

C1 15572

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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER

ST/CO USE ONLY  
DATE Received  
MM DD YY  
00 19 13

DATE WELL COMPLETED

Depth of Well

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

OWNER KORSUNO, JOHN  
WELL SITE ADDRESS BROWN BRIDGE RD TOWN FULTON  
SUBDIVISION LANDOWN PROPERTY SECTION \_\_\_\_\_ LOT 2

**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		check if water bearing
	FROM	TO	
<u>Deepened From mud</u>	<u>500</u>	<u>600</u>	<input checked="" type="checkbox"/>

**GROUTING RECORD** yes  no

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS \_\_\_\_\_ NO. OF POUNDS \_\_\_\_\_

GALLONS OF WATER \_\_\_\_\_

DEPTH OF GROUT SEAL (to nearest foot)  
from \_\_\_\_\_ ft. to \_\_\_\_\_ 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)
_____	_____

**OTHER CASING (if used)**

diameter inch	depth (feet) from	to
_____	_____	_____

**SCREEN RECORD**

screen type or open hole

(insert appropriate code below)

**ST** STEEL **BR** BRASS **HO** OPEN HOLE  
**PL** PLASTIC **OT** OTHER

**DEPTH (nearest ft.)**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)

from \_\_\_\_\_ to \_\_\_\_\_

**C 3**

**PUMPING TEST**

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 3.7

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 18 ft.

WHEN PUMPING 218 ft.

TYPE OF PUMP USED (for test)

**A** air **P** piston **T** turbine  
**C** centrifugal **R** rotary **O** other (describe below)  
**J** jet **S** submersible

**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 \_\_\_\_\_

CAPACITY: GALLONS PER MINUTE (to nearest gallon) \_\_\_\_\_

PUMP HORSE POWER \_\_\_\_\_

PUMP COLUMN LENGTH (nearest ft.) \_\_\_\_\_

CASING HEIGHT (circle appropriate box and enter casing height)

**+** above } LAND SURFACE  
**-** below } N/A (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED  YES  NO

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 MAD 040  
George F. Costeney  
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
LIC. NO. 1 ISD 038  
Bruce Thompson

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

LATITUDE 39.169.856  
LONGITUDE 76.941.994  
(DEFAULT COORD. WGS 84)

NOTES:  
Amended completion Report

C 1 16609

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

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER: Korstand John; WELL SITE ADDRESS: 7319 Brown Ridge Rd; TOWN: FULTON; SUBDIVISION: VAN NOY PRO.; SECTION: ; LOT: 2

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, FEET (FROM, TO), check if water bearing. Includes entries for Brown mica, Formation Collapsing, Dark brown mica, Gray slate, white, Gray slate.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N); TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY); NO. OF BAGS; NO. OF POUNDS; GALLONS OF WATER; DEPTH OF GROUT SEAL

CASING RECORD

Diagram of casing types (ST, CO, PL, OT); MAIN CASING TYPE (ST); Nominal diameter top (main) casing; Total depth of main casing

OTHER CASING (if used)

Diagram of other casing types; diameter inch; depth (feet)

SCREEN RECORD

Diagram of screen types (ST, BR, HO, PL, OT); screen type or open hole; diameter; depth

DEPTH (nearest ft.)

Diagram of depth measurement; SLOT SIZE 1, 2, 3; DIAMETER OF SCREEN

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 03; PUMPING RATE (gal. per min.) 2; METHOD USED TO MEASURE PUMPING RATE 199L; WATER LEVEL (distance from land surface) BEFORE PUMPING 561 ft; WHEN PUMPING 480 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) 49 above; LAND SURFACE 02 (nearest) foot below

LATITUDE 3; LONGITUDE 7; (DEFAULT COORD. WGS 84); NOTES:

NUMBER OF UNSUCCESSFUL WELLS:

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 M SD 009; 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)

B 1 09369

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER

HD -95 -2425

fill in this form completely

Date Received (APA)

10 9 12

OWNER INFORMATION

8 MM DD YY 13 15 Last Name Owner First Name 34 36 Street or RFD 55 57 Town 70 State 72 Zip 76

B 3

LOCATION OF WELL

8 COUNTY 21 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 52 NEAREST TOWN 71

DRILLER INFORMATION

Driller's Name 76 License No. 81 Firm Name Address Signature Date

B 4

SOURCES OF DRILLING WATER

- 1. 2. 3.

