

B 1 1448

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 522426 please type

STATE PERMIT NUMBER

40-95-0008 fill in this form completely

Date Received (APA)

OWNER INFORMATION 9967

8 MM DD YY 13

Winchester Homes, Inc Last Name Owner First Name 34

6905 Rockledge Drive, Suite 800 Street or RFD 55

Bethesda, Md 20817 Town 70 State 72 Zip 76

DRILLER INFORMATION

George F. Easterday M VD 040 Driller's Name 76 License No. 81

L. Franklin Easterday, Inc. Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771 Address

George F. Easterday Signature Date 4/25/05

B 3 LOCATION OF WELL

Howard 8 COUNTY 21 CC#

Riverwood Phase I 23 SUBDIVISION 42

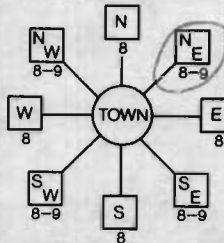
SECTION 1 44 46 LOT 11 48 50

Clarksville 52 NEAREST TOWN 71

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

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Hunters View 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 30037 DISTANCE FROM ROAD Ft. ENTER FT OR MI 38 39

TAX MAP: 29 BLK: 4 PARCEL 20

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, DEWATERING
P PUBLIC WATER SUPPLY WELL
T TEST, OBSERVATION, MONITORING
G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A-16084 COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 6/1/05 CO SIGNATURE EXP. DATE 6/1/06

43 MM DD YY 48 NORTH GRID 515 000 EAST GRID 828 000 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary Drive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

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

APPROX. PERMIT NUMBER 40-2004-G-007

PERMIT No. 40-95-0008 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

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

E 510 828 000
N 820 515 000

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



72505

12:00

FIELD DATA SHEET
 HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0008
 Location of property (road) Hunterview Rd
 Subdivision Riverview I Lot 11 Block 4 Plat 29 sec 31e 20
 Well Driller Easterday's Owner Winchester Homes

Depth of well 300 60 spm
 Distance of measuring point (M.P.) above ground 2 FT
 Static water level (S.W.L.) below M.P. 53 FT

I. High rate pumping -- reservoir drawdown

Time pump started 2:15 Pumping rate 15 gpm
 Total time _____ to reach pumping water level _____ 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 4 gallon bucket	FLOW METER READING (if used) Pump set 280'	CALCULATED FLOW (gallons per minute)
2:15	63 FT	4 sec		15 gpm
2:30	62 FT	4 sec		15 gpm
2:45	62 FT	4 sec		15 gpm
3:00	62 FT	4 sec		15 gpm
3:15	63 FT	4 sec		15 gpm
3:30	63 FT	4 sec		15 gpm
3:45	63 FT	4 sec		15 gpm
4:00	63 FT	4 sec		15 gpm
4:15	63 FT	4 sec		15 gpm
4:30	63 FT	4 sec		15 gpm
4:45	63 FT	4 sec		15 gpm
5:00	63 FT	4 sec		15 gpm
5:15	63 FT	4 sec		15 gpm

Feb 27 04 11:03a

HO CO FNY HFRI TH

14103137648

p. 1

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: NATIONAL WATER SERVICE Telephone #: 301-854-1533
Address: PO BOX 138
ASHTON, MD 20861

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

License # and name of individual responsible for the field installation:
Name (Print): DAVID RYCKE License# P1-0145

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: WINCHESTER Telephone #: _____
Subdivision: RIVERWOOD Lot #: 11 Well Tag #: HO-95-0008
Site Address: 11054 HUNTERS VIEW RD
ELLIOTT CITY

Submersible Pump Data

Make: GRUPEOS
Model #: 103AE10-250
Pump Capacity: 10 GPM
Well Yield: 15 GPM

Pitless Adapter

Make: WELL SEAL
Model #: P100
Depth: 40" (36" min)
NSI/WSC approved:

