WELL

Howard
COUNTY

Tuxbury Grove
SUBDIVISION

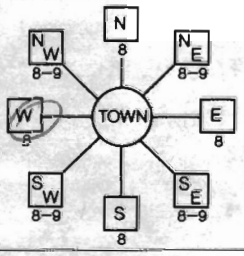
SECTION | LOT: 5 16

Clarksville
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town): 1/2 M

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Heather Glen Way
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD: 25 | ENTER FT OR MI: FT

TAX MAP: 34 BLK: 17 PARCEL 77

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD (13) A516063
COUNTY NAME | COUNTY NO.

STATE SIGNATURE | INSERT S

DATE ISSUED: 2/24/06 | CO SIGNATURE | EXP. DATE: 2/25/07

NORTH GRID: 497 000 | EAST GRID: 814 000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. Well
2.
3.

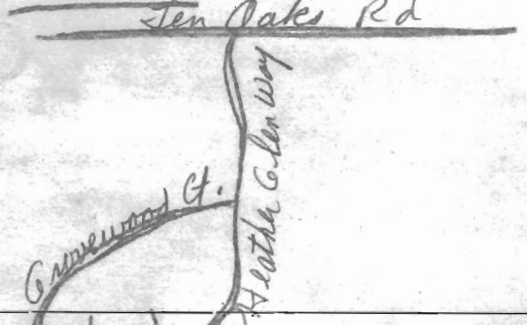
WRITE THE BOX NUMBER FROM THE MAP HERE

E 814

N 497

3/20/06
Sample Taken
BB
X
000
000

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



SPECIAL CONDITIONS
NOTE: - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

This well must be tested for well VOC & Radium at the yield test

COUNTY

DENV-Permit 97

Page ____ of ____ Review ____

Date 3-20-06

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0259
Location of property (road) Heather Glen Way 16
Subdivision Turnbury Grove Lot 16 Block ____ Plat ____ Sec. ____
Well Driller Joseph Mayne Owner D.R. Horton

Depth of well 260'
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. 3'

I. High rate pumping -- reservoir drawdown

Time pump started 7:15 Pumping rate 15 gpm.
Total time 15 min to reach pumping water level 127 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 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:30	127	4 sec.	N/A	15 gpm.
7:45	125	10		6
8:00	124	10		6
8:15	124	10		6
8:30	123	10		6
8:45	123	10		6
9:00	102	10		6
9:15	98	10		6
9:30	98	10		6
9:45	98	10		6
10:00	98	10		6
10:15	98	10		6
10:30	98	10		6
Adjust water flow back at 9:00 for water samples.				

HD-224

Howard County
Health Department

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 7, 2006

D. R. Horton, Inc.
1370 Picardi Drive
Rockville, Maryland 20850

RE: Water Sample Results
Lot ~~15~~ 16 Turnbury Grove
HO – 95 – 0259

To Whom this May Concern:

During the recent "yield test" of the well serving the future Lot 15 (located on Heather Glen Way), a sample was collected for volatile organic compounds (VOC's) on March 21, 2006. This testing was performed to establish a baseline evaluation of the well water supply due to known VOC ground water contamination concerns previously documented (during the 1990's and earlier) in properties nearby this development.

Results from this sampling were free of all tested VOC's to the limit of detection for the test method employed. Similar findings were noted for the corresponding Field and Trip Blank samples. With respect to these parameters, the future well water supply is **currently** safe for all uses.

A copy of the VOC test report is enclosed for your records.

If questions should arise, you may contact Stuart Oster of the Well & Septic Program at (410) 313 – 1771 or me at (410) 313 – 1773.

Sincerely,

Bert Nixon

Bert Nixon, Assistant Director
Bureau of Environmental Health

Enclosure
cc: Lot 15 Turnbury Grove Property File

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: _____ Telephone #: _____
Address: _____
_____

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): _____ License#_____
***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:_____ Telephone #: _____
Subdivision: Preserve @ Clarksville Lot #: 16 Well Tag # : HO - 95 - 0251
Site Address: 6283 Heather Glen Way
_____

Submersible Pump Data	**Pitless Adapter**	**Well Cap and Electric Conduit**
Make: _____	Make: _____	Two piece watertight cap:_____
Model #: _____	Model#:_____	Screened, vented well cap:_____
Pump Capacity _____ GPM	Depth:____ (36" min)	Cap secured to casing:_____
Well Yield:_____GPM	NSF approved:____	Conduit min 18" B.G.:_____
Depth of well encountered at time of pump installation:_____(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: _____	PVC sleeved to undisturbed soil at wall penetration:_____
PSI: _____(160 psi min)	Approximate length of sleeve:_____
Depth of supply line: ___(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 date

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

Date Insp. Requested: 5/4/12 Date Insp. Approved: 5/4/12

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 ✓

HD-215(Rev. 8/00)

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: Charles A. Klein & Sons, Inc. Telephone #: 410-549-6960
Address: 5220 Klees Mill Rd
Lisbon, 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 (Prin MICHAEL F. KLEIN License# 6522
*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: Compass Homes Telephone #: 443-260-5734
Subdivision: Preserve @ Centennial Lot #: 16 Well Tag # : HO-95-0259
Site Address: 6283 HEATHER WAY

Submersible Pump Data
Make: GRUNDFOS
Model #: 15SQE07-180
Pump Capacity 7 GPM
Well Yield: 6 GPM

Pitless Adapter
Make:
Model#: CT800
Depth: 36" (36" min)
NSF approved:

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

Depth of well encountered at time of pump installation: 260 (feet)
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
Type: 1" black poly pipe
PSI: 160 (160 psi min)
Depth of supply line: 48" (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: Yes
Approximate length of sleeve: 5ft
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.

Michael F Klein 2/25/12
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: _____
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 _____

HD-215(Rev. 8/00)

Howard County Health Department

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

November 17th, 2011

Compass Homes, LLC
Attn: Amy Ferrer
6206 Heather Glen Way
Clarksville, MD 21029

RE: 6283 Heather Glen Way
The Preserve at Clarksville - Lot 16
Clarksville, MD 21029

Dear Ms. Ferrer,

Upon recent review of the above referenced property, it was noted that this lot is within an area of naturally occurring radiation in the county (i.e., Radionuclides). A raw sample collected on 03/20/2006 indicated the Gross Alpha result was at its maximum contaminant level (MCL) while the Gross Beta was below is maximum contaminant level.

As stated in a letter dated 03/17/2006 (enclosed), **prior to issuance of a Use & Occupancy** additional testing for Gross Alpha, Gross Beta and Radium 226/228 will be necessary to verify existing levels.

Alternatively, you may install treatment designed to reduce Gross Alpha, Gross Beta and Radium, plus provide post treated results (for all 3 parameters) confirming levels are in conformance with existing standards. Should you choose to install treatment; the owners will be required to sign an "Agreement for Approval of an Individual Drinking Well with an Onsite Treatment System" as part of the Use and Occupancy process.

Please contact me at the Bureau of Environmental Health if you should have any further questions (410-313-1771).

Respectfully,

Heidi Scott, R.S.
Well and Septic Program
E-mail: hscott@howardcountymd.gov

cc: Well & Septic program file

Howard County
Health Department

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 Benchmark Engineering
(professional land surveyor or company employing professional land surveyors)
on 12-14-05 (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

33 lots for D.R. Horton
Turnbury Grove

Bricker, Robert

From: Bricker, Robert
Sent: Wednesday, July 25, 2012 1:21 PM
To: 'amy Ferrer'
Subject: 6283 Heather Glen Way
Attachments: 6283 Heather Glen Way_RADIUM TREATMENT AGREEMENT_The Preserve at Clarksville-Lot 16.pdf

Amy,

I have reviewed the subject property file for ICOP. The parameter values for potability are within standards, and the post-treatment radioactive constituents are below their respective MCLs. For the Health Department to issue an *Interim Certificate of Potability with Permanent Deviation for Radium*, thereby permitting Use and Occupancy, a Radium Treatment Agreement must signed by the homeowner and the Health Officer and entered into Land Records.

ROBERT BRICKER, CPSS, REHS/RS
ENVIRONMENTAL SANITARIAN
DEVELOPMENT COORDINATION SECTION, WELL AND SEPTIC PROGRAM
HOWARD COUNTY BUREAU OF ENVIRONMENTAL HEALTH
7178 COLUMBIA GATEWAY DRIVE
COLUMBIA, MD 21046

410-313-2691; fax, 410-313-2648
rbricker@howardcountymd.gov

Howard County Health Department

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
Twitter: HowardCoHealthDep

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

INTERIM CERTIFICATE OF POTABILITY
PERMANENT DEVIATION FOR RADIUM
Expiration Date – February 20, 2013

August 20, 2012

Yun-Xing Wang and Karen H. Wang
6283 Heather Glen Way
Clarksville, MD 21029

RE: The Preserve at Clarksville, Lot 16
6283 Heather Glen Way
Building Permit: B11002220
Well Permit: HO-95-0259

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 **3/21/2012.** Final approval of the well line connection to the dwelling was granted on **5/4/2012.** The well construction was completed on **3/20/2006.** Water samples were collected on **7/10/2012.**

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.

Gross Alpha and Beta samples were also collected on **7/10/2012**. Results showed a Gross Alpha level of **43.6 ± 3.9 pCi/L** and **Gross Beta** level of **24.7 ± 3.3 pCi/L**. **This exceeds the maximum contaminant level (MCL) of 15 pCi/L and/or 50 pCi/L, respectively.**

After installation of a radionuclide removal device(kitchen tap reverse osmosis system), post-treatment water samples were collected on **7/11/2012** and indicated a Gross Alpha level of **<0.9 ± 0.6 pCi/L**, a Gross Beta level of **<1.9 ± 1.2 pCi/L**, and a Radium 226/228 level of **<1.2 ± 0.7 pCi/L**.

This Department will grant a **permanent deviation** to the Interim Certificate of Potability on condition that the radionuclide removal system effectively maintains a Gross Alpha level of less than **15 pCi/L**, a Gross Beta level of less than **50 pCi/L**, and a Radium 226/228 level of less than **5 pCi/L**.

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 Maryland certified water laboratory certified for radionuclide analysis perform a yearly radionuclide analysis.

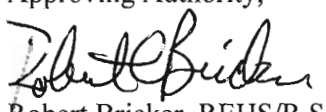
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04.12F *Enforcement* and Environment Article 9-1311, Annotated Code of Maryland.**

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-95-0259. 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 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,



Robert Bricker, REHS/R.S.
Environmental Sanitarian
Well & Septic Program

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

Robert Bricker

Circuit Court for
HOWARD COUNTY
Clerk of the Court,
MARGARET D. RAPPAPORT
8360 COURT AVENUE
ELLICOTT CITY, MD 21043-
(410) 313-2111

Transaction Block: 1567
Ref: 106
MISC

	AMOUNT
IMP FD SURE $5	40.00
RECORDING FEE $20.00	20.00
SUBTOTAL:	60.00
TOTAL CHARGES:	60.00
PAYMENTS	
CHECK	60.00
TOTAL TENDERED:	60.00

Cashier: VLB Reg # H008
Rcpt # 70716
Date: Aug 20, 2012 Time: 08:40 am

Circuit Court for
HOWARD COUNTY
Clerk of the Court,
MARGARET D. RAPPAPORT
8360 COURT AVENUE
ELLICOTT CITY, MD 21043-
(410) 313-2111

Transaction Block: 1569
Ref: 106
MISC

	AMOUNT
CERTFIED COPY-A	5.00
PHOTOCOPY-A	1.00
SUBTOTAL:	6.00
TOTAL CHARGES:	6.00
PAYMENTS	
CHECK	6.00
TOTAL TENDERED:	6.00

Cashier: VLB Reg # H008
Rcpt # 70717
Date: Aug 20, 2012 Time: 08:43 am

Howard County Health Department

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

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 Karen & Yun-Xing Wang ("the Owner").

WHEREAS, the Owner owns a tract of land at street address _6283 Heather Glen Way_ ,_Clarksville, MD 21029_ and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # _34_, Grid # _11_, Parcel # _77_, Deed Reference # _13482/ 459 and District # _ 05_ , Tax Account # _448298_, Block # _9999_ , _The Preserve at Clarksville_ subdivision, Lot _16_. ("the Property").

WHEREAS, the Property lacks an available public drinking water source and is required to have and 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 _HO-95-0259_ 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.

NOW THEREFORE, the parties have agreed to the following terms and conditions:

1. The Owner will record this Agreement among the Land Records of Howard County, Maryland and provide confirmation to the Health Dept.

2. The Owner agrees to install and maintain a water treatment device, which effectively reduces the gross alpha, gross beta and radium levels to below their respective MCL. The Health Department shall verify that the treatment device is operating effectively and the Owner agrees to allow access to the Health Department to collect a follow-up sample(s).

3. The Health Department shall issue a Certificate of Potability for the well once follow-up sampling shows acceptable gross alpha, gross beta (short and long term) and radium 226 / 228 levels.

4. The Owner agrees that there shall be no liability on part of the Health Department for any immediate or long term impacts to health or property, under any circumstance or including, but not limited to, treatment device failure, improper maintenance or installation, or defect. The Health Department does not warrant nor guarantee that the device will adequately or properly function and the Owner agrees to implement and pay for any necessary changes or corrections.

5. The Owner acknowledges and agrees that neither the Health Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system or treatment device.

6. This Agreement shall not be construed to limit any authority of the Health Department to protect the public health, safety or enjoyment of property or to issue any other orders to take any other action, which is now or may hereafter be within its authority.

7. This agreement contains the entire agreement and understanding between the Health Department and the Owner. There are no additional terms other than as contained in this Agreement. This Agreement may not be modified except in writing signed by each of the parties or their authorized representatives.

8. The Agreement shall run with the land and binds the Owner, his heirs, successors, and assigns. The owner agrees to provide a copy of this agreement to any purchaser or lessee of the property.

9. The laws of the State of Maryland govern the provisions of all transactions.

The parties have signed and sealed this Agreement on the dates set forth below.

8/17/2012
Date

Owner

8/17/2012
Date

Owner

8/17/2012
Date

Howard County Health Department

Witness

Witness

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

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Amy Ferrer
Compass Homes
6206 Heather Glen Way
Clarksville, Maryland 21029

S/O Number: 85845-1

Report Date: July 24, 2012

Raw Sample

Property Sampled: 6283 Heather Glen Way, 21029
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B11002220
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard **Subdivision:** Preserve at Clarksville
Map: 34 **Parcel:** 77 **Lot #:** 16

Date/Time Collected in Field: July 10, 2012 @ 1:39 pm
Date/Time Received in Lab: July 10, 2012 @ 3:39 pm

Well Tag #: HO-95-0259
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Reverse Osmosis

Fails at entry point
RB 8/17/2012
see Treated sample results

PARAMETER	METHOD	MDL (pCi/L)	MCL* (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Gross Alpha (Short-Term)	EPA 900.0	1.0	15	**43.6 ± 3.9**	**HIGH**
Gross Beta (Short-Term)	EPA 900.0	2.0	50	38.0 ± 2.7	Acceptable
Gross Alpha (Long-Term)	EPA 900.0	1.4	15	**24.7 ± 3.3**	**HIGH**
Gross Beta (Long-Term)	EPA 900.0	1.9	50	24.2 ± 2.1	Acceptable

*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

MDL: Method Detection Limit
MCL: Maximum Contamination Level, an enforceable level established by the EPA
+Analyzed by Lab # 278

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6206 Heather Glen Way
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S/O Number: 85845-1

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Residual Chlorine: <0.1 mg/L

Building Permit #: B11002220
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard
Map: 34
Subdivision: Preserve at Clarksville
Parcel: 77
Lot #: 16

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Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Amy Ferrer
Compass Homes
6206 Heather Glen Way
Clarksville, Maryland 21029

S/O Number: 85845-2

Report Date: July 24, 2012

Treated Sample

Property Sampled: 6283 Heather Glen Way, 21029
Sample Location: Reverse Osmosis (R/O) Tap
Residual Chlorine: <0.1 mg/L @ Point of Use

Building Permit #: B11002220
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard
Map: 34
Subdivision: Preserve at Clarksville
Parcel: 77
Lot #: 16

Date/Time Collected in Field: July 11, 2012 @ 9:11 am
Date/Time Received in Lab: July 11, 2012 @ 11:26 am

Well Tag #: HO-95-0259
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Reverse Osmosis (R/O)

PARAMETER	METHOD	MDL (pCi/L)	MCL* (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Gross Alpha (Short-Term)	EPA 900.0	0.9	15	<0.9 ± 0.6	Acceptable
Gross Beta (Short-Term)	EPA 900.0	1.9	50	<1.9 ± 1.2	Acceptable

*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

'OK' JCB 8/17/2012

MDL: Method Detection Limit
MCL: Maximum Contamination Level, an enforceable level established by the EPA
+Analyzed by Lab # 278

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Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Amy Ferrer
Compass Homes
6206 Heather Glen Way
Clarksville, Maryland 21029

S/O Number: 85845-2

Report Date: July 24, 2012

Treated Sample

Property Sampled: 6283 Heather Glen Way, 21029
Sample Location: Reverse Osmosis (R/O) Tap
Residual Chlorine: <0.1 mg/L Point of use
Building Permit #: B11002220
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard **Subdivision:** Preserve at Clarksville
Map: 34 **Parcel:** 77 **Lot #:** 16

Date/Time Collected in Field: July 11, 2012 @ 10:28 am
Date/Time Received in Lab: July 11, 2012 @ 11:26 am

OK MB 8/17/2012

Well Tag #: HO-95-0259
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Reverse Osmosis (R/O)

PARAMETER	METHOD	MDL (pCi/L)	MCL* (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Gross Alpha (Long-Term)	EPA 900.0	2.4	15	<2.4 ± 1.5	Acceptable
Gross Beta (Long-Term)	EPA 900.0	3.3	50	<3.3 ± 2.0	Acceptable
Radium 226	EPA 903.1	0.2	5 pCi/L Combined	<0.2 ± 0.1	Acceptable
Radium 228	EPA Ra-05	1.0		<1.0 ± 0.6	

*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

Katherine C. Higgs
Manager – Drinking Water Testing

MDL: Method Detection Limit
MCL: Maximum Contamination Level, an enforceable level established by the EPA
+Analyzed by Lab # 278

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Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Amy Ferrer
Compass Homes
6206 Heather Glen Way
Clarksville, Maryland 21029

S/O Number: 85845-1

Report Date: July 24, 2012

Potability Testing

Property Sampled:	6283 Heather Glen Way, 21029	**Building Permit #:**	B11002220
Sample Location:	Pressure Tank Tap	**Sampler ID #:**	7483AM
Residual Chlorine:	<0.1 mg/L	**Samples Iced:**	Yes

County:	Howard	**Subdivision:**	Preserve at Clarksville		
Map:	34	**Parcel:**	77	**Lot#:**	16

Date/Time Collected in Field: July 10, 2012 @ 1:39 pm
Date/Time Received in Lab: July 10, 2012 @ 3:39 pm

Well Tag #: HO-95-0259
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Reverse Osmosis (R/O)

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	<1.0 mg/L as N	Pass
Turbidity	EPA 180.1	10 NTU	1.0 NTU	Pass
pH	EPA 150.1	*6.5-8.5 Units	7.4 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.

OK KB 8/17/2012

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.

Howard County
Health Department

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

May 17, 2006

D.R. Horton
1370 Piccard Drive
Rockville, MD 20850

RE: Turnbury Grove Subdivision, Lot ~~15~~ Now Lot 16

Well Tag: HO-95-0259

To Whom It May Concern:

A sample was collected from a yield test on March 20, 2006 and submitted to Florida Radiochemistry Services 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 17.8 ± 2.1 picocuries/liter (pCi/L)**; while the **Gross Beta** level was 13.8 ± 1.6 **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 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. Treatment devices such as Reverse Osmosis and "softners" are generally effective in addressing this type of contaminant.

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

Bert Nixon, Deputy Director
Bureau of Environmental Health

BN/bn

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

D.R. Horton 301-670-6144
1370 Piccard Drive 410-939-8793
Rockville, MD 20850

Send Report To:
Howard Co.
Environmental
Health

State of
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
J. Mehsen Joseph, Ph.D., Director

LABORATORY ANALYSIS REQUEST

HOTG15BB950259
Sample Bottle No. A: _____ **No. B:** _____ **Field Blank Bottle No. 1:** _____ **No. 2:** _____

Plant/Site Name: _____ **County:** Howard

Sample Source: Turnberry Grove-Lot 15 **Location:** Well # 95-0259
(well no., lab sink, sample tap, etc.)

County: [1] [3] **Plant No.** [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

Collector: 7485BB **Telephone No.:** (410) 313-2643

Date Collected: 3/20/2006 **Time Collected:** 9:00 **a.m.** _____ **p.m.**

Nitric Acid Preserved: Yes [X] No [ ] **Iced:** Yes [X] No [ ]

Submitters Code: [ ] [ ] **Federal Project:** [S] **Field Data:** _____ pH _____ Chlorine

Remarks: TAKEN DURING YIELD TEST

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	0603163-02	17.8 ± 2.1	
✓	Gross Beta	4100		18.8 ± 1.6	
	Radon-222 *Bottle A*	4004			
	Radon-222 *Bottle B*	4004			
	Field Blank #1	4004			
	Field Blank #2	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: ____/____/____

Section Chief: _____

Send Report To:
Howard County
Env. Health

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
TRACE ORGANICS SECTION
201 W. Preston Street, Baltimore, Maryland 21201
J. Mehsen Joseph, Ph.D., Director

Lab No. Date Received
961390 MAR 21
Do not write above this line

LABORATORY ANALYSIS REQUEST

HOTG15BB950259Well

Bottle No: 1 **Plant/Site Name:** Turnberry Grove-Lot 16 **County:** Howard

Sample Source: Heather Glen Way (Street) Clarksville (Town or City) **Location:** Well # HO-95-0259 (well no., lab sink, sample tap, etc.)

Sampler ID: 1 4 8 5 B B **PWSID:** ☐☐☐☐☐☐☐ **Plant ID:** ☐☐

Collector: Brian Baker (410)313-2643 (include telephone number)

Date Collected: 3/21/2006 **Time Collected:** 9:00 (a.m) ____ p.m.

Field Preserved: ☒ Yes ☐ No **Preservative Used:** ☒ 1:1 HCl+Ascorbic acid ☐ Na_2SO_4 ☐ 6 mg NH_4Cl

Sample Type:
- ☒ Drinking Water
  - ☐ Community
  - ☐ Non-Community
  - ☒ Private
- ☐ Landfill
- ☐ Stream
- ☐ Sediment
- ☒ Source (Raw Water)
- ☐ Distribution (Treated)
- ☐ Water Treatment Plant POE
- ☐ Liquid
- ☐ Solid
- ☒ Other Well

Specify Program: ☒ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other ____

Test Requested: ☒ Trihalomethanes ☒ Volatiles ☐ Semi-volatiles ☐ Haloacetic Acids

FIELD DATA : pH ____ Free Cl ____ Total Cl ____

Field Blank Bottle No.: HOTG15BB950259Field
Trip Blank Bottle No.: HOTG15BB950259Trip

Initial Yield Test
Remarks: ~~Test Results~~ Please Run Full Scan Including MtBE

Section Chief: Deborah Miller, Dan **Date Reported:** 4/7/06

2006 APR 21 AM 9:54

●Phone: (410) 767 - 5643 ●Fax: (410) 333 - 5237

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL

Form Revised 12/00
DHMH 4362

SUBMITTER'S COPY

Florida Radiochemistry Services, Inc.

Analysis Report

Lab Sample I.D.	0603163-01	0603163-02
Client I.D.	HO-11428-20ST	HO-TG15BB950259
Gross Alpha	19.1	17.8
Error +/-	2.7	2.1
MDL	2.1	0.8
EPA Method	900.0	900.0
Prep Date	03/21/06	03/21/06
Analysis Date	03/22/06	03/22/06
Analyst	MJN	MJN
Gross Beta	11.2	18.8
Error +/-	1.5	1.6
MDL	1.9	1.7
EPA Method	900.0	900.0
Prep Date	03/21/06	03/21/06
Analysis Date	03/22/06	03/22/06
Analyst	MJN	MJN
Units	pCi/l	pCi/l

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

Certificate of Analysis - Volatiles

Sample Name: 961380 HOTG15BB950259WELL **Method:** EPA 524.2
Date Analyzed: 04/04/06

Contaminants	DL*	MCL*	Result*
TRIHALOMETHANES			
Bromodichloromethane	0.5	na	ND
Bromoform	0.5	na	ND
Chloroform	0.5	na	ND
Dibromochloromethane	0.5	na	ND
TOTAL THMs	-	80	-
REGULATED			
Benzene	0.5	5	ND
Carbon Tetrachloride	0.5	5	ND
Chlorobenzene	0.5	100	ND
1,4-Dichlorobenzene	0.5	75	ND
1,1-Dichloroethene	0.5	7	ND
1,2-Dichloroethane	0.5	5	ND
1,2-Dichlorobenzene	0.5	600	ND
1,2-Dichloropropane	0.5	5	ND
cis-1,2-Dichloroethene	0.5	70	ND
trans-1,2-Dichloroethene	0.5	100	ND
Ethylbenzene	0.5	700	ND
Styrene	0.5	100	ND
Tetrachloroethene	0.5	5	ND
Trichloroethene	0.5	5	ND
1,1,1-Trichloroethane	0.5	200	ND
Toluene	0.5	1000	ND
Vinyl Chloride	0.5	2	ND
o-Xylene	0.5	na	ND
m+p-Xylene	1.0	na	ND
Total Xylenes	1.5	10000	ND
Methylene Chloride	0.5	5	ND
1,1,2-Trichloroethane	0.5	5	ND
1,2,4-Trichlorobenzene	0.5	70	ND

Contaminants	DL*	MCL*	Result*
UNREGULATED			
Dichlorodifluoromethane	0.5	na	ND
Chloromethane	0.5	na	ND
Bromomethane	0.5	na	ND
Chloroethane	0.5	na	ND
Trichlorofluoromethane	0.5	na	ND
1,1-Dichloroethane	0.5	na	ND
1,3-Dichlorobenzene	0.5	na	ND
Dibromomethane	0.5	na	ND
1,1-Dichloropropene	0.5	na	ND
trans-1,3-Dichloropropene	0.5	na	ND
1,1,2,2-Tetrachloroethane	0.5	na	ND
1,3-Dichloropropane	0.5	na	ND
2,2-Dichloropropane	0.5	na	ND
cis-1,3-Dichloropropene	0.5	na	ND
2-Chlorotoluene	0.5	na	ND
4-Chlorotoluene	0.5	na	ND
Bromobenzene	0.5	na	ND
1,3,5-Trimethylbenzene	0.5	na	ND
1,2,4-Trimethylbenzene	0.5	na	ND
1,2,3-Trichlorobenzene	0.5	na	ND
n-Propylbenzene	0.5	na	ND
n-Butylbenzene	0.5	na	ND
Naphthalene	0.5	na	ND
Hexachlorobutadiene	0.5	na	ND
Isopropylbenzene	0.5	na	ND
1,2,3-Trichloropropane	0.5	na	ND
1.2-Dibromo-3-Chloropropane	0.5	na	ND
p-Isopropyltoluene	0.5	na	ND
tert-Butylbenzene	0.5	na	ND
sec-Butylbenzene	0.5	na	ND
Bromochloromethane	0.5	na	ND
1,1,1,2-Tetrachloroethane	0.5	na	ND
1,2-Dibromoethane	0.5	na	ND
Methyl-tert-Butyl Ether (MTBE)	0.5	na	ND
Ethyl-tert-Butyl Ether (ETBE)	0.5	na	ND
tert-Amyl Methyl Ether (TAME)	0.5	na	ND

*All results are in parts per billion (ppb)
ND = Less than the detection limit
na = not applicable
e = estimated value

Section Chief: Deborah Miller Zink Date Approved: 4/7/06

Phone: (410) 767-5896 ***Fax: (410) 225-9318***

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

Certificate of Analysis - Volatiles

Sample Name: 961380 FB
Date Analyzed: 04/04/06
Method: EPA 524.2

Contaminants	DL*	MCL*	Result*
TRIHALOMETHANES			
Bromodichloromethane	0.5	na	ND
Bromoform	0.5	na	ND
Chloroform	0.5	na	ND
Dibromochloromethane	0.5	na	ND
TOTAL THMs	-	80	-
REGULATED			
Benzene	0.5	5	ND
Carbon Tetrachloride	0.5	5	ND
Chlorobenzene	0.5	100	ND
1,4-Dichlorobenzene	0.5	75	ND
1,1-Dichloroethene	0.5	7	ND
1,2-Dichloroethane	0.5	5	ND
1,2-Dichlorobenzene	0.5	600	ND
1,2-Dichloropropane	0.5	5	ND
cis-1,2-Dichloroethene	0.5	70	ND
trans-1,2-Dichloroethene	0.5	100	ND
Ethylbenzene	0.5	700	ND
Styrene	0.5	100	ND
Tetrachloroethene	0.5	5	ND
Trichloroethene	0.5	5	ND
1,1,1-Trichloroethane	0.5	200	ND
Toluene	0.5	1000	ND
Vinyl Chloride	0.5	2	ND
o-Xylene	0.5	na	ND
m+p-Xylene	1.0	na	ND
Total Xylenes	1.5	10000	ND
Methylene Chloride	0.5	5	ND
1,1,2-Trichloroethane	0.5	5	ND
1,2,4-Trichlorobenzene	0.5	70	ND

Contaminants	DL*	MCL*	Result*
UNREGULATED			
Dichlorodifluoromethane	0.5	na	ND
Chloromethane	0.5	na	ND
Bromomethane	0.5	na	ND
Chloroethane	0.5	na	ND
Trichlorofluoromethane	0.5	na	ND
1,1-Dichloroethane	0.5	na	ND
1,3-Dichlorobenzene	0.5	na	ND
Dibromomethane	0.5	na	ND
1,1-Dichloropropene	0.5	na	ND
trans-1,3-Dichloropropene	0.5	na	ND
1,1,2,2-Tetrachloroethane	0.5	na	ND
1,3-Dichloropropane	0.5	na	ND
2,2-Dichloropropane	0.5	na	ND
cis-1,3-Dichloropropene	0.5	na	ND
2-Chlorotoluene	0.5	na	ND
4-Chlorotoluene	0.5	na	ND
Bromobenzene	0.5	na	ND
1,3,5-Trimethylbenzene	0.5	na	ND
1,2,4-Trimethylbenzene	0.5	na	ND
1,2,3-Trichlorobenzene	0.5	na	ND
n-Propylbenzene	0.5	na	ND
n-Butylbenzene	0.5	na	ND
Naphthalene	0.5	na	ND
Hexachlorobutadiene	0.5	na	ND
Isopropylbenzene	0.5	na	ND
1,2,3-Trichloropropane	0.5	na	ND
1,2-Dibromo-3-Chloropropane	0.5	na	ND
p-Isopropyltoluene	0.5	na	ND
tert-Butylbenzene	0.5	na	ND
sec-Butylbenzene	0.5	na	ND
Bromochloromethane	0.5	na	ND
1,1,1,2-Tetrachloroethane	0.5	na	ND
1,2-Dibromoethane	0.5	na	ND
Methyl-tert-Butyl Ether (MTBE)	0.5	na	ND
Ethyl-tert-Butyl Ether (ETBE)	0.5	na	ND
tert-Amyl Methyl Ether (TAME)	0.5	na	ND

*All results are in parts per billion (ppb)
ND = Less than the detection limit
na = not applicable
e = estimated value

Section Chief: Deborah Miller Jack Date Approved: 4/7/06

Phone: (410) 767-5896 Fax: (410) 225-9318

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

Certificate of Analysis - Volatiles

Sample Name: 961380 TB
Date Analyzed: 04/04/06
Method: EPA 524.2

Contaminants	DL*	MCL*	Result*
TRIHALOMETHANES			
Bromodichloromethane	0.5	na	ND
Bromoform	0.5	na	ND
Chloroform	0.5	na	ND
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TOTAL THMs	-	80	-
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Benzene	0.5	5	ND
Carbon Tetrachloride	0.5	5	ND
Chlorobenzene	0.5	100	ND
1,4-Dichlorobenzene	0.5	75	ND
1,1-Dichloroethene	0.5	7	ND
1,2-Dichloroethane	0.5	5	ND
1,2-Dichlorobenzene	0.5	600	ND
1,2-Dichloropropane	0.5	5	ND
cis-1,2-Dichloroethene	0.5	70	ND
trans-1,2-Dichloroethene	0.5	100	ND
Ethylbenzene	0.5	700	ND
Styrene	0.5	100	ND
Tetrachloroethene	0.5	5	ND
Trichloroethene	0.5	5	ND
1,1,1-Trichloroethane	0.5	200	ND
Toluene	0.5	1000	ND
Vinyl Chloride	0.5	2	ND
o-Xylene	0.5	na	ND
m+p-Xylene	1.0	na	ND
Total Xylenes	1.5	10000	ND
Methylene Chloride	0.5	5	ND
1,1,2-Trichloroethane	0.5	5	ND
1,2,4-Trichlorobenzene	0.5	70	ND

Contaminants	DL*	MCL*	Result*
UNREGULATED			
Dichlorodifluoromethane	0.5	na	ND
Chloromethane	0.5	na	ND
Bromomethane	0.5	na	ND
Chloroethane	0.5	na	ND
Trichlorofluoromethane	0.5	na	ND
1,1-Dichloroethane	0.5	na	ND
1,3-Dichlorobenzene	0.5	na	ND
Dibromomethane	0.5	na	ND
1,1-Dichloropropene	0.5	na	ND
trans-1,3-Dichloropropene	0.5	na	ND
1,1,2,2-Tetrachloroethane	0.5	na	ND
1,3-Dichloropropane	0.5	na	ND
2,2-Dichloropropane	0.5	na	ND
cis-1,3-Dichloropropene	0.5	na	ND
2-Chlorotoluene	0.5	na	ND
4-Chlorotoluene	0.5	na	ND
Bromobenzene	0.5	na	ND
1,3,5-Trimethylbenzene	0.5	na	ND
1,2,4-Trimethylbenzene	0.5	na	ND
1,2,3-Trichlorobenzene	0.5	na	ND
n-Propylbenzene	0.5	na	ND
n-Butylbenzene	0.5	na	ND
Naphthalene	0.5	na	ND
Hexachlorobutadiene	0.5	na	ND
Isopropylbenzene	0.5	na	ND
1,2,3-Trichloropropane	0.5	na	ND
1,2-Dibromo-3-Chloropropane	0.5	na	ND
p-Isopropyltoluene	0.5	na	ND
tert-Butylbenzene	0.5	na	ND
sec-Butylbenzene	0.5	na	ND
Bromochloromethane	0.5	na	ND
1,1,1,2-Tetrachloroethane	0.5	na	ND
1,2-Dibromoethane	0.5	na	ND
Methyl-tert-Butyl Ether (MTBE)	0.5	na	ND
Ethyl-tert-Butyl Ether (ETBE)	0.5	na	ND
tert-Amyl Methyl Ether (TAME)	0.5	na	ND

*All results are in parts per billion (ppb)
ND = Less than the detection limit
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Section Chief: Deborah M. DeBoy Date Approved: 4/7/06

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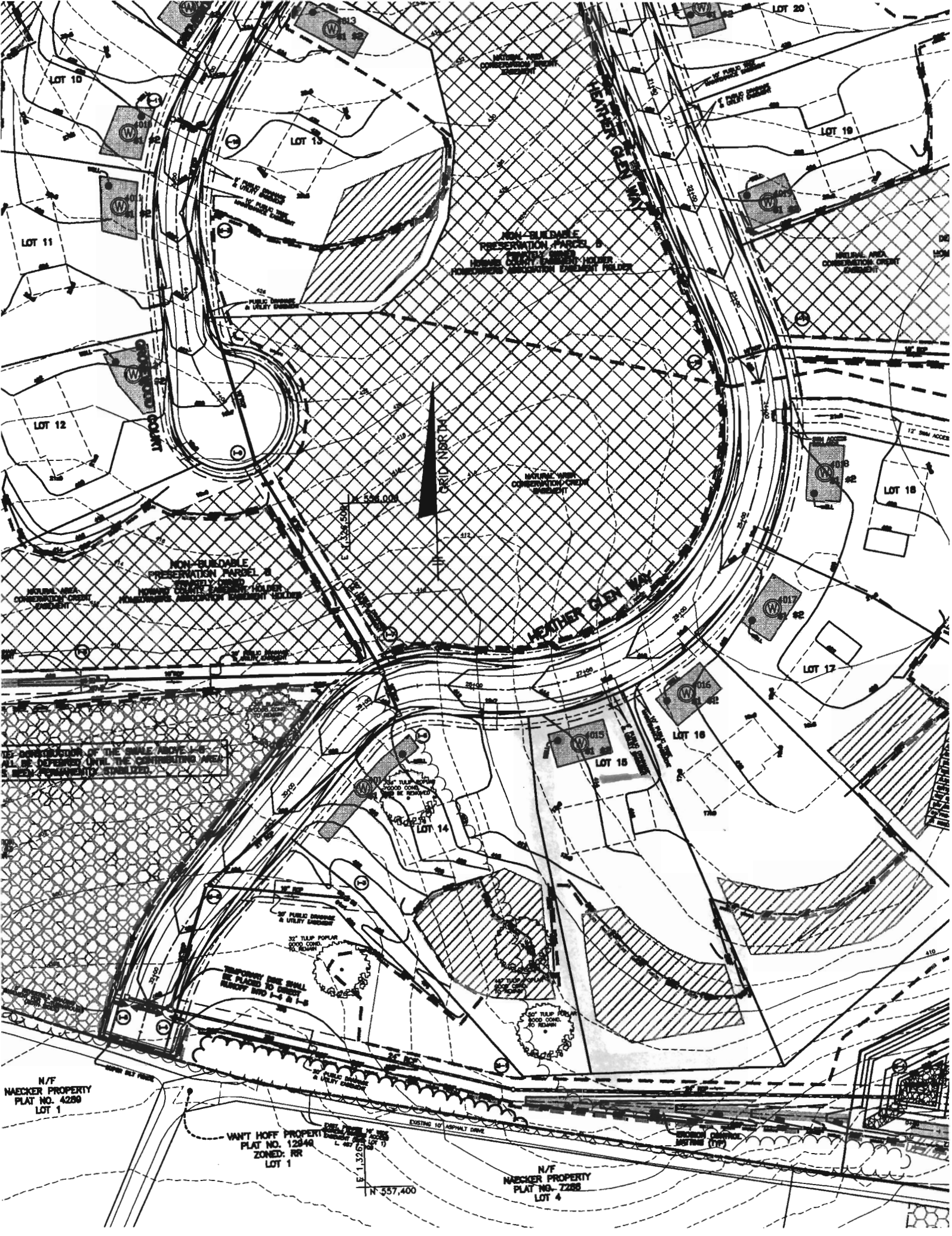
LOT 10
LOT 11
LOT 12
LOT 13
LOT 14
LOT 15
LOT 16
LOT 17
LOT 18
LOT 19
LOT 20
HEATHER GLEN WAY
NON-BUILDABLE PRESERVATION PARCEL B
NATURAL AREA CONSERVATION CREDIT EASEMENT
GRID NORTH
N: 536,000
E: 1,326,500
N/F NAECKER PROPERTY PLAT NO. 4289 LOT 1
VAN'T HOFF PROPERTY PLAT NO. 12949 ZONED: RR LOT 1
N/F NAECKER PROPERTY PLAT NO. 7288 LOT 4
N: 537,400
E: 1,325,000
EXISTING 10' ASPHALT DRIVE
SILT FENCE
TEMPORARY SWALE SHALL BE PLACED TO DIRECT RUNOFF INTO I-4 & I-5