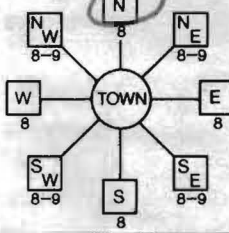
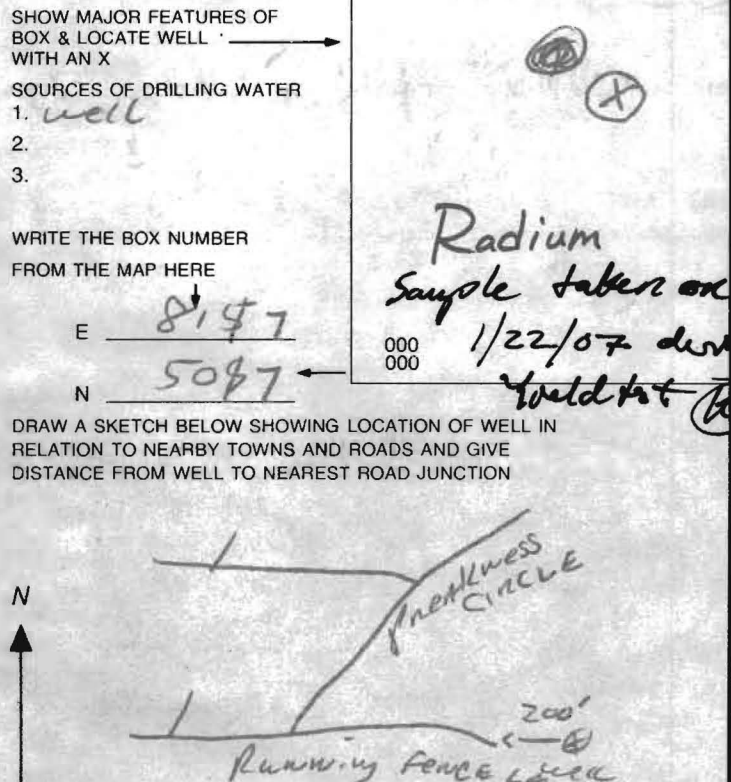


<b>C1</b> 8746		SEQUENCE NO. (MDE USE ONLY)		<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
						COUNTY NUMBER <b>(13) A517422</b>	
ST/CO USE ONLY DATE Received MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 01 22 07		Depth of Well 22 200 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" H0 75 0572	
OWNER STREET OR RFD SUBDIVISION		TOWN		LOT			
OWNED BY DeFrancis		TOWN		LOT			
STREET OR RFD Walnut Grove		TOWN		LOT			
SUBDIVISION		SECTION		LOT			
WELL LOG Not required for driven wells		GROUTING RECORD		PUMPING TEST			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT <b>CM</b> BENTONITE CLAY <b>BC</b> NO. OF BAGS 45 46 19 NO. OF POUNDS 45 46 1500 GALLONS OF WATER 104 DEPTH OF GROUT SEAL (to nearest foot) from 0 48 TOP 52 ft. to 30+ 54 BOTTOM 58 ft. (enter 0 if from surface)		HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE Buck WATER LEVEL (distance from land surface) BEFORE PUMPING 10 ft. WHEN PUMPING 25 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			
DESCRIPTION (Use additional sheets if needed)		Casing Record casing types insert appropriate code below MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 55 OTHER CASING (if used) diameter inch depth (feet) from to		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 47 CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE 2 (nearest foot) - below 49 50 51			
NUMBER OF UNSUCCESSFUL WELLS: 0		SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS PL PLASTIC HO HOLE OT OTHER DEPTH (nearest ft.) 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		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) Prop Line 100' well 85'			
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 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. 1 M D 112 DRILLERS SIGNATURE LIC. NO. 1 D SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA	

<b>B 1</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0539</div>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> 525642 please type	STATE PERMIT NUMBER <div style="font-size: 1.2em;">40-95-0572</div> fill in this form completely
<b>Date Received (APA)</b> 8 MM DD YY 13 Land Marketing Consultants 15 Last Name Owner First Name 34 3060 Rt. 92 36 GLENWOOD MD 21238 57 Town 70 State 72 Zip 76		<b>B 3</b> LOCATION OF WELL 8 COUNTY Howard 23 SUBDIVISION Walnut Grove SECTION 44 46 LOT 15 48 50 52 NEAREST TOWN CLARKSVILLE MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78	
<b>OWNER INFORMATION</b> Driller's Name RAY E. MAYNE M SD 112 Firm Name RAY E. MAYNE INC Address 12024 Handy rd Mt Airy MD 21221 Signature M. E. Mayne Date 11-11-06		<b>B 4</b> 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD Running fence LA 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 240 37 WEST 38 39 DISTANCE FROM ROAD ENTER FT OR MI 28 18 PARCEL 74	
<b>B 2</b> WELL INFORMATION APPROX. PUMPING RATE 5 GAL. PER MIN. 8 12 AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY 14 20		<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL	
APPROXIMATE DEPTH OF WELL 150 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		<b>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</b> COUNTY NAME Howard COUNTY NO. 13 STATE SIGNATURE INSERT S 41 DATE ISSUED 12/4/2006 Brian Baber 12/4/2007 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 507 000 EAST GRID 817 000 50 55 57 63	
<b>METHOD OF DRILLING (circle one)</b> BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROtary DRIVE-POINT other		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 8147 N 5087 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
<b>REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		<b>Not to be filled in by driller (MDE OR COUNTY USE ONLY)</b> APPROP. PERMIT NUMBER H02005G-006 PERMIT No. H0-95-0572 70 71 72 73 74 75 76 77 78 79	
<b>SPECIAL CONDITIONS</b> NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - Need Radium Sample			

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: Do-It Plumbing & Heating LLC Telephone #: 240-882-0069  
Address: 9955 Old Mill Rd  
E. I. Md 21042

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Duane Gilbert License# 21899

\*A licensed individual must perform the actual installation. Apprentices must be under the 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: TBF Telephone #: 410-480-0023  
Subdivision: Walnut Grove Lot #: 15 Well Tag #: HO-95-0572  
Site Address: 12200 Running Fence Ln.  
Clarksville, Md.

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Wyers</u>	Make: <u>American Granby</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>25P72-12P11-P4-1</u>	Model#: <u>PT800</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>12</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>15</u> GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>200</u> (feet)		Conduit secured to well cap: <u>yes</u>
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors or Cable guards are required - Must circle one		
Safety rope, if used, attached to inside of well casing with eye bolt <u>NO</u>		

Piping to house  
Type: plastic - one inch  
PSI: yes (160 psi min)  
Depth of supply line: yes (36" min)

House Connection  
PVC sleeved to undisturbed soil at wall penetration: yes  
Approximate length of sleeve: 10 ft  
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.

Duane Gilbert  
Signature of company representative responsible for installation

Nov 5, 2012  
date

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

Date Insp. Requested: _____	Date Insp. Approved: _____
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 _____	



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: \_\_\_\_\_ 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 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: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: 15 Well Tag #: HO - 75-0572  
Site Address: 12200 Running Fence Lane

**Submersible Pump Data**

Make: \_\_\_\_\_  
Model #: \_\_\_\_\_  
Pump Capacity \_\_\_\_\_ GPM  
Well Yield: \_\_\_\_\_ GPM

**Pitless Adapter**

Make: \_\_\_\_\_  
Model#: \_\_\_\_\_  
Depth: \_\_\_\_\_ (36" min)  
NSF approved: \_\_\_\_\_

**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: \_\_\_\_\_ (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

Safety rope, if used, attached to inside of well casing with eye bolt \_\_\_\_\_

**Piping to house**

Type: \_\_\_\_\_  
PSI: \_\_\_\_\_ (160 psi min)  
Depth of supply line: \_\_\_\_\_ (36" min)

**House Connection**

PVC sleeved to undisturbed soil at wall penetration: \_\_\_\_\_  
Approximate length of sleeve: \_\_\_\_\_  
Sleeve caulked and 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: \_\_\_\_\_ Date Insp. Approved: 4/19/2012 **BA**

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 ☒

No Grout Down  
to 7' Below Grade  
Fill





Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
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](http://www.facebook.com/hocohealth)  
Twitter: HowardCoHealthDep

