

C115532SEQUENCE 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

1236  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY  
DATE Received  
MM DD YY  
03 05 13

DATE WELL COMPLETED  
MM DD YY  
2/21/13

Depth of Well  
22 600 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
H0 - 95 - 2471

OWNER  
last name first name  
STEVENS BUILDERS

WELL SITE ADDRESS  
13510 Philadelphia Mill

TOWN  
Dayton

SUBDIVISION  
HEXACROW FARM

SECTION

LOT  
5

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	
Top Soil	0	1	
Brown Shale	1	10	
Brown Mica	10	68	
Gray Mica	68	100	
Sand Stone	100	110	
Gray Mica	110	180	
Gray Mica Flint	180	210	
Gray Mica	210	300	
Sand Stone	300	320	
Gray Mica	320	600	

GROUTING RECORD  
WELL HAS BEEN GROUTED  
(Circle Appropriate Box) YES NO  
44 44  
Y N

TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 46 28 NO. OF POUNDS 45 46 2800

GALLONS OF WATER 168

DEPTH OF GROUT SEAL (to nearest foot)  
from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface) 0 68

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

MAIN CASING TYPE  
5T 6 80  
60 61 63 64 66 70

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

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

DEPTH (nearest ft.)  
1 2 40 78 600  
E 1 8 9 11 15 17 21  
A 23 24 26 30 32 36  
C 3 38 39 41 45 47 51  
S R E E  
N SLOT SIZE 1 2 3  
DIAMETER OF SCREEN (NEAREST INCH)  
56 60  
from to

PUMPING TEST  
HOURS PUMPED (nearest hour) 3  
8 9  
PUMPING RATE (gal. per min.) 4  
11 15  
METHOD USED TO MEASURE PUMPING RATE Bucket  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING 30 ft.  
17 20  
WHEN PUMPING 243 ft.  
22 25  
TYPE OF PUMP USED (for test)  
A air P piston T turbine  
27 27 27  
C centrifugal R rotary O other (describe below)  
27 27 27  
J jet S submersible  
27 27

PUMP INSTALLED  
DRILLER INSTALLED PUMP YES NO  
(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) 31 35  
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)  
49 50 51

LATITUDE 3 9.218.865  
LONGITUDE 7 6.979.465  
(DEFAULT COORD. WGS 84)  
NOTES:

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO  
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. 1 M WD 040  
DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)  
LIC. NO. 1 JSD 038  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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 LOG OTHER DATA  
CASING INDICATOR

<b>B 1</b> <div style="border: 1px solid black; padding: 2px; font-size: 1.2em;">15007</div>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> <div style="font-size: 1.5em; font-weight: bold;">544507-A</div> please type	STATE PERMIT NUMBER <div style="font-size: 1.2em;">140-95-2471</div> fill in this form completely
Date Received (APA) <div style="font-size: 1.2em;">01/09/13</div> <div style="display: flex; justify-content: space-between;"> <div>8 MM DD YY 13</div> <div>OWNER INFORMATION</div> </div> <div style="display: flex; justify-content: space-between;"> <div>15 Last Name <b>STEVENS</b></div> <div>Owner</div> <div>First Name <b>BUILDERS</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>36 Street or RFD <b>4714 LINTHICUM ROAD</b></div> <div>55</div> </div> <div style="display: flex; justify-content: space-between;"> <div>57 Town <b>DAYTON, MD 21036</b></div> <div>70 State</div> <div>72</div> <div>Zip <b>21036</b></div> <div>76</div> </div>		<b>B 3</b> LOCATION OF WELL CCH# <div style="display: flex; justify-content: space-between;"> <div>8 COUNTY <b>Howard</b></div> <div>21</div> </div> <div style="display: flex; justify-content: space-between;"> <div>23 SUBDIVISION <b>Hedgerow Farm</b></div> <div>42</div> </div> <div style="display: flex; justify-content: space-between;"> <div>SECTION <b>44</b></div> <div>46</div> <div>LOT <b>5</b></div> <div>48</div> <div>50</div> </div> <div style="display: flex; justify-content: space-between;"> <div>52 NEAREST TOWN <b>Dayton</b></div> <div>71</div> </div>	
<b>DRILLER INFORMATION</b> <div style="display: flex; justify-content: space-between;"> <div>Driller's Name <b>George F. Easterday</b></div> <div>M W D <b>040</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Firm Name <b>L. Franklin Easterday, Inc.</b></div> <div>76 License No. <b>81</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Address <b>9265 Brown Church Rd., Mt. Airy, Md. 21771</b></div> <div></div> </div> <div style="display: flex; justify-content: space-between;"> <div>Signature <i>George F. Easterday</i></div> <div>Date <b>1/8/2013</b></div> </div>		<b>B 4</b> SOURCES OF DRILLING WATER wells <div style="display: flex; justify-content: space-between;"> <div>11 STREET ADDRESS <b>13510 Tradelphia Mill Road</b></div> <div>30</div> </div> <div style="text-align: center;">         ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  <div style="display: flex; justify-content: center; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">N</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">W</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">E</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">S</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>34 50 37</div> <div>WEST EAST</div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div>DISTANCE FROM ROAD ENTER FT OR MI</div> <div>38 39</div> </div> <div style="display: flex; justify-content: space-between;"> <div>TAX MAP: _____</div> <div>BLK: _____</div> <div>PARCEL: _____</div> </div>	
<b>B 2</b> <b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <div style="display: flex; justify-content: space-between;"> <div>8</div> <div>12</div> </div> <div style="text-align: center; font-size: 1.2em;">500</div> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="display: flex; justify-content: space-between;"> <div>14</div> <div>20</div> </div>		<b>USE FOR WATER</b> (CIRCLE APPROPRIATE BOX) <div style="display: flex; flex-direction: column;"> <div><input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY &amp; RESIDENTIAL IRRIGATION</div> <div><input type="checkbox"/> FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION)</div> <div><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING</div> <div><input type="checkbox"/> PUBLIC WATER SUPPLY WELL</div> <div><input type="checkbox"/> TEST, OBSERVATION, MONITORING</div> <div><input type="checkbox"/> OPEN LOOP GEOTHERMAL</div> <div><input type="checkbox"/> CLOSED LOOP GEOTHERMAL</div> </div>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET <div style="display: flex; justify-content: space-between;"> <div>24</div> <div>28</div> </div> APPROXIMATE DIAMETER OF WELL <u>6</u> INCH <div style="display: flex; justify-content: space-between;"> <div>24</div> <div>28</div> </div>		<b>NOT TO BE FILLED IN BY DRILLER</b> <b>HEALTH DEPARTMENT APPROVAL</b> <div style="display: flex; justify-content: space-between;"> <div>Howard</div> <div>(13)</div> <div>A 544467</div> </div> <div style="display: flex; justify-content: space-between;"> <div>COUNTY NAME</div> <div>COUNTY NO.</div> </div> <div style="display: flex; justify-content: space-between;"> <div>STATE SIGNATURE</div> <div>INSERT S →</div> <div>41</div> </div> <div style="display: flex; justify-content: space-between;"> <div>DATE ISSUED 1/18/13</div> <div>CO SIGNATURE <i>[Signature]</i></div> <div>EXP. DATE 1/18/14</div> </div> <div style="display: flex; justify-content: space-between;"> <div>43 MM DD YY 48</div> <div>CO SIGNATURE</div> <div>EXP. DATE</div> </div>	
<b>METHOD OF DRILLING</b> (circle one) <div style="display: flex; justify-content: space-between;"> <div>BORED (or Augered) <b>AIR-ROTARY</b></div> <div>JETTED <b>AIR-PERCussion</b></div> <div>Jettied &amp; DRIVEN <b>ROTARY (Hydraulic Rotary)</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>CABLE <b>REVerse-ROTary</b></div> <div>DRive-POINT</div> </div>		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 <div style="text-align: center;"> </div>	
<b>REPLACEMENT OR DEEPEENED WELLS</b> (CIRCLE APPROPRIATE BOX) <div style="display: flex; flex-direction: column;"> <div><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL</div> <div><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</div> <div><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS</div> <div><input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL</div> </div> PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 _____ 52		<b>Not to be filled in by driller (MDE OR COUNTY USE ONLY)</b> APPROP. PERMIT NUMBER _____ <b>G</b> _____ PERMIT No. <b>140-95-2471</b> <div style="display: flex; justify-content: space-between;"> <div>70</div> <div>71</div> <div>72</div> <div>73</div> <div>74</div> <div>75</div> <div>76</div> <div>77</div> <div>78</div> <div>79</div> </div>	
<b>SPECIAL CONDITIONS</b> NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

## Review

FIELD DATA SHEET  
HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. 140-95-2471 Election District 1

Location of Property (road) 13510 TRADELPHIA MILL ROAD

Subdivision Hedgerow Farm Lot 5 Block      Plat      Sec.

Well Driller EASTERDAY Owner STEVEN BILDER

Depth of Well 1600' 5" ~~2000'~~

Distance of Measuring Point (M.P.) above ground 18"

Static Water Level (S.W.L.) below M.P. 30'

I. High Rate Pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 20 GPM

Total time 30 min to reach pumping water level 242 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes.

[illegible]

**HOWARD COUNTY HEALTH DEPARTMENT**  
**BUREAU OF ENVIRONMENTAL HEALTH**  
**WELL & SEPTIC PROGRAM**  
**TEL: (410)313-1771 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: Robert L. Feezer Co., Inc. Telephone #: 410-781-4655  
Address: 6321 Barnett Avenue  
Sykesville, MD 21784

(Must circle one) Licensed Plumber      Licensed Well Driller      Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Robert L. Feezer License# 2122

**\*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: Mr. & Mrs. Charles Whitaker Telephone #: \_\_\_\_\_  
Subdivision: Hedgerow Farm Lot #: 5 Well Tag #: HO - 95 - 2471  
Site Address: 13510 Triadelphia Mill Road  
Clarksville, MD 21029-1025

**Submersible Pump Data**

Make: Grundfos  
Model #: 10SQE15-330  
Pump Capacity 10 GPM  
Well Yield: 4 GPM

**Pitless Adapter**

Make: Boshart  
Model#: P-100-SS  
Depth: 42" (36" min)  
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  
Torque arrestors, Cable guards, or other acceptable method used- Must circle one

**Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A**

**Piping to house**

Type: Poly  
PSI: 200 (160 psi min)  
Depth of supply line: 42" (36" min)

**House Connection**

PVC sleeve to undisturbed soil at wall penetration: Yes  
Length of sleeve(5' minimum from foundation): 10'  
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.**

Robert L. Feezer

Digitally signed by Robert L. Feezer  
DN: cn=Robert L. Feezer, o=Howard County Health Department, email=rlf@hcd.net, c=US  
Date: 2013.11.20 10:00:00 -0500

November 20, 2013

Signature of company representative responsible for installation

date

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 11/20/13 Inspector: BB

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

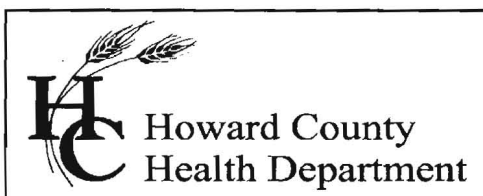
Safety rope not outside of well cap/casing

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





Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045  
Main: 410-313-1771 | Fax: 410-313-2648  
TDD 410-313-2323 | Toll Free 1-866-313-6300  
[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)  
Twitter: HowardCoHealthDep

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

**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – October 10, 2014**

April 10, 2014

Homeowner  
13510 Triadelphia Mill Road  
Clarksville, Maryland 21029

**RE: Hedgerow Farm, Lot #5  
13510 Triadelphia Mill Road  
Building Permit: B13001768  
Well Permit: HO-95-2471**

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 **03/27/2014**. Final approval of the well line connection to the dwelling was granted on **11/20/2013**. The well construction was completed on **02/21/2013**. Water samples were collected on **03/05/2014**.

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-95-2471. 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>

Approving Authority,

*Dana Bernard*

Dana Bernard  
Environmental Sanitarian  
Well & Septic Program

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

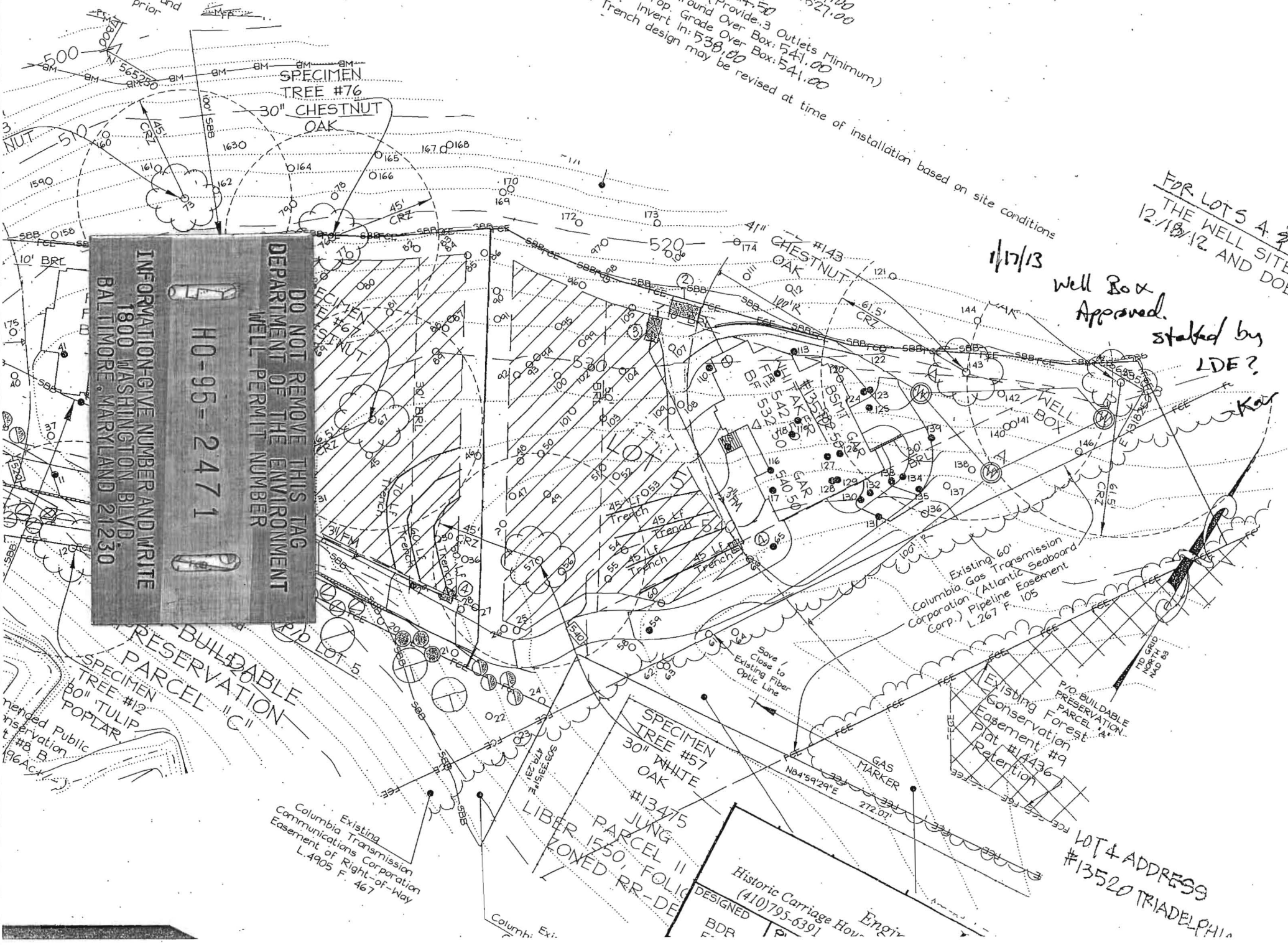
Invert Grade Over Pit: 527.00  
 Distribution Invert In: 524.00 Pit: 521.00  
 A. Ex. Ground Over Box: 541.00  
 B. Prop. Ground Over Box: 541.00  
 C. Invert In: 538.00  
 NOTE: Trench design may be revised at time of installation based on site conditions

FOR LOTS 4 & 5  
 THE WELL SITE  
 12/18/12 AND DOE

1/17/13

Well Box  
 Approved.  
 stated by  
 LDE?

DO NOT REMOVE THIS TAG  
 DEPARTMENT OF THE ENVIRONMENT  
 WELL PERMIT NUMBER  
 H0-95-2471  
 INFORMATION-GIVE NUMBER AND WRITE  
 1800 WASHINGTON BLVD.  
 BALTIMORE, MARYLAND 21230



BUILDABLE  
 RESERVATION  
 PARCEL "C"  
 SPECIMEN TREE #12  
 80" TULIP  
 POPLAR  
 Tended Public  
 Reservation  
 #8 B  
 1964

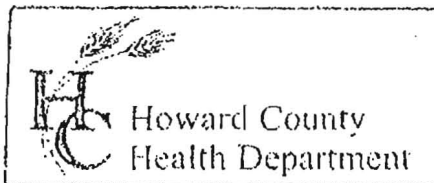
Existing  
 Columbia Transmission  
 Communications Corporation  
 Easement of Right-of-Way  
 L.4905 F. 467

SPECIMEN  
 TREE #57  
 30" WHITE  
 OAK  
 #13475  
 JUNG  
 PARCEL II  
 1550, FOLIO  
 ZONED RR-DE

Historic Carriage House  
 (410) 795-6391  
 DESIGNED  
 BDR  
 F

PRO-BUILDABLE  
 PRESERVATION  
 PARCEL "A"  
 Existing  
 Conservation  
 Easement  
 Plat #14436  
 Retention

LOT 4 ADDRESS  
 #13520 TRIADAPHA



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

Penny E. Borenstein, M.D., M.P.H., 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:

- ☒ The well site has been staked by owner / Surveyor,  
(professional land surveyor or company employing professional land surveyors)  
on 1-9-13 (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 6/10/03

13510 Triadephe Mill Road  
Stephens Builder



# Water Testing Laboratories

P.O. Box 712

Stevensville, MD 21666

410-643-7711

of Maryland, Inc.

Stevens Builders  
4714 Linthicum Road  
Dayton, MD 21036

Reporting Date: 3/20/2014  
Report #: M1485

Submitted Sample Address: 13510 Triadelphia Mill Road  
Clarksville, MD 21029  
Submitted Sample Source: Holding tank  
Date / Time Collected: 3/19/2014 08:50 AM  
Sample Type: Drinking Water  
Sampler/Company: D. Pitts 4322DP, WTL of MD  
Field Record: Chlorine residual: Absent Clear when drawn  
Well #: HO-95-2471

## Analytical Results

Parameter	Result	Units	Report Limit	MCL	Analytical Method
Total Coliforms	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
E. Coli	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B

### Notes:

1. Bacteriological analysis of this sample indicates this water is **safe** for human consumption.
2. MCL is EPA's maximum contaminant level under primary drinking water regulations. SMCL is secondary maximum contaminant level and is the aesthetic quality only. If your result is above any MCL or SMCL, you may want to consider a water treatment system or a new well. Please check your local regulations for any restrictions or additional limits.
3. ND - Not Detected.
4. Sample received and examined within EPA's recommended holding time
5. Analyzed by Lab 214.
6. SM - Greenberg, Clesceri and Eaton, *Standard Methods for the Examination of Water and Wastewater*, 21<sup>st</sup> Ed.

Reported by,

*Christen Rodgers*

Reviewed by: *SNB*

# Water Testing Laboratories

of Maryland, Inc.

P.O. Box 712  
Stevensville, MD 21666  
410-643-7711

Stevens Builders  
4714 Linthicum Road  
Dayton, Md 21036

Reporting Date: 3/7/2014  
Report #: M1460

Submitted Sample Address: 13510 Triadelphia Mill Road  
Clarksville, MD 21029  
Submitted Sample Source: Holding tank  
Date / Time Collected: 3/5/2014 8:18 AM  
Sample Type: Drinking Water  
Sampler/Company: D. Pitts 4322DP, WTL of MD  
Field Record: Chlorine residual: Absent -----  
Well #: HO-95-2471

OK DB  
4-10-14

## Analytical Results

Parameter	Result	Units	Report Limit	MCL	Analytical Method
Total Coliforms	Present	Coliforms/100 ml	Present/Absent	Present	SM 9223B
<i>E. Coli</i>	Absent	Coliforms/100 ml	Present/Absent	Present	SM 9223B
Nitrates + Nitrites	ND	mg/L	0.5	10	EPA 353.2
Sand	Absent	P/A	Present/Absent	Present	Visual
Turbidity	3.4	NTU	0.5	10	SM 2130B
pH	6.8	SU	0.1	6.5-8.5 (SMCL)	SM 4500 H <sup>+</sup> B

### Notes:

1. Bacteriological analysis of this sample indicates this water is **unsafe** for human consumption.
2. MCL is EPA's maximum contaminant level under primary drinking water regulations. SMCL is secondary maximum contaminant level and is the aesthetic quality only. If your result is above any MCL or SMCL, you may want to consider a water treatment system or a new well. Please check your local regulations for any restrictions or additional limits.
3. ND - Not Detected.
4. Sample received and examined within EPA's recommended holding time
5. Analyzed by Lab 214.
6. SM - Greenberg, Clesceri and Eaton, *Standard Methods for the Examination of Water and Wastewater*, 21<sup>st</sup> Ed.

Reported by,



C. Rodgers, Customer Service Representative

Reviewed by:

