

C1 63447 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

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

ST/CO USE ONLY DATE RECEIVED MM 01 DD 19 21

DATE WELL COMPLETED 10-14-20 Approved Depth of Well 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-18-0181

OWNER: Toll Brothers; WELL SITE ADDRESS: Pudding Lane; TOWN: Ellicott City; SUBDIVISION: Loop Forest; SECTION: ; LOT: 4

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 (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes entries for Sand, Soft grey, Grey schist, Fracture, and Grey limestone.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES (Y) NO (N)

- CIRCLE APPROPRIATE LETTER: A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED; 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 M 5 D 224

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N); TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC); NO. OF BAGS 12; NO. OF POUNDS 600; GALLONS OF WATER 300; DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 24 ft.

CASING RECORD

MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch) 06 Total depth of main casing (nearest foot) 66

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

SCREEN RECORD screen type or open hole (insert appropriate code below) ST STEEL BR BRASS PL PLASTIC HO HOLE OT OTHER

DEPTH (nearest ft.)

Table with columns: T, A, C, H, S, R, E, N and rows for casing depth intervals (1-21, 23-36, 38-51) 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) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 6; PUMPING RATE (gal. per min.) 3; METHOD USED TO MEASURE PUMPING RATE 1 gal; WATER LEVEL (distance from land surface) BEFORE PUMPING 32 ft. WHEN PUMPING 120 ft.; TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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 36; PUMP HORSE POWER 37 41; PUMP COLUMN LENGTH (nearest ft.) 43 47; CASING HEIGHT (circle appropriate box and enter casing height) (+) above LAND SURFACE (-) below 2 (nearest foot)

LATITUDE 39.260053 LONGITUDE 76.883759 (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. 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.

B 1 SEQUENCE NO. (MDE USE ONLY) 66410 STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 51do428-C STATE PERMIT NUMBER HO-18-0181
 please type 70 fill in this form completely 79

OWNER INFORMATION
 Date Received (APA) 11/11/19
 8 MM DD YY 13
 15 Last Name Toll Brothers Owner First Name
 36 Street or RFD 7164 Columbia Gateway Dr 55
 57 Town Columbia Md 21046 70 State 72 Zip 76

B 3 LOCATION OF WELL
 8 COUNTY Howard 21
 23 SUBDIVISION Kings Forest 42
 SECTION 44 46 LOT 4 48 50
 52 NEAREST TOWN Elliott City 71

DRILLER INFORMATION
 76 Driller's Name Andrew Houseman M S D 2211 81 License No.
 Firm Name Goales Well Drilling LLC
 Address P.O. Box 202 Woodbine Md 21797
 Signature Andrew K Houseman Date 11-1-19

B 4 SOURCES OF DRILLING WATER
 11 Well Water 30 STREET ADDRESS
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 34 25 37 DISTANCE FROM ROAD
 ENTER FT OR MI Ft 38 39
 TAX MAP: 23 BLK: 23 PARCEL 148

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

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

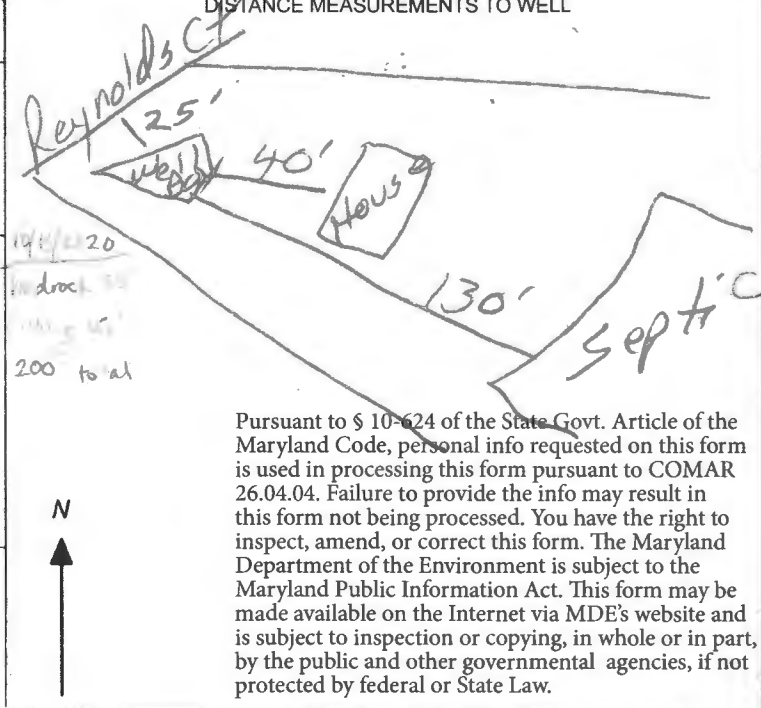
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME Howard COUNTY NO. 13
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 02/10/20 Jesse Thomas 02/10/21
 43 MM DD YY 48 CO SIGNATURE EXP. DATE

APPROXIMATE DEPTH OF WELL 300 FEET
 24 28

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

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)
 30 BORED (or Augered) AIR-ROTARY JETTED AIR-PERCussion ROTARY (Hydraulic Rotary)
 37 CABLE REVERSE-ROTARY DRIVE-POINT
 other _____



REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER H02018G004
 PERMIT No. HO-18-0181
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS RADIUM SAMPLE REQUIRED
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

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.

FOGLE'S WELL DRILLING, LLC
P.O. Box 202
Woodbine, Md 21797
443-609-4195
FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO-18-0181

Location of Property: Putding Lane Ellicott City, Md

Subdivision: Kings Forest Lot#: 4

Well Driller/Tech: Fogles Andrew Houseman MSD224 Owner/Buyer: Toll Brothers

Depth of Well: 200' Casing: 66' of 6" Steel Casing Pump Depth: 180'

Distance of measuring point (M.P.) above ground: 2'

Static water level (S.W.L.) below M.P.: 32'

High rate pumping –reservoir Drawdown

Time pump started: 8:00 Pumping rate: 10

Total time 45 Mins to reach pumping water level 119 ft. below M.P.

Recovery pump test data – observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL Below M.P.	PUMPING RATE Time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:00	32'	6 Seconds		10 gpm
8:15	87'	6 Seconds		10 gpm
8:30	120'	20 Seconds		3 gpm
8:45	119'	20 Seconds		3 gpm
9:00	118'	20 Seconds		3 gpm
9:15	116'	20 Seconds		3 gpm
9:30	115'	20 Seconds		3 gpm
9:45	114'	20 Seconds		3 gpm
10:00	113'	20 Seconds		3 gpm
10:15	113'	20 Seconds		3 gpm
10:30	112'	20 Seconds		3 gpm
10:45	111'	20 Seconds		3 gpm
11:00	110'	20 Seconds		3 gpm
11:15	110'	20 Seconds		3 gpm
11:30	109'	20 Seconds		3 gpm
11:45	109'	20 Seconds		3 gpm
12:00	108'	20 Seconds		3 gpm
12:15	108'	20 Seconds		3 gpm
12:30	108'	20 Seconds		3 gpm
12:45	107'	20 Seconds		3 gpm
1:00	107'	20 Seconds		3 gpm
1:15	106'	20 Seconds		3 gpm
1:30	106'	20 Seconds		3 gpm
1:45	106'	20 Seconds		3 gpm
2:00	105'	20 Seconds		3 gpm
2:15	105'	20 Seconds		3 gpm
2:30	105'	20 Seconds		3 gpm



King's Forest
Approved by *ST* 2/11/2020
Staked by *Benchmark*

LOT 5

WELL
BOX MARK

TO REYNOLDS CT.

WELL
BOX

LOT 4

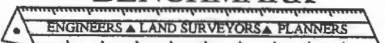
LOT 3

SLOPES
25%+
46 SF

PARCEL 'A'

SLOPES
20%+
13754 SF

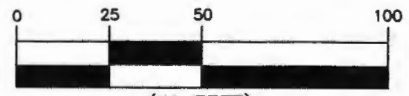
BENCHMARK



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE & SUITE 315 A ELICOTT CITY, MARYLAND 21043
(P) 410-485-6105 (F) 410-485-6644

WWW.BE-CIVILENGINEERING.COM



(IN FEET)
1 inch = 50 ft.



KINGS FOREST
WELL EXHIBIT

LOT 4

DATE: OCTOBER, 2019

SCALE: 1" = 50'

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – NOVEMBER 16, 2024

May 16, 2024

Homeowner
10638 Reynolds Court
Ellicott City, MD 21042

RE: Kingsley Woods, Lot 4
10638 Reynolds Court
Building Permit: B23002692
Well Permit: HO-18-0181

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 **5/4/2024**. Final approval of the well line connection to the dwelling was granted on **1/3/2024**. The well construction was completed on **10/14/2020**. Water samples were collected on **4/4/2024, 4/18/2024**.

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 **10/14/2020**. Results showed a Gross Alpha level of **2.0 ± 0.0 pCi/L** and **Gross Beta** level of **4.7 ± 1.9 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-18-0181. 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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 165511 Account #: 1933
Reference: Kingsley Woods Lot 4 Client: Fogle's Well Pump & Treatment
Location: 10638 Reynolds Court Requested By: Dave Fogle
Ellicott City, MD 21042 Source: Well Water
Date/ Time Collected: 4/4/2024 1400 Site: Pressure Tank
Date/Time Rec'd: 4/4/2024 1500 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.8
Collected By: J. Evans 0309JE Well #: HO-18-0181

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/5/2024 / 1000 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/5/2024 / 1000 / KDR
Nitrate.	3.03	mg/L (as N)	10	EPA 300.0	4/4/2024 / 1947 / CS/KR
Turbidity	2.17	NTU	<10	SM2130B	4/4/2024 / 1520 / CJM
Sand	>5	mg/L	5	Visual/Gravimetric	4/5/2024 / 0845 / KDR
Iron	0.25	mg/L	0.3*	Hach 8146	4/4/2024 / 1510 / CS/KR

NOTES:

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

Reason for Test : Use & Occupancy
Building Permit # : 23002642

Date Reported: 4/5/2024

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:	165774	Account #:	1933
Reference:	Kingsley Woods Lot 4	Client:	Fogle's Well Pump & Treatment
Location:	10638 Reynolds Court Ellicott City, MD 21042	Requested By:	Dave Fogle
Date/ Time Collected:	4/18/2024 0800	Source:	Well Water
Date/Time Rec'd:	4/18/2024 1240	Site:	Kitchen Sink Tap
Chlorine ppm:	Free: ND Total: ND	Treatment:	None
Collected By:	J. Evans 0309JE	pH:	5.6
		Well #:	HO-18-0181

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sand	ND	mg/L	5	Visual/Gravimetric	4/19/2024 / 0930 / KDR

NOTES:

- 1 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 2 ND:None Detected
- 3 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 4 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : 23002692

Date Reported: 4/19/2024



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

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: Kingsley Woods Lot #: 4 Well Tag #: HO-18-0181 ✓
 Site Address: 10638 Reynolds Ct
Ellicott City, MD 21042

Submersible Pump Data

Make: GCU/DS
 Model #: 7HS05422
 Pump Capacity: 3
 Well Yield: 3

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: 200 (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

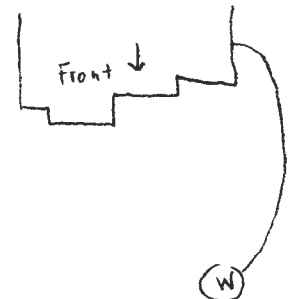
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] Date: 12/27/2023

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

Date Insp. Requested: 1/3/24 Date Insp. Approved: 1/3/24 Inspector: _____
 Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade
 Two piece cap installed and attached to casing securely
 Elec. conduit extends at least 18" below grade/attached to cap properly
 Safety rope not outside of well cap/casing
 Correct well tag attached properly and casing 8" above finished grade
 Water supply line sleeved adequately at house connection
 Adequate grout observed below pitless adapter

- | |
|----|
| RR |
| ✓ |
| ✓ |
| ✓ |
| ✓ |
| ✓ |
| ✓ |
| ✓ |



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

November 24, 2020

Toll Brothers
7164 Columbia Gateway Drive
Columbia, Maryland 21045

RE: Kings Forest Lot 4
Pudding Lane
Well Tag: HO – 18 – 0181

To Who it May Concern:

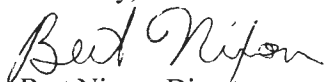
A sample was collected during a yield test on October 14, 2020 and submitted to the Maryland Department of Health Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of $< 2.0 \pm 0.0$ picocuries/liter (pCi/L), while the **Gross Beta** level was 4.7 ± 1.9 pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of **15 pCi/L**, while the **Gross Beta** level was below its targeted standard of **50 pCi/L** (roughly equivalent to the **annual dose rate** of **4 millirems/year**).

At the time of testing and with respect to these parameters, the well water supply **meets** EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. Please **note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be needed to help secure Use & Occupancy.

A copy of the test results is enclosed for your information. Please call this office at **410-313-1773** if you have any further questions.

Sincerely,



Bert Nixon, Director
Bureau of Environmental Health

Enclosure

✓ cc: Property file
Theresa Miller, Fogles

SEND REPORT TO: Bert Nixon
Howard County Health Department
Bureau of Environmental Health
 8930 Stanford Blvd.
 Columbia, Maryland 21045

State of Maryland
 DHMH - Laboratories Administration
 Division of Environmental Sciences
RADIATION LABORATORY
 1770 Ashland Avenue
 Baltimore, Maryland 21205

Lab No. _____

LABORATORY ANALYSIS REQUEST FORM

Plant/Site Name: Kings Forest, Lot 4 County: Howard
 Sample Source: King's Forest, Lot 4 Location: HO-18-0181
(Well no., lab sink, sample tap, etc.)
 Radon-222 Bottle A HOSTOICRA Radon-222 Field Blank Bottle A _____
 Bottle B _____ Bottle B _____
 County 13 Plant No. _____

CHECK (one per Box)

Type	Service	Point of Collection	Testing
Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (Raw) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-Community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input checked="" type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Submitters Code: 4 F Federal Project: _____
 Collector: Susan Thomas Telephone No.: 410-313-6287
 Date Collected: 10/14/2020 Time Collected: _____ a.m. 12:30 p.m.
 Field pH: 6.6 Field Chlorine: NEG
 Nitric Acid Preserved: Yes No Iced: Yes No
 Remarks: collected at end of yield

TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/> Gross Alpha	4000	798	EL1901A	28 ± 1.8	10/14/20	JW	11/9/20
<input checked="" type="checkbox"/> Gross Beta	4100	798	EL1901A	43 ± 1.9	10/14/20	JW	11/17/20
<input type="checkbox"/> Radium-226	4020						
<input type="checkbox"/> Radium-228	4030						
<input type="checkbox"/> Total Uranium	4006						
<input type="checkbox"/> Radon-222 (Bottle A)	4004						
<input type="checkbox"/> Radon-222 (Bottle B)	4004						
<input type="checkbox"/> Radon Field Blank A	4004						
<input type="checkbox"/> Radon Field Blank B	4004						
<input type="checkbox"/> Tritium							
<input type="checkbox"/>							
<input type="checkbox"/>							

Date Received: 10 15 - 2020 Received By: _____
 Data Release Signature: [Signature] Date: 10/19/20

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?			
Sample pH <2.0?			
Received within holding time?			

•Tel. No.: (443) 681-3766 •Fax No.: (443) 681-4507

FORM REVISED 05/15
 DHMH 4540 05/17

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

MEMORANDUM

TO: Fogle's Well Drilling
580 Obrecht Road
Sykesville, MD 21784

FROM: Susan Thomas
Environmental Health Specialist (S) 12/27/19
Howard County Health Department
Well & Septic Program

RE: Kings Forest Subdivision – Well Permits Lots 1-36 and Parcel D
Special Conditions for wells

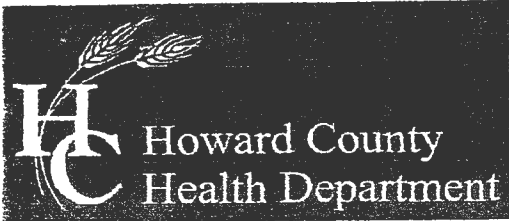
DATE: December 26th, 2019

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

- A. Lots 17, 26, 27, and 33-35 will require 50' of Steel Casing or 10' into competent bedrock, whichever is deeper.**

10. A waiver for the location of the septic systems and wells, as shown on [Revised Percolation Certification Signed 11/12/2019] has been approved by MDE. As a condition of the approved [sic] of this waiver the initial and all replacement wells on lots 17, 26, 27, and 33 – 35 will require Steel Casings to be installed to 50' or 10' into competent bedrock, whichever is deeper.

- B. All lots in the Kings Forest Subdivision are within the Baltimore Gneiss Formation and will require Water Quality Tests for Radium to be collected at the time of the Yield Test.**
- C. If the wells on Lot 13 or Lot 28 are within 10' of the driveway the well must be surrounded by bollards.**
- D. Lots 2, 8, 9, 13, 18, 21, 24, 26, 27, 28, 33, 34 and 35 will require samples for Sodium, Chloride and TDS to be collected at the time of the Yield Test.**



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:

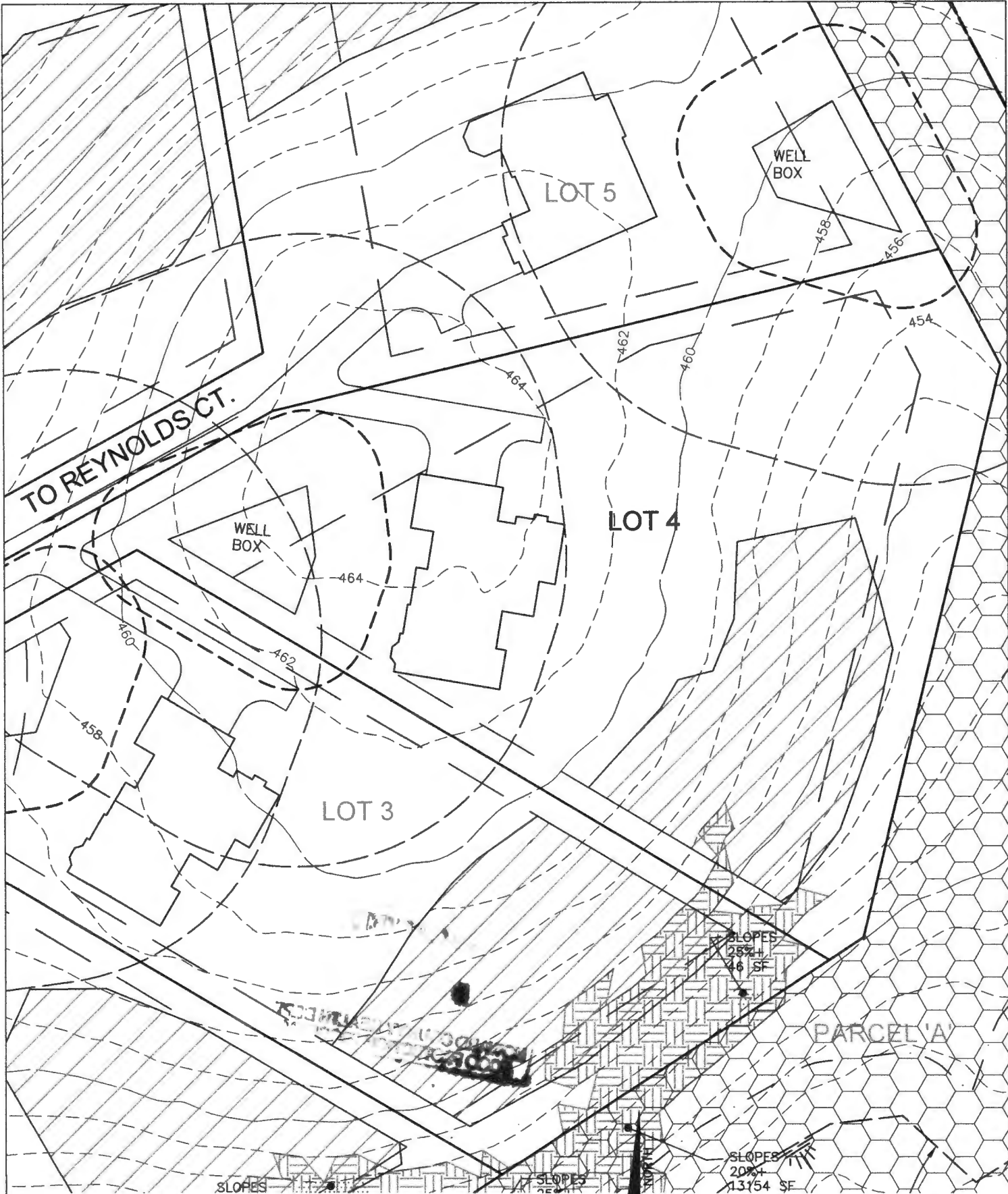
Well Site Location:

Kings Forest Lot# 1 thru
Subdivision/Property Name Lot # Reynolds Ct
Road Name

The well site has been staked by Benchmark
(professional land surveyor or company employing professional land surveyors)
on OCT 22, 2019 (date) and does not require a site inspection.

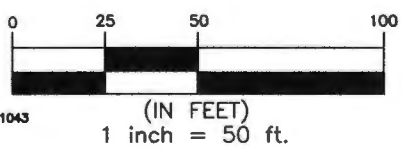
The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

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



BENCHMARK
 ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 318 ▲ ELLICOTT CITY, MARYLAND 21043
 (P) 410-485-0105 (F) 410-485-0844
 WWW.BE-CIVILENGINEERING.COM



KINGS FOREST
WELL EXHIBIT

LOT 4
 DATE: OCTOBER, 2019
 SCALE: 1" = 50'



HOWARD COUNTY HEALTH DEPARTMENT

66428

DATE 11/1/19

Received From

John Williams

PHONE #

410-241-1114

CASH

CHECK

NO. 01309

For

Bill to Mrs B K. ...
... take

\$ 534.00

Dollars

Received By

[Signature]