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 250 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors, Cable guards, or other acceptable method used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to header

Type: POLY
PSI: 120 (160 psi min)
Depth of supply line: 50 (36" min)

House Connection

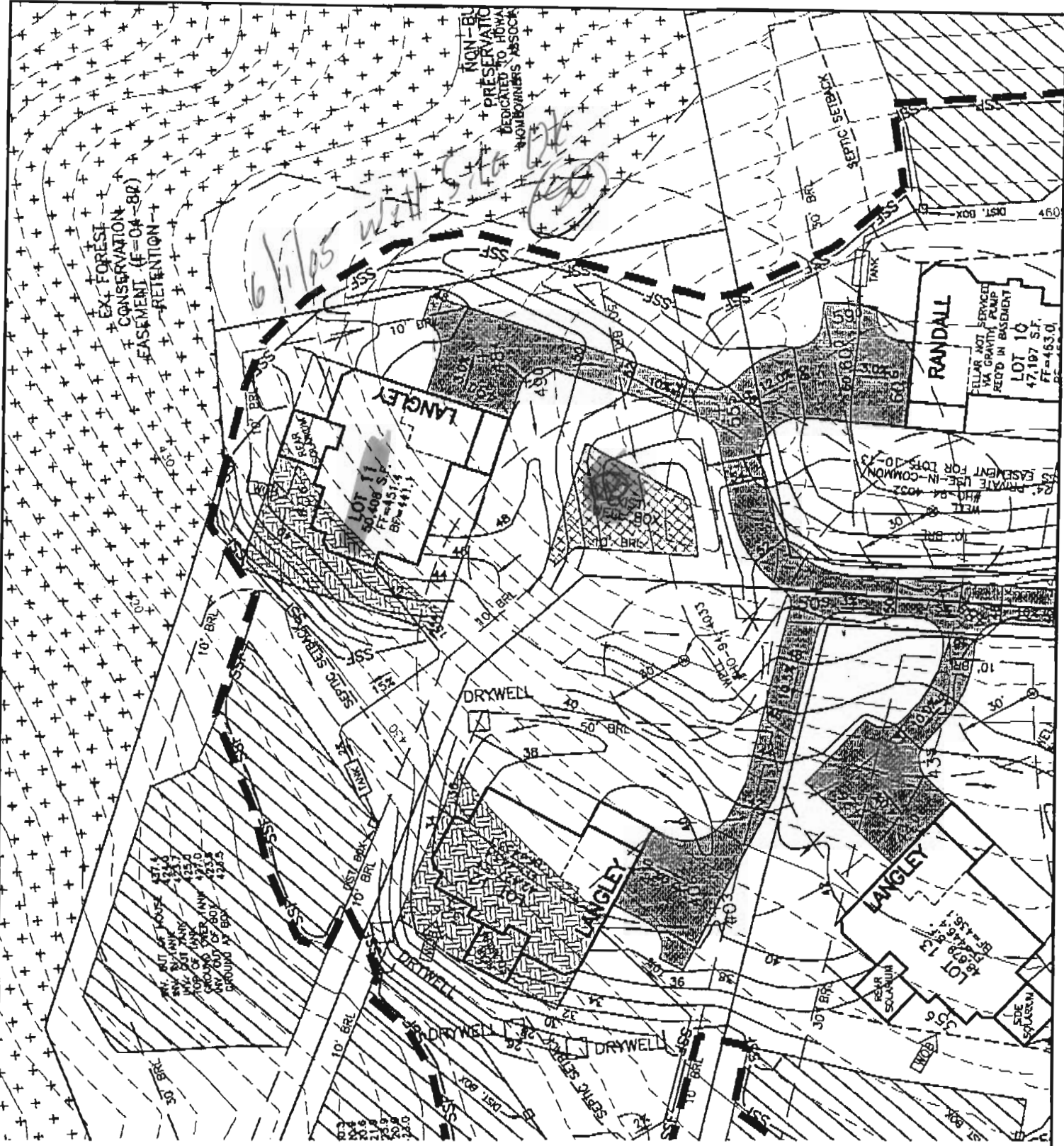
PVC sleeve in undisturbed soil at wall penetration:
Approximate length of sleeve: 5'
Sleeve caulked and sealed properly:

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 6-5-08

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

Date Insp. Requested: _____ Date Insp. Approved: 5/2008 Inspector: (Kw)
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope not seen outside of well cap/casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate ground observed below pitless adapter



RIVERWOOD

LOT 11



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043

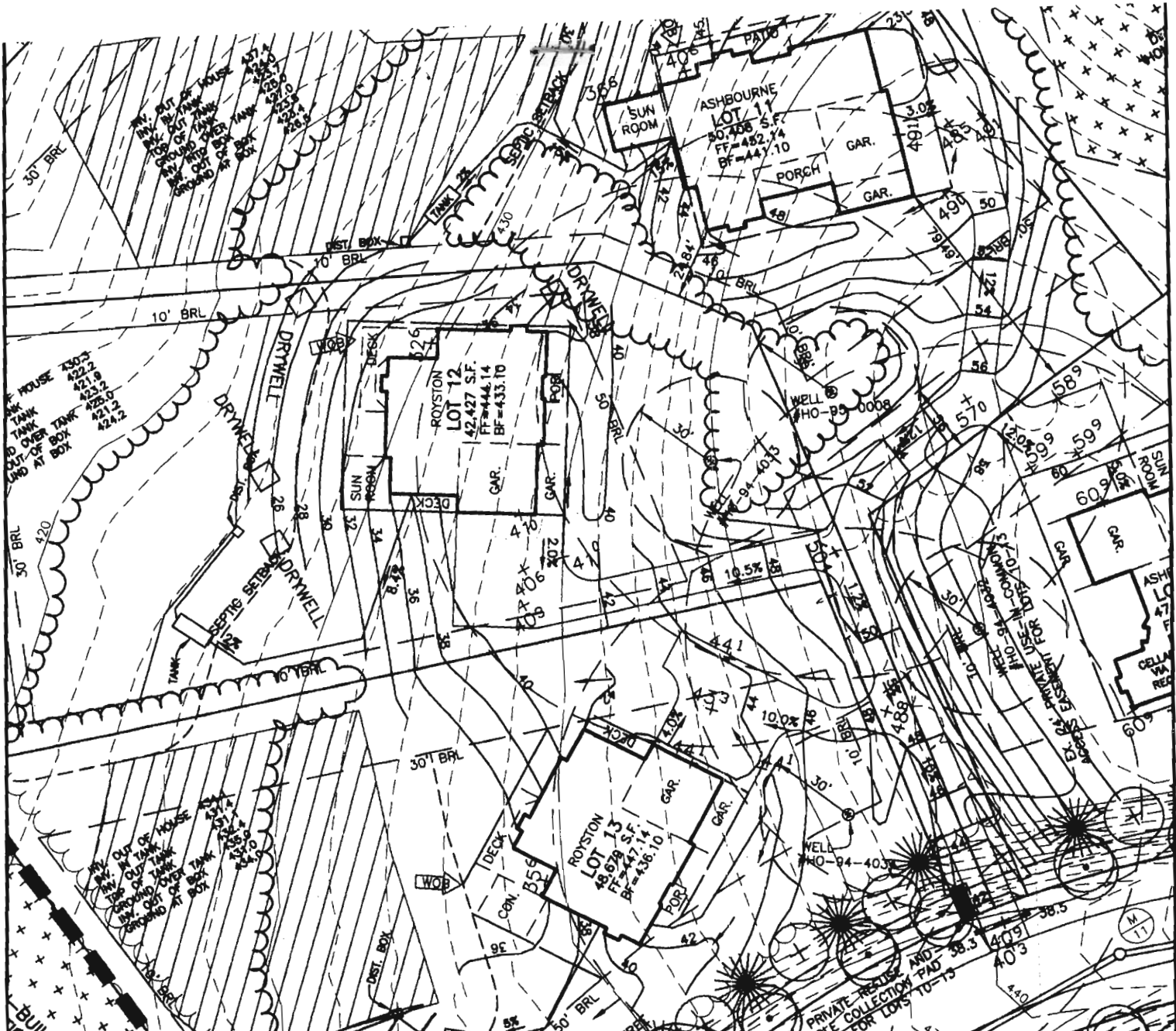
PHONE: 410-465-6105

FAX: 410-465-6644

THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

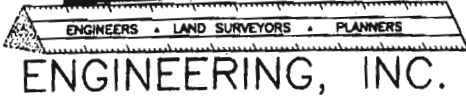
SCALE: 1" = 50' DATE: 10/12/04

REVISED: 3/29/05, 5/25/05



Plan Reviewer: 7/16/07
 Purchaser: _____
 Purchaser: BENCHMARK

**RIVERWOOD
 LOT 11**

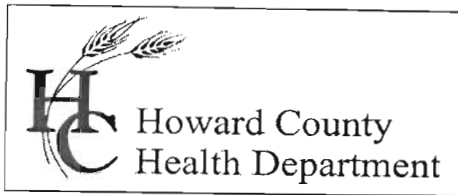


ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICITY CITY, MD 21043
 PHONE: 410-465-6105 FAX: 410-465-6644

THIRD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 7/16/07

*Need well location statement
 and square footage of house*



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

June 25, 2008

Winchester Homes
6905 Rockledge Drive, #800
Bethesda, MD 20817

RE: Riverwood, Lot 11
11054 Hunters View Road
Ellicott City, MD 21042
BP# B07003011
Well Permit #HO-95-0008

