

C1 56419 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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER XIII

ST/CO USE ONLY DATE Received MM DD YY 06 13 18

DATE WELL COMPLETED MM DD YY 06 11 18 APPRO Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 17-0278

OWNER Elm Street Development WELL SITE ADDRESS Howard Lodge Drive TOWN Sykesville SUBDIVISION WALKER MEADOWS SECTION LOT 27

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter-top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 63

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2.0 METHOD USED TO MEASURE PUMPING RATE water bucket

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

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED Y N CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. M D 355 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. WRO 109 D SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

LATITUDE 3 9 34227 LONGITUDE 7 6 93730 (DEFAULT COORD. WGS 84) Pursuant to §10-624 of the State Govt. Article of the Maryland Code personal info. requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info. may result in this form not being processed.

B 1 SEQUENCE NO. (MDE USE ONLY) **54206** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL **502439-F** please type **70** STATE PERMIT NUMBER **HO-17-0273** **79** fill in this form completely

1 2 3 6 Date Received (APA) **02/14/18** **8** MM **DD** **YY** **13**

OWNER INFORMATION

15 Last Name **Elm Street Development** **Owner** **34** First Name

36 Street or RFD **10870 Elm St Suite 200** **55**

57 Town **Norlean, VA** **70** State **72** Zip **22101** **76**

B 3 LOCATION OF WELL

8 COUNTY **Howard** **21**

23 SUBDIVISION **Walker Meadows** **42**

SECTION **44** **46** **LOT** **27** **48** **50**

52 NEAREST TOWN **Sikesville** **71**

DRILLER INFORMATION

Driller's Name **Michael Barton** **MWD 355** **76** License No. **81**

Firm Name **Barton Well Drilling**

Address **522 Underwood Ln 21014**

Signature **[Signature]** **Date** **2/12/18**

B 4 SOURCES OF DRILLING WATER

1. **Well**

2.

3. **7/31**
-collected for, CI, TDS samples @ 11:30 am

11 STREET ADDRESS **Howard Lodge Drive** **30**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 **150** **37** DISTANCE FROM ROAD **FT**

ENTER FT OR MI **38** **39**

TAX MAP: **9** **BLK:** **6** **PARCEL** **66**

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) **5** **8** **12**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **14** **750** **20**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

O OPEN LOOP GEOTHERMAL

C 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 **3/16/18** **7/18** **3/10/19** **43** MM **DD** **YY** **48** **CO SIGNATURE** **EXP. DATE**

APPROXIMATE DEPTH OF WELL **300** **24** **28** FEET

APPROXIMATE DIAMETER OF WELL **6** **NEAREST INCH**

METHOD OF DRILLING (circle one)

BORED (or Augered) **JETTED** **Jettied & DRIVEN**

AIR-ROTary **AIR-PERcussion** **ROTARY** (Hydraulic Rotary)

CABLE **REVERSE-ROTary** **DRIVE-POINT**

other _____

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

5/1/2018 @

60' steel casing
49' @ bedrock 20'
H₂O @ 85', 225'
300' deep
~2 gpm

5/12/18 @

used 2 20' pieces of tremie
Tapped valves
only 30' went due to equipment obstruction

Prop Line

65'

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.

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEM AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER **H02016G504**

PERMIT No. **HO-17-0273** **70** **71** **72** **73** **74** **75** **76** **77** **78** **79**

SPECIAL CONDITIONS **Must use steel casing which extends 50' deep or 10 ft into competent bedrock whichever is deeper, and must be 200' away from**

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



MICHAEL BARLOW WELL DRILLING & SERVICE, INC.
 522 Underwood Lane Bel Air, Maryland 21014
 (410) 838-6910 Fax (410) 838-3582

WELL YIELD REPORT

Date Test Completed:	June 11, 2018		
Well Depth:	300	feet	
Customer	Elm Street Development	Permit #	HO-17-0273
Road	Howard Lodge Drive	Subdivision	Walker Meadows
City	Clarksville	Section	
State	Maryland	Lot #	27

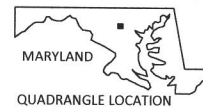
Time	Water Level In Feet	Time to Fill 1-gallon bucket seconds	G.P.M.
11:15 AM	10	5	12.00
11:30 AM	50	30	2.00
11:45 AM	50	30	2.00
12:00 PM	50	30	2.00
12:15 PM	49	30	2.00
12:30 PM	49	30	2.00
12:45 PM	49	30	2.00
1:00 PM	49	30	2.00
1:15 PM	49	30	2.00
1:30 PM	49	30	2.00
1:45 PM	49	30	2.00
2:00 PM	48	30	2.00
2:15 PM	48	30	2.00
2:30 PM	48	30	2.00
2:45 PM	48	30	2.00
3:00 PM	48	30	2.00
3:15 PM	48	30	2.00
3:30 PM	48	30	2.00
3:45 PM	48	30	2.00
4:00 PM	48	30	2.00
4:15 PM	48	30	2.00
4:30 PM	48	30	2.00
4:45 PM	48	30	2.00
5:00 PM	48	30	2.00
5:15 PM	48	30	2.00
5:30 PM	48	30	2.00
This yield test report is for informational purposes only. Please note the yield may increase or decrease over time and the GPM indicated above is not a guarantee.			



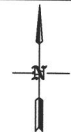
H:\Projects\Elm Street Development\Walker Meadows\CADD\ESD-WM-Report_Set.dwg



well sites ok
AR 3/16/18




MARYLAND
QUADRANGLE LOCATION



SCALE IN FEET

NOTE:

Aerial Photo Base was obtained from the State of Maryland iMap Imagery website (<http://imap.maryland.gov>), categorized as "Howard2016 SixInchImagery" dated 2016.

client: Elm Street Development			
project location: Sykesville, Howard County, Maryland			
 www.hydro-terra.com		project: Water Supply Development Lot #27 Proposed Test Well Location Map	
		file no. ESD-WM-Report Set.dwg	figure: 1
drawn <i>M. Swam</i>	date 02/09/18	checked <i>J. Lindaw</i>	date 02/09/18
approved <i>M. Haufler</i>	date 02/09/18		

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – JUNE 16, 2021

December 16, 2020

Homeowner
12221 Mayapple Drive
West Friendship, MD 21794

RE: Walker Meadows, Lot 27
12221 Mayapple Drive
Building Permit: B20002632
Well Permit: HO-17-0273

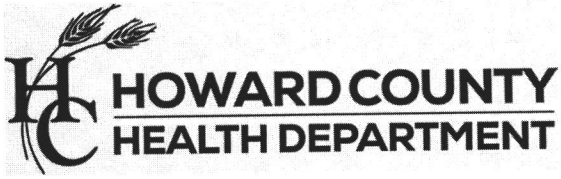
Dear Homeowner:

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 **12/15/2020**. Final approval of the well line connection to the dwelling was granted on **11/23/2020**. The well construction was completed on **6/11/2018**. Water samples were collected on **12/2/2020, 12/9/2020**.

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-17-0273. 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>



Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

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

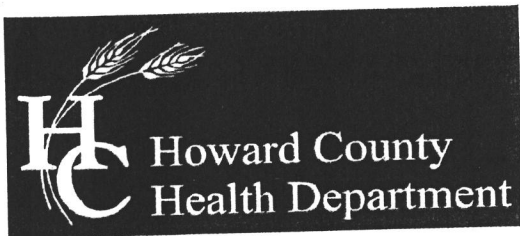
In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a light blue horizontal line.

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



Bureau of Environmental Health
 8930 Stanford Boulevard, Columbia, MD 21045
 Main: 410-313-2640 | Fax: 410-313-2648
 TDD 410-313-2323 | Toll Free 1-866-313-6300
 www.hchealth.org
 Facebook: www.facebook.com/hocohealth
 Twitter: HowardCoHealthDep

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

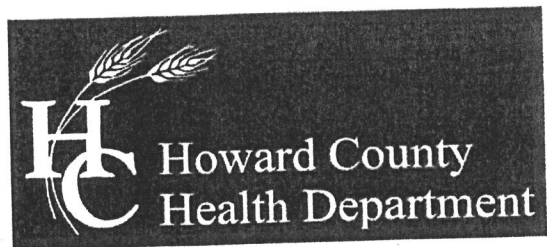
TO ALL INTERESTED PARTIES

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

Well Site Location: 9 HIGH STEPPER TRAIL
15-21 STEPPING PLACE
WALKER MEADOWS 22-34, BPPA' MAPPLE TRAIL
 Subdivision/Property Name Lot # Road Name

- The well site has been staked by DEVELOPMENT DESIGN CONSULTANTS
 (professional land surveyor or company employing professional land surveyors)
 on 3/28/2018 (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.



Bureau of Environmental Health
 8930 Stanford Boulevard, Columbia, MD 21045
 Main: 410-313-2640 | Fax: 410-313-2648
 TDD 410-313-2323 | Toll Free 1-866-313-6300
 www.hchealth.org
 Facebook: www.facebook.com/hocohealth
 Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., 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:

<u>WALKER MEADOWS</u>	<u>17</u>	<u>- STEPPING PLACE</u>
Subdivision/Property Name	Lot #	Road Name
	<u>22-32, 34, BPP'A'</u>	<u>MAYAPPLE DRIVE</u>

The well site has been staked by DEVELOPMENT DESIGN CONSULTANTS
 (professional land surveyor or company employing professional land surveyors)
 on 2-09-2018 (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.

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

August 14, 2018

Elm Street Development
1355 Beverly Road
Suite 240
McClellan, VA 22101

Re: Water sample results for Walker Meadows, Lot 27

Dear Elm Street Development,

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

Elevated sodium levels in drinking water may affect individuals on low-salt diets. The action level for sodium is 20 milligrams per liter (mg/L); **sodium from the well measured 3.35 mg/L.**

Chloride and TDS are both considered secondary contaminants, meaning high concentrations may 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 the well measured <10 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from the well measured 109 mg/L.**

Feel free to 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

*Cc: Community Hygiene Program
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



E19000315002
Received: 08/01/2018
Metals HO-17-0273

LABORATORY ANALYSIS REQUEST

Do not write above this line

Please Print

Sample ID No: HO-17-0273 Site Name: Walker Meadows-Lot 27 County: Howard

Sample Source: Howard Lodge Rd. Sikesville Collector: S. Collins
Street Town or City Name

Date Collected: 7/31/2018 Time Collected: 11:30 a.m./p.m. Phone #: 410-313-6287

Sample Preserved By: Field ESRL WMRL Central Lab
Preservative Used: HNO₃ _____ mL pH: <2

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: Sample collected during yield test.

✓	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)				

RECEIVED
AUG 13 2018
HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM

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: E19000315 Date Coll.: 07/31/2018 Date Received: 08/01/2018 Submitted By: Collins

Field ID: HO-17-0273
Lab No.: E19000315002

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	3.35	ppm	08/06/2018

Comments:

Approved by: Yungsoo Choi

Approval date: 08/07/2018

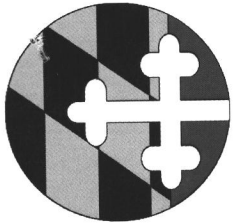
**The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1. Samples are tested as received.

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.

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 NoE19000316 Date Coll. 07/31/2018 Date Received 08/01/2018 Submitted By: S. Collins

Field ID: HO-17-0273
Lab No.: E19000316002

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	<10	mg/L	08/06/2018
Total Dissolved Solids	SM 2540C	109	mg/L	08/06/2018

Comments:

Approved by: _____

Approval date: 08/09/2018

*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.

Telephone: (443) 681 - 3855

Fax: (443) 681 - 4507

S:\EnviroFinal-InorganicsA.rpt

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 141535 Account #: 1933
Reference: Walker Meadows Lot 27 Company: Fogles Well Pump & Treatment
Location: 12221 Mayapple Drive Requested By: Dave Fogle
Sykesville, MD 21784 Source: Well Water
Date/ Time Collected: 12/2/2020 0730 Site: Pressure Tank
Date/Time Rec'd: 12/2/2020 1016 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.1
Collected By: J. Evans 0309JE Well #: HO-17-0273

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	165.2	MPN/ 100 ml	<1.0	SM20 9223B	12/3/2020 / 0845 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	12/3/2020 / 0845 / CCH
Nitrate	1.24	mg/L	10	601	12/3/2020 / 0915 / CRS
Turbidity	5.74	NTU	<10	SM20 2130B	12/3/2020 / 1000 / CRS
Sand	ND	mg/L	5	Visual/Gravimetric	12/3/2020 / 0835 / 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 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND:None Detected
- 7 Visual well check: Sealed, vented cap
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : B20002632

Date Reported: 12/3/2020

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 141706 Account #: 1933
Reference: Walker Meadows Lot 27 Company: Fogles Well Pump & Treatment
Location: 12221 Mayapple Drive Requested By: Dave Fogle
Sykesville, MD 21784 Source: Well Water
Date/ Time Collected: 12/9/2020 0740 Site: Pressure Tank
Date/Time Rec'd: 12/9/2020 1220 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.0
Collected By: J. Evans 0309JE Well #: HO-17-0273

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	12/10/2020 / 1000 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	12/10/2020 / 1000 / CRS

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 ND:None Detected
- 4 Visual well check: Sealed, vented cap
- 5 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : B20002632

Date Reported: 12/10/2020

FILE INQUIRY NOTES

reb 6/25/2015

lot 27

DATE	RESULTS OF REVIEW FOR FILE
	Diehl Property, lot 2 Proposed lot 19

* The Well (any well) installed on this lot area must have steel casing, and the casing must extend to 50 feet depth or 10 feet into competent bedrock whichever is deeper.

Condition Well Permit with this requirement

* Any drain field installed in the area of this lot must have low-pressure distribution (LPD) design or an approved alternative design

R Bucker 6/5/2014

9/28/15 Septic system must include a BAT unit. Trench bottoms are limited to 5-ft depth.

R Bucker