

C1 2908

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER AS16063

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho-95-0262

OWNER Horton R. D. STREET OR RFD Heather Glen Way TOWN Clarksville MD SUBDIVISION Turnbury Grove SECTION LOT 19

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 22 NO. OF POUNDS 2068 GALLONS OF WATER 132 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 72 ft.

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 22 ft. WHEN PUMPING 26 ft. TYPE OF PUMP USED (for test) S submersible

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows: Sand (0-71), Gray Mica Rock (71-240)

CASING RECORD

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 75

OTHER CASING (if used)

Table for OTHER CASING with columns: diameter inch, depth (feet) from, to

SCREEN RECORD

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

NUMBER OF UNSUCCESSFUL WELLS: 0

DEPTH (nearest ft.)

Table for DEPTH with columns: 1-11, 15-17, 21-23, 24-26, 30-32, 36-38, 39-41, 45-47, 51-53, 56-58, 60-62

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MSD 024 DRILLERS SIGNATURE Heather Glen Way

LIC. NO. 1 MSD 027

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

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

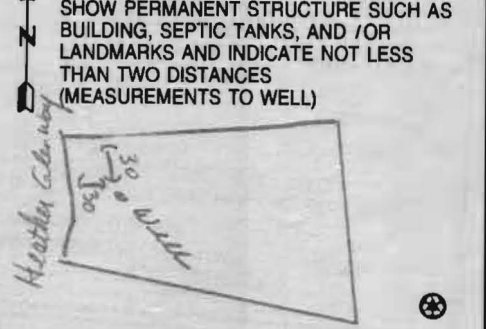
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (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 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) (+) above () below LAND SURFACE 2 (nearest foot)

LOCATION OF WELL ON LOT



B 1 1480

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-0262

523944 please type

fill in this form completely

Date Received (APA)

01 20 06

OWNER INFORMATION

8 MM DD YY 13
15 Last Name Owner First Name 34
1370 Piccard Drive
Rockville Md 20850

B 3

LOCATION OF WELL

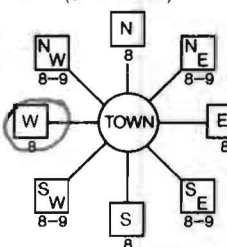
8 COUNTY Howard
23 SUBDIVISION Turnbury Grove
SECTION 44 46 LOT 48 50
52 NEAREST TOWN Clarksville
MILES FROM TOWN (enter 0 if in town) 3 M 1

DRILLER INFORMATION

Driller's Name Joseph L Mayne M SD 024 License No. 81
Firm Name Joseph L Mayne Well Drilling
Address 5512 Ridge Rd Mt. Airy Md 21771
Signature Joseph L Mayne Date 7-6-06

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Heather Glen way
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W 22 EAST E
SOUTH S
34 25 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39
TAX MAP: 34 BLK: 17 PARCEL 77

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, 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 19 A516063
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 2/24/06 CO SIGNATURE EXP. DATE 7/25/06
43 MM DD YY 48 NORTH GRID 497 000 EAST GRID 814 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 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

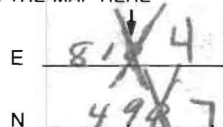
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- [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 DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE



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



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

APPROX. PERMIT NUMBER H02006G003(01)
PERMIT No. HO-95-0262

SPECIAL CONDITIONS

This well must be tested for Radium & VOC's at the field test

**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: R & G WATER SYSTEMS Telephone #: 410-239-0700
Address: 4322 OODS CHOICE DRIVE
MANASSAS, MD 2102

(Must circle one) Licensed Plumber Licensed Well Driller **Licensed Well Pump Installer**
License # and name of individual responsible for the field installation:
Name (Print): RICKY L. POOS, SR. License: PI-0141

*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: COMBES HOWES Telephone #: _____
Subdivision: THE PRESERVES Lot #: 19 Well Tag #: EO-95-0262
Site Address: 6271 HEATHER GLEN WAY
CLARKSVILLE, MD 21029

Submersible Pump Data **Pitless Adapter** **Well Cap and Electric Conduit**
Make: GRUNDYFOS Make: SAVINA Two piece watertight cap:
Model #: _____ Model: 77-800 Screened, vented well cap:
Pump Capacity _____ GPM Depth: 40" (36" min) Cap secured to casing:
Well Yield: _____ GPM NSF approved: YES Conduit min 1 1/2" 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 wrenches or Cable glands are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt _____

Pipins to house **House Connection**
Type: _____ PVC sleeved to undisturbed soil at wall penetration: YES
PSI: _____ (160 psi min) Approximate length of sleeve: 10'
Depth of supply line: _____ (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.

Signature of company representative responsible for installation: Ricky L. Poos, Sr. date: 12/30/09

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

Date Insp. Requested: 1/4/10 Date Insp. Approved: 7/14/2010 MB
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: Bolts loose 1/4/10
Safety rope installed inside of well casing:
Correct well tag attached properly and casing 3" above finished grade:
Water supply line sleeved adequately at house connection:
Adequate gunit observed below pitless adapter:

Well treated w/chlorine and cap closed, bolts tightened (in June).
per Dale Thompson



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

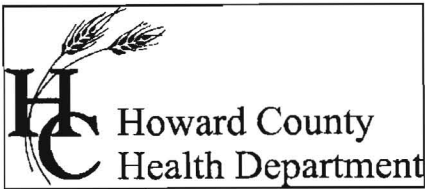
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- 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
Lurnbury Grove*



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(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, 2010

Vijay H. and Varshali V. Patel
3153 Beethoven Way
Silver Spring, MD 20904

HAND-DELIVERED

RE: Preserve at Clarksville, Lot 19
6271 Heather Glen Way
Clarksville, MD 21029
BP #: B09001395
Well Permit # HO-95-0262

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 05/27/2010. Final approval of the well line connection to the dwelling was approved on 07/14/2010.**

The standard 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.

Gross Alpha and Beta samples were collected on 3/22/2006 and the results for Gross Alpha were above the maximum contamination level, while the Gross Beta level was below the maximum contamination level. This temporary deviation is to allow time to have well water tested for Gross Alpha and Gross Beta, short-term and long-term. **The test results must be sent to this office within 30 days.**

TEMPORARY DEVIATION FOR RADIUM

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-95-0262. 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.

The analyses results for Gross Alpha, and Gross Beta, and Radium must all be below the respective MCLs. Then, 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 bacteriological sampling.**

Date of Water Samples: 06/23/2010
Gross Alpha & Gross Beta: 03/22/2006
Date of Radium Test: TO BE TESTED
Date of Well Completion: 03/23/2006

Approving Authority,


Robert Bricker, RS/REHS
Well & Septic Program

copy: Building Inspector's Office
Community Health Services
File



Requester:
 Compass Homes
 6206 Heather Glen Way
 Clarksville, MD 21029

S/O Number: 77992
Report Date: June 24, 2010

PC-19

Property Sampled: 6271 Heather Glen Way, 21029

County: Baltimore
Subdivision: Preserve @ Clarksville **Tax Map #:** 34
Lot #: PC 19 **Parcel #:** 17
Building Permit #: B 09001395

Date/Time Collected: June 23, 2010 at 12:30 pm
Date/Time Received: June 23, 2010 at 3:34 pm

Sample Location: Downstairs Bath
Sampler ID: 9813AM
Samples Iced: Yes
Residual Cl₂ <0.1 mg/L: Yes

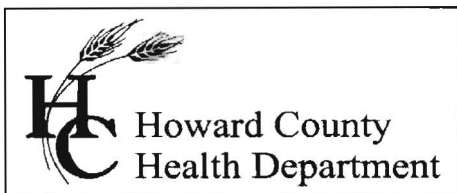
Well Tag Number: HO-95-0262
Well Condition: 2-Piece Cap
 Satisfactory

Water Conditioning/Treatment: None

PARAMETER	RESULT	METHOD	MCL/*SMCL	
Nitrate	1.4 mg/L as N	SM 4500D	10 mg/L as N	Pass
Turbidity	5.6 NTU	EPA 180.1	10 NTU	Pass
pH	6.6 Units	EPA 150.1	*6.5-8.5 Units	***
Sand	Negative		Negative	
Total Coliform	Absent	SM 9223B	Absent	Pass
E.coli	Absent	SM 9223B	Absent	Pass

Kara Waltmyer
 Kara Waltmyer
 Drinking Water Testing Division

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.



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

July 13, 2010

Dale Thompson
Compass Homes, Inc.
13717 Springdale Drive
Clarksville, MD 21029

RE: 6271 Heather Glen Way, Preserve at Clarksville subdivision, Lot 19
Well tag: HO-95-0262

Dear Mr. Thompson,

A sample was collected from a yield test on March 22, 2006 and submitted to the Department of Health and Mental Hygiene Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. In turn, this can provide information regarding naturally occurring radiation (i.e., Radionuclides) that may exist in your area of development within the County. Your organization may have received a letter of notification (October 17, 2007) advising you of the following results at the subject property.

Results from the screening revealed a **Gross Alpha** of 22.8 ± 1.1 picocuries/liter (pCi/L); while the **Gross Beta** level was 17.5 ± 0.8 pCi/L. The **Gross Alpha** result exceeded 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 millirems/year).

As the **Gross Alpha** finding exceeded its **MCL**, additional testing for **Gross Alpha, Gross Beta (short-term and long-term), and Radium** will be necessary prior to issuance of an Interim Certificate of Potability (ICOP), in essence prior to Use and Occupancy. You may choose to test either (A) a raw water sample, or (B) a post-treatment sample. The analysis of each water sample requires approximately one month.

Should you choose to install a treatment system, an agreement for installation and maintenance must be signed by a representative of your organization (or if settlement is imminent, the buyer) and the Director, Bureau of Environmental Health, and then recorded at Howard County Land Records. The agreement is attached with this letter. This agreement must be recorded prior to issuance of the ICOP.

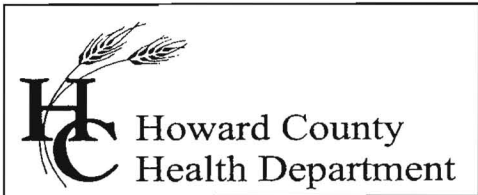
A copy of the treatment agreement is attached. You may call this office at 410-313-1771 if you have any further questions.

Sincerely,

Robert Bricker, R.S.
Environmental Sanitarian Supervisor
Well and Septic Program
410-313-2691

Enclosure: 1

Copy: Well and Septic property file



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

July 7, 2006

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

RE: Water Sample Results
Lot ~~18~~ Turnbury Grove
¹⁹ HO - 95 - 0262

To Whom this May Concern:

During the recent "yield test" of the well serving the future Lot 18 (located on Heather Glen Way), a sample was collected for volatile organic compounds (VOC's) on March 23, 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.

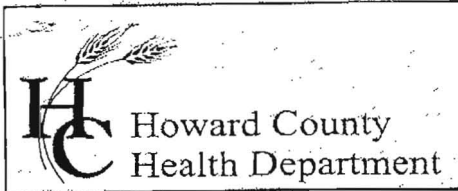
If questions should arise, you may contact Stuart Oster of the Well & Septic Program at (410) 313 - 1771 or me at (410) 313 - 1773.

Sincerely,

Bert Nixon, Assistant Director
Bureau of Environmental Health

Enclosure

cc: Lot 18 Turnbury Grove Property File



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

April 24, 2006

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

RE: Turnbury Grove Subdivision, Lot 18

Well Tag: HO-95-0262

To Whom It May Concern:

A sample was collected from a yield test on March 22, 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 supply.

