

C1 61892

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER XIII

ST/CO USE ONLY DATE Received 10/19/2019

DATE WELL COMPLETED 09/18/19 APPROVED [Signature] Depth of Well 600 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-18-0079

OWNER Elm Street Development WELL SITE ADDRESS Green Bridge Rd TOWN DARTON SUBDIVISION Simpson Property SECTION LOT 32

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include SOIL, Sand/Brown shale, Brown shale, med GRAY Rock, Soft GRAY Rock, MED GRAY Rock.

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (23), NO. OF POUNDS (1725), DEPTH OF GROUT SEAL (65).

CASING RECORD Form: 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 (65).

OTHER CASING (if used) Form: diameter (4 1/2), depth (100).

SCREEN RECORD Form: screen type or open hole (BR, HO, PL, OT).

DEPTH (nearest ft.) Form: HO 65, 600. Includes table for casing height and slot size.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) Form: T (E.R.O.S.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST Form: HOURS PUMPED (3), PUMPING RATE (4.62), WATER LEVEL (22), TYPE OF PUMP USED (S).

PUMP INSTALLED Form: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED PLACE (29), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (+ above, - below).

LATITUDE 39.23324 LONGITUDE 77.00183 (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.

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y)

CIRCLE APPROPRIATE LETTER: A (WELL ABANDONED AND SEALED), E (ELECTRIC LOG OBTAINED), P (TEST WELL CONVERTED TO PRODUCTION WELL)

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...

DRILLERS LIC. NO. M-D 355 DRILLERS SIGNATURE [Signature] LIC. NO. D 113

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

TAG # 9/15/19 (5)

B 1 SEQUENCE NO. (MDE USE ONLY) 63173 STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL STATE PERMIT NUMBER Ho-18-0079

1 2 3 6 please type 904793-1 70 fill in this form completely 79

OWNER INFORMATION

Date Received (APA) 03/17/19
 8 MM DD YY 13
Elm Street Development
 15 Last Name Owner First Name 34
1355 Beverly Road
 36 Street or RFD 55
McLean VA 22101
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

Howard
 8 COUNTY 21
Simsan Property
 23 SUBDIVISION 42
 SECTION 44 46 LOT 32 48 50
Daxton
 52 NEAREST TOWN 71

DRILLER INFORMATION

Michael Barbu M WD 355
 Driller's Name 76 License No. 81
Barbu Well Drilling
 Firm Name
522 Underwood Lane 21014
 Address
3-12-19
 Signature Date

B 4 SOURCES OF DRILLING WATER

1. well Green Bridge Road
 11 STREET ADDRESS 30
 2.
 3.
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 3150
1800 37
 DISTANCE FROM ROAD
 ENTER FT OR MI 38 39
 TAX MAP: 27 BLK: 18 PARCEL

B 2 WELL INFORMATION

APPROX. PUMPING RATE 5
 (GAL. PER MIN.) 8 12
 AVERAGE DAILY QUANTITY NEEDED 750
 (GAL. PER DAY) 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

Howard COUNTY NAME XTC COUNTY NO.
 STATE SIGNATURE INSERT S →
 DATE ISSUED 05/17/2019 41
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
Don Gifford 9/15/19

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

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTARY AIR-PERCUSION 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

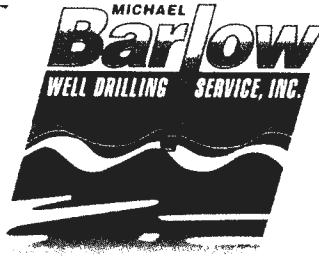
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER HO2017G001
 PERMIT No. Ho-18-0079
 70 71 72 73 74 75 76 77 78 79

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

6/7/2019 9/15/19
55' BL static 22'
60' casing pump 250'
600' Deep level 210'
 4.6 gal/min
 Prop LINE
 35' |
 20' |
 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.

SPECIAL CONDITIONS
 NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED. SEE ATT MEMO UPDATED 5/17/2019



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:	September 18, 2019		
Well Depth:	600	feet	
Customer	Elm Street Development	Permit #	HO-18-0079
Road	Green Bridge Rd	Subdivision	Simpson Property
City	Dayton	Section	
State	Maryland	Lot #	32

Time	Water Level feet Pump set at 250'	Time to Fill 1-gallon bucket seconds	G.P.M.
12:40 PM	22	4	15.00
12:55 PM	118	4	15.00
1:10 PM	210	13	4.62
1:25 PM	210	13	4.62
1:40 PM	210	13	4.62
1:55 PM	210	13	4.62
2:10 PM	210	13	4.62
2:25 PM	210	13	4.62
2:40 PM	210	13	4.62
2:55 PM	210	13	4.62
3:10 PM	210	13	4.62
3:25 PM	210	13	4.62
3:40 PM	210	13	4.62
3:55 PM	210	13	4.62
4:10 PM	210	13	4.62

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.

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: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535

Address: P.O. Box 63

Woodbine, Maryland 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): Dave C. Fogle 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: Toll Brothers Telephone #: _____
 Subdivision: Willow Creek Lot #: 32 Well Tag #: HO-18-0079
 Site Address: 7024 Wolf Place
Bayton, MD 21036

Submersible Pump Data

Make: Grundfos
 Model #: ISS0905-290
 Pump Capacity: 15
 Well Yield: 4.6

Pitless Adapter

Make: Campbell
 Model#: N/A
 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

Depth of well encountered at time of pump installation: 600 (feet)

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 N/A

Piping to house

Type: 1" poly pipe
 PSI: 200 psi (160 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

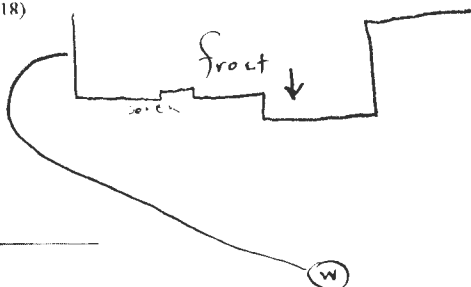
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] Date: 3/15/2023

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

Date Insp. Requested: <u>3/16/23</u>	Date Insp. Approved: <u>3/16/23</u>	Inspector: <u>RR</u>
Inspection Data:	Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
	Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
	Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
	Safety rope not outside of well cap/casing	<input checked="" type="checkbox"/>
	Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
	Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
	Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

(Revised form 10/24/2018)



INTERIM CERTIFICATE OF POTABILITY

Expiration Date – February 14, 2024

August 14, 2023

Homeowner
7024 Colt Place
Dayton, MD 21036

RE: Willowshire, Lot 32
7024 Colt Place
Building Permit: B22003303
Well Permit: HO-18-0079

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 **8/2/2023**. Final approval of the well line connection to the dwelling was granted on **3/16/2023**. The well construction was completed on **7/18/2019**. Water samples were collected on **7/13/2023** and **8/1/2023**.

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-18-0079**. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

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

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

Approving Authority,

Hank Oswald

Hank Oswald, L.E.H.S.
Well & Septic Program

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

Oswald, Hank

From: Oswald, Hank
Sent: Monday, August 14, 2023 2:25 PM
To: Cole, Colleen; Hall, Stephanie; Hill, Amanda; Hill, Chad; Roussel, Lisa; Schmidt, Heather; Huskins, Thomas; Tracey, Megan; gchahalis@tollbrothers.com
Cc: Wolf, Kevin; Martin, Sharhonda
Subject: ICOP_7024 Colt Place
Attachments: 7024 Colt Place_ICOP letter (new).pdf

Hello All:

Good afternoon. Attached, please find the ICOP letter for 7024 Colt Place.

Should you have any questions or concerns, please don't hesitate to contact me.

Kind Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Well & Septic Program
410.313.1786
hoswald@howardcountymd.gov

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 160558 Account #: 1933
Reference: Willow Creek Lot 32 Client: Fogle's Well Pump & Treatment
Location: 7024 Colt Place Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 8/1/2023 0930 Site: Kitchen Sink Tap
Date/Time Rec'd: 8/1/2023 1238 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.6
Collected By: T. Cassell 0767TC Well #: HO-18-0079

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/2/2023 / 0825 / MEW
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/2/2023 / 0825 / MEW

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 # : B22003303

Date Reported: 8/2/2023

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

MEMORANDUM

TO: Michael Barlow Well Drilling
Attn: Michael Barlow MWD 355
522 Underwood Lane
Bel Air, MD 21014

FROM: Joseph Cabahug *J Cabahug 05/17/2019*
Licensed Environmental Health Specialist **001997**
Howard County Health Department
Well & Septic Program

RE: Simpson and Denault Well Permit Special Conditions

DATE: 05/17/2019

This memorandum serves to inform the driller serving The Simpson and Denault Subdivision for construction of a new potable wells for residential use of the special conditions associated with the release of the well permits.

In accordance with current approved Percolation Certification (signed 03/27/2019), the following conditions apply:

Note 15(d) Wells installed on **Lots 2 – 8, 12 – 14, 23, 26 – 34, 38, and 39** must be installed as steel casing to depth of at least 50' below the soil surface or 10 feet into competent bedrock, whichever is deeper.

In accordance with the Water Appropriation and Use Permit (**HO2017G001(01)**), the following conditions apply:

Page 3, Section 15: The Permittee shall conduct simultaneous yield tests of wells closer than 100 feet apart, if at least one of the wells is on a lot less than one acre in size. The yield testing shall be conducted to ensure that the minimum yield requirements of COMAR 26.04.04.26 are met. In the event that a well that has been tested simultaneously with other wells does not meet minimum yield standards, the Permittee may relocate a well to achieve the 100-foot separation distance, deepen or otherwise modify the well to improve its yield or drill a second well to be used in tandem to meet the minimum yield standards during simultaneous testing. All wells shall comply with the well construction requirements.

Lots 26, 28, 38 – 44

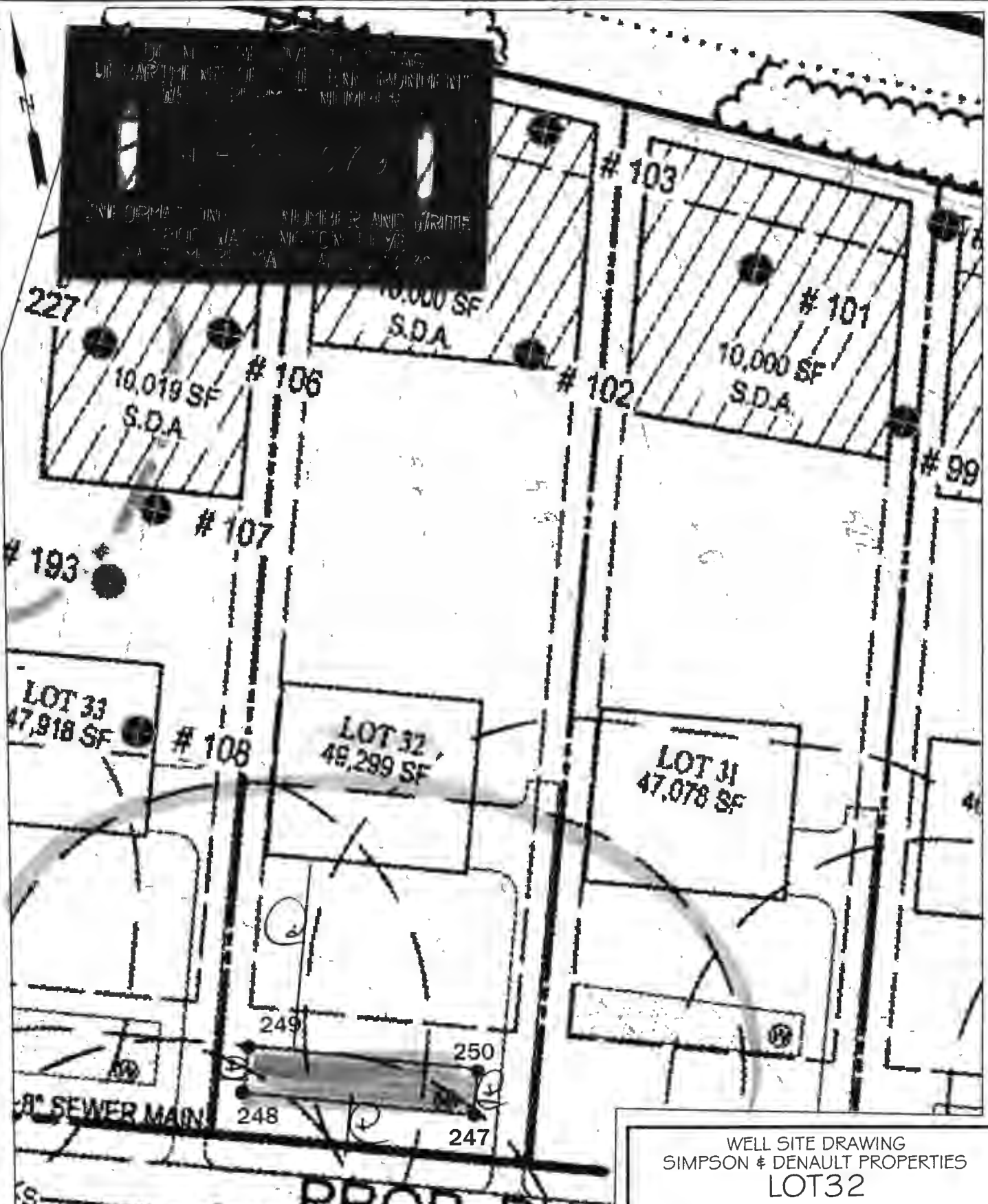
Maura J. Rossman, M.D., Health Officer

Lots that are less than one acre are shown below.

MINIMUM LOT SIZE CHART			
LOT No.	GROSS AREA (SF)	PIPE STEM	NET AREA
1	54,825		54825
2	59,641		59641
3	55,018		55018
4	41,925		41925
5	40,840		40840
6	55,788		55788
7	55,833		55833
8	45,774		45774
9	42,992		42992
10	44,020		44020
11	42,068		42068
12	40,362		40362
13	41,330		41330
14	56,648	6700	49948
15	40,459		40459
16	49,871		49871
17	40,003		40003
18	40,443		40443
19	40,461		40461
20	40,461		40461
21	40,218		40218
22	54,686		54686
23	55,798		55798
24	44,052	1375	42677
25	41,612	2906	38706
26	48,488	5322	43166
27	46,396		46396
28	40,768		40768
29	44,270		44270
30	44,589		44589
31	46,366		46366
32	49,299		49299
33	47,918		47918
34	52,931		52931
35	54,827	2518	52309
36	44,800	3617	41183
37	55,035	4441	50595
38	33,223	2913	30310
39	31,227		31227
40	35,865		35865
41	40,100		40100
42	34,182		34182
43	41,390		41390
44	41,360		41360
45	45,097		45097
TOTAL AREA	2,043,259	AC.	46.91
			S.F.

Please reach out to the Howard County Health Department – Bureau of the Environment with further questions.

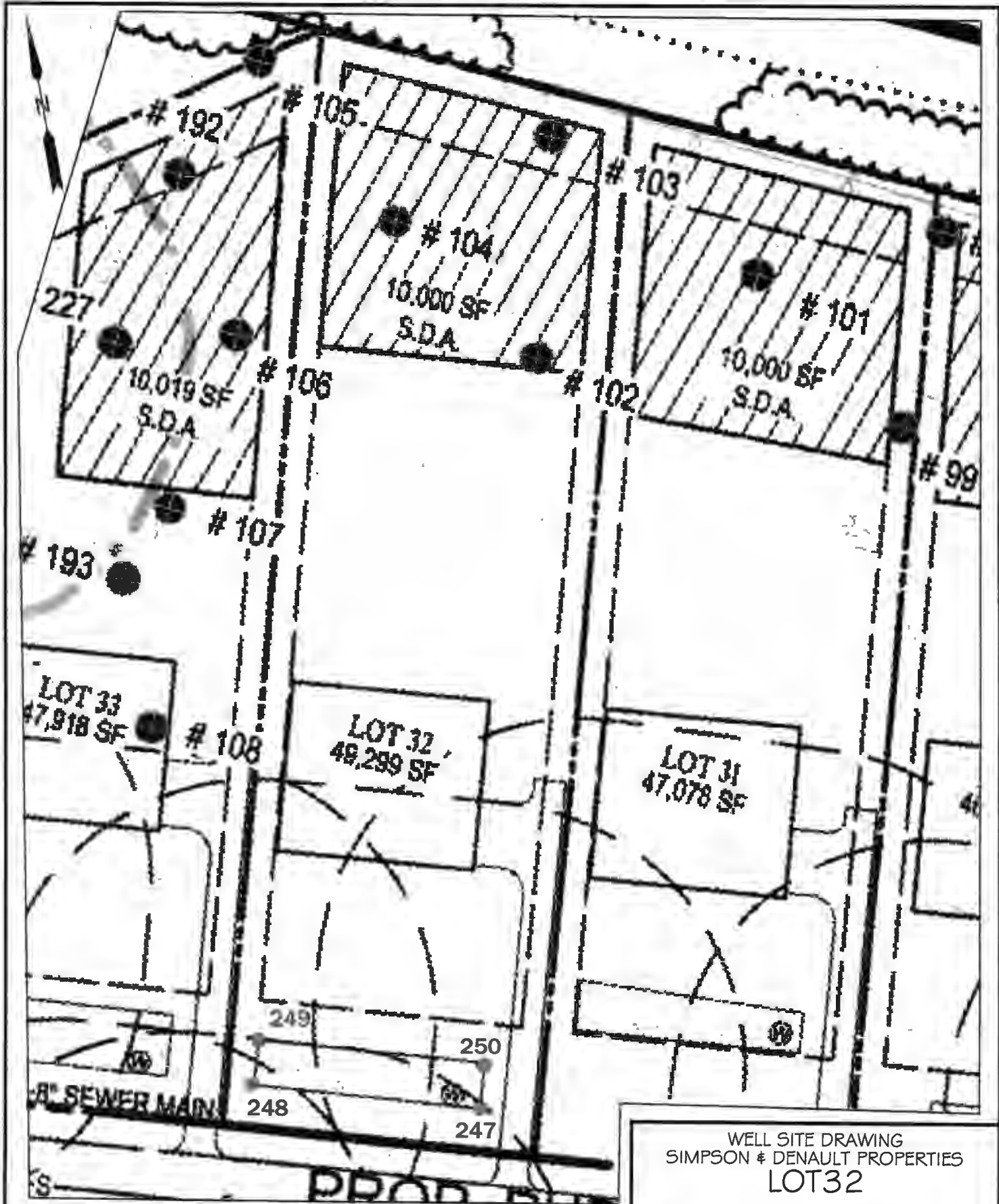
FOR MORE INFORMATION CONTACT THE ENGINEER AT THE ADDRESS LISTED BELOW
 INFORMATION NUMBER AND DATE
 10000 SF S.D.A.
 10,019 SF S.D.A.
 10,000 SF S.D.A.



WELL SITE DRAWING
 SIMPSON & DENAULT PROPERTIES
 LOT 32
 TAX MAP 27 GRID 18
 PARCELS 34, 36, 98, 111, & 112
 5TH ELECTION DIST.
 HOWARD COUNTY, MD.
 SCALE: 1"=50' DATE: 2/21/19

APPROVED 5/17/09
 STAKED BY SHAN/LANE
 TIANABERGER & LANE
 8725 TOWN AND COUNTRY BLVD., SUITE 201
 ELLICOTT CITY, MD. 21043
 (410)461-9563 FAX: (410)461-9693

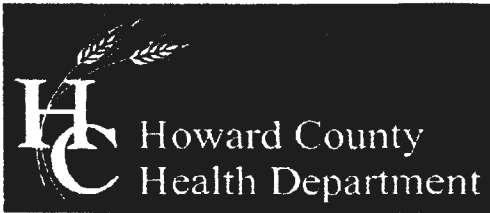
HO-18-0079



WELL SITE DRAWING
 SIMPSON & DENAULT PROPERTIES
LOT 32

TAX MAP 27 GRID 18
 PARCELS 34, 36, 98, 111, & 112
 5TH ELECTION DIST.
 HOWARD COUNTY, MD.
 SCALE: 1"=50' DATE: 2/21/19

SHANABERGER & LANE
 8726 TOWN AND COUNTRY BLVD., SUITE 201
 ELLICOTT CITY, MD. 21043
 (410)461-9563 FAX: (410)461-9693



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:

LOT #'S 1, 2, 3, 4, 7, 8, 9, 10, 11, 14, PARCEL 'C', 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

SIMPSON / DENAULT
Subdivision/Property Name

Lot #

GREEN BRIDGE RD.
Road Name

X The well site has been staked by SHANABERGER & LANE
(professional land surveyor or company employing professional land surveyors)
on 1/9/19 (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 4/22/14



FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 160558 Account #: 1933
Reference: Willow Creek Lot 32 Client: Fogle's Well Pump & Treatment
Location: 7024 Colt Place Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 8/1/2023 0930 Site: Kitchen Sink Tap
Date/Time Rec'd: 8/1/2023 1238 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.6
Collected By: T. Cassell 0767TC Well #: HO-18-0079

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/2/2023 / 0825 / MEW
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/2/2023 / 0825 / MEW

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 # : B22003303

Date Reported: 8/2/2023

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 160227 Account #: 1933
Reference: Willow Creek Lot 32 Client: Fogle's Well Pump & Treatment
Location: 7024 Colt Place Requested By: Dave Fogle
Dayton, MD 21036 Source: Well Water
Date/ Time Collected: 7/13/2023 1400 Site: Kitchen Sink Tap
Date/Time Rec'd: 7/13/2023 1500 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.5
Collected By: T. Cassell 0767TC Well #: HO-18-0079

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	3.1	MPN/ 100 ml	<1.0	SM20 9223B	7/14/2023 / 0930 / MEW
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	7/14/2023 / 0930 / MEW
Nitrate.	3.04	mg/L	10	EPA 300.0	7/13/2023 / 1804 / MEW
Turbidity	<0.30	NTU	<10	SM2130B	7/13/2023 / 1605 / MEW
Sand	ND	mg/L	5	Visual/Gravimetric	7/13/2023 / 1620 / MEW

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

Reason for Test : Use & Occupancy
Building Permit # : B22003303

Date Reported: 7/14/2023