11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 8 500 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- 22 [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 [O] OPEN LOOP GEOTHERMAL [C] CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A535193 13 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 10/23/2012 CO SIGNATURE 10/23/13 43 MM DD YY 48 EXP. DATE

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- 30 BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVerse-ROTary DRive-POINT other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 39 [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

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

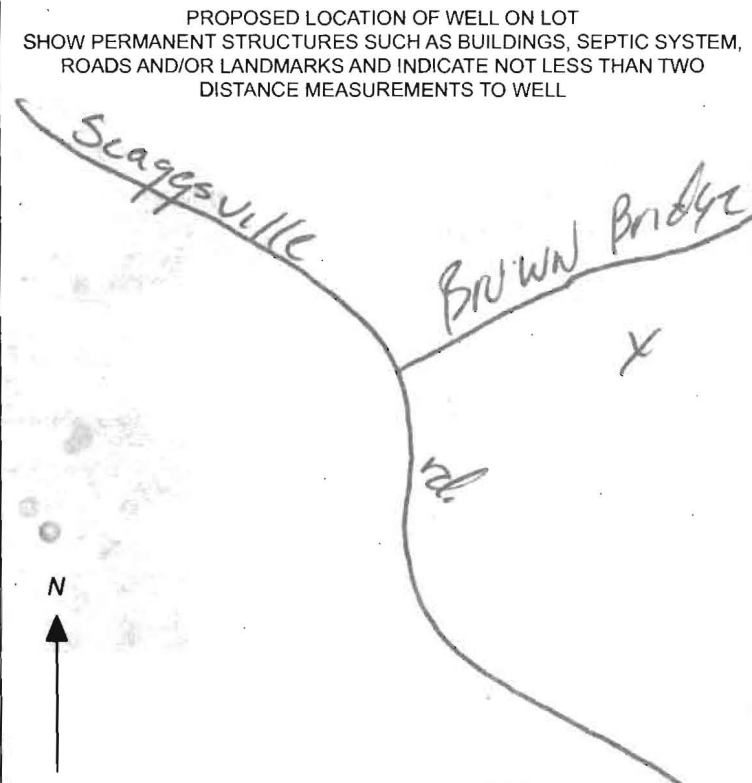
APPROP. PERMIT NUMBER G

PERMIT No. HD -95 -2425

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Radium sample required @ yield test



Tested by Jerry

Page \_\_\_\_\_ of \_\_\_\_\_  
 Date \_\_\_\_\_

2-13-13

Review \_\_\_\_\_

FIELD DATA SHEET  
 HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. HO-95-2425 Election District \_\_\_\_\_  
 Location of Property (road) Brown Bridge Road  
 Subdivision VANNOY Property Lot 2 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller EASTARDAY Owner JOHN RORSZUND

Depth of Well 660'  
 Distance of Measuring Point (M.P.) above ground 2'  
 Static Water Level (S.W.L.) below M.P. 18'

I. High Rate Pumping -- reservoir drawdown  
 Time pump started 9:00 Pumping rate 15 GPM  
 Total time 30 min to reach pumping water level 214 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes.

TIME	WATER LEVEL Below M.P.	PUMPING RATE Time to fill gal. bucket	Pump Set FLOW METER READING (if used)	CALCULATED FLOW (gallons per min.)
9:30	214	15 Sec	480	4
9:45	215	15 Sec	480	4
10:00	215	15 Sec	480	4
10:15	215	15 Sec	480	4
10:30	216	16.2 Sec	480	3.7
10:45	216	16.2 Sec	480	3.7
11:00	217	16.2 Sec	480	3.7
11:15	217	16.2 Sec	480	3.7
11:30	217	16.2 Sec	480	3.7
11:45	217	16.2 Sec	480	3.7
12:00	218	16.2 Sec	480	3.7
12:15	218	16.2 Sec	480	3.7
12:30	218	16.2 Sec	480	3.7
12:45	218	16.2 Sec	480	3.7
1:00	218	16.2 Sec	480	3.7
1:15	218	16.2 Sec	480	3.7
1:30	218	16.2 Sec	480	3.7
1:45	218	16.2 Sec	480	3.7
2:00	218	16.2 Sec	480	3.7
2:15	218	16.2 Sec	480	3.7
2:30	218	16.2 Sec	480	3.7
2:45	218	16.2 Sec	480	3.7
3:00	218	16.2 Sec	480	3.7
3:15	218	16.2 Sec	480	3.7
3:30	218	16.2 Sec	480	3.7

