

B 1 8641

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 521277 please type

STATE PERMIT NUMBER HD-95-1245 fill in this form completely

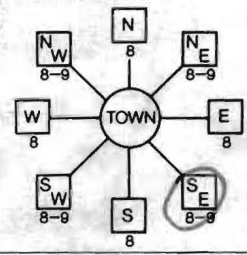
Date Received (APA) 10615 OWNER INFORMATION MOXLEY DAVID 8939 WOODSBORO PIKE WALKERSVILLE, MD 21793-8204

LOCATION OF WELL Howard 8 COUNTY 23 SUBDIVISION SECTION 44 46 LOT 2 48 50 West Friendship 52 NEAREST TOWN MILES FROM TOWN 3

DRILLER INFORMATION George F. Easterday MWD 040 Franklin Easterday, Inc 9265 Brown Church Rd., MT. Airy, Md. 21771

3686 Folly Quarter Rd 11 NEAR WHAT ROAD ON WHICH SIDE OF ROAD 34 50 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 23 BLK: 8 PARCEL 19

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



USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING G GEO-THERMAL

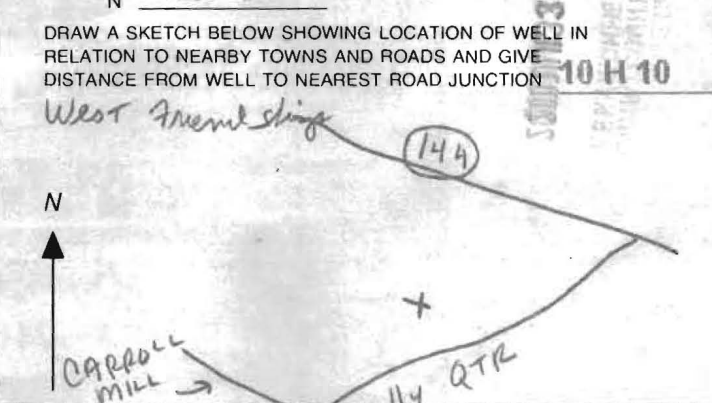
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard 523530 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 9/14/07 CO SIGNATURE EXP. DATE 9/14/08 NORTH GRID 523 000 EAST GRID 823 000

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 823 3 N 523 3

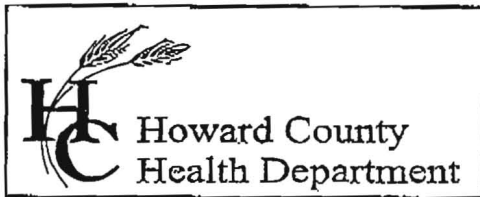
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary DRive-POINT other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41



Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER G PERMIT No. HD-95-1245

SPECIAL CONDITIONS Need radium sample @ yield test



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

TO ALL INTERESTED PARTIES

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

Well Site Location:

Moxley Property 2 3676 Moxley Road
 Subdivision/Property Name Lot# Road Name

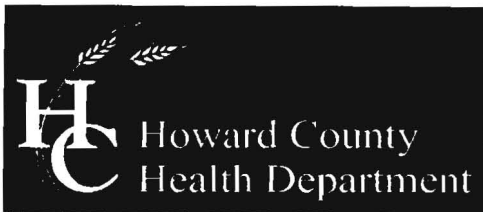
The well site has been staked by RBA Engineer Group,
 (professional land surveyor or company employing professional land surveyors)
 on 7/24/07 (date) and does not require a site inspection.

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

DAVID Moxley



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

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

November 19, 2007

Mr. David Moxley
8939 Woodsboro Pike
Walkersville, Maryland 21793-8204

RE: Moxley Property Lot 2
Well Tag: HO - 95 - 1245

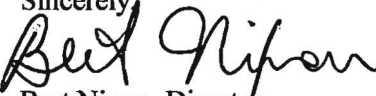
Dear Mr. Moxley:

A sample was collected during a yield test on September 17, 2007 and submitted to the Department of Health & Mental Hygiene Laboratory 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 15.0 ± 2.0 picocuries/liter (pCi/L); while the **Gross Beta** level was 10.0 ± 2.0 pCi/L. The **Gross Alpha** result was at its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

Since the **Gross Alpha** finding exceeded the respective **MCL**, additional testing for **Gross Alpha**, **Gross Beta**, and **Radium** will be necessary prior to occupancy to verify existing levels. Alternatively, you may install treatment designed to reduce **Gross Alpha**, **Gross Beta**, and **Radium**, plus provide post treated results (for all 3 parameters) confirming that levels are in conformance with existing standards. These tests are in addition to the standard parameters required for Use & Occupancy. Finally, a "Radium Treatment Agreement" will need to be signed by "you" and the new owners to be (if different from you).

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 to discuss additional testing requirements.

Sincerely

Bert Nixon, Director
Bureau of Environmental Health

Enclosure - Radium Treatment Agreement

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

Send Report To:
Bert Niden

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

DAVID MOXLEY
 8939 WOODSBORO PIKE
 WALKERSVILLE MD
 21793-8204

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: H0-95-1245 No. B: _____ Field Blank Bottle No. A: _____ No. B: _____

Plant/Site Name: 3686 Folly Quarter Rd. County: Howard

Sample Source: Moxley Prop. Lot 2 Location: H0-95-1245
 (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: K. Wolf

Telephone No: 410-313-2645

Date Collected: 9/17/07

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

Nitric Acid Preserved: Yes No

Iced: Yes No

Submitters Code: Federal Project: Field Data: _____

Remarks: Sample collected @ Yards pH _____ Chlorine _____

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	0678	15±2	09/20/07
✓	Gross Beta	4100	0678	10±2	11
	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: 09/18/07

Supervisor: S. Wise

FORM REVISED 02/06
 DHMH 4540 02/06

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

ORIGINAL - LABORATORY