

C1 26506

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER: Bassler Venture LLC, WELL SITE ADDRESS: Grape Myrtle Ct, TOWN: CLARKSVILLE, SUBDIVISION: WALNUT CREEK TRASEY, SECTION: , LOT: 140

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Clay, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (20), NO. OF POUNDS (2000), GALLONS OF WATER (120), DEPTH OF GROUT SEAL (0 to 40).

CASING RECORD form: MAIN CASING TYPE (PL), Nominal diameter (6 inch), Total depth (45 feet).

OTHER CASING table with columns: diameter, depth (from, to). Includes entries for PL casing at 4 inch diameter and 140 to 80 feet depth.

SCREEN RECORD form: screen type (HO), diameter (4 inch), depth (40 to 80 feet).

PUMPING TEST form: HOURS PUMPED (3), PUMPING RATE (20 gal/min), METHOD USED (Bucket), WATER LEVEL (21 ft before, 23 ft when pumping), TYPE OF PUMP USED (S submersible).

WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P), I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04.

DEPTH table with columns: 1-3, 4-6, 7-9, 10-12, 13-15, 16-18, 19-21, 22-24, 25-27, 28-30, 31-33, 34-36, 37-39, 40-42, 43-45, 46-48, 49-51. Includes entries for HO casing at 43, 80, 60, 40 feet depths.

PUMP INSTALLED form: DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (above/below), LAND SURFACE (2 feet).

DRILLERS LIC. NO. (MSD 117), DRILLERS SIGNATURE (MDE Use Only), LIC. NO. (D), SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).

GRAVEL PACK ( ), MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER), TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

LATITUDE 39.23609, LONGITUDE 76.94520, (DEFAULT COORD. WGS 84), NOTES:

B 1 26876 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER 10-15-0110 fill in this form completely

OWNER INFORMATION: Date Received (APA) 08/03/15, Cassler Venture LLC, PO Box 482, Lisbon MD 21765

LOCATION OF WELL: B 3, Howard County, Walnut Creek Phase 4, Clarksville MD

DRILLER INFORMATION: Driller's Name Ralph Mayne, License No. M SD 119, Firm Name Ralph Mayne Well Drilling, Address 17024 Hanby Rd Mt. Airy MD 21771, Signature Date 8/14/15

SOURCES OF DRILLING WATER: 1. well

GRAPE MYRTLE CT, 275, DISTANCE FROM ROAD 28, TAX MAP 28, PARCEL 49

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

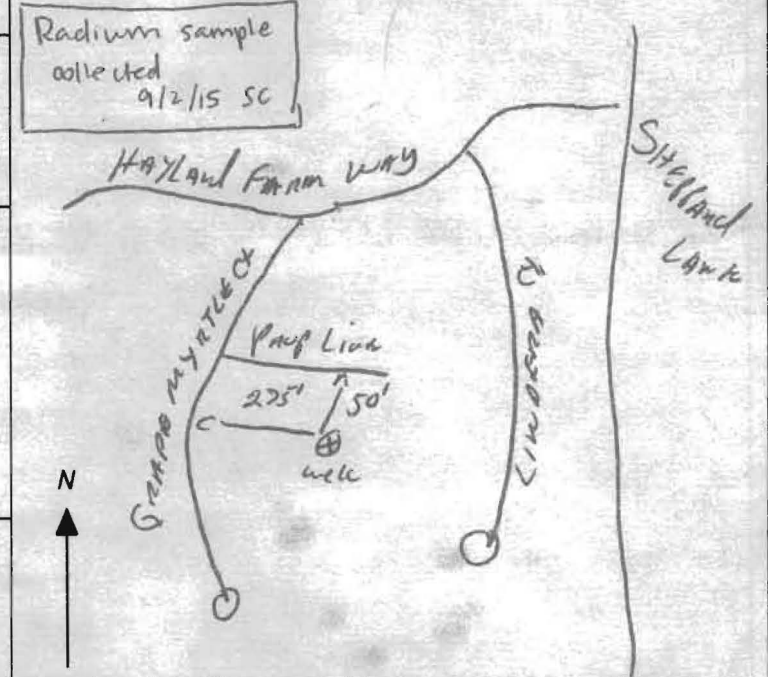
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: Howard County, A520385, DATE ISSUED 8/11/15, EXP. DATE 8/11/16

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

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

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

METHOD OF DRILLING (circle one): BORED (or Augered) AIR-ROTary, JETTED AIR-PERCussion, Jetted & DRIVEN ROTARY (Hydraulic Rotary), Drive-POINT



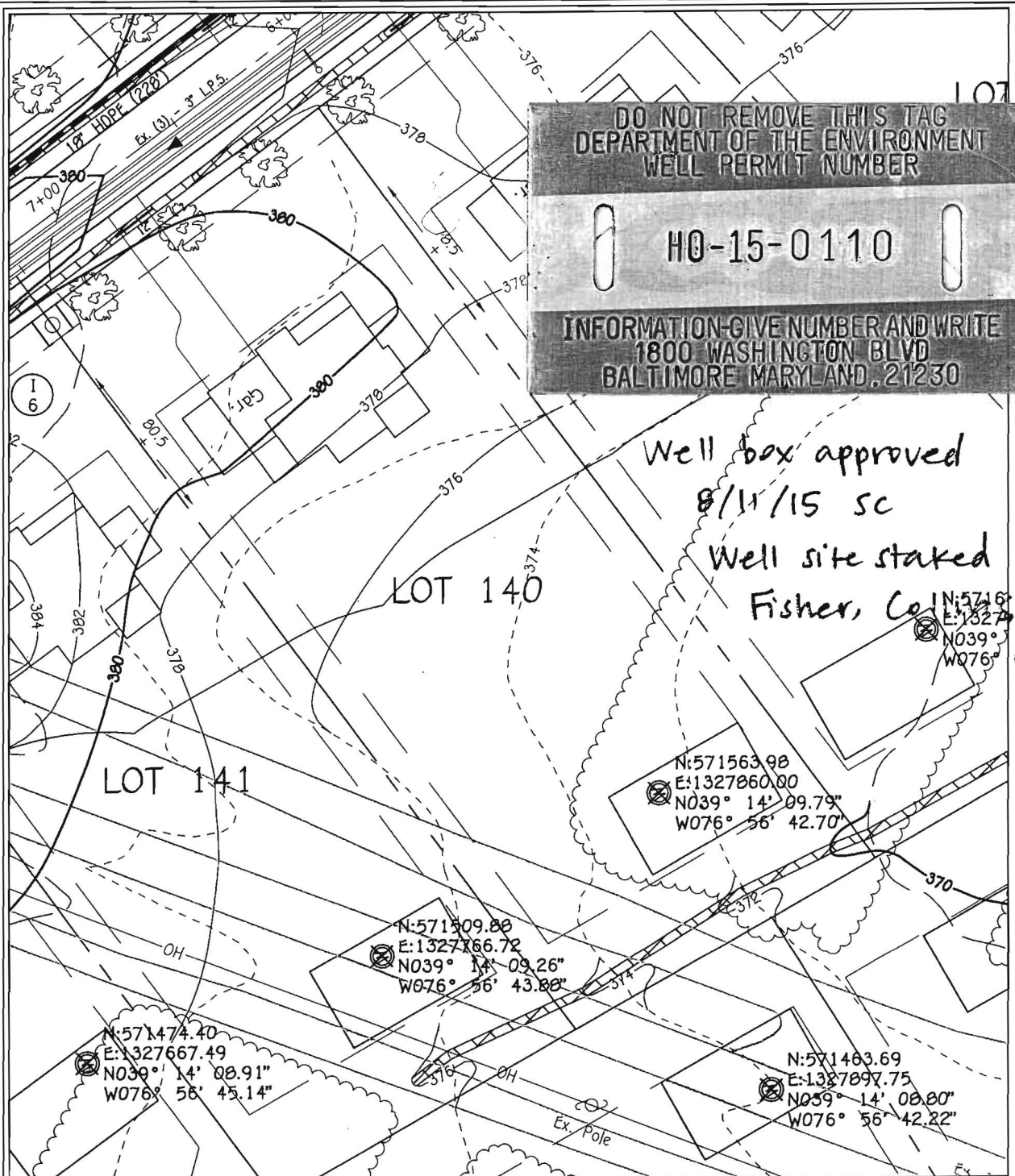
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Not to be filled in by driller (MDE OR COUNTY USE ONLY): APPROP. PERMIT NUMBER H02006G010, PERMIT No. 10-15-0110

SPECIAL CONDITIONS: Wells must be 100' apart. Radium sample required at yield.



