

C 1 34839

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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER A537370

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received MM 11 DD 20 YY 13

DATE 10/31/15

22 500 26 (TO NEAREST FOOT)

OK 12/28/15 sc

28 29 30 31 32 33 34 35 36 37

OWNER: MIB Gaithers Chance LLC; WELL SITE ADDRESS: Ten Oaks Rd; TOWN: Charlestown; SUBDIVISION: Gaithers Chance; SECTION: ; LOT: 18

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed) FEET FROM TO check if water bearing

Table with 3 columns: Description, Feet (From/To), and Check if water bearing. Includes entries for Brown Loamy, Gray Schist, White, Gray Schist, and White.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 35 NO. OF POUNDS 210

GALLONS OF WATER 210 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 76 ft.

CASING RECORD

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 66 Total depth of main casing (nearest foot) 99

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole ST BR HO PL OT

DEPTH (nearest ft.) HO 99 500

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 2

METHOD USED TO MEASURE PUMPING RATE 1 gal

WATER LEVEL (distance from land surface)

BEFORE PUMPING 32 ft.

WHEN PUMPING 212 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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) LAND SURFACE above below

LATITUDE 39.333374 LONGITUDE 76.9288055 (DEFAULT COORD. WGS 84)

Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04.

NUMBER OF UNSUCCESSFUL WELLS: 4

WELL HYDROFRACTURED YES Y NO 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 5 D 001 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

B 1 33887

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

140-15-0072 fill in this form completely

555842-6 please type

Date Received (APA) 042715

OWNER INFORMATION

M B Gaithers Chance LLC 1686 E Gude Dr Rockville, Md 20850

LOCATION OF WELL

Howard County Gaithers Chance Clarksville

DRILLER INFORMATION

Allen Compton MS D0009 Fooks Well Drilling, LLC P.O. Box 202 Woodbine, Md 21797

SOURCES OF DRILLING WATER

Ten Oaks RD ON WHICH SIDE OF ROAD DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 0028 BLK 0008 PARCEL 0045

WELL INFORMATION

APPROX. PUMPING RATE 5 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A537370 COUNTY NO. DATE ISSUED 5/21/15 CO SIGNATURE EXP. DATE 5/21/16

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

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTARY JETTED AIR-PERCussion ROTARY (Hydraulic Rotary) REVERSE-ROTARY DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

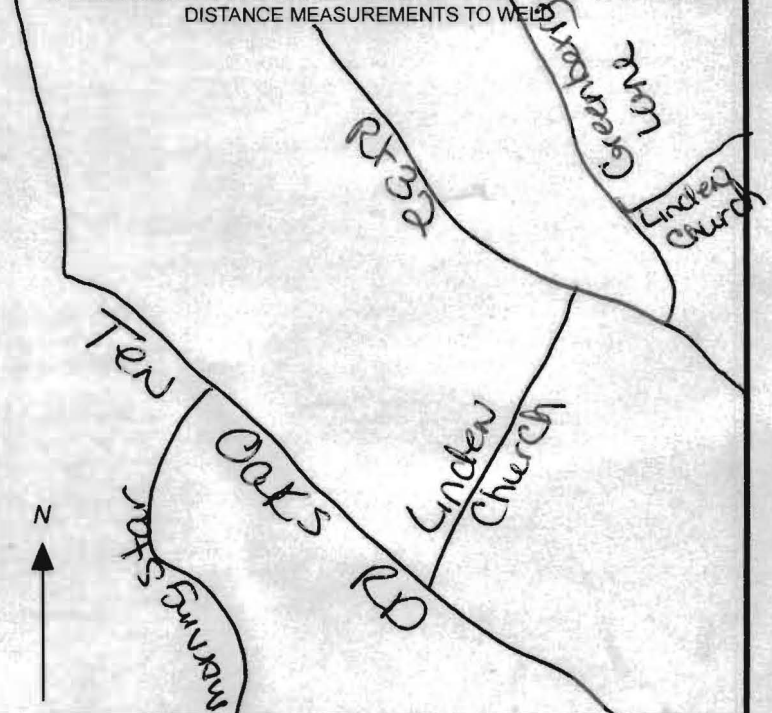
- THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEM AN EXISTING WELL

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

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

APPROX. PERMIT NUMBER 140201460004 PERMIT No. 140-15-0072

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

**FIELD DATE SHEET**  
**HOWARD COUNTY WELL YIELD TEST**

Well Permit No. HO-15-0072Location of Property: Gaithers Chance DrSubdivision: Gaithers Chance Lot: 18 Block      Plot      Sec.     Well Driller: Fogles Allen Compton Owner: MB Gaithers Chance, LLCDepth of Well: 500'Distance of measuring point (M.P.) above ground: 2'Static water level (S.W.L.) below M.P.: 32'

High rate pumping –reservoir Drawdown

Time pump started: 8:00 Pumping rate: 8.5 gpmTotal time 90 mins to reach pumping water level 212' ft. below M.P.

Recovery pump test data – observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL Below M.P.	PUMPING RATE Time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:00	32'	7 Seconds		8.5 gpm
8:15	50'	7		8.5 gpm
8:30	75'	8 Seconds		7.5 gpm
8:45	125'	8		7.5 gpm
9:00	157'	9 Seconds		6.6 gpm
9:15	200'	11 Seconds		5.4 gpm
9:30	212'	30 Seconds		2 gpm
9:45	212'	30		2 gpm
10:00	212'	30		2 gpm
10:15	212'	30		2 gpm
10:30	212'	30		2 gpm
10:45	212'	30		2 gpm
11:00	212'	30		2 gpm
11:15	212'	30		2 gpm
11:30	212'	30		2 gpm
11:45	212'	30		2 gpm
12:00	212'	30		2 gpm
12:15	212'	30		2 gpm
12:30	212'	30		2 gpm
12:45	212'	30		2 gpm
1:00	212'	30		2 gpm
1:15	212'	30		2 gpm
1:30	212'	30		2 gpm
1:45	212'	30		2 gpm
2:00	212'	30		2 gpm
2:15	212	30		2 gpm
2:30	212'	30 Seconds		2 gpm
2:45	212'	30		2 gpm
3:00	212'	30		2 gpm
3:15	212'	30		2 gpm
3:30	212'	30		2 gpm

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

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

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

Company Name: NATIONAL WATER SERVICE Telephone #: 301-854-1333  
Address: P.O. Box 138  
ASHTON MD 20861

(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 RYCKE License# PI 0145

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

Name of Property Owner: Mitchell & Best Telephone #: \_\_\_\_\_  
Subdivision: GAITHERS CHANCE Lot #: 18 Well Tag #: HO-15-0072  
Site Address: 5005 GAITHER CHANCE

**Submersible Pump Data**

Make: GRUND 705  
Model #: \_\_\_\_\_  
Pump Capacity \_\_\_\_\_ GPM  
Well Yield: 2 GPM

**Pitless Adapter**

Make: Campbell  
Model#: PA 800  
Depth: 48 (36" min)  
NSF approved: YES

**Well Cap and Electric Conduit**

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

Depth of well encountered at time of pump installation: 500 (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 N/A

**Piping to house**

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

**House Connection**

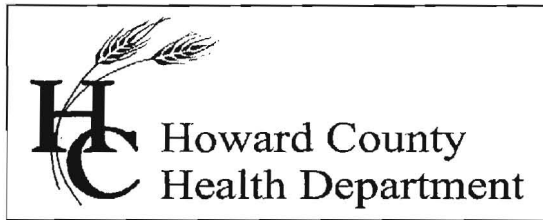
PVC sleeved to undisturbed soil at wall penetration: YES  
Approximate length of sleeve: 5'  
Sleeve caulked and sealed properly: YES

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

Signature of company representative responsible for installation \_\_\_\_\_ date 12-21-16

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

Date Insp. Requested: 12/22/16 Date Insp. Approved: 3/20/17 (KMD)  
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

8930 Stanford Boulevard, Columbia, MD 21045

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](https://www.facebook.com/hocohealth)

Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

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

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### **INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – September 20, 2017**

March 20, 2017

Homeowner  
5005 Gaithers Chance Drive  
Clarksville, MD 21029

**RE: Gaithers Chance, Lot 18  
5005 Gaithers Chance Drive  
Building Permit: B16003388  
Well Permit: HO-15-0072**

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 **3/8/2017**. Final approval of the well line connection to the dwelling was granted on **3/20/2017**. The well construction was completed on **10/21/2015**. Water samples were collected on **2/28/2017**.

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. 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-15-0072. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

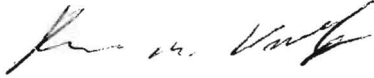
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will 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 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>

In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Best Available Technology (BAT). You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your BAT.

Approving Authority,

A handwritten signature in black ink, appearing to read "Kevin M. Wolf".

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor  
Groundwater Management Section  
Well & Septic Program

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



MD DHMH Laboratories Administration  
1770 Ashland Avenue  
Baltimore City, MD 21205

Lab No. Date Received



E16001777001

Received: 10/22/2015

Metals

HO-15-0072

Do not write above this line

Send Report To: Bert Nixon

Howard Co Health Dept.

1930 Stanford Blvd

Bureau of Environmental Health

Columbia MD 21045

Division of Environmental Chemistry  
**ENVIRONMENTAL METALS SECTION**

201 W. Preston Street, Baltimore, Maryland 21201

Robert A. Myers Ph.D. Director

dn  
10/22/15

**LABORATORY ANALYSIS REQUEST**

Please Print

Digest

Sample ID No: HO-15-0072 Site Name: Gaither's Chance - Lot 18 County: Howard

Sample Source: Ten Oaks Rd. Dorton Collector: S. Collins  
Street Town or City Name

Date Collected: 10 / 21 / 20 15 Time Collected: 11:30 a.m. \_\_\_\_\_ p.m. Phone #: 410-313-6787

Sample Preserved By:  Field  ESRL  WMRL  Central Lab

Preservative Used:  HNO<sub>3</sub> pH 2.2, SHS 10/22/15

Sample Type:  Drinking Water  Landfill  Source (Raw Water)  Liquid  
Data Category:  Community  Stream  Distribution (Treated)  Solid  
Code   Non-Community  Sediment  Other \_\_\_\_\_  
 Private

Specify Program:  SDWA  NPDES  CWA  RCRA  Consumer Products  Other \_\_\_\_\_

Type of Sample Preparation:  Total Metals  Total Metals TCLP  Dissolved Metals  
(field preparation required)

Remarks: Sample taken during yield

✓	Element	Results (ppm)	✓	Element	Results (ppm)
	Antimony (Sb)			Copper (Cu)	
	Arsenic (As)			Lead (Pb)	
	Barium (Ba)			Silver (Ag)	
	Beryllium (Be)			Zinc (Zn)	
	Cadmium (Cd)			Aluminum (Al)	
	Chromium (Cr)			Iron (Fe)	
	Mercury (Hg)			Manganese (Mn)	
	Nickel (Ni)			Calcium (Ca)	
	Selenium (Se)			Magnesium (Mg)	
✓	Sodium (Na)			Potassium (K)	
	Thallium (Tl)			Uranium (U)	

Lab Supervisor: \_\_\_\_\_

Date Reported: \_\_\_/\_\_\_/\_\_\_

• Phone: (410) 767 - 6186

• Fax: (410) 333 - 5122

DHMH 4432 (4/13)

SUBMITTER'S COPY



State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
**INORGANICS ANALYTICAL LABORATORY**  
1770 Ashland Avenue, Baltimore, Maryland 21205  
Robert Myers, Ph.D., Director



## Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH  
8930 STANFORD BLVD  
COLUMBIA, MD 21045

Lab Project NoE16001776 Date Coll. 10/21/2015 Date Received 10/22/2015 Submitted By: S. Collins

Field ID: HO-15-0072  
Lab No.: E16001776001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	<10	mg/L	10/23/2015
Total Dissolved Solids	SM 2540C	102	mg/L	10/23/2015

### Comments:

Approved by: \_\_\_\_\_

Approval date: 10/27/2015

\*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6190 and arrange for return or destruction.



State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
TRACE METALS LABORATORY  
201 W. Preston Street, Baltimore, Maryland 21201  
Robert Myers, Ph.D., Director

## Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH  
8930 STANFORD BLVD  
COLUMBIA, MD 21045

Lab Project No: E16001777 Date Coll.: 10/21/2015 Date Received: 10/22/2015 Submitted By: Collins

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Field ID: HO-15-0072

Lab No.: E16001777001

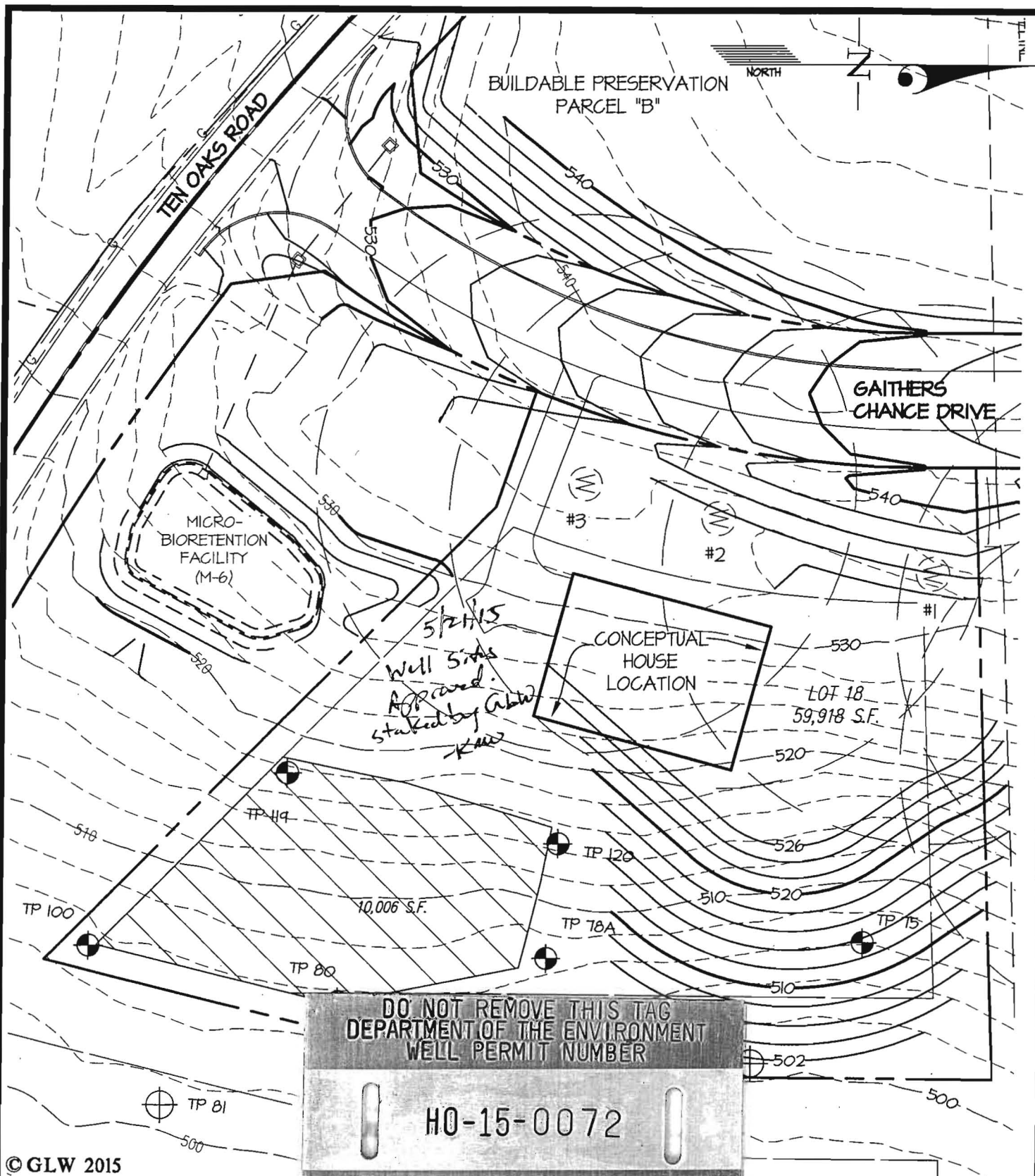
<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Unit</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	15.19	ppm	10/27/2015

### Comments:

Approved by: Radia Muneer

Approval date: 10/29/2015

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6944 and arrange for return or destruction.



DO NOT REMOVE THIS TAG  
 DEPARTMENT OF THE ENVIRONMENT  
 WELL PERMIT NUMBER  
**HO-15-0072**  
 INFORMATION-GIVE NUMBER AND WRITE  
 1800 WASHINGTON BLVD  
 BALTIMORE MARYLAND. 21230

© GLW 2015

WELL SITE

ER'S CHANCE  
 LOT 18

**GLWGUTSCHICK LITTLE & WEBER, P.A.**  
 CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS  
 3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK  
 BURTONSVILLE, MARYLAND 20866  
 TEL: 301-421-4024 BAL: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4188

DES. dds  
 DRN. dds  
 CHK.

PREPARED FOR :  
 CHM, LLC  
 5027 TEN OAKS ROAD  
 CLARKSVILLE, MD 21029  
 JANET MARSHALL  
 410-531-1460

G. L. W. No.	13070
ZONING	RR-DEO
TAX MAP/GRID	28-8
DATE	MAY, 2015
SCALE	1"=50'
SHEET	1 OF 1

L:\CADD\DRAWINGS\13070\PLANS BY GLW\Well Site Plans\2015-04 Well Plan.dwg  
 PLOTTED: 5/8/2015 8:15:40 AM LAST SAVED: 5/8/2015 8:14:30 AM PLOTTED BY: Dan Geringer



# Water Testing Laboratories

P.O. Box 712  
Stevensville, MD 21666  
410-643-7711

of Maryland, Inc.

Well Water Solutions  
P. O. Box 67  
Highland, MD 20777

Reporting Date: 3/2/2017  
Report #: WWS1702-09

Submitted Sample Address: Lot 18, 5005 Gaithers Chance Drive  
Clarksville, MD 21029  
Submitted Sample Source: Bathroom sink-1<sup>st</sup> Test no Treatment  
Date / Time Collected: 2/28/2017 11:30 AM  
Sampler/Company: Janet Walker 9006JW, Well Water Solutions  
Sample Type: Drinking Water  
Field Record: Chlorine residual: Absent Clear when drawn pH: 6.5  
Well Tag #: HO-15-0072

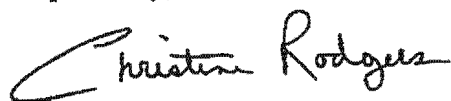
## Analytical Results

Parameter	Result	Units	Report Limit	Standard	Standard Type
Total Coliform Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
<i>E. Coli</i> Bacteria	Absent	Coliforms/100 ml	Present/Absent	Absent	EPA Primary MCL
Nitrate as N	3.7	mg/L	0.5	10	EPA Primary MCL
Sand	Absent	mg/L or Absent	mg/L or Absent	< 5 mg/L*	MD Well Reg.
Turbidity	7.0	NTU	0.5	< 10 NTU*	MD Well Reg.

### Notes:

1. Bacteriological analysis of this sample indicates this water is  safe for human consumption.
2. Results in **BOLD** exceed the MCL, Action Level or MD well regulation.
3. Samples received and examined within EPA's recommended holding times.
4. MCL - Maximum Contaminant Level
5. ND - Not Detected.
6. \* Sand and turbidity standard for new wells - See Code of Maryland Regulations (COMAR) 26.04.04.16E(5). If sand is present, it is analyzed to determine amount of sand in mg/L.
7. MCL Type -  
EPA Primary: The maximum contaminant level which is the highest level of contaminant that is allowed in drinking water. Primary MCLs are enforceable standards.  
EPA Secondary: Non enforceable guidelines regulating contaminants that cause cosmetic effects (such as skin or tooth discoloration) or aesthetic effects (such as taste or odor) in drinking water.  
Action Level: Defined in treatment techniques which are required processes intended to reduce the level of a contaminant in drinking water.
8. We certify that the analyses performed for this report are accurate, and that the laboratory tests were conducted by methods approved by the US Environmental Protection Agency and the Maryland Department of the Environment.

Reported by,



C. Rodgers, Assistant Lab Manager, Microbiology

Reviewed by: Sub