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: Hughes Plumbing Service Telephone #: 443-340-7994  
 Address: 1100 Western Chapel Rd  
New Windsor MD 21776

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
 License # and name of individual responsible for the field installation:  
 Name (Print): Dan T Hughes License# 23837

\*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: Gary + Stacy Berman Telephone #: 410-442-8068  
 Subdivision: \_\_\_\_\_ Lot #: 2 Well Tag #: HO-95-2425 ✓  
 Site Address: 2315 Brown Bridge Rd  
Fulton MD 20759

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Lancaster</u>	Make: <u>Cambell</u>	Two piece watertight cap: <u>Y</u>
Model #: _____	Model #: _____	Screened, vented well cap: <u>Y</u>
Pump Capacity <u>7</u> GPM	Depth: <u>36"</u> (36" min)	Cap secured to casing: <u>Y</u>
Well Yield: _____ GPM	NSF/WSC approved: <u>Y</u>	Conduit min 18" B.G.: <u>Y</u>
Depth of well encountered at time of pump installation: _____ (feet)		Conduit secured to well cap: <u>Y</u>
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
<u>Torque arrestors</u> , Cable guards, or other acceptable method used- Must circle one		
Safety rope, if used, attached to brass rope adapter or other acceptable method <u>inside of well casing</u> <u>NA</u>		

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>Poly</u>	PVC sleeve to undisturbed soil at wall penetration: <u>Y</u>
PSI: <u>160</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>6'</u>
Depth of supply line: <u>36"</u> (36" min)	Sleeve sealed properly: <u>Y</u>

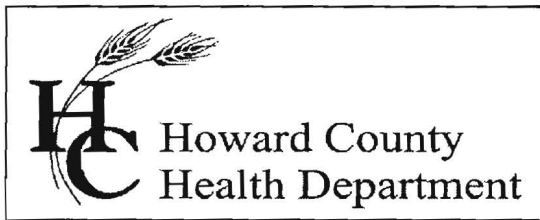
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Dan T Hughes date: 1-14-15

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

Date Insp. Requested: 1/20/15 Date Insp. Approved: 1/20/15 Inspector: RL

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	✓



**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](http://www.hchealth.org)  
Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)  
Twitter: HowardCoHealthDep

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

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**INTERIM CERTIFICATE OF POTABILITY**  
**Expiration Date – JULY 30, 2015**

January 30, 2015

Homeowner  
7315 Brown's Bridge Road  
Fulton, MD 20759

**RE: Van Noy Property, Lot 2**  
**7315 Brown's Bridge Road**  
**Building Permit: B14001588**  
**Well Permit: HO-95-2425**

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 **1/29/2015**. Final approval of the well line connection to the dwelling was granted on **1/20/2015**. The well construction was completed on **2/13/2013**. Water samples were collected on **1/23/2015** and **1/27/2015**.

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 obtained on **1/23/2015** had **Turbidity** level of **17.7 NTU** which exceeds the standard of **10 NTU**. After installation of a sediment filter (**WGDG Series**), the water was tested again on **1/27/2015**. The results before the in-line filter were a **Turbidity** level of **23 NTU** and **Iron** at **1.58 mg/L** (exceeding the secondary maximum contaminant level (**MCL**) for **Iron** of **0.3mg/L**). The water sample after the filter had **Turbidity** level of **2.09 NTU** and the **Iron** level was **0.13 mg/L**. As the filter effectively lowers Iron and Turbidity, it is believed that much of the Turbidity is attributable to Iron and therefore approval of the water source is permissible.

Gross Alpha and Beta samples were also collected on **2/13/2013**. Results showed a Gross Alpha level of **10.7 ± 2.2 pCi/L** and **Gross Beta** level of **10.4 ± 2.2 pCi/L**. The Gross Alpha was below the 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.

