

B 1 9714

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 520762 please type

STATE PERMIT NUMBER

HO-94-4033 fill in this form completely

Date Received (APA)

OWNER INFORMATION 9763

8 MM DD YY 13 Winchester Homes, Inc 15 Last Name Owner First Name 34 6905 Rockledge Drive, Suite 800 36 Bethesda, Md 20817 57 Town 70 State 72 Zip 76

B 3

LOCATION OF WELL

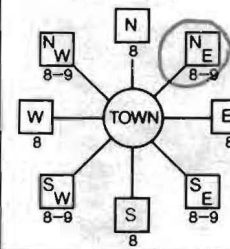
Howard 8 COUNTY 21 Riverwood 23 SUBDIVISION 42 SECTION 1 LOT 12 44 46 48 50 Clarksville 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 3 73 76 77 78

DRILLER INFORMATION

George F. Easterday M W D 040 76 License No. 81 L. Franklin Easterday, Inc. 9265 Brown Church Rd., MT. Airy, Md. 21771 6/28/04 Date

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Hunters View Road

11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH 34 400 37 WEST SOUTH 38 39 DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 29 BLK: 4 PARCEL 20

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A516084 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 10/14/2004 Brian Baker 10/14/2005 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 515 000 EAST GRID 828 000 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary) 37 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 39 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 DEEPEEN 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 HO2004G007 PERMIT No. HO-94-4033 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

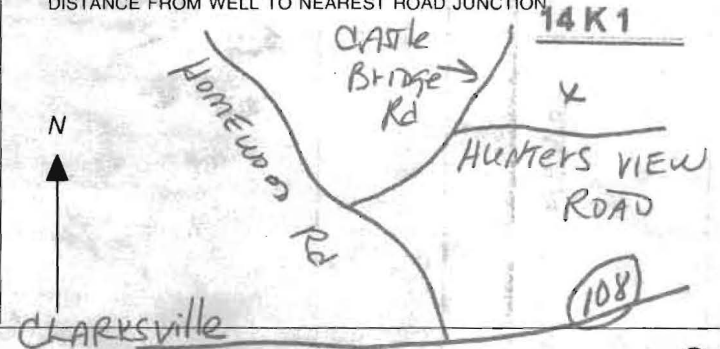
SOURCES OF DRILLING WATER

- 1. wells 2. 3.

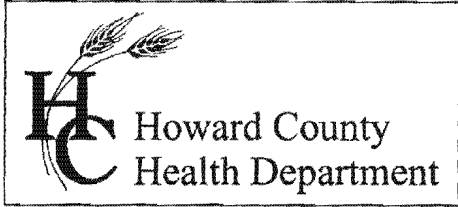
WRITE THE BOX NUMBER FROM THE MAP HERE

E 590 828 828 515 N 000 000

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



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



7178 Columbia Gateway Drive, Columbia Maryland 21046
(410) 313-1771 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

September 21, 2010

Homeowner
11058 Hunters View Road
Ellicott City, MD 21042

RE: 11058 Hunters View Road
BP #: B10000715
Well Permit # HO-94-4033

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 07/02/2010. Final approval of the well line connection to the dwelling was approved on 06/01/2010.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

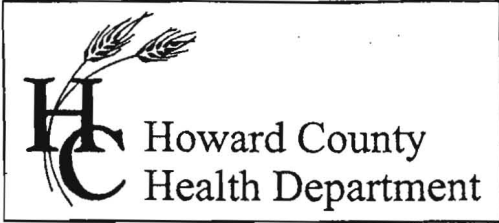
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #**HO-94-4033**. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: **09/15/2010**
Date of Well Completion: **11/07/2004**

Approving Authority,
Dana Bernard
Dana Bernard
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File



3525 H Ellicott Mills Drive • Ellicott City, MD 21043
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

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

ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate ~~one of~~ the following:

- The well site has been staked by Benchmark Engineering on June '04 and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN Winchester Homes

