

C1 26561

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 4520 385, 4520 448

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-95-2670

ST/CO USE ONLY DATE RECEIVED MM DD YY 08 01 14

DATE WELL COMPLETED MM DD YY 07 10 14

Depth of Well 22 125 26 (TO NEAREST FOOT)

Handwritten notes: (R2) DK 11/24/14

OWNER BASSLER VENTURE LLC, WELL SITE ADDRESS HAYLAND FARM WAY, TOWN CLARKSVILLE, SUBDIVISION WALNUT CREEK PHASE III, SECTION, LOT 79

WELL LOG Not required for driven wells

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

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD yes no (Y) (N)

WELL HAS BEEN GROUTED (Circle Appropriate Box), TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 22, NO. OF POUNDS 3200, GALLONS OF WATER 132, DEPTH OF GROUT SEAL (to nearest foot) from 0 to 100 ft.

CASING RECORD casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER)

MAIN CASING TYPE PL, Nominal diameter top (main) casing (nearest inch) 6, Total depth of main casing (nearest foot) 98

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

SCREEN RECORD screen type or open hole insert appropriate code below: ST (STEEL), BR (BRASS), PL (PLASTIC), HO (OPEN HOLE), OT (OTHER)

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface) BEFORE PUMPING 30 ft., WHEN PUMPING 38 ft.

TYPE OF PUMP USED (for test) S (submersible)

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. 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 41

PUMP COLUMN LENGTH (nearest ft.) 41

CASING HEIGHT (circle appropriate box and enter casing height) (+) above, (-) below, LAND SURFACE (nearest foot) 2

LATITUDE 39.24048, LONGITUDE 76.95069, (DEFAULT COORD. WGS 84)

NOTES:

NUMBER OF UNSUCCESSFUL WELLS: 0

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 117, DRILLERS SIGNATURE, LIC. NO. D

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

C 2 DEPTH (nearest ft.) 40 96 125

Table with columns: A, C, H, S, R, E, N and rows for casing diameter and slot size.

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

B 1 26809

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-2670 fill in this form completely

546283-T please type

Date Received (APA) 032014

OWNER INFORMATION

Bassler Venture LLC, PO BOX 482, Lisbon MO, 21765

B 3 LOCATION OF WELL

Howard COUNTY, Walnut Creek Phase III, Clarksville

DRILLER INFORMATION

PAUL MAYNE MS D117, RAUL MAYNE WELL DRILLING, 17024 Hamby Rd Mt. Airy MD, 21771, 3/19/14

B 4 SOURCES OF DRILLING WATER

1 well, Hayland Farm way, 250, 28, 49

B 2 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 A520385 A520448 13, STATE SIGNATURE, DATE ISSUED 03/28/2014, CO. SIGNATURE, EXP. DATE 3/28/15

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 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTary, JETTED AIR-PERCussion, Jetted & DRIVEN ROTARY (Hydraulic 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

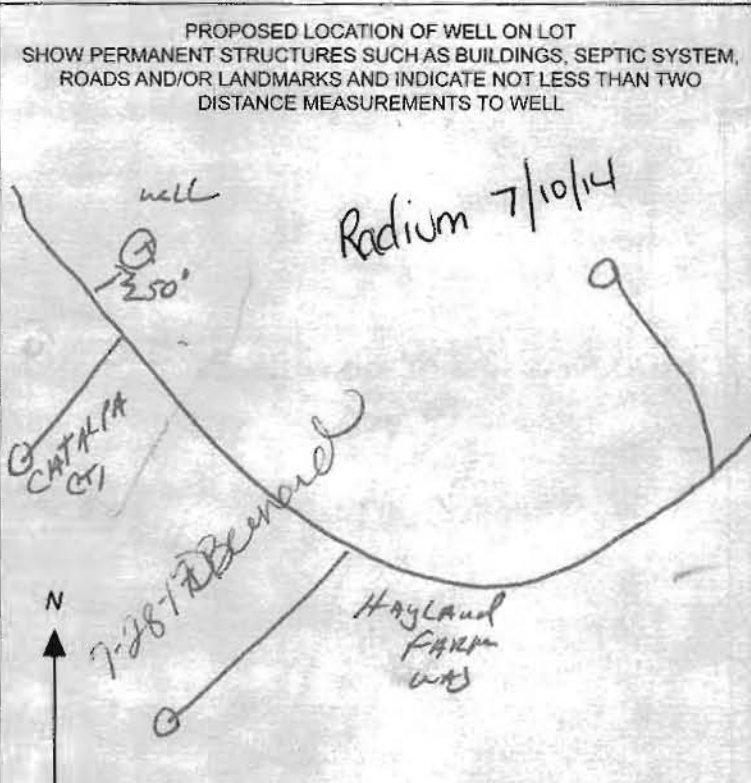
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROX. PERMIT NUMBER HO 2006G 020

PERMIT No. HO-95-2670

SPECIAL CONDITIONS Radium Sample required @ yield test & all wells must be at least 100 feet apart





**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: \_\_\_\_\_ 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 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: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO-95-2670  
Site Address: \_\_\_\_\_

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: _____	Make: _____	Two piece watertight cap: _____
Model #: _____	Model#: _____	Screened, vented well cap: _____
Pump Capacity _____ GPM	Depth: _____ (36" min)	Cap secured to casing: _____
Well Yield: _____ GPM	NSP/WSC approved: <u>W3</u>	Conduit min 1 1/2" B.G.: _____
Depth of well encountered at time of pump installation: _____ (feet)		Conduit secured to well cap: _____
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors, 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</u> of well casing _____		

<u>Piping to house</u>	<u>House Connection</u>
Type: _____	PVC sleeve to undisturbed soil at wall penetration: _____
PSI: _____ (160 psi min)	Length of sleeve (3' minimum from foundation): _____
Depth of supply line: _____ (36" min)	Sleeve sealed properly: _____

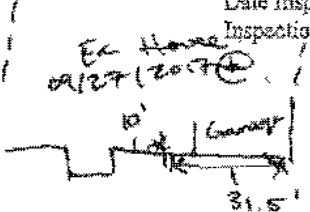
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

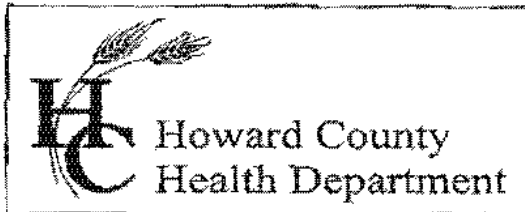
Signature of company representative responsible for installation \_\_\_\_\_ date \_\_\_\_\_

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

Date Insp. Requested: 9/27/2017 Date Insp. Approved: 09/27/2017 Inspector: (Signature)

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>	36" <u>09/27/2017</u> (Signature)
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>	
Elec. conduit extends at least 12" below grade/attached to cap properly	<input checked="" type="checkbox"/>	29" <u>09/27/2017</u> (Signature)
Safety rope not outside of well cap/casing	<input checked="" type="checkbox"/>	
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>	28" <u>09/27/2017</u> (Signature)
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>	35" <u>09/27/2017</u> (Signature)
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>	





Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1774 | 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 – JUNE 13, 2018

December 13, 2017

Homeowner  
12210 Hayland Farm Way  
Ellicott City, MD 21042

RE: **Walnut Creek, Lot 79**  
**12210 Hayland Farm Way**  
**Building Permit: B17002584**  
**Well Permit: HO-95-2670**

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 12/12/2017. Final approval of the well line connection to the dwelling was granted on 6/29/2017. The well construction was completed on 7/10/2014. Water samples were collected on 11/17/2017 & 12/6/2017.

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.

Gross Alpha and Beta samples were also collected on 7/10/2014. Results showed a Gross Alpha level of  $2.0 \pm 0.0$  pCi/L and Gross Beta level of  $4.0 \pm 0.0$  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.

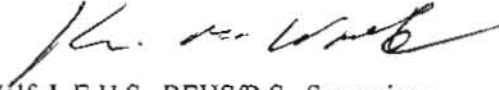
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-2670. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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,



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

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



7178 Columbia Gateway Dr., Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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

## TO ALL INTERESTED PARTIES

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

Well Site Location:

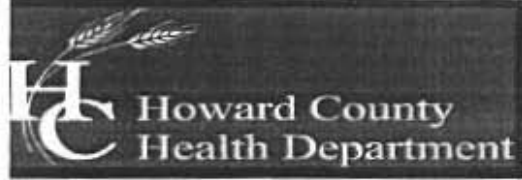
<u>Walnut Creek</u>	<u>79</u>	<u>Hayland Farm Way</u>
<b>Subdivision/Property Name</b>	<b>Lot #</b>	<b>Road Name</b>

- The well site has been staked by Fisher, Collins and Carter, Inc.,  
(professional land surveyor or company employing professional land surveyors)  
on 03/21/14 (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 3/11/07





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

Maura Rossman, M.D., Health Officer

September 8, 2014

Bassler Venture LLC  
Attn. Tim Feaga  
15950 North Avenue, P.O. Box 482  
Lisbon, Maryland 21765

RE: Walnut Creek Lot 79  
Hayland Farm Way  
Well Tag: HO - 95 - 2670

Dear Mr. Feaga:

A sample was collected during a yield test on July 10, 2014 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  $< 2.0 \pm 0.0$  picocuries/liter (pCi/L), while the **Gross Beta** level was  $< 4.0 \pm 0.0$  pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its 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 **meets** EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please 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, Director  
Bureau of Environmental Health

Enclosure  
cc: Property file

SEND REPORT TO: Barth Nixon  
 Howard County Health Department  
 Bureau of Environmental Health  
 8930 Stanford Blvd.  
 Columbia, Maryland 21045

DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
 Laboratories Administration  
 201 W. Preston St., Baltimore, MD 21201  
 Robert A. Myers, Ph.D., Director

Lab No. 0119

RADIATION ANALYSIS REQUEST FORM

Plant/Site Name: Walnut Creek Phase III - Lot 7A County: Howard  
 Sample Source: Well "Hayland Farm Way" (HC 2670) Location: HO-95-2670  
(Well oo., lab sink, sample tap, etc.)  
 Radon-222 Bottle A \_\_\_\_\_ Radon-222 Field Blank Bottle A \_\_\_\_\_  
 Bottle B \_\_\_\_\_ Bottle B \_\_\_\_\_  
 County 12 Plant No. \_\_\_\_\_

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: \_\_\_\_\_ Federal Project: S  
 Collector: R. Rappaport Telephone No.: 410-313-1781  
 Date Collected: 7/10/14 Time Collected: 11 a.m. \_\_\_\_\_ p.m.  
 Field pH: \_\_\_\_\_ Field Chlorine: \_\_\_\_\_  
 Nitric Acid Preserved: Yes  No  Iced: Yes  No

Remarks: Sample taken during yield test

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	<u>0119</u>	<u>EPA 9000</u>	<u>2.0</u>	<u>7/16/14</u>	<u>CWB</u>	<u>7/21/14</u>
<input checked="" type="checkbox"/> Gross Beta	4100	<u>0119</u>	<u>7</u>	<u>4.0</u>			
<input type="checkbox"/> Radium-226	4020						
<input type="checkbox"/> Radium-228	4030						
<input type="checkbox"/> Total Uranium	4006						
<input type="checkbox"/> Radon-222 (Bottle A)	4004						
<input type="checkbox"/> Radon-222 (Bottle B)	4004						
<input type="checkbox"/> Radon Field Blank A	4004						
<input type="checkbox"/> Radon Field Blank B	4004						
<input type="checkbox"/> Tritium							

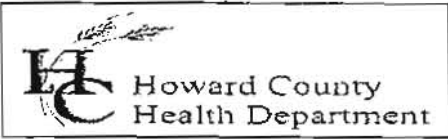
Date Received: 07/11/14 Received By: C. Wally Boyd  
 Data Release Signature: Deborah Miller-Jack Date: 7/21/14

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?	<input checked="" type="checkbox"/>		
Sample pH < 2.0?	<input checked="" type="checkbox"/>		
Received within holding time?	<input checked="" type="checkbox"/>		

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

ORIG MAILED 8/6/14

# Invoice



Bureau of Environmental Health  
 Attn: Bert Nixon, Director

DATE: AUGUST 6, 2014  
 DATES OF SERVICE: JULY 10 & 21, 2014  
 INVOICE #: 2014-015

8930 Stanford Boulevard, Columbia, MD 21045  
 Phone 410-313-2640 Fax 410-313-2648  
 www.hchealth.org

**BILL TO** Heritage Reality and Land Development  
 Attn: Tim Feaga  
 15950 North Ave P.O. Box 482  
 Lisbon, MD 21765

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

DATE	DESCRIPTION	BALANCE	AMOUNT
07/21/14	Gross alpha/beta testing performed for Walnut Creek, Lots # 77, 78, and 87 HO - 95 - 2668 HO - 95 - 2669 HO - 14 - 0028		\$135.00
07/10/14	Gross alpha/beta testing performed for Walnut Creek Lots # 79, 89, and 95 HO - 95 - 2670 HO - 14 - 0030 HO - 14 - 0031		\$135.00
			<b>AMOUNT DUE</b>
			\$270.00

Please detach and return with payment.

REMITTANCE	
Invoice #	2014-015
Site Information	Walnut Creek Lots 77, 78, 79, 87, 89, & 95
Amount Due	\$270.00

Receipt 54603  
8/27/14

Make Checks Payable to: **Director of Finance** Mail Payments to: **Bureau of Env. Health**



# Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3626 Ventnor Court • P.O. BOX 245 • Myerstown, MD 21773 • 800-310-0340 • FAX 301-203-0366  
 www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 3948 - 1958-1

### Field Record

Site visit performed on: Friday, November 17, 2017 11:15 AM  
 by: Kevin Kretzer State ID No. 1511KK  
 Affiliation: Tri-County Pump Service  
 Property Owner: Craftmark Homes  
 Project: Lot 79  
 Property Address: 12210 Hayland Farm Way  
 Ellicott City, MD 21042  
 Sample Source: 1st Floor Powder Room Sink  
 Treatment Devices Noted: No Treatment Devices  
 Well No.: HO-B5-2670  
 Field pH: 7.7  
 Free Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 11/17/2017 12:22 PM

#### Inorganic Chemical results:

Parameter	Result	Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen	6.0	mg/l	10	11/17/2017	300.0	PH
Sand	<2	mg/l	5	11/21/2017	0.065mm Filter	JD
Turbidity	1.1	NTU*	10	11/17/2017	180.1	KB

Reported by:

*Kevin Kretzer*  
 Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory  
 Maryland Cert. No. 115 Virginia Cert. No. 00444  
 MDDT WBE Cert. No.: 91-158

11/21/2017 1:40:50 PM



# Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3576 Ventnor Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3346 • FAX 301-293-3358  
 www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 3948 - 1958-2

### Field Record

Site visit performed on: Friday, November 17, 2017 11:21 AM  
 by: Kevin Kretzer State ID No. 1511KK  
 Affiliation: Tri-County Pump Service  
 Property Owner: Craftmark Homes  
 Project: Lot 79  
 Property Address: 12210 Hayland Farm Way  
 Ellicott City, MD 21042  
 Sample Source: 1st Floor Powder Room Sink  
 Treatment Devices Noted: No Treatment Devices  
 Well No.: HO-95-2670  
 Field pH: 7.7  
 Free Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 11/17/2017 12:22 PM

#### Bacteriological results:

Total Colif. (/100ml)	E. coli (/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
130	<1	11/17/17	13:18	11/18/17	13:35	9223B	MM

Bacteriological analysis of this sample indicates the water is unsafe for human consumption.  
 Analysis was performed according to the 20th edition of Standard Methods

*Field*

Reported by:

*Curtis Phelps* 11/20/17  
 Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory  
 Maryland Cert. No. 116 Virginia Cert. No. 00444  
 MDOOT WBE Cert. No.: 91-158



# Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Virginia Court • P.O. BOX 248 • Myersville, MD 21773 • 800-332-3346 • FAX 301-203-2366  
 www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 3948 - 1958-3

### Field Record

Site visit performed on: Wednesday, December 06, 2017 11:11 AM  
 by: Steve Wolfe State ID No. 9587SW  
 Affiliation: Tri-County Pump Services

Property Owner: Craftmark Homes  
 Project: Lot 79

Property Address: 12210 Hayland Farm Way  
 Ellicott City, MD 21042

Sample Source: 1st Fl 1/2 Bath Vanity ✓

Treatment Devices Noted: Water Softener ✓

Sample taken after treatment: Yes OK ✓

Well No.: HO-95-2670

Field pH: 7.8

Free Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 12/6/2017 2:30 PM

#### Bacteriological results:

Total Colif. (/100ml)	E.coli. (/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
<1	<1	12/06/17	14:49	12/07/17	15:02	8223B	JD

Bacteriological analysis of this sample indicates the water is safe for human consumption and meets federal, state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

OK ✓

Reported by: Cathy Phelps 12/7/17  
 Name

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory  
 Maryland Cert. No. 116 Virginia Cert. No. 00444  
 MDOY WBE Cert. No.: 51-156