

C-1 46025

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

ST/CO USE ONLY DATE RECEIVED 12-13-14

DATE WELL COMPLETED 11-22-16

Depth of Well 340

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-15-0336

OWNER STONE SIFER, TERESA WELL SITE ADDRESS 12993 FREDERICK TOWN WEST FRIENDSHIP SUBDIVISION HUDSON FARM SECTION LOT 4

WELL LOG Not required for driven wells

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

C 3 PUMPING TEST

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

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

HOURS PUMPED (nearest hour) 3

DESCRIPTION (Use additional sheets if needed)

NO. OF BAGS 8 NO. OF BOUNDS 100

PUMPING RATE (gal. per min.) 15

FEET FROM TO

GALLONS OF WATER 184

METHOD USED TO MEASURE PUMPING RATE Bucket

Top soil 0 2

DEPTH OF GROUT SEAL (to nearest foot) from 0 to 57

WATER LEVEL (distance from land surface)

Crown Shale 2 20

(enter 0 if from surface)

BEFORE PUMPING 55

Brown slate 20 50

CASING RECORD casing types insert appropriate code below

WHEN PUMPING 75

Gray mica 50 230

MAIN CASING TYPE ST 6 60

TYPE OF PUMP USED (for test)

opening 230 231

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

A air P piston T turbine

Gray mica 231 340

SCREEN RECORD screen type or open hole insert appropriate code below

C centrifugal R rotary O other (describe below)

NUMBER OF UNSUCCESSFUL WELLS: 0

DEPTH (nearest ft.) 110 59 340

J jet S submersible

WELL HYDROFRACTURED YES NO Y N

CIRCLE APPROPRIATE LETTER

PUMP INSTALLED DRILLER INSTALLED PUMP YES NO

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

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

E ELECTRIC LOG OBTAINED

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 36

P TEST WELL CONVERTED TO PRODUCTION WELL

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

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.

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

CASING HEIGHT (circle appropriate box and enter casing height)

DRILLERS LIC. NO. MW D 040

SLOT SIZE 1 2 3

LATITUDE 39.302825

DRILLERS SIGNATURE Bruce F. H... (MUST MATCH SIGNATURE ON APPLICATION)

DIAMETER OF SCREEN (NEAREST INCH) 56 60

LONGITUDE 76.957519

LIC. NO. JSD 038

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

(DEFAULT COORD. WGS 84)

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

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

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.

TELESCOPE CASING LOG INDICATOR OTHER DATA

70 72 74 75 76

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-15-0336

B 1-38356

SEQUENCE NO (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
559810 please type

STATE PERMIT NUMBER

Ho-15-0336
fill in this form completely

Date Received (APA) 10/24/16
10 24 16
OWNER INFORMATION
13273
STONESIFER TERESA
15 Last Name Owner First Name 34
12885 FRERICK ROAD
36 Street or RFD 55
WEST FRIENDSHIP, MD 21794
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL CCH
Howard
8 COUNTY 21
Hudson Farm
23 SUBDIVISION 42
SECTION 44 46 LOT 4 50
West Friendship
52 NEAREST TOWN 71

DRILLER INFORMATION
George F. Easterday M W D 040
Driller's Name 76 License No. 81
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
Address
Signature George F. Easterday Date 10/24/2016

B 4 SOURCES OF DRILLING WATER
1. wells
2.
3.
12793 Frederick Road
11 STREET ADDRESS 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W SOUTH S EAST E
34 200 37
DISTANCE FROM ROAD Ft.
ENTER FT OR MI 38 39
TAX MAP: 15 BLK: 10 PARCEL 252

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20
5 TDs samples @ 15' depth

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

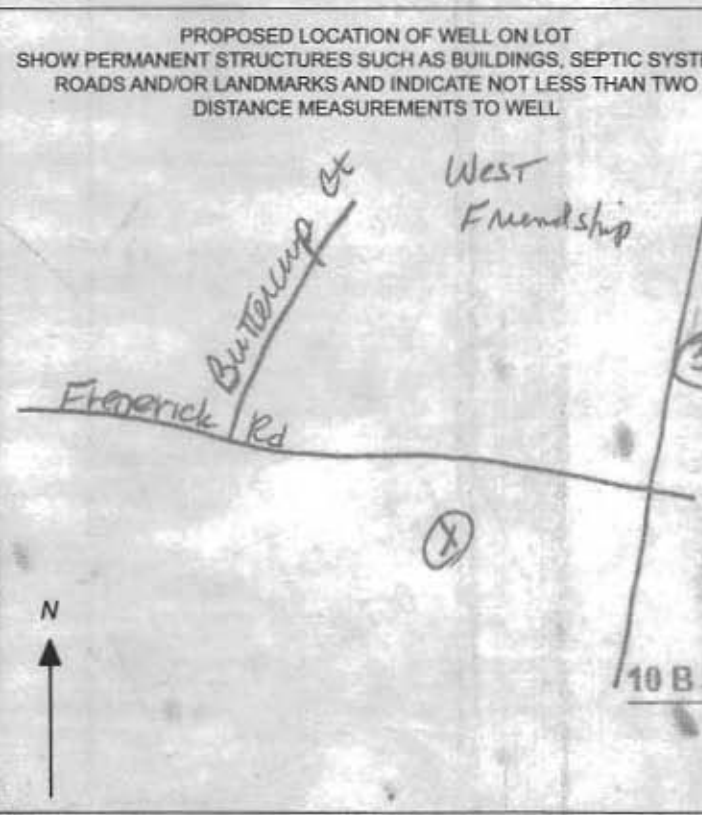
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard (13)
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S → 41
DATE ISSUED 11/1/16
43 MM DO YY 48 CO SIGNATURE Sch G M EXP. DATE 11/1/17

APPROXIMATE DEPTH OF WELL 24 300 28 FEET
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

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 DEEPENEED 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 DEEPEEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENEED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER G
PERMIT No. Ho-15-0336
70 71 72 73 74 75 76 77 78 79



SPECIAL CONDITIONS
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED
Sodium chloride + TDS samples req'd at yield

**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: All Around Plumbing Telephone #: 301-829-6745
Address: P.O. Box 2596
Frederick, MD 21705

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Brian Madden License# 18121

*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: Solomon Egamma Telephone #: 301-537-4747
Subdivision: 12793 Lot #: 4 Well Tag #: HO-15-0336 ✓ 5/11/2018
Site Address: 12793 Frederick Rd.
Next Friendship, MD 21794

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Genios</u>	Make: <u>Bushart</u>	Two piece watertight cap: ✓
Model #: <u>SC-310422C</u>	Model #: <u>P-100 55</u>	Screened, vented well cap: ✓
Pump Capacity: <u>5</u> GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: ✓
Well Yield: <u>15</u> GPM	NSF/WSC approved: ✓	Conduit min 18" B.G.: ✓
Depth of well encountered at time of pump installation: <u>340</u> (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 inside of well casing

Piping to house	House Connection
Type: <u>Pvc</u>	PVC sleeve to undisturbed soil at wall penetration: ✓
PSI: <u>200</u> (160 psi min)	Length of sleeve (5" minimum from foundation): ✓
Depth of supply line: <u>42"</u> (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: [Signature] date: 5-10-2018

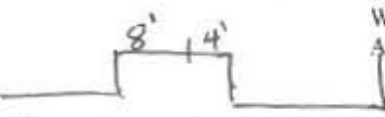
Bill Ingram (Farm Home) will do grading + says grade @ well will NOT change before

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

Date Insp. Requested: 5/11/2018 Date Insp. Approved: 6/26/18 Inspector: SC
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 ✓

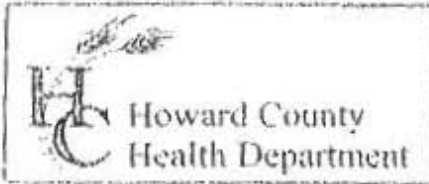
check final grade IGOP:
5/15/18 Contractor scheduled inspection - already inspected (tag on well), line covered. Grade @ well looks like it will come down, need to verify pitless depth after final grading. (C)

EX HOUSE
05/11/2018 @



*Well LINE IS SLEEVED UNDER DRIVEWAY

5/11/2018 @
Pitless → Grade 45"
Cond. → Grade 42"
Casing → Grade 11"
Foundation over 20g 5' Sleeve



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

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 Fisher Collins & Carter
(professional land surveyor or company employing professional land surveyors)
on 10-24-16 (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 6/10/03

12793 Frederick Rd
STONKSIFER

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

July 25, 2018

Homeowner
12793 Frederick Road
West Friendship, MD 21794

Dear Homeowner,

The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from your well water.

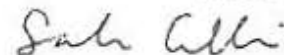
Elevated sodium levels in drinking water could affect individuals on low-salt diets. The action level for sodium is 20 milligrams per liter (mg/L); **sodium from your well measured 55.35 mg/L.**

Chloride and TDS are both considered secondary contaminants, meaning high concentrations can affect taste, color, odor, or corrosive properties of water but present no risk to health. The secondary maximum contaminant level for chloride is 250 mg/L; **chloride from your well measured 29 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 130 mg/L.**

Given the elevated levels of sodium, you may want to consult a plumber and/or water treatment company to discuss options. Please be aware that any backwash generated from a treatment system must be disposed of in a subsurface disposal system. Prior to installing a system that generates backwash, please contact the Health Department to ensure that all regulatory requirements are met.

Feel free contact me at the number or email below with any questions regarding the results of water sampling.

Sincerely,



Sarah Collins, L.E.H.S.
Howard County Health Department
Well & Septic Program
SCollins@howardcountymd.gov
410-313-6287

Send Report To: Bert Nixon

Howard County Health Dept
Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045

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



E18004710001
Received: 06/29/2018
Metals 12793 SC

LABORATORY ANALYSIS REQUEST

Do not write above this line

Please Print

Sample ID No: 12793 SC Site Name: Hudson Prop. County: Howard

Sample Source: 12793 Frederick rd. W. Friendship Collector: S. Collins
Street Town or City Name

Date Collected: 6 / 29 / 2018 Time Collected: 12 a.m. / (p.m.) Phone #: 410-313-0287

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

Sample Type: Drinking Water Landfill Source (Raw Water) Liquid
Data Category: Community Stream Distribution (Treated) Solid
Code Non-Community Sediment Other _____
4F 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: Pressure tank.
1 mL HNO₃ added to container to lower pH < 2.
ps - 06-29-18

✓	Element	Lab Use	✓	Element	Lab Use	✓	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Uranium (U)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cobalt (Co)			Zinc (Zn)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
✓	Sodium (Na)	<u>SHS</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: _____ Date Reported: ____/____/____

•Phone: (443) 681 - 4596 •Fax: (443) 681 - 4507



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
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: E18004710 Date Coll.: 06/29/2018 Date Received: 06/29/2018 Submitted By: Collins

Field ID: 12793 SC
Lab No.: E18004710001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	55.35	ppm	07/05/2018

Comments:

Approved by: Yingtao Chen

Approval date: 07/06/2018

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

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.

Environmental Testing Lab, Inc.

CASE NARRATIVE

For those not familiar with reading a laboratory report and putting the result(s) into a more meaningful light the following information may assist you in making any decisions based on the results of the sample(s) submitted for analysis.

Qualifiers – A note added to a result to provide the end user with additional information about the result or how it was obtained.

X = Parameter dose NOT meet EPA Primary/Secondary Guidelines for Drinking Water.

BLANK (no qualifier) = Parameter DOSE meet EPA Primary/Secondary Guidelines for Drinking Water.

RL- Reporting Limit this is the lowest concentration of parameter that we can detect.

ND – Not Detected, see RL

Maximum Contaminate Level - The EPA establishes a (MCL) which is the "highest level of a contaminate that is allowed in drinking water"

The U.S. Environmental Protection Agency (EPA) publishes the National Primary Drinking Water Standards which are divided into two categories'. **Primary Contaminates** which are health related, and for a "public" water systems, enforceable. These are identified with a "P" in the table. **Secondary Contaminates** are non-health related and non-enforceable, they may cause cosmetic and/or aesthetic effects and are identified with an "S". Some parameters are unregulated and are identified with a "U".

This table is not an official EPA document, it is intended to provide the user with some perspective and it is assumed the water is from a privately owned well.

Parameter	MCL mg/L	Type	Effects	Sources	Treatment (1)
Coliforms Total Fecal/E coli	Absent	P	Not a health threat itself used to indicate whether other potentially harmful bacteria may be present	Naturally present. Fecal coliforms & E. coli only come from human & animal waste.	Chlorinate the well. Install Chemical feeder or U/V light.
Arsenic	0.010	P	Skin damage, circulatory system problems, increased risk of cancer	Natural deposits	Reverse Osmosis (R/O). Ion exchange
Cadmium	0.005	P	Kidney damage	Natural deposits, galvanized pipes,	Reverse Osmosis (R/O).
Lead	0.015	P	Infants/children-developmental delays. Adults kidney problems & high blood pressure	Corrosion of household plumbing	Reverse Osmosis pH correction, pipe replacement
Nitrate+Nitrite-N	10	P	Infants less than 6 mo's can become Seriously ill.	Runoff from fertilizer, leaching from septic tanks, naturally occurring	Reverse Osmosis (R/O). Ion exchange
Radium Gross Alpha	5 pCi/L Note 2	P	Increased risk of cancer	Erosion of natural deposits	Reverse Osmosis Water Softener
Radium 226 + 228	5	P	Increased risk of cancer	Erosion of natural deposits	Reverse Osmosis Water Softener
Iron	0.3	S	Possible staining on plumbing fixtures and laundry	Naturally Occurring	Water Softener
pH	6.5-8.5	S	Water is acidic or basic	Naturally Occurring	Neutralizer
Turbidity (3)	10 NTU	S	Interferes with filtration	Naturally Occurring	Contact a Well Driller

NOTES:

- 1) The Treatment Column is from information provided from various water treatment companies that do business with us. More information is available from epa.gov/safewater.
- 2) If Gross Alpha is between 5-15 pCi/L test for Radium 226/228, If Gross Alpha is above 15 pCi/l consider water treatment equipment.
- 3) Turbidity is a parameter that is continuously monitored at a water treatment plant. Privately owned wells do not have a turbidity MCL. Local Health Departments have used 10 NTU as a level at which if exceeded, and not because of high iron, the well itself may need repair.

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – DECEMBER 29, 2018

June 29, 2018

Homeowner
12793 Frederick Road
West Friendship, MD 21794

**RE: Hudson Property, Lot 4
12793 Frederick Road
Building Permit: B17004433
Well Permit: HO-15-0336**

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 **6/29/2018**. Final approval of the well line connection to the dwelling was granted on **6/26/2018**. The well construction was completed on **11/22/2016**. Water samples were collected on **6/22/2018**.

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-15-0336. 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>

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

In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



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

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

CARUSO HOMES

Transmittal

DATE: January 18, 2018

TO:

Robert "Spencer" Freemon

*Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
Bureau of Environmental Health
Well and Septic Program
Phone: 410-313-6357*

BUILDER:

BOB OLIFF
CARUSO HOMES ON YOUR LOT
LLC
2120 BALDWIN AVENUE
CROFTON, MD, 21114
Primary Phone:
667-307-4270
ROLIFF@CARUSOHOMES.COM

Regarding: B-17004433

12793 Frederick Rd.
West Friendship, MD 21794

CONTACT:

Greg Phillips

phillips@mred.us
Direct 410-977-0864

Attached:

- 1. Revised Septic Discharge Plan**

Send Report To: Bert Nixon

Howard County Health Dept
Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045

State of Maryland
MDH-Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

WATER ANALYSIS



E19000028002

Received: 07/05/2018

Inorganic 12793 SC

Do not write above this line.

S A M P L E I D	Bottle Number	12793 SC	Name	Hudson Property	County	Howard	County Code	13
	Location	12793 Frederick Rd.		West Friendship			Data Category Code	4F
	Collected: Date	7/2/18	Time	1:30 pm	Collector & Phone	S. Collins 410-313-6287	Submitter Code	
	CHECK (one per box)							
	Drinking Water	<input checked="" type="checkbox"/>	Community	<input type="checkbox"/>	Source (raw water)	<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"/>
							Federal Project	S

F I E L D	Plant No.		Sampling Station		RH	Preservation: Iced	<input checked="" type="checkbox"/>	Acid	<input type="checkbox"/>	Type of Acid	
	pH		Chlorine: Free		Total			Specific Conductance			
	Notes to Lab/Remarks: Pressure tank.										

CHECK TESTS	TESTS	Error Code	RESULTS
	Alkalinity (Total)		
	Ammonia - N		
<input checked="" type="checkbox"/>	Chloride		
	Conductance*, Spec.		
<input checked="" type="checkbox"/>	Dissolved Solids (Total)		
	Hardness		
	Fluoride		
	Nitrite, N		
	Nitrate + Nitrite, N		
	Sulfate		
	Total Solids		
	Turbidity*		
	Other:		

* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested

Section Chief

SAMPLE TESTED AS RECEIVED
Date Reported

SUBMITTER'S COPY



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
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 NoE19000028 Date Coll. 07/02/2018 Date Received 07/05/2018 Submitted By:Collins

Field ID: 12793 SC
Lab No.: E19000028002

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	29	mg/L	07/09/2018
Total Dissolved Solids	SM 2540C	130	mg/L	07/06/2018

Comments:

Approved by:

Approval date: 07/12/2018

*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. Samples are tested as received.

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.

Send Report To: Bert Nixon

Howard County Health Dept
Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045

State of Maryland
MDH-Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

WATER ANALYSIS



E18004709002
Received: 06/29/2018
Inorganic 12793 SC

Do not write above this line.

SAMPLE ID

Bottle Number 12793 SC Name Hudson Prop County Howard County Code 13

Location 12793 Frederick Rd. W. Friendship Data Category Code 4F

Collected: Date 6/29/18 Time 12 pm Collector & Phone S. Collins 410-313-6287 Submitter Code

CHECK (one per box)

Drinking Water <input checked="" type="checkbox"/>	Community Non-community <input type="checkbox"/>	Source (raw water) Distribution (treated) MCL <input checked="" type="checkbox"/>	Emergency Routine Recheck Special <input type="checkbox"/>
Landfill <input type="checkbox"/>	Private <input checked="" type="checkbox"/>		
Stream <input type="checkbox"/>	Other <input type="checkbox"/>		
Other <input type="checkbox"/>			Federal Project <u>S</u>

FIELD

Plant No. Sampling Station Preservation: Iced Acid Type of Acid

pH Chlorine: Free Total Specific Conductance

Notes to Lab/Remarks: Pressure tank pH 2
RH

CHECK TESTS	TESTS	Error Code	RESULTS
	Alkalinity (Total)		
	Ammonia - N		
✓	Chloride	X	
	Conductance*, Spec.		
✓	Dissolved Solids (Total)	X	
	Hardness		
	Fluoride		
	Nitrite, N		
	Nitrate + Nitrite, N		
	Sulfate		
	Total Solids		
	Turbidity*		
	Other:		
	Lab noticed that the sample had been acidified. Acidification is not required for Chloride and TDS analysis. RH 6/29/18 Therefore the sample was rejected. Collector was inform by phone.		

* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested

Section Chief _____

SAMPLE TESTED AS RECEIVED

Date Reported _____

SUBMITTER'S COPY

Inorganics Laboratory

SAMPLE REJECTION POLICY

The Inorganics Analytical Laboratory will reject samples when certain conditions are not met. The conditions which warrant rejection of samples are those which jeopardize the integrity of the samples. Upon receipt of samples, the laboratory staff inspects the condition of the samples, documentation on the sample analysis request forms, identification labels, and chain-of-custody forms. If there are problems associated with the submission of the samples, the submitter is immediately notified and the samples are either returned or discarded as agreed upon.

Sample No.: 12793 SC Laboratory Number: E18004709002
Sample Source: HUDSON PROP. Submitter's Name: S. COLLINS
Sample Collection Date: 6-29-18 Phone No.: 410-313-6287

Conditions for Rejection

The laboratory is unable to process this sample for the following reason(s):

- 1. 5-day BOD samples collected on Monday when the following Monday is a holiday.
- 2. Samples for analytes with 48 hours holding time received after 12:00 noon on a Friday or a Thursday prior to a Friday holiday.
- 3. Inappropriate preservation and/or handling technique.
 - Not in ice slurry, 4 °C
 - Improper/inappropriate preservative
 - Exceeded holding time
- 4. Insufficient sample.
- 5. Inappropriate, leaking or damaged container.
- 6. Identification: none, incomplete, improper, smudged label.
- 7. Documentation: missing, incomplete.
- 8. Laboratory does not perform this analysis.

Other: Lab noticed that the sample had been acidified.
Comments: Acidification is not required for Chloride and Total Dissolved Solids (TDS). Collector was notified by phone.
RTI 6-29-18


Supervisor/Division Chief

7/2/18
Date

cc: SMA
QA Office
DEC-FORM-IAL-105
SR2018-613
QA-SR-UL/13-18



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
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 NoE18004709 Date Coll. 06/29/2018 Date Received 06/29/2018 Submitted By:Collins

Field ID: 12793 SC
Lab No.: E18004709002

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

Comments:

Approved by: *Shahen Aneli*

Approval date: 07/02/2018

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