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

**INTERIM CERTIFICATE OF POTABILITY**  
**PERMANENT DEVIATION FOR RADIUM**  
Expiration Date – June 13, 2013

December 13, 2012

Homeowner  
12200 Running Fence Lane  
Clarksville, MD 21029

**RE: Walnut Grove Lot 15**  
**12200 Running Fence Lane**  
**Building Permit: B11000137**  
**Well Permit: HO-95-0572**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **12/12/12**. Final approval of the well line connection to the dwelling was granted on **04/19/12**. The well construction was completed on **01/22/07**. Water samples were collected on **11/29/12**.

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 **11/29/12**. Results showed a Gross Alpha level of **60.5 ± 4.1 pCi/L** and Gross Beta level of **18.6 ± 1.7 pCi/L**. **This exceeds the maximum contaminant level (MCL) of 15 pCi/L and/or 50 pCi/L, respectively.**

After installation of a radionuclide removal device(kitchen tap reverse osmosis system), post-treatment water samples were collected on **11/29/12** and indicated a Gross Alpha level of **1.0 ± 0.6 pCi/L**, a Gross Beta level of **0.9 ± 0.7 pCi/L**, and a Radium 226/228 level of **0.2 ± 0.1, 0.9 ± 0.7 pCi/L**.

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

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

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

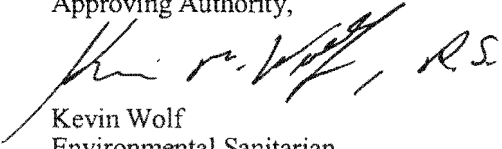
2. It is recommended that a Maryland certified water laboratory certified for radionuclide analysis perform a yearly radionuclide analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make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

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-0572. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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

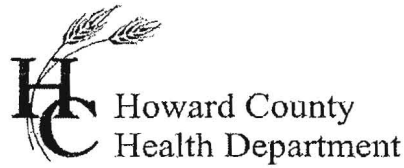
Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:  
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,



Kevin Wolf  
Environmental Sanitarian  
Well & Septic Program

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



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

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

**AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN  
ON-SITE TREATMENT SYSTEM**

This agreement is entered into by and between the Howard County Health Department ("the Health Department") and Netsere Tesfayohannes and Eden Kahsay ("the Owner").

WHEREAS, the Owner owns a tract of land at street address 12200 Running Fence Ln., Clarksville, MD 21029 and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # 28, Block # 18, Parcel # 74, Deed Reference # 13662/043 and Tax Account # 05-448743 ("the Property").

WHEREAS, the Property lacks an available public drinking water source and is required to have an individual well as the source of drinking water for the residence of the property.

WHEREAS, the Owner has installed a residential drinking well under well permit # HO-95-0572 that has been tested by the Health Department (or a private laboratory certified to perform testing) for radionuclide particles. The results of the tests have shown that the gross alpha particle content and/or the gross beta particle content and/or the combined radium 226/228 levels exceeds the standards of 15 picocuries per liter (pCi/L), 4 millirems per year (mrem/yr) and/or 5pCi/L respectively.

WHEREAS, The Maryland Department of the Environment (MDE) has promulgated rules and regulations under which a Certificate of Potability may be issued and has delegated the authority to issue such Certificate to the Health Department.

WHEREAS, MDE regulations permit the Health Department to issue as a special condition, a permanent deviation to the Certificate of Potability for individual wells where treatment has been installed to meet the maximum contaminate levels (MCL's) for radionuclides.

WHEREAS, MDE has determined that radium can be effectively removed from the drinking water by the use of treatment devices (e.g., ion exchange or reverse osmosis).

WHEREAS, the Owner is requesting that the Health Department issue a Certificate of Potability contingent upon installation and maintenance of a water treatment device to reduce radionuclides.

WHEREAS, neither the Owner nor the Health Department has knowledge of an alternative safe source of water for the Property.



NOW THEREFORE, the parties have agreed to the following terms and conditions:

1. The Owner will record this Agreement among the Land Records of Howard County, Maryland and provide confirmation to the Health Dept.
2. The Owner agrees to install and maintain a water treatment device, which effectively reduces the gross alpha, gross beta and radium levels to below their respective MCL. The Health Department shall verify that the treatment device is operating effectively and the Owner agrees to allow access to the Health Department to collect a follow-up sample(s).
3. The Health Department shall issue a Certificate of Potability for the well once follow-up sampling shows acceptable gross alpha, gross beta (short and long term) and radium 226 / 228 levels.
4. The Owner agrees that there shall be no liability on part of the Health Department for any immediate or long term impacts to health or property, under any circumstance or including, but not limited to, treatment device failure, improper maintenance or installation, or defect. The Health Department does not warrant nor guarantee that the device will adequately or properly function and the Owner agrees to implement and pay for any necessary changes or corrections.
5. The Owner acknowledges and agrees that neither the Health Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system or treatment device.
6. This Agreement shall not be construed to limit any authority of the Health Department to protect the public health, safety or enjoyment of property or to issue any other orders to take any other action, which is now or may hereafter be within its authority.
7. This agreement contains the entire agreement and understanding between the Health Department and the Owner. There are no additional terms other than as contained in this Agreement. This Agreement may not be modified except in writing signed by each of the parties or their authorized representatives.
8. The Agreement shall run with the land and binds the Owner, his heirs, successors, and assigns. The owner agrees to provide a copy of this agreement to any purchaser or lessee of the property.
9. The laws of the State of Maryland govern the provisions of all transactions.

The parties have signed and sealed this Agreement on the dates set forth below.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Netsere Tesfayohannes Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Eden Kahsay Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Howard County Health Department

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness



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

## TO ALL INTERESTED PARTIES

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

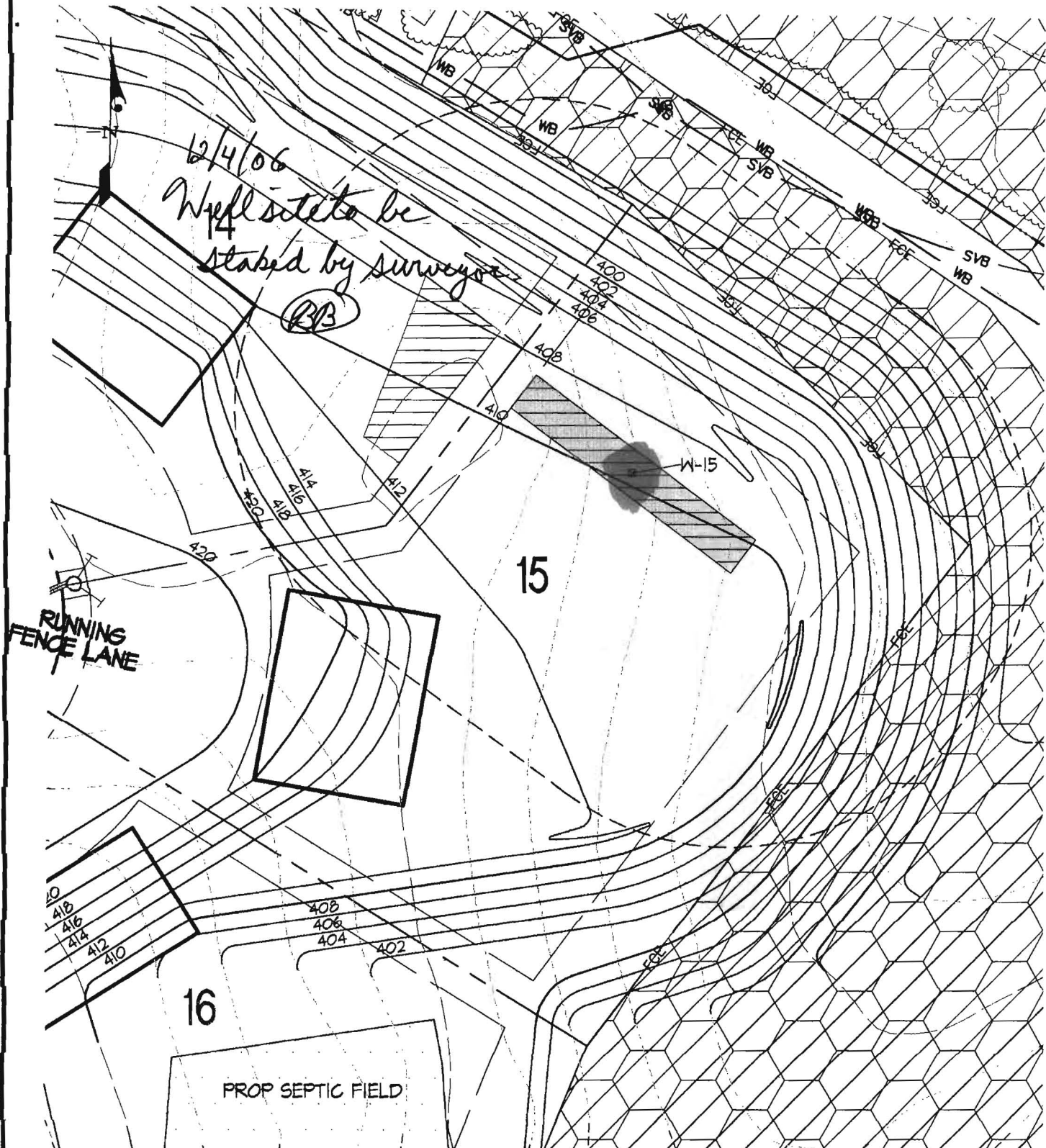
Well Site Location:

<u>Walnut Grove</u>	<u>15</u>	<u>Running Fence Lane</u>
Subdivision/Property Name	Lot #	Road Name

- ☒ Staking to take place after initial review (as discussed with Bob Weber).
- ☐ The well site has been staked by \_\_\_\_\_ ,  
(professional land surveyor or company employing professional land surveyors)  
on \_\_\_\_\_ (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 3/11/05



# **LEGEND**

- PROPOSED LPSS
- PROPOSED STORM DRAIN

HOUSE  
BOX



WELL BOX

W-05



WELL  
SURVEY  
POINT

## **WELL LOCATION EXHIBIT - LOT 15**

### **WALNUT GROVE**

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

## **GLW GUTSCHICK 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: 00153

OCT., 2006

1 OF 1



60.00<sup>#</sup>

Clerk of The Court

WG 15 -

Record. RADIONUCLIDE letter

ational Document Solutions, LLC (800) 325-3120 T-70209

Circuit Court for  
HOWARD COUNTY  
Clerk of the Court.  
MARGARET D. COPPAPORT  
8360 COURT AVENUE  
ELLICOTT CITY, MD 21043-  
(410) 313-2111

Transaction Block:	3005
Ref: 245	
DISC	AMOUNT
IMP FD SURE \$5	40.00
RECORDING FEE \$20.00	20.00
SUBTOTAL:	60.00
TOTAL CHARGES:	60.00
PAYMENTS	
CHECK	60.00
TOTAL TENDERED:	60.00

Cashier: VLB Req # H090  
Rcpt # 74252  
Date: Nov 29, 2012 Time: 11:14 am



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:**

Trinity Homes/TBI Homes  
3675 Park Avenue, Suite 301  
Ellicott City, Maryland 21043

S/O Number: 87410-2

Report Date: December 11, 2012

*Treated Sample*

Property Sampled: 12200 Running Fence Lane, 21029  
Sample Location: Reverse Osmosis (R/O) Tap  
Residual Chlorine: <0.1 mg/L

Building Permit #: B11000137  
Sampler ID #: 7483AM  
Samples Iced: Yes

County: Howard  
Map: 28

Subdivision: Walnut Grove  
Parcel: 74

Lot #: 15

Date/Time Collected in Field: November 29, 2012 @ 3:11 – 3:20 pm

Date/Time Received in Lab: November 29, 2012 @ 4:20 pm

Well Tag #: HO-95-0572  
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: Sediment Filter, Softener, Reverse Osmosis (R/O)

PARAMETER	METHOD	MCL* (pCi/L)	MDL (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Radium 226	EPA 903.1	5 pCi/L Combined	0.2	0.2 ± 0.1	Acceptable
Radium 228	EPA Ra-05		0.8	<0.8 ± 0.5	

\*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

*Katherine C. Higgs*

Katherine C. Higgs  
Manager – Drinking Water Testing

MDL: Method Detection Limit

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

Analyzed by Lab # 278

**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:**

Trinity Homes/TBI Homes  
3675 Park Avenue, Suite 301  
Ellicott City, Maryland 21043

**S/O Number:** 87410-1

**Report Date:** December 11, 2012

*Raw Sample*

**Property Sampled:** 12200 Running Fence Lane, 21029  
**Sample Location:** Pressure Tank Tap  
**Residual Chlorine:** <0.1 mg/L

**Building Permit #:** B11000137  
**Sampler ID #:** 7483AM  
**Samples Iced:** Yes

**County:** Howard  
**Map:** 28

**Subdivision:** Walnut Grove  
**Parcel:** 74

**Lot #:** 15

**Date/Time Collected in Field:** November 29, 2012 @ 2:18 pm  
**Date/Time Received in Lab:** November 29, 2012 @ 4:20 pm

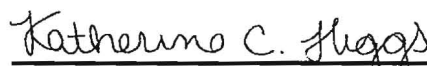
**Well Tag #:** HO-95-0572  
**Well Condition:** 2-Piece Cap, Satisfactory

**Water Treatment/Conditioning:** Sediment Filter, Softener, Reverse Osmosis (R/O)

PARAMETER	METHOD	MCL* (pCi/L)	MDL (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Gross Alpha (Long-Term)	EPA 900.0	15	1.0	60.5 ± 4.1	HIGH
Gross Beta (Long-Term)	EPA 900.0	50	1.6	18.6 ± 1.7	Acceptable
Radium 226	EPA 903.1	5 pCi/L Combined	0.2	1.0 ± 0.2	Acceptable
Radium 228	EPA Ra-05		0.9	1.8 ± 0.7	

\*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

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**CERTIFICATE OF ANALYSIS****Requester:**

Trinity Homes/TBI Homes  
3675 Park Avenue, Suite 301  
Ellicott City, Maryland 21043

**S/O Number:** 87410-2

**Report Date:** December 11, 2012

**Treated Sample**

**Property Sampled:** 12200 Running Fence Lane, 21029  
**Sample Location:** Reverse Osmosis (R/O) Tap  
**Residual Chlorine:** <0.1 mg/L

**Building Permit #:** B11000137  
**Sampler ID #:** 7483AM  
**Samples Iced:** Yes

**County:** Howard  
**Map:** 28

**Subdivision:** Walnut Grove  
**Parcel:** 74

**Lot #:** 15

**Date/Time Collected in Field:** November 29, 2012 @ 2:25 – 2:50 pm  
**Date/Time Received in Lab:** November 29, 2012 @ 4:20 pm

**Well Tag #:** HO-95-0572  
**Well Condition:** 2-Piece Cap, Satisfactory

**Water Treatment/Conditioning:** Sediment Filter, Softener, Reverse Osmosis (R/O)

PARAMETER	METHOD	MCL* (pCi/L)	MDL (pCi/L)	RESULT (pCi/L)	ACCEPTABILITY
Gross Alpha (Short-Term)	EPA 900.0	15	0.7	1.0 ± 0.6	Acceptable
Gross Beta (Short-Term)	EPA 900.0	50	1.3	65.6 ± 2.1	HIGH
Gross Alpha (Long-Term)	EPA 900.0	15	0.9	0.9 ± 0.7	Acceptable
Gross Beta (Long-Term)	EPA 900.0	50	1.7	58.3 ± 2.7	HIGH

\*Note: There are no established limits set forth by the EPA for radionuclide particles in private well water. The limits for public water are instead provided as MCLs in this report and the acceptability of this sample is based on these requirements. Gross Alpha levels under 5 pCi/L are acceptable. Levels between 5 and 15 pCi/L are considered moderate, and levels greater than 15 pCi/L are considered high. When levels are moderate or high, treatment or further testing is recommended and in certain cases may be required by the health department.

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MCL: Maximum Contamination Level, an enforceable level established by the EPA  
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**Report Date:** December 11, 2012

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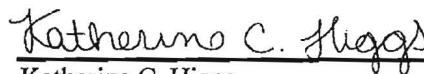
**Well Tag #:** HO-95-0572

**Well Condition:** 2-Piece Cap, Satisfactory

**Water Treatment/Conditioning:** Sediment Filter, Softener, Reverse Osmosis (R/O)

PARAMETER	METHOD	MCL/*SMCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	Absent	Pass ✓
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass ✓
Nitrate	SM 4500D	10 mg/L as N	1.3 mg/L as N	Pass /
Turbidity	EPA 180.1	10 NTU	<1.0 NTU	Pass ✓
pH	EPA 150.1	*6.5-8.5 Units	8.0 Units	***
Sand		Absent	Absent	Pass ✓

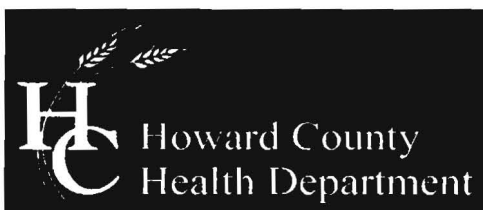
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Katherine C. Higgs  
Manager – Drinking Water Testing

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.



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

Peter L. Beilenson, M.D., M.P.H., Health Officer  
December 19, 2007

Jeremy Rutter  
Heritage Realty & Land Development  
P.O. Box 482  
Lisbon, Maryland 21765

RE: Radium & Uranium Results for:  
✓Walnut Grove Lot 15, HO - 95 - 0572  
Walnut Grove Lot 19, HO - 95 - 0575  
Walnut Grove Lot 30, HO - 95 - 0584  
Walnut Grove Lot 41, HO - 95 - 0594  
Walnut Grove Lot 45, HO - 94 - 4187  
Walnut Grove Lot 51, HO - 94 - 4181  
Walnut Grove Lot 53, HO - 95 - 0598  
Walnut Grove Lot 63, HO - 94 - 4183  
Walnut Grove Lot 87, HO - 95 - 0618

Dear Mr. Rutter:

You have requested that I review and comment upon sample results from the aforementioned lots at the Walnut Grove Sub Division, all taken on July 11, 2007 and sent to Trace Laboratories for analysis of Radium 226 / 228 and Uranium. My comments would be used to help confirm whether or not treatment to address these parameters, would be needed on any of these well water supplies.

Let me first state that no information was provided on how long the wells were purged prior to the sample being collected. From looking at the sample reports, wells were sampled at 10 - 15 minute intervals, suggesting little to no purging on some (or all) of these wells. Additionally, without the benefit of short and long term Gross Alpha & Beta components, the interpretation of some results is less clear. Because of this, I will "err" on the side of caution in my conclusions.

In general, my interpretation of these results is similar to those reached by Allison Milburn, Manager - Drinking Water Testing for Trace Laboratories. **Lots 19, 45, 53 and 87** are water supplies in which no additional treatment for these parameters would be anticipated. Alternatively, **Lots 15 (based upon Uranium), 51 and 63** are lots that additional treatment (i.e., softeners and/or reverse osmosis systems) will be needed. The remaining two lots (**30 and 41**), though not strictly reaching or exceeding the maximum contaminant level (MCL) of 5 picocuries/liter, are close enough that with variability (and a lack of additional information), will at this point be required to have treatment.

If you have questions or wish to discuss further, please contact me at (410) 313 - 1774.

Sincerely,

Bert Nixon, Director  
Bureau of Environmental Health





Trace Laboratories, Inc.  
Maryland

5 North Park Drive  
Hunt Valley, MD 21030  
Telephone: 410/252-7742  
Telephone: 410/584-9099  
Fax: 410/584-9117  
Email: [tracelab@connect.net](mailto:tracelab@connect.net)  
[www.tracelabs.com](http://www.tracelabs.com)

Maryland State Certified  
Water Quality Laboratory  
No. 318

ISO 9001:2000



Cert No. C2005-01504

## CERTIFICATE OF ANALYSIS

**Requester:**  
Heritage Realty & Land Development  
Attn: Jeremy Rutter  
P.O. Box 482  
Lisbon, MD 21765

**S/O Number:** 64290-1  
**Report Date:** July 31, 2007

**Property Sampled:** Walnut Grove Property

**County:** Howard  
**Subdivision:** Walnut Grove  
**Lot #:** 15  
**Tax Map #:** N/A  
**Parcel #:** N/A

**Date/Time Collected:** July 11, 2007 at 11:50 am  
**Date/Time Received:** July 11, 2007 at 3:40 pm

**Sample Location:** Pump  
**Sampler ID:** 6308KW  
**Samples Iced:** Yes  
**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0572  
**Well Condition:** N/A

**Water Conditioning/Treatment:** None

PARAMETER	RESULT	METHOD	DETECTION LIMIT
Radium 226	0.6 +/- 0.2 pCi/L	EPA 903.1	0.1 pCi/L
Radium 228	<0.9 +/- 0.6 pCi/L	EPA Ra-05	0.9 pCi/L
Uranium	107 +/- 6.4 pCi/L	EPA 908.0	1.0 pCi/L

*Allison Milburn*

Allison R. Milburn  
Manager-Drinking Water Testing

Samples analyzed by Laboratory #E83033

# CERTIFICATE OF ANALYSIS



**Trace Laboratories, Inc.**  
**Maryland**

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Maryland State Certified  
Water Quality Laboratory  
No. 318

**ISO 9001:2000**



Cert No. C2005-01504

**Requester:**  
Heritage Realty & Land Development  
Attn: Jeremy Rutter  
P.O. Box 482  
Lisbon, MD 21765

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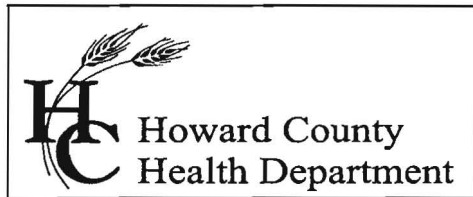
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**Residual Cl<sub>2</sub> <0.1 mg/L:** Yes

**Well Tag Number:** HO-95-0572  
**Well Condition:** N/A

**Water Conditioning/Treatment:** None

PARAMETER	RESULT	METHOD	DETECTION LIMIT
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Radium 228	<0.9 +/- 0.6 pCi/L	EPA Ra-05	0.9 pCi/L
Uranium	107 +/- 6.4 pCi/L	EPA 908.0	1.0 pCi/L

Allison R. Milburn  
Manager-Drinking Water Testing



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website: www.hchealth.org

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

February 21 2007

Walnut Grove, LLC  
10705 Charter Drive  
Suite 320  
Columbia, Maryland 21044

RE: Walnut Grove Subdivision, Lot 15  
Well Tag: HO - 95 - 0572

To Whom It May Concern:

A sample was collected during a yield test on January 22, 2007 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. 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  $14.8 \pm 2.0$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $10.6 \pm 1.5$  pCi/L. With the margin of error, the **Gross Alpha** result was above its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its target value of 50 pCi/L (roughly equivalent to the MCL of 4 millirem/year).

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

A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions or concerns.

Sincerely,

Bert Nixon, Deputy Director  
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater  
✓ Well & Septic property file

Send Report To:

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: KW15 WG0572 No. B: \_\_\_\_\_ Field Blank Bottle No. A: \_\_\_\_\_ No. B: \_\_\_\_\_

Plant/Site Name: Walnut Grove Lot 15 County: Howard

Sample Source: Running Fence Ln. Location: HO-95-0572  
(well no., lab sink, sample tap, etc.)

County: ☒ 1 ☒ 3 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: K. Wolf

Telephone No: 410-313-2645

Date Collected: 1/22/07

Time Collected: 11 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes ☒ No ☐

Iced: Yes ☐ No ☒

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

pH \_\_\_\_\_ Chlorine \_\_\_\_\_

Remarks: Sample taken @ Yield test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	<u>70118-004</u>	<u>14.8 ± 2.0</u>	<u>1/25/07</u>
✓	Gross Beta	4100		<u>106 ± 15</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: \_\_\_\_\_