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-95-2425. 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,



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

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

Send Report To:

Bert Nixon

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**  
201 W. Preston Street, Baltimore, Maryland 21201  
John M. DeBoy, Dr. P. H., Director

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: HOKW2425 No. B: — Field Blank Bottle No. 1: FBKW21313 No B: —

Plant/Site Name: Van Noy Prop - lot (2) County: Howard

Sample Source: Brown's Bridge Rd Location: HO-95-2425  
(well no, lab sink, sample tap, etc.)

County:  1  3 Plant No.

CHECK (one per box)

Drinking Water   
Landfill   
Stream   
Other

Community   
Non-community   
Private   
Other

Source (raw water)   
Distribution (treated)   
MCL

Emergency   
Routine   
Recheck   
Special

Collector: K. Wolf

Telephone No.: 410 313 2645

Date Collected: 2/13/13

Time Collected: 11:00 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:

Federal Project:

Field Data: \_\_\_\_\_  
pH \_\_\_\_\_ Chlorine \_\_\_\_\_

Remarks: Sample pH preserved to < 2.0

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000				
✓	Gross Beta	4100				
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: \_\_\_/\_\_\_/\_\_\_

Supervisor: \_\_\_\_\_

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373

Send Report To:

Bert Nixon

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**  
201 W. Preston Street, Baltimore, Maryland 21201  
John M. DeBoy, Dr. P. H., Director

E001742 #192

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: HOKW2425 No. B: — Field Blank Bottle No. 1: FBKW21313 No B: —

Plant/Site Name: Van Noy Prop - Lot (2) County: Howard

Sample Source: Brown's Bridge Rd Location: HQ-95-2425  
(well no, lab sink, sample tap, etc.)

County:  1  3 Plant No.

CHECK (one per box)

Drinking Water	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>
Stream	<input type="checkbox"/>
Other	<input type="checkbox"/>

Community	<input type="checkbox"/>
Non-community	<input type="checkbox"/>
Private	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Source (raw water)	<input checked="" type="checkbox"/>
Distribution (treated)	<input type="checkbox"/>
MCL	<input type="checkbox"/>

Emergency	<input type="checkbox"/>
Routine	<input checked="" type="checkbox"/>
Recheck	<input type="checkbox"/>
Special	<input type="checkbox"/>

Collector: K. Wolf

Telephone No.: 410 313 2645

Date Collected: 2/13/13

Time Collected: 11:00 a.m. — p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:

Federal Project:

Field Data: — pH — Chlorine

Remarks: Sample pH preserved to < 2.0

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	1742	10.7 ± 2.2	02/21/13	02/25/13
✓	Gross Beta	4100	1742	10.4 ± 2.2	L	L
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				
	Gross Alpha Conf.		1742	11.8 ± 2.4	02/26/13	02/28/13
	Gross Beta Conf.		1742	11.9 ± 2.3	L	L

Date Received: 02/19/13

Supervisor: [Signature]

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373

Send Report To:

Bert Nixon

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**  
201 W. Preston Street, Baltimore, Maryland 21201  
John M. DeBoy, Dr. P. H., Director

E001740 2192

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A:      No. B:      Field Blank Bottle No. 1: FB KW 21313 No B:     

Plant/Site Name: HCHD County: Howard

Sample Source: Distilled H<sub>2</sub>O Location: Lab  
(well no, lab sink, sample tap, etc.)

County:  1  B Plant No.

CHECK (one per box)

Drinking Water   
Landfill   
Stream   
Other

Community   
Non-community   
Private   
Other

Source (raw water)   
Distribution (treated)   
MCL

Emergency   
Routine   
Recheck   
Special

Collector: K. Wolf

Telephone No.: 410 313 2645

Date Collected: 2/13/13

Time Collected: 10:00 a.m.      p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:  Federal Project:

Field Data:      pH      Chlorine

Remarks: Field Blank for Gross  $\alpha$  &  $\beta$

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	1740	< 2.0	02/21/13	02/25/13
✓	Gross Beta	4100	1740	4.1 ± 1.9	I	I
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
✓	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: 02/19/13

Supervisor: [Signature]