<u>LOTS</u>	<u>1-10</u>	<u>Phase I</u>
	<u>12-23</u>	<u>Riverwood</u>
	<u>34-41</u>	

all are staked

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 878-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	76799	Account #:	3123
Reference:	Riverwood Lot 12	Company:	National Water Servicing
Location:	11058 Hunter's View Road Ellicott City, MD 21042	Requested By:	Dave Rycke
Date/ Time Collected:	9/14/2010 1020	Source:	Well Water
Date/Time Rec'd:	9/14/2010 1154	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Softener/Neutralizer/Sediment Filter**
Collected By:	J.Yeager 6176JY	pH:	6.3
		Well #:	HO-94-4033

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	9/15/2010 / 0830 / KME
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	9/15/2010 / 0830 / KME

NOTES

- 1 **Sample collected prior to treatment
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested on site

Reason for Test : Use & Occupancy retest
 Building Permit # : 10000715

Date Reported: 9/15/2010

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1913 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	76513	Account #:	3123
Reference:	Riverwood Lot 12	Company:	National Water Servicing
Location:	11058 Hunter's View Road Ellicott City, MD 21042	Requested By:	Dave Rycke
Date/ Time Collected:	8/19/2010 0800	Source:	Well Water
Date/Time Rec'd:	8/19/2010 1156	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Softener/Neutralizer/Sediment Filter**
Collected By:	J.Yeager 6176JY	pH:	6.2
		Well #:	HO-94-4033

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Gross Alpha	3.9	pCi/L	15	900.0	8/21/2010 / 1253 / MJN
Gross Beta	7.0	pCi/L	50	900.0	8/21/2010 / 1253 / MJN

NOTES

- 1 **Sample collected prior to treatment
- 2 Gross Alpha Detection Limit: 0.6 pCi/L
- 3 Gross Beta Detection Limit: 1.4 pCi/L
- 4 pCi/L = picocuries per liter
- 5 pH tested on-site
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 ND:None Detected
- 8 Sample collected by client, analyzed as received
- 9 Subcontracted to Reference Lab #278

Reason for Test : Use & Occupancy
 Building Permit # : 10000715

Date Reported: 8/24/2010

HOWARD COUNTY HEALTH DEPARTMENT
 BUREAU OF ENVIRONMENTAL HEALTH
 WATER AND SEWERAGE PROGRAM
 TEL: (410)313-2640 FAX: (410)313-2648



FAXED
 8/25/10

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

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

Company Name: NATIONAL WATER SERVICE Telephone #: 301-854-1333
 Address: P.O. Box 138
ASHTON, MD 20861

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:
 Name (Print): DAVID RYCKE License# PI 0145

*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: Winchester Homes Telephone #: 301-803-4174
 Subdivision: RIVERWOOD Lot #: 12 Well Tag #: HO-94-4033
 Site Address: 11058 HUNTERS VIEW RD
ELICOTT CITY

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>GRUNDfos</u>	Make: <u>CAMPBELL</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>1550E 07-180</u>	Model#: <u>PA800</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity <u>15</u> GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>15</u> GPM	NSF approved: <u>YES</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>110</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>
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 <u>CPS</u>		
Safety rope, if used, attached to inside of well casing with eye bolt <u>N/A</u>		

Piping to house
 Type: Poly
 PSI: 160 (160 psi min)
 Depth of supply line: 4' (36" min)

