C 1 8 /3 / SEQUENCE (MDE USE C		STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		FIEL IN THIS FORM COMPLETELY PLEASE TYPE	COUNTY ASID 422
ST/CO USE ONLY DATE WELL DATE Received	COMPLE	Depth of Well	PERMIT NO. FROM "PERMIT TO DBILL WELL"
MM DD YY MM2 -	75-0	2 200 26	13 1 10 -95 -05/2
8 13 15	105	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
OWNER	Kurs	S CI- La first name TOWN _ LS	Chilleville
SUBDIVISION Walnut	bure	SECTION	H LOT W-EH
WELL LOG Not required for driven wells		GROUTING RECORD VELL HAS BEEN GROUTED Circle Appropriate Box)	C 3
STATE THE KIND OF FORMATIONS PENETRATED, COLOR, DEPTH, THICKNESS AND IF WATER BEAI	THEIR	Circle Appropriate Box) YPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST 3
DESCRIPTION (Use FEET		CEMENT CIM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed) FROM TO	bearing	NO. OF BAGS 46 10 NO. OF POUNDS 457 46 0	PUMPING RATE (gal. per min.)
Sand 0 24 Mica Rock 24 200		GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE
Mica Rock 24 200	~	from 48 TOP 52 ft. to 54 BOTTOM 58 ft.	WATER LEVEL (distance from land surface)
mad vac		(enter 0 if from surface) Casing CASING RECORD	BEFORE PUMPING ft.
		types insert ST CO	WHEN PUMPING ft.
10 19 19		appropriate CONCRETE CONCRETE P L O T	22 25
		below PLASTIC OTHER	TYPE OF PUMP USED (for test)
		MAIN Nominal diameter Total depth CASING top (main) casing of main casing	27 27 27 other
三 主言以第三世紀	-	TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O (describe below)
		60 61 63 64 66 70	J jet S submersible
		OTHER CASING (if used) diameter depth (feet)	27 27
		inch from to	PUMP INSTALLED
			DRILLER INSTALLED PUMP YES NO (CIRCLE) (YES or NO)
			IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
	5.	screen type SCREEN RECORD	TYPE OF PUMP INSTALLED
		or open hole ST BR HO insert STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.
		appropriate BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
		below PLASTIC OTHER	(to nearest gallon) 31 35
		DEPTH (nearest ft.)	PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH
NUMBER OF UNSUCCESSFUL WELLS:	4_	2 /2 2/ 2/2	(nearest ft.)
WELL HYDROFRACTURED yes	N	8 9 11 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPROPRIATE LETTER	THE STATE OF THE S	2	+ above LAND SURFACE
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED		23 24 26 30 32 36	below 2 (nearest)
E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION		38 39 41 45 47 51	49 foot)
WELL		SLOT SIZE 1 2 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRU ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTI IN CONFORMANCE WITH ALL CONDITIONS STATED IN TH	ON" AND E ABOVE	DIAMETER (NEAREST OF SCREEN INCH)	BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS
CAPTIONED PERMIT, AND THAT THE INFORMATION PRI HEREIN IS ACCURATE AND COMPLETE TO THE BEST KNOWLEDGE.		56 60 from to	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIC. NO.1 M S D 0 24	1	RAVEL PACK	n and a second
XSD 119 bough & May	ne	WELL DRILLED VAS FLOWING WELL SEPT F IN BOX 68 68	Lee attached
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	-	ADE USE ONLY	Lee attached location
LIC. NO.1 D		T (E.R.O.S.) W Q	
OLE OF DESCRIPTION		7072	₩
SITE SUPERVISOR (sign. of driller or journeym responsible for sitework if different from permitte	e)	ELESCOPE LOG 74 75 76 ASING INDICATOR OTHER DATA	LE CONTRACTOR
DENV-CR00		COUNTY	

