

16659

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, WELL SITE ADDRESS, SUBDIVISION, SECTION, LOT

WELL LOG

GROUTING RECORD

C 3

Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED...

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC]

PUMPING TEST

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include BROWN LOAMY, Gray Limestone, Quartz, Gray Limestone, Quartz, Gray Limestone.

CASING RECORD casing types insert appropriate code below [ST] [CO] [PL] [OT] MAIN CASING TYPE [ST] [CO] [PL] [OT]

HOURS PUMPED (nearest hour) 03.54 PUMPING RATE (gal. per min.) 1904 WATER LEVEL (distance from land surface) BEFORE PUMPING 27 ft. WHEN PUMPING 77 ft. TYPE OF PUMP USED (for test) [S] submersible

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 [- ] below } 01 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

SCREEN RECORD screen type or open hole [ST] [BR] [HO] [PL] [OT] insert appropriate code below

WELL HYDROFRACTURED [Y] [N]

DEPTH (nearest ft.) table with columns 1-21 and rows A-C, S-R, E-E. Values include 42, 300.

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

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 APPOINTED PERMIT...

DRILLERS LIC. NO. 1 M 5 D 009 1 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

LIC. NO. 1 D

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

LATITUDE 39.1823654 LONGITUDE 76.9631271 (DEFAULT COORD. WGS 84) NOTES:

B 1 09358

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-2418

fill in this form completely

538463-F please type

Date Received (APA) 09/11/12

OWNER INFORMATION

8 MM DD YY 13

Stewart Kret Homes

15 Last Name Owner First Name 34

7090 Samuel Morse DR

36 Street or RFD 55

Columbia, md. 21046

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Allen Compton M S D 009

Driller's Name 76 License No. 81

Foggs Well Drilling, LLC

Firm Name

P.O. Box 202 Woodbine md

Address

Allen Compton 9-11-12

Signature Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE 5

(GAL. PER MIN.) 8 12

AVERAGE DAILY QUANTITY NEEDED 500

(GAL. PER DAY) 14 20

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
OPEN LOOP GEOTHERMAL
CLOSED LOOP GEOTHERMAL

B 3

LOCATION OF WELL

Howard 8 COUNTY 21

Owings Property 23 SUBDIVISION 42

SECTION 44 46 LOT 23 48 50

Highland 52 NEAREST TOWN 71

B 4

SOURCES OF DRILLING WATER

- 1.
2.
3.

Owings Overlook Highland Rd

11 STREET ADDRESS 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



130' 250' 34 37

DISTANCE FROM ROAD

ENTER FT OR MI 38 39

TAX MAP: 21 BLK: 12 PARCEL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A515214 13

COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S 41

DATE ISSUED 10/09/2012 R-R 10/9/13

43 MM DD YY 48 CO SIGNATURE EXP. DATE

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE REVerse-ROTary Drive-POINT

other

REPLACEMENT OR 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) 41 52

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

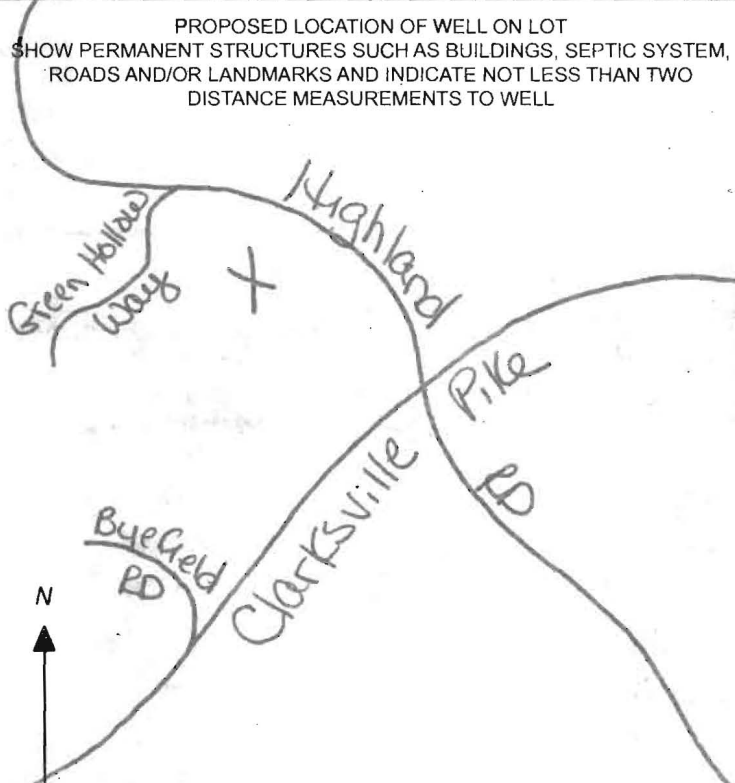
APPROX. PERMIT NUMBER G

PERMIT No. HO-95-2418

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Radium Sample required at yield test.





**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WELL & SEPTIC PROGRAM  
TEL: (410)313-1771 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogle's Well Drilling LLC Telephone #: 410 795 5670  
Address: PO Box 202  
Woodbine, MD 21797

(Must circle one) Licensed Plumber  Licensed Well Driller  Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): David C Fogle License# MD 226

\*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Stewart Kret Telephone #: 410 984 9023  
Subdivision: Owings Property Lot #: 23 Well Tag #: HO-95-2418  
Site Address: 6810 Owings Overlook Way  
Highland, MD

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>155QE07-180</u>	Model#: <u>N/A</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36"</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>5</u> GPM	NSF/WSC approved: <u>YES</u>	Conduit min 1 1/2" B.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>300</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, Cable guards, or other acceptable method used - Must circle one		
Safety rope, if used, attached to brass rope adapter or other acceptable method <u>inside of well casing</u> <u>N/A</u>		

Piping to house  
Type: 1" poly pipe  
PSI: 110 (160 psi min)  
Depth of supply line: 36" (36" min)

House Connection  
PVC sleeve to undisturbed soil at wall penetration: YES  
Length of sleeve (5" minimum from foundation): 6'  
Sleeve sealed properly: YES

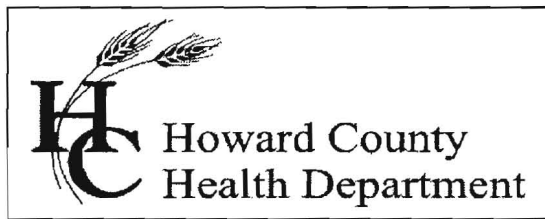
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative/responsible for installation: David Fogle date: 8-7-14

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: \_\_\_\_\_ Inspector: \_\_\_\_\_

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade \_\_\_\_\_  
Two piece cap installed and attached to casing securely \_\_\_\_\_  
Elec. conduit extends at least 18" below grade/attached to cap properly \_\_\_\_\_  
Safety rope not outside of well cap/casing \_\_\_\_\_  
Correct well tag attached properly and casing 3" above finished grade \_\_\_\_\_  
Water supply line sleeved adequately at house connection \_\_\_\_\_  
Adequate grout observed below pitless adapter \_\_\_\_\_



## Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1771 | 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

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

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### INTERIM CERTIFICATE OF POTABILITY

Expiration Date – April 24, 2015

October 24, 2014

Homeowner  
6810 Owings Overlook Way  
Highland, MD 20777

**RE: Owings Overlook, Lot#23  
6810 Owings Overlook Way  
Building Permit: B13003596  
Well Permit: HO-95-2418**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **10/24/2014**. Final approval of the well line connection to the dwelling was granted on **8/7/2014**. The well construction was completed on **10/26/2012**. Water samples were collected on **10/26/2012, 9/18/2014, 9/29/2014, 10/6/2014, and 10/9/2014**.

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 **10/26/2012**. Results showed a Gross Alpha level of **14.1 ± 2.6 pCi/L** and **Gross Beta** level of **16.9 ± 2.4 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.

Additional testing for Gross Alpha, Gross Beta (short & long term) plus Radium-226 and Radium-228 samples were collected on 9/29/2014. Results showed Gross Alpha Short Term level of 5.9, Gross Beta Short Term level of 10.0, Gross Alpha Long Term level of 3.5, Gross Beta Long Term level of 1.8, Radium-226 level of 1.8 and Radium-228 level of 2.3. All results were below target levels. At the time of testing and with respect to these parameters, the well water is safe for all uses.

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-2418. 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.**

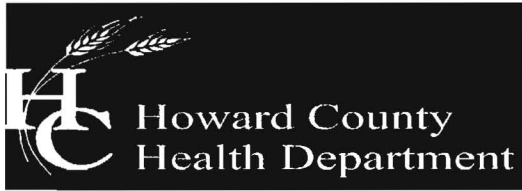
Please contact (410) 313-1773 to schedule a final water sample appointment or contact a certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:  
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,

*Hank Oswald*

Hank Oswald, L.E.H.S.  
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 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

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

March 8, 2013

Steuart Kret Homes
7090 Samuel Morse Drive
Columbia, Maryland 21046

RE: Owings Overlook Lot 23
Highland Road
Well Tag: HO - 95 - 2418

To Whom It May Concern:

A sample was collected during a yield test on October 26, 2012 and submitted to the Department of Health & Mental Hygiene Laboratories to assess the possible presence of Gross Alpha and Gross Beta in the future well water supply.

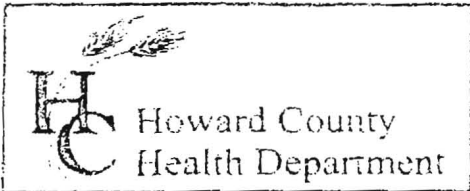
Results from this screening revealed a Gross Alpha of 14.1 ± 2.6 picocuries/liter (pCi/L), while the Gross Beta level was 16.9 ± 2.4 pCi/L. With the Margin of Error, the Gross Alpha result was above its maximum contaminant level (MCL) of 15 pCi/L, while the Gross Beta level was below its targeted value of 50 pCi/L (roughly equivalent to the annual dose rate of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply may not meet EPA regulatory standards. Additional testing for these parameters, plus Radium 226 and Radium 228 will be required to secure the future Use & Occupancy. Given the possibly of an elevated finding for Gross Alpha, the installation of a water softener system and / or a reverse osmosis system may be necessary. If treatment is installed, pre and post short and long term Gross Alpha and Beta, plus a post Radium 226 / 228 will be needed to properly evaluate the effectiveness of the installed treatment(s).

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, Director
Bureau of Environmental Health

Enclosure
cc: Barry Glotfelty, MDE Water Mgmt.
Well & Septic property file



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(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)

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

### TO ALL INTERESTED PARTIES

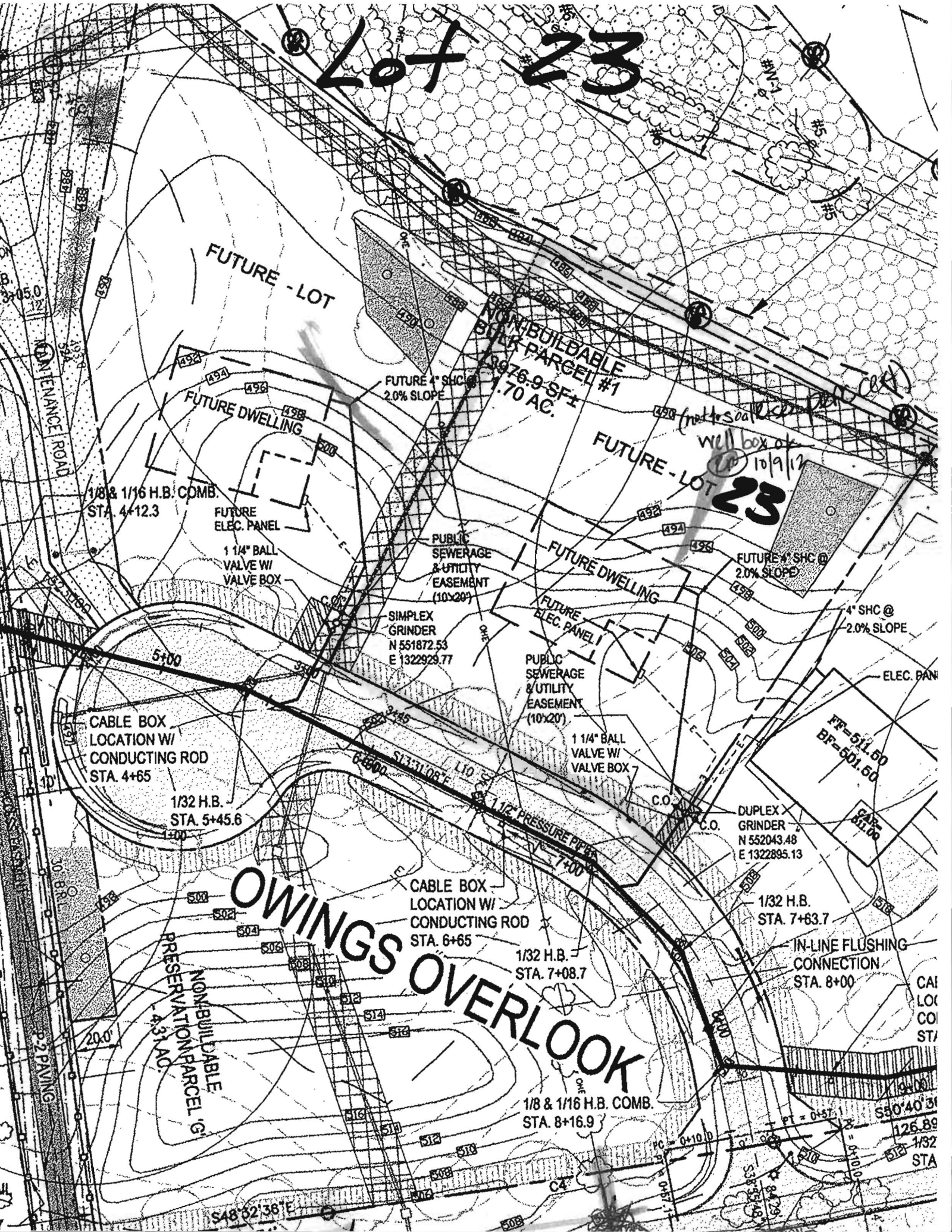
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by Jose Bolazco Escalante Engineers  
(professional land surveyor or company employing professional land surveyors)  
on 8-28-12 (date) and does not require a site inspection.
- Lot# 17-24  
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 6/10/03

# Lot 23



## OWINGS OVERLOOK

### 23

1/8 & 1/16 H.B. COMB.  
STA. 4+12.3

1/32 H.B.  
STA. 5+45.6

CABLE BOX  
LOCATION W/  
CONDUCTING ROD  
STA. 6+65

1/32 H.B.  
STA. 7+08.7

1/32 H.B.  
STA. 7+63.7

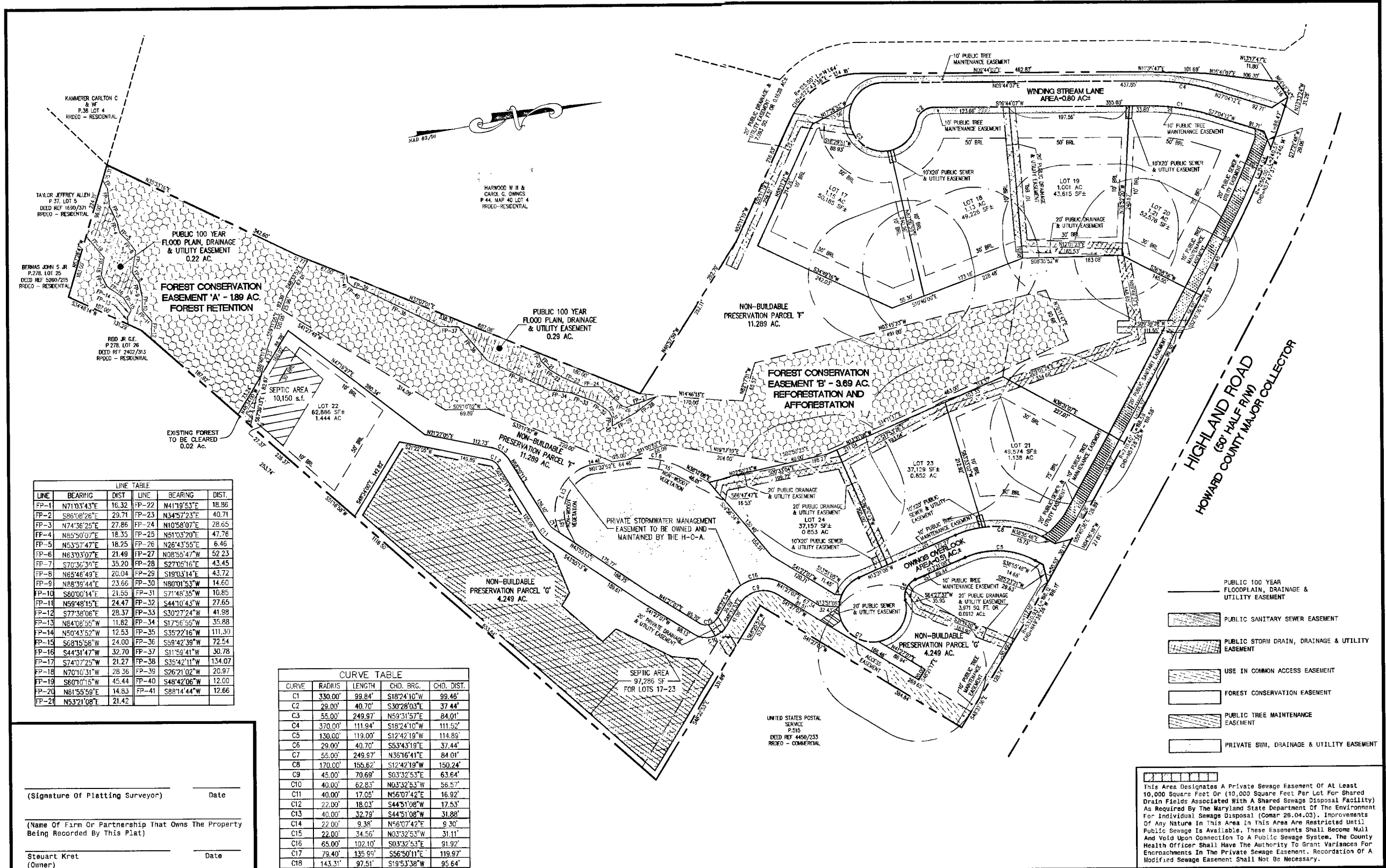
IN-LINE FLUSHING  
CONNECTION  
STA. 8+00

1/8 & 1/16 H.B. COMB.  
STA. 8+16.9

CAI  
LOC  
COI  
STA

126.89  
1/32  
STA





LINE	BEARING	DIST.	LINE	BEARING	DIST.
FP-1	N71°03'43"E	16.32	FP-22	N41°19'53"E	18.86
FP-2	S86°08'26"E	29.71	FP-23	N34°57'23"E	40.71
FP-3	N74°36'26"E	27.86	FP-24	N10°58'07"E	28.65
FP-4	N65°50'07"E	18.35	FP-25	N81°03'20"E	47.78
FP-5	N53°57'47"E	18.25	FP-26	N26°43'55"E	6.46
FP-6	N63°03'07"E	21.49	FP-27	N08°55'47"W	52.23
FP-7	S70°36'39"E	35.20	FP-28	S27°05'16"E	43.45
FP-8	N65°46'49"E	20.04	FP-29	S19°03'14"E	43.72
FP-9	N88°39'44"E	23.66	FP-30	N80°01'53"W	14.60
FP-10	S60°00'14"E	21.59	FP-31	S71°48'35"W	10.85
FP-11	N59°48'15"E	24.47	FP-32	S44°10'43"W	27.65
FP-12	S77°38'06"E	28.37	FP-33	S30°27'24"W	41.98
FP-13	N84°08'56"W	11.82	FP-34	S17°58'55"W	35.88
FP-14	N50°43'52"W	12.53	FP-35	S35°22'16"W	111.30
FP-15	S68°15'58"W	24.00	FP-36	S39°42'39"W	72.54
FP-16	S44°31'47"W	32.70	FP-37	S11°59'41"W	30.78
FP-17	S74°07'25"W	21.27	FP-38	S35°42'11"W	134.07
FP-18	N70°10'31"W	28.36	FP-39	S26°21'02"W	20.97
FP-19	S60°10'15"W	45.44	FP-40	S48°42'06"W	12.00
FP-20	N81°55'59"E	14.83	FP-41	S88°14'44"W	12.66
FP-21	N53°21'08"E	21.42			

CURVE	RADIUS	LENGTH	CHD. BRG.	CHD. DIST.
C1	330.00'	99.84'	S18°24'10"W	99.46'
C2	29.00'	40.70'	S30°28'03"E	37.44'
C3	55.00'	249.97'	N59°31'57"E	84.01'
C4	370.00'	111.94'	S18°24'10"W	111.52'
C5	130.00'	119.00'	S12°42'19"W	114.89'
C6	29.00'	40.70'	S53°43'19"E	37.44'
C7	55.00'	249.97'	N36°16'41"E	84.01'
C8	170.00'	155.62'	S12°42'19"W	150.24'
C9	45.00'	70.69'	S03°32'53"E	63.64'
C10	40.00'	62.83'	N03°32'53"W	56.57'
C11	40.00'	17.05'	N56°07'42"E	16.92'
C12	22.00'	18.03'	S44°51'08"W	17.53'
C13	40.00'	32.79'	S44°51'08"W	31.88'
C14	22.00'	9.36'	N56°07'42"E	9.30'
C15	22.00'	34.56'	N03°32'53"W	31.11'
C16	65.00'	102.10'	S03°32'53"E	91.92'
C17	79.40'	135.99'	S56°50'11"E	119.97'
C18	143.31'	97.51'	S19°53'38"W	95.64'

- PUBLIC 100 YEAR FLOODPLAIN, DRAINAGE & UTILITY EASEMENT
- PUBLIC SANITARY SEWER EASEMENT
- PUBLIC STORM DRAIN, DRAINAGE & UTILITY EASEMENT
- USE IN COMMON ACCESS EASEMENT
- FOREST CONSERVATION EASEMENT
- PUBLIC TREE MAINTENANCE EASEMENT
- PRIVATE SWM, DRAINAGE & UTILITY EASEMENT

This Area Designates A Private Sewage Easement of At Least 10,000 Square Feet Or (10,000 Square Feet Per Lot For Shared Drain Fields Associated With A Shared Sewage Disposal Facility) As Required By The Maryland State Department Of The Environment For Individual Sewage Disposal (Comar 26.04.03). Improvements Of Any Nature In This Area In This Area Are Restricted Until Public Sewage Is Available. These Easements Shall Become Null And Void Upon Connection To A Public Sewage System. The County Health Officer Shall Have The Authority To Grant Variances For Encroachments In The Private Sewage Easement. Recordation Of A Modified Sewage Easement Shall Not Be Necessary.

(Signature Of Platting Surveyor) \_\_\_\_\_ Date \_\_\_\_\_

(Name Of Firm Or Partnership That Owns The Property Being Recorded By This Plat) \_\_\_\_\_

Stewart Kret \_\_\_\_\_ Date \_\_\_\_\_  
(Owner)

Howard County Health Department  
APPROVED: For Public Water and Sewerage Systems \_\_\_\_\_

Howard County Health Officer \_\_\_\_\_ Date \_\_\_\_\_

APPROVED: Howard County Department of Planning and Zoning \_\_\_\_\_

Chief, Development Engineering Division \_\_\_\_\_ Date \_\_\_\_\_

Director \_\_\_\_\_ Date \_\_\_\_\_

**OWNER'S CERTIFICATE**

SK HOMES AT HIGHLAND OWINGS, LLC, Owner Of The Property Shown And Described Hereon, Hereby Adopt This Plan Of Subdivision, And In Consideration Of The Approval Of This Final Plat By The Office Of Planning And Zoning, Establish The Minimum Building Restriction Lines And Grant Unto Howard County, Maryland, Its Successors And Assigns, (1) The Right To Lay, Construct And Maintain Sewers, Drains, Water Pipes And Other Municipal Utilities And Services, In And Under All Roads And Street Right-Of-Ways And The Specific Easement Areas Shown Hereon; (2) The Right To Require Dedication For Public Use The Beds Of The Streets And/or Roads And Flood Plains And Open Space Where Applicable, And For Good And Other Valuable Consideration, Hereby Grant The Right And Option To Howard County To Acquire The Fee Simple Title To The Beds Of The Streets And/or Roads And Flood Plains, Storm Drainage Facilities And Open Space Where Applicable; (3) The Right To Require Dedication Of Waterways And Drainage Easements For The Specific Purpose Of Their Construction, Repair And Maintenance; And (4) That No Building Or Similar Structure Of Any Kind Shall Be Erected On Or Over The Said Easements And Right-Of-Ways.

Witness My/Our Hands This \_\_\_\_\_ Day Of June, 2012.

By: Stewart Kret \_\_\_\_\_ Witness \_\_\_\_\_

**SURVEYOR'S CERTIFICATE**

I Hereby Certify That The Final Plat Shown Hereon Is Correct; That It Is A Resubdivision Of Part Of Lot 5, As Shown On A Plat Of Subdivision Intitiled, "Harwood W. Owings Property, Lots 3, 4 & 5, Sheets 1 And 2 Of 2", Recorded Among The Land Records Of Howard County, Maryland As Plat Numbers 5669 And 5670; Said Part Of Lot 5 Being All Of The Land Conveyed By Our SASR Holding, By Deed Dated December 28, 2011 And Recorded Among Said Land Records In Liber 13705, Folio 310, And That All Monuments Are In Place Or Will Be In Place Prior To The Acceptance Of The Streets In The Subdivision By Howard County As Shown, In Accordance With The Annotated Code Of Maryland, as Amended.

C. Vernon Kelly \_\_\_\_\_ Date \_\_\_\_\_  
Professional Land Surveyor  
Maryland Licence No. 10977 (Exp. 7/25/2014)

Recorded As Plat \_\_\_\_\_ on \_\_\_\_\_ Among The Land Records Of Howard County, Maryland.

SUBDIVISION RECORD PLAT  
**OWINGS PROPERTY - LOT 5**  
LOT 17 - 22, NON-BUILDABLE PRESERVATION PARCELS F, G AND NON-BUILDABLE BULK PARCEL H  
A RESUBDIVISION OF PART OF LOT-5 - HARWOOD OWINGS PROPERTY  
5th ELECTION DISTRICT, TAX MAP # 40, TM PARCEL 44 GRID 4, ZONE: RR-DEO  
HOWARD COUNTY, MARYLAND

SCALE: 1"=100' DATE: August 21, 2012 SHEET 2 OF 2

PREPARED BY: **AB CONSULTANTS, INC.**  
9450 ANNAPOLIS ROAD  
LANHAM, MARYLAND 20706  
PHONE: (301) 306-3091  
FAX: (301) 306-3092

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

Good  
Copy

**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 #: 23 Well Tag #: HO-95-2418  
Site Address: 6810 Owings Overlook Way

**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)

**House Connection**

PVC sleeved to undisturbed soil at wall penetration: \_\_\_\_\_  
Approximate length of sleeve (5 foot minimum): \_\_\_\_\_

Depth of supply line: \_\_\_\_\_ (36" min)

Sleeve caulked and sealed properly: \_\_\_\_\_

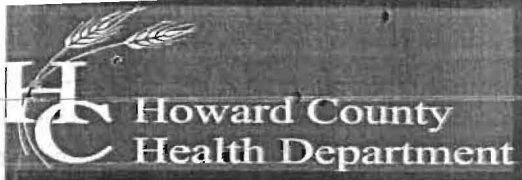
**The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.**

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: 8/7/2014 BB

- 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



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

Facebook: www.facebook.com/hocohealth

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

March 8, 2013

Steuart Kret Homes
7090 Samuel Morse Drive
Columbia, Maryland 21046

RE: Owings Overlook Lot 23
Highland Road
Well Tag: HO - 95 - 2418

To Whom It May Concern:

A sample was collected during a yield test on October 26, 2012 and submitted to the Department of Health & Mental Hygiene Laboratories to assess the possible presence of Gross Alpha and Gross Beta in the future well water supply. Gross Alpha and Gross Beta measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a Gross Alpha of 14.1 ± 2.6 picocuries/liter (pCi/L), while the Gross Beta level was 16.9 ± 2.4 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 targeted value of 50 pCi/L (roughly equivalent to the annual dose rate of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply may not meet EPA regulatory standards. Additional testing for these parameters, plus Radium 226 and Radium 228 will be required to secure the future Use & Occupancy. Given the possibility of an elevated finding for Gross Alpha, the installation of a water softener system and / or a reverse osmosis system may be necessary. If treatment is installed, pre and post short and long term Gross Alpha and Beta, plus a post Radium 226 / 228 will be needed to properly evaluate the effectiveness of the installed treatment(s). Alternatively, you may collect raw water samples for short and long term Gross Alpha and Beta, plus Radium 226 / 228 to see if all values are below existing standards. Given that it typically takes up to one month to perform and receive back the Radium analyses, plan accordingly. Please also note that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

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

Sincerely,

Bert Nixon (handwritten signature)

Bert Nixon, Director
Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.
Well & Septic property file

Send Report To:

Bob Nixon  
Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

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

E000877 831

### LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: HOKW2418 No. B:        Field Blank Bottle No. 1: FBKW102612 No B:       

Plant/Site Name: Owings' Overlook - Lot 23 County: Howard

Sample Source: Highland Rd. Location: HO-95-2418  
(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. Welf

Telephone No.: 410 313 2645

Date Collected: 10/26/12

Time Collected: 11:00 a.m.        p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:  Federal Project:

Field Data:        pH        Chlorine

Remarks: pH preserved to < 2.0

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	0877	14.1 ± 2.6	11/1/12	11/2/12
✓	Gross Beta	4100	0877	16.9 ± 2.4	↓	↓
	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				
	Gross Alpha Confirmation			10.3 ± 2.2	11/5/12	11/7/12
	Gross Beta Confirmation			19.9 ± 2.5	↓	↓

Date Received: 10/31/12

Supervisor: [Signature]

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

Send Report To:

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**

E000076 8312

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

201 W. Preston Street, Baltimore, Maryland 21201  
John M. DeBoy, Dr. P. H., Director

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A:      No. B:      Field Blank Bottle No. 1: FBKW102612 No B:     

Plant/Site Name: Distillation Unit HCHD County: Howard

Sample Source: Distilled H<sub>2</sub>O Location: L-5  
(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: 10/26/12 <sup>cont</sup>

Time Collected:      a.m. 4 p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:  Federal Project:

Field Data:      pH      Chlorine     

Remarks: Field Blank Gross & B

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
	Gross Alpha	4000	0876	< 2.0	11/01/12	11/02/12
	Gross Beta	4100	0876	< 4.0		
	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				

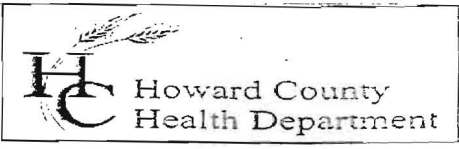
Date Received: 10/31/12

Supervisor: [Signature]

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

OPIC MHWLSD 1/14

invoice



Bureau of Environmental Health  
Attn: Bert Nixon, Director

DATE: JANUARY 14, 2013  
DATES OF SERVICE: OCTOBER 26 2012  
INVOICE #: 2013-001

7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
Phone 410-313-2640 Fax 410-313-2648  
www.hchealth.org

BILL TO Steuart Kret Homes  
7090 Samuel Morse Drive  
Columbia, Maryland 21046

COMMENTS Payment due upon receipt. Letter and results will be released upon receipt of payment.

DATE	DESCRIPTION	BALANCE	AMOUNT
10/26/12	Gross alpha/beta testing performed for Owings Overlook, Lot # 23 HO - 95 - 2418		\$45.00
			<b>AMOUNT DUE</b>
			\$45.00

Please detach and return with payment.

REMITTANCE	
Invoice #	2013-001
Site Information	Owings Overlook Lot 23
Amount Due	\$45.00
Amount Enclosed	

Please make checks payable to "Director of Finance"

Payment 3/4/13  
Receipt # 44552

Send Report To:

Bert Nelson

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

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: — No. B: — Field Blank Bottle No. 1: FBKW102612 No B: —

Plant/Site Name: Orange Grove HCHD County: Howard

Sample Source: Distilled H<sub>2</sub>O Location: L-5  
(well no, lab sink, sample tap, etc.)

County:  1  3 Plant No.

CHECK (one per box)

Drinking Water	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>
Stream	<input type="checkbox"/>
Other	<input type="checkbox"/>

Community	<input type="checkbox"/>
Non-community	<input type="checkbox"/>
Private	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Source (raw water)	<input checked="" type="checkbox"/>
Distribution (treated)	<input type="checkbox"/>
MCL	<input type="checkbox"/>

Emergency	<input type="checkbox"/>
Routine	<input checked="" type="checkbox"/>
Recheck	<input type="checkbox"/>
Special	<input type="checkbox"/>

Collector: K. Wolf

Telephone No.: 410 313 2645

Date Collected: 10/26/12

Time Collected: — a.m. 4 p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:

Federal Project:

Field Data: — pH — Chlorine —

Remarks: Field Blank Gross & B

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
	Gross Alpha	4000				
	Gross Beta	4100				
	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: —

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

Send Report To:

Bert Nixon

Howard County Health Department  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, Maryland 21046

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: HOKW2418 No. B: — Field Blank Bottle No. 1: FBKW102612 No B: —

Plant/Site Name: Owings Overlook - Lot 23 County: Howard

Sample Source: Highland Rd. Location: HO-95-2418  
(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: 10/26/12

Time Collected: 11:00 a.m. — p.m.

Nitric Acid Preserved: Yes  No

Iced: Yes  No

Submitters Code:  Federal Project:

Field Data: — pH — Chlorine

Remarks: pH preserved to < 2.0

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000				
✓	Gross Beta	4100				
	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: —

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

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 96901 Account #: 1930  
Reference: Steuart-Kret Lot 23 Company: Fogle's Well Drilling  
Location: 6810 Owings Overlook Way Requested By: Dave Fogle  
Highland, MD 20777 Source: Well Water  
Date/ Time Collected: 10/9/2014 1033 Site: Pressure Tank  
Date/Time Rec'd: 10/9/2014 1450 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.8  
Collected By: J. Fogle 1974JF Well #: HO-95-2418

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
✓ Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	10/10/2014 / 1015 / CCH
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	10/10/2014 / 1015 / CCH

Reviewed 10/24/14 - H.O.

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH and Chlorine level tested in lab
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 13003596

Date Reported: 10/10/2014

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #: 96828 Account #: 1930  
Reference: Stuart-Kret Lot 23 Company: Fogle's Well Drilling  
Location: 6810 Owings Overlook Way Requested By: Dave Fogle  
Highland, MD 20777 Source: Well Water  
Date/ Time Collected: 10/6/2014 1350 Site: Pressure Tank  
Date/Time Rec'd: 10/6/2014 1526 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 7.1  
Collected By: J. Fogle 1974JF Well #: HO-95-2418

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
X Bacteria, Coliform, Total, MPN	1.0	MPN/ 100 ml	<1.0	SM18 9223	10/7/2014 / 1000 / LLO
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	10/7/2014 / 1000 / LLO

Reviewed 10/24/14 - H.O.

**NOTES**

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 pH and Chlorine level tested in lab
- 5 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 13003596

Date Reported: 10/7/2014

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 96479 Account #: 1930  
Reference: Steuart-Kret Lot 23 Company: Fogle's Well Drilling  
Location: 6810 Owings Overlook Way Requested By: Dave Fogle  
Highland, MD 20777 Source: Well Water  
Date/ Time Collected: 9/29/2014 0940 Site: Pressure Tank  
Date/Time Rec'd: 9/29/2014 1300 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.9  
Collected By: J. Fogle 1974JF Well #: HO-95-2418

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
✓ Gross Alpha, Short Term	5.9	pCi/L	15	900.0	10/2/2014 / 0624 / MJN
✓ Gross Beta, Short Term	10.0	pCi/L	50	900.0	10/2/2014 / 0624 / MJN
✓ Gross Alpha, Long Term	3.5	pCi/L	15	900.0	10/8/2014 / 0637 / MJN
✓ Gross Beta, Long Term	11.7	pCi/L	50	900.0	10/8/2014 / 0637 / MJN
✓ Radium-226	1.8	pCi/L	****	903.1	10/9/2014 / 1206 / MJN
✓ Radium-228	2.3	pCi/L	****	Ra-05	10/8/2014 / 1337 / MJN

Reviewed 10/24/14 - W.O.

### NOTES

- 1 \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- 2 Long Term Gross Alpha Detection Limit: 1.3 pCi/L; Long Term Gross Beta Detection Limit: 2.1 pCi/L
- 3 pCi/L = picocuries per liter
- 4 Radium 226 Detection Limit: 0.1 pCi/L; Radium 228 Detection Limit: 0.8 pCi/L
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Short Term Gross Alpha Detection Limit: 1.4 pCi/L; Short Term Gross Beta Detection Limit: 2.1 pCi/L
- 7 Sub-contracted to Reference Lab #278
- 8 ND:None Detected
- 9 pH and Chlorine level tested in lab
- 10 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 13003596

Date Reported: 10/14/2014

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 96286 Account #: 1930  
Reference: Steurt & Kret Lot 23 Company: Fogle's Well Drilling  
Location: 6810 Owings Overlook Way Requested By: Dave Fogle  
Highland, MD 20777 Source: Well Water  
Date/ Time Collected: 9/18/2014 1250 Site: Pressure Tank  
Date/Time Rec'd: 9/18/2014 1527 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.6  
Collected By: J. Fogle 1974JF Well #: HO-95-2418

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
✓ Bacteria, Coliform, Total, MPN	69.7	MPN/ 100 ml	<1.0	SM18 9223	9/19/2014 / 1000 / BCD
✓ Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	9/19/2014 / 1000 / BCD
✓ Nitrate	<1.0	mg/L	10	601	9/19/2014 / 1220 / BCD
✓ Turbidity	5.08	NTU	<10	SM18 2130B	9/19/2014 / 1315 / JKW
✓ Sand	NS	mg/L	5	Visual/Gravimetric	9/19/2014 / 1315 / JKW

Revised 10/24/14 - H.O.

### NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 pH tested in lab, chlorine level tested on site
- 8 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : 13003596

Date Reported: 9/19/2014