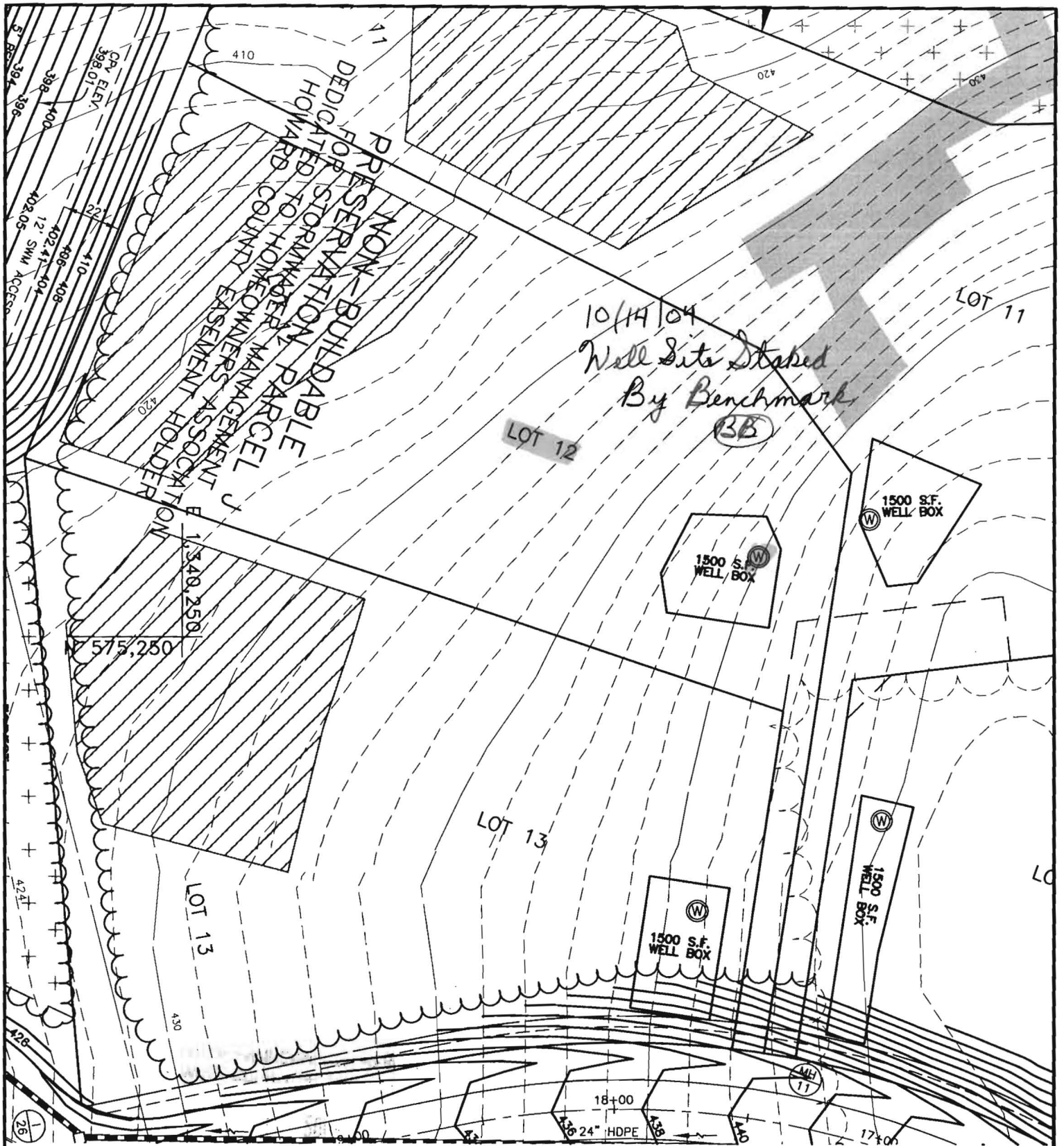
House Connection
 PVC sleeved to undisturbed soil at wall penetration: YES
 Approximate length of sleeve: 5'
 Sleeve caulked and sealed properly: YES

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: DAVID RYCKE date: 8-25-10

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

Date Insp. Requested: _____ Date Insp. Approved: 6/1/2010 BB
 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



BENCHMARK

ENGINEERS • LAND SURVEYORS • PLANNERS

ENGINEERING, INC.

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

RIVERWOOD

LOT 12

THIRD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1415 Old Toneytown Rd. Westminster, MD 7010-848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	76512	Account #:	3123
Reference:	Riverwood Lot 12	Company:	National Water Servicing
Location:	11058 Hunter's View Road	Requested By:	Dave Rycke
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	8/19/2010 0800	Site:	Pressure Tank
Date/Time Rec'd:	8/19/2010 1156	Treatment:	Softener/Neutralizer/Sediment Filter**
Chlorine ppm:	Free: ND Total: ND	pH:	6.2
Collected By:	J.Yeager 6176JY	Well #:	HO-94-4033

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Radon	850.0	pCi/L	---	913	8/23/2010 / --- / ASL

