C 1 | 26526 — SEQUENCE NO. (MDE USE ONLY)

(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 4520385 / A520448

ST/CO USE ONLY
DATE Received MM 08 DD 01 YY 14

DATE WELL COMPLETED MM 04 DD 02 YY 14

Depth of Well 165 (TO NEAREST FOOT)

RL OK 11/24/14

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-55-2625

OWNER Bassler Venture LLC

WELL SITE ADDRESS Hayland Farm Way TOWN Clarksville MD

SUBDIVISION Walnut Creek SECTION PHASE III LOT 85

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 FROM	FEET TO	check if water bearing
Top Soil	0	2	
Clay	2	12	
Sandy	12	45	✓
Sand Stone	45	50	
MICKA	50	85	
Sand Stone	85	90	✓
MICKA	90	165	

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes Y / no 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 S D 417

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. D

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y / no N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM — BENTONITE CLAY BC

NO. OF BAGS 14 NO. OF POUNDS 490

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP ft. to 50 BOTTOM ft.

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

ST STEEL — CO CONCRETE — PL PLASTIC — OT OTHER

MAIN CASING TYPE: PL

Nominal diameter top (main) casing (nearest inch)! 6

Total depth of main casing (nearest foot) 58

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	depth (feet) to

SCREEN RECORD
screen type or open hole insert appropriate code below

ST STEEL — BR BRASS/BRONZE — HO OPEN HOLE — PL PLASTIC — OT OTHER

C 2

EACH SCREEN		DEPTH (nearest ft.)	
1	HO	56	165
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

from ____ to ____

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 TELESCOPE CASING — 72 LOG INDICATOR — 74 75 76 OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 34 ft.

WHEN PUMPING 54 ft.

TYPE OF PUMP USED (for test)

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

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES / NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height) + above / − below LAND SURFACE 2 (nearest foot)

LATITUDE 39.24098

LONGITUDE 76.95261

(DEFAULT COORD. WGS 84)

NOTES:

HOWARD COUNTY DEPARTMENT OF PLANNING & ZONING — RECEIVED

MDE/WMA/PER.071

COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 | 14984 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

5451630 please type

STATE PERMIT NUMBER: HO -95 -2627

fill in this form completely

Date Received (APA): 10 of 13

OWNER INFORMATION

Bassler Venture LLC (Last Name / First Name)

PO Box 482 (Street or RFD)

Lisbon MD 21765 (Town / State / Zip)

DRILLER INFORMATION

Ralph Mayne (Driller's Name) M S D 117 (License No.)

Ralph Mayne well Drilling (Firm Name)

17024 Hardy Rd Mt. Airy MD 21771 (Address)

Signature: [signature] Date: 10-4-13

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

B 3 LOCATION OF WELL

Howard (COUNTY)

Walnut Creek (SUBDIVISION)

SECTION: PHASE 3 LOT: 85

Clarksville (NEAREST TOWN)

B 4

SOURCES OF DRILLING WATER: 1 well 2. 3.

Hayland Farm Way (STREET ADDRESS)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH N, WEST W, E EAST, S SOUTH

DISTANCE FROM ROAD: 260 FT. (ENTER FT OR MI)

TAX MAP: 28 BLK: ____ PARCEL: 49

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- [I] INDUSTRIAL, COMMERCIAL, DEWATERING
- [P] PUBLIC WATER SUPPLY WELL
- [T] TEST, OBSERVATION, MONITORING
- [O] OPEN LOOP GEOTHERMAL
- [C] CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

A520385 A520448

HOWARD (COUNTY NAME) 13 (COUNTY NO.)

STATE SIGNATURE: _____ INSERT S →

DATE ISSUED: 01/08/2014 CO SIGNATURE: [signature] EXP. DATE: 1/8/15

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

(AIR-ROTary) AIR-PERcussion ROTARY (Hydraulic Rotary)

CABLE REVerse-ROTary DRive-POINT

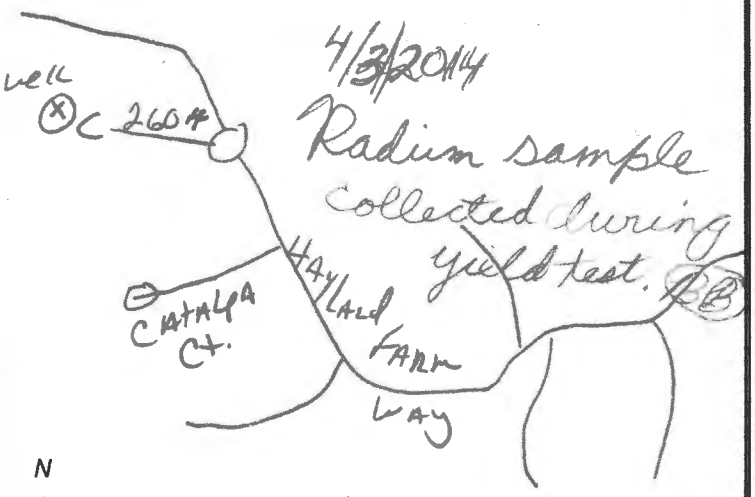
other _____

REPLACEMENT OR DEEPENED WELLS
(CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- [Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- [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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE): ____ - ____ - ____

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



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

APPROP. PERMIT NUMBER: H 0 2 0 0 6 G 0 2 0

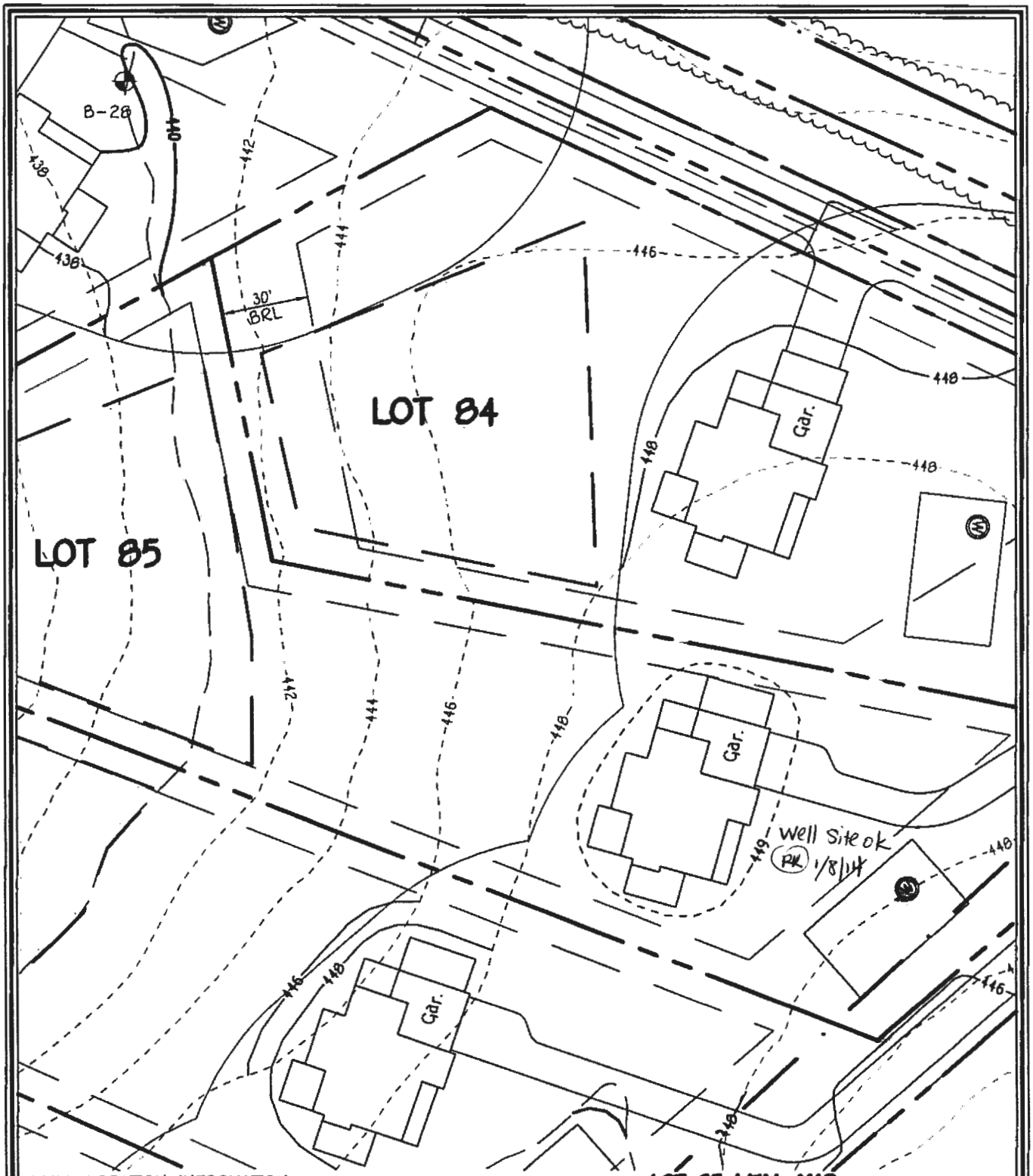
PERMIT No. HO -95 -2627

SPECIAL CONDITIONS: Radium Sample required at yield test & all wells must be at least 100 ft. apart

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

MDE/WMA/PER.071

② COUNTY



WELL LOCATION INFORMATION:
NORTHING = 573,346.37 EASTING = 1,325,749.64
LATITUDE = N39°14'27" LONGITUDE = W76°57'09"

LOT 85 WELL MAP

WALNUT CREEK
PHASE THREE

Lots 69 - 114, Non-Buildable Preservation Parcels 'O' Thru 'R' & 'V', Non-Buildable Parcel 'S', Buildable Preservation Parcel 'T' and Buildable Bulk Parcel 'U'
ZONED: RC-DEO & RR-DEO
TAX MAP No. 28 GRID Nos. 4, 5, 10-12, 17, AND 18
FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DATE: SEPTEMBER 26, 2013 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 - 2855

HOWARD COUNTY
HEALTH DEPARTMENT

Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – NOVEMBER 2, 2020

June 2, 2020

Homeowner
1225 Hayland Farm Way
Ellicott City, MD 21042

RE: Walnut Creek, Lot 161
12225 Hayland Farm Way
Building Permit: B19001221
Well Permit: HO-95-2627

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 **10/30/2019.** Final approval of the well line connection to the dwelling was granted on **11/21/2019.** The well construction was completed on **4/2/2014.** Water samples were collected on **5/20/2020.**

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 **4/3/2014**. Results showed a Gross Alpha level of **2.1** ± 0.9 **pCi/L** and **Gross Beta** level of **6.5 ± 2.0 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-95-2627. 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.**

HOWARD COUNTY
HEALTH DEPARTMENT

Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

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

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

In closing, please refer to our "Homeowner Fact Sheet" for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environments website which elaborates in further detail operation and maintenance of your Septic System.

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

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. Bielenson, 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 Three)	85	Hayland Farm Way
Subdivision/Property Name	**Lot #**	**Road Name**

☒ The well site has been staked by Fisher Collins and Carter ,
(professional land surveyor or company employing professional land surveyors)
on Sept. 19, 2013 (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

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 #:	137377	Account #:	1933
Reference:	Walnut Creek Lot 161	Company:	Fogles Well Pump & Treatment
Location:	12225 Hayland Farm Way	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	5/20/2020 1130	Site:	Kitchen Sink Tap
Date/Time Rec'd:	5/20/2020 1250	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	6.0
Collected By:	B. Wilkerson 9315BW	Well #:	HO-95-2627

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/21/2020 / 0845 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/21/2020 / 0845 / RER
Nitrate	3.21	mg/L	10	601	5/21/2020 / 0930 / CRS
Turbidity	<0.30	NTU	<10	SM20 2130B	5/21/2020 / 1000 / CRS
Sand	ND	mg/L	5	Visual/Gravimetric	5/21/2020 / 1000 / 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. NTU = Nephelometric Turbidity Units
4. Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
5. Sample collected by client, analyzed as received
6. ND:None Detected
7. Visual well check: Sealed, vented cap
8. pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19001224

Date Reported: 5/21/2020

MD State Certification # 133

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: Eagles well pump + water Treatment, LLC Telephone #: 410 795 5670
Address: 5580 Obrecht Rd.
Sykesville, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
Licensee # and name of individual responsible for the field installation:
Name (Print): David C Eagle License#: MSD2226
*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: Wallace Telephone #:
Subdivision: Walnut Creek Lot #: 161 Well Tag #: HO-95-2627
Site Address: 12225 Hayland Farm Way
Ellicott City, MD 21042

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Maker: GRUNDFOS	Maker: Campbell	Two piece watertight cap: YES
Model #: 15SQE07-180	Model #: NA	Screened, vented well cap: YES
Pump Capacity 15 GPM	Depth: 36" (36" min)	Cap secured to casing: YES
Well Yield 10 GPM	NSF/WSC approved: YES	Conduit min 18" B.G.: YES
		Conduit secured to well cap: YES

Depth of well encountered at time of pump installation: 165 (feet) Conduit secured to well cap: YES
If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.3.4
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: NA

Piping to house	House Connection
Type: 1" poly pipe	PVC sleeve to undisturbed soil at wall penetration: YES
PSI: 200 (160 psi min)	Length of sleeve(s): minimum five feet: 6'
Depth of supply line: 36" (36" min)	Sleeve sealed properly: YES

The water supply line is required to be at least 10 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: 11/21/19

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

Date Insp. Requested: Date Insp. Approved: 11/21/19 Inspector: KMW
Inspection Date:
- 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 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 ✓

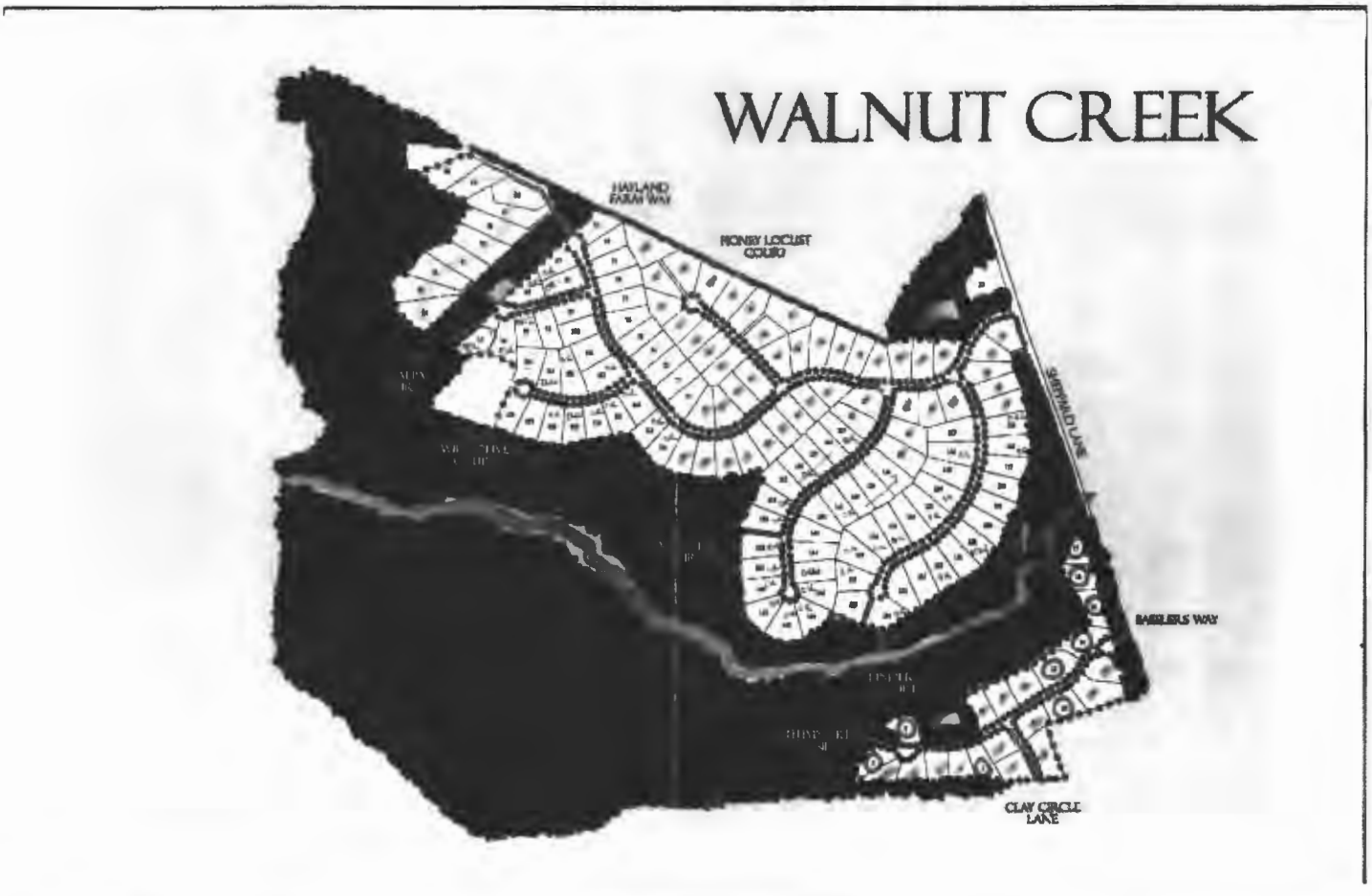
Williams, Jeffrey

From: Williams, Jeffrey
Sent: Friday, May 16, 2014 12:16 PM
To: Tim Feaga
Subject: Walnut Creek Radium testing
Attachments: Walnut Creek radium.pdf; Walnut Creek radium_2.pdf

Hi Tim. I met with Bert regarding possible easement of radium testing at all lots in Walnut Creek. I've attached a map showing the additional lots that we would like to still be tested to ensure that there is not an area of concern in the remaining lots. The lots in the green cloud have been tested and passed. The lots in the red cloud are lots that we would like to be tested. The lots at the top corner (82-86, 90-94) fall within the radium testing boundary. We want the lots near the river tested to prove whether the stream is in fact acting as a natural buffer from the positive tests on the other side and the passing lots above them. Furthermore, we'd like some representative lots tested in the other section near the upper testing boundary to prove that there are no hot spots. If these are also passing, then we would likely be comfortable waiving the remaining.

We'd be happy to meet with you to discuss if you prefer. Thanks.

Jeff Williams
Program Supervisor, Well & Septic Program
Bureau of Environmental Health
Howard County Health Dept.
410-313-4261
jewilliams@howardcountymd.gov



Howard County Health Department

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
Facebook: www.facebook.com/hocohealth

Maura Rossman, M.D., Health Officer

April 29, 2014

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

RE: Walnut Creek Lot 85 (Phase III)
Hayland Farm Way
Well Tag: HO - 95 – 2627

Dear Mr. Feaga:

A sample was collected during a yield test on April 3, 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 **2.1 ± 0.9 picocuries/liter (pCi/L)**, while the **Gross Beta** level was **6.5 ± 2.0 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 is within 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

Bert Nixon, Director
Bureau of Environmental Health

Enclosure
cc: Property file

Howard County Health Department

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
Facebook: www.facebook.com/hocohealth

Maura Rossman, M.D., Health Officer

April 29, 2014

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

RE: Walnut Creek Lot 85 (Phase III)
Hayland Farm Way
Well Tag: HO - 95 – 2627

Dear Mr. Feaga:

A sample was collected during a yield test on April 3, 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 **2.1 ± 0.9 picocuries/liter (pCi/L)**, while the **Gross Beta** level was **6.5 ± 2.0 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 **is** within 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

Bert Nixon, Director
Bureau of Environmental Health

Enclosure
cc: Property file

SEND REPORT TO: Bert Nixon
Howard Co. Env. Health
8930 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. E002606 E-7

RADIATION ANALYSIS REQUEST FORM

Plant/Site Name: Walnut Creek - Lot 85 County: Howard

Sample Source: Hayland Farm Way Location: HO-95-2627
(Well no., lab sink, sample tap, etc.)

Radon-222 Bottle A 2627
Bottle B

Radon-222 Field Blank Bottle A 2653 Sample
Bottle B

County 13 Plant No.

CHECK (one per Box)

Type		Service		Point of Collection		Testing	
Drinking Water	X	Community	☐	Source (Raw)	X	Emergency	☐
Landfill	☐	Non-Community	☐	Distribution (treated)	☐	Routine	X
Stream	☐	Private	X	MCL	☐	Recheck	☐
Other ____	☐	Other ____	☐			Special	☐

Submitters Code: Federal Project:

Collector: B. Baker Telephone No.: (410) 313-2643

Date Collected: 4/3/2014 Time Collected: ____ a.m. 12 p.m.

Field pH: Field Chlorine:

Nitric Acid Preserved: Yes X No Iced: Yes No X

Remarks: Sample Collected During Yield Test

☒	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
X	Gross Alpha	4000	2406	EPA 900	21 ± 0.9	4/8/14	CWB	4/10/14
X	Gross Beta	4100	2406	"	6.5 ± 2.0	"	"	"
☐	Radium-226	4020						
☐	Radium-228	4030						
☐	Total Uranium	4006						
☐	Radon-222 (Bottle A)	4004						
☐	Radon-222 (Bottle B)	4004						
☐	Radon Field Blank A	4004						
☐	Radon Field Blank B	4004						
☐	Tritium							
☐								

Date Received: 4/7/14 Received By: C Wally-Boyd

Data Release Signature: Deborah Miller - DMR Date: 4/10/14

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?	✓		
Sample pH <2.0?	✓		
Received within holding time?	✓		

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

SEND REPORT TO:

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

Lab No. E002405 ap-7

Lots 84 & 85

RADIATION ANALYSIS REQUEST FORM

Plant/Site Name: _____ County: Howard

Sample Source: Field Blank Location: _____

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

Radon-222 Bottle A _____ Radon-222 Field Blank Bottle A _____
Bottle B _____ Bottle B _____

County ☐☐ Plant No. ☐☐☐☐☐☐☐☐☐☐

CHECK (one per Box)

Type		Service		Point of Collection		Testing	
Drinking Water	☑	Community	☑	Source (Raw)	☐	Emergency	☐
Landfill	☐	Non-Community	☐	Distribution (treated)	☐	Routine	☑
Stream	☐	Private	☐	MCL	☐	Recheck	☐
Other _____	☐	Other _____	☐			Special	☐

Submitters Code: ☐☐ Federal Project: ☐

Collector: B. Baker Telephone No.: _____

Date Collected: 4/3/14 Time Collected: _____ a.m. 1200 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
☐	Gross Alpha	4000	2403	EPA 9310	<2.0	4/8/14	CWB	4/10/14
☐	Gross Beta	4100	2405		24.0			
☐	Radium-226	4020						
☐	Radium-228	4030						
☐	Total Uranium	4006						
☐	Radon-222 (Bottle A)	4004						
☐	Radon-222 (Bottle B)	4004						
☐	Radon Field Blank A	4004						
☐	Radon Field Blank B	4004						
☐	Tritium							
☐								

Date Received: 4/7/14 Received By: Cwatty-Boyd

Data Release Signature: Deborah Miller Date: 4/10/14

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?	✓		
Sample pH <2.0?	✓		
Received within holding time?	✓		

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

FORM REVISED 01/13
DHMH 4540 01/13

CUSTOMER COPY I