Results from this screening revealed a **Gross Alpha** of 22.8 ± 1.1 picocuries/liter (pCi/L); while the **Gross Beta** level was 17.5 ± 0.8 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.

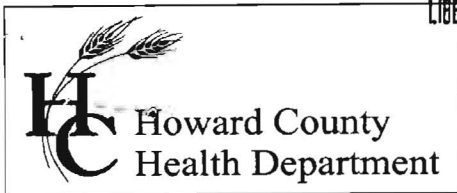
A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions or to discuss additional testing requirements.

Sincerely,

Bert Nixon, Deputy Director
Bureau of Environmental Health

BN/bn

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



LIBR 12563 FOLIO 545

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

000157

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 ~~Varshali V. and Vijay H. Patel~~ ("the Owner").

WHEREAS, the Owner owns a tract of land at street address 6271 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 # 11845/66 and District # 05, Tax Account # 448336, Block # 9999, Preserve at Clarksville subdivision, Lot 19. ("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.

20
20
14
WHEREAS, the Owner has installed a residential drinking well under well permit HO-95-0262 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.

TRF PD SURE \$ 20.00
RECORDING FEE 20.00
TOTAL 40.00
Reg# HD03 Rcpt # 10263
HDR KMC BK # 213
Jul 14, 2010 03:45 PM

LIBER 12563 FOLIO 546

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.

7-14-10

Date

7-14-10


Date

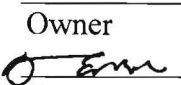
7/14/10


Date

Witness

Witness

 Vijay Patel
Owner

 Varshali V. Patel
Owner

 Beth Nifon
Howard County Health Department

Send Report To:

State of Maryland
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

H0BBTG18950262

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

Plant/Site Name: Turnberry Grove - Lot 18 County: Howard

Sample Source: Heather Glen Way Location: Well # HO-95-0262
(well no., lab sink, sample tap, etc.)

County: 1 3 Plant No.

Collector: Brian Baker Telephone No.: (410) 313-2643

Date Collected: 3/22/2006 Time Collected: 10:30 a.m. _____ p.m.

Nitric Acid Preserved: Yes No Iced: Yes No

Submitters Code: Federal Project: S Field Data: _____ pH _____ Chlorine _____

Remarks: Initial Yield Test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	063176-011-011	22.8 ± 1.1	4/3/06
✓	Gross Beta	4100		175 ± 0.8	
	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			

Analytical Summary Report

Client Name:	Howard County Health Department	Client Sample ID:	HOB BTG18950262
Sample Date/Time:	3/23/2006	Lab Sample ID:	603176-011-011-1/1
Receipt Date/Time:	3/23/2006	Sample Matrix:	WATER
Prepared Date/Time:		Analytical Method:	ALPHA/BETA BY METHOD 900.0

isotope	Result	Uncertainty 1σ	MDA	Q
Gross Alpha	22.8621 pCi/L	± 1.1495 pCi/L	1.2475 pCi/L	
Gross Beta	17.524 pCi/L	± 0.8054 pCi/L	1.8328 pCi/L	

Send Report To:

Howard County
Environmental
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

961637 MAR 27 08

Do not write above this line

LABORATORY ANALYSIS REQUEST

HOBBTG18950262 Well
Bottle No: 1 Plant/Site Name: Turnberry Grove-Lot 19 County: Howard

Sample Source: Heather Glen Way Clarksville Location: Well # HO-95-0262
Street Town or City (well no., lab sink, sample tap, etc.)

Sampler ID: 7485EB PWSID: Plant ID:

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

Date Collected: 3/23/2006 Time Collected: 11:00 a.m. p.m.

Field Preserved: Yes No Preservative Used: 1:1 HCl + Ascorbic acid Na₂SO₄ 6 mg NH₄Cl

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

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.: HOBBTG18950262 Field
Trip Blank Bottle No.: HOBBTG18950262 Trip

Initial Yield Test
Remarks: Please Run Full Drinking Water Scan Including M+BE

Section Chief: Delores Mullen-Jones Date Reported: 4/10/06

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

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: 961437 HOB BTG18950262WELL Method: EPA 524.2
 Date Analyzed: 04/06/06

<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>	<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>
<u>TRihalOMETHANES</u>				<u>UNREGULATED</u>			
Bromodichloromethane	0.5	na	ND	Dichlorodifluoromethane	0.5	na	ND
Bromoform	0.5	na	ND	Chloromethane	0.5	na	ND
Chloroform	0.5	na	ND	Bromomethane	0.5	na	ND
Dibromochloromethane	0.5	na	ND	Chloroethane	0.5	na	ND
TOTAL THMs	-	80	-	Trichlorofluoromethane	0.5	na	ND
<u>REGULATED</u>				1,1-Dichloroethane	0.5	na	ND
Benzene	0.5	5	ND	1,3-Dichlorobenzene	0.5	na	ND
Carbon Tetrachloride	0.5	5	ND	Dibromomethane	0.5	na	ND
Chlorobenzene	0.5	100	ND	1,1-Dichloropropene	0.5	na	ND
1,4-Dichlorobenzene	0.5	75	ND	trans-1,3-Dichloropropene	0.5	na	ND
1,1-Dichloroethene	0.5	7	ND	1,1,2,2-Tetrachloroethane	0.5	na	ND
1,2-Dichloroethane	0.5	5	ND	1,3-Dichloropropane	0.5	na	ND
1,2-Dichlorobenzene	0.5	600	ND	2,2-Dichloropropane	0.5	na	ND
1,2-Dichloropropane	0.5	5	ND	cis-1,3-Dichloropropene	0.5	na	ND
cis-1,2-Dichloroethene	0.5	70	ND	2-Chlorotoluene	0.5	na	ND
trans-1,2-Dichloroethene	0.5	100	ND	4-Chlorotoluene	0.5	na	ND
Ethylbenzene	0.5	700	ND	Bromobenzene	0.5	na	ND
Styrene	0.5	100	ND	1,3,5-Trimethylbenzene	0.5	na	ND
Tetrachloroethene	0.5	5	ND	1,2,4-Trimethylbenzene	0.5	na	ND
Trichloroethene	0.5	5	ND	1,2,3-Trichlorobenzene	0.5	na	ND
1,1,1-Trichloroethane	0.5	200	ND	n-Propylbenzene	0.5	na	ND
Toluene	0.5	1000	ND	n-Butylbenzene	0.5	na	ND
Vinyl Chloride	0.5	2	ND	Naphthalene	0.5	na	ND
o-Xylene	0.5	na	ND	Hexachlorobutadiene	0.5	na	ND
m+p-Xylene	1.0	na	ND	Isopropylbenzene	0.5	na	ND
Total Xylenes	1.5	10000	ND	1,2,3-Trichloropropane	0.5	na	ND
Methylene Chloride	0.5	5	ND	1,2-Dibromo-3-Chloropropane	0.5	na	ND
1,1,2-Trichloroethane	0.5	5	ND	p-Isopropyltoluene	0.5	na	ND
1,2,4-Trichlorobenzene	0.5	70	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 M. DeBoy* Date Approved: 4/10/06

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: 961437 FB
 Date Analyzed: 04/06/06

