

C 1 55713 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

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

COUNTY NUMBER XIII

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

ST/CO USE ONLY DATE RECEIVED MM DD YY 03 27 18

DATE WELL COMPLETED MM DD YY 03 01 18 Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-17-0230

OWNER SZMPSON THOMAS WELL SITE ADDRESS 5300 GREEN BRIDGE ROAD TOWN DAYTON SUBDIVISION SZMPSON & DENAULT SECTION LOT 5

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries like BROWN SILT, SAPROLITE GRADING, BLACK & GRAY SCHIST, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL (CM) BENTONITE CLAY (BC) NO. OF BAGS 11 NO. OF POUNDS 550 GALLONS OF WATER 220 DEPTH OF GROUT SEAL 58

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter 6 Total depth 60

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

SCREEN RECORD screen type or open hole (ST) (BR) (HO) (PL) (OT)

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED...

DEPTH (nearest ft.) Table with columns 1-24 and rows A-C, R-E, N. Includes slot size and diameter of screen.

DRILLERS LIC. NO. 1 M 576 DRILLERS SIGNATURE SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

PUMPING TEST HOURS PUMPED (nearest hour) 3 HOURS 30 MIN BLOWN YIELD 15.6 GPM PUMPING RATE (gal. per min.) 8.5 METHOD USED TO MEASURE PUMPING RATE WATCH & BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING +2 WHEN PUMPING 68 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER INSTALLED PUMP (YES) (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 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 2 (nearest foot)

LATITUDE 3 9.226644 LONGITUDE 7 7001743 (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.

try = 3/5/18

B 1 34362 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND STATE PERMIT NUMBER
 1 2 3 6
 APPLICATION FOR PERMIT TO DRILL WELL
 502313-B please type HO - 17 - 0230
 70 fill in this form completely 79

Date Received (APA) 10/24/17
 8 MM DD YY 13
OWNER INFORMATION
 15 Last Name Simpson Thomas H. Owner First Name 34
 36 Street or RFD 5300 Greenbridge Road 55
 57 Town Dayton MD 70 State 72 Zip 21036 76

B 3 **LOCATION OF WELL**
Howard
 8 COUNTY NONE AT THIS TIME 21
SIMPSON & DENAULT PROPERTIES
 23 SUBDIVISION 42
 SECTION 44 46 LOT 5 48 50
DAYTON
 52 NEAREST TOWN 71

DRILLER INFORMATION
Randall Alexander M W D 576
 76 License No. 81
Alexander's Well Drilling
 Firm Name
126 West Main St. P.O. Box
 Address Fairfield, PA 17320-443
Randall Alexander 10/16/17
 Signature Date

B 4 **SOURCES OF DRILLING WATER**
 1. WELL WATER
 2.
 3.
5300 GREEN BRIDGE ROAD
 11 STREET ADDRESS 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST EAST
 SOUTH
 34 1000 37
 DISTANCE FROM ROAD FT
 ENTER FT OR MI 38 39
 TAX MAP: 0027 BLK: 0018 PARCEL 0034

B 2 **WELL INFORMATION**
 1 2
 APPROX. PUMPING RATE 5
 (GAL. PER MIN.) 8 500 12
 AVERAGE DAILY QUANTITY NEEDED 500
 (GAL. PER DAY) 14 20

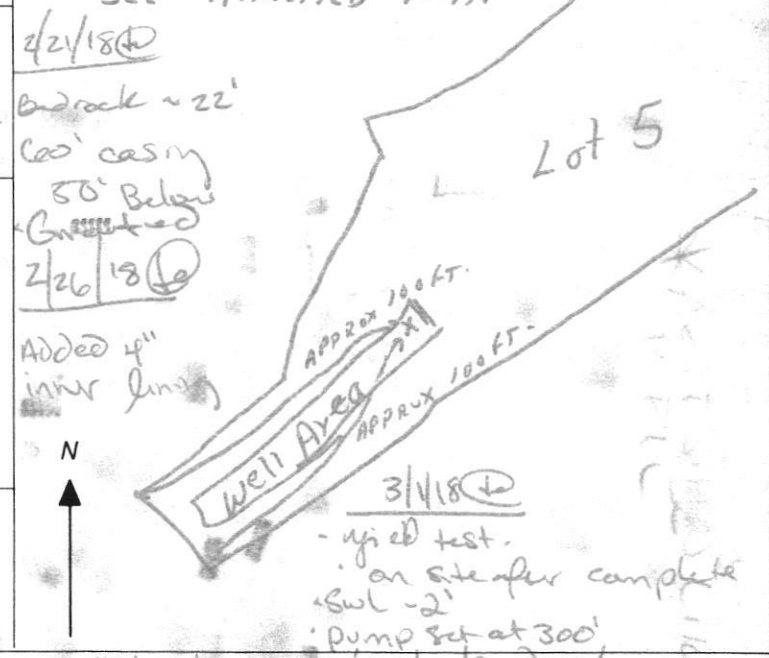
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 I INDUSTRIAL, COMMERCIAL, DEWATERING
 P PUBLIC WATER SUPPLY WELL
 T TEST, OBSERVATION, MONITORING
 O OPEN LOOP GEOTHERMAL
 C CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME X110 COUNTY NO.
 STATE SIGNATURE INSERT S → 41
 DATE ISSUED 02/09/18 CO SIGNATURE [Signature] EXP. DATE 02/09/19
 43 MM DD YY 48

APPROXIMATE DEPTH OF WELL 400 FEET
 24 28
 APPROXIMATE DIAMETER OF WELL 6 NEAREST 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
SEE ATTACHED MAP

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)
 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)
 APPROX. PERMIT NUMBER _____ G _____
 PERMIT No. HO - 17 - 0230
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED
50' steel casing or 10' into competent bedrock whichever is deeper.

©COUNTY Sp. Vm Chloride, TDS Samples Revisited

Yield Test Data Sheet

Maryland State Well Permit: HO-17-0230

Date of Yield Test: 3/11/18

Subdivision Name: Simpson & Devault

Section: _____ Lot: 5

Street Address: 5300 GREEN BRIDGE ROAD
DAYTON MD. 21036

Well Data
Measuring Point (MP): TOP OF CASING *START*
(e.g., "Top of casing")

Distance from MP to ground surface: 2 ft.

Well Depth: 400 ft.

Well Driller: ALEXANDER WELL DRILLING
WILLIAM L. HERTZ JSD-095

**This form must be submitted with the
State of Maryland Well Completion Report**

Submit to: _____

Pump Start Time:	Static Water Level:	Rate method:		Calculated flow in gallons per minute (gpm)
		<input checked="" type="checkbox"/> Time to fill	<input type="checkbox"/> gal. bucket	
8:45	+2 ft.			
Water level and pumping rate must be recorded every 15 minutes				
Time	Water level below M.P.	Time to fill bucket	Pumping rate:	
1 8:45	+2 ft.	5	12	8.5 gpm
2 9:00	40 ft.	5	12	8.5 gpm
3 9:15	68 ft.	7		8.5 gpm
4 9:30	68 ft.	7		8.5 gpm
5 9:45	68 ft.	7		8.5 gpm
6 10:00	68 ft.	7		8.5 gpm
7 10:15	68 ft.	7		8.5 gpm
8 10:30	68 ft.	7		8.5 gpm
9 10:45	68 ft.	7		8.5 gpm
10 11:00	68 ft.	7		8.5 gpm
11 11:15	68 ft.	7		8.5 gpm
12 11:30	69 ft.	7		8.5 gpm
13 11:45	68 ft.	7		8.5 gpm
14 12:00	68 ft.	7		8.5 gpm
15 12:15	68 ft.	7		8.5 gpm
16	ft.			gpm
17	ft.			gpm
18	ft.			gpm
19	ft.			gpm
20	ft.			gpm
21	ft.			gpm
22	ft.			gpm
23	ft.			gpm
24	ft.			gpm
25	ft.			gpm
26	ft.			gpm
27	ft.			gpm
28	ft.			gpm
29	ft.			gpm
30	ft.			gpm

NOTES:

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

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: Foale's Well Pump & Water Treatment, LLC Telephone #: 410 795 1535
Address: PO Box 163
Woodbine, MD 21797

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 Foale License #: MSDZZ6

*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: Toll Brothers Telephone #: _____
Subdivision: Willow Creek Lot #: 5 Well Tag #: HO-17-0230 (SF)
Site Address: 6017 Bricker Rd
Denton, MD 21036

Submersible Pump Data
Maker: Grundfos
Model #: ISSQE07-180
Pump Capacity: 15
Well Yield: 1.5
Depth of well encountered at time of pump installation: 400 (feet)

Pitless Adapter
Make: Pumpbell+
Model #: NA
GPM Depth: 36" (36" min)
GPM NSF/WSC approved: Yes

Well Cap and Electric Conduit
Two piece watertight cap: Yes
Screened, vented well cap: Yes
Cap secured to casing: Yes
Conduit min 18" B.G.: Yes
Conduit secured to well cap: Yes

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Must circle one: Torque arrestors / Cable guards / Other acceptable method used
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing NA

Piping to house
Type: 1" poly pipe
PSI: 200 (150 psi min)
Depth of supply line: 36" (36" min)

House Connection
PVC sleeve to undisturbed soil at wall penetration: Yes
Length of sleeve (5' minimum from foundation): 6'
Sleeve sealed properly: Yes

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: 2/2/2022

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

Date Insp. Requested:	Date Insp. Approved:	Inspector:
<u>2/3/22</u>	<u>2/4/22</u>	<u>(SF)</u>
Inspection Data:		
Pitless/adapter watertight & water supply line at least 36" below grade	<u>Yes</u>	<u>40"</u>
Two piece cap installed and attached to casing securely	<u>Yes</u>	
Elec. conduit extends at least 18" below grade/attached to cap properly	<u>Yes</u>	<u>37"</u>
Safety rope not outside of well cap/casing	<u>Yes</u>	
Correct well tag attached properly and casing 8" above finished grade	<u>Yes</u>	<u>23"</u>
Water supply line sleeved adequately at house connection	<u>Yes</u>	<u>10'</u>
Adequate grout observed below pitless adapter	<u>Yes</u>	

(Revised form 10/24/2018)

*2/4/22 Trench full of water, obscuring pitless. (SF) ✓ 2/4/22 Trench pumped (SF)

INTERIM CERTIFICATE OF POTABILITY
Expiration Date – NOVEMBER 19, 2022

May 19, 2022

Homeowner
6017 Bricker Road
Clarksville, MD 21029

RE: Willowshire, Lot 5
6017 Bricker Road
Building Permit: B21002240
Well Permit: HO-17-0230

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 **5/11/2022**. Final approval of the well line connection to the dwelling was granted on **2/4/2021**. The well construction was completed on **3/1/2018**. Water samples were collected on **5/5/2022, 5/17/2022**.

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-17-0230. 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 Environment's 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



Randall Alexander Well Drilling And Water Pump Sales And Service

126 West Main Street P.O. Box 443
Fairfield, PA 17320
Phone: 717-642-5963 FAX: 717-642-9864
Email: alexanderswell@comcast.net
PAHIC# PA022891
www.AlexandersWellDrilling.com

3/21/18

I Randall L. Alexander License # MWD# 576 would, like to change the following Tag numbers at the Simpson and Denault Subdivision property from test wells to production well. The tag numbers and lot information are listed below as follows as I have enclosed check# 20287 in the amount of

\$ 800.00 for the fee. Lots and Tags numbers are:

Lot# 5 H0-170230

Lot# 6 H0-17-0231

Lot #12 H0-17-0234

Lot#13 H0-17-0235

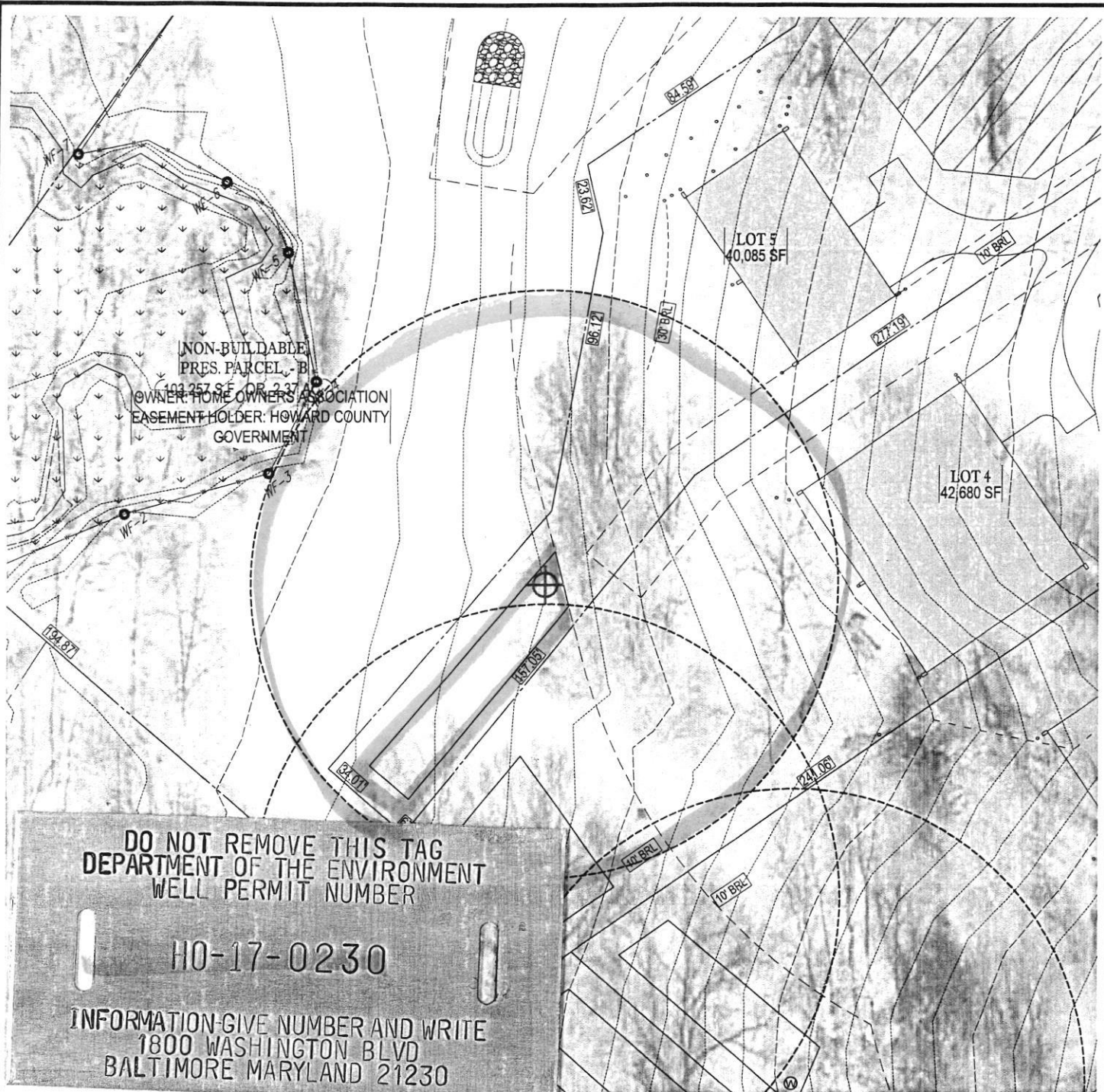
Lot #15 H0-17-0236.

Simpson and Denault subdivision is on Greenbridge Road Dayton Md.

Thank You

Randall L. Alexander, MWD 576

H:\Projects\Elm Street Development\Simpson & Denault Properties_Dayton, MD\CADD\ESD-SDP-Report_Set.dwg

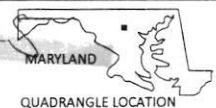


DO NOT REMOVE THIS TAG
 DEPARTMENT OF THE ENVIRONMENT
 WELL PERMIT NUMBER
HO-17-0230
 INFORMATION-GIVE NUMBER AND WRITE
 1800 WASHINGTON BLVD
 BALTIMORE MARYLAND 21230

LEGEND

Proposed Test Well Site

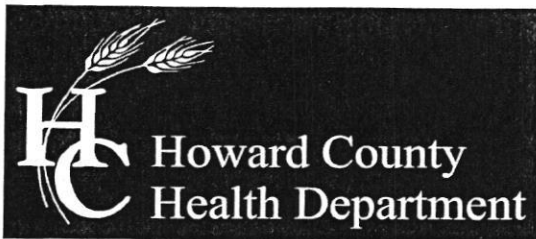
Simpson + Denault
 Ho-17-0230
 Approved 2/9/18
 Staked by
Shanaberger
 + *Lane*



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:		Simpson & Denault Properties Dayton, Howard County, Maryland	
project:		Water Supply Development Lot #5 Proposed Test Well Location Map	
file no.		ESD-SDP-Report Set.dwg	
drawn	date	figure:	C
<i>M. Swam</i>	01/25/18		
checked	date		
<i>J. Lindaw</i>	01/25/18		
approved	date		
<i>M. Haufler</i>	01/25/18		
		www.hydro-terra.com	



Bureau of Environmental Health

8930 Stanford Blvd, 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

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

MEMORANDUM

TO: Randall Alexander MWD 576

FROM: Joseph Cabahug
Environmental Health Specialist
Well & Septic Program

DATE: February 9th, 2018

RE: Simpson & Denault Subdivision – Test Well Permit
Special Condition for Conversion to Potable Well

Handwritten signature: JC 2/9/18

The following comments apply to the above referenced Well Permit Application. Please read through and complete as needed.

The Maryland Department of the Environment (MDE) has granted variances to allow wells on the specified lots to be installed pursuant to the stated conditions. The wells to be installed on lots 3, 4, 5, 6, 7, 11, 12, 13, 15, and Parcel C respectively, must be installed according to these criteria.

- A. Respective well casing shall be steel
- B. Well casings extending to at least 50' in depth or 10' into competent rock, whichever is deeper

The Howard County Health Department is requiring the following samples during yield test:

- A. Sodium, Chloride, and Total Dissolved Solids

Handwritten note: ⊕ Nitrates ⊕

If you have any questions regarding the above mentioned information, please feel free to contact me at 410-313-2643 or email jcabahug@howardcountymd.gov.

JCC

Cc: Jeff Lindaw
file



Randall Alexander Well Drilling And Water Pump Sales And Service

126 West Main Street P.O. Box 443

Fairfield, PA 17320

Phone: 717-642-5963 FAX: 717-642-9864

PAHIC# PA022891

www.AlexandersWellDrilling.com

February 1, 2018

To whom it may concern,

If Howard County Maryland Health Department will allow, I Randall L. Alexander grant permission for Hydro-Terra Group to pick up permits from the county when the permits are approved.

Randall Alexander

Owner - Alexander's Well Drilling

RECEIVED
FEB 05 2018
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

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 #: 120228.1 Account #: 2440
Reference: Simpson & Denault Company: Hydro-Terra Group
Location: Green Bridge Road Requested By: Jeff Lindaw
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 3/1/2018 1225 Site: Pumped from Well
Date/Time Rec'd: 3/1/2018 1535 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.8
Collected By: W.L.H. Well #: HO-17-0230


PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sodium	11.9	mg/L	---	200.7	3/9/2018 / 0056 / DAG
Solids, Total Dissolved	96	mg/L	500*	S2540C-11	3/8/2018 / 1500 / BMK

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 Sodium Detection Limit: 0.50 mg/L; Total Dissolved Solids Detection Limit: 5 mg/L
- 4 Sub-contracted to Reference Lab #128
- 5 ND:None Detected
- 6 Sample collected by Alexanders Well Drilling, analyzed as received
- 7 pH and Chlorine level tested in lab

Reason for Test : Client's Information

Date Reported: 3/14/2018

Reviewed By: 

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 #: 120228 Account #: 2440
Reference: Simpson & Denault Company: Hydro-Terra Group
Location: Green Bridge Road Requested By: Jeff Lindaw
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 3/1/2018 1225 Site: Pumped from Well
Date/Time Rec'd: 3/1/2018 1535 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.8
Collected By: W.L.H. Well #: HO-17-0230


PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Nitrate	<1.0	mg/L	10	601	3/1/2018 / 1600 / CRS
Chloride	<5.0	mg/L	250*	SM4500-Cl-B.	3/2/2018 / 1240 / RER

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 ND:None Detected
- 5 Sample collected by Alexanders Well Drilling, analyzed as received
- 6 pH and Chlorine level tested in lab

Reason for Test : Client's Information

Date Reported: 3/6/2018

Reviewed By: 

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 151839 Account #: 1933
Reference: Willow Creek Lot 5 Client: Fogle's Well Pump & Treatment
Location: 6017 Bricker Road Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 5/5/2022 0830 Site: Pressure Tank
Date/Time Rec'd: 5/5/2022 1150 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.2
Collected By: J. Evans 0309JE Well #: HO-17-0230

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/6/2022 / 0930 / MEH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/6/2022 / 0930 / MEH
Nitrate.	<0.40	mg/L	10	EPA 300.0	5/5/2022 / 1719 / CRS
Turbidity	6.26	NTU	<10	SM2130B	5/5/2022 / 1340 / MEH
Sand	>5	mg/L	5	Visual/Gravimetric	5/6/2022 / 0845 / 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 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy
Building Permit # : B21002240

Date Reported: 5/6/2022

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 152037 Account #: 1933
Reference: Willow Creek Lot 5 Client: Fogle's Well Pump & Treatment
Location: 6017 Bricker Road Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 5/16/2022 0830 Site: Kitchen Sink
Date/Time Rec'd: 5/16/2022 1459 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.5
Collected By: J. Evans 0309JE Well #: HO-17-0230

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/17/2022 / 1015 / MEH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/17/2022 / 1015 / MEH
Sand	ND	mg/L	5	Visual/Gravimetric	5/16/2022 / 1700 / 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 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 4 Visual well check: Sealed, vented cap
- 5 ND = None Detected
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 7 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : B21002240

Date Reported: 5/17/2022



HOWARD COUNTY HEALTH DEPARTMENT

62935

DATE 3/27/18

US

Received From

Alexander's Well Drilling

PHONE # 410-642-5963

CASH
 CHECK
NO.

For

Well permits - Permit
subdivision Property

20287

Eight hundred Dollars

\$ 800.00

Received By

J King

4/3/2018 Test Well Conversion
to potable well