



B 1 26834

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO -14 -0045

fill in this form completely

Date Received (APA)

05/10/14

OWNER INFORMATION

Bassler Venture LLC, PO Box 482, Lis Bow MD 21765

B 3

LOCATION OF WELL

Howard COUNTY, Walnut Creek PHASE III, CLARKSVILLE

DRILLER INFORMATION

Ralph E. Mayne M.S.D. 119, Ralph Mayne Well Drilling, 17024 Handy Rd. Mt. Airy MD 21771, 5/15/14

B 4

SOURCES OF DRILLING WATER

1. well, 2. well, 3.

Hayland Farm Way, ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX), DISTANCE FROM ROAD 225 FT, TAX MAP: 28 BLK: 11 PARCEL 49

B 2

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, STATE SIGNATURE, DATE ISSUED 06/11/2014, CO SIGNATURE, EXP. DATE 6/11/15

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION, FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION), INDUSTRIAL, COMMERCIAL, DEWATERING, PUBLIC WATER SUPPLY WELL, TEST, OBSERVATION, MONITORING, OPEN LOOP GEOTHERMAL, CLOSED LOOP GEOTHERMAL

APPROXIMATE DEPTH OF WELL 150 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTary, JETTED AIR-PERcussion, Jetted & DRIVEN ROTARY (Hydraulic Rotary), CABLE REVerse-ROTary, DRive-POINT

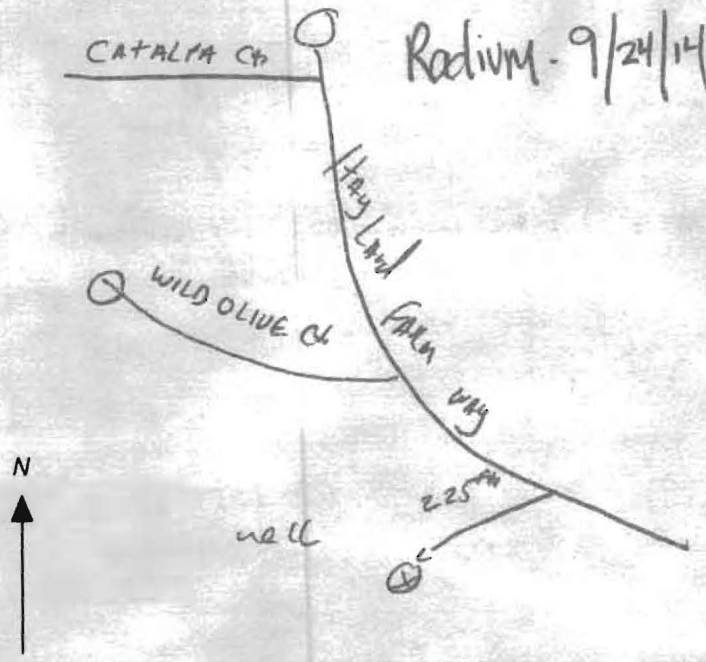
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

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 DEEPEN AN EXISTING WELL

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

APPROX. PERMIT NUMBER HO-2006-G020, PERMIT No. HO-14-0045

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

all wells must be at least 100ft apart, radium sample required @ yield test



WELL LOCATION INFORMATION:  
 NORTHING = 571,900.90 EASTING = 1,326,540.54  
 LATITUDE = N39°14'13" LONGITUDE = W76°56'59"

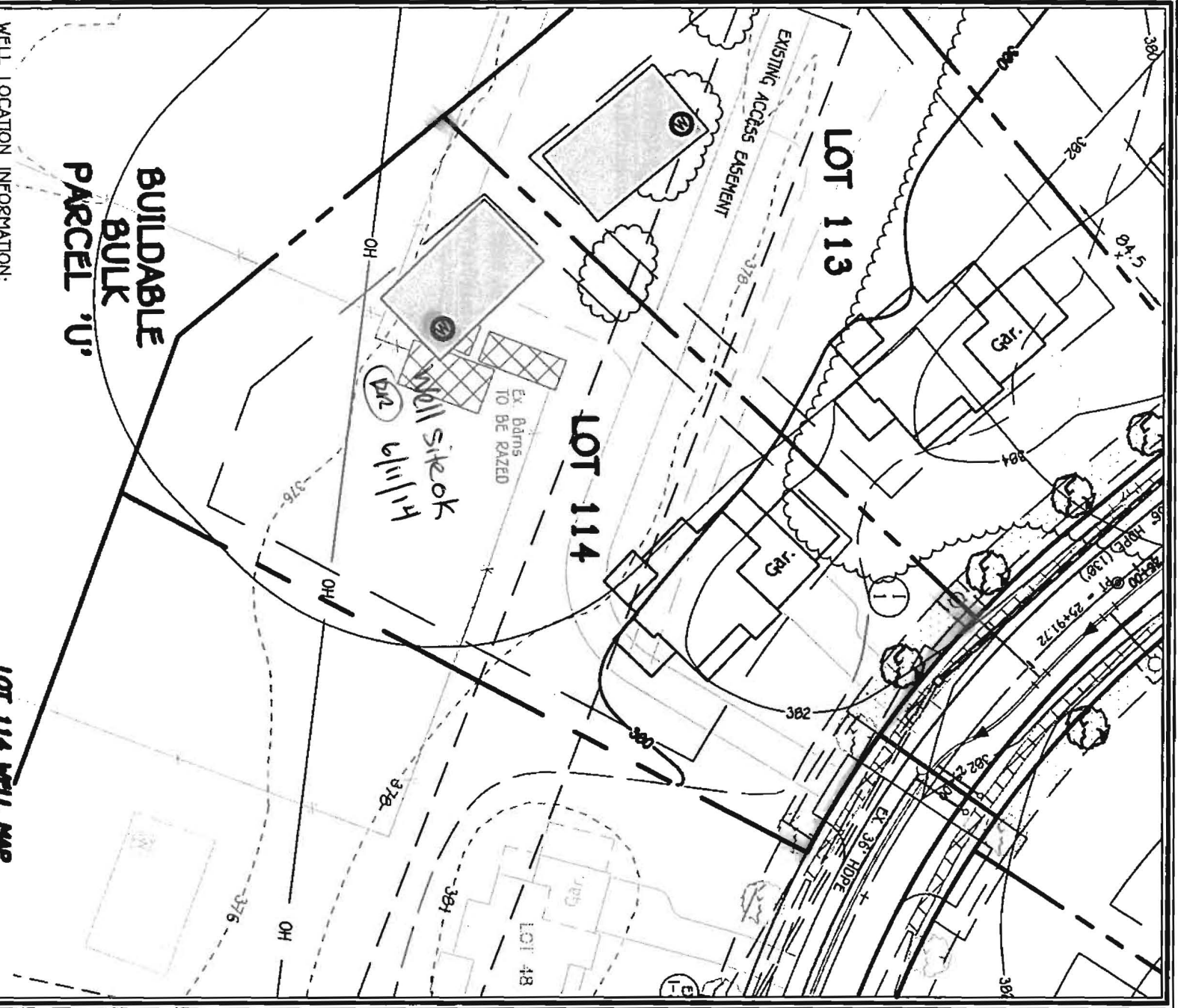
**BUILDABLE  
 BULK  
 PARCEL 'U'**

**LOT 114 WELL MAP  
 PHASE THREE  
 WALNUT CREEK**

Lots 69 - 114, Non-Buildable Preservation Parcels  
 Parcel 'U' thru 'R' & 'V', Non-Buildable Parcel 'S', Buildable Preservation  
 Parcel 'T' and Buildable Bulk Parcel 'U'

ZONED: RC-OEO & RR-OEO  
 TAX MAP No. 28 GRID Nos. 4, 5, 10-12, 17, AND 18  
 FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 DATE: MAY 1, 2014 SCALE: 1" = 50'

**FISHER, COLLINS & CAETEE, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTRAL SQUARE OFFICE BLDG. - 10272 BALTIMORE NATIONAL PIKE  
 ELLETTT CRT. HANNAH ST042  
 (410) 461 - 8895





Howard County  
Health Department

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

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

TO ALL INTERESTED PARTIES

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

Well Site Location:

Walnut Creek Phase 3	114	Hayland Farm Way
<b>Subdivision/Property Name</b>	<b>Lot #</b>	<b>Road Name</b>

The well site has been staked by Fisher, Collins and Carter, Inc.,  
(professional land surveyor or company employing professional land surveyors)  
on 05/07/14 (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 3/11/07



**Bureau of Environmental Health**

8930 Stanford Boulevard, Columbia, MD 21045

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)

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

December 5, 2014

**Bassler Venture  
Attn. Tim Feaga  
15950 North Avenue, P.O. Box 482  
Lisbon, Maryland 21765**

**RE: Walnut Creek Lot 114  
Hayland Farm Way  
Well Tag: HO - 14 - 0045**

Dear Mr. Feaga:

A sample was collected during a yield test on September 24, 2014 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  $3.1 \pm 1.6$  picocuries/liter (pCi/L), while the **Gross Beta** level was  $< 4.0 \pm 0.0$  pCi/L. The **Gross Alpha** result was 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 **meets** EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

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.

