

1 7268 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.

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

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED 9 18 07 Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-1216

OWNER last name first name STREET OR RFD TOWN SUBDIVISION SECTION LOT

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Brown shale, Gray Granite.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE, Nominal diameter, Total depth of main casing. Includes codes for Steel, Concrete, Plastic, Other.

OTHER CASING (if used) diameter, depth

SCREEN RECORD

screen type or open hole (Steel, Brass, Bronze, Plastic, Open Hole, Other)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Yes/No)

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 M SD 001 DRILLERS SIGNATURE LIC. NO. 1 D

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

DEPTH (nearest ft.)

Table with columns: 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, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100. Includes handwritten entries: 49, 300.

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

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

PUMPING TEST

HOURS PUMPED (nearest hour) 06 PUMPING RATE (gal. per min.) 2.0 METHOD USED TO MEASURE PUMPING RATE 19 gal. WATER LEVEL (distance from land surface) BEFORE PUMPING 35 ft. WHEN PUMPING 155 ft. TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or 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) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (circle appropriate box and enter casing height)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

NO survey stakes

B 1 4353

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 526697 please type

STATE PERMIT NUMBER

HO-95-1216 fill in this form completely

Date Received (APA) 4/19/07

OWNER INFORMATION

Keelty Company P.O. Box 528 Timonium md 21094

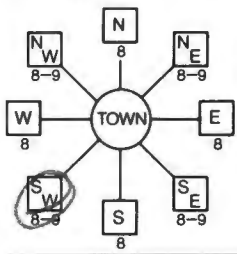
LOCATION OF WELL

Howard Murdue Property Woodstock

DRILLER INFORMATION

Allen Compton MS D 009 Fogles Well Drilling 580 Obrecht Rd

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Woodstock rd. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST

TAX MAP: 10 BLK: 24 PARCEL 225

WELL INFORMATION APPROX. PUMPING RATE 5 AVERAGE DAILY QUANTITY NEEDED 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 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A 518006-m COUNTY NAME STATE SIGNATURE DATE ISSUED 2/13/04 Kim Wall 8/13/08

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTARY JETTED ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVEN DRIVE-POINT

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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

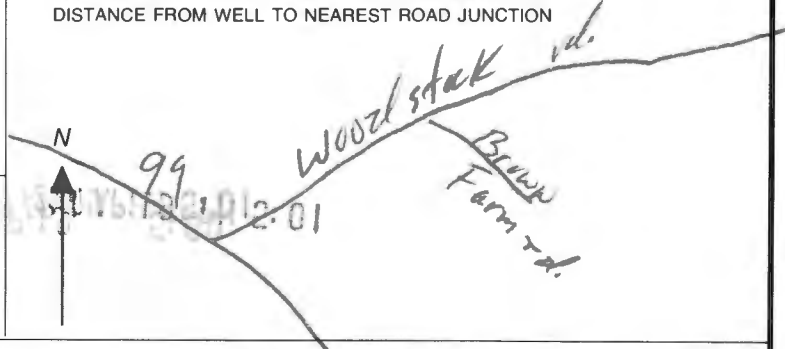
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER HO 2006-G018 PERMIT No. HO-95-1216

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE E 8307 N 5461

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS NEED RADIUM SAMPLE PER HEALTH DEPT

Yield Test Data Sheet

County File # _____
District 2

MD Well Permit #. 40-95-1216

Date of Test: 9-4-07

Subdivision Name: myrtue PLO

Section _____ Lot # 20

Street Address: woodstock rd.

Measuring Point (MP) Description: Top of casing
(for ex. "Top of casing")

Distance from MP to ground surface 2 ft.

Well Depth 300 ft.

Well Driller: Fogle's Well Drilling

Must be submitted with the State of Maryland Well Completion Report

Submit to:

Pump Start Time <u>8:00</u>	Static Water level: <u>35</u> ft.	Pumping Rate <u>4.500</u> () Time to fill <u>1</u> gal. bucket () Flow meter reading (if used)	Calculated Flow (gallons per minute) <u>15</u>
TIME	WATER LEVEL BELOW M.P.		

Water level and pumping rate must be recorded every 15 minutes

#	TIME	WATER LEVEL ft.	PUMPING RATE	CALCULATED FLOW (GPM)
1	8:00	35	4	15
2	8:15	155	30	2
3	8:30	155	30	2
4	8:45	155	30	2
5	9:00	155	30	2
6	9:15	155	30	2
7	9:30	155	30	2
8	9:45	155	30	2
9	10:00	155	30	2
10	10:15	155	30	2
11	10:30	155	30	2
12	10:45	155	30	2
13	11:00	155	30	2
14	11:15	155	30	2
15	11:30	155	30	2
16	11:45	155	30	2
17	12:00	155	30	2
18	12:15	155	30	2
19	12:30	155	30	2
20	12:45	155	30	2
21	1:00	155	30	2
22	1:15	155	30	2
23	1:30	155	30	2
24	1:45	155	30	2
25	2:00	155	30	2
26	2:15	155	30	2
27		ft.		GPM
28		ft.		GPM
29		ft.		GPM
30		ft.		GPM

NOTES:

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Barlow Well Drilling Telephone #: 410-838-6910
Address: 522 UNDERWOOD LANE
BEL AIR, MD 21014

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Michael Esom License# MSD 162

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: KEYSTONE HOMES Telephone #: 410-838-6910
Subdivision: Mixtue Azdusti Lot #: 20 Well Tag #: HO-95-1210
Site Address: 1933 DAVIS BRANCH RD
WOODS BIRC MD 21163

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Grundfos</u>	Make: <u>B11</u>	Two piece watertight cap: <u> </u>
Model #: <u>7CS07422</u>	Model#: <u>D100</u>	Screened, vented well cap: <u> </u>
Pump Capacity <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u> </u>
Well Yield: <u>2</u> GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <u> </u>
Depth of well encountered at time of pump installation: <u>300</u> (feet)		Conduit secured to well cap: <u> </u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house	House Connection
Type: <u>Poly</u>	PVC sleeved to undisturbed soil at wall penetration: <u> </u>
PSI: <u>200</u> (160 psi min)	Approximate length of sleeve: <u>6</u> feet
Depth of supply line: <u>36</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

The water supply line is require distribution box, drainfields, a approval prior to installation.

NO well tag

ptic tank, pump chamber, sewage piping, not be accomplished, contact this office for

Signature of company represent: [Signature]

2/22/23
date

For Health

completed by Installer

Date Insp. Requested: 2/23/23 Approved:

Inspection Data:

Pitless adapter and 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 installed inside of well casing	<u> </u>
Correct well tag attached properly and casing 8" above finished grade	<u> </u>
Water supply line sleeved adequately at house connection	<u> </u>
Adequate grout observed below pitless adapter	<u> </u>

NO well tag

Is the sample for a public water system? Yes No

HOME LAND

LABS

243421 Due Date: 08/22/2023
Client: Barlow Well

Phone: (443) 505-8375 Email: lab@homelandhealthyhomes.com

1220 E Joppa Rd. Ste C505
Towson, MD 21286
MD Lab # 365

108 Old Solomons Island Road, Ste L2
Annapolis, MD 21401
MD Lab # 106

3430 Rockefeller Court
Waldorf, MD 20602
MD Lab # 139

2216 Commerce Road, Ste 2A
Forest Hill, MD 21050

Client Name: <u>Michael Barlow Well Drilling</u>	Property Address: <u>1933 DAVIS BRANCH RD</u>
Email Address: <u>misom@mbwd.us</u>	<u>WOODSTOCK, MD</u>
Phone Number: <u>(410) 838-6910</u>	<u>LOT 20</u>

Field Collection Information

Sampler Name: <u>JAYDEN EDWARDS</u>	Field pH: <u>N/A</u>
Sampler ID #: <u>3059JE</u>	Field Chlorine (mg/L): <u>0</u>
Date Sampled: <u>8/15/23</u> Time Sampled: <u>7:45</u>	Sand: <u>NONE</u>
Well Tag Number: <u>170-95-1214</u>	Clarity: <u>CLEAR</u>

Well Casing and Cap Condition

Well Type: Drilled Well Pit Below Grade Artesian Hand Dug N/A Other: _____

Height Above Grade: <u>1</u>	Cap Type: <u>two piece CAP</u>	Casing: <u>PVC</u>	Conduit: <u>PVC</u>
Sample Point: <u>Pressure tank</u>	Water Conditioning: <u>NONE</u>		

Requested Testing: (Please check all that apply)

- Potability (Bacteria, Nitrate + Nitrite, Turbidity)
 FHA/VA (Bacteria, Nitrate + Nitrite, Turbidity, Lead, Iron)
 Bacteria Chlorides Total Dissolved Solids
 Lead Hardness Copper
 Nitrate + Nitrite Arsenic VOCs
 Iron Cadmium Other: PH
 Turbidity Gross Alpha Other: SAND
+ Gross Beta

List rush samples below
Refer to table for rush turnaround times and fees

Release Signatures

Released By: Michael Isom 8/15/23

Date/Time: 8/15/23 9:20

Released By: _____

Date/Time: _____

Released By: _____

Date/Time: _____

Received in lab by: Jan Mui

Date/Time: 8/15/23 @ 9:20A

Bacteria sample damaged and

Sample temperature upon receipt: _____



**AQUAFLOW
PUMP & SUPPLY CO.**

1561 Pulaski Highway • P.O. Box 98 • Bear, DE 19701 (302) 834-1311 • Fax (302) 834-0716
 16816 So. Dupont Highway • Harrington, DE 19952 (302) 398-3704 • Fax (302) 398-3716
 2309 North Dupont Highway • New Castle, DE 19720 (302) 656-5437 • Fax (302) 656-4309
 15 Tomlinson Road • Huntingdon Valley, PA 19006 (215) 947-7900 • Fax (215) 947-9907
 3001 Montrose Avenue • Reading, PA 19605 (610) 929-0100 • Fax (610) 929-9230
 104 Railroad Street • Bedford, PA 15522 (814) 623-2290 • Fax (814) 623-8892
 258 Donahoe Road • Greensburg, PA 15601 (724) 552-0240 • Fax (724) 552-0249 • 1-800-581-5113
 9694 Rt. 322 • P.O. Box 157 • Shippenville, PA 16254 (814) 226-5070 • Fax (814) 226-7961 • 1-800-360-4678
 16051 Business Parkway • Hagerstown, MD 21740 (301) 790-0088 • Fax (301) 790-0098 • 1-877-558-0089
 5430 Ketch Road • Prince Frederick, MD 20678 (443) 968-2867 • Fax (443) 968-9701
 89 Willow Grove Road • Unit F • Shamong, NJ 08088 (609) 801-0771 • Fax (609) 801-0772
 4185 Independence Drive • Schnecksville, PA 18078 (610) 799-3211 • Fax (610) 799-3888
 841 Route 6 • Shohola, PA 18458 (570) 409-0017 • Fax (570) 409-0019

Hi!

6/30/23

We did a updated
yield and I just wanted
to send a copy for your
records -

Thanks,
Theresa
Fogles

DISTRIBUTORS OF GOULDS PUMPS



Penny E. Borenstein, M.D., M.P.H., Health Officer

ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by DaFT-McCune Walker on _____ and is ready for site inspection.
- _____ will call the Health Department for a time to meet in the field to verify a well location.
- Site plan for new well is attached to well permit application.

Please attach this sheet when submitting your green application. This should help improve communication allowing a more timely service for our citizens.

KN

*Engineer stated well box is
Staked on corners*

Martine Prof. Lots 1-31

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – FEBRUARY 29, 2024

August 29, 2023

Homeowner
1933 Davis Branch Road
Woodstock, MD 21163

**RE: Marriotts Ridge, Lot 20
1933 Davis Branch Road
Building Permit: B22003317
Well Permit: HO-95-1216**

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 **6/15/2023**. Final approval of the well line connection to the dwelling was granted on **2/22/2023**. The well construction was completed on **9/18/2007**. Water samples were collected on **8/15/2023, 8/17/2023**.

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.

Gross Alpha and Beta samples were also collected on **8/15/2023**. Results showed a Gross Alpha level of **4.0 ± 1.3 pCi/L** and **Gross Beta** level of **5.1 ± 1.5 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

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-95-1216. 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.**



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

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a 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" for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environment website which elaborates 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, L.E.H.S., REHS/R.S., Supervisor
Groundwater Management Section
Well & Septic Program

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

HOME LAND LABS

1220 East Joppa Road #C505
Towson, MD 21286
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 365

108 Old Solomons Island Road, Suite 12
Annapolis, MD 21401
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 106

3430 Rockefeller Court
Waldorf, MD 20602
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 139

Certificate of Analysis

Report Date: 08/18/2023

Client: Barlow Well Drilling

Property Address: 1933 Davis Branch Road Lot 20
Woodstock, MD

Report No: 243421

Sample Time: 08/15/2023 07:45

Date & Time Received: 08/15/2023 09:20

Sampled By: Jayden Edwards 3059JE

Field Preservation: Ice

Sample Point(s): Pressure Tank

Water Conditioning Appears to be: None

Field Chlorine: 0.00

Field pH: Not Noted

Well Type: Drilled

Well Height: 1'

Cap Type: 2-Piece

Casing: PVC

Conduit: PVC

Clarity: Clear

Sand: None Observed

Well Tag Number: HO-95-1216

This report is the sole property of Barlow Well Drilling. Any questions about the report MUST be directed to Barlow Well Drilling at (410) 838-6910. Home Land Labs is not at liberty to discuss this report without written consent from Barlow Well Drilling.

Primary Contaminants

Parameter	Method	Result	Pass/Fail	Units	MCL	RL	Analyst	Date of Analysis
Gross Beta	EPA 900.0	5.1	Pass	pCi/L	50.0	1.5	F R C - 278	08/17/2023
Nitrate + Nitrite as N	EPA 353.2	1.3	Pass	mg/L	10	0.5	D J - 365	08/15/2023
Turbidity	EPA 180.1	3.6	Pass	NTU	10	0.5	D J - 365	08/15/2023
Radium Gross Alpha	EPA 900.0	4.0	Pass	pCi/L	15	1.3	F R C - 278	08/17/2023

Secondary Contaminants

Parameter	Method	Result	Acceptable/High	Units	SMCL	RL	Analyst	Date of Analysis
pH	EPA 150.1	6.1	-	pH Units	-	1	D J - 365	08/15/2023

Contaminants

Parameter	Method	Result	Acceptable/High	Units	SMCL	RL	Analyst	Date of Analysis
Sand	SM 2540F	Not Detected	NA	ml/L/hr	-	0.5	D J - 365	08/15/2023

Report Notes

The lab added the following notes for your report:

- pH must be analyzed in the field to be in accordance with EPA protocol.

Approved By: Kevin Barnaba Kevin Barnaba, Lab Director

Is the sample for a public water system? Yes No

HOME LAND LABS

243632 Due Date: 08/21/2023
Client: Barlow Wel

Phone: (443) 505-8375 Email: lab@homelandhealthyhomes.com

1220 E Joppa Rd. Ste C505
Towson, MD 21286
MD Lab # 365

108 Old Solomons Island Road, Ste L2
Annapolis, MD 21401
MD Lab # 106

3430 Rockefeller Court
Waldorf, MD 20602
MD Lab # 139

2216 Commerce Road, Ste 2A
Forest Hill, MD 21050

Client Name: <u>Michael Barlow Well Drilling</u>	Property Address: <u>1933 DAVIS BRANCH RD</u>
Email Address: <u>misom@mbwd.us</u>	<u>WOODSTOCK, MD 21163</u>
Phone Number: <u>(410) 838-6910</u>	

Field Collection Information

Sampler Name: <u>Michael Ison</u>	Field pH: <u>N/A</u>
Sampler ID #: <u>1113MR</u>	Field Chlorine (mg/L): <u>0</u>
Date Sampled: <u>8/17/23</u> Time Sampled: <u>8:00 am</u>	Sand: <u>NONE</u>
Well Tag Number: <u>Hb-95-1216</u>	Clarity: <u>CLEAR</u>

Well Casing and Cap Condition

Well Type: Drilled Well Pit Below Grade Artesian Hand Dug N/A Other: _____

Height Above Grade: <u>2'</u>	Cap Type: <u>two piece</u>	Casing: <u>PVC</u>	Conduit: <u>PVC</u>
Sample Point: <u>RS: tank</u>	Water Conditioning: <u>NONE</u>		

Requested Testing: (Please check all that apply)

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Potability (Bacteria, Nitrate + Nitrite, Turbidity) | <input type="checkbox"/> Chlorides | <input type="checkbox"/> Total Dissolved Solids |
| <input type="checkbox"/> FHA/VA (Bacteria, Nitrate + Nitrite, Turbidity, Lead, Iron) | <input type="checkbox"/> Hardness | <input type="checkbox"/> Copper |
| <input checked="" type="checkbox"/> Bacteria | <input type="checkbox"/> Arsenic | <input type="checkbox"/> VOCs |
| <input type="checkbox"/> Lead | <input type="checkbox"/> Cadmium | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Nitrate + Nitrite | <input type="checkbox"/> Gross Alpha | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Iron | | |
| <input type="checkbox"/> Turbidity | | |

List rush samples below
Refer to table for rush turnaround times and fees

Release Signatures

Released By: Michael Ison Date/Time: 8/18/23 2:20

Released By: _____ Date/Time: _____

Released By: _____ Date/Time: _____

Received in lab by: Lam m B Date/Time: 8/18/23 11:20 am

Sample temperature upon receipt: _____

HOME LAND LABS

1220 East Joppa Road #C505
Towson, MD 21286
Phone 443.505.8375
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State Certified Water Quality Lab 365

108 Old Solomons Island Road, Suite I2
Annapolis, MD 21401
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State Certified Water Quality Lab 106

3430 Rockefeller Court
Waldorf, MD 20602
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 139

Certificate of Analysis

Report Date: 08/21/2023

Client: Barlow Well Drilling
Property Address: 1933 Davis Branch Road
Woodstock, MD 21163
Report No: 243632
Sample Time: 08/17/2023 08:00
Date & Time Received: 08/18/2023 11:20
Sampled By: Mike Isom 1113MI
Field Preservation: Ice
Sample Point(s): Pressure tank
Water Conditioning Appears to be: None

Field Chlorine: 0.00
Field pH: Not Noted
Well Type: Drilled
Well Height: 2'
Cap Type: 2-Piece
Casing: PVC
Conduit: PVC
Clarity: Clear
Sand: None Observed
Well Tag Number: H0-95-1216

This report is the sole property of Barlow Well Drilling. Any questions about the report MUST be directed to Barlow Well Drilling at (410) 838-6910. Home Land Labs is not at liberty to discuss this report without written consent from Barlow Well Drilling.

Primary Contaminants								
Parameter	Method	Result	Pass/Fail	Units	MCL	RL	Analyst	Date of Analysis
Bacteria-Total Coliform	Colilert-18 Test	Absent	Pass	Per/100ml	Present	1	K B - 370	08/19/2023
Bacteria-E.coli	Colilert-18 Test	Absent	Pass	Per/100ml	Present	1	K B - 370	08/19/2023

Approved By: Kevin Barnaba Kevin Barnaba, Lab Director

Thomas, Susan

From: Thomas, Susan
Sent: Friday, October 4, 2019 9:42 AM
To: 'LJones@rlfeezee.com'
Cc: Wolf, Kevin; 'Theresa Miller'
Subject: Myrtue Property Lots positive for Radium and those needing Radium testing
Attachments: MyrtuePropertyLot28PositiveRadiumLetter.pdf;
MyrtuePropertyLot14PositiveRadiumLetter.pdf;
MyrtuePropertyLot5PositiveRadiumLetter.pdf;
MyrtuePropertyLot3PositiveRadiumLetter.pdf

Dear Rick Cross,

There were four Myrtue Properties that exceeded the Maximum Contaminant Level (MCL) for Gross Alpha: Lot 3, Lot 5, Lot 14 and Lot 28. Because the Gross Alpha finding for these wells exceeds the MCL, additional testing for Gross Alpha, Gross Beta and Radium will be necessary prior to occupancy to verify existing levels. The owners will be required to sign an "Agreement for approval of an individual drinking well with an on-site treatment system" as part of the Use and Occupancy process. Please see the attached letters.

Additionally, there are no radium testing results for Lots P.P.A., 6, 7, 9, 10 and 20. These lots need Gross Alpha, Gross Beta and Radium measurements. Usually, we like to take the sample after at least a 1 hour purge of the well. If the results are below the MCL, no further testing is needed. If the results come back elevated, additional testing is required, the owners must sign an agreement, and Reverse Osmosis/Water softener POU treatment is needed (as described above).

Because the additional testing can take 2-3 weeks, it is advisable to take these measurements early. It may be a good idea to contact the well driller and ask them to coordinate with us for the testing. We cannot issue the U and O until we have the results of the tests.

Thank you,

Susan

Susan M. Thomas
Environmental Health Specialist
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Bureau of Environmental Health
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