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373



Bureau of Environmental Health  
 7178 Columbia Gateway Drive, Columbia, MD 21046-2347  
 (410) 313-2640 Fax (410) 313-2645  
 TDD (410) 313-2323 Toll Free 1-866-313-6380  
 website: www.hchealth.org

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

Lot 2

TO ALL INTERESTED PARTIES

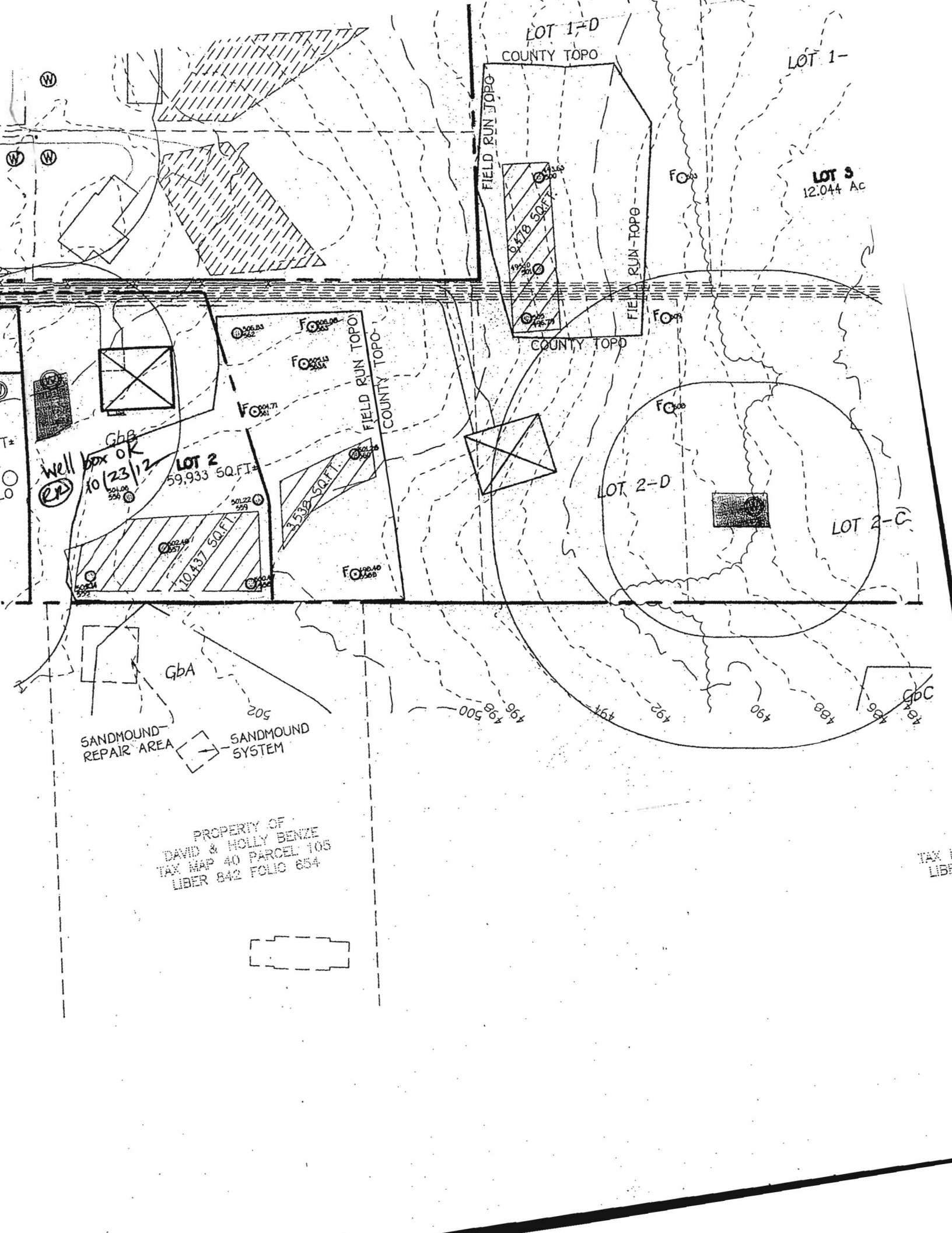
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:  
Van Day Prop 1-3 Browns Bridge RD  
 Subdivision/Property Name Lot# Road Name

- The well site has been staked by Fisher Collins + Carter  
 (professional land surveyor or company employing professional land surveyors)  
 on 9-12-12 (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.

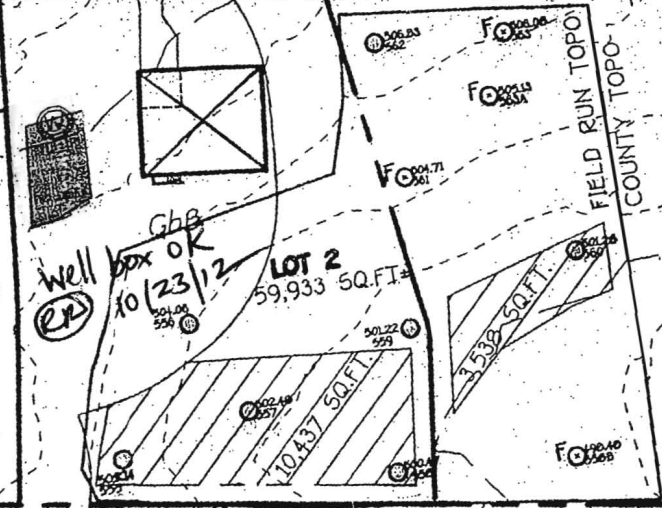
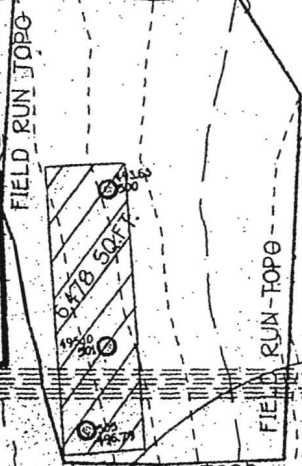
Revised 3/11/05



LOT 1-D  
COUNTY TOPO

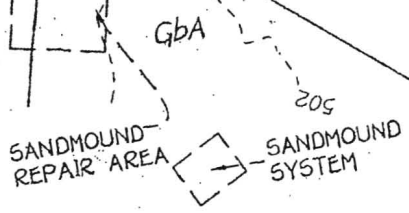
LOT 1-

LOT 3  
12.044 Ac



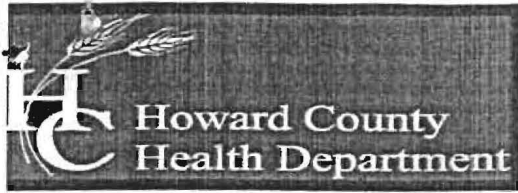
LOT 2-D

LOT 2-C



PROPERTY OF  
DAVID & HOLLY BENZE  
TAX MAP 40 PARCEL 105  
LIBER 842 FOLIO 654

TAX  
LIB



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

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

April 12, 2013

Mr. John Korslund  
7319 Brown Bridge Road  
Fulton, Maryland 20759

RE: Van Noy Property Lot 2  
Brown Bridge Road  
Well Tag: HO - 95 - 2425

Dear Mr. Korslund:

A sample was collected for the new well during a yield test on February 13, 2013 and submitted to the Department of Health & 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. 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  $10.7 \pm 2.2$  picocuries/liter (pCi/L), while the **Gross Beta** level was  $10.4 \pm 2.2$  pCi/L. With the Margin of Error, the **Gross Alpha** result was just below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply **appears to** meet EPA regulatory standards. Additional testing **for these parameters** will not be required at this time to secure future Use and Occupancy approval. Given the possibility of an elevated finding for **Gross Alpha**, follow-up testing is recommended after occupancy to verify current test results.

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

Sincerely,

A handwritten signature in cursive script that reads 'Bert Nixon'.