P 1 SEQUENCE NO.	STATE OF	MARYLAND	STA	ATE PERMIT NUMBER
B 1 0947 (MDE USE ONLY)		ERMIT TO DRILL WELL	Un.	(/ n=1)
1 2 3 6		e type	110	79 - 03/2
· · · · · · · · · · · · · · · · · · ·	W523734 MAN			this form completely
Date Received (APA)	FF ALLE	B 3 1 1 01 10 10 10	LOCATION OF	WELL
8 MM DD VY 13	MATION	8 COUNTY		21
land muth Consu	Hants Truc	libling	Cro	0
15 Last Name Owner	First Name 34	23 SUBDIVISION	010	42
3060 Hashington	Rd	CECTION 1/1053	LOT 14 HE	
36 Street or RFD	55	SECTION 44 46	LOT 48 50	
HERNILLOOD MO	21738	Marker	1.10	
57 Town 70 State 7	'2 Zip 76	52 NEAREST TOWN	, , , , ,	71
DRILLER INFORMATION	6 117	MILES FROM TOWN (enter	0 if in town)	2 M II
Balph E. MayNE M	1 S D 111/		73	76 77 78
Driller's Name 76	License No. 81	B 4 1 2	0	
Kalph E. Mayne I	-NC	DIRECTION OF WELL FROM	Ineaku	ess cincle ca.
Firm Name	mn 01771	TOWN (CIRCLE BOX)	11 NI	EAR WHAT ROAD 30
11092 Hardy D.MI HIS	MIND ONLY	N NE		SIDE OF ROAD NORTH
Address	11 00 00	8-9 8-9	(CIRCLE APP	PROPRIATE BOX)
Signature	Date	W TOWN E	9	WEST SEAST
B 2 WELL INFORMATION	C		DIS	STANCE FROM ROAD
1 2 APPROX. PUMPING RATE —			A FOR THE 2	ENTER FT OR MI 38 39
(GAL. PER MIN.) 8	500	S _W S S S S S S S S S S S S S S S S S S S	20	10 -11
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14	20	8 8	TAX MAP: 28	BLK: 18 PARCEL 74
USE FOR WATER (CIRCLE APP	PROPRIATE BOX)		BE FILLED IN	
DOMESTIC POTABLE SUPPLY & RESIDENT	TIAL	// HEALTH	DEPARTMEN	TAPPROVAL
IRRIGATION		Howard		1517422
F FARMING (LIVESTOCK WATERING & AGRIC	CULTURAL	COUNTY NAME		COUNTY NO.
1 IRRIGATION 22 INDUSTRIAL COMMERICIAL DEWATERING	1.33	STATE SIGNATURE		INSERT S
INDOOTTIEZE, GOMMENTONE, BETTANET INS		DATE ISSUED	11/1/	2 0/1/41
P PUBLIC WATER SUPPLY WELL		9/14/06	CO SIGNATUI	4/14/07
T TEST, OBSERVATION, MONITORING		43 MM DD YY 48 NORTH	EAST	0//
G GEO-THERMAL		GRID 500 0 0	0 0 GRID 5	0 16 0 0 0
		GUOW MA JOB SEATURES	05	
APPROXIMATE DEPTH OF WELL 1 150) '	SHOW MAJOR FEATURES BOX & LOCATE WELL '	OF	
APPROXIMATE DEPTH OF WELL 24	FEET 28	WITH AN X		
APPROXIMATE DIAMETER OF WELL	NEAREST	SOURCES OF DRILLING W	ATER	
AFFROXINIATE DIAMETER OF WELL	INCH	well		X
METHOD OF DRILLING ((circle one)	3.		
BORED (or Augered) JETTED	Jetted & DRIVEN		THE STATE OF	1.1.1.0
	ROTARY (Hydraulic Rotary)	WRITE THE BOX NUMBER	500	ple taken
GABLE REVerse-ROTary	DRive-POINT	FROM THE MAP HERE		12/20/06
other		018	/	12/20/06
REPLACEMENT OR DEEPEN	The state of the s	E 012 6	00	0
(CIRCLE APPROPRIATE I	MANUFACTURE CONTRACTOR	509	00	0
THIS WEEE WILE HOT THE ENGLANT ENGLISH		N	CHOMING LOCAT	TON OF WELL IN
THIS WELL WILL REPLACE A WELL THAT W ABANDONED AND SEALED	TILL BE	DRAW A SKETCH BELOW RELATION TO NEARBY TO		The Salar Control of the Salar
S THIS WELL WILL REPLACE A WELL THAT W		DISTANCE FROM WELL TO	NEAREST ROAD	JUNCTION
AS A STANDBY-CONTACT LOCAL APPROVIN	NG AUTHORITY			0
D THIS WELL WILL DEEPEN AN EXISTING WE	LL		LWess	· CIALLE LA
PERMIT NUMBER OF WELL TO BE REPLACED OR	DEEPENED	N/	New Lwess	
(IF AVAILABLE) 41	52	N	1/ 1	
Not to be filled in by driller (MDE OR CO	OUNTY USE ONLY)	*	/	
		30 600	1 3-	
APPROP. PERMIT NUMBER	05GDD6	1.15	7 250	·W)
Hn.	9512			*Ovell
PERMIT No. 70 71 72	73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED				●
TO THE PROPERTY SETTEMBLES SHOULD USE SEPARATE SHEET IF NEEDED				

DENV-Permit 97

Page		of	. 462
Date	12-	15-	2006

Review	

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-05/2 Location of property (road) Preakness	Ci La
	Lot WENBlock 18 Plat 28 Sec. Pare 74
Well Driller Mayne	Owner De Frances
Joseph Depth of well	
I. High rate pumping reservoir drawdown	
Time pump started /0:00 Total time to reach pumping w	Pumping rate /Som. vater level 7 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \$/ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:00	7'		* N/A	
18:15	7.	4 pec.	/	15 gpm.
10:30	7	4		1501
10:45	7	4		15
11:00	7	4		15
11:15	7	4		15
11:30	7	4		15
11:45	7	4		15
12:00	7	4		15
12:15	7	4		15
12:30	7	4		15
12:45	7	4		15
1:00	7	4		15
The state of the s				

Page of Date	3		Review _	
		FIELD DATA	SHEET	
		HOWARD COUNTY WEL	L YIELD TEST	
Vell Permit No	. но - 95-	0512	wela. W-GH Block 18 Plater De Frances	
ocation of pr ubdivision	halnut-	(grave Lot	W-EN Block 18 Plat	28 See P.
ell Driller	Rulph	Mayne Owner	T De Frances	-0 Sec. 1012
Depth o	f well	oint (M.P.) above qu	cound	
Static	water level (S.W	L.) below M.P.		
774-1-				
	pumping rese			
Time pum	p started	reach numning water	Pumping rateft.	holow M. P.
IOLAI LI	meCO	reach pumping water	levelit.	Delow M.P.
I. Recovery	pump test data -	observations to be	recorded every 15 minu	tes
	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 5	(if used)	(gallons per
tervals		gallon bucket		minute)
	-			

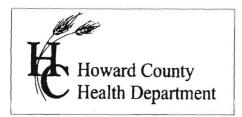
HOWARD COUNTY HEALTH DEPARTMENT

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.

(Must circle one) Licensed Plumber Licensed Well Driller Licenses # and name of individual responsible for the field installation: Name (Pring): **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: Subdivision: Site Address: **J95*Preakness*** Circle Lake** Subdivision: Site Make: Make: Make: Make: Make: Model #: Model #: Model #: Screened, vented well cap: Conduit min 18" B.G.: Depth of well encountered at time of pump installation: (Get) Conduit min 18" B.G.: Domain 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: Piping to house House Connection PVC sleeved to undisturbed soil at wall penetration: Sleeve caulked and sealed properly: The water supply line: (36" min) 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 Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" 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 installated inside of well casing 8" above finished grade Water supply line is sleeved adequately at house connection Adequate grout observed below pitless adapter ED-215 (Rev. 8/00) Not Called In For Inspection Well Titles Salper Licensed Mel driller. Licensed Mel driller Licensed Mel driller Licensed Mel driller Licensed Mel driller Well Cap and Electric Conduit Two piece cap installed and attached to casing s	Company Name: Address:			#:
subjected to field verification. Name of Property Owner: Subdivision: Make: Make: Make: Make: Make: Model#: Screened, vented well cap: Pump Capacity Screened, vented well cap: Conduit min 18" B.G: Depth of well encountered at time of pump installation: Get) Conduit min 18" B.G: Depth of well encountered at time of pump installation: 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: PVC sleeved to undisturbed soil at wall penetration: PSI: (160 psi min) Approximate length of sleeve: PSI: (160 psi min) 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 Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. conduit extends at least 18" below grade/attached to cap properly Elec. con	License # and na	E) Licensed Plumber	Licensed Well Driller	
Submersible Pump Data Pitless Adapter Make: Make: Model#: Screened, vented well cap: Pump Capacity GPM Depth: GPM NSF approved: Depth of well encountered at time of pump installation: Greened, vented well cap: Uniform 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: House Connection PVC sleeved to undisturbed soil at wall penetration: Approximate length of sleeve: Sleeve caulked and sealed properly: The water supply line: The water supply line: Signature of company representative responsible for installation Signature of company representative responsible for installation For Health Department Use Only—Not to be completed by Installer Date Insp. Requested: Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade Two piece cap 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	supervision of a	ncensed journeyman or	actual installation. Appr master plumber, pump in	rentices must be under the direct staller or well driller. Licenses may be
Submersible Pump Data Pitless Adapter Make: Make: Model#: Screened, vented well cap: Pump Capacity GPM Depth: GPM NSF approved: Depth of well encountered at time of pump installation: Greened, vented well cap: Uniform 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: House Connection PVC sleeved to undisturbed soil at wall penetration: Approximate length of sleeve: Sleeve caulked and sealed properly: The water supply line: The water supply line: Signature of company representative responsible for installation Signature of company representative responsible for installation For Health Department Use Only—Not to be completed by Installer Date Insp. Requested: Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade Two piece cap installed and attached to casing securely Elec. conduit extends at least 18" below grade Two piece cap 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	Name of Propert	y Owner:	Telepho	one #:
Submersible Pump Data Make: Ma	Subdivision:		Lot #:	Well Tag #: HO - 95 - 05/2
Submersible Pump Data Make: Ma	Site Address: 5	193 Preatness C	ircleLane	
Make:				
Well Yield: GPM NSF approved: Conduit min 18" B.G.: Depth of well encountered at time of pump installation: (feet) Conduit secured to well cap: If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4 Torque arrestors or Cable guards are required – Must circle one Safety rope, if used, attached to inside of well casing with eye bolt	Make:	<u> </u>	Make:	Two piece watertight cap:
Well Yield: GPM NSF approved: Conduit min 18" B.G.: Depth of well encountered at time of pump installation: (feet) Conduit secured to well cap: If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4 Torque arrestors or Cable guards are required – Must circle one Safety rope, if used, attached to inside of well casing with eye bolt	Model #:	 N	Model#:	Screened, vented well cap:
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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: PVC sleeved to undisturbed soil at wall penetration: PSI: (160 psi min) Approximate length of sleeve: Depth of supply line: (36" min) 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 Adequate grout observed below pitless adapter Adequate grout observed below pitless adapter Adequate grout observed below pitless adapter	Well Yield:	GPM N	NSF approved:	Conduit min 18" B.G.:
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Safety rope, if used, attached to inside of well casing with eye bolt	If pump capacity	exceeds well yield, a low	water cut off switch is requ	ired by NSPC 1990 Section 17.8.4
Piping to house Type: PVC sleeved to undisturbed soil at wall penetration: PSI: (160 psi min) Approximate length of sleeve: Depth of supply line: (36" min) 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: 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				
Type:	Safety rope, if u	sed, attached to inside of	well casing with eye bolt	
Type:	Pining to house	ž.	House Connection	
Deepth of supply line:(36" min) 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: 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	Type:	q.	PVC sleeved to undisturb	ed soil at wall penetration:
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Date Insp. Requested: 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 Date Insp. Approved: 3/12/54/B No FAHACHES Connected to Existive 2	Signature of com	pany representative respo	nsible for installation	date
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 Connected to Existive	2	For Health Departs	nent Use Only - Not to be	completed by Installer
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Water supply line sleeved adequately at house connection Adequate grout observed below pitless adapter Connected to Existive 2				eve finished grade
				ection Connected to Existin
				2
Mot Called In For Inspection Dans Ry 14 (C) (14) (14)				,
Dane Ry 14 10 111111-2	HD-215(Rev.	8/00)	+0111+	F T [1]
Dane Ru 14 10 1111/2-2		(100	alled Ih	(for Inspection)
			Dans Ru 11	10 1111/-2



7178 Columbia Gateway Dr. • Columbia, MD 21046

(410) 313-2640 TDD (410) 313-2323

Fax (410) 313-2648 Toll Free 1-866-313-6300

website: www.hchealth.org

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

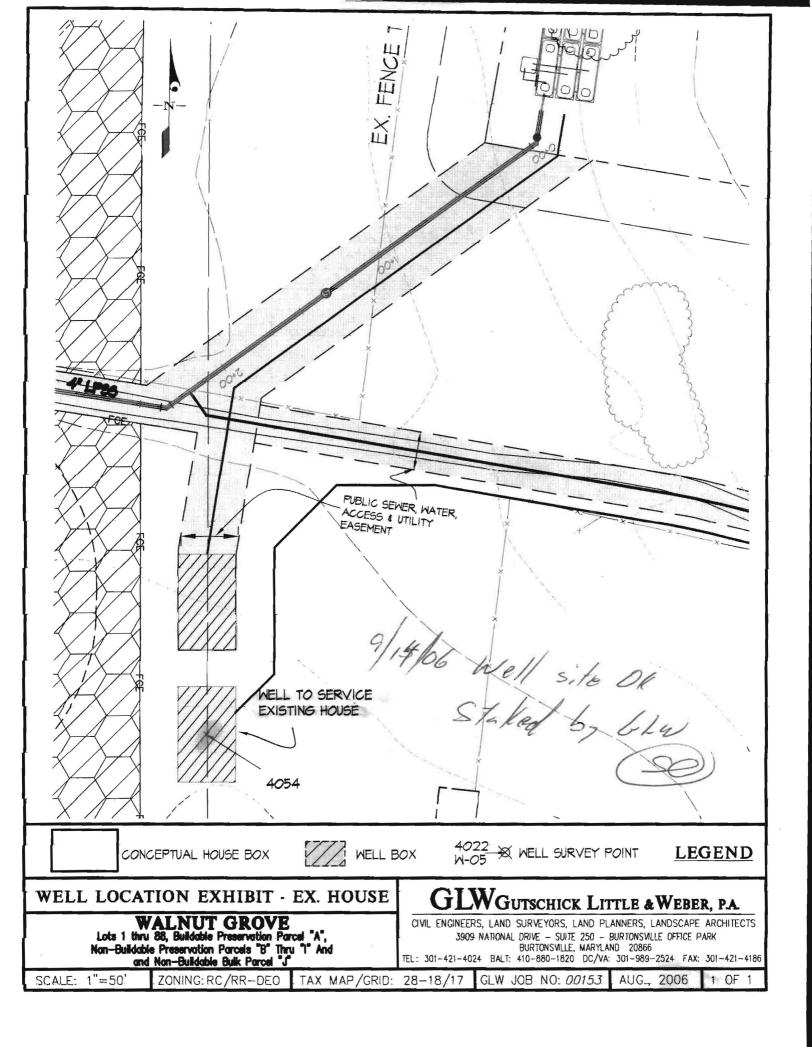
ATTENTION WELL DRILLERS!!!

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

Q'	The	e well site has been staked by	Gutschick, Little & Weber
	on	11/10/2005	
	1-	will call th	ne Health Department
	for	a time to meet in the field to	verify a well location.
0	Sit	e 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



MARYLAND DEPARTMENT OF THE ENVIRONMENT, W. 1800 Washington Blvd., Baltimore, Maryla		RATION	*****
WATER WELL ABANDONMENT-SEAL	ING REPORT FORM	ie les entre	
SUBMIT COPIES OF COMPLETED FORM TO: * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address nee * WELL OWNER * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM DATE WELL ABANDONED: * (month/day/year)			
* PERMIT NUMBER OF ABANDONED WELL (if any)	-NA-	05%	2
* PERMIT NUMBER OF REPLACEMENT WELL * PERSON ABANDONING WELL: PAGE MAYNE * OWNER'S NAME: And MANUetry Consultant		CIRCLE: MW	D/MSD/MG
• WELL LOCATION: //	SITE LOCATION MA		riganets
* TYPE OF WELL BEING ABANDONED:	LOG OF SEA	ING MATER	IAT
DRILLED JETTED BORED/AUGERED HAND DUG OTHER (specify)	MATERIAL		ET
* USE CODE:		FROM	то

USE CODE:	
DOMESTIC	MUNICIPAL/PUBLI
IRRIGATION	INDUSTRIAL
TEST/OBSERVATION	GEOTHERMAL
TYPE OF CASING:	
STEEL	PLASTIC
CONCRETE	OTHER (specify)
SIZE OF CASING: 36th	INCHES IN DIAMETER
DEPTH OF WELL: 36	FEET DEEP

MATERIAL	FEET	ET
	FROM	то
LUE Stone	36	5
Ement	51	0
VOLUME OF N	MATERIAL U	SED

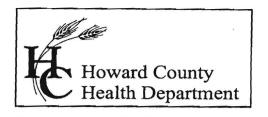
MWD/MSD/MGD CIRCLE ONE

LICENSE #

DATE

ENV 828

WAS CASING RIPPED OR PERFORATED?



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

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

January 23 2007

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

RE: Walnut Grove Subdivision, Lot WEH
Well Tag: HO - 95 - 0512

To Whom It May Concern:

A sample was collected during a yield test on December 20, 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. 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 0.3 ± 0.4 picocuries/liter (pCi/L); while the Gross Beta level was 1.4 ± 0.8 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 MCL of 4 millirem/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 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:			te of Maryland		
Best Nixon		DHMH - Laboratories Administration Division of Environmental Chemistry			
			ON LABORATORY		
			et, Baltimore, Maryland 2		
		John M. DeE	Boy, Dr. P.H., Direct	or	
			ANALYSIS RE	QUEST	J.
	X W WE	H0512			1
Samp	le Bottle No. A: KWWF	No. B:	_ Field Blank Bo	ottle No. A:	No. B:
Plant	Site Name: Wolnut	Grove.		County: How	d.
Samp	le Source: Let	WEH	Location:	₩ - 95 - 65 (well no., lab sink, san	nple tap, etc.)
Coun	ty: 🛮 🗗 🖪	Plant No.			1
СНЕС	CK (one per box)				
	ing Water fill Shows Show Shows Show Show Show Show Show Show Show Show	ommunity on-community rivate ther	Source (raw water) Distribution (treated) MCL	Emergen Routine Recheck Special	ey
Collec	etor: Keyn Wolf		Telephone No:	440-1313-2	645
Date	Collected: 12 1201	06	Time Collected	l: 9:30 a.m	p.m.
Nitric	Acid Preserved: Yes	□ No □	Iced: Yes	No 🖾	(
	nitters Code:	Federal Project	Field Data:	1 m	
Subm	inters code.	rederai i roject.	riciu Data.	pH Ch	lorine
Rema	rks: Huyok	taken (a)	Yield tost		,
✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
	Gross Alpha	4000	6/22/8-001	03104	12/27/06
1	Gross Beta	4100		1.4±0.8	
	Radon-222 Bottle A	4004			
	Radon-222	4004			
	Bottle B	4004			
	Field Blank A	4004			
	Field Blank B	4004			
	Tritium				
		T			
	Ra - 226	4020			L
	Ra - 226	4020			
		 			
	Ra - 228	4030			
	Ra - 228	4030			
	Ra - 228	4030			

FORM REVISED 02/06 DHMH 4540 02/06 • Tel. No.: (410) 767-5537

• Fax. No.: (410) 333-5373