

C1 2912 SEQUENCE NO. (MDE USE ONLY)

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

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

COUNTY NUMBER AS16063

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

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

DATE WELL COMPLETED MM DD YY 4 4 06 Depth of Well 220' (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho - 95 - 0258

OWNER Houston R. D STREET OR RFD Heather Glen Way TOWN Clarksville md SUBDIVISION Turnbury Grove SECTION LOT #15

WELL LOG Not required for driven wells

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Entries: Sand (0-31), Caray Mica Rock (31-220)

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL (Cement CM, Bentonite Clay BC) NO. OF BAGS 15 NO. OF POUNDS 450 GALLONS OF WATER 90 DEPTH OF GROUT SEAL 0 to 32 ft.

CASING RECORD MAIN CASING TYPE ST Nominal diameter top (main) casing 6 inch Total depth of main casing 35 (nearest foot)

OTHER CASING (if used) diameter inch depth (feet) from to

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

DEPTH (nearest ft.) 33 220'

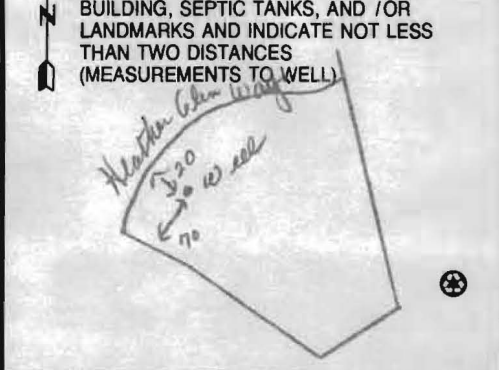
PUMPING TEST

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 12 ft. WHEN PUMPING 48 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE - below 2' (nearest foot)

LOCATION OF WELL ON LOT



NUMBER OF UNSUCCESSFUL WELLS: 0 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 MSD 024 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

DEPTH (nearest ft.) 33 220' A 8 9 11 15 17 21 C 2 23 24 26 30 32 36 R 38 39 41 45 47 51 E SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 1477

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 523944

STATE PERMIT NUMBER HO-95-0258 fill in this form completely

Date Received (APA) 01 20 06 OWNER INFORMATION Horton R. D. 1370 Piccard Drive Rockville Md. 20850

LOCATION OF WELL HOWARD COUNTY Turnbury Drive SECTION 44 46 LOT 15 NEAREST TOWN Clarksville MILES FROM TOWN 1/2

DRILLER INFORMATION Joseph R. Mayne M SD 024 Joseph R. Mayne Well Drilling 5512 Ridge Rd Mt. Airy Md. 21771 Signature Date 1-6-06

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 FT TAX MAP: 34 BLK: 17 PARCEL 77

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY (13) A516063 STATE SIGNATURE DATE ISSUED 2/24/06 CO SIGNATURE EXP. DATE 2/25/07 NORTH GRID 497 000 EAST GRID 814 000

USE FOR WATER (CIRCLE APPROPRIATE BOX) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well WRITE THE BOX NUMBER FROM THE MAP HERE

METHOD OF DRILLING (circle one) BORED (or Augered) AIR-ROTary JETTED AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION Sketch showing location of well in relation to nearby towns and roads: Sun Oak Rd, Heather Glen Way, Gamewood Ct.

Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER HD2006G003(01) PERMIT No. HO-95-0258

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

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogles Well Drilling LLC Telephone #: 410-795-5670
Address: PO Box 207
Woodbine, MD 21797

(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 C FOGLE License# MSD226

*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: Williamsburg Homes LLC Telephone #: 410-977-3345
Subdivision: PRINCENES @ CLARKSVILLE Lot #: 15 Well Tag #: HO-95-0258
Site Address: 6287 Heather Glen Way
Clarksville, MD 21209

Submersible Pump Data

Make: Grundfos
Model #: 1550E07-180
Pump Capacity 7 GPM
Well Yield: 12 GPM

Pitless Adapter

Make: Campbell
Model #: N/A
Depth: 36" (36" min)
NSF/WSC approved: YES

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

Depth of well encountered at time of pump installation: 220 (feet) Conduit secured to well cap: YES

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, 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 N/A

Piping to house

Type: 1" poly pipe
PSI: 160 (160 psi min)
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: YES
Length of sleeve (5" minimum from foundation): 6'
Sleeve 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: David Fogle date: 8-20-14

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

Date Insp. Requested: _____ Date Insp. Approved: _____ Inspector: _____
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 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 grout observed below pitless adapter _____

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: _____ Lot #: _____ Well Tag # : HO - _____
 Site Address: 6287 Heather Glen Way

Submersible Pump Data

Make: _____
 Model #: _____
 Pump Capacity _____ GPM
 Well Yield: _____ GPM

Pitless Adapter

Make: _____
 Model#: _____
 Depth: _____ (36" min)
 NSF 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: _____ (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: _____
 PSI: _____ (160 psi min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: _____
 Approximate length of sleeve (5 foot minimum): _____

Depth of supply line: _____ (36" min)

Sleeve caulked and sealed properly: _____

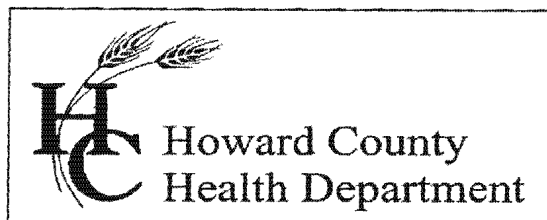
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation _____ date _____

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

Date Insp. Requested: _____ Date Insp. Approved: 9/16/2014 **BR**

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



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1771 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – May 7, 2014

November 7, 2014

Homeowner
6287 Heather Glen Way
Clarksville, MD 21029

**RE: Preserve at Clarksville, Lot#15
6287 Heather Glen Way
Building Permit: B14000917
Well Permit: HO-95-0258**

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 9/2/2014. Final approval of the well line connection to the dwelling was granted on 9/16/2014. The well construction was completed on 4/4/2006. Water samples were collected on 4/4/2006 and 10/29/2014.

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 4/4/2006. Results showed a Gross Alpha level of 3.5 ± 0.4 pCi/L and Gross Beta level of 4.9 ± 0.5 pCi/L. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

Additionally, a sample was collected for volatile organic compounds (VOC's) on 4/4/2006. This testing was performed to establish a baseline evaluation of the well water supply due to known concerns previously documented (during the 1990s 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.

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-95-0258. 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 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,

Hank Oswald

Hank Oswald, L.E.H.S.
Environmental Sanitarian
Well & Septic Program

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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 97368 Account #: 4470
Reference: Preserve at Clarksville Lot 15 Company: Williamsburg Homes LLC
Location: 6287 Heather Glen Way Requested By: Bob Corbett
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 10/29/2014 1415 Site: Pressure Tank
Date/Time Rec'd: 10/29/2014 1530 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: B. Dutterer 4717BD Well #: HO-95-0258

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
✓ Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	10/30/2014 / 1000 / CCH
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	10/30/2014 / 1000 / CCH
✓ Nitrate	7.55	mg/L	10	601	10/30/2014 / 1015 / CCH
✓ Turbidity	1.58	NTU	<10	SM18 2130B	10/30/2014 / 0820 / JKW
✓ Sand	NS	mg/L	5	Visual/Gravimetric	10/30/2014 / 0820 / JKW

*Water results good
11/7/14. H.O.*

NOTES

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

Reason for Test : Use & Occupancy

Building Permit # : B14000917

Date Reported: 10/30/2014

May 15, 2006

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

RE: Turnberry Grove, Lot #14
Well Tag: HO-95-0258

To Whom It May Concern,

A sample was collected from a yield test on April 4, 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 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.

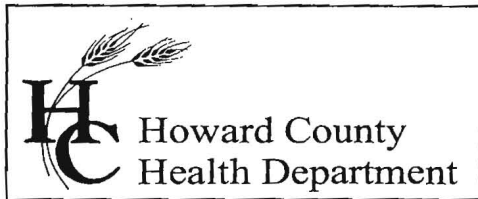
Results from this screening revealed a **Gross Alpha** of 3.5 ± 0.4 picocuries per liter (pCi/L); while the **Gross Beta** level was 4.9 ± 0.5 pCi/L. The **Gross Alpha** result was below the **maximum contamination level (MCL)** of **15 pCi/L**, while the **Gross Beta** was below the **MCL** of **50 pCi/L**. At the time of testing and with respect to these parameters, your well water supply is safe for all uses.

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

Sincerely,

Bert Nixon, Deputy Director
Bureau of Environmental Health

cc: Eric Dougherty, MDE, Water Mgmt., Groundwater



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 6, 2006

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

RE: Water Sample Results
Lot ~~14~~ Turnbury Grove
HO - 95 - 0258
15

To Whom it May Concern:

During the recent "yield test" of the well serving the future Lot 14 (located on Heather Glen Way), a sample was collected for volatile organic compounds (VOC's) on April 4, 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 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 14 Turnbury Grove Property File

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: 961537 HOGCTG144SA

Method:

EPA 524.2

Date Analyzed: 04/28/06

<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>	<u>Contaminants</u>	<u>DL*</u>	<u>MCL*</u>	<u>Result*</u>
TRIALOMETHANES				UNREGULATED			
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
REGULATED				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:

Robert Miller, Jr.

Date Approved:

5/1/06

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: 961537 HOGCTG144FB Method: EPA 524.2
 Date Analyzed: 04/28/06

Contaminants	DL*	MCL*	Result*	Contaminants	DL*	MCL*	Result*
TRIHALOMETHANES				UNREGULATED			
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
REGULATED				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-Dichloroethane	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 Miller-Jud Date Approved: 5/1/06

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

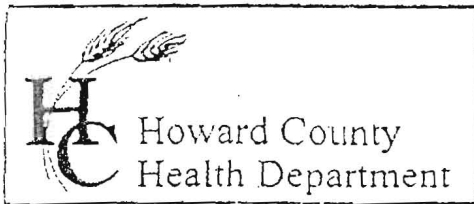
Sample Name: 961537 HOGCTG144TB
 Date Analyzed: 04/28/06

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>
TRihalOMETHANES				UNREGULATED			
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
REGULATED				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
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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
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				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: *Selena Miller* Date Approved: 5/1/06



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

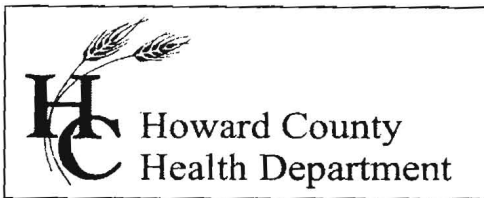
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- 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
Surnbury Grove



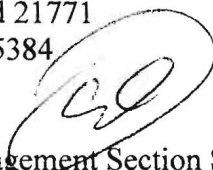
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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