

SEQUENCE NO. (MDE USE ONLY) **79905** 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

ST/CO USE ONLY DATE RECEIVED **MM 02 24** DATE WELL COMPLETED **MM 7-16-24** Depth of Well **300** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-22-0137**

OWNER **Curnier Theodore** WELL SITE ADDRESS **16750 A.E. Mullinix Rd** TOWN **Woodbine** SUBDIVISION **Warfield Limited Part.** SECTION **3** LOT **3**

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Sand & Soil	0	38	
Granite	38	65	
Quartz	65	67	✓
Granite	67	160	
Sand	160	161	✓
Granite	161	300	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
TYPE OF GROUTING MATERIAL (Circle one) **CM** **BC**
CEMENT **CM** BENTONITE CLAY **BC**
NO. OF BAGS **14** NO. OF POUNDS **700**
GALLONS OF WATER **350**
DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **52** ft.

CASING RECORD
casing types insert appropriate code below **ST** **CO** **PL** **OT**
STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **54**

OTHER CASING (if used)

EACH CASING	diameter inch		depth (feet) from to	

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

NUMBER OF UNSUCCESSFUL WELLS: **0**

WELL HYDROFRACTURED **Y** **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.: **M5 D 224**
DRILLERS SIGNATURE **Theodore Curnier**
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: **D**

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

C 2 DEPTH (nearest ft.)

1	HO	54	300
2			
3			

DIAMETER OF SCREEN (NEAREST INCH) **56** **60**

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
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 **PUMPING TEST**
HOURS PUMPED (nearest hour) **6** **336**
PUMPING RATE (gal. per min.) **2.8**
METHOD USED TO MEASURE PUMPING RATE **1 gal**
WATER LEVEL (distance from land surface) BEFORE PUMPING **22.5** ft. WHEN PUMPING **250** ft.
TYPE OF PUMP USED (for test) **A** air **P** piston **T** turbine **C** centrifugal **R** rotary **O** other (describe below) **J** jet **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** **35**
PUMP HORSE POWER **37** **41**
PUMP COLUMN LENGTH (nearest ft.) **43** **47**
CASING HEIGHT (circle appropriate box and enter casing height) **+** above **2** (nearest foot) **-** below

LATITUDE **39.320309**
LONGITUDE **77.088261**
(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.

TAG: 711224

B 1 SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL** STATE PERMIT NUMBER **HO-22-0137**

1 2 3 6 please type **5/16/23** **70** fill in this form completely **79**

B 3 OWNER INFORMATION

Date Received (APA) **03-23-24**

8 MM DD YY 13

15 Last Name **Carrier Theodore** Owner First Name 34

36 Street or RFD **16750 A E Mullinix Rd** 55

57 Town **Woodbine, Md 21797** 70 State 72 Zip 76

B 3 LOCATION OF WELL

8 COUNTY **Howard** 21

23 SUBDIVISION **Warfield Limited Part.** 42

SECTION **44 46** LOT **3** 48 50

52 NEAREST TOWN **Woodbine** 71

B 4 DRILLER INFORMATION

Driller's Name **Andrew Hausman M S D 224** 76 License No. 811

Firm Name **Foales Well Drilling, LLC**

Address **P.O. Box 303 Woodbine Md 21797**

Signature **[Signature]** Date **5-15-24**

B 4 SOURCES OF DRILLING WATER

1. Well water

2. **7/12/24**

3. **7/12/24**

11 STREET ADDRESS **16750 A E Mullinix Rd** 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 **225** 37 DISTANCE FROM ROAD ENTER FT OR MI **ft** 38 39

TAX MAP: **7** BLK: **22** PARCEL **506**

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

B 2 USE FOR WATER (CIRCLE APPROPRIATE BOX)

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION **7/15/24**

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) **12' 40, 54'**

INDUSTRIAL, COMMERCIAL, DEWATERING **11,000 gals. At 500' depth.**

PUBLIC WATER SUPPLY WELL **5/1/24**

TEST, OBSERVATION, MONITORING

OPEN LOOP GEOTHERMAL

CLOSED LOOP GEOTHERMAL

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME **Howard County** COUNTY NO. **13**