NOTES

- 1 **Sample collected prior to treatment
- 2 pCi/L = picocuries per liter
- 3 pH tested on-site
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 Subcontracted to Reference Lab

Reason for Test : Use & Occupancy
 Building Permit # : 10000715

Date Reported: 8/24/2010

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1415 Old Faneystown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	76511	Account #:	3123
Reference:	Riverwood Lot 12	Company:	National Water Servicing
Location:	11058 Hunter's View Road	Requested By:	Dave Rycke
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	8/19/2010 0800	Site:	Pressure Tank
Date/Time Rec'd:	8/19/2010 1156	Treatment:	Softener/Neutralizer/Sediment Filter**
Chlorine ppm:	Free: ND Total: ND	pH:	6.2
Collected By:	J.Yeager 6176JY	Well #:	HO-94-4033

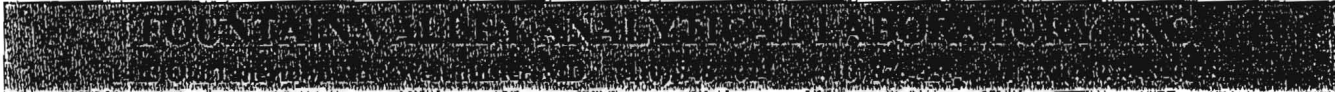
PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	50.4	MPN/ 100 ml	<1.0	SM18 9223	8/20/2010 / 0830 / KME
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	8/20/2010 / 0830 / KME
Nitrate	<1.0	mg/L	10	601	8/20/2010 / 1030 / BCD
Turbidity	22.2	NTU	<10	SM18 2130B	8/20/2010 / 0915 / KME
Sand	NS	mg/L	5	Visual/Gravimetric	8/20/2010 / 0915 / KME

NOTES

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

Reason for Test : Use & Occupancy
 Building Permit # : 10000715

Date Reported: 8/20/2010



REPORT OF ANALYSIS

Laboratory ID #: 76703 Reference: Riverwood Lot 12 Location: 11058 Hunter's View Road Ellicott City, MD 21042 Date/ Time Collected: 9/2/2010 1115 Date/Time Rec'd: 9/2/2010 1430 Chlorine ppm: Free: ND Total: ND Collected By: J. Yeager 6176JY	Account #: 3123 Company: National Water Servicing Requested By: Dave Rycke Source: Well Water Site: Pressure Tank Treatment: Softener/Neutralizer/Sediment Filter* pH: 6.4 Well #: HO-94-4033
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Bacteria, Coliform, Total, MPN	40.6	MPN/ 100 ml	<1.0	SM18 9223	9/3/2010 / 1100 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	9/3/2010 / 1100 / CCH

NOTES

- 1 *Sample collected prior to treatment
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested on site

Reason for Test : Use & Occupancy retest
 Building Permit # : 10000715

Date Reported: 9/3/2010

9/10/10
 spoke w/ Ron (Camberly Home)
 told him that need to
 shock well system one more
 time, if it fails, UV light
 to be installed. Temp Dev.
 ILCP will be issued. Need
 pre- and post treated samples
 for bacteria.

(RW)

REPORT OF ANALYSIS

Laboratory ID #: 76590	Account #: 3123
Reference: Riverwood Lot 12	Company: National Water Servicing
Location: 11058 Hunter's View Road Ellicott City, MD 21042	Requested By: Dave Rycke
Date/ Time Collected: 8/25/2010 1405	Source: Well Water
Date/Time Rec'd: 8/25/2010 1510	Site: Pressure Tank
Chlorine ppm: Free: ND Total: ND	Treatment: Softener/Neutralizer/Sediment Filter*
Collected By: K. Eichstedt 2870KE	pH: 5.9
	Well #: HO-94-4033

Bacteria, Coliform, Total, MPN	8.7	MPN/ 100 ml	<1.0	SM18 9223	8/26/2010 / 0930 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	8/26/2010 / 0930 / CCH
Turbidity	8.48	NTU	<10	SM18 2130B	8/25/2010 / 1615 / KME

NOTES

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

Reason for Test : Use & Occupancy retest
 Building Permit # : 10000715

Date Reported: 8/26/2010