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 05/01/2008.**
Final approval of the well line connection to the dwelling was approved on 05/2008.

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.

A water softener was installed. Also, Gross Alpha and Gross Beta samples were collected (pre-treatment) on 06/02/2008. 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.

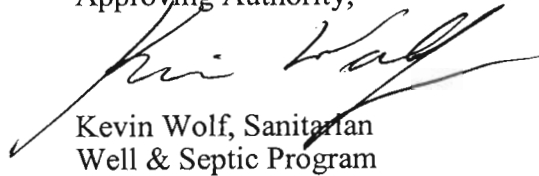
INTERIM CERTIFICATE OF POTABILITY

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-95-0008. 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.**

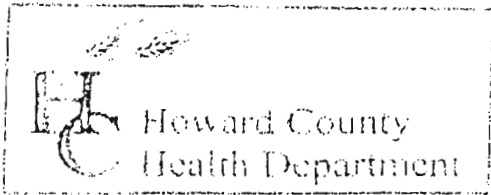
Date of Water Samples: 06/02/2008
Date of Samples for Radium 226/228: 06/02/2008
Date of Well Completion: 07/25/2005

Approving Authority,



Kevin Wolf, Sanitarian
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 Engineer Benchmark,
 (professional land surveyor or company employing professional land surveyors)
 on 4/1/05 (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

Riverwood Phase I
 Lots 11, 24-33, 42
 Preservation parcel ①



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

August 28, 2007

Ron O'Brien
Winchester Homes
6905 Rockledge Dr.
#800
Bethesda, Maryland 20817

RE: B07003011 and Radium sampling
Riverwood Lot 11
11054 Hunters View Rd

Dear Mr. O'Brien:

Building permit application #B07003086 for the referenced property has been completed by our office. This property lies within the radium sampling area. The Health Department has reviewed the file and determined radium sampling was not completed. To complete this sampling, a minimum of a one-hour pump test can be done and samples taken for Gross Alpha & Gross Beta (short and long term). If the results come back elevated, a treatment system will need to be installed and post-treated Gross Alpha & Gross Beta (short and long term) samples collected along with a Radium 226 & 228 sample. An alternative to this approach is to install the plumbing and a treatment system in the home prior to sampling, and then, at one time, have pre-treatment and post-treatment samples taken of Gross Alpha & Gross Beta (short term and long term) and Radium 226 & 228. Test results are received in the Health Department approximately one week after sampling for Gross Alpha & Gross Beta and approximately one month after sampling for Radium 226 & 228. If in either approach the pre-treatment levels of Gross Alpha and/or Gross Beta are elevated, a treatment agreement will need to be signed by the builder, the buyers, and the Health Department prior to issuance of an ICOP.

Contact the Health Department to schedule water samples. Please indicate your understanding of the above information by signing and dating this letter and returning it to the Health Department. Once the Health Department receives your confirmation, the building permit will be released. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-4261. Information is available online at www.hchealth.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'Sara Fegel', is written over a horizontal line.

Sara Fegel, R.S.
Well and Septic Program
Development Coordination Section

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Fairview Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	67639	Account #:	3123
Reference:	Winchester/RW Lot 11	Company:	National Water Servicing
Location:	11054 Hunters View Road Ellicott City, MD 21042	Requested By:	Dave Rycke
Date/ Time Collected:	6/2/2008 1045	Source:	Well Water
Date/Time Rec'd:	6/2/2008 1342	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Softener/Neutralizer/Sediment Filter**
Collected By:	J.Yeager 6176JY	pH:	5.6
		Well #:	HO-95-0008

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME	ANALYST
Nitrate	4.28	mg/L	10	601	6/3/2008 / 1611	AD/BD
Turbidity	2.12	NTU	<10	SM18 2130B	6/3/2008 / 1039	AD/BD
Sand	NS	mg/L	5	Visual/Gravimet	6/3/2008 / 1039	AD/BD
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	6/3/2008 / 0809	AD/BD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223 B.	6/3/2008 / 0809	AD/BD

NOTES

- 1 **Sample collected prior to treatment
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 4 NS = None Seen (NS indicates less than 5 mg/L)
- 5 NTU = Nephelometric Turbidity Units
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 ND:None Detected
- 8 Visual well check: Sealed, vented cap
- 9 pH tested on-site

Reason for Test : Use & Occupancy
 Building Permit # : B07003011

Date Reported: 6/4/2008

MD State Certification # 133

HO Co FAX 41313-2648

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.
 1411 Old Taneytown Rd. Westminster, MD 21157-4074 (410) 876-4554 FAX (410) 876-4208

REPORT OF ANALYSIS

Laboratory ID #:	67640	Account #:	3123
Reference:	Winchester/RW Lot 11	Company:	National Water Servicing
Location:	11054 Hunters View Road Ellicott City, MD 21042	Requested By:	Dave Rycke
Date/ Time Collected:	6/2/2008 1045	Source:	Well Water
Date/Time Rec'd:	6/2/2008 1342	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Softener/Neutralizer/Sediment Filter**
Collected By:	J.Yeager 6176JY	pH:	5.6
		Well #:	HO-95-0008

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Gross Alpha	<1.4	pCi/L	15	900.0	6/5/2008 / 1544 / MJN
Gross Beta	<1.8	pCi/L	50	900.0	6/5/2008 / 1544 / MJN



NOTES

- 1 **Sample collected prior to treatment
 - 2 Gross Alpha Detection Limit: 1.4 pCi/L
 - 3 Gross Beta Detection Limit: 1.8 pCi/L
 - 4 pCi/L = picocuries per liter
 - 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
 - 6 Sub-contracted to Lab # 278
 - 7 ND:None Detected
 - 8 Visual well check: Sealed, vented cap
 - 9 pH tested on-site
- Reason for Test : Use & Occupancy
 Building Permit #: B07003011

Date Reported: 6/6/2008