STATE SIGNATURE _____ INSERT S → 41

DATE ISSUED **7/11/2024** **8/1/24** **7/11/2025**

43 MM DD YY 48 CO SIGNATURE EXP. DATE

DON: **7/12/24** DOG: **7/12/24** DAY: **7/11/24**

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

APPROXIMATE DIAMETER OF WELL **6** INCH 24 28

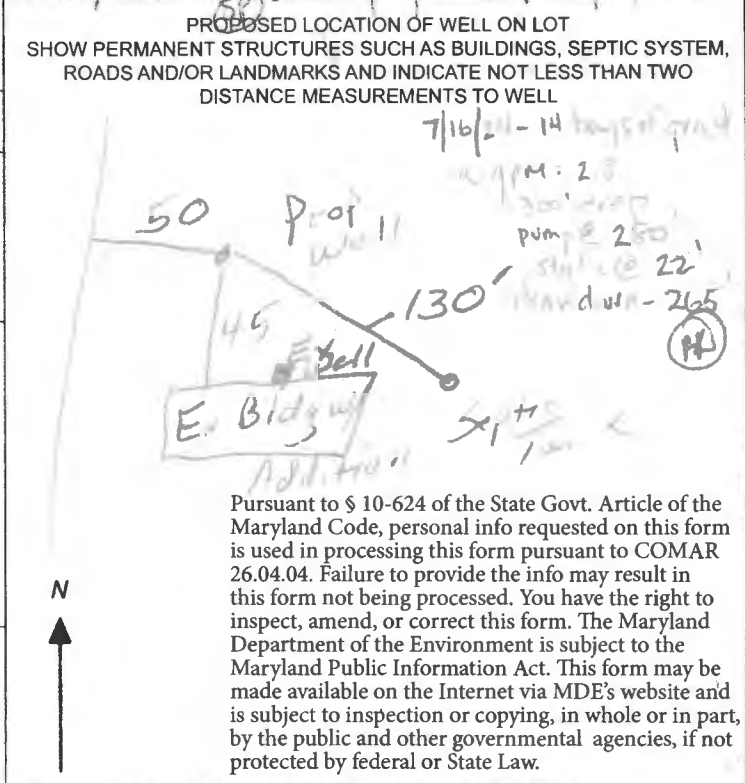
B 3 METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

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

37 CABLE REVerse-ROTary DRive-POINT

other _____



B 3 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

39 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 DEEPEAN AN EXISTING WELL

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

B 3 Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER _____ **G** _____

PERMIT No. **HO-22-0137**

70 71 72 73 74 75 76 77 78 79

B 3 SPECIAL CONDITIONS **PLEASE NOTIFY OFFICE OF DRILLING, GROUT, & YIELD**

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.

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-22-0137

Location of Property: 16750 A.E. Mullinix Rd Woodbine, Md 21797

Subdivision: Warfield Limited Part. Lot: #3

Well Driller/Tech: Fogles Andrew Houseman MSD224 Owner/Buyer: Theodore Currier

Depth of Well: 300' Casing: 54' of 6" Steel Casing

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

Static water level (S.W.L.) below M.P.: 22.5'

High rate pumping –reservoir Drawdown

Time pump started: 7:30 Pumping rate: 15

Total time 45 Mins to reach pumping water level 250' 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)
7:30	22.5'	4 Seconds		15 gpm
7:45	122'	4 Seconds		15 gpm
8:00	185'	5 Seconds		12 gpm
8:15	250'	21 Seconds		2.8 gpm
8:30	250'	21 Seconds		2.8 gpm
8:45	250'	21 Seconds		2.8 gpm
9:00	250'	21 Seconds		2.8 gpm
9:15	250'	21 Seconds		2.8 gpm
9:30	249'	21 Seconds		2.8 gpm
9:45	249'	21 Seconds		2.8 gpm
10:00	249'	21 Seconds		2.8 gpm
10:15	249'	21 Seconds		2.8 gpm
10:30	248'	21 Seconds		2.8 gpm
10:45	248'	21 Seconds		2.8 gpm
11:00	248'	21 Seconds		2.8 gpm
11:15	248'	21 Seconds		2.8 gpm
11:30	247'	21 Seconds		2.8 gpm
11:45	247'	21 Seconds		2.8 gpm
12:00	247'	21 Seconds		2.8 gpm
12:15	247'	21 Seconds		2.8 gpm
12:30	246'	21 Seconds		2.8 gpm
12:45	246'	21 Seconds		2.8 gpm
1:00	246'	21 Seconds		2.3 gpm
1:15	246'	21 Seconds		2.3 gpm
1:30	245'	21 Seconds		2.3 gpm
1:45	245'	21 Seconds		2.3 gpm
2:00	245'	21 Seconds		2.3 gpm
2:15	245'	21 Seconds		2.3 gpm

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: Reed and Son Services LLC Telephone #: 240-315-1023
 Address: 401 Center St Ste 207
mt Airy, MD 21771

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:

Name (Print): Thomas P Reed License# 19513

***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: Carrier Telephone #: 443-280-5985
 Subdivision: _____ Lot #: _____ Well Tag #: HO-22-0187
 Site Address: 10750 AE Mullinix Rd
Woodbine MD 21797

Submersible Pump Data

Make: Franklin
 Model #: 10FRD07.54-2W230
 Pump Capacity: 10
 Well Yield: _____
 Depth of well encountered at time of pump installation: _____ (feet)

Pitless Adapter

Make: Bosch +
 Model #: V-100-SS
 GPM Depth: 40 (36" min)
 GPM NSF/WSC approved: _____

Well Cap and Electric Conduit

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

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


Piping to house

Type: Plastic
 PSI: 100 (160 psi min)
 Depth of supply line: 40" (36" min)

House Connection

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

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 07-23-2024
 date

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

Date Insp. Requested: 7/23/24 Date Insp. Approved: SP/MB 7/24/24 Inspector: SP/MB
 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

(Revised form 10/24/2018)



SOILS LEGEND			
SYMBOL	NAME/DESCRIPTION	GROUP	"K" FACTOR
Brc	BRINKLOW CHANNELRY LOAM, 8 TO 15 PERCENT SLOPES	C	0.20
Co	CODORUS AND HATBORO SILT LOAMS, 0 TO 3 PERCENT SLOPES	C	0.58
GgB	GLENBLO LOAM, 3 TO 8 PERCENT SLOPES	B	0.24
GgC	GLENBLO LOAM, 8 TO 15 PERCENT SLOPES	B	0.24
GmB	GLENVILLE SILT LOAM, 3 TO 8 PERCENT SLOPES	GD	0.37
Hs	HATBORO-CODORUS SILT LOAMS, 0 TO 3 PERCENT SLOPES	BD	0.37

NOTES:
 1) SOIL INFORMATION HAS BEEN TAKEN FROM THE UNITED STATES DEPARTMENT OF AGRICULTURE, NATURAL RESOURCES CONSERVATION SERVICE, WEB SOIL SURVEY.
 2) HIGHLY ERODIBLE SOILS ARE THOSE SOILS WITH A SLOPE GREATER THAN 15 PERCENT OR THOSE SOILS WITH A SOIL ERODIBILITY FACTOR "K" GREATER THAN 0.35 AND WITH A SLOPE GREATER THAN 5 PERCENT.

GENERAL NOTES

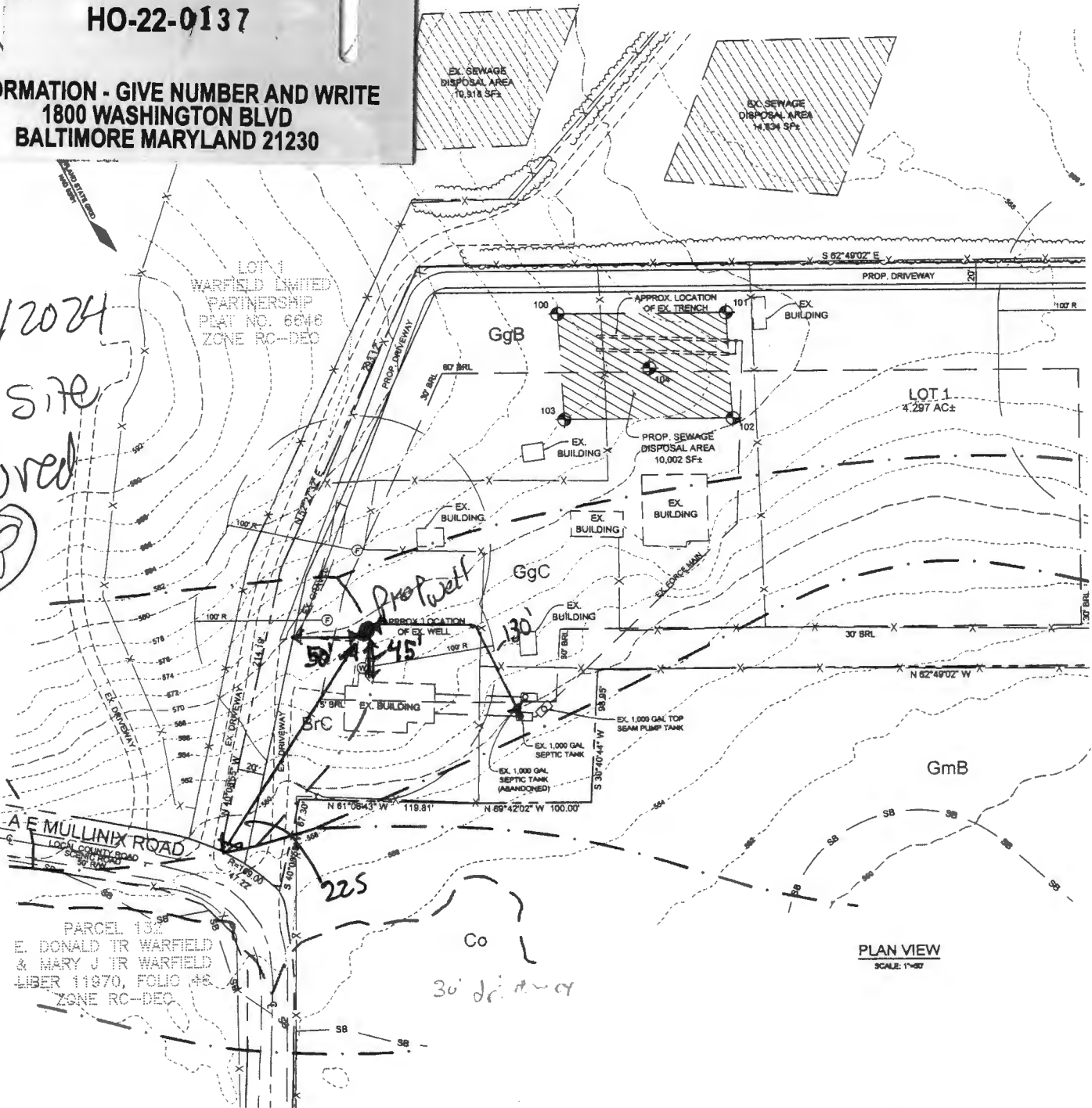
- SUBJECT PROPERTY ZONED RC-DEO PER 10-06-2013 COMPREHENSIVE ZONING PLAN.
- PROPERTY ADDRESS: 10750 A E MULLINX ROAD, WOODBINE, MARYLAND 21797
- PLAT REFERENCE: NO. 8846
- DEED REFERENCE: LIBER 1473, FOLIO 87
- PROJECT ACREAGE: PARCEL 30B: 6.967 AC.
- PRIVATE WATER AND PRIVATE SEWER WILL BE USED WITHIN THIS SITE.
- THIS AREA DEMONSTRATES A PRIVATE SEWAGE AREA OF AT LEAST 10,000 SQUARE FEET (OR 10,000 SQUARE FEET PER LOT FOR SHARED DRAIN FIELDS ASSOCIATED WITH A SHARED SEWAGE DISPOSAL FACILITY) AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL (COMAR 26.04.03). IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE AREAS SHALL BECOME HULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE AREA. RECORDATION OF A MODIFIED SEWAGE AREA SHALL NOT BE NECESSARY.
- THE BOUNDARY SHOWN HEREON IS BASED ON HOWARD COUNTY TAX MAP INFO & RECORD PLAT.
- THE EXISTING TOPOGRAPHY IS TAKEN FROM HOWARD COUNTY GIS FLOWN IN 2018.
- THE LOT SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP, WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.
- ALL EXISTING WELLS, SEPTIC SYSTEMS AND SEWAGE DISPOSAL AREA WITHIN 100 FEET OF THE PROPERTY BOUNDARIES AND ALL EXISTING AND PROPOSED WELLS THAT ARE LOCATED WITHIN 200 FEET DOWN-GRADE OF EXISTING OR PROPOSED SEPTIC SYSTEMS AND SEWAGE DISPOSAL AREA HAVE BEEN LOCATED.

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

HO-22-0137

INFORMATION - GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230

7/10/2024
 well site
 approved

PLAN VIEW
 SCALE: 1"=60'

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

MEMORANDUM

July 25, 2024

Theodore Currier

RE: **Well Sampling**
16750 A E Mullinix Rd
Woodbine MD 21797
Well Permit # HO-22-0137

Dear Theodore Currier:

According to our records, your replacement well has been connected on July 25, 2024. We request that you contact the Community Hygiene Program at (410) 313-1773 to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). This sampling includes testing for bacteria, nitrites, turbidity, and sand. There is currently **no charge** for the sampling, and it is to your benefit to have it tested.

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office. Otherwise, call Community Hygiene at (410) 313-1773 to schedule or arrange for them to collect the subsequent water samples.

Additionally, a condition of the well drilling permit was the proper abandonment and sealing of the old well. Sealing of the well protects the groundwater in your area from contamination and is required per COMAR 26.04.04. The well sealing process must be performed by a licensed well driller. The driller sends an abandonment/sealing report to our office and to the Maryland Department of the Environment upon completion.

If you have any questions or would like to discuss these matters further, please call me at (410) 313-2643. Thank you for your attention to these important matters.

Sincerely,

Matthew Burns
Environmental Health Specialist
Howard County Health Department
Well and Septic Program

Cc: Community Hygiene Program
File

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 7-31-2024 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) _____

No tag

* PERMIT NUMBER OF REPLACEMENT WELL: _____

HO-22-0137

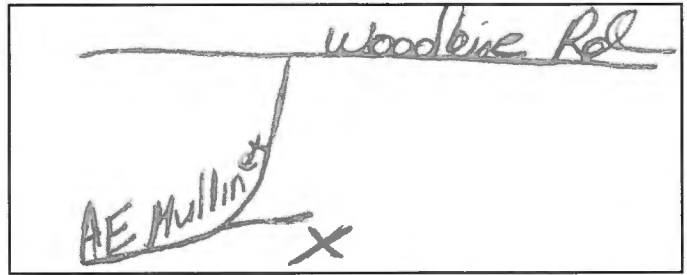
* PERSON ABANDONING WELL: Andrew Houseman WELL DRILLER'S LICENSE NUMBER: 224

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Theodore Currier

SITE LOCATION MAP

* WELL LOCATION:
COUNTY: Howard
NEAREST TOWN: Woodbine
TAX MAP 7 BLOCK 22 PARCEL 506
SUBDIVISION: Warfield Limited Part
SECTION: _____ LOT: 3
STREET ADDRESS: 16750 A.E. Mullins Rd



LATITUDE 3 9.320121

LONGITUDE 7 7.088250

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Bentonite</u>	<u>75</u>	<u>0</u>

VOLUME OF MATERIAL USED

Bentonite 900/65

* TYPE OF WELL BEING ABANDONED:
 DRILLED _____ JETTED
 BORED _____ HAND DUG
 OTHER (specify) _____

* USE CODE:
 DOMESTIC _____ MUNICIPAL/PUBLIC
 IRRIGATION _____ INDUSTRIAL
 TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:
 STEEL _____ PLASTIC
 CONCRETE _____ OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 75 FEET DEEP

WAS ANY CASING REMOVED? YES NO
If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# _____

224 MWD MSD MGS 7-31-24

CIRCLE ONE

DATE

COUNTY

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3020 VENTRIE COURT
MYERSVILLE, MD 21773



(301) 293-3340
INFO@FTLAB.COM

Certificate of Analysis

Work order: **FZA0375**

Client:
Fredericktowne Labs, Inc
3020 Ventrise Ct
Myersville, MD 21773

Project: 16750 Ae Mullinix Road
Sample 1
Sample Site: Steve Langvardt
Sample Address: 16750 Ae Mullinix Road
Woodbine, MD 21797

Received at lab: 1/20/25 14:24
Temp: 1.00 deg. C
Reported: 1/23/25 12:12

PWSID:
Treatment: No Treatment Devices
Collected by: David Hiller, ID: 2176DH
Well Tag: HO-22-0137

Pressure Tank FZA0375-01 (Drinking Water)(Grab)

Date Collected: 01/20/25 11:11

Field Results

	Result	Units
Temperature	11.6	deg. C
pH	7.09	
Res. Chlorine	<0.1	mg/L
Chlorine, Total	N/A	mg/L

Microbiology

	Result	Units	MRL	MCL	Date Prepared	Date Analyzed	Analyst	Qual	Method
Bacteria - Total Coliform	<1.0	MPN/100 mL	1.0	1	1/20/25 15:15	1/21/25 9:34	JD		SM9223-B
Bacteria - E coli	<1.0	MPN/100 mL	1.0	1	1/20/25 15:15	1/21/25 9:34	JD		SM9223-B

Bacteriological analysis of this sample indicates the water is safe for human consumption and meets federal, state and local requirements. Analysis was performed according to the 23rd edition of Standard Methods

Inorganic

	Result	Units	MRL	MCL	Date Analyzed	Analyst	Qual	Method
Nitrate	2.64	mg/L	0.20	10	1/20/25 14:59	NM		EPA 300.0
Sand	<2.00	mg/L	2.00	5	1/23/25 16:08	JD		0.065mmFilter
Turbidity	23.9	NTUs	0.10	9.99	1/20/25 15:02	NM		EPA 180.1

Notes and Definitions

Item Definition

Sara E. Randall
Sara E. Randall, President

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
Maryland Cert. No. 116 Virginia Cert. No. 00444
West Virginia Cert. 415 MDOT WBE Cert. No.: 91-158

Chain of Custody

Fredericktowne Labs, Inc
 3020 Ventrice Court
 Myersville, MD 21773
 (301) 293-3340

FZA0375

Client: Fredericktowne Labs, Inc
Project: 16750 Ae Mullinix Road
Project Manager: Mollie Howard

Sampling Site: Steve Langvardt
 16750 Ae Mullinix Road
 Woodbine, MD 21797

Sampling Date: 1/20/2025

Collected by: D Miller

FZA0375-01

Source: Pressure Tank	Date	Time	Ph	Cl	Temp
Matrix: Drinking Water Type: Grab	Sampled: 1/20/25	1111	7.09	<0.1	11.6°
	Composite Begin:				
Containers: FZA0375-01-A Plastic - 100ml Na2S2O3 Bacteria - Colilert 200 18 Hr FZA0375-01-B Plastic - 250ml unsp Nitrate Turbidity FZA0375-01-C Plastic - 1000ml unsp Sand					
Field Observations:			Treatment: None		

Work Comments:

HCHD U&O
 POC Steve Langvardt 443-280-5985
 Call prior w/ time frame
 GET WELL TAG
 HO-22-0137

Iced: Yes No Temp: 1.0°

D Miller 1/20/25 1424
 Relinquished By Date/Time

Mollie Howard 1-20-25 1424
 Received By Date

Relinquished By Date/Time

Received By Date

Relinquished By Date/Time

Received By Date