

C 1 36422

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 13

ST/CO USE ONLY DATE Received MM DD YY 06 10 16

DATE WELL COMPLETED MM DD YY 06 06 2016

Depth of Well 22 440' 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" OK 8/25/16 Ho- 15-0230

OWNER Clime, Susan + Carl WELL SITE ADDRESS 12348 Howard Lodge Rd TOWN Marriottsville SUBDIVISION Miller Property SECTION LOT 7D

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Brown Shale, Blue Rock, and Water 260', 400'.

GROUTING RECORD form with fields for YES/NO, CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (19), NO. OF POUNDS (1780), GALLONS OF WATER (114), DEPTH OF GROUT SEAL (0 to 70 ft).

CASING RECORD form with fields for casing types (ST, CO, PL, OT), MAIN CASING TYPE (PL), Nominal diameter (6 inch), Total depth (73 feet).

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form with fields for screen type (ST, BR, HO, PL, OT) and depth (71, 440).

PUMPING TEST form with fields for HOURS PUMPED (4), PUMPING RATE (1.2 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (5 ft before, 270 ft when), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY (31-35 GPM), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (+ above, - below).

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES (Y) NO (N)

CIRCLE APPROPRIATE LETTER 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. M S D 024 DRILLERS SIGNATURE LIC. NO. M S D 027

DEPTH (nearest ft.) table with rows for casing sections and slot size (1, 2, 3).

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

LATITUDE 39.33988 LONGITUDE 76.94365 (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. Failure to provide the info. may result in this form not being processed.

B 1	SEQUENCE NO. (MDE USE ONLY) 42887	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 558048	STATE PERMIT NUMBER HO-15-0230 <small>70 fill in this form completely 79</small>
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OWNER INFORMATION

Date Received (APA) 03-24-16

8 MM DD YY 13

15 Last Name Climo Owner Susan + Earl First Name 34

36 Street or RFD 6519 Bailey Corn Row 55

57 Town Columbia 70 State md 72 Zip 21044 76

LOCATION OF WELL

8 COUNTY Howard 21

23 SUBDIVISION Miller Property 42

SECTION 44 46 LOT 7D 48 50

52 NEAREST TOWN Marriottsville 71

DRILLER INFORMATION

Driller's Name Joseph & Mayne M SD 024 License No. 76 81

Firm Name Joseph & Mayne Well Drilling

Address 5512 Ridge Rd Mt Airy 21771

Signature Joseph Mayne Date 3-18-16

SOURCES OF DRILLING WATER

1. Well

11 STREET ADDRESS 12348 Howard Lodge Rd 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH
 WEST
 EAST
 SOUTH

34 DISTANCE FROM ROAD 300 37

ENTER FT OR MI FT 38 39

TAX MAP: 9 BLK: 12 PARCEL 306

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME Howard COUNTY NO. 13

STATE SIGNATURE _____ INSERT S →

DATE ISSUED 3/29/16 CO SIGNATURE Carl Gell EXP. DATE 3/29/17

43 MM DD YY 48

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

37 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

39 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

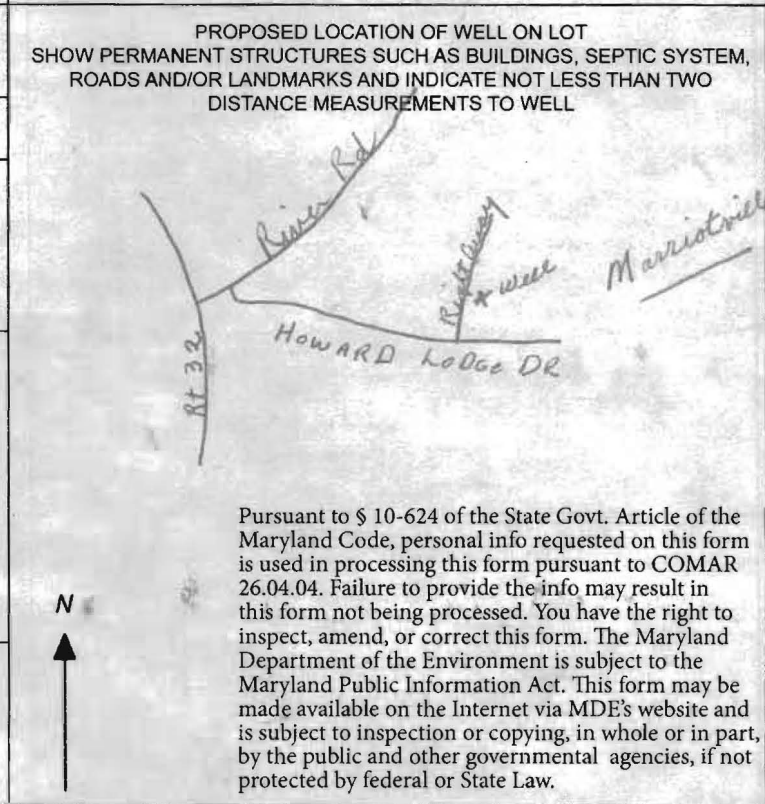
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

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

APPROX. PERMIT NUMBER _____ **G** _____

PERMIT No. HO-15-0230

70 71 72 73 74 75 76 77 78 79



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. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Sodium chloride + TDS samples req'd at yield

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 15-0230
 Location of property (road) 12348 Howard Lodge Rd
 Subdivision Miller Property Lot 7 Block _____ Plat _____ Sec. 0
 Well Driller Joseph L. Mairne Owner Earl and Susan Clime

Depth of well 440'
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 5'

I. High rate pumping -- reservoir drawdown

Time pump started 6:30 Pumping rate 20 gpm
 Total time 30min to reach pumping water level 270 ft. below M.P.

II. 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 5' gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
6:45	142'	3 sec		20
7:00	270	4 sec		15
7:15	270	50 sec		1.2
7:30	270	50 sec		1.2
7:45	270	50 sec		1.2
8:00	270	50 sec		1.2
8:15	270	50 sec		1.2
8:30	270	50 sec		1.2
8:45	270	50 sec		1.2
9:00	270	50 sec		1.2
9:15	270	50 sec		1.2
9:30	270	50 sec		1.2
9:45	270	50 sec		1.2
10:00	270	50 sec		1.2
10:15	270	50 sec		1.2
10:30	270	50 sec		1.2
10:45	270	50 sec		1.2
11:00	270	50 sec		1.2
11:15	270	50 sec		1.2
11:30	270	50 sec		1.2
11:45	270	50 sec		1.2
12:00	270	50 sec		1.2
12:15	270	50 sec		1.2
12:30	270	50 sec		1.2
12:45	270	50 sec		1.2
1:00	270	50 sec		1.2

RD-224

**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: Robert L. Feezer Co. Telephone #: 410-781-4655
Address: 6321 Barnett Avenue
Sykesville, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Joshua Henricks License# PI0173

***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: Mueller Homes Telephone #: 410-549-4444
Subdivision: _____ Lot #: 7D Well Tag #: HO - 15 - 0230
Site Address: 12348 Howard Lodge Road
Sykesville, MD 21784

Submersible Pump Data

Make: Grundfos
Model #: 10SQE15-380
Pump Capacity 10 GPM
Well Yield: 1.2 GPM

Pitless Adapter

Make: Boshart
Model#: P-100-SS
Depth: 42" (36" min)
NSF/WSC approved: Yes

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 440 (feet)
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 inside of well casing N/A

Piping to house

Type: Poly
PSI: 200 (160 psi min)
Depth of supply line: 42" (36" min)

House Connection

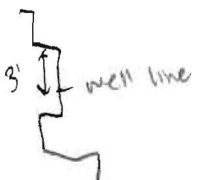
PVC sleeve to undisturbed soil at wall penetration: Yes
Length of sleeve(5' minimum from foundation): 10'
Sleeve sealed properly: Yes

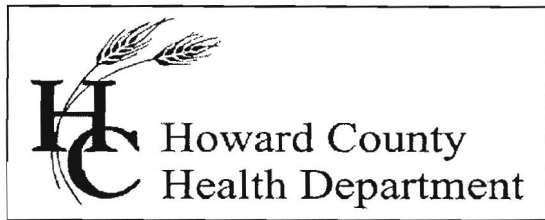
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Joshua Henricks December 14, 2016
Signature of company representative responsible for installation date

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

Date Insp. Requested: 12/13/16 Date Insp. Approved: 12/15/16 Inspector: SC/JC
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 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

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – NOVEMBER 26, 2017

May 26, 2017

Earl and Susan Clime
12348 Howard Lodge Drive
Sykesville, MD 21784

**RE: DONALD WEISENSEL, LOT 7D
12348 HOWARD LODGE DRIVE
Building Permit: B16003876
Well Permit: HO-15-0230**

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 **5/22/2017**. Final approval of the well line connection to the dwelling was granted on **12/15/2016**. The well construction was completed on **6/6/2016**. Water samples were collected on **5/15/2017 and 5/22/2017**.

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-15-0230. 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>

Approving Authority,



Robert Bricker, REHS/RS, L.E.H.S.
Environmental Sanitarian
Well & Septic Program

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

Water Testing Laboratories

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

of Maryland, Inc.

Mueller Homes
7520 Main Street, Suite 201
Sykesville, Md 21784

Reporting Date: 5/17/2017
Report #: M5105

Submitted Sample Address: 12348 Howard Lodge Road
Sykesville, MD
Submitted Sample Source: Holding tank-well cap intact & no devices used
Date / Time Collected: 5/15/2017 12:30 PM
Sample Type: Drinking Water
Sampler/Company: K. Lee 4827KL, WTL of MD
Field Record: Chlorine residual: Absent Clear when drawn pH: 6.8
Well Tag #: HO-15-0230

OK' except Coliform
5/26/17

Analytical Results

Parameter	Result	Units	Report Limit	Standard	Standard Type
Total Coliform Bacteria	Present	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	1.4	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	0.7	NTU	0.5	< 10 NTU*	MD Well Reg.

Notes:

- Bacteriological analysis of this sample indicates this water is **unsafe** for human consumption.
- Results in **BOLD** exceed the MCL, Action Level or MD well regulation.
- Samples received and examined within EPA's recommended holding times.
- MCL - Maximum Contaminant Level
- ND - Not Detected.
- * 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.
- 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.
- 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,

Christen Rodgers

C. Rodgers, Assistant Lab Manager, Microbiology

Reviewed by: _____

Water Testing Laboratories

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

of Maryland, Inc.

Mueller Homes
7520 Main Street, Suite 201
Sykesville, Md 21784

Reporting Date: 5/23/2017
Report #: M5139

Submitted Sample Address: 12348 Howard Lodge Road
Sykesville, MD
Submitted Sample Source: Bathroom sink-No Devices on System
Date / Time Collected: 5/22/2017 10:00 AM
Sample Type: Drinking Water
Sampler/Company: K. Lee 4827KL, WTL of MD
Field Record: Chlorine residual: Absent Clear when drawn pH: 8.5
Well Tag #: HO-15-0230

OK
JEB
5/26/17

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

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. 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.
6. 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: 

Lab No. Date Received

Send Report To:

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
TRACE METALS LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205


E17004520001
Received: 05/16/2017
Metals HC 12348

LABORATORY ANALYSIS REQUEST

Please Print

Sample ID No: HC 12348 Site Name: MULLER HOMES County: HOWARD

Sample Source: 12348 Howard Lodge Dr. Sykesville Collector: B. Shklyar
Street Town or City Name

Date Collected: 5/16/2017 Time Collected: 9:00 a.m. _____ p.m. Phone #: 410-313-1787

Sample Preserved By: Field ESRL WMRL Central Lab
Preservative Used: HNO₃ mL pH: 6.8

Sample Type: Drinking Water Landfill Source (Raw Water) Liquid
 Community Stream Distribution (Treated) Solid
Data Category 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 from Laundry Room
* Mail results to: 7520 Main St, Suite 201, Sykesville, MD 21784

✓	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)	<u>310</u>		Potassium (K)	
	Thallium (Tl)			Uranium (U)	
				Vanadium (V)	

RECEIVED
MAY 24 2017
HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM

Lab Supervisor: _____

Date Reported: _____

•Phone: (443) 681-3857 •Fax: (443) 681-4507

DHMH 4432 (05/15)

SUBMITTER'S COPY



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



Certificate of Analysis

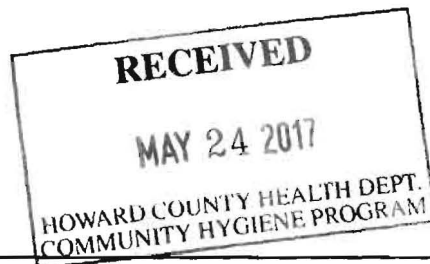
HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project No: E17004520 Date Coll.: 05/16/2017 Date Received 05/16/2017 Submitted By: Shklyav

Field ID: HC 12348
Lab No.: E17004520001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	9.33	ppm	05/17/2017

Comments:



Approved by: *Sadia Hussain*

Approval date: 05/23/2017

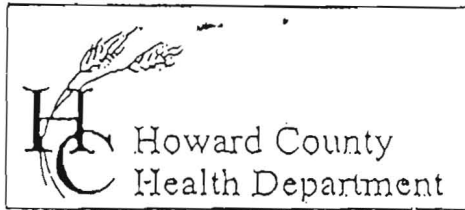
**The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1.

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.

Telephone: (443) 681 - 3853

Fax: (443) 681-4507

S:\EnviroFinal-Metals.rpt



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:

Miller Property 7D 12348 Howard Lodge Rd
 Subdivision/Property Name Lot# Road Name

The well site has been staked by SILL ENGINEERING GROUP
 (professional land surveyor or company employing professional land surveyors)
 on March 2016 (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

Earl & Susan Clime

C - 410-302-4058

TEST NUMBER	ELEVATION
001	344.2
002	343.3
003	342.1
004	341.2
005	340.2
006	339.2
007	338.2
008	337.2
009	336.2
010	335.2
011	334.2
012	333.2
013	332.2
014	331.2
015	330.2
016	329.2
017	328.2
018	327.2
019	326.2
020	325.2
021	324.2
022	323.2
023	322.2
024	321.2
025	320.2
026	319.2
027	318.2
028	317.2
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545	-199.8

Bricker, Robert

From: Bricker, Robert
Sent: Thursday, February 16, 2017 2:38 PM
To: SueClime@gmail.com; pauljr@muellerhomes.com
Subject: sample well for level of sodium etc

Mrs Clime and Mr Mueller,

Please be advised that the water samples that were supposed to have been obtained during at yield test were not obtained. Analyses are required for 'sodium', 'chlorides', and total dissolved solids ('TDS'). So that there is less potential for delay of occupancy, the Bureau recommends that these samples be obtained as soon as possible and the analyses completed. Please do not confuse these required analyses with the water sample and analyses required for determination of potability.

ROBERT BRICKER, REHS/R.S., L.E.H.S.
ENVIRONMENTAL SANITARIAN II
BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
8930 STANFORD BLVD., COLUMBIA, MD 21045

Phone: Desk, 410-313-2691; Program, 410-313-1771; Bureau, 410-313-1774
Fax: 410-313-2648

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