

SEQUENCE NO. (MDE USE ONLY)  
 1 2 3 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**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 13

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

DATE WELL COMPLETED  
 MM DD YY  
04 15 08

Depth of Well  
 22 520 26  
 (TO NEAREST FOOT) O.K. (B/B)

PERMIT NO.  
 FROM "PERMIT TO DRILL WELL"  
HO - 95 - 1396

OWNER Bassler  
 STREET OR RFD Basslers Way TOWN Ellicott City  
 SUBDIVISION Walnut Creek SECTION 1 LOT 16

**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	
Top Soil	0	1	
Sandy	1	10	
Sand Stone	10	19	✓
White mica	19	90	
Sand Stone	90	95	✓
White mica	95	500	
Sand Stone	500	505	✓
White mica	505	520	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT CM BENTONITE CLAY BC  
 NO. OF BAGS 9 NO. OF POUNDS 300  
 GALLONS OF WATER 54  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 20 ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
ST CO  
 STEEL CONCRETE  
PL OT  
 PLASTIC OTHER  
 MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 22  
 60 61 63 64 66 70

**OTHER CASING (if used)**  
 diameter inch depth (feet) from to  
 A C H C A S I N G

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
ST BR HO  
 STEEL BRASS OPEN HOLE  
PL OT  
 PLASTIC OTHER

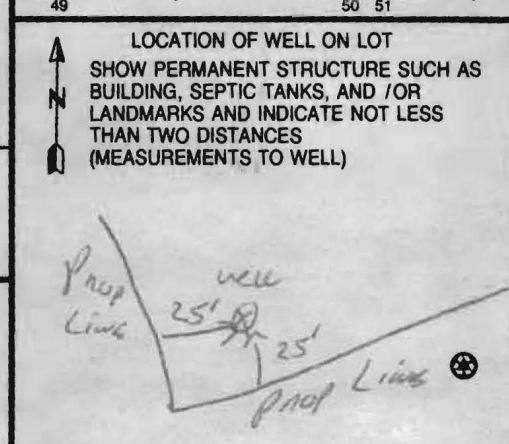
**C 2** DEPTH (nearest ft.)  
 1 HO 21 520  
 E 8 9 11 15 17 21  
 A C H 2 23 24 26 30 32 36  
 S C 3 36 39 41 45 47 51  
 R E E SLOT SIZE 1 2 3  
 N DIAMETER OF SCREEN (NEAREST INCH) 56 60  
 from to

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

**C 3** **PUMPING TEST**  
 HOURS PUMPED (nearest hour) 6  
 PUMPING RATE (gal. per min.) 4  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 18 ft.  
 WHEN PUMPING 105 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 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 (nearest foot) IA  
- below }



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. M SD 117  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC. NO. D  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 1 0563

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER HO-95-1396 fill in this form completely

OWNER INFORMATION: Date Received (APA), Last Name (Bassler), Owner (Venture LLC), First Name (W.), Street or RFD (15950 W. AVE), Town (Lisbon), State (MD), Zip (21765)

DRILLER INFORMATION: Driller's Name (Ralph E. Wayne), License No. (M SD 117), Firm Name (Ralph E. Wayne Inc), Address (17024 Handy Rd. Mt Airy MD 21771), Signature, Date (3-30-07)

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

USE FOR WATER (CIRCLE APPROPRIATE BOX): [X] 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

APPROXIMATE DEPTH OF WELL (150 FEET), APPROXIMATE DIAMETER OF WELL (6" NEAREST INCH)

METHOD OF DRILLING (circle one): [X] BORED (or Augered) AIR-ROTary, JETTED AIR-PERcussion, Jetted & DRIVEN ROTARY (Hydraulic Rotary), CABLE REVerse-ROTary, Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): [X] 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

Not to be filled in by driller (MDE OR COUNTY USE ONLY): APPROP. PERMIT NUMBER G, PERMIT No. HO-95-1396

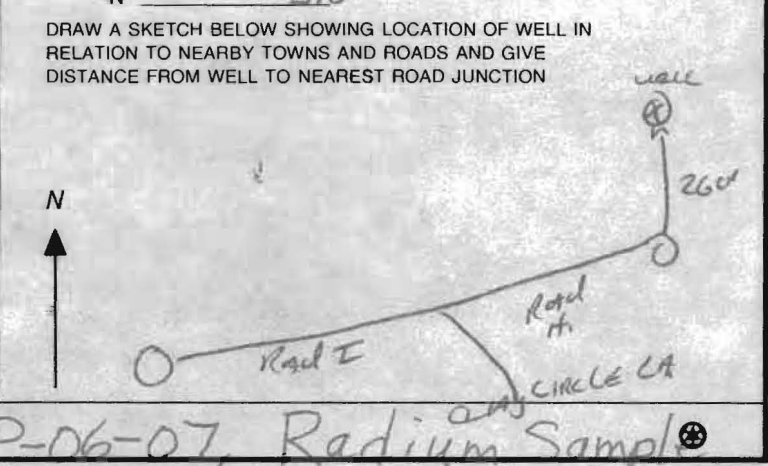
SPECIAL CONDITIONS: NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED. Drill Well Per SP-06-07, Radium Sample

LOCATION OF WELL: COUNTY (Howard), SUBDIVISION (WALNUT Creek), SECTION (PHASE I), LOT (16), NEAREST TOWN (CLARKSVILLE), MILES FROM TOWN (2 MI)

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): [N] TOWN, NEAR WHAT ROAD (Basslers Way), ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): [N] NORTH, DISTANCE FROM ROAD (430 FT), TAX MAP: 28 BLK: 11 PARCEL: 49

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: COUNTY NAME (Howard), COUNTY NO. (13), STATE SIGNATURE, DATE ISSUED (1/21/2008), CO SIGNATURE (Brian Baker), EXP. DATE (1/21/2009), NORTH GRID (510 000), EAST GRID (817 000)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X: SOURCES OF DRILLING WATER (1. well), WRITE THE BOX NUMBER FROM THE MAP HERE (E 817, N 508510), 4-14-08 Sample collected @ field





**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: Duff Plumbing, Heat Telephone #: 2408820069  
Address: 9955 Old Mill Rd  
B.C. Md 21042

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

License # and name of individual responsible for the field installation:  
Name (Print): Duane Gilbert License# 21899

\*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: TBF Telephone #: 410-480-6027  
Subdivision: Walnut Creek Lot #: 16 Well Tag #: HO - 951296  
Site Address: 82221 Basslers Way  
Clarksville, md 21029

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Myers</u>	Make: <u>American Grant</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>25F102-8Plus-P4-2</u>	Model#: <u>PT800LF</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity: <u>88</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>10</u> GPM	NSF/WSC approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>520</u> (feet)		Conduit secured to well cap: <u>yes</u>

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 No

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>Plastic</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>yes</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>yes</u>
Depth of supply line: <u>42"</u> (36" min)	Sleeve sealed properly: <u>yes</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

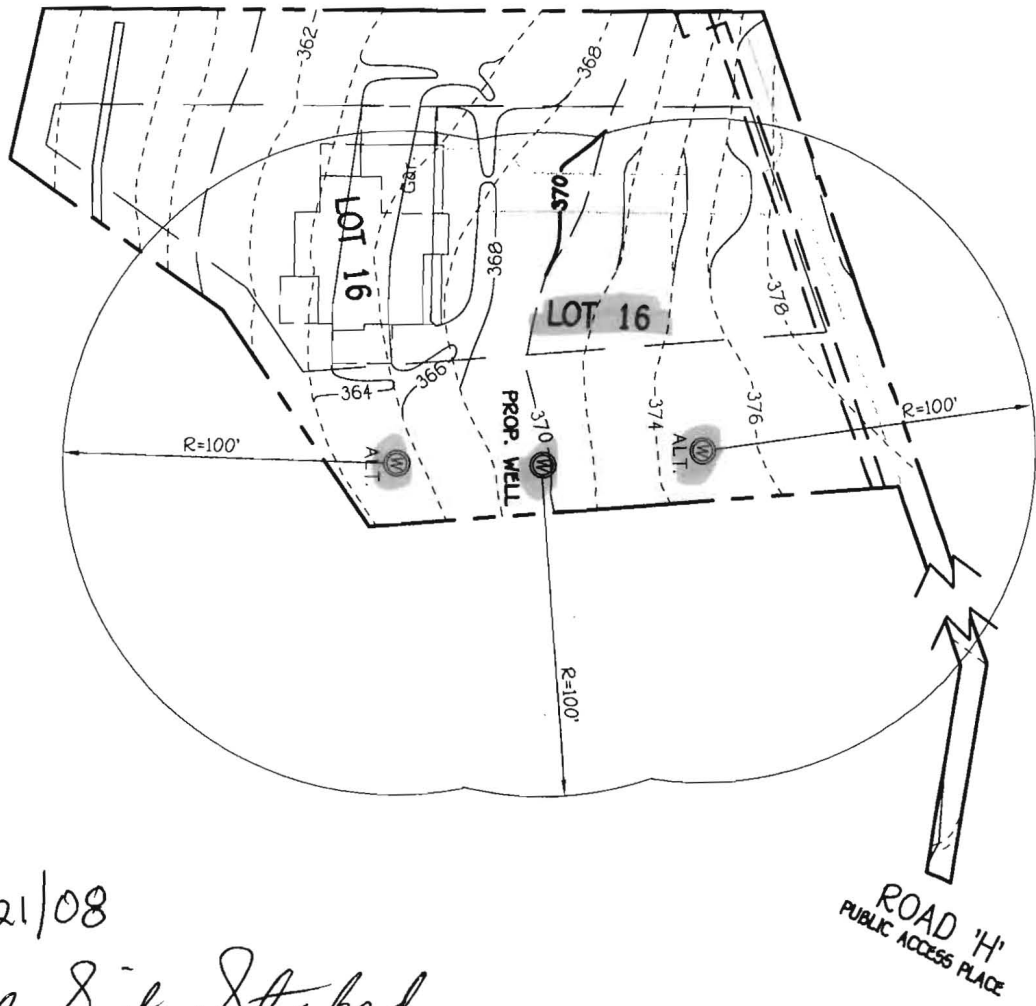
Date June 10 - 2015

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 6/10/15 Inspector: KW

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope not outside of well cap/casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

July 2008



1/21/08

Well Site Staked  
by 

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

WELL LOCATION PLAN  
 LOT 16  
 ZONED RC-DEO & RR-DEO  
 TAX MAP No. 28 GRID No. 4, 5, 10-12, 17 & 18  
 PARCEL No. 49  
 FIFTH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 SCALE 1"=60' DATE: JUNE 27, 2007

**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: Do It Plumbing, Inc. Telephone #: 240 882 0069  
Address: 9955 Old Mill Rd  
E. Court 21043

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

License # and name of individual responsible for the field installation:  
Name (Print): Duane Gilbert License# 21859

\*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: TBF Telephone #: 410 450 6023  
Subdivision: walnut creek Lot #: 16 Well Tag #: HO - 95 1396  
Site Address: 2221 Basslers way  
Clarksville, md 21029

<b><u>Submersible Pump Data</u></b>	<b><u>Pitless Adapter</u></b>	<b><u>Well Cap and Electric Conduit</u></b>
Make: <u>Myers</u>	Make: <u>American Grout</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>25T102-8Pus-P4-2</u>	Model#: <u>PT 800 LF</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>28</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>10</u> GPM	NSP/AVSC approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>520</u> (feet)		Conduit secured to well cap: <u>yes</u>
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors, <u>Cable guards</u> , 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>No</u>		

<b><u>Piping to house</u></b>	<b><u>House Connection</u></b>
Type: <u>plastic</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>42</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>yes</u>
Depth of supply line: <u>42"</u> (36" min)	Sleeve sealed properly: <u>yes</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 \_\_\_\_\_

Date June - 10 - 2015

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

**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 #:	101595	Account #:	4035
Reference:	Walnut Creek Lot 16	Company:	Trinity Quality Homes, Inc.
Location:	12221 Basslers Way Clarksville, MD 21029	Requested By:	Michael Pfau
Date/ Time Collected:	6/25/2015 1325	Source:	Well Water
Date/Time Rec'd:	6/25/2015 1545	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Sediment Filter/Softener/Neutralizer** ✓
Collected By:	C. Mooshian 7268CM	pH:	7.5
		Well #:	HO-95-1396

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/26/2015 / 1030 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/26/2015 / 1030 / CCH

O.K.

**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 pH & Chlorine level tested on site
- 6 Visual well check: Scaled, vented cap

Reason for Test : Use & Occupancy  
 Building Permit # : B14002847

Date Reported: 6/26/2015

Reviewed By: Catherine C. Johnson

# 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 #: 101595 Account #: 4035  
Reference: Walnut Creek Lot 16 Company: Trinity Quality Homes, Inc.  
Location: 12221 Basslers Way Requested By: Michael Pfau  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 6/25/2015 1325 Site: Pressure Tank  
Date/Time Rec'd: 6/25/2015 1545 Treatment: Sediment Filter/Softener/Neutralizer\*\*  
Chlorine ppm: Free: ND Total: ND pH: 7.5  
Collected By: C. Mooshian 7268CM Well #: HO-95-1396