Method: EPA 524.2

<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>	<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>
<u>TRIALOMETHANES</u>				<u>UNREGULATED</u>			
Bromodichloromethane	0.5	na	ND	Dichlorodifluoromethane	0.5	na	ND
Bromoform	0.5	na	ND	Chloromethane	0.5	na	ND
Chloroform	0.5	na	ND	Bromomethane	0.5	na	ND
Dibromochloromethane	0.5	na	ND	Chloroethane	0.5	na	ND
TOTAL THMs	-	80	-	Trichlorofluoromethane	0.5	na	ND
<u>REGULATED</u>				1,1-Dichloroethane	0.5	na	ND
Benzene	0.5	5	ND	1,3-Dichlorobenzene	0.5	na	ND
Carbon Tetrachloride	0.5	5	ND	Dibromomethane	0.5	na	ND
Chlorobenzene	0.5	100	ND	1,1-Dichloropropene	0.5	na	ND
1,4-Dichlorobenzene	0.5	75	ND	trans-1,3-Dichloropropene	0.5	na	ND
1,1-Dichloroethene	0.5	7	ND	1,1,2,2-Tetrachloroethane	0.5	na	ND
1,2-Dichloroethane	0.5	5	ND	1,3-Dichloropropane	0.5	na	ND
1,2-Dichlorobenzene	0.5	600	ND	2,2-Dichloropropane	0.5	na	ND
1,2-Dichloropropane	0.5	5	ND	cis-1,3-Dichloropropene	0.5	na	ND
cis-1,2-Dichloroethene	0.5	70	ND	2-Chlorotoluene	0.5	na	ND
trans-1,2-Dichloroethene	0.5	100	ND	4-Chlorotoluene	0.5	na	ND
Ethylbenzene	0.5	700	ND	Bromobenzene	0.5	na	ND
Styrene	0.5	100	ND	1,3,5-Trimethylbenzene	0.5	na	ND
Tetrachloroethene	0.5	5	ND	1,2,4-Trimethylbenzene	0.5	na	ND
Trichloroethene	0.5	5	ND	1,2,3-Trichlorobenzene	0.5	na	ND
1,1,1-Trichloroethane	0.5	200	ND	n-Propylbenzene	0.5	na	ND
Toluene	0.5	1000	ND	n-Butylbenzene	0.5	na	ND
Vinyl Chloride	0.5	2	ND	Naphthalene	0.5	na	ND
o-Xylene	0.5	na	ND	Hexachlorobutadiene	0.5	na	ND
m+p-Xylene	1.0	na	ND	Isopropylbenzene	0.5	na	ND
Total Xylenes	1.5	10000	ND	1,2,3-Trichloropropane	0.5	na	ND
Methylene Chloride	0.5	5	ND	1,2-Dibromo-3-Chloropropane	0.5	na	ND
1,1,2-Trichloroethane	0.5	5	ND	p-Isopropyltoluene	0.5	na	ND
1,2,4-Trichlorobenzene	0.5	70	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

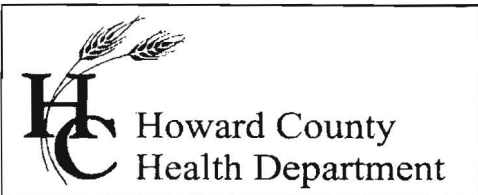
na = not applicable

e = estimated value

Section Chief: 

Date Approved: 4/10/06

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



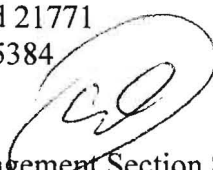
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

February 8, 2006

MEMORANDUM

TO: Joseph L. Mayne Well Drilling
5512 Ridge Road
Mt. Airy, Maryland 21771
Faxed to 301-829-5384

FROM: Stuart Oster, R.S. 
Groundwater Management Section Supervisor
Well and Septic Program

RE: File Number: P-05-013
Title: Turnbery Grove

The Health Department requires that all the wells in this subdivision be tested for radium and V.O.C.'s (Volatile Organic Contaminants). The optimum time to sample would be when the yield test is being completed. When contacting this office about the yield test, please mention that these water test need to be collected. Also, attached is a letter dated November 21, 2005 from Bert Nixon further explaining the radium testing.

Cc: D. R. Horton, Inc.
File