Sincerely,

  
Bert Nixon, Director  
Bureau of Environmental Health

Enclosure  
cc: Property file

SEND REPORT TO:

Bert Nixon

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Laboratories Administration

201 W. Preston St., Baltimore, MD 21201

Robert A. Myers, Ph.D., Director

Lab No.

665 826

Howard County Health Department  
Bureau of Environmental Health  
8930 Stanford Blvd.  
Columbia, Maryland 21045

RADIATION ANALYSIS REQUEST FORM

Plant/Site Name: Walnut Creek Phase III - Lot 114

County: Howard

Sample Source: Well - "Hayland Farm Way" (HC-0045)

Location: H0-14-0045

(Well no., lab sink, sample tap, etc.)

Radon-222 Bottle A \_\_\_\_\_  
Bottle B \_\_\_\_\_

Radon-222 Field Blank Bottle A \_\_\_\_\_  
Bottle B \_\_\_\_\_

County 113

Plant No. 

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CHECK (one per Box)

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

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

Point of Collection	
Source (Raw)	<input checked="" type="checkbox"/>
Distribution (treated)	<input type="checkbox"/>
MCL	<input type="checkbox"/>

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

Submitters Code: 

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Federal Project: 5

Collector: R. Rappaport

Telephone No.: 410-313-1781

Date Collected: 9/24/14

Time Collected: \_\_\_\_\_ a.m. 12 p.m.

Field pH: \_\_\_\_\_

Field Chlorine: \_\_\_\_\_

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Remarks: Sample taken during yield test

<input checked="" type="checkbox"/>	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/>	Gross Alpha	4000	665	EPA 900.0	3.1 ± 1.6	9/29/14	MS	10/1/14
<input checked="" type="checkbox"/>	Gross Beta	4100	665	1	< 4.0	1		1
<input type="checkbox"/>	Radium-226	4020						
<input type="checkbox"/>	Radium-228	4030						
<input type="checkbox"/>	Total Uranium	4006						
<input type="checkbox"/>	Radon-222 (Bottle A)	4004						
<input type="checkbox"/>	Radon-222 (Bottle B)	4004						
<input type="checkbox"/>	Radon Field Blank A	4004						
<input type="checkbox"/>	Radon Field Blank B	4004						
<input type="checkbox"/>	Tritium							
<input type="checkbox"/>								

Date Received: 9/24/14

Received By: Kathy Jones

Data Release Signature: Sandra Alarcon

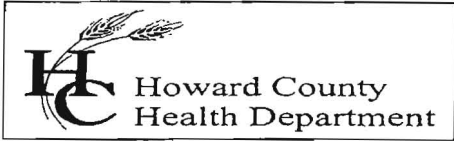
Date: 10/3/14

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?	<input checked="" type="checkbox"/>		
Sample pH < 2.0?	<input checked="" type="checkbox"/>		
Received within holding time?	<input checked="" type="checkbox"/>		

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

OR 16 MAILSD 10/17/14

# Invoice



Bureau of Environmental Health  
Attn: Bert Nixon, Director

DATE: OCTOBER 17, 2014  
DATES OF SERVICE: SEPT 24, & SEPT 29, 2014  
INVOICE #: 2014-024

8930 Stanford Boulevard, Columbia, MD 21045  
Phone 410-313-2640 Fax 410-313-2648  
www.hchealth.org

**BILL TO** Basslers Venture  
Attn: Tim Feaga  
15950 North Ave P.O. Box 482  
Lisbon, MD 21765

**COMMENTS** Payment due upon receipt. Letter and results will be released upon receipt of payment.

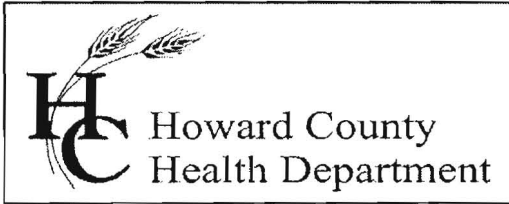
DATE	DESCRIPTION	BALANCE	AMOUNT
09/24/14	Gross alpha/beta testing performed for Walnut Creek, Lots 111, 113 and 114 HO - 14 - 0042 HO - 14 - 0044 and HO - 14 - 0045		\$135.00
09/29/14	Gross alpha/beta testing performed for Walnut Creek Lot 71 HO - 95 - 2662		\$45.00
			<b>AMOUNT DUE</b>
			\$180.00

Please detach and return with payment.