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/26/2015 / 1030 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/26/2015 / 1030 / CCH

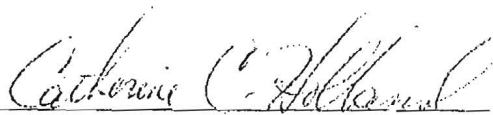
### NOTES

- \*\* Sample collected prior to treatment
- MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 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 # : B14002847

Date Reported: 6/26/2015

Reviewed By:



# 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 #: 101310 Account #: 4035  
Reference: Walnut Creek Lot 16 Company: Trinity Quality Homes, Inc.  
Location: 12221 Basslers Way Requested By: Michael Pfau  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 6/16/2015 1130 Site: Pressure Tank  
Date/Time Rec'd: 6/16/2015 1525 Treatment: Sediment Filter/Softener/Neutralizer\*\*  
Chlorine ppm: Free: ND Total: ND pH: 6.9  
Collected By: J. Yeager 6176JY Well #: HO-95-1396


PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	1.0	MPN/ 100 ml	<1.0	SM18 9223	6/17/2015 / 1000 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/17/2015 / 1000 / LLO
Nitrate	<1.0	mg/L	10	601	6/16/2015 / 1630 / CRS
Turbidity	0.26	NTU	<10	SM18 2130B	6/16/2015 / 1645 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	6/16/2015 / 1645 / CRS

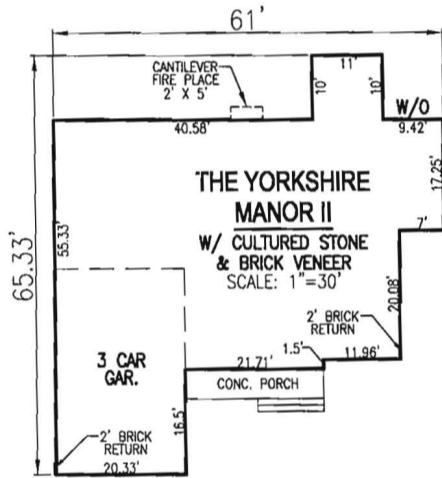
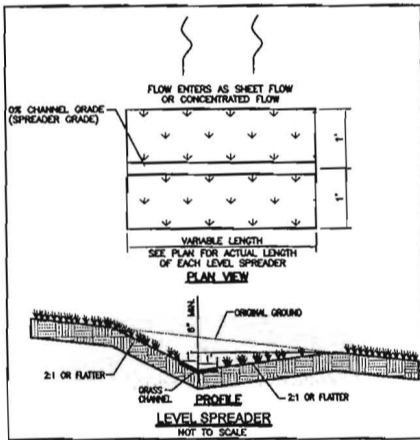
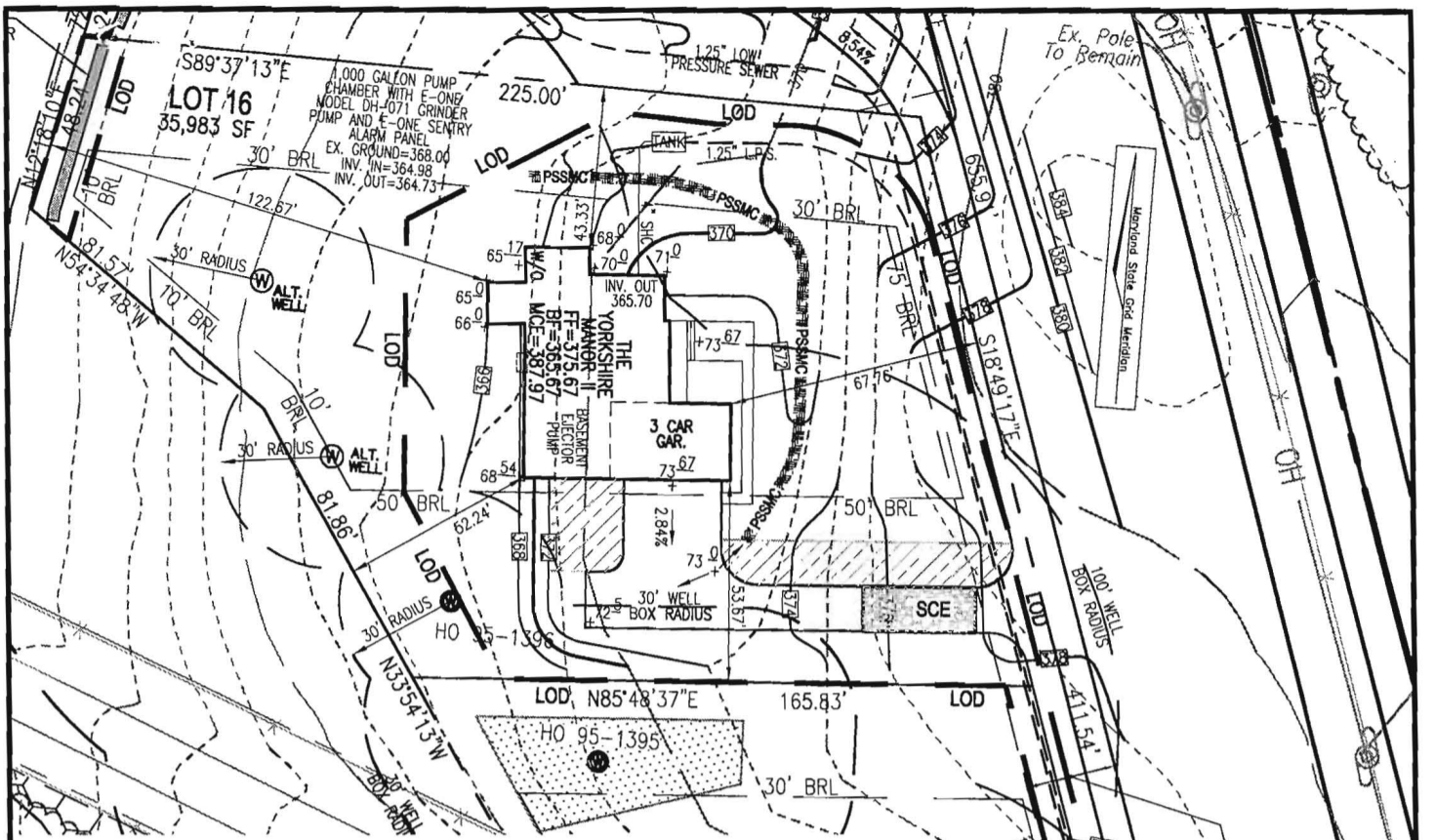
### NOTES

