

C1 7113 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.COUNTY  
NUMBER 13 A5189551 2 3 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received  
MM DO YY

DATE WELL COMPLETED

MM DO YY  
2 21 08

Depth of Well

22 365 26  
(TO NEAREST FOOT)PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
40-95-1534

OWNER

STREET OR RFD

SUBDIVISION Red Lion Inn Estates SECTION

TOWN

LOT

## WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR  
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use  
additional sheets if needed)

FEET

FROM

TO

check  
if water  
bearingBrown  
Shale

0 55

Gray  
Limestone

55 365

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)yes no  
Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 13 NO. OF POUNDS 1222

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
belowST  
STEELCO  
CONCRETEPL  
PLASTICOT  
OTHERMAIN  
CASING  
TYPENominal diameter  
top (main) casing  
(nearest inch)Total depth  
of main casing  
(nearest foot)

PL 60 61

06 63 64

600 66 70

## OTHER CASING (if used)

diameter

depth (feet)

inch

from to

screen type  
or open hole

## SCREEN RECORD

(insert  
appropriate  
code  
below)ST  
STEELBR  
BRASSHO  
OPEN  
HOLEPL  
BRONZEOT  
PLASTICPL  
OTHER

C 2

DEPTH (nearest ft.)

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

SLOT SIZE 1 2 3

DIAMETER  
OF SCREEN (NEAREST  
INCH)

56 60

from to

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

TELESCOPE  
CASINGLOG  
INDICATOR74 75 76  
OTHER DATA

C 3

## PUMPING TEST

HOURS PUMPED (nearest hour)

03  
8 9

PUMPING RATE (gal. per min.)

15  
11 15METHOD USED TO  
MEASURE PUMPING RATE

1966

WATER LEVEL (distance from land surface)

BEFORE PUMPING

71  
17 20 ft.

WHEN PUMPING

119  
22 25 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

LAND SURFACE

- below

01 (nearest  
foot)

## 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)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes

no

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  
WELLI 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 MSD 009

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)

No Survey states



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: TC Plumbing LLC Telephone #: 301-343-8924  
Address: 15727 Millbrook Lane  
Laurel, MD 20707

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Timothy Chabak License# 68889

\*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: Valenziano, Salvatore Telephone #: \_\_\_\_\_  
Subdivision: Red Lion Inn Estates Lot #: 116 Well Tag #: HO-95-1534 ✓  
Site Address: 14665 Red Lion Dr  
Woodbine, MD 21797

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Goulds</u>	Make: _____	Two piece watertight cap: <u>✓</u>
Model #: <u>106510422C</u>	Model#: <u>P-100-SS</u>	Screened, vented well cap: _____
Pump Capacity <u>10-25</u> GPM	Depth: <u>48"</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: _____ GPM	NSF/WSC approved: _____	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>36.5</u> (feet)		Conduit secured to well cap: <u>yes</u>
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 <u>inside of well casing</u>		

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>Black poly</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>200</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>100'</u>
Depth of supply line: <u>48"</u> (36" min)	Sleeve sealed properly: <u>yes</u>

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

date

11/16/2017

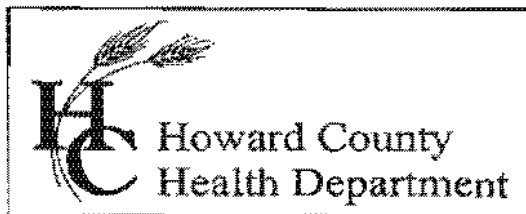
For Health Department Use Only – Not to be completed by Installer

Date Insp. Requested: 11/13/2017 Date Insp. Approved: 11/13/17 Inspector: JC  
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓ 48" \*  
Two piece cap installed and attached to casing securely ✓  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓ 32" \*  
Safety rope not outside of well cap/casing ✓  
Correct well tag attached properly and casing 8" above finished grade ✓ 9" \*  
Water supply line sleeved adequately at house connection ✓  
Adequate grout observed below pitless adapter ✓

\*11/15/2017 @  
OK to cover line  
@ house + sleeve  
around septic.  
Builder will  
send pics.

11/9/17

(SC)



## Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045

Main: 410-313-2640 | 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](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

### INTERIM CERTIFICATE OF POTABILITY

Expiration Date - JUNE 14, 2018

December 13, 2017

Homeowner

14665 Red Lion Drive

Woodbine, MD 21797

RE: Red Lion Inn Est., Lot 16  
14665 Red Lion Drive  
Building Permit: B17000709  
Well Permit: HO-95-1534

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 12/7/2017. Final approval of the well line connection to the dwelling was granted on 11/13/2017. The well construction was completed on 2/21/2008. Water samples were collected on 12/8/2017.

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-95-1534. 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>

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

Approving Authority,

A handwritten signature in black ink, appearing to read 'Kevin M. Wolf', is written over a horizontal line.

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor  
Groundwater Management Section  
Well & Septic Program

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



Howard County  
Health Department

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

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 Shaw Berger & Lane on 1-29-08 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



**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

**REPORT OF ANALYSIS**

Laboratory ID #: 118675 Account #: 6541  
Reference: John & Rosa Horst Company: Mulloy Builders  
Location: 14665 Red Lion Drive Requested By: Neil Mulloy  
Woodbine, MD 21797 Source: Well Water  
Date/ Time Collected: 12/4/2017 1230 Site: Pressure Tank ✓  
Date/Time Rec'd: 12/4/2017 1325 Treatment: None ✓  
Chlorine ppm: Free: ND Total: ND pH: 7.6  
Collected By: C. Holland 0547CH Well #: HO-95-1534 ✓

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	✓ <1.0	MPN/ 100 ml	<1.0	SM20 9223	12/5/2017 / 1015 / LLO
Bacteria, E. coli, MPN	✓ <1.0	MPN/ 100 ml	<1.0	SM20 9223	12/5/2017 / 1015 / LLO
Nitrate	✓ <0.2	mg/L	10	300.0	12/5/2017 / 1242 / SES
Turbidity	✓ 0.75	NTU	<10	SM20 2130B	12/5/2017 / 0915 / CRS
Sand	✓ NS	mg/L	5	Visual/Gravimetric	12/5/2017 / 0915 / CRS

OK  
12/8/17 SC

(KMP)

**NOTES**

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 Nitrate Analysis Subcontracted to Reference Lab #192
- 4 NS = None Seen (NS indicates less than 5 mg/L)
- 5 NTU = Nephelometric Turbidity Units
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 ND:None Detected
- 8 pH & Chlorine level tested on site
- 9 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
Building Permit # : B17000709

Date Reported: 12/6/2017



Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045

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[www.hchealth.org](http://www.hchealth.org)

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

December 28, 2017

Homeowner  
14665 Red Lion Dr.  
Woodbine, MD 21797

Dear Homeowner,

The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from your well water.

Elevated sodium levels in drinking water may affect individuals on low-salt diets. The action level for sodium is 20 milligrams per liter (mg/L); **sodium from your well measured 10.67 mg/L.**

Chloride and TDS are both considered secondary contaminants, meaning high concentrations may affect taste, color, odor, or corrosive properties of water but present no risk to health. The secondary maximum contaminant level for chloride is 250 mg/L; **chloride from your well measured 23 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 120 mg/L.**

Feel free to contact me at the number or email below with any questions regarding the results of water sampling.

Sincerely,

Sarah Collins, L.E.H.S.  
Howard County Health Department  
Well & Septic Program  
[SCollins@howardcountymd.gov](mailto:SCollins@howardcountymd.gov)  
410-313-6287

Cc: File



Send Report To: Bert Nixon

State of Maryland  
DHMH - Laboratories Administration

Division of Environmental Sciences

**TRACE METALS LABORATORY**

1770 Ashland Avenue  
Baltimore, Maryland 21205

Howard County Health Dept  
Bureau of Environmental Health  
8930 Stanford Blvd  
Columbia, MD 21045

Lab No. Date Received



**E18002207001**

Received: 12/08/2017

Metals

HO-95-1534

**LABORATORY ANALYSIS REQUEST**

Do not write above this line

Please Print

Sample ID No: HO-95-1534 Site Name: Red Lion Estates - Lot 16 County: Howard

Sample Source: 14665 Red Lion Dr Woodbine Collector: J Collins  
Street Town or City Name

Date Collected: 12/7/2017 Time Collected: 2:15 a.m./(p.m.) Phone #: 410-313-6287

Sample Preserved By: ☐ Field ☐ ESRL ☐ WMRL ☐ Central Lab

Preservative Used: ☒ HNO<sub>3</sub> \_\_\_\_\_ mL pH: <2 84 12/08/17

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid  
Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid  
Code ☐ ☐ Non-Community ☐ Sediment ☐ Other \_\_\_\_\_  
☒ Private

Specify Program: ☒ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other \_\_\_\_\_

Type of Sample Preparation: ☐ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals  
(field preparation required)

Remarks: Sample collected from base lab - no treatment.

✓	Element	Lab Use	✓	Element	Lab Use	✓	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Uranium (U)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cobalt (Co)			Zinc (Zn)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
✓	Sodium (Na)	<u>SH</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: \_\_\_\_\_

Date Reported: \_\_\_\_/\_\_\_\_/\_\_\_\_

•Phone: (443) 681 - 4596

•Fax: (443) 681 - 4507



State of Maryland  
Department of Health  
Laboratories Administration  
Division of Environmental Sciences  
TRACE METALS LABORATORY  
1770 Ashland Avenue, Baltimore, Maryland 21205  
Robert Myers, Ph.D., Director



## Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH  
8930 STANFORD BLVD  
COLUMBIA, MD 21045

Lab Project No: E18002207 Date Coll.: 12/07/2017 Date Received: 12/08/2017 Submitted By: S. Collins

Field ID: HO-95-1534  
Lab No.: E18002207001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	10.67	ppm	12/11/2017

### Comments:

Approved by:

*Yingtao Chai*

Approval date: 12/11/2017

\*\*The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6944 and arrange for return or destruction.

Send Report To: Bert NixonState of Maryland  
DHMH - Laboratories AdministrationHoward County Health Dept  
Bureau of Environmental Health  
8930 Stanford Blvd  
Columbia, MD 21045Division of Environmental Sciences  
**TRACE METALS LABORATORY**1770 Ashland Avenue  
Baltimore, Maryland 21205**LABORATORY ANALYSIS REQUEST**

Lab No. Date Received

**E18002207001**

Received: 12/08/2017

Metals HO-95-1534

Do not write above this line

Please Print

Sample ID No: HO-95-1534 Site Name: Red Lion Estates - Lot 16 County: HowardSample Source: 14665 Red Lion Dr. Woodbine Collector: S. Collins  
Street Town or City NameDate Collected: 12/7/2017 Time Collected: 2:15 a.m./p.m. Phone #: 410-313-6287Sample Preserved By: ☐ Field ☐ ESRL ☐ WMRL ☐ Central LabPreservative Used: ☒ HNO<sub>3</sub> \_\_\_\_\_ mL pH: <2 84 12/08/17  
Result Units Date AnalyzedSample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid  
Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid  
Code ☐ ☐ Non-Community ☐ Sediment ☐ Other \_\_\_\_\_  
☒ PrivateSpecify Program: ☒ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other \_\_\_\_\_Type of Sample Preparation: ☐ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals  
(field preparation required)Remarks: Sample collected from house tap - no treatment.

✓	Element	Lab Use	✓	Element	Lab Use	✓	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Uranium (U)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cobalt (Co)			Zinc (Zn)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
✓	Sodium (Na)	<u>84</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: \_\_\_\_\_

Date Reported: \_\_\_\_/\_\_\_\_/\_\_\_\_

•Phone: (443) 681 - 4596

•Fax: (443) 681 - 4507

DHMH 4432 (05/17)

SUBMITTER'S COPY



State of Maryland  
Department of Health  
Laboratories Administration  
Division of Environmental Sciences  
**TRACE METALS LABORATORY**  
1770 Ashland Avenue, Baltimore, Maryland 21205  
Robert Myers, Ph.D., Director



## Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH  
8930 STANFORD BLVD  
COLUMBIA, MD 21045

Lab Project No: E18002207 Date Coll.: 12/07/2017 Date Received: 12/08/2017 Submitted By: S. Collins

Field ID: HO-95-1534  
Lab No.: E18002207001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	10.67	ppm	12/11/2017

### Comments:

Approved by: Yingfeng Chen

Approval date: 12/11/2017

\*\*The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1.