Bert Nixon, Director  
Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.  
Well & Septic property 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 #: 98733 Account #: 4226  
Reference: Berman Company: Viking Development Corporation  
Location: 7315 Brown's Bridge Road Requested By: Cary Cumberland  
Fulton, MD 20759 Source: Well Water  
Date/ Time Collected: 1/27/2015 1055 Site: Pressure Tank  
Date/Time Rec'd: 1/27/2015 1720 Treatment: Prior to Spin Down Separator  
Chlorine ppm: Free: ND Total: ND pH: 5.9  
Collected By: C. Holland 0547CH Well #: HO-95-2425

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Turbidity	23.0	NTU	<10	SM18 2130B	1/27/2015 / 2000 / CCH
Iron	1.58	mg/L	0.3*	FR, 45 (126)	1/27/2015 / 1910 / CCH

*Turbidity & Iron FAIL before filter  
veB  
1/29/15*

### NOTES

- \*SMCL = Secondary Maximum Contaminant Level
- mg/L = milligrams per liter (also, parts per million)
- NTU = Nephelometric Turbidity Units
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- ND:None Detected
- pH & Chlorine level tested on site
- Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
Building Permit # : B14001588

Date Reported: 1/28/2015

# 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 #: 98688 Account #: 4226  
Reference: Berman Company: Viking Development Corporation  
Location: 7315 Brown's Bridge Road Requested By: Cary Cumberland  
Fulton, MD 20759 Source: Well Water  
Date/ Time Collected: 1/23/2015 1105 Site: Pressure Tank  
Date/Time Rec'd: 1/23/2015 1211 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.2  
Collected By: J. Yeager 6176JY Well #: HO-95-2425

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM18 9223	1/24/2015 / 1630 / BCD
Bacteria, E. coli, MPN	<1.0 ✓	MPN/ 100 ml	<1.0	SM18 9223	1/24/2015 / 1630 / BCD
Nitrate	4.23 ✓	mg/L	10	601	1/23/2015 / 1615 / CRS
Turbidity	17.7	NTU	<10	SM18 2130B	1/23/2015 / 1700 / CRS
Sand	NS ✓	mg/L	5	Visual/Gravimetric	1/23/2015 / 1700 / CRS

*Turbidity fails*  
*others 'OK' MB 1/29/15*

### 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 pH & Chlorine level tested on site
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
Building Permit # : B14001588

Date Reported: 1/26/2015

# 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 #: 98735 Account #: 4226  
Reference: Berman Company: Viking Development Corporation  
Location: 7315 Brown's Bridge Road Requested By: Cary Cumberland  
Fulton, MD 20759 Source: Well Water  
Date/ Time Collected: 1/27/2015 1050 Site: Kitchen Sink Tap  
Date/Time Rec'd: 1/27/2015 1720 Treatment: After Spin Down Separator  
Chlorine ppm: Free: ND Total: ND pH: 5.9  
Collected By: C. Holland 0547CH Well #: HO-95-2425

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Turbidity	2.09	NTU	<10	SM18 2130B	1/27/2015 / 2000 / CCH
Iron	0.13	mg/L	0.3*	FR, 45 (126)	1/27/2015 / 2120 / CCH

*Iron Passes after filter  
Filter reduces Iron and effect on Turbidity  
is significant reduction  
OK rep 1/30/15*

### NOTES

- 1 \*\*Revised report to show addition of Iron analysis. 01/29/15 BCD
- 2 \*SMCL = Secondary Maximum Contaminant Level
- 3 mg/L = milligrams per liter (also, parts per million)
- 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 pH & Chlorine level tested on site
- 8 Visual well check: Sealed, vented cap

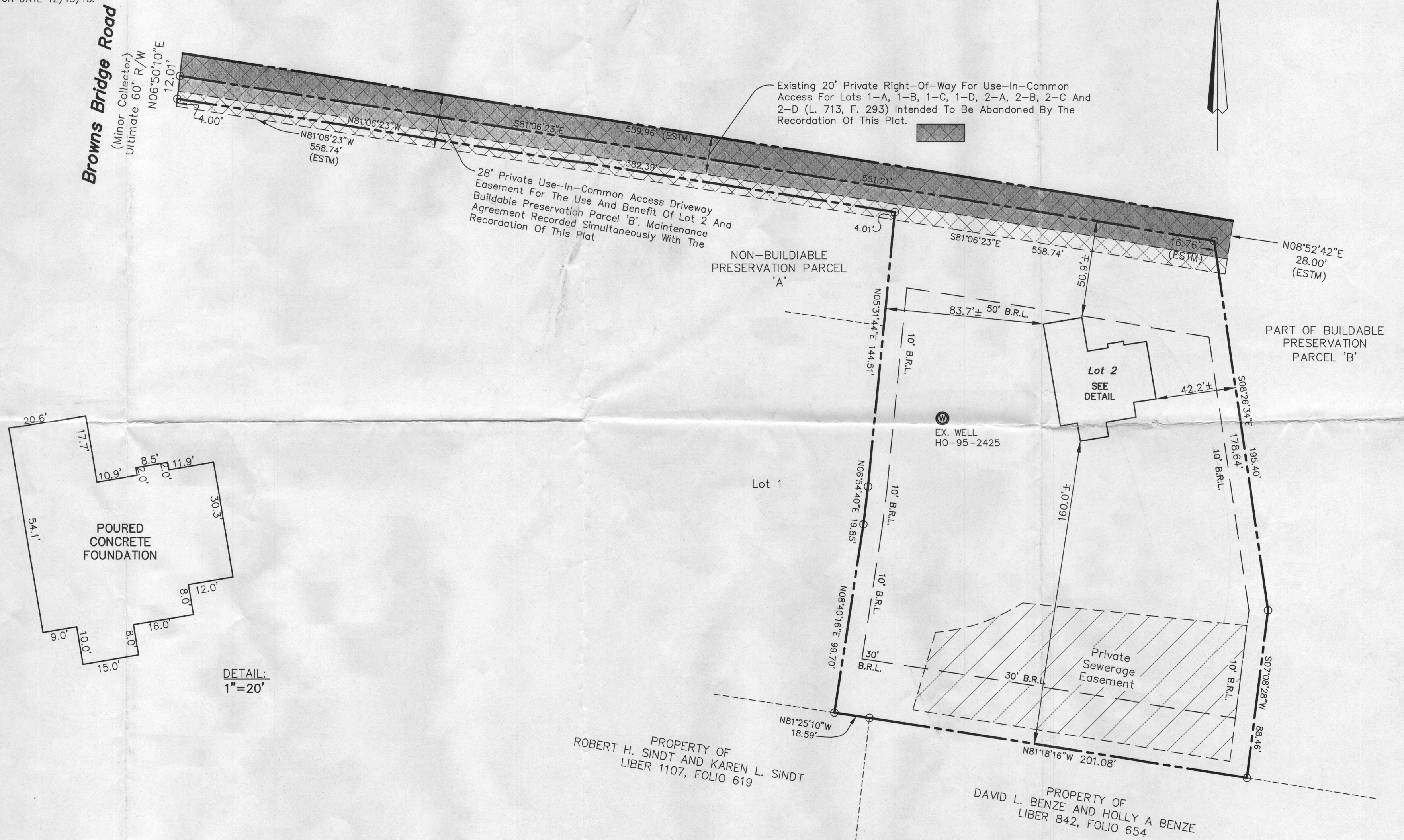
Reason for Test : Use & Occupancy  
Building Permit # : B14001588

Date Reported: 1/28/2015



**GENERAL NOTES:**

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INSOFAR AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELEI UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE X ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24027C0140D, EFFECTIVE NOV. 5, 2013.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 0.8'.
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 10692, EXPIRATION DATE 12/13/15.
- 6) BUILDING PERMIT # (B-14001588)



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

#7315 BROWNS BRIDGE ROAD  
TOP OF FOUNDATION ELEVATION = 511.5'±

RECEIVED  
STATE OF MARYLAND  
TERRELL A FISHER  
PROFESSIONAL LAND SURVEYOR  
REG. #10692  
DATE 12/6/14  
PROFESSIONAL LAND SURVEYOR  
REG. #10692

**HOUSE LOCATION DRAWING**  
FOUNDATION LOCATION: 8/1/14  
FINAL LOCATION:  
BOUNDARY SURVEY:  
SCALE: 1"=40'  
DATE: 8/5/14  
DRAWN BY: GAD  
CHECKED BY: MLR  
PROJECT No.: 08054-6001

LOT 2  
VANNOY PROPERTY  
LOTS 1 & 2, NON-BUILDABLE  
PRESERVATION PARCEL 'A' AND BUILDABLE  
PRESERVATION PARCEL 'B'  
PLAT NOS. 22342 THRU 22344  
FIFTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND