

C1 8732

SEQUENCE NO.
(MDE USE ONLY)

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

AS17422

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received

MM DD YY

8 13

DATE WELL COMPLETED

MM DD YY
12 21 2006

Depth of Well

22 280' 26 1/22/07
(TO NEAREST FOOT) O.K. (BA)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

SUBDIVISION

SECTION

LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM TO

check
if water
bearingSand
Gray Mica Rock0 59
59 280

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 27 NO. OF POUNDS 45 38

GALLONS OF WATER 162

DEPTH OF GROUT SEAL (to nearest foot)
from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN CASING TYPE
Nominal diameter
top (main) casing
(nearest inch)
Total depth
of main casing
(nearest foot)

60 61 63 64 66 70

OTHER CASING (if used)
diameter depth (feet)
inch from to
EACH CASINGscreen type
or open hole
(insert
appropriate
code
below)

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no
Y N

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 28.04.04 "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.: MS D 24

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: D

SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)GRAVEL PACK
IF WELL DRILLED
WAS FLOWING WELL
INSERT F IN BOX 69MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG
CASING INDICATOR OTHER DATA

COUNTY

C 3

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO
MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 22 ft.

WHEN PUMPING 70 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine
27 27 27
C centrifugal R rotary O other (describe below)
27 27 27
J jet S submersible
27 27

PUMP INSTALLED

DRILLER INSTALLED PUMP 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) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH
(nearest ft.) 43 47CASING HEIGHT (circle appropriate box
and enter casing height)+ above LAND SURFACE
49 3 (nearest foot)
- below 49 50 51

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND /OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

B 1		0930		STATE OF MARYLAND		STATE PERMIT NUMBER	
1		2		3		4	
5		6		7		8	
9		10		11		12	
13		14		15		16	
17		18		19		20	
21		22		23		24	
25		26		27		28	
29		30		31		32	
33		34		35		36	
37		38		39		40	
41		42		43		44	
45		46		47		48	
49		50		51		52	
53		54		55		56	
57		58		59		60	
61		62		63		64	
65		66		67		68	
69		70		71		72	
73		74		75		76	
77		78		79		80	
81		82		83		84	
85		86		87		88	
89		90		91		92	
93		94		95		96	
97		98		99		100	

Date Received (APA) 11/30/05

OWNER INFORMATION

Land MKTG Consultants Inc

3060 Washington Rd

Glenwood MD 217

DRILLER INFORMATION

Ralph E. Mayne M SD 117

Ralph E Mayne INC

17024 Hardy Rd Mt. Airy MD 21771

11-20-05

LOCATION OF WELL

Howard

Walnut Grove

Clarksville

2 M 1

WELL INFORMATION

5

500

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

☐ GEO-THERMAL

APPROXIMATE DEPTH OF WELL 150' FEET

APPROXIMATE DIAMETER OF WELL 6" 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 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 DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

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

APPROX. PERMIT NUMBER H0 2005G006

PERMIT No. H0-95-0422

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A517422

COUNTY NAME _____ COUNTY NO. _____

STATE SIGNATURE _____ INSERT S _____

DATE ISSUED 8/15/2006 Brian Baker 8/15/2007

NORTH GRID 507 000 EAST GRID 814 000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. Well

2. _____

3. _____

WRITE THE BOX NUMBER FROM THE MAP HERE

E 814

N 507

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

12/21/06

Radium Sample

Taken During

Yield Test

BB

350'

WATKINS BRIDGE LN

Holly Creek Ln

Sweet Meadow Ln

Well

Well Permit No. HO - 95-0422
Location of property (road) Sweet Maydon LN
Subdivision Wallingford Grove Lot 34 Block 1B Plat 2B Sec. Page 74
Well Driller Joseph ~~Kat~~ Mayne Owner De Frances

Depth of well 280
Distance of measuring point (M.P.) above ground 3'
Static water level (S.W.L.) below M.P. 22'

Time pump started 6:30 Pumping rate 15 gpm
Total time 5 min to reach pumping water level 70 ft. below M.P.

[illegible]

**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 #: 301-854-1533
Address: P.O. BOX 138
ASTON MD 20861

(Must circle one) Licensed Plumber Licensed Well Driller
License # and name of individual responsible for the field installation:

Licensed Well Pump Installer

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: Selfridge Builders Telephone #: 410-531-8730
Subdivision: WALNUT GROVE Lot #: 74 Well Tag #: HO-95-0422
Site Address: 5226 SWEET MEADOW LA
CLARKSVILLE, MD

Submersible Pump Data

Make: Grundfos
Model #: 1550G07180
Pump Capacity: 15 GPM
Well Yield: 15 GPM

Pitless Adapter

Make: Campbell
Model #: PA 520
Depth: 48" (36" min)
NSF approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: ✓
Screened, vented well cap: ✓
Cap secured to casing: ✓
Conduit min 18" B.G.: ✓
Conduit secured to well cap: ✓

Depth of well encountered at time of pump installation: 280 (feet)

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 CS

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

Piping to house

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

House Connection

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

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

Signature of company representative responsible for installation

date 11-9-11

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

Date Insp. Requested: _____

Date Insp. Approved: 10/20/11 (100)

Inspection Data: Pitless adapter and water supply line at least 36" below grade ✓

Two piece cap installed and attached to casing securely ✓

Elec. conduit extends at least 18" below grade/attached to cap properly ✓

Safety rope installed inside of well casing ✓

Correct well tag attached properly and casing 8" above finished grade ✓

Water supply line sleeved adequately at house connection ✓

Adequate grout observed below pitless adapter ✓

SWEET MEADOW LN.

PROP LPSS

39

400

73

4072
W-74

9/15/06 well site OK
Staked by GLW

74

+ 4/5



CONCEPTUAL HOUSE BOX



WELL BOX

4022
W-05

WELL SURVEY POINT

LEGEND

WELL LOCATION EXHIBIT - LOT 74

WALNUT GROVE

Lots 1 thru 88, Buildable Preservation Parcel "A",
Non-Buildable Preservation Parcels "B" Thru "I" And
and Non-Buildable Bulk Parcel "J"

GLWGUTSCHICK LITTLE & WEBER, P.A.

CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS
3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK
BURTONSVILLE, MARYLAND 20866

TEL: 301-421-4024 BAL: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186

SCALE: 1"=50'

ZONING: RC/RR-DEO

TAX MAP/GRID: 28-18/17

GLW JOB NO: 00753

AUG., 2006

1 OF 1



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

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

ATTENTION WELL DRILLERS!!!

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

- ☒ The well site has been staked by Gutschick, Little & Weber
on 11/10/2005
- ☐ _____ will call the Health Department
for a time to meet in the field to verify a well location.
- ☒ Site plan for new well is attached to well permit application.

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

KN



Howard County
Health Department

Bureau of Environmental Health
7178 Gateway Drive Columbia, MD 21046
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website: www.hchealth.org

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

INTERIM CERTIFICATE OF POTABILITY
PERMANENT DEVIATION FOR NITRATES

Expiration Date – August 10, 2012

February 10 2012

William H. and Susan S. Gibbs
6407 Few Star Ct
Columbia, MD 21044

RE: Walnut Grove, Lot 74
5226 Sweet Meadow Lane
Building Permit: B11000735
Well Permit: HO-95-0422

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 **1/20/2012**. Final approval of the well line connection to the dwelling was granted on **10/28/2011**. The well construction was completed on **12/21/2006**. Water samples were collected on **1/11/2012** and on **1/25/2012**.

Gross Alpha and Beta samples were also collected on 12/21/2006. Results showed a Gross Alpha level of **3.0 ± 1.1 pCi/L** and **Gross Beta** level of **5.0 ± 1.1 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.

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 untreated water sample collected on **1/11/2012** indicated a nitrate level of **11.4 mg/L**. **This exceeds the maximum contaminant limit of 10 mg/L set forth in COMAR 26.04.04.09.** After installation of a nitrate removal device (kitchen tap reverse osmosis system), a post-treatment water sample was collected on **1/25/2012** and indicated a nitrate level of **< 1.0 mg/L**.

This Department will grant a **permanent deviation** to the Interim Certificate of Potability on condition that the nitrate removal system effectively maintains a nitrate-nitrogen contaminant level of **10 mg/L or less**.

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

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a Maryland certified water laboratory certified for nitrates analysis perform a yearly nitrate analysis.

3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04.12F Enforcement and Environment Article 9-1311, Annotated Code of Maryland.**

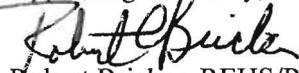
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-0422. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:

<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,



Robert Bricker, REHS/R.S.
Environmental Sanitarian
Well & Septic Program

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

**TRACE LABORATORIES, INC**

5 North Park Drive

Hunt Valley, MD 21030 USA

Telephone: 410/584-9099 / Fax: 410/584-9117

Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS**Requester:**

James H. Selfridge Builders Inc
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 84056-2**Report Date:** January 26, 2012*Nitrate Retest #1*

Property Sampled: 5226 Sweet Meadow Lane, 21029
Sample Location: Reverse Osmosis (R/O) Tap ✓
Residual Chlorine: <0.1 mg/L

Building Permit #: B11000735
Sampler ID #: 0765AR
Samples Iced: Yes

County: Howard
Map: 28

Subdivision: Walnut Grove
Parcel: 74

Lot #: 74

Date/Time Collected in Field: January 25, 2012 @ 10:35 am
Date/Time Received in Lab: January 25, 2012 @ 3:50 pm

Well Tag #: HO-95-0422
Well Condition: 2-Piece Cap, 1 Bolt Missing, Cap Secure

Water Treatment/Conditioning: Sediment Filter, Carbon Filters, Softener, Reverse Osmosis

PARAMETER	METHOD	MCL	RESULT	PASS/FAIL
Nitrate	SM 4500D	10 mg/L as N	<1.0 mg/L as N	Pass

*Pass w/ treatment
res 2/6/12*

Katherine C. Higgs
Manager – Drinking Water Testing



TRACE LABORATORIES, INC

5 North Park Drive

Hunt Valley, MD 21030 USA

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Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

James H. Selfridge Builders Inc
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 84056-1

Report Date: January 26, 2012

Bacteria Retest #1

Property Sampled: 5226 Sweet Meadow Lane, 21029
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B11000735
Sampler ID #: 0765AR
Samples Iced: Yes

County: Howard
Map: 28

Subdivision: Walnut Grove
Parcel: 74

Lot #: 74

Date/Time Collected in Field: January 25, 2012 @ 10:45 am
Date/Time Received in Lab: January 25, 2012 @ 3:50 pm

Well Tag #: HO-95-0422
Well Condition: 2-Piece Cap, 1 Bolt Missing, Cap Secure

Water Treatment/Conditioning: Sediment Filter, Carbon Filters, Softener, Reverse Osmosis

PARAMETER	METHOD	MCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	Absent	Pass
E. coli	SM 9223B	Absent	Absent	Pass

'Pass' reB 2/10/12

Katherine C. Higgs
Manager - Drinking Water Testing



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Hunt Valley, MD 21030 USA
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Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

James H. Selfridge Builders Inc
Attn: Sue Conklin
4781 Ten Oaks Road
Dayton, Maryland 21036

S/O Number: 83885

Report Date: January 12, 2012

Property Sampled: 5226 Sweet Meadow Lane, 21029
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B11000735
Sampler ID #: 0765AR
Samples Iced: Yes

County: Howard
Map: 28

Subdivision: Walnut Grove
Parcel: 74

Lot #: 74

Date/Time Collected in Field: January 11, 2012 @ 11:17 AM
Date/Time Received in Lab: January 11, 2012 @ 1:10 PM

Well Tag #: HO-95-0422
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Carbon Filters, Softener, Reverse Osmosis

PARAMETER	METHOD	MCL/*SMCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	PRESENT	FAIL
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass
Nitrate	SM 4500D	10 mg/L as N	11.4 mg/L as N	FAIL
Turbidity	EPA 180.1	10 NTU	2.0 NTU	Pass
pH	EPA 150.1	*6.5-8.5 Units	7.5 Units	***
Sand		Absent	Absent	Pass

Fail
NO₃ - Coliform not
ref 2/10/12

Katherine C. Higgins
Katherine C. Higgins
Manager - Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA

*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA

***A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



Howard County
Health Department

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TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

January 12, 2007

Land Marketing Consultants Inc.
3060 Washington Road
Glenwood, MD 21738

Sweet Meadow

RE: Walnut Grove, Lot# 74
Well Tag: HO-95-0422

To Whom It May Concern:

A sample was collected from a yield test on December 21, 2006 and submitted to GPL 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. In turn, this can provide information regarding naturally occurring radiation (i.e., Radionuclides) that may exist in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of 3.0 ± 1.1 picocuries/liter (pCi/L); while the **Gross Beta** level was 5.0 ± 1.1 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 target 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 appears safe for all uses. No additional testing for these parameters will be required to secure the future Use & Occupancy. However, other standard (potability) testing will still be necessary.

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, Deputy Director
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater
Well & Septic File

Send Report To:

Bert Nixon

Howard County Health

State of Maryland

DHMH - Laboratories Administration

Division of Environmental Chemistry

RADIATION LABORATORY

201 W. Preston Street, Baltimore, Maryland 21201

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

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: 7 No. B: _____ Field Blank Bottle No. A: _____ No. B: _____

Plant/Site Name: Walnut Grove - Lot 74 County: Howard

Sample Source: Sweet Meadow Lane Location: H0-95-0422
(well no., lab sink, sample tap, etc.)

County:



Plant No.



CHECK (one per box)

Drinking Water ☒
Landfill ☐
Stream ☐
Other ☐

Community ☐
Non-community ☐
Private ☒
Other ☐

Source (raw water) ☒
Distribution (treated) ☐
MCL ☐

Emergency ☐
Routine ☒
Recheck ☐
Special ☐

Collector: Brian Baker

Telephone No: (410) 313-2643

Date Collected: 12 / 21 / 2006

Time Collected: 10:00 a.m. _____ p.m.

Nitric Acid Preserved: Yes ☒ No ☐

Iced: Yes ☐ No ☒

Submitters Code: ☐ ☐

Federal Project: ☐

Field Data: _____

Remarks: Sample Taken During Yield Test ^{pH} Chlorine

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	<u>412218103</u>	<u>30511</u>	<u>12/22/06</u>
✓	Gross Beta	4100		<u>50211</u>	
	Radon-222 Bottle A	4004			
	Radon-222 Bottle B	4004			
	Field Blank A	4004			
	Field Blank B	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: _____ / _____ / _____

Supervisor: _____

Analytical Summary Report

Client Name:	Howard County Health Department	Client Sample ID:	WG74BB950422
Receipt Date/Time:	12/22/2006	Lab Sample ID:	612218-003-003-1/1
Prepared Date/Time:	12/26/2006	Sample Matrix:	WATER
Analysis Date/Time:	12/26/2006 11:29:00 PM	Analytical Method:	ALPHA/BETA BY METHOD 900.0

Isotope	Result	Uncertainty 2 σ	MDA	Q
Gross Alpha	2.962 pCi/L	± 1.084 pCi/L	1.281 pCi/L	
Gross Beta	4.946 pCi/L	± 1.09 pCi/L	1.785 pCi/L	

*Radium (Short Term a #3)
'Pass' RCB 2/10/12*



Bureau of Environmental Health
7178 Columbia Gateway Drive 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. Beilenson, M.D., M.P.H., Health Officer

REQUEST FOR PERMANENT DEVIATION TO
NITRATE STANDARDS FOR CERTIFICATE OF POTABILITY

DATE: 1/31/2012 WELL PERMIT #: HO - 95 - 0422
PROPERTY OWNER: Bill Gibbs
SUBDIVISION & LOT #: WALNUT GROVE / LOT 74
PROPERTY ADDRESS: 5226 SWEET MEADOW LANE
CLARKVILLE, MD 21029

CONDITIONS:

- 1) The well installed under permit # HO - 95 - 0422 has been documented to have a nitrate level of 11.4 ppm, which exceeds the MCL of 10 ppm.
- 2) After installation and operation of a nitrate filtration system, water samples collected on 1/25/12 indicated that the nitrate contamination has been reduced to <1.0 ppm at the primary drinking tap.

I hereby request that a Permanent Deviation to COMAR 26.04.04.09 be granted for the well installed under permit HO - 95 - 0422. I am fully aware of the conditions under which this deviation will be granted, and of my responsibilities as the well owner, which include advising any future buyer/ tenant of the installation, condition and maintenance responsibilities of the nitrate removal device.

Prospective Owner's Original Signature(s) [Person(s) that intend to live in the dwelling]

Bill Gibbs

Prospective Owner's Day Time Phone Number(s)

(410) 371-0418