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Send Report To: Bert Nixon

Howard County Health Dept  
Bureau of Environmental Health  
8930 Stanford Blvd  
Columbia, MD 21045

State of Maryland  
MDH-Laboratories Administration  
Division of Environmental Sciences  
**INORGANICS ANALYTICAL LABORATORY**  
1770 Ashland Avenue  
Baltimore, Maryland 21205  
**WATER ANALYSIS**



**E18002206001**

Received: 12/08/2017

Inorganic

HO-95-1534

Do not write above this line.

S A M P L E  I D	Bottle Number	110-95-1534	Name	Red Lion Estates-Lot 16	County	Howard	County Code	13
	Location	14665 Red Lion Dr.	Woodbine		Data Category		Code	4F
	Collected: Date	12/7/17	Time	2:15 pm	Collector & Phone	S. Collins 410-313-6287	Submitter Code	
	CHECK (one per box)							
	<input checked="" type="checkbox"/> Drinking Water <input type="checkbox"/> Landfill <input type="checkbox"/> Stream <input type="checkbox"/> Other	<input type="checkbox"/> Community <input type="checkbox"/> Non-community <input checked="" type="checkbox"/> Private <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Source (raw water) <input type="checkbox"/> Distribution (treated) <input type="checkbox"/> MCL	<input type="checkbox"/> Emergency <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Recheck <input type="checkbox"/> Special	Federal Project <span style="border: 1px solid black; padding: 2px;">S</span>			

FIELD	Plant No.	<div></div> <div></div> <div></div> <div></div>	Sampling Station	<div></div> <div></div> <div></div> <div></div>	Preservation: Iced <input checked="" type="checkbox"/> Acid <input type="checkbox"/>	Type of Acid	<div></div>	
	pH	<div></div> <div></div> <div></div>	Chlorine: Free	<div></div> <div></div>	Total	<div></div> <div></div>	Specific Conductance	<div></div> <div></div> <div></div> <div></div> <div></div>
	Notes to Lab/Remarks: <u>Sample collected from hose bib - no treatment.</u>							

CHECK TESTS	TESTS	Error Code	RESULTS
	Alkalinity (Total)		
✓	Ammonia - N		
	Chloride		
	Conductance*, Spec.		
✓	Dissolved Solids (Total)		
	Hardness		
	Fluoride		
	Nitrite, N		
	Nitrate - Nitrite, N		
	Sulfate		
	Total Solids		
	Turbidity*		
	<b>Other:</b>		
An			

\* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested		
---------------------------	--	--

Section Chief \_\_\_\_\_

Date Reported \_\_\_\_\_

# Yield Test Data Sheet

County File #

District 2

MD Well Permit # H0-95-1534

Date of Test: 2-21-08

Subdivision Name: Red Lion Inn Est.

Section \_\_\_\_\_ Lot # 16

Street Address: Red Lion Drive

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

Distance from MP to ground surface 1 ft.

Well Depth 365' ft.

Well Driller: Fogle's Well Drilling

Must be submitted with the State of Maryland Well Completion Report

Submit to:

Pump Start Time	Static Water level:	Pumping Rate	Calculated Flow (gallons per minute)
<u>11:00</u>	<u>71</u> ft.	( ) Time to fill <u>1</u> gal. bucket ( ) Flow meter reading (if used)	<u>15</u>
TIME	WATER LEVEL BELOW M.P.		
Water level and pumping rate must be recorded every 15 minutes			
1	<u>11:00</u>	<u>71</u> ft.	<u>4</u> <u>15</u> GPM
2	<u>11:15</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
3	<u>11:30</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
4	<u>11:45</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
5	<u>12:00</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
6	<u>12:15</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
7	<u>12:30</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
8	<u>12:45</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
9	<u>1:00</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
10	<u>1:15</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
11	<u>1:30</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
12	<u>1:45</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
13	<u>2:00</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
14	<u>2:15</u>	<u>119</u> ft.	<u>4</u> <u>15</u> GPM
15		ft.	GPM
16		ft.	GPM
17		ft.	GPM
18		ft.	GPM
19		ft.	GPM
20		ft.	GPM
21		ft.	GPM
22		ft.	GPM
23		ft.	GPM
24		ft.	GPM
25		ft.	GPM
26		ft.	GPM
27		ft.	GPM
28		ft.	GPM
29		ft.	GPM
30		ft.	GPM

NOTES: