

<b>C 1</b> "49268"		SEQUENCE NO. (MDE USE ONLY)		<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						COUNTY NUMBER	
ST/CO USE ONLY DATE Received MM 03 DD 02 YY 17		DATE WELL COMPLETED MM 02 DD 20 YY 17		Depth of Well 22 400 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" OK 4/6/17 SC HO 15-0377	
OWNER LAND Design + Development		last name		first name		TOWN	
WELL SITE ADDRESS		SUBDIVISION		SECTION		LOT	
FAIRLAW FARM						29	
<b>WELL LOG</b> Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING				<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle Appropriate Box) yes <input checked="" type="radio"/> Y no <input type="radio"/> N TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="radio"/> CM BENTONITE CLAY <input type="radio"/> BC NO. OF BAGS 20 NO. OF POUNDS 1880 GALLONS OF WATER 120 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 600 ft. (enter 0 if from surface)			
DESCRIPTION (Use additional sheets if needed)				Casing types insert appropriate code below			
FEET FROM TO				Casing types insert appropriate code below			
Soil 0 6				STEEL <input type="radio"/> ST CONCRETE <input type="radio"/> CO			
CLAY 6 15				PLASTIC <input type="radio"/> PL OTHER <input type="radio"/> OT			
Brown Shale 15 57				MAIN CASING TYPE PL			
MED GRAY Rock 57 400				Nominal diameter top (main) casing (nearest inch) 6			
340				Total depth of main casing (nearest foot) 600			
				OTHER CASING (if used)			
				diameter inch depth (feet) from to			
				EACH CASING			
				screen type or open hole			
				insert appropriate code below			
				STEEL <input type="radio"/> ST BRASS <input type="radio"/> BR OPEN HOLE <input type="radio"/> HO			
				BRONZE <input type="radio"/> PL PLASTIC <input type="radio"/> PL OTHER <input type="radio"/> OT			
NUMBER OF UNSUCCESSFUL WELLS: 0				DEPTH (nearest ft.)			
WELL HYDROFRACTURED <input checked="" type="radio"/> Y <input type="radio"/> N				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			
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				C 2			
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.				SLOT SIZE 1 2 3			
DRILLER'S LIC. NO. 1 M W 355				DIAMETER OF SCREEN (NEAREST INCH)			
DRILLER'S SIGNATURE				from to			
(MUST MATCH SIGNATURE ON APPLICATION)				GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68			
LIC. NO. 1 A W 920				MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)				T (E.R.O.S.) W Q			
				70 72 74 75 76			
				TELESCOPE CASING LOG INDICATOR OTHER DATA			
				COUNTY			

**PUMPING TEST**  
HOURS PUMPED (nearest hour) 3  
PUMPING RATE (gal. per min.) 4.29  
METHOD USED TO MEASURE PUMPING RATE Submersible  
WATER LEVEL (distance from land surface) 50 ft.  
BEFORE PUMPING 152 ft.  
WHEN PUMPING 22 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 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 49  
below 49  
LAND SURFACE 1 (nearest foot)  
LATITUDE 39.34018  
LONGITUDE 77.04246  
(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 38504

SEQUENCE NO.  
(MDE USE ONLY)STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL

557434-BB please type

H0-15-0377  
fill in this form completely

Date Received (APA)

10/30/15

## OWNER INFORMATION

8 MM DD YY 13  
 15 Last Name Owner First Name 34  
 36 Street or RFD 55  
 57 Town 70 State 72 Zip 76  
 LAND DESIGN & DEVELOPMENT  
 5300 DORSEY HALL DR, Suite 102  
 ELICOT CITY MD 21043

## DRILLER INFORMATION

DRILLER'S NAME 76 License No. 81  
 MICHAEL BARLOW M WD 355  
 FIRM NAME  
 BARLOW WELL DRILLING  
 ADDRESS  
 522 UNDERWOOD LANE 21014  
 ME 10/19/15  
 Signature Date

## B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12  
 5  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20  
 750

## USE FOR WATER (CIRCLE APPROPRIATE BOX)

- 22 ☒ 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

APPROXIMATE DEPTH OF WELL 24 28 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

## METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN  
 30 AIR-ROTARY AIR-PERCUSION ROTARY (Hydraulic Rotary)  
 37 CABLE REVERSE-ROTARY DRIVE-POINT  
 other

REPLACEMENT OR DEEPEMED WELLS  
(CIRCLE APPROPRIATE BOX)

- 39 ☒ 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 DEEPEN AN EXISTING WELL

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

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

APPROX. PERMIT NUMBER H02015G004 (01)

PERMIT No. H0-15-0377

## SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Sodium chloride + TDS samples req'd at yield

© COUNTY

B 3

## LOCATION OF WELL

8 COUNTY 21  
 HOWARD  
 23 SUBDIVISION  
 FAIRLANE FARM  
 SECTION 44 46 LOT 29 48 50  
 52 NEAREST TOWN  
 WOODBRINE

B 4

## SOURCES OF DRILLING WATER

1. WELL  
 2.  
 3.

MORGAN STATION RD  
11 STREET ADDRESS 30ON WHICH SIDE OF ROAD  
(CIRCLE APPROPRIATE BOX)

34 1000 37  
 DISTANCE FROM ROAD FT  
 ENTER FT OR MI 38 39

TAX MAP: 8 BLK: 2 PARCEL 8

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

HOWARD 13 COUNTY NO.  
 COUNTY SIGNATURE  
 STATE SIGNATURE  
 DATE ISSUED 12/7/16 43 MM DD YY 48  
 CO SIGNATURE 12/7/17 41  
 EXP. DATE

DNI DON: 1/23/17 (SC) DNI DOG: 1/25/17 (SC) DNI DOY: 2/20/17 (SC)

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

2/22

- Sodium, chloride, + TDS  
 samples rec'd from driller  
 - samples collected during  
 yield 2/20

N



40'

20'

Prop Line



**MICHAEL BARLOW WELL DRILLING & SERVICE, INC.**  
**522 Underwood Lane** **Bel Air, Maryland 21014**  
**(410) 838-6910** **Fax (410) 838-3582**

### WELL YIELD REPORT

Date Test Completed: February 20, 2017

Well Depth: 400 feet

Customer Land Design & Development  
 Road Galaxy Drive  
 City Woodbine  
 State Maryland

Permit # HO-15-0377  
 Subdivision Fairlane Farm  
 Section  
 Lot # 29

Time	Water Level feet	Time to Fill 1-gallon bucket seconds	G.P.M.
8:45 AM	50	5	12.00
9:00 AM	110	6	10.00
9:15 AM	152	14	4.29
9:30 AM	152	14	4.29
9:45 AM	152	14	4.29
10:00 AM	152	14	4.29
10:15 AM	152	14	4.29
10:30 AM	152	14	4.29
10:45 AM	152	14	4.29
11:00 AM	152	14	4.29
11:15 AM	152	14	4.29
11:30 AM	152	14	4.29
11:45 AM	152	14	4.29
12:00 PM	152	14	4.29
12:15 PM	152	14	4.29
This yield test report is for informational purposes only. Please note the yield may increase or decrease over time and the GPM indicated above is not a guarantee.			

**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: Fogles Well Pump & Water Treatment, LLC Telephone #: 410 795 5670  
Address: 580 Obrecht Rd.  
5 KESWILL, 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): David 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: NVR Inc Telephone #: \_\_\_\_\_  
Subdivision: Fairlane Farms Lot #: 29 Well Tag #: HO-15-0377 ✓  
Site Address: 15208 Torino Way  
WOODBINE, MD 21797

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Goulds</u>	Make: <u>Cumore II</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>14507422</u>	Model #: <u>NA</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>4</u> GPM	NSF/WSC approved: <u>YES</u>	Conduit min 1 1/2" B.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>400'</u> (feet)		Conduit secured to well cap: <u>YES</u>
If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.24		
Torque wrenches, 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: <u>NA</u>		

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>200</u> (150 psi min)	Length of sleeve: <u>5'</u> minimum from foundation: <u>6'</u>
Depth of supply line: <u>36"</u> (36" min)	Sleeve sealed properly: <u>YES</u>

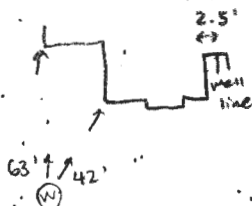
The water supply line is required to be at least two feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: David C. Fogle Date: 2/28/19

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

Date Insp. Requested: 2/20/19 Date Insp. Approved: 2/28/19 Inspector: SC

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	✓



**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – NOVEMBER 2, 2019**

May 2, 2019

Homeowner  
15208 Torino Way  
Woodbine, MD 21797

**RE: Fairlane Farm, Lot 29  
15208 Torino Way  
Building Permit: B18004107  
Well Permit: HO-15-0377**

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 **3/18/2019**. Final approval of the well line connection to the dwelling was granted on **2/28/2019**. The well construction was completed on **2/20/2017**. Water samples were collected on **4/23/2019**.

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-15-0377. 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>

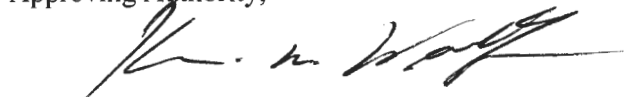


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**Maura J. Rossman, M.D., Health Officer**

In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Onsite Sewage Disposal 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,



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

**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 #:	129686	Account #:	1933
Reference:	Fairlane Farms Lot 29	Company:	Fogles Well Pump & Treatment
Location:	15208 Torino Way	Requested By:	Dave Fogle
	Woodbine, MD 21797	Source:	Well Water
Date/ Time Collected:	4/23/2019 0700	Site:	Pressure Tank
Date/Time Rec'd:	4/23/2019 1230	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	5.8
Collected By:	B. Wilkerson 9315BW	Well #:	HO-15-0377

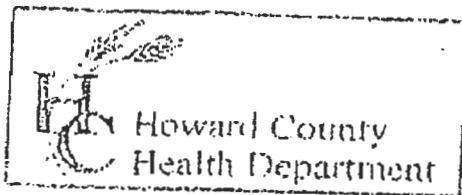
PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/24/2019 / 1000 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	4/24/2019 / 1000 / CRS
Nitrate	6.50	mg/L	10	601	4/23/2019 / 1615 / CRS
Turbidity	1.12	NTU	<10	SM20 2130B	4/23/2019 / 1620 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	4/23/2019 / 1620 / CRS

**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 NS = None Seen (NS indicates less than 5 mg/L)
- 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 Visual well check: Sealed, vented cap
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy  
Building Permit # : 18004107

Date Reported: 4/24/2019



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

TO ALL INTERESTED PARTIES

Fair Lane Farm  
Subdivision

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 Fisher Collins + Carter  
(professional land surveyor or company employing professional land surveyors)  
on 3/29/16 (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



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

H0-15-0377

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

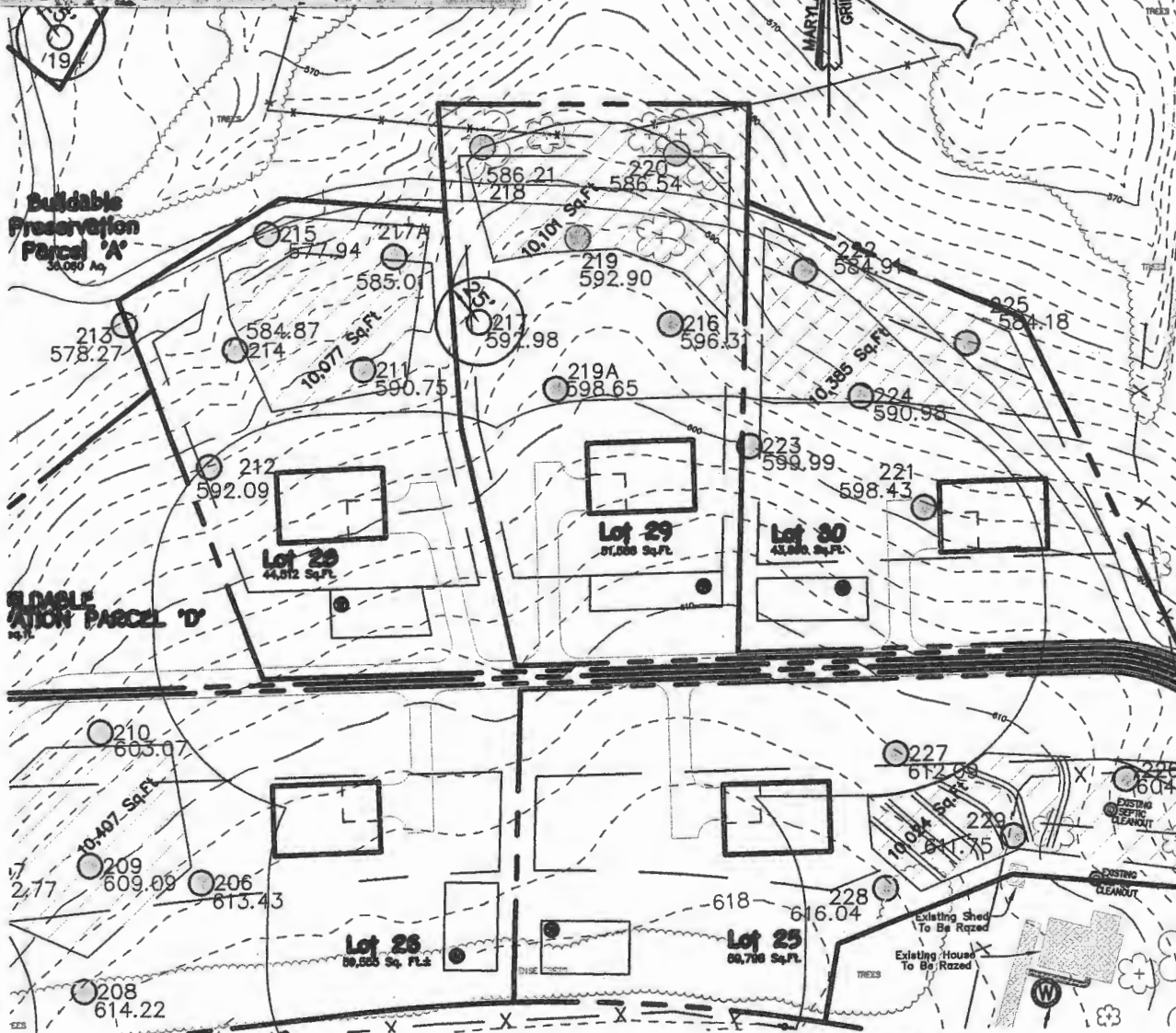
Well box approved

12/17/16 SC

Well box staked by

Fisher Collins & Carter

252:  
589.0



## WELL EXHIBIT FAIRLANE FARM

PREVIOUSLY KNOWN AS SCHULTE PROPERTY

### LOT 29

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2855

LOTS 1 THRU 44, BUILDABLE PRESERVATION PARCEL 'A'  
AND NON BUILDABLE PRESERVATION PARCEL 'B' THRU 'H'  
TAX MAP #8 PARCELS: 8 & 17 GRIDS: 2 AND 3

FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

SCALE: 1" = 100'

DATE: October 13, 2015

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

February 20, 2018

Homeowner  
15208 Torino Way  
Woodbine, MD 21797

Dear Homeowner,

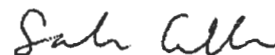
The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from the well on your property.

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 7.17 mg/L pre-treatment.**

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 15 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 93 mg/L.**

Feel free 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: Community Hygiene Program  
File*

Send Report To: Bert Nixon  
Howard Co. Health Dept.  
Bureau of Environmental Health

8930 Stanford Blvd.

Columbia, MD 21045

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**TRACE METALS LABORATORY**  
1770 Ashland Avenue  
Baltimore, Maryland 21205

## LABORATORY ANALYSIS REQUEST



E17003290001

Received: 02/23/2017

Metals

HO-15-0377

Do not write above this line

Please Print

Sample ID No: HO-15-0377 Site Name: Fairlane Farm - Lot 29 County: Howard

Sample Source: Thunderbird Drive Woodbine Collector: S. Collins  
Street Town or City Name

Date Collected: 2/20/2017 Time Collected: 12 a.m. 12 p.m. Phone #: 410-313-6207

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

Preservative Used: ☒ HNO<sub>3</sub> mL pH: 2

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid  
☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid  
Data Category ☐ Non-Community ☐ Sediment ☐ Other  
Code ☐ ☒ 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 during yield test. Sample not preserved w/ HNO<sub>3</sub> until 2/22/17.

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

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

Date Reported: 2/23/17



State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
**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: E17003290 Date Coll.: 02/20/2017 Date Received 02/23/2017 Submitted By: Collins

Field ID: HO-15-0377  
Lab No.: E17003290001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	7.17	ppm	03/06/2017

### Comments:

Approved by: Yinghao Chen

Approval date: 03/07/2017

\*\*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.

Telephone: (443) 681 - 3853

Fax: (443) 681-4507

S:\EnviroFinal-Metals.rpt

Send Report To: Bert Nixon

Howard Co. Health Dept.

Bureau of Environmental Health

8935 Stanford Blvd

Columbia, MD 21045

State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
INORGANICS ANALYTICAL LABORATORY  
1770 Ashland Ave  
Baltimore, Maryland 21205  
WATER ANALYSIS



E17003287001

Received: 02/23/2017

Inorganic

HO-15-0377

S A M P L E  I D	Bottle Number	HO-15-0377		Name	Fairlane Farm - Lot 29		County	Howard	County Code	13	
	Location	Thunderbird Drive		Woodbine		Data Category Code		4F			
	Collected: Date	2/20/17		Time	12 pm		Collector & Phone	S. Collins 410-313-6207		Submitter Code	
	CHECK (one per box)										
	Drinking Water	<input checked="" type="checkbox"/>	Community	<input type="checkbox"/>	Source (raw water)	<input checked="" type="checkbox"/>	Emergency	<input type="checkbox"/>	Federal Project		
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"/>		<input type="checkbox"/>	Special	<input type="checkbox"/>				

F I E L D	Plant No.				Sampling Station				Preservation: Iced	<input checked="" type="checkbox"/>	Acid	<input type="checkbox"/>	Type of Acid		
	pH				Chlorine: Free				Total				Specific Conductance		
	Notes to Lab/Remarks: Sample collected during yield test. Sample stored at room temp. until 2/22/17.														

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*		
	Other:		
	* Spoke w/collector 2/24/17. TDS sample not stored properly. will run sample with note stating not properly stored upon collection.		

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

Number of

Tests Requested



Section Chief

Date

Reported

DHMH 90-A 6/15

SUBMITTER'S COPY



State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
**INORGANICS ANALYTICAL 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 NoE17003287 Date Coll. 02/20/2017 Date Received 02/23/2017 Submitted By: S. Collins

Field ID: HO-15-0377  
Lab No.: E17003287001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	15	mg/L	02/28/2017
Total Dissolved Solids	SM 2540C	93	mg/L	02/24/2017

### Comments:

Approved by:

Approval date: 02/28/2017

\*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

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) 767-6190 and arrange for return or destruction.



**Collins, Sarah**

---

**From:** Mike Isom <misom@mbwd.us>  
**Sent:** Friday, December 09, 2016 11:38 AM  
**To:** Collins, Sarah  
**Subject:** Re: Fairlane lot 18

I'll make a site visit to place flags in the well boxes for max separation.

Sincerely,

Michael Isom  
Project Manager  
Michael Barlow Well Drilling Service  
Phone: (410) 838-6910  
Fax: (410) 838-3582  
522 Underwood Lane  
Bel Air, MD 21014  
[www.michaelbarlowwelldrilling.com](http://www.michaelbarlowwelldrilling.com)  
[www.thermalloopcorp.com](http://www.thermalloopcorp.com)  
[Click HERE to like us on Facebook!](#)  
On 12/9/2016 10:56 AM, Collins, Sarah wrote:

Hi Mike,

I had some time in the office this morning and I went through the rest of the Fairlane permits. Lots 25 & 26, lots 29 & 30, and lots 40 & 41 have well boxes that are close- please have the driller drill as far as possible from the neighboring lot or we may need to do simultaneous yield testing if yields are low.

Thanks,  
Sarah

---

**From:** Mike Isom [<mailto:misom@mbwd.us>]  
**Sent:** Friday, December 09, 2016 9:03 AM  
**To:** Collins, Sarah  
**Subject:** Re: Fairlane lot 18

Mail them please.

No yield testing today, but Monday for sure.

Sincerely,

Michael Isom  
Project Manager  
Michael Barlow Well Drilling Service  
Phone: (410) 838-6910  
Fax: (410) 838-3582  
522 Underwood Lane