I:\2004\04001\dwg\PHASE FOUR FINALS\04001 Phase Four FINAL WELL MAPS.dwg, 7/22/2015 9:22:59 AM, 1:1



DO NOT REMOVE THIS TAG  
 DEPARTMENT OF THE ENVIRONMENT  
 WELL PERMIT NUMBER

**HO-15-0110**

INFORMATION-GIVE NUMBER AND WRITE  
 1800 WASHINGTON BLVD  
 BALTIMORE MARYLAND, 21230

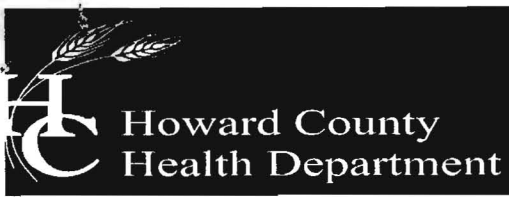
Well box approved  
 8/11/15 SC  
 Well site staked by  
 Fisher, Collins +  
 Carter

**WELL LOCATION INFORMATION:**  
 NORTHING = 571563.98    EASTING = 1327860.00  
 LATITUDE = N 39°14'10"    LONGITUDE = W 76°56'43"

**LOT 140 WELL MAP**  
**WALNUT CREEK**  
 PHASE FOUR

Lots 23 - 60, Non-Buildable Preservation Parcels  
 'C', 'G', 'I', 'K', 'L' And 'M', Buildable Bulk Parcels 'E' And 'H'  
 & Non-Buildable Parcel 'J'  
 ZONED: RC-DEO & RR-DEO  
 TAX MAP No. 28    GRID Nos. 4, 5, 10-12, 17, AND 18    PARCEL No. 49  
 FIFTH ELECTION DISTRICT    HOWARD COUNTY, MARYLAND  
 DATE: July 22, 2015    SCALE: 1"=50'

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELlicOTT CITY, MARYLAND 21042  
 (410) 461 - 2895



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

November 2, 2015

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

**RE: Walnut Creek Lot 140  
Crape Myrtle Court  
Well Tag: HO - 15 - 0110**

Dear Mr. Feaga:

A sample was collected during a yield test on September 2, 2015 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  $< 2.0 \pm 0.0$  picocuries/liter (pCi/L), while the **Gross Beta** level was  $5.1 \pm 1.9$  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,

A handwritten signature in black ink that reads 'Bert Nixon'.

Bert Nixon, Director  
Bureau of Environmental Health

✓ Enclosure  
cc: Property file

SEND REPORT TO: Bert Nixon  
 Howard Co. Health Dept.  
 Bureau of Environmental Health  
 8932 Stanford Blvd.  
 Columbia, MD 21045

DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
 Laboratories Administration  
 201 W. Preston St., Baltimore, MD 21201  
 Robert A. Myers, Ph.D., Director

Lab No.  
 800 314 5-315

1770 Ashland Ave. Baltimore, MD 21205  
 RADIATION ANALYSIS REQUEST FORM

Plant/Site Name: Walnut Creek - Lot 140 County: Howard  
 Sample Source: Crape Myrtle Ct Location: H0-15-0110  
 (Well no., lab sink, sample tap, etc.)  
 Radon-222 Bottle A \_\_\_\_\_ Radon-222 Field Blank Bottle A \_\_\_\_\_  
 Bottle B \_\_\_\_\_ Bottle B \_\_\_\_\_  
 County  1  2 Plant No.

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code:   Federal Project:  5  
 Collector: S. Collins Telephone No.: 410-313-6287  
 Date Collected: 9/2/15 Time Collected: 10 a.m. \_\_\_\_\_ p.m.  
 Field pH: \_\_\_\_\_ Field Chlorine: \_\_\_\_\_  
 Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: Sample taken during yield test

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	0404	EPA 900.0	<2.0	9/4/15	WT	9/8/15
<input checked="" type="checkbox"/> Gross Beta	4100	0404	EPA 900.0	5.1 ± 1.9	9/4/15	WT	9/8/15
<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: 09/03/15 Received By: In JI  
 Data Release Signature: [Signature] Date: 9/9/15

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

SEND REPORT TO: Bert Nixon DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
Howard Co. Health Dept Laboratories Administration  
Bureau of Environmental Health 201 W. Preston St., Baltimore, MD 21201  
8930 Stanford Blvd Robert A. Myers, Ph.D., Director  
Columbia, MD 21045 1770 Ashland Ave. Baltimore, MD 21205

Lab No. 009403 B-3B

**RADIATION ANALYSIS REQUEST FORM**

Plant/Site Name: Field blank County: Howard

Sample Source: dH<sub>2</sub>O Location: HCHD Lab

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

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

County 113 Plant No. 

--	--	--	--	--	--	--	--	--	--

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: 

--	--

 Federal Project: 5

Collector: S. Collins Telephone No.: 410-313-0757

Date Collected: 9/2/15 Time Collected: \_\_\_\_\_ a.m. 4 p.m.

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

Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: \_\_\_\_\_

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	<u>0403</u>	<u>EPA900.0</u>	<u>&lt;2.0</u>	<u>9/14/15</u>	<u>WT</u>	<u>9/18/15</u>
<input checked="" type="checkbox"/> Gross Beta	4100	<u>0403</u>	<u>EPA900.0</u>	<u>&lt;4.0</u>	<u>9/14/15</u>	<u>WT</u>	<u>9/18/15</u>
<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: 09/03/15 Received By: In JI  
 Data Release Signature: [Signature] Date: 9/9/15

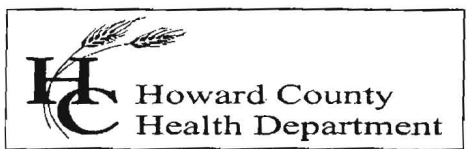
Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?	<input checked="" type="checkbox"/>		
Sample pH <2.0?	<input checked="" type="checkbox"/>		
Received within holding time?	<input checked="" type="checkbox"/>		

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

ORM REVISED 01/13  
 JHMH 4540 01/13

OP18 MAR 20 10/12

# Invoice



Bureau of Environmental Health  
 Attn: Bert Nixon, Director

DATE: OCTOBER 13, 2015  
 DATES OF SERVICE: AUGUST 27 & SEPT 2, 2015  
 INVOICE #: 2015-007

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

BILL Basslers Venture  
 TO 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
08/27/15	Gross alpha/beta testing performed for Walnut Creek, Lot 139, HO - 15 - 0109		\$45.00
09/02/15	Gross alpha/beta testing performed for Walnut Creek, Lot 140 HO - 15 - 0110		\$45.00
			<b>AMOUNT DUE</b>
			\$90.00

Please detach and return with payment.

REMITTANCE	
Invoice #	2015-007
Site Information	Walnut Creek Lots 139, and 140
Amount Due	\$90.00

*Receipt 57437  
 pd 10/29/15*

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

SEND REPORT TO:  
 Bert Nixon  
 Howard County Dept. of Health  
 Bureau of Environmental Health  
 8930 Stanford Blvd.  
 Columbia, MD 21045

State of Maryland  
 DHMH - Laboratories Administration  
 Division of Environmental Chemistry  
 RADIATION LABORATORY  
 1770 Ashland Avenue  
 Baltimore, Maryland 21205

Lab No.  
 02699 #209

LABORATORY ANALYSIS REQUEST FORM

Plant/Site Name: Walnut Creek Phase 4 - Lot 140 County: Howard  
 Sample Source: dH2O Location: ACHD Lab  
 (Well no., lab sink, sample tap, etc.)  
 Radon-222 Bottle A \_\_\_\_\_ Radon-222 Field Blank Bottle A \_\_\_\_\_  
 Bottle B \_\_\_\_\_ Bottle B \_\_\_\_\_

County 13 Plant No. \_\_\_\_\_

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other _____ <input type="checkbox"/>	Other _____ <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: \_\_\_\_\_ Federal Project: 5  
 Collector: A. Bialek Telephone No.: 410-313-7549  
 Date Collected: 6/16/17 Time Collected: \_\_\_\_\_ a.m. 3:30 p.m.  
 Field pH: \_\_\_\_\_ Field Chlorine: \_\_\_\_\_  
 Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: \_\_\_\_\_

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	2699	EP4900.0	<2.0	6/23/17	MA	6/28/17
<input checked="" type="checkbox"/> Gross Beta	4100	2699	EP4900.0	<4.0	6/23/17	MA	6/28/17
<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							

Date Received: 06/20/17 Received By: [Signature]  
 Data Release Signature: [Signature] Date: 6/28/17

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.: (443) 681-3766 •Fax No.: (443) 681-4507

FORM REVISED 05/15  
 DHMH 4540 01/13

ORIGINAL LABORATORY

# Water Testing Laboratories

P.O. Box 712  
Stevensville, MD 21666  
410-643-7711

of Maryland, Inc.

N V Homes  
C/O Rober Feezer Co.  
6321 Barnett Avenue  
Sykesville, Md 21784

Reporting Date: 6/22/2017  
Report #: M5053

Submitted Sample Address: 5023 Crepe Myrtle Court, Ellicott City, MD  
Submitted Sample Source: Holding Tank-well cap intact & no devices on system  
Date / Time Collected: 6/21/2017 01:00 PM  
Sample Type: Drinking Water  
Sampler/Company: K. Lee 4827KL, WTL of MD  
Field Record: Chlorine residual: Absent Clear when drawn pH: 7.1  
Well Tag #: HO-17-0160

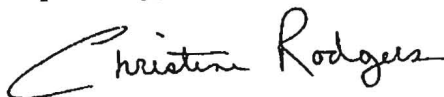
## Analytical Results

Parameter	Result	Units	Report Limit	Standard	Standard Type
Total Coliform Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
<i>E. Coli</i> Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
Nitrate as N	1.7	mg/L	0.5	10	EPA Primary MCL
Sand	Absent	mg/L or Absent	mg/L or Absent	< 5 mg/L*	MD Well Reg.
Turbidity	4.5	NTU	0.5	< 10 NTU*	MD Well Reg.


Notes:

- Bacteriological analysis of this sample indicates this water is  safe  for human consumption.
- Results in **BOLD** exceed the MCL, Action Level or MD well regulation.
- Samples received and examined within EPA's recommended holding times.
- MCL - Maximum Contaminant Level
- ND - Not Detected.
- \* Sand and turbidity standard for new wells - See Code of Maryland Regulations (COMAR) 26.04.04.16E(5). If sand is present, it is analyzed to determine amount of sand in mg/L.
- MCL Type -  
**EPA Primary:** The maximum contaminant level which is the highest level of contaminant that is allowed in drinking water. Primary MCLs are enforceable standards.  
**EPA Secondary:** Non enforceable guidelines regulating contaminants that cause cosmetic effects (such as skin or tooth discoloration) or aesthetic effects (such as taste or odor) in drinking water.  
**Action Level:** Defined in treatment techniques which are required processes intended to reduce the level of a contaminant in drinking water.
- We certify that the analyses performed for this report are accurate, and that the laboratory tests were conducted by methods approved by the US Environmental Protection Agency and the Maryland Department of the Environment.

Reported by,



C. Rodgers, Assistant Lab Manager, Microbiology

Reviewed by: 

National Weather Service  
**Advanced Hydrologic Prediction Service**



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- Aviation
- Marine
- Hurricanes
- Severe Weather
- Fire Weather
- Text Messages
- By State
- By Message Type
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- Forecast Models
- Numerical Models
- Statistical
- Models...
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- GFS-LAMP Prod
- Climate
- Past Weather
- Predictions
- Weather Safety
- Weather Radio
- Hazard Assmt...
- StormReady /
- TsunamiReady
- Skywarn™
- Education/Outreach
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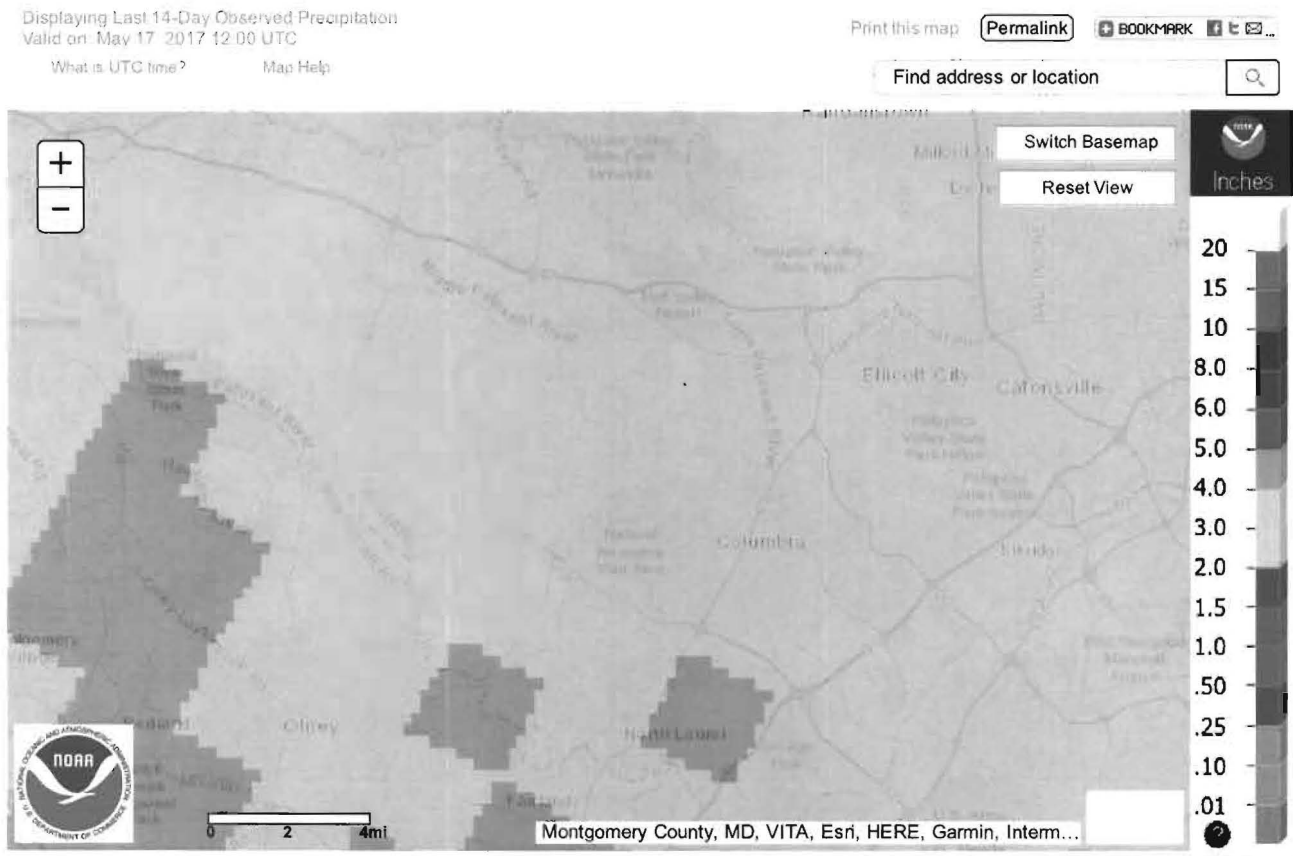
## The precipitation output files are being updated

On or after May 30, 2017, the precipitation output files will be updated to new formats and be stored in a new location. For further details on this update, see the Service Change Notification.

The precipitation generation is currently processing May 15, 2017 UTC and began at May 15, 2017 - 18:31 UTC.

Complete!

Warnings & Forecasts	Graphical Forecasts	National Maps	Radar	Water	Air Quality	Satellite	Climate
River Observations	River Forecasts	Experimental Long-Range River Flood Risk	<b>Precipitation</b>	River Download	Other Information		
QPE: Quantitative Precipitation Estimates	Download	About NWS Precip Analysis	Other Useful Information	Survey & Feedback	Regional / RFC Precip Data		



Download the full resolution version of the current map for:  (4000x2250 pixels)

**USA.gov**  
 Find us on **Facebook**  
 NWS on Facebook

<b>Timeframe</b> <a href="#">View Today's Analysis</a> <a href="#">View Yesterday's Analysis</a> <b>Archive Data:</b> <input type="radio"/> Yearly <input type="radio"/> Monthly <input type="radio"/> Daily		<b>Product</b> <input type="checkbox"/> Observed <input type="checkbox"/> Normal <input type="checkbox"/> Departure from Normal <input type="checkbox"/> Percent of Normal	<b>Units</b> <input checked="" type="radio"/> Imperial <input type="radio"/> Metric
<b>Time Range:</b> May 17, 2017 - Today May 17, 2017 - Last 7 Days May 17, 2017 - Last 14 Days May 17, 2017 - Last 30 Days		<b>Location</b> Full Conus	
<b>Mouse Location</b> Lat: 39.229 Lon: -76.674	<b>Map Overlays</b> Precipitation <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> River Forecast Center <input type="checkbox"/> Weather Forecast Office <input type="checkbox"/>		

Bookmark this page

If you would like to bookmark or share your current view, you must first click the "Permalink" button. The URL in your browser window can then be bookmarked or shared.

Data Availability

Data for the entire country are usually available by 12:30 pm Eastern Time (9:30 am Pacific Time).

Hourly Precipitation (East and Central US)

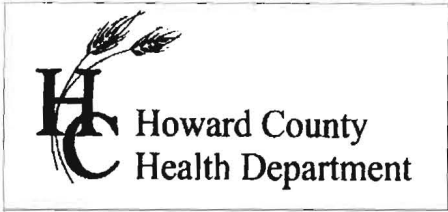
[Ask questions about the Precipitation Analysis website](#)

NWS Information

US Dept of Commerce  
 National Oceanic and Atmospheric Administration  
 National Weather Service  
 1325 East West Highway  
 Silver Spring, MD 20910  
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 Page last modified: 8-Mar-2017 4:18 PM

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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 4      140      Crape Myrtle Ct.  
Subdivision/Property Name      Lot #      Road Name

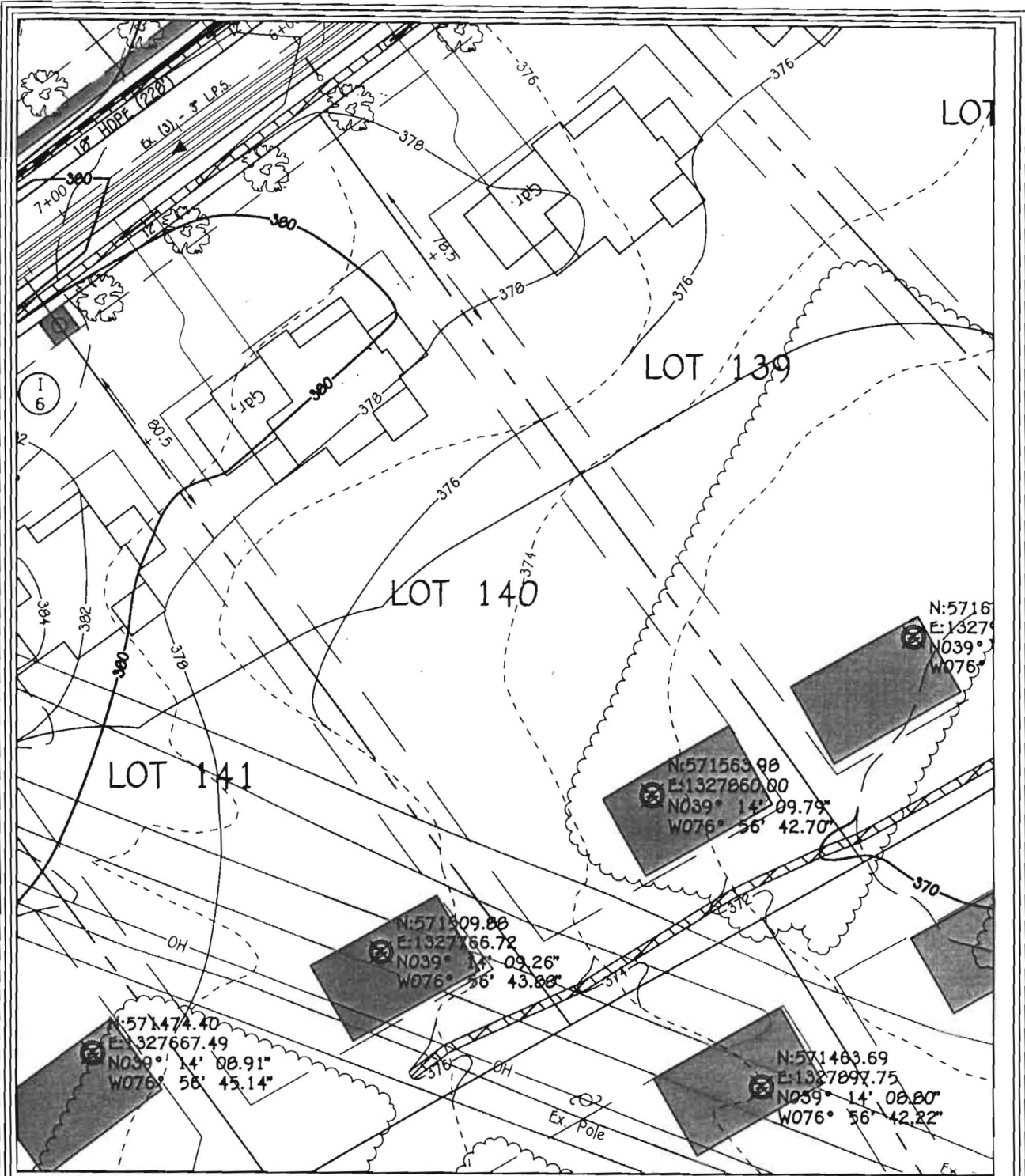
The well site has been staked by Fisher, Collins and Carter, Inc.,  
(professional land surveyor or company employing professional land surveyors)  
on 07/27/15 (date) and does not require a site inspection.

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

I:\2004\04001\dwg\PHASE FOUR FINALS\04001 Phase Four FINAL WELL MAPS.dwg, 7/22/2015 9:22:59 AM, 1:1



**WELL LOCATION INFORMATION:**  
 NORTHING = 571563.98    EASTING = 1327860.00  
 LATITUDE = N 39°14'10"    LONGITUDE = W 76°56'43"

**LOT 140 WELL MAP  
 WALNUT CREEK  
 PHASE FOUR**

Lots 23 - 68, Non-Buildable Preservation Parcels  
 'C', 'G', 'T', 'K', 'L' And 'M', Buildable Bulk Parcels 'E' And 'H'  
 & Non-Buildable Parcel 'J'  
 ZONED: RC-DEO & RR-DEO

TAX MAP No. 28    GRID Nos. 4, 5, 10-12, 17, AND 18    PARCEL No. 49  
 FIFTH ELECTION DISTRICT    HOWARD COUNTY, MARYLAND  
 DATE: July 22, 2015    SCALE: 1"=50'

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



Tag = 06/19/2017

<b>B 1</b>	<b>42866</b>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> please type	STATE PERMIT NUMBER <b>HO-17-0160</b> <small>fill in this form completely</small>
------------	--------------	--------------------------------	--	---

**OWNER INFORMATION**

Date Received (APA) 06/17/17  
8 MM DD YY 13

15 Last Name Bassler Owner Venture First Name  34

36 Street or RFD P.O. Box 482 55

57 Town Lisbon md 70 State 21765 72 Zip 76

**LOCATION OF WELL**

8 COUNTY Howard 21

23 SUBDIVISION Walnut Creek Phase 4 42

SECTION 44-46 LOT 140 Phase 4 48 50

52 NEAREST TOWN Clarksville 71

**DRILLER INFORMATION**

Driller's Name Larry Mayne M SD 024 License No. 81 76

Firm Name Joseph & Mayne Well Drilling

Address 5512 Ridge Rd Mt Airy 21771

Signature Larry Mayne Date 6-9-2017

**SOURCES OF DRILLING WATER**

1. well

11 STREET ADDRESS Crape Myrtle Ct 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH  
 WEST  
 EAST  
 SOUTH

34 DISTANCE FROM ROAD 92 37

ENTER FT OR MI FT 38 39

TAX MAP: 28 BLK:  PARCEL 49

**WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

**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

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

COUNTY NAME Howard COUNTY NO. XIII

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED 06/09/17 CO SIGNATURE \_\_\_\_\_ EXP. DATE 06/09/18

43 MM DD YY 48

DNZ: 06/09/17 DNZ: 6/16/17 DNZ: 6/16/17

APPROXIMATE DEPTH OF WELL 260 FEET 24 28

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)**

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  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 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. HO-17-0160  
70 71 72 73 74 75 76 77 78 79

**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

6/16 Hayland Farm Way

- picked up radium sample  
J. Mayne collected during yield test.

Crape Myrtle Ct well 125'  
15' 15' 15'-109'  
L1139

Shppard Lane

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

N ↑



**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: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Address: \_\_\_\_\_

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

License # and name of individual responsible for the field installation:

Name (Print): \_\_\_\_\_ License# \_\_\_\_\_

**\*A licensed individual must perform the actual installation. Apprentices must be under the 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: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO - 17 - 0160 *de*  
Site Address: \_\_\_\_\_

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: _____	Make: _____	Two piece watertight cap: _____
Model #: _____	Model#: _____	Screened, vented well cap: _____
Pump Capacity _____ GPM	Depth: _____ (36" min)	Cap secured to casing: _____
Well Yield: _____ GPM	NSF/WSC approved: _____	Conduit min 18" B.G.: _____
Depth of well encountered at time of pump installation: _____ (feet)		Conduit secured to well cap: _____
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 <u>inside of well casing</u> _____		

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

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

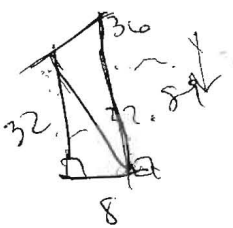
Signature of company representative responsible for installation \_\_\_\_\_ date \_\_\_\_\_

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

Date Insp. Requested: 06/19/2017 Date Insp. Approved: 06/19/2017 Inspector: [Signature]

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>	44"	06/19/2017 <i>@</i>
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"/>	36"	06/19/2017 <i>@</i>
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"/>	16"	06/14/2017
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>		
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>		

*late* 06/19/2017  
Used well line from HO-15-0110  
Previous to connect into pitless adapter  
from HO-17-060. NO Middle  
coupling. *@*



$$C^2 = a^2 + b^2$$

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

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 Address: \_\_\_\_\_

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

**\*A licensed individual must perform the actual installation. Apprentices must be under the 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: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
 Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO - 15 - 0110  
 Site Address: \_\_\_\_\_

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: _____	Make: _____	Two piece watertight cap: _____
Model #: _____	Model#: _____	Screened, vented well cap: _____
Pump Capacity _____ GPM	Depth: _____ (36" min)	Cap secured to casing: _____
Well Yield: _____ GPM	NSF/WSC approved: _____	Conduit min 18" B.G.: _____
Depth of well encountered at time of pump installation: _____ (feet)	Conduit secured to well cap: _____	
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 <u>inside of well casing</u>		

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

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

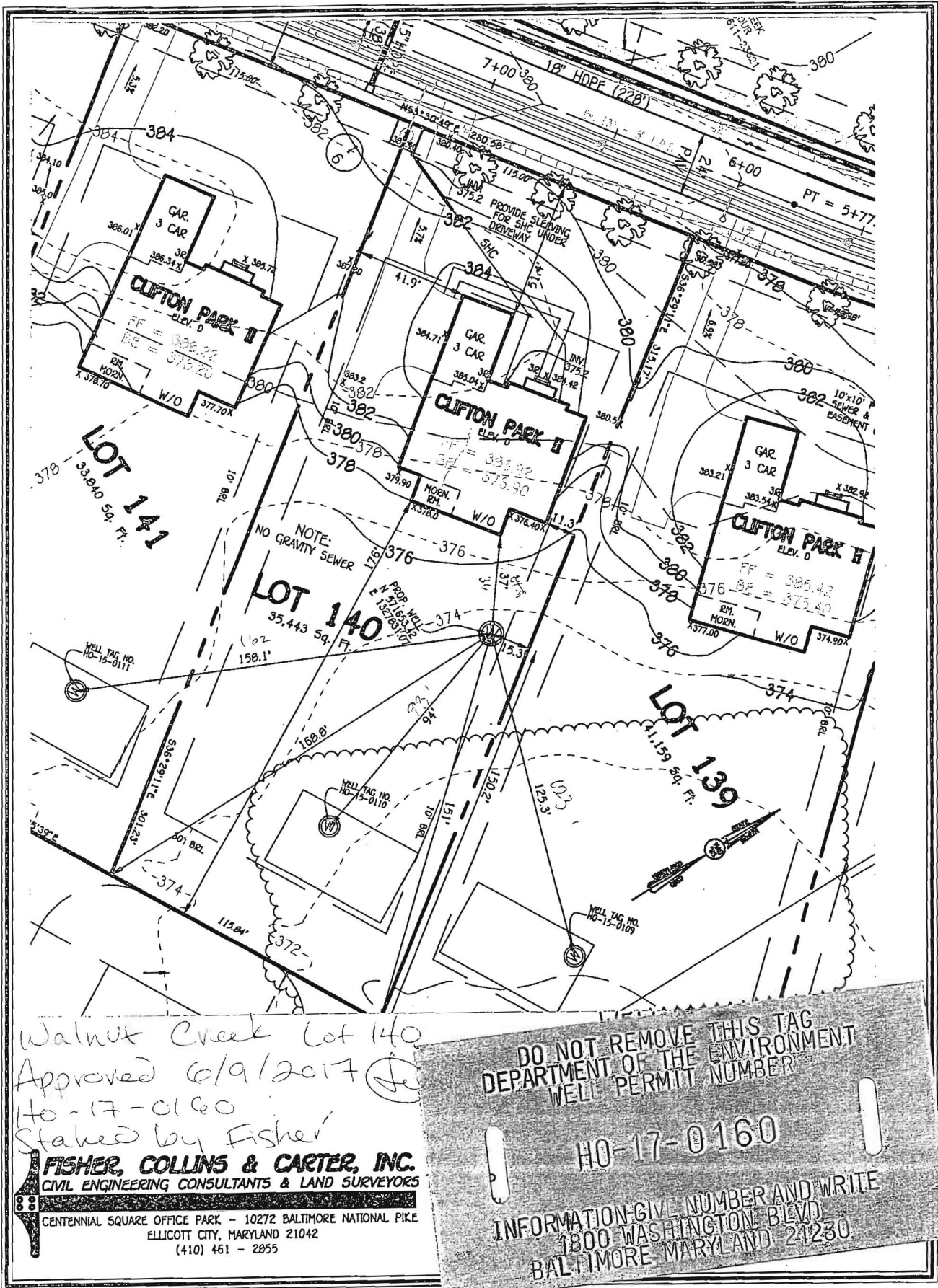
Signature of company representative responsible for installation \_\_\_\_\_ date \_\_\_\_\_

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

Date Insp. Requested: 05/03/2017 Date Insp. Approved: 05/04/17 Inspector: [Signature]

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>	36" 2017/05/03
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"/>	32" 2017/05/03
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"/>	23" 2017/05/03
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>	9" 2017/05/04
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>	* No Grout.

Maybe must  
 Call in to  
 grout 05/03/2017



Walnut Creek Lot 140  
 Approved 6/9/2017  
 Ho-17-0160  
 Staked by Fisher

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

DO NOT REMOVE THIS TAG  
 DEPARTMENT OF THE ENVIRONMENT  
 WELL PERMIT NUMBER  
**HO-17-0160**  
 INFORMATION GIVE NUMBER AND WRITE  
 1800 WASHINGTON BLVD  
 BALTIMORE MARYLAND 21230





# HOWARD COUNTY HEALTH DEPARTMENT

61403

DATE  
6/2/75

Received From

Banster Venture LLC PHONE # 410-489-1900

For

Well permit/lot 140  
Cape Light Ct.

- CASH
- CHECK

NO.  
40571

One hundred sixty \_\_\_\_\_ Dollars

\$ 100.00

Received By

King



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:

<u>Walnut Creek</u>	<u>140</u>	<u>Crape Myrtle Ct.</u>
<b>Subdivision/Property Name</b>	<b>Lot #</b>	<b>Road Name</b>

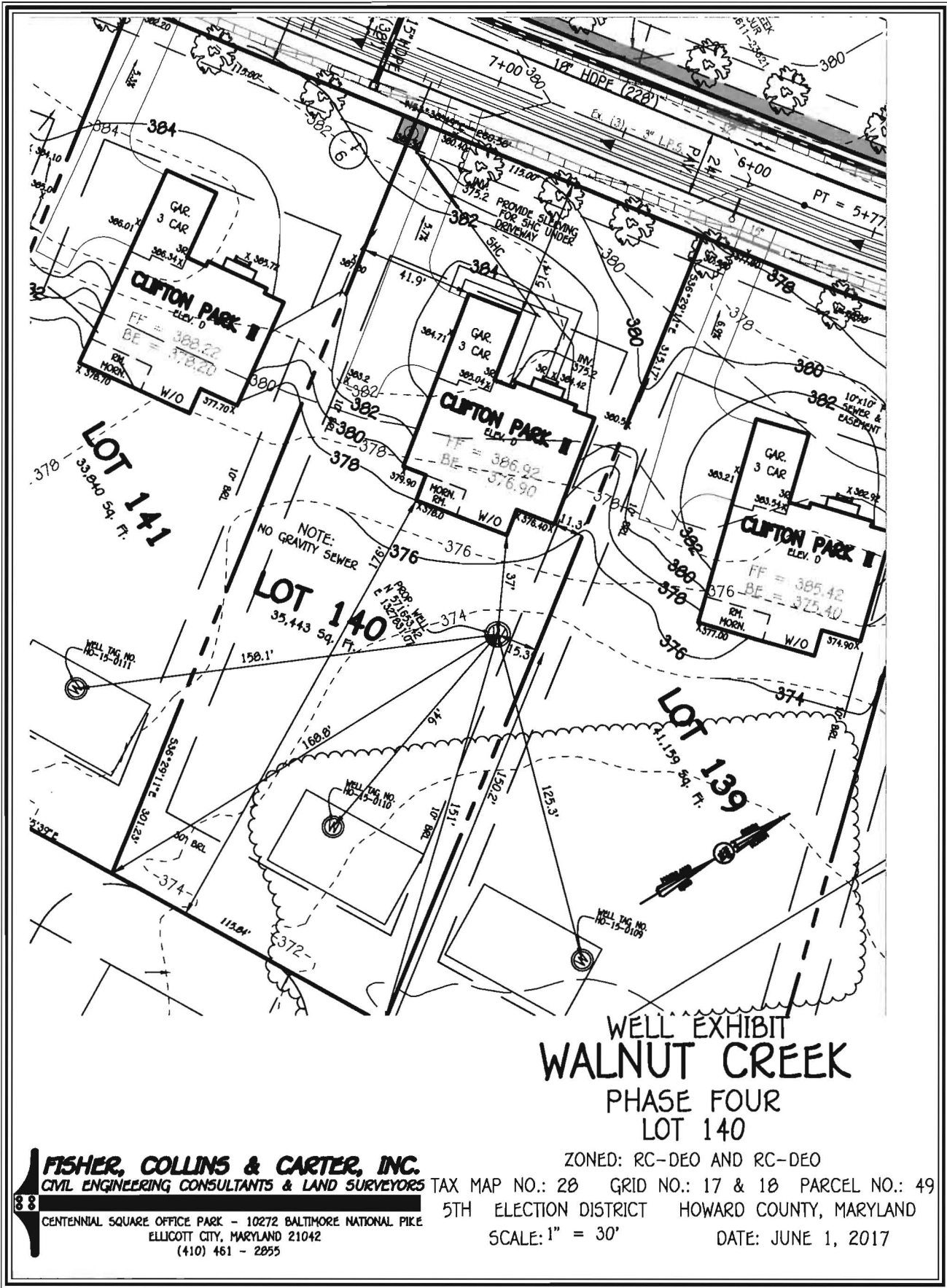
The well site has been staked by Fisher, Collins and Carter, Inc.,  
(professional land surveyor or company employing professional land surveyors)  
on 06/01/17 (date) and does not require a site inspection.

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

I:\2004\04001\dwg\PHASE FOUR FINALS\04001-3005 Walnut Crk Ph 4 Well Exhibit Lot 140 NV.dwg, 6/1/2017 9:05:37 AM, 1:1

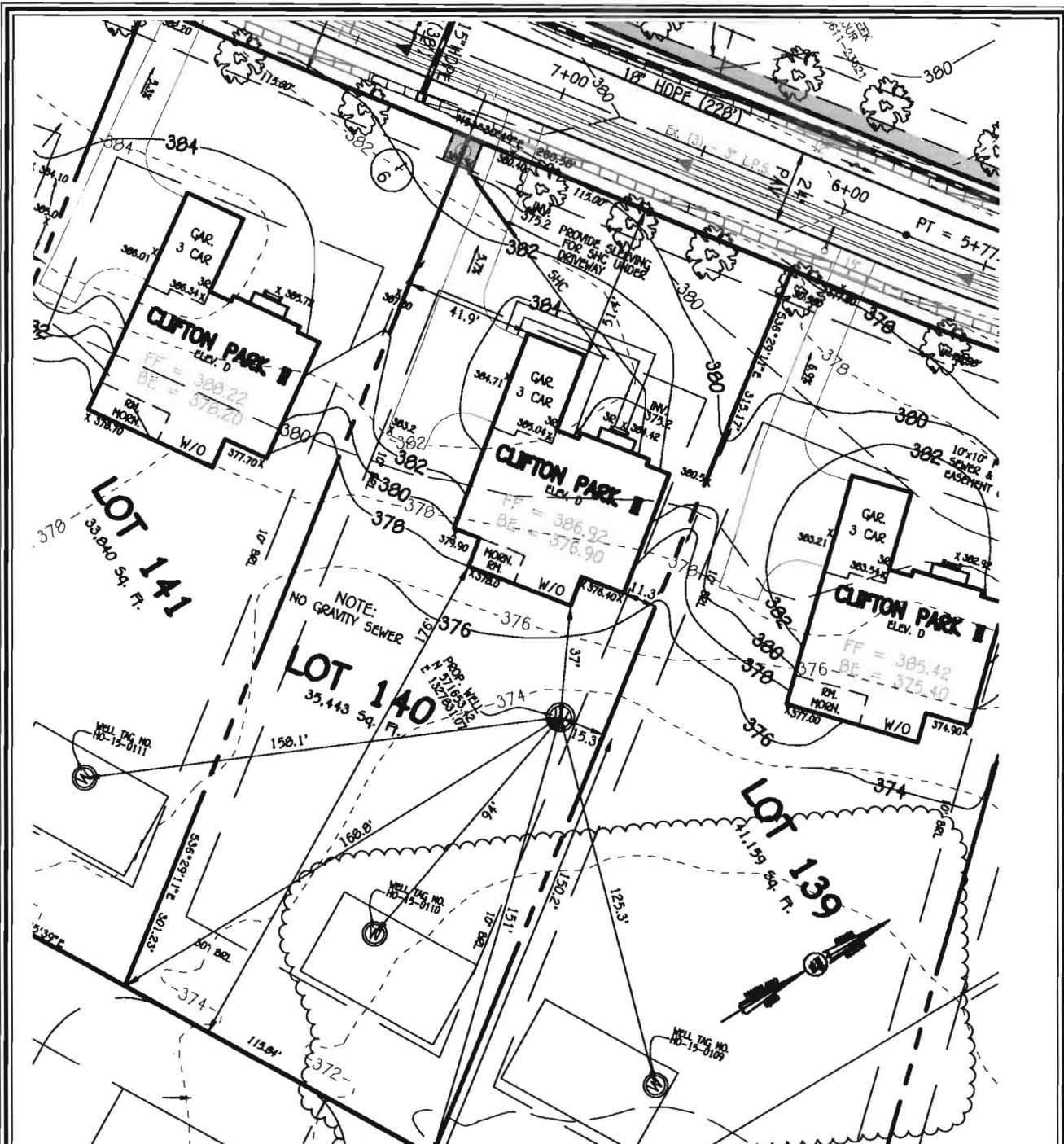


WELL EXHIBIT  
**WALNUT CREEK**  
 PHASE FOUR  
 LOT 140

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

ZONED: RC-DEO AND RC-DEO  
 TAX MAP NO.: 28 GRID NO.: 17 & 18 PARCEL NO.: 49  
 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 30'  
 DATE: JUNE 1, 2017

I:\2004\04001\dwg\PHASE FOUR FINALS\04001-3005 Walnut Crk Ph 4 Well Exhibit Lot 140 NV.dwg, 6/1/2017 9:05:37 AM, 1:1

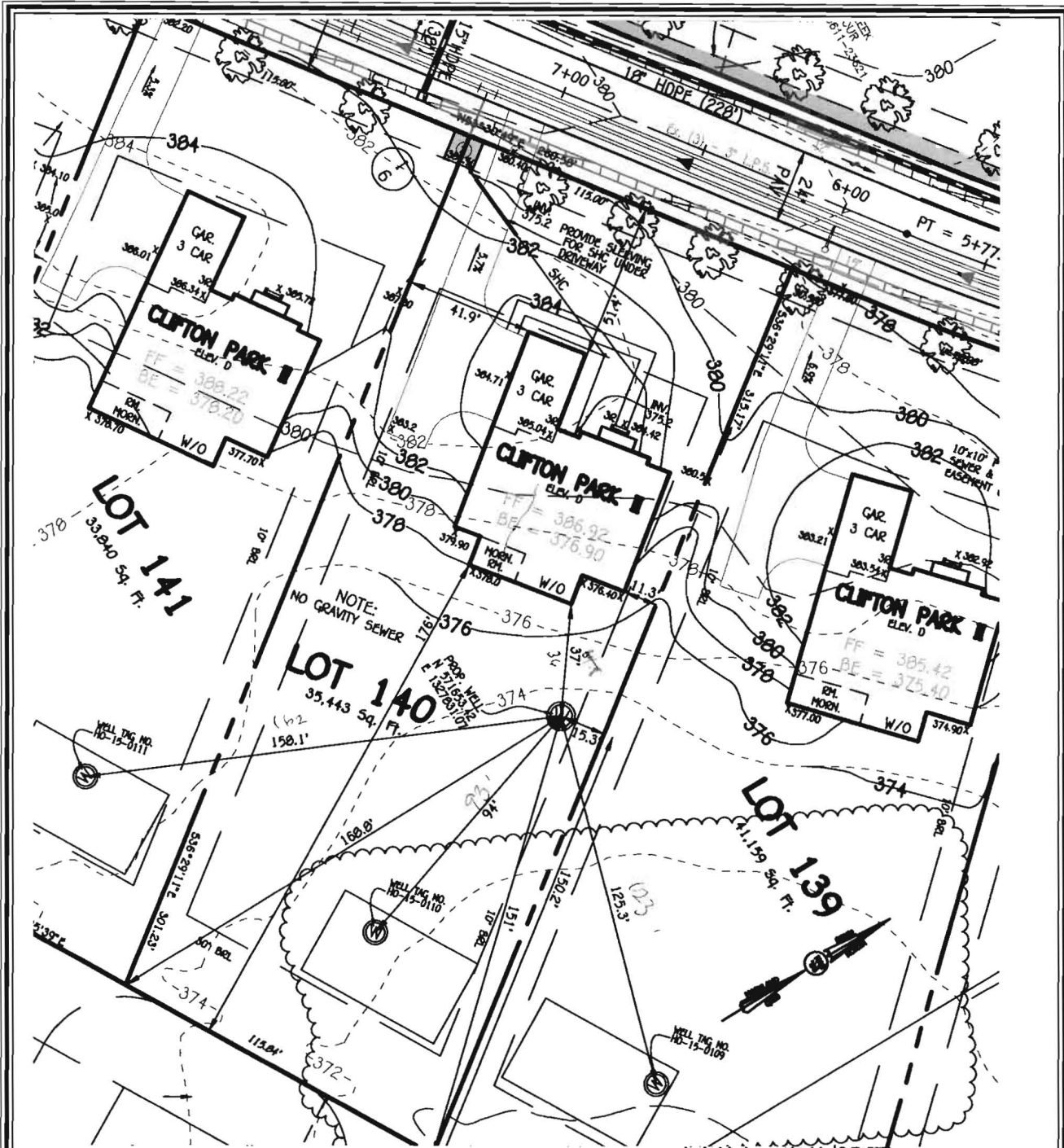


WELL EXHIBIT  
**WALNUT CREEK**  
 PHASE FOUR  
 LOT 140

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELLICOTT CITY, MARYLAND 21042  
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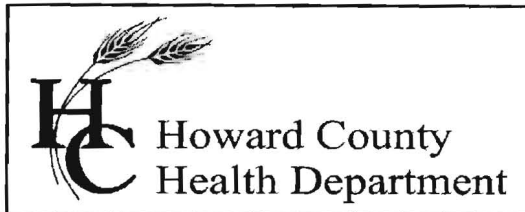
I:\2004\04001\dwg\PHASE FOUR FINALS\04001-3005 Walnut Crk Ph 4 Well Exhibit Lot 140 NV.dwg, 6/1/2017 9:05:37 AM, 1:1



WELL EXHIBIT  
**WALNUT CREEK**  
 PHASE FOUR  
 LOT 140

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELLICOTT CITY, MARYLAND 21042  
 (410) 461 - 2955

ZONED: RC-DEO AND RC-DEO  
 TAX MAP NO.: 28 GRID NO.: 17 & 18 PARCEL NO.: 49  
 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 30' DATE: JUNE 1, 2017



## 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 – December 28, 2017

June 28, 2017

Homeowner  
5023 Crape Myrtle Court  
Ellicott City, MD 21042

**RE: Walnut Creek, Lot 140  
5023 Crape Myrtle Court  
Building Permit: B17000250  
Well Permit: HO-17-0160**

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 **6/26/2017**. Final approval of the well line connection to the dwelling was granted on **6/19/2017**. The well construction was completed on **6/16/2017**. Water samples were collected on **6/21/2017**.

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 **6/16/2017**. Results showed a Gross Alpha level of **6.4 ± 2.1 pCi/L** and **Gross Beta** level of **6.3 ± 1.9 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

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-17-0160. 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,

A handwritten signature in black ink, appearing to read "Kevin M. Wolf", written over a horizontal line.

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

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

**SUBMIT COPIES OF COMPLETED FORM TO:**

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK  
 to  
 06/28/2017

DATE WELL ABANDONED: 6-16-2017 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

H10-15-0110

\* PERMIT NUMBER OF REPLACEMENT WELL:

H10-17-0160

\* PERSON ABANDONING WELL: Larry Mayne

WELL DRILLER'S LICENSE NUMBER: MSD027

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Barker Venture LLC

\* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: Clarksville

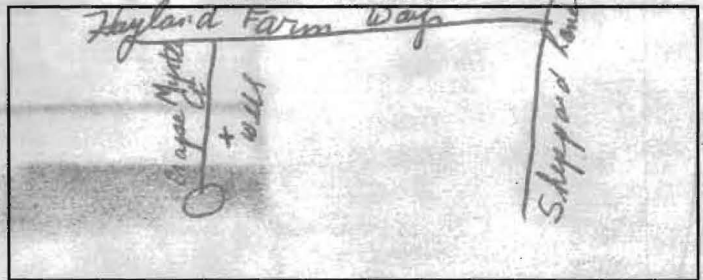
TAX MAP 28 BLOCK PARCEL 49

SUBDIVISION: Walnut Creek Phase 4

SECTION: LOT: 140 Phase 4

STREET ADDRESS: Aspe Myrtle Ct

SITE LOCATION MAP



LATITUDE 3 9 . 23 60 00

LONGITUDE 7 6 . 94 57 29

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Cement</u>	<u>0</u>	<u>45</u>
VOLUME OF MATERIAL USED		
<u>16 Bags Cement</u>		

\* TYPE OF WELL BEING ABANDONED:

- DRILLED  JETTED
- BORED  HAND DUG
- OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC  MUNICIPAL/PUBLIC
- IRRIGATION  INDUSTRIAL
- TEST/OBSERVATION  GEOTHERMAL

\* TYPE OF CASING:

- STEEL  PLASTIC
- CONCRETE  OTHER (specify) \_\_\_\_\_

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 45 FEET DEEP

WAS ANY CASING REMOVED?  YES  NO

If yes, length removed, in feet: 3

WAS CASING RIPPED OR PERFORATED?  YES  NO

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#  
Larry Mayne

MSD027 MWD / MSD / MGS

CIRCLE ONE

DATE

6-20-2017

COUNTY

## Wolf, Kevin

---

**From:** Ridgeway, Jacqueline  
**Sent:** Monday, June 26, 2017 9:03 AM  
**To:** Fisher, Mike; Miscbilling  
**Cc:** Hart, Amy; Rocco, Anthony; Martin, Sharhonda; Williams, Jeffrey; Bozzell, Duane; Bernard, Dana; Wolf, Kevin; Collins, Sarah; Tuder, Matt; Cagle, Clint; Srour, Matthew; Anastasia, James  
**Subject:** RE: U&O Release 5023 Crape Myrtle Court



NV Homes Lot  
140.pdf

I have attached the prorated shared septic invoice that will go out today.

---

**From:** Fisher, Mike  
**Sent:** Friday, June 23, 2017 3:17 PM  
**To:** Miscbilling <[Miscbilling@howardcountymd.gov](mailto:Miscbilling@howardcountymd.gov)>  
**Cc:** Hart, Amy <[AHart@howardcountymd.gov](mailto:AHart@howardcountymd.gov)>; Rocco, Anthony <[ARocco@howardcountymd.gov](mailto:ARocco@howardcountymd.gov)>; Martin, Sharhonda <[ssmartin@howardcountymd.gov](mailto:ssmartin@howardcountymd.gov)>; Williams, Jeffrey <[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)>; Bozzell, Duane <[DBozzell@howardcountymd.gov](mailto:DBozzell@howardcountymd.gov)>; Bernard, Dana <[dbernard@howardcountymd.gov](mailto:dbernard@howardcountymd.gov)>; Wolf, Kevin <[KWolf@howardcountymd.gov](mailto:KWolf@howardcountymd.gov)>; Collins, Sarah <[SCollins@howardcountymd.gov](mailto:SCollins@howardcountymd.gov)>; Tuder, Matt <[MTuder@howardcountymd.gov](mailto:MTuder@howardcountymd.gov)>; Cagle, Clint <[ccagle@nvrinc.com](mailto:ccagle@nvrinc.com)>; Srour, Matthew <[msrour@nvrinc.com](mailto:msrour@nvrinc.com)>; Anastasia, James <[janastas@nvrinc.com](mailto:janastas@nvrinc.com)>  
**Subject:** U&O Release 5023 Crape Myrtle Court

On the morning of June 22nd, I observed the start-up of a Sewage Grinder Pump at the Walnut Creek Shared Septic System:

Walnut Creek, Contract #4773  
NV Homes, Lot #140  
5023 Crape Myrtle Ct.  
Ellicott City, MD 21042

The Sewage Grinder Pump test was successful; the Bureau of Utilities releases its hold on this property for U&O.

*Thank You.*

*Michael D. Fisher Jr.*  
*Operations Supervisor I*  
*DPW-Bureau of Utilities*  
*Phone: (410)313-4975*  
*Fax: (410)313-4989*

SEND REPORT TO: Bert Nixon  
Howard County Dept. of Health  
Bureau of Environmental Health  
2930 Stanford Blvd.  
Columbia, MD 21045

State of Maryland  
 DHMH - Laboratories Administration  
 Division of Environmental Chemistry  
**RADIATION LABORATORY**  
 1770 Ashland Avenue  
 Baltimore, Maryland 21205

Lab No. **002700 320**

**LABORATORY ANALYSIS REQUEST FORM**

Plant/Site Name: Walnut Creek Phase 4 - Lot 140 County: Howard  
 Sample Source: <sup>5023</sup> Crape Myrtle Ct. Clarksville Location: HO-17-0160  
 (Well no., lab sink, sample tap, etc.)  
 Radon-222 Bottle A \_\_\_\_\_ Radon-222 Field Blank Bottle A \_\_\_\_\_  
 Bottle B \_\_\_\_\_ Bottle B \_\_\_\_\_

County 113 Plant No. \_\_\_\_\_

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other _____ <input type="checkbox"/>	Other _____ <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: \_\_\_\_\_ Federal Project: 5  
 Collector: A. Bialek Telephone No.: 410-313-7549  
 Date Collected: 6/16/17 Time Collected: 11:00 a.m. \_\_\_\_\_ p.m.  
 Field pH: \_\_\_\_\_ Field Chlorine: \_\_\_\_\_  
 Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: Sample collected during yield test

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	<u>2700</u>	<u>EPA900.0</u>	<u>6.4 ± 2.1</u>	<u>6/23/17</u>	<u>MA</u>	<u>6/28/17</u>
<input checked="" type="checkbox"/> Gross Beta	4100	<u>2700</u>	<u>EPA900.0</u>	<u>6.3 ± 1.9</u>	<u>6/23/17</u>	<u>MA</u>	<u>6/28/17</u>
<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"/>							
<input type="checkbox"/>							

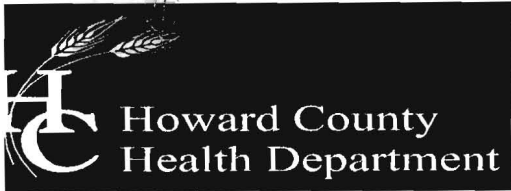
Date Received: 6/20/17 Received By: [Signature]  
 Data Release Signature: [Signature] Date: 6/28/17

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.: (443) 681-3766 •Fax No.: (443) 681-4507

## FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
9/2/15	On site during yield test. Well 140', 21' static water level. Started pumping at 7:45 am. test started at 8 am. 23' measuring point, 20 gpm. Radium sample collected at 10 am. (sc)
10/5/03/ 2017	Discovered Well was ungrouted. Ralph Mayne Well. Joseph Mayne on site. Will call in for grouting @ Follow up for grouting @
5/16/17	Checked status of well. Still ungrouted. <del>5/14/17 had 20" of rain [wunderground.com/history]</del> @ Check for precipitation levels ↳ 3" rain [5/17-5/18] 2017 - National Weather Service While well annular space was open to the depth of pitless adapter. Concern of run off + collapse. casing not as loose in annular space @
5/18/17	Called Joseph L Mayne Well drilling and asked if well had been grouted. Betty put it on their books. @
5/23/17 10:00 AM	Well annular space still uncovered. Collapse/cave in/runoff @ Blockage ~ 8' to grade measured from left of well tag (~ 9' from right of well tag. Conditions too wet for construction today. Called contractor + confirmed informed of need for getting. @



**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**

July 6, 2017

**Owner/Resident  
5023 Crape Myrtle Court  
Ellicott City, Maryland 21042**

**RE: Walnut Creek Lot 140  
5023 Crape Myrtle Court  
Ellicott City, Maryland 21042  
Well Tag: HO - 17 - 0160**

Dear Owner/Resident:

A sample was collected during a yield test on June 16, 2017 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  $6.4 \pm 2.1$  picocuries/liter (pCi/L), while the **Gross Beta** level was  $6.3 \pm 1.9$  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 well water supply is **within** EPA regulatory standards. Additional testing for these parameters will not be required..

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: Bassler's Venture  
Property file

SEND REPORT TO: Best Nixon  
Howard County Dept of Health  
Bureau of Environmental Health  
2930 Stanford Blvd  
Columbia, MD 21045

State of Maryland  
 DHMH - Laboratories Administration  
 Division of Environmental Chemistry  
**RADIATION LABORATORY**  
 1770 Ashland Avenue  
 Baltimore, Maryland 21205

Lab No. 027005205

**LABORATORY ANALYSIS REQUEST FORM**

Plant/Site Name: Walnut Creek Phase 4 - Lot 140 County: Howard

Sample Source: <sup>5023</sup> Crape Myrtle Ct. Clarksville Location: HO-17-0160

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

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

County 113 Plant No. 

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CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: 

--	--

 Federal Project: 5

Collector: A Bialek Telephone No.: 410-313-7549

Date Collected: 6/16/17 Time Collected: 11:00 a.m. \_\_\_\_\_ p.m.

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

Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: Sample collected during yield test

✓	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/>	Gross Alpha	4000	<u>2700</u>	<u>EPA900.0</u>	<u>6.4 ± 2.1</u>	<u>6/23/17</u>	<u>MA</u>	<u>6/28/17</u>
<input checked="" type="checkbox"/>	Gross Beta	4100	<u>2700</u>	<u>EPA900.0</u>	<u>6.3 ± 1.9</u>	<u>6/23/17</u>	<u>MA</u>	<u>6/28/17</u>
<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"/>								
<input type="checkbox"/>								

Date Received: 6/20/17 Received By: [Signature]  
 Data Release Signature: [Signature] Date: 6/28/17

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.: (443) 681-3766 •Fax No.: (443) 681-4507

SEND REPORT TO:

Best Nixon  
Howard County Dept. of Health  
Bureau of Environmental Health  
8930 Stanford Blvd.  
Columbia, MD 21045

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**  
1770 Ashland Avenue  
Baltimore, Maryland 21205

Lab No.

2699 4205

Field Blank LABORATORY ANALYSIS REQUEST FORM

Plant/Site Name: Wolant Creek Phase 4 Lot 140 County: Howard

Sample Source: DH2O Location: HCHD Lab

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

County 13 Plant No. \_\_\_\_\_

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: \_\_\_\_\_ Federal Project: 5

Collector: A. Bialek Telephone No.: 410-313-7549

Date Collected: 6/16/17 Time Collected: \_\_\_\_\_ a.m. 3.30 p.m.

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

Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: \_\_\_\_\_

✓	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/>	Gross Alpha	4000	2699	EPA900.0	<2.0	6/23/17	MA	6/28/17
<input checked="" type="checkbox"/>	Gross Beta	4100	2699	EPA900.0	<4.0	6/23/17	MA	6/28/17
<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"/>								
<input type="checkbox"/>								

Date Received: 06/20/17 Received By: [Signature]

Data Release Signature: [Signature] Date: 6/28/17

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"/>		

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