SEQUENCE NO. THIS REPORT MUST BE SUBMITTED WITHIN STATE OF MARYLAND (MDE USE ONLY) 45 DAYS AFTER WELL IS COMPLETED. **WELL COMPLETION REPORT** COUNTY FILL IN THIS FORM COMPLETELY (THIS NUMBER IS TO BE PUNCHED NUMBER IN COLS. 3-6 ON ALL CARDS) PLEASE TYPE ST/CO LISE ONLY DATE WELL COMPLETED Depth of Well FROM "PERMIT TO DRILL WELL" DATE Received 285 -011 -14 28 29 30 31 32 33 34 35 36 37 13 (TO NEAREST FOOT) Design + Development OWNER LAND Highland Triabelonia Mill RO WELL SITE ADDRESS TOWN SUBDIVISION JACKS LANDING LOT PArceL SECTION WELL LOG **GROUTING RECORD** C 3 WELL HAS BEEN GROUTED (Circle Appropriate Box) Not required for driven wells **PUMPING TEST** STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING TYPE OF GROUTING MATERIAL (Circle one) HOURS PUMPED (nearest hour) CEMENT C.M BENTONITE CLAY | B | C FEET DESCRIPTION (Use additional sheets if needed) if water bearing FROM TO PUMPING RATE (gal. per min.) . NO. OF BAGS NO. OF POUNDS Soil 10 GALLONS OF WATER METHOD USED TO MEASURE PUMPING RATE DEPTH OF GROUT SEAL (to nearest foot) Light Brown 30 TOP 52 ft. to 54 BOTTOM 10 WATER LEVEL (distance from land surface) (enter 0 if from surface) **BEFORE PUMPING** CASING RECORD 30 Brown Shale 61 casing types CONCRETE insert WHEN PUMPING HAMD GIAN appropriate code OIT 285 101 TYPE OF PUMP USED (for test) below turbine Т Nominal diameter Total depth MĂIN 155 top (main) casing of main casing CASING other (nearest foot) PE (nearest inch)! centrifugal (describe below) 0 60 61 70 J S submersible OTHER CASING (if used) depth (feet) diameter inch from **PUMP INSTALLED** DRILLER INSTALLED PUMP NO YES Dr (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. SCREEN RECORD TYPE OF PUMP INSTALLED screen type or open hole PLACE (A,C,J,P,R,S,T,O) DACKFILLED ST BR HO IN BOX 29. insert CAPACITY appropriate HOLE BRONZE **GALLONS PER MINUTE** code OIT 31 35 (to nearest gallon) below **PUMP HORSE POWER** 37 41 2 DEPTH (nearest ft.) PUMP COLUMN LENGTH NUMBER OF UNSUCCESSFUL WELLS: (nearest ft.) 43 (circle appropriate box and enter casing height) CASING HEIGHT WELL HYDROFRACTURED 21 N + above LAND SURFACE CIRCLE APPROPRIATE LETTER 23 24 26 30 32 36 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED S (nearest) below foot) **ELECTRIC LOG OBTAINED** 50 51 39 41 46 47 51 TEST WELL CONVERTED TO PRODUCTION LATITUDE 39.2 1563 WELL SLOT SIZE 1 \_ 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 LONGITUDE 7 697 371 (NEAREST DIAMETER OF SCREEN INCH) DEFAULT COORD, WGS 84) 56 60 KNOWLEDGE. from NOTES: DRILLERS LIC, NO, M WD 355 GRAVEL PACK IF WELL DRILLED DRILLERS SIGNATURE 70" (MUST MATCH SIGNATURE ON APPLICATