

C1 36476

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)

COUNTY NUMBER

13

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER Highland Development Corporation
WELL SITE ADDRESS last name Curtis Vista way first name
TOWN Clarksville md 21029
SUBDIVISION Brighton Mill II SECTION LOT 1

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes entries for Sand, Mica Rock, and Water 101.

GROUTING RECORD form including: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (11), NO. OF POUNDS (1034), GALLONS OF WATER (66), DEPTH OF GROUT SEAL (0 to 39 ft).

CASING RECORD form including: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter top (main) casing (6), Total depth of main casing (40 ft).

OTHER CASING (if used) form with columns for diameter (inch) and depth (feet).

SCREEN RECORD form including: screen type or open hole (ST, BR, HO, PL, OT), DEPTH (nearest ft.) (H0, 39, 200).

PUMPING TEST form including: HOURS PUMPED (3), PUMPING RATE (10), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (distance from land surface) BEFORE PUMPING (47 ft), WHEN PUMPING (96 ft), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form including: DRILLER INSTALLED PUMP (YES), IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS, TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29, CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (nearest ft.) (43-47), CASING HEIGHT (circle appropriate box and enter casing height) (+ above, - below), LAND SURFACE (nearest foot) (1).

WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, R), I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04.

DEPTH (nearest ft.) table with columns for depth ranges (8-11, 15-17, 21-24, 26-30, 32-36, 38-41, 45-47, 51-55) and slot size (1, 2, 3).

DRILLERS LIC. NO. 1 M 5 D 0 2 1, DRILLERS SIGNATURE (Must match signature on application), LIC. NO. 1 D

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) including: GRAVEL CHECK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

LATITUDE 39.21467, LONGITUDE 76.98306 (DEFAULT COORD. WGS 84), Pursuant to §19-624 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.

**B 1** SEQUENCE NO. (MDE USE ONLY) **42873** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL **560628** please type

STATE PERMIT NUMBER **HO-17-0147**

fill in this form completely

**OWNER INFORMATION**

Date Received (AP) **050217**

**Highland Development Corp**  
 P.O. Box 228  
 Clarksville Md 21029

**LOCATION OF WELL**

**Howard** COUNTY  
**Brighton mill II** SUBDIVISION  
 SECTION **1** LOT **1**  
**Edlitt City Clarksville** NEAREST TOWN

**DRILLER INFORMATION**

**Larry Mayne** M **SD 027**  
 Driller's Name License No.  
**Joseph & Mayne Well Drilling** Firm Name  
**5512 Ridge Rd Mt Airy Md 21771** Address  
**Larry Mayne** Signature **4-25-2017** Date

**SOURCES OF DRILLING WATER**

1. **Well**  
 2.  
 3. **H&D: No one inside 8/21/17 - now**

**Curtis Vista Way** STREET ADDRESS  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 DISTANCE FROM ROAD **30 FT**  
 ENTER FT OR MI  
 TAX MAP: **34** BLK: **2** PARCEL **16**

**WELL INFORMATION**

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

**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**

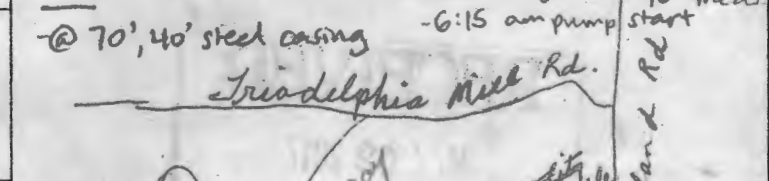
**Howard** COUNTY NO. **13**  
 STATE SIGNATURE \_\_\_\_\_ INSERT S → **41**  
 DATE ISSUED **6/8/17** **Sol L.H.** **6/8/18**  
 EXP. DATE  
**DNI**  
**DON: 8/17/17 (50) DOG: 8/18/17 (50) DOY: 8/21/17 (50)**

APPROXIMATE DEPTH OF WELL **320** FEET  
 APPROXIMATE DIAMETER OF WELL **6** INCH

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

**METHOD OF DRILLING (circle one)**

BORED (or Augered)  JETTED  Jetted & DRIVEN  
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)  
 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**

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.

**8/21**  
 - collected Na, Cl. + TDS samples

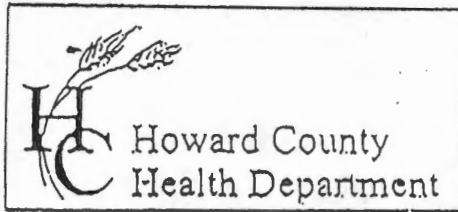
**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**

APPROP. PERMIT NUMBER \_\_\_\_\_ **G** \_\_\_\_\_  
 PERMIT No. **HO-17-0147**

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



W560628



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:

Brighton Mill 11 Lots 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, Parcel A  
 Subdivision/Property Name Lot# Road Name

The well site has been staked by Benchmark  
 (professional land surveyor or company employing professional land surveyors)  
 on 4-28-2017 (date) and does not require a site inspection.

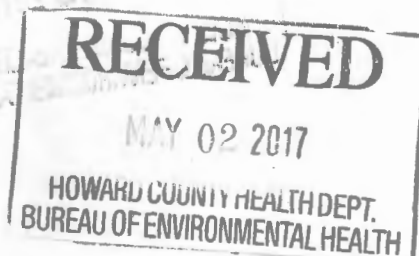
The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

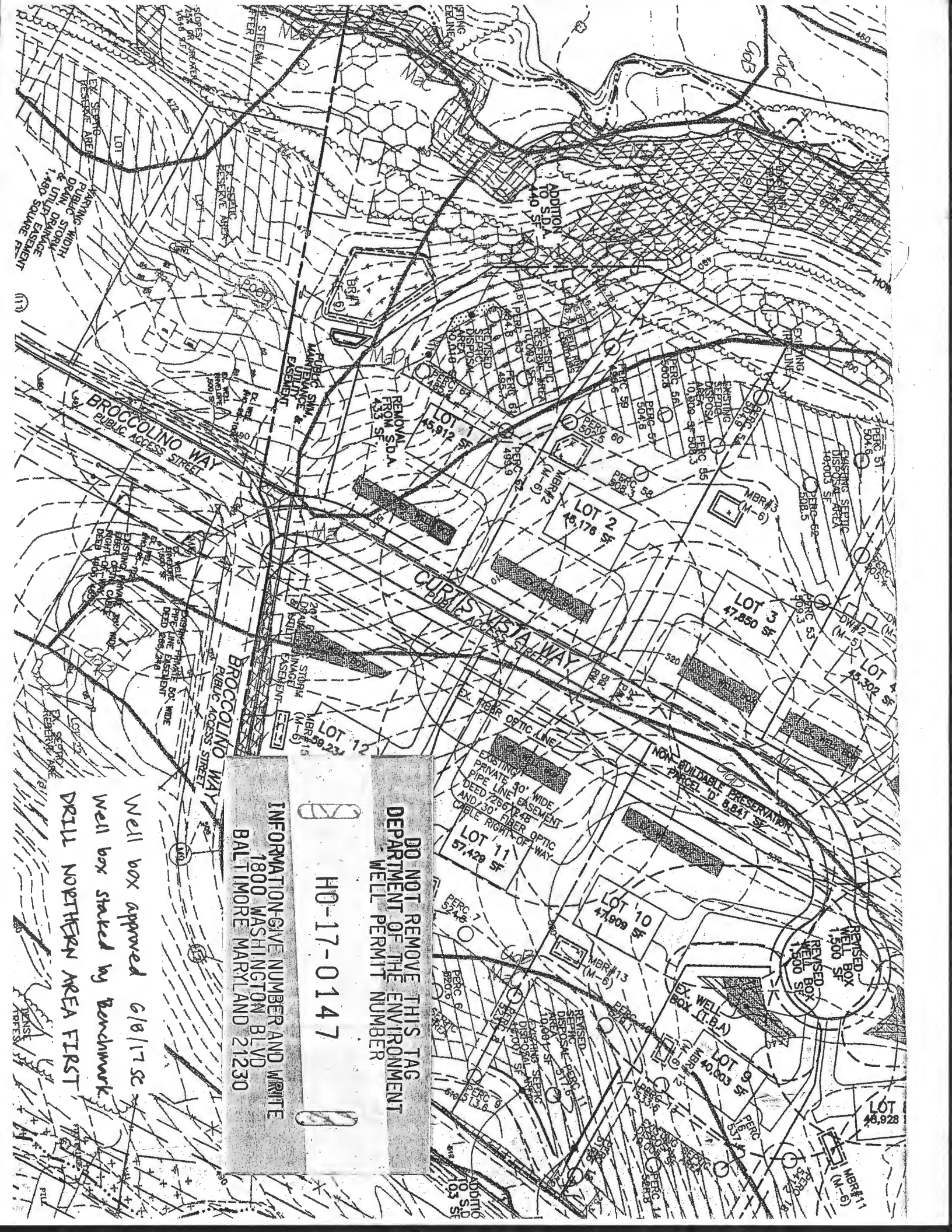
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/05

*Richard Demmitt*

410-365-0414





**DO NOT REMOVE THIS TAG**  
**DEPARTMENT OF THE ENVIRONMENT**  
**WELL PERMIT NUMBER**

**HO-17-0147**

**INFORMATION-GIVE NUMBER AND WRITE**  
**1800 WASHINGTON BLVD**  
**BALTIMORE MARYLAND 21230**

Well box approved 6/8/17 sc  
 Well box staked by Benchmark  
 DRILL NORTHERN AREA FIRST



REMOVED WELLS  
WELL BOX 1,500 SF  
WELL BOX 1,500 SF

LOT 9  
40,803 SF  
BOX WELLS (T.B.A.)  
MERR 12 (M-6)

LOT 10  
43,808 SF  
MERR 13 (M-6)

LOT 11  
57,429 SF  
EXISTING PRIVATE PIPE LINE BASEMENT AND 30\"/>

LOT 12  
59,234 SF  
MERR 15 (M-6)

LOT 3  
47,830 SF  
MERR 3 (M-6)

LOT 2  
48,178 SF  
MERR 2 (M-6)

LOT 1  
45,917 SF  
MERR 1 (M-6)

REMOVAL FROM S.D.A.  
43,333 SF

BROCCOLINO WAY  
PUBLIC ACCESS STREET

BROCCOLINO WAY  
PUBLIC ACCESS STREET

MARKING WIDTH  
PUBLIC STORM  
& UTILITY DRAINAGE  
1,480 SQUARE FEET

CoB  
CoC

Send Report To: Bert Nixon  
 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

Lab No. Date Received  
  
**E18000769001**  
 Received: 08/23/2017  
 Metals HO-17-0147

Do not write above this line

**LABORATORY ANALYSIS REQUEST**

Please Print

D

Sample ID No: HO-17-0147 Site Name: Brighton Mill II - lot 1 County: Howard

Sample Source: Curtis Vista Way Denton Collector: S. Collins  
Street Town or City Name

Date Collected: 8/21/2017 Time Collected: 9:45 a.m. p.m. Phone #: 410-313-6287

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

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

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

Date Reported: 8/23/17

• Phone: (443) 681-3857

• Fax: (443) 681-4507

DHMH 4432 (05/15)

SUBMITTER'S COPY



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: E18000769 Date Coll.: 08/21/2017 Date Received: 08/23/2017 Submitted By: Collins

Field ID: HO-17-0147  
Lab No.: E18000769001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	6.75	ppm	08/31/2017

### Comments:

Approved by: Yingtao Choi

Approval date: 09/06/2017

\*\*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





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 NoE18000768 Date Coll. 08/21/2017 Date Received 08/23/2017 Submitted By:Collins

Field ID: HO-17-0147  
Lab No.: E18000768001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	<10	mg/L	08/25/2017
Total Dissolved Solids	SM 2540C	151	mg/L	08/23/2017

### Comments:

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

*Shahin Aneli*

Approval date: 08/28/2017

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

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

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

**INTERIM CERTIFICATE OF POTABILITY**  
**PERMANENT DEVIATION FOR NITRATES**

Expiration Date – SEPTEMBER 18, 2019

March 18, 2019

Homeowner  
3010 Kittleman Lane  
West Friendship, MD 21794

**RE:** Kittleman Property, Lot 5  
3010 Kittleman Lane  
**Building Permit: B18002169**  
**Well Permit: HO-95-1786**

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 **2/4/2019**. Final approval of the well line connection to the dwelling was granted on **1/8/2019**. The well construction was completed on **7/17/2009**. Water samples were collected on **3/6/2019, 3/13/2019**.

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.

The untreated water sample collected on **3/6/2019** indicated a nitrate level of **12.0 mg/L**. **This exceeds the maximum contaminant limit of 10 mg/L set forth in COMAR 26.04.04.09**. After installation of a nitrate removal device (kitchen tap reverse osmosis system), a post-treatment water sample was collected on **3/13/2019** and indicated a nitrate level of **<1.0 mg/L**.

This Department will grant a **permanent deviation** to the Interim Certificate of Potability on condition that the nitrate removal system effectively maintains a nitrate-nitrogen contaminant level of **10 mg/L or less**.

**Furthermore, it will be necessary for you to comply with the following conditions:**

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a Maryland certified water laboratory certified for nitrates analysis perform a yearly nitrate analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04. Enforcement and Environment Article 9-1311, Annotated Code of Maryland.**

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

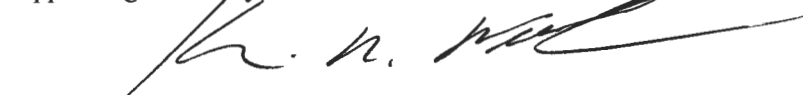
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-1786. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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 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>

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 Environment website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



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

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

**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – SEPTEMBER 7, 2019**

March 7, 2019

Homeowner  
13603 Curtis Vista Way  
Clarksville, MD 21029

**RE: Brighton Mill II, Lot 1**  
**13603 Curtis Vista Way**  
**Building Permit: B18003404**  
**Well Permit: HO-17-0147**

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 **1/17/2019**. Final approval of the well line connection to the dwelling was granted on **3/6/2019**. The well construction was completed on **8/21/2017**. Water samples were collected on **2/11/2019, 2/22/2019, 2/28/2019**.

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-17-0147. 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.**

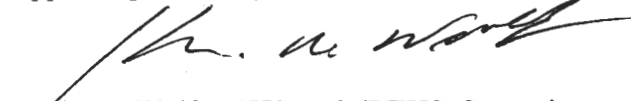
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<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

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**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,



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

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

**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 Line

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: Pumps Well Pump & Water Treatment LLC Telephone #: 410 795 5670  
Address: 5580 Oberlin 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 Foote License #: MSD226

\*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: NVR Telephone #: \_\_\_\_\_  
Subdivision: Brighton Mill Lot #: 1 Well Tag #: HO-7-0147V  
Site Address: 13603 Curtis Vista Way  
Clarksville, MD 21024

<u>Sealable Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Tandis</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>TH3054ZZ</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>10</u> GPM	NSE/WSC approved: <u>YES</u>	Conduit min 1 1/2" R.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>20'</u> (36" min)		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 17.2.4  
Torque wrenches, Cable guards, or other acceptable method used - Must circle one  
Safety rope, if used, attached to hoist rope adapter or other acceptable method inside of well casing: N/A

<u>Piping to house</u>	<u>Hoist Connection</u>
Type: <u>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>200 (50 psi min)</u>	Length of sleeve: <u>6'</u> (minimum from foundation)
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: [Signature] date: 1/18/19

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

Date Insp. Requested: <u>1/9/19</u>	Date Insp. Approved: <u>3/6/19</u>	Inspector: <u>SC</u>
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 18" 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 hoist connection	<u>✓</u>	
Adequate grout observed below pitless adapter	<u>✓</u>	

5'  
↓  
well line

[Rach]

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #: 128433 Account #: 1933  
Reference: Brighton Mill Lot #1 Company: Fogles Well Pump & Treatment  
Location: 13603 Curtis Vista Way Requested By: Dave Fogle  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 2/11/2019 0900 Site: 1st Floor Bath  
Date/Time Rec'd: 2/11/2019 1550 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.5  
Collected By: B. Wilkerson 9315BW Well #: HO-17-0147

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	7.5	MPN/ 100 ml	<1.0	SM20 9223B	2/12/2019 / 1030 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/12/2019 / 1030 / RER
Nitrate	1.19	mg/L	10	601	2/12/2019 / 0900 / CRS
Turbidity	0.73	NTU	<10	SM20 2130B	2/12/2019 / 0915 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	2/12/2019 / 0915 / CRS

**NOTES**

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Sample collected by client, analyzed as received
- 7 ND:None Detected
- 8 Visual well check: Sealed, vented cap
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

**Reason for Test :** Use & Occupancy**Building Permit # :** 18003404Date Reported: 2/12/2019

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 128655 Account #: 1933  
Reference: Brighton Mill Lot #1 Company: Fogles Well Pump & Treatment  
Location: 13603 Curtis Vista Way Requested By: Dave Fogle  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 2/22/2019 0720 Site: 1st Floor Bath  
Date/Time Rec'd: 2/22/2019 1000 Treatment: None  
Chlorine ppm: Free: NT Total: NT pH: NT  
Collected By: B. Wilkerson 9315BW Well #: HO-17-0147

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	4.2	MPN/ 100 ml	<1.0	SM20 9223B	2/23/2019 / 0915 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	2/23/2019 / 0915 / LLO

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 NT = Not Tested
- 4 Visual well check: Sealed, vented cap
- 5 Thio Check Negative

**Reason for Test :** Use & Occupancy

**Building Permit # :** 18003404

Date Reported: 2/25/2019

**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #: 128778 Account #: 1933  
Reference: Brighton Mill Lot #1 Company: Fogles Well Pump & Treatment  
Location: 13603 Curtis Vista Way Requested By: Dave Fogle  
Clarksville, MD 21029 Source: Well Water  
Date/ Time Collected: 2/28/2019 1030 Site: Basement Bath  
Date/Time Rec'd: 2/28/2019 1305 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.6  
Collected By: B. Wilkerson 9315BW Well #: HO-17-0147

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/1/2019 / 0900 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/1/2019 / 0900 / RER

**NOTES**

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

**Reason for Test :** Use & Occupancy**Building Permit # :** 18003404Date Reported: 3/1/2019

# Water Testing Laboratories

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

of Maryland, Inc.

Castle Rock Builders  
2159 White Street, Suite 3  
York, Pa 17404

Reporting Date: 3/11/2019  
Report #: M6925

Submitted Sample Address: 3010 Kittleman Lane, West Friendship, MD  
Submitted Sample Source: Holding tank  
Date / Time Collected: 3/6/2019 10:44 AM  
Sample Type: Drinking Water  
Sampler/Company: K. Lee 4827KL, WTL of MD  
Field Record: Chlorine residual: Absent Clear when drawn pH: 7.3  
Well Tag #: HO-95-1786

## Analytical Results

Parameter	Result	Units	Report Limit	Standard	Standard Type
Total Coliform Bacteria	<b>Present</b>	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	<b>12</b>	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	<b>16.6</b>	NTU	0.5	< 10 NTU*	MD Well Reg.
Iron	<b>1.5</b>	mg/L	0.1	0.3	EPA Secondary MCL

### 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,



C. Rodgers, Assistant Lab Manager, Microbiology

Reviewed by: 