



# HOWARD COUNTY HEALTH DEPARTMENT

64013

W-5

DATE  
9/25/18

Received From

Fogle's Well Drilling

PHONE # 443-609-4195

For

Replacement Well

7051 Pindell School Rd.

CASH

CHECK

NO.

5769

One Hundred Sixty

Dollars

\$

160 00

Received By

Shirley Beatty

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

October 11, 2018

William Adams  
7051 Pindell School Rd.  
Fulton, MD 20759

RE: **Replacement Well Sampling**  
7051 Pindell School Rd.  
Well Tag # HO-17-0359

Mr. Adams,

According to our records, your replacement well has been connected to the dwelling. We request that you contact the Community Hygiene Program at **(410) 313-1773** to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (*COMAR 26.04.04*). This sampling includes testing for bacteria, nitrates, turbidity, and sand. There is currently **no charge** for the sampling and it is to your benefit to have it tested.

Sampling of the new well should be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

The existing well located in the driveway on the property must be abandoned and sealed by a licensed well driller as per *COMAR 26.04.04.34*. A well not in use can contribute to pollution of groundwater and pose a risk to people drinking water in the area. Documentation should be submitted to the Health Department by your driller once the abandonment is completed.

Feel free to contact me with any questions.

Respectfully,



Ryan Rappaport, LEHS

*Cc: Community Hygiene Program*  
*File*

TAG=10/5/18 (R)

**B 1** SEQUENCE NO. (MDE USE ONLY) **59758** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type STATE PERMIT NUMBER **40-17-0359** fill in this form completely

**OWNER INFORMATION**  
 Date Received (APA) **09/21/18**  
 8 MM DD YY 13  
 15 Last Name **Adams** Owner First Name **William** 34  
 36 Street or RFD **7051 Pindell School Rd** 55  
 57 Town **Fulton, Md** 70 State **20759** 72 Zip 76

**B 3** LOCATION OF WELL  
 8 COUNTY **Howard** 21  
 23 SUBDIVISION **H m Simons Bldv.** 42  
 SECTION **44** 46 LOT **1** 48 50  
 52 NEAREST TOWN **Fulton** 71

**DRILLER INFORMATION**  
 Driller's Name **Allen Compton** 76 License No. **MSD009** 81  
 Firm Name **Eagles Well Drilling, LLC**  
 Address **Po Box 202 Woodbine, Md 21797**  
 Signature **Allen Compton** 9-2018 Date

**B 4** SOURCES OF DRILLING WATER  
 1. Well water  
 2. 9/24 - driller @ 350'  
 3. no water -> hit a fracture at 115' but little H2O, -70' casing - hit bedrock @ 66'  
 11 STREET ADDRESS **7051 Pindell School Rd** 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH N  
 WEST W  
 EAST E  
 SOUTH S  
 34 **H7** 37 DISTANCE FROM ROAD **FT**  
 ENTER FT OR MI 38 39  
 TAX MAP: **0041** BLK: **0003** PARCEL **0193**

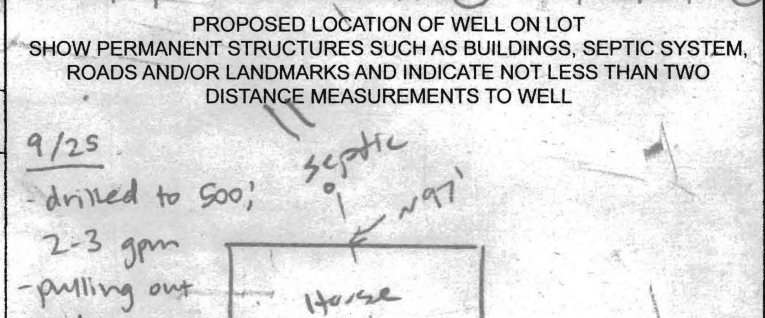
**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

**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 \_\_\_\_\_ 41  
 DATE ISSUED **9/21/18** CO SIGNATURE **H. M. Simons** EXP. DATE **9/21/18**  
 43 MM DD YY 48  
 DON: 9/24/18 DOG: 9/26/18 DOY: 9/26/18

APPROXIMATE DEPTH OF WELL **300** FEET 24 28  
 APPROXIMATE DIAMETER OF WELL **6** INCH 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 DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEM AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

9/25  
 - drilled to 500'  
 - 2-3 gpm  
 - pulling out rods  
 9/26  
 - 2.4 gpm  
 - 30' static  
 - 72' casing  
 - 24 bags cement  
 - 235' meas. pt.  
 - pump @ 430'  
 - started pumping @ 8 am  
 - 69' trench for grout - NaCl  
 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.

**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**  
 APPROX. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_  
 PERMIT No. **40-17-0359**  
 70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS** Ex. Pit well to be sealed. +TDS samples @ 10 am  
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

C1 56539

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER Adams, William WELL SITE ADDRESS 7051 Ardell School Rd TOWN Fulton

WELL LOG Not required for driven wells

GROUTING RECORD WELL HAS BEEN GROUTED

C 3 PUMPING TEST

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Brown Clay, White L/S, Grey L/S, Quartz, Grey L/S, Red Quartz, Grey L/S.

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

HOURS PUMPED (nearest hour) 7 PUMPING RATE (gal. per min.) 2.3

CASING RECORD casing types insert appropriate code below [ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

WATER LEVEL (distance from land surface) BEFORE PUMPING 30 ft. WHEN PUMPING 237 ft.

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

TYPE OF PUMP USED (for test) [A] air [P] piston [T] turbine [C] centrifugal [R] rotary [O] other [J] jet [S] submersible

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

PUMP INSTALLED DRILLER INSTALLED PUMP YES NO

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED [Y] [N]

SCREEN RECORD screen type or open hole [ST] STEEL [BR] BRASS [PL] PLASTIC [HO] OPEN HOLE [OT] OTHER

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

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

C 2 DEPTH (nearest ft.) 1 2 HO 22 500

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"

ELECTRIC LOG OBTAINED [E] TEST WELL CONVERTED TO PRODUCTION WELL [P]

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

DRILLERS LIC. NO. M S D 224 DRILLERS SIGNATURE LIC. NO. D

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

LATITUDE 39.176909 LONGITUDE 76.908629 (DEFAULT COORD. WGS 84)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

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.

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

REC'd  
10/23/18

DATE WELL ABANDONED: 10-13-18 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

HO-17-0359

\* PERMIT NUMBER OF REPLACEMENT WELL: \_\_\_\_\_

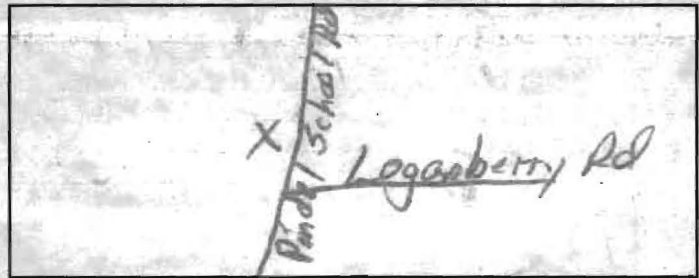
\* PERSON ABANDONING WELL: Andrew Houseman WELL DRILLER'S LICENSE NUMBER: 224

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: William Adams

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: Fulton  
 TAX MAP 0041 BLOCK 0003 PARCEL 0193  
 SUBDIVISION: H. M. Simmons Subdiv.  
 SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_  
 STREET ADDRESS: 7051 Pindel School Rd



LATITUDE . 3 9.176909

LONGITUDE 7 6.908649

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Bentonite</u>	<u>31</u>	<u>0</u>

\* TYPE OF WELL BEING ABANDONED:  
 DRILLED \_\_\_\_\_ JETTED \_\_\_\_\_  
 BORED \_\_\_\_\_ HAND DUG \_\_\_\_\_  
 OTHER (specify) \_\_\_\_\_

\* USE CODE:  
 DOMESTIC \_\_\_\_\_ MUNICIPAL/PUBLIC \_\_\_\_\_  
 IRRIGATION \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_  
 TEST/OBSERVATION \_\_\_\_\_ GEOTHERMAL \_\_\_\_\_

\* TYPE OF CASING:  
 STEEL \_\_\_\_\_ PLASTIC \_\_\_\_\_  
 CONCRETE \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

VOLUME OF MATERIAL USED

Bentonite 750 lbs

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 31 FEET DEEP

WAS ANY CASING REMOVED? YES  NO   
 If yes, length removed, in feet: \_\_\_\_\_

WAS CASING RIPPED OR PERFORATED? YES  NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#

Andrew R. Ham

224

MWD / MSD / MGS  
 CIRCLE ONE

10-13-18 DATE

COUNTY

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**FOGLE'S WELL DRILLING, LLC**  
**P.O. Box 202**  
**Woodbine, Md 21797**  
**443-609-4195**  
**FIELD DATA SHEET**  
**CARROLL COUNTY WELL YIELD TEST**

*S. Collins - spoke to driller about drawing H<sub>2</sub>O down closer to the pump*

*Pump set @ 430'*

Well Permit No. HO-17-0359  
 Location of Property: 7051 Pindell School Rd Fulton, Md  
 Subdivision: H M Simon Subdivision Lot: 1  
 Well Driller/Tech: Fogles Andrew Houseman MSD224 Owner/Builder: William Adams  
 Depth of Well: 500'  
 Distance of measuring point (M.P.) above ground: 2'  
 Static water level (S.W.L.) below M.P.: 30'  
 High rate pumping -reservoir Drawdown  
 Time pump started: 8:00 Pumping rate: 10  
 Total time 75 mins to reach pumping water level 237 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	30'	6 Seconds		10 gpm
8:15	79'	6 Seconds		10 gpm
8:30	126'	7 Seconds		8.5 gpm
8:45	171'	8 Seconds		7.5 gpm
9:00	222'	8 Seconds		7.5 gpm
9:15	237'	26 Seconds		2.3 gpm
9:30	236'	26 Seconds		2.3 gpm
9:45	236'	26 Seconds		2.3 gpm
10:00	235'	26 Seconds		2.3 gpm
10:15	235'	26 Seconds		2.3 gpm
10:30	234'	26 Seconds		2.3 gpm
10:45	234'	26 Seconds		2.3 gpm
11:00	233'	26 Seconds		2.3 gpm
11:15	233'	26 Seconds		2.3 gpm
11:30	232'	26 Seconds		2.3 gpm
11:45	232'	26 Seconds		2.3 gpm
12:00	231'	26 Seconds		2.3 gpm
12:15	231'	26 Seconds		2.3 gpm
12:30	230'	26 Seconds		2.3 gpm
12:45	230'	26 Seconds		2.3 gpm
1:00	229'	26 Seconds		2.3 gpm
1:15	229'	26 Seconds		2.3 gpm
1:30	228'	26 Seconds		2.3 gpm
1:45	228'	26 Seconds		2.3 gpm
2:00	227'	26 Seconds		2.3 gpm
2:15	227'	26 Seconds		2.3 gpm
2:30	226'	26 Seconds		2.3 gpm
2:45	226'	26 Seconds		2.3 gpm
3:00	225'	26 Seconds		2.3 gpm
3:15	225'	26 Seconds		2.3 gpm

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: Fogles Well Pump & Water Treatment, LLC Telephone #: 410 795 5670  
Address: 580 Obrecht Rd  
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): David C Fogle License # MSD2216

\*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: William Adams Telephone #: 301-725-6424  
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Well Tag #: HO-17-0359 ✓  
Site Address: 7051 Pindell School Rd  
Aulton, MD 20759

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Bards</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>74510422</u>	Model #: <u>N/A</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>2.3</u> GPM	NSE/WSC approved: <u>YES</u>	Conduit min 1 1/2" E.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: <u>YES</u>
If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors, Cable guards, or other acceptable method used - Must circle one		
Safety rope, if used, attached to brass rope adapter or other acceptable method <u>inside of well casing</u> <u>NA</u>		

<u>Frone to house</u>	<u>House Connection</u>
Type: <u>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSE: <u>2000 psi (min)</u>	Length of sleeve (5" minimum from foundation): <u>6'</u>
Depth of supply line: <u>36" (36" min)</u>	Sleeve sealed properly: <u>YES</u>

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

Signature of company representative responsible for installation: David C Fogle date: 10/14/18

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

Date Insp. Requested: 10/5/18 Date Insp. Approved: 10/5/18 Inspector: RR

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<u>✓</u>
Two piece cap installed and attached to casing securely	<u>✓</u>
Elec. conduit extends at least 1 1/2" below grade/attached to cap properly	<u>✓</u>
Safety rope not outside of well casing	<u>✓</u>
Correct well tag attached properly and casing 8" above finished grade	<u>✓</u>
Water supply line sleeved adequately at house connection	<u>✓</u>
Adequate grout observed below pitless adapter	<u>✓</u>

SITE INSPECTION SHEET

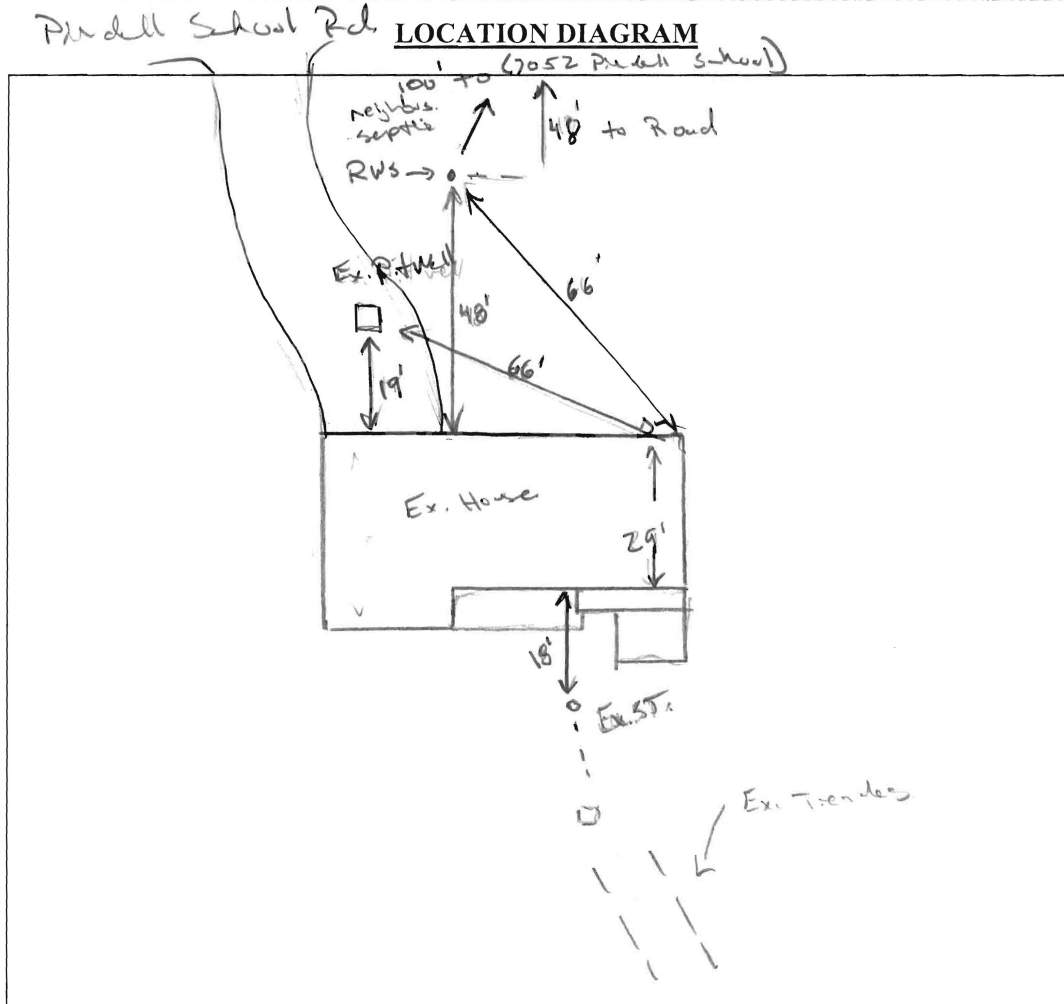
OWNER: Bill Adams PHONE #: \_\_\_\_\_

ADDRESS: 7051 Pindell School Rd CONTRACTOR: Foglia

WELL TAG #: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY #: (R)

PROPOSAL: out of water



COMMENTS: Site inspection w/ Diller and owner, site selected  
area 97' from ex. septic but 100' from. Owner ok.  
w/ site. site approved.

DATE: 9/21/18 INSPECTOR: K. Holt / R. Raymond

# FILE INQUIRY NOTES

7051 Pinedale School Rd

DATE	RESULTS OF REVIEW FOR FILE
9/24/18	Rec'd call from Diller. Home owner is out
	of H2O. RWSF scheduled for 9/24/18 @ 10:30am <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">AKW</span>





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

October 17, 2018

Homeowner  
7051 Pindell School Road  
Fulton, MD 20759

Re: Water sample results for replacement well #HO-17-0359

Dear Homeowner,

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

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 22.46 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 82 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 267 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](mailto:SCollins@howardcountymd.gov)  
410-313-6287

Cc: File

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

Barcode  
**E19001131001**  
Received: 09/28/2018  
Metals HO-17-0359

### LABORATORY ANALYSIS REQUEST

Do not write above this line

Please Print

Sample ID No: HO-17-0359 Site Name: W.M. Simons Lot 1 County: Howard

Sample Source: 7051 Pindell School Rd Fulton Collector: S. Collins  
Street Town or City Name

Date Collected: 9/26/2010 Time Collected: 10 a.m./p.m. Phone #: 410-313-6287

Sample Preserved By:  Field  ESRL  WMRL  Central Lab  
Preservative Used:  HNO<sub>3</sub> \_\_\_\_\_ mL pH: 4.2

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 \_\_\_\_\_

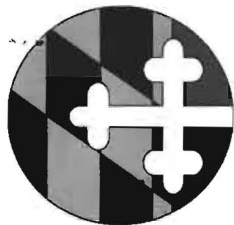
Type of Sample Preparation:  Total Metals  Total Metals TCLP  Dissolved Metals  
(field preparation required)

Remarks: Sample collected during yield test - replacement well

✓	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: E19001131 Date Coll.: 09/26/2018 Date Received 09/28/2018 Submitted By: Collins

Field ID: HO-17-0359  
Lab No.: E19001131001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	22.46	ppm	10/04/2018

### Comments:

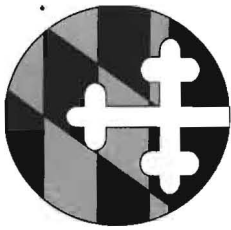
Approved by: *Shahla Aneli*

Approval date: 10/10/2018

\*\*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.





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 No E19001130 Date Coll. 09/26/2018 Date Received 09/28/2018 Submitted By: S. Collins

Field ID: HO-17-0359  
Lab No.: E19001130001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	82	mg/L	10/01/2018
Total Dissolved Solids	SM 2540C	267	mg/L	10/01/2018

### Comments:

Approved by: *Shabir Ali*

Approval date: 10/04/2018

\*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.

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