REMITTANCE	
Invoice #	2014-024
Site Information	Walnut Creek Lots 71, 111, 113 and 114
Amount Due	\$180.00

*P/OJ receipt 55324  
11/29/14*

Make Checks Payable to: **Director of Finance** Mail Payments to: **Bureau of Env. Health**



**Bureau of Environmental Health**

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1774 | 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](https://twitter.com/HowardCoHealthDep)

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

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**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – JUNE 7, 2017**

December 7, 2016

Homeowner  
12177 Hayland Farm Way  
Ellicott City, MD 21042

**RE: Walnut Creek, Lot 114  
12177 Hayland Farm Way  
Building Permit: B16002790  
Well Permit: HO-14-0045**

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 **12/6/2016**. Final approval of the well line connection to the dwelling was granted on **10/26/2016**. The well construction was completed on **9/24/2014**. Water samples were collected on **11/4/2016 & 11/11/2016**.

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 initial screening for Gross Alpha and Beta were not collected at the time the well was drilled. Gross Alpha and Gross Beta measure the total alpha and beta particle activity in your 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. These samples will be collected at the time the Final Certificate of Potability (FCOP) testing is to be done.

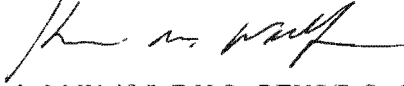
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-14-0045. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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,



Kevin M Wolf, L.E.H.S., REHS/R.S., Supervisor  
Groundwater Management Section  
Well & Septic Program

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

**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: NATIONAL WATER SVC 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 #: \_\_\_\_\_  
Subdivision: WALNUT CREEK Lot #: 114 Well Tag #: HO 99-0045  
Site Address: 12177 HAYLAND FARM WAY 14  
ELICOTT CITY MD

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>GRUND 70S</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>✓</u>
Model #: <u>155QE 07-180</u>	Model #: <u>PA 800</u>	Screened, vented well cap: <u>✓</u>
Pump Capacity <u>15</u> GPM	Depth: <u>48"</u> (36" min)	Cap secured to casing: <u>✓</u>
Well Yield: <u>20</u> GPM	NSF approved: <u>YES</u>	Conduit min 18" B.G.: <u>✓</u>
Depth of well encountered at time of pump installation: <u>105</u> (feet)		Conduit secured to well cap: <u>✓</u>

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 CPS  
Safety rope, if used, attached to inside of well casing with eye bolt N/A

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>1/2"</u>	PVC sleeved to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>5'</u>
Depth of supply line: <u>4'</u> (36" min)	Sleeve caulked and 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 10/25/14

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

Date Insp. Requested: <u>10/26/16</u>	Date Insp. Approved: <u>10/26/16 SC</u>
Inspection Data: Pitless adapter and water supply line at least 36" below grade	<u>✓</u>
Two piece cap installed and attached to casing securely	<u>✓</u>
Elec. conduit extends at least 18" below grade/attached to cap properly	<u>✓</u>
Safety rope installed inside of well casing	<u>✓</u>
Correct well tag attached properly and casing 8" above finished grade	<u>✓</u>
Water supply line sleeved adequately at house connection	<u>✓</u> under footer
Adequate grout observed below pitless adapter	<u>✓</u>

# 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 #: 111286 Account #: 3123  
Reference: Walnut Creek Lot 114 Company: National Water Servicing  
Location: 12177 Hayland Farm Way Requested By: Dave Rycke  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 11/11/2016 1100 Site: Pressure Tank  
Date/Time Rec'd: 11/11/2016 1345 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.5  
Collected By: R. Ott 4269RO Well #: HO-14-0045

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	11/12/2016 / 1630 / BCD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	11/12/2016 / 1630 / BCD
Turbidity	1.19	NTU	<10	SM18 2130B	11/11/2016 / 1605 / CRS

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 NTU = Nephelometric Turbidity Units
- 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 & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B16002790

Date Reported: 11/14/2016

# 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 #: 111102 Account #: 3123  
Reference: Walnut Creek Lot 114 Company: National Water Servicing  
Location: 12177 Hayland Farm Way Requested By: Dave Rycke  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 11/4/2016 0920 Site: Pressure Tank  
Date/Time Rec'd: 11/4/2016 1100 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.1  
Collected By: J. Yeager 6176JY Well #: HO-14-0045

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	200.5	MPN/ 100 ml	<1.0	SM18 9223	11/5/2016 / 0915 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	11/5/2016 / 0915 / LLO
Nitrate	3.78	mg/L	10	601	11/4/2016 / 1200 / CRS
Turbidity	20.6	NTU	<10	SM18 2130B	11/4/2016 / 1210 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	11/4/2016 / 1210 / CRS

### 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 # : B16002790

Date Reported: 11/7/2016