- \*\* Sample collected prior to treatment
- mg/L = milligrams per liter (also, parts per million)
- MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- NS = None Seen (NS indicates less than 5 mg/L)
- 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 # : B14002847

Date Reported: 6/17/2015

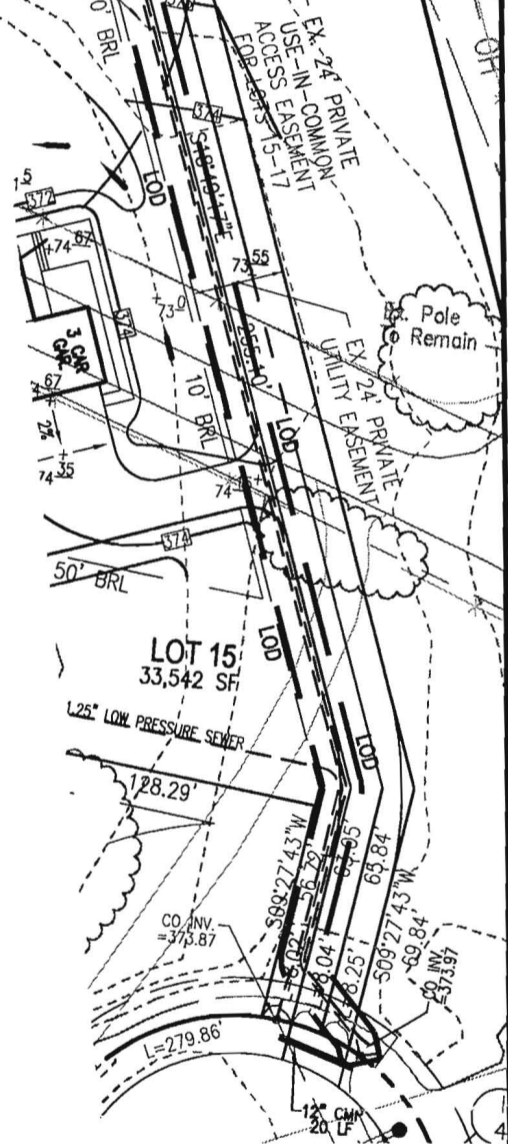
Reviewed By: 



THE EXISTING WELL SHOWN ON LOT 16 TAG NO. 95-1396 HAS BEEN FIELD LOCATED BY FISHER, COLLINS, & CARTER, INC., AND IS ACCURATELY SHOWN.

BUILDING OF LOT 16 FLOOR AREAS:  
 BASEMENT FLOOR AREA: 1920  
 FIRST FLOOR AREA: 1960  
 SECOND FLOOR AREA: 1940  
 BEDROOMS: 5

NOTE: STORMWATER MANAGEMENT (WQV AND CPV) IS PROVIDED BY EXTENDED DETENTION FACILITY, ONE RAIN GARDEN, ROADWAY GRASS CHANNELS, AND ON-LOT LEVEL SPREADERS (F-07-076). LOT 16 WILL ALSO PROVIDE NON-ROOFTOP DISCONNECTS (N-2). BUILDING PERMIT NO. \_\_\_\_\_



**SCALE**  
1"=50'

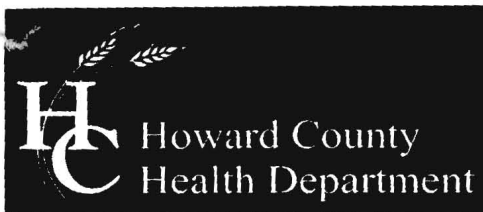
SCALE: AS SHOWN  
 DRAWN BY: JMR  
 CHECKED BY: RHV  
 DATE: JULY 2014  
 PROJECT #: 13-21  
 SHEET#: 1 OF 1

**PLOT PLAN**  
**WALNUT CREEK**  
**LOT 16**  
**REF: F-07-076**  
 TAX MAP 28 PARCEL 49  
 BLOCK 11  
 5TH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND

**ADDRESS**  
 12221 BASSLERS WAY  
 ELLICOTT CITY, MD 21042  
 GP: 13-038

**OWNER**  
 TRINITY QUALITY HOMES, INC.  
 3675 PARK AVENUE, SUITE 301  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 480-0023

**ROBERT H. VOGEL ENGINEERING, INC.**  
 ENGINEERS • SURVEYORS • PLANNERS  
 8407 MAIN STREET ELLICOTT CITY, MD 21043  
 TEL: 410.461.7666 FAX: 410.461.8961



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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

June 11, 2008

Heritage Realty and Land Development  
15950 North Avenue  
P. O. Box 482  
Lisbon, Maryland 21765

RE: Walnut Creek Subdivision, Lot#16  
Well Tag: HO-95-1396

To Whom It May Concern:

A sample was collected during a yield test on April 15, 2008 and submitted to 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 (GA / GB)** 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  $28.0 \pm 4.0$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $13.0 \pm 2.0$  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 target value of 50 pCi/L (roughly equivalent to the annual dose rate of 4 millirem/year).

Since the **Gross Alpha** finding exceeded its MCL, additional testing for **Radium** will be necessary to verify existing levels prior to occupancy. Alternatively, you may install treatment designed to reduce **Gross Alpha, Gross Beta** and **Radium**, plus provide post treated results (short and long term **GAGB**, plus **Radium**) confirming that levels are in conformance with existing standards. **Additionally**, the owners will be required to sign an "AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN ON-SITE TREATMENT SYSTEM" as part of the Use and Occupancy process. Moreover, keep in mind that the standard potability parameters required for occupancy will still be needed.

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, Director  
Bureau of Environmental Health

cc: Barry Glotfelty, MDE Water Mgmt., Groundwater  
✓ Well & Septic property file

Send Report To:

State of Maryland

DHMH - Laboratories Administration  
Division of Environmental Chemistry

Bert Nixon

7178 Columbia Gateway Dr.  
Columbia, MD 21046

**RADIATION LABORATORY**

201 W. Preston Street, Baltimore, Maryland 21201

John M. DeBoy, Dr. P.H. Director

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: 951396BB No. B: \_\_\_\_\_ Field Blank Bottle No. A: \_\_\_\_\_ No. B: \_\_\_\_\_

Plant/Site Name: Walnut Creek - Lot 16 County: Howard

Sample Source: Basslers Way Location: 40-95-1396  
(well no., lab sink, sample tap, etc.)

County:   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: Brian Baker

Telephone No: (410) 313-2643

Date Collected: 4/15/08

Time Collected: 10:30 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

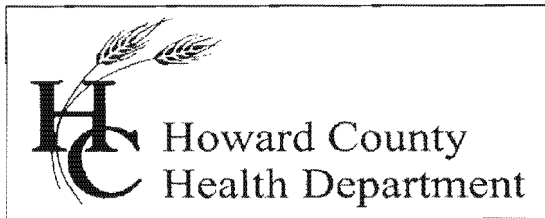
Submitters Code:   Federal Project:  Field Data: \_\_\_\_\_

Remarks: Sample Collected During Yield Test <sup>pH</sup> <sup>Chlorine</sup>

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	2256	28±4	04/21/08
✓	Gross Beta	4100	2256	13±2	"
	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: 04/16/08

Supervisor: S. Wise



**Bureau of Environmental Health**

8930 Stanford Blvd., Columbia, MD 21045

Main: 410-313-1771 | 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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TEMPORARY INTERIM CERTIFICATE OF POTABILITY  
**TEMPORARY DEVIATION FOR RADIUM**

**Expiration Date – August 25, 2015**

July 9, 2015

Trinity Quality Homes, Inc.  
12221 Basslers Way  
Clarksville, MD 21029

**RE: Walnut Creek, Lot #16  
12221 Basslers Way  
Building Permit: B14002847  
Well Permit: HO-95-1396**

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 **10/31/2014**. Final approval of the well line connection to the dwelling was granted on **6/10/2015**. The well construction was completed on **04/15/2008**. Water samples were collected on **06/25/2015**.

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.

Gross Alpha and Beta samples were collected on **4/15/2008**. Results showed a Gross Alpha level of **28.0 ± 4.0 pCi/L** and Gross Beta level of **13.0 ± 2.0 pCi/L**. **This exceeds the maximum contaminant limit (MCL) of 15 pCi/L and/or 50 pCi/L, respectively.**

This is a **temporary deviation** to allow additional time for installation of a radionuclide removal system and/or submission of water sample results indicating that the treated water meets EPA recommendations.

This Department will grant a **temporary deviation** to the Interim Certificate of Potability on condition that water sample results for pre- and post-treatment short term and long term gross alpha/beta and radium 226/228 are submitted to this Department **within 45 days**. Those results must indicate that the radionuclide removal system is effectively maintaining a Gross Alpha level of less than **15 pCi/L**, a Gross Beta level of less than **50 pCi/L**, and a Radium 226/228 level of less than **5 pCi/L**.

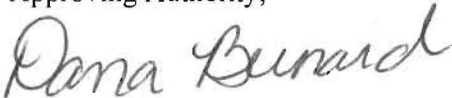
**Furthermore, it will be necessary for you to comply with the following conditions:**

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a Maryland certified water laboratory certified for radionuclide analysis perform a yearly radionuclide analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04.12F Enforcement and Environment Article 9-1311, Annotated Code of Maryland.**

This Temporary Interim Certificate of Potability will expire 45 days from the date of issuance. **Failure to submit the required radium sample results and obtain an Interim Certificate of Potability before the expiration date 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.**

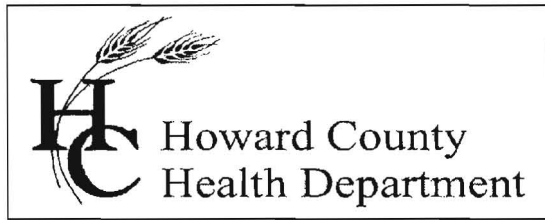
Please contact (410) 313-1773 to schedule a water sample appointment or contact a Maryland certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:  
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,



Dana Bernard, REHS, L.E.H.S.  
Environmental Sanitarian  
Well & Septic Program

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



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
Main: 410-313-6300 | Fax: 410-313-6303  
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

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**INTERIM CERTIFICATE OF POTABILITY**  
**PERMANENT DEVIATION FOR RADIUM**  
Expiration Date – March 29, 2016

September 29, 2015

Homeowner  
12221 Basslers Way  
Clarksville, MD 21029

**RE: Walnut Creek, Lot 16**  
**12221 Basslers Way**  
**Building Permit: B14002847**  
**Well Permit: HO-95-1396**

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 **10/31/2014**. Final approval of the well line connection to the dwelling was granted on **6/10/2015**. The well construction was completed on **4/15/2008**. Water samples were collected on **6/25/2015 & 7/7/2015**.

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.

Gross Alpha and Beta samples were also collected on **4/15/2008**. Results showed a Gross Alpha level of **28.0 ± 4.0 pCi/L** and Gross Beta level of **13.0 ± 2.0 pCi/L**. **This exceeds the maximum contaminant level (MCL) of 15 pCi/L and/or 50 pCi/L, respectively.**

After installation of a radionuclide removal device (Water Softener), post-treatment water samples were collected on **7/7/2015** and indicated a Gross Alpha level of **6.5 ± 0.0 pCi/L**, a Gross Beta level of **2.2 ± 0.0 pCi/L**, and a Radium 226/228 level of **1.1 ± 0.0 pCi/L**.

This Department will grant a **permanent deviation** to the Interim Certificate of Potability on condition that the radionuclide removal system effectively maintains a Gross Alpha level of less than **15 pCi/L**, a Gross Beta level of less than **50 pCi/L**, and a Radium 226/228 level of less than **5 pCi/L**.

**Furthermore, it will be necessary for you to comply with the following conditions:**

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.

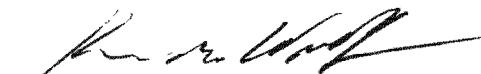
2. It is recommended that a Maryland certified water laboratory certified for radionuclide analysis perform a yearly radionuclide analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04.12F Enforcement and Environment Article 9-1311, Annotated Code of Maryland.**

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-95-1396. 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 Maryland 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,



Kevin M Wolf, L.E.H.S., Supervisor.  
Groundwater Management Section  
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 #:	101310	Account #:	4035
Reference:	Walnut Creek Lot 16	Company:	Trinity Quality Homes, Inc.
Location:	12221 Basslers Way Clarksville, MD 21029	Requested By:	Michael Pfau
Date/Time Collected:	6/16/2015 1130	Source:	Well Water
Date/Time Rec'd:	6/16/2015 1525	Site:	Pressure Tank
Chlorine ppm:	Free: ND Total: ND	Treatment:	Sediment Filter/Softener/Neutralizer**
Collected By:	J. Yeager 6176JY	pH:	6.9
		Well #:	HO-95-1396

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	1.0	MPN/ 100 ml	<1.0	SM18 9223	6/17/2015 / 1000 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/17/2015 / 1000 / LLO
Nitrate	<1.0	mg/L	10	601	6/16/2015 / 1630 / CRS
Turbidity	0.26	NTU	<10	SM18 2130B	6/16/2015 / 1645 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	6/16/2015 / 1645 / CRS

Fail

**NOTES**

- 1 \*\* Sample collected prior to treatment — OK
- 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 pH & Chlorine level tested on site
- 9 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
 Building Permit # : B14002847

Date Reported: 6/17/2015 Reviewed By: Cathy C. [Signature]

# 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 #: 101761 Account #: 4035  
Reference: Walnut Creek Lot 16 Company: Trinity Quality Homes, Inc.  
Location: 12221 Basslers Way Requested By: Michael Pfau  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 7/7/2015 1149 Site: Kitchen Sink Tap  
Date/Time Rec'd: 7/7/2015 1320 Treatment: Sediment Filter/Softener/Neutralizer  
Chlorine ppm: Free: ND Total: ND pH: 7.6  
Collected By: J. Yeager 6176JY Well #: HO-95-1396

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Gross Alpha, Short Term	12.6	pCi/L	15	900.0	7/10/2015 / 0627 / MJN
Gross Beta, Short Term	3.3	pCi/L	50	900.0	7/10/2015 / 0627 / MJN
Gross Alpha, Long Term	6.5	pCi/L	15	900.0	7/16/2015 / 0651 / MJN
Gross Beta, Long Term	<2.2	pCi/L	50	900.0	7/16/2015 / 0654 / MJN
Radium-226	0.3	pCi/L	****	903.1	7/16/2015 / 0935 / MJN
Radium-228	<0.8	pCi/L	****	Ra-05	7/15/2015 / 1147 / SN

### NOTES

- \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- Long Term Gross Alpha Detection Limit: 1.8 pCi/L; Long Term Gross Beta Detection Limit: 2.2 pCi/L
- pCi/L = picocuries per liter
- Radium 226 Detection Limit: 0.2 pCi/L; Radium 228 Detection Limit: 0.8 pCi/L
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- Short Term Gross Alpha Detection Limit: 1.5 pCi/L; Short Term Gross Beta Detection Limit: 1.9 pCi/L
- ND: None Detected
- pH & Chlorine level tested on site
- Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
Building Permit # : B14002847

Date Reported: 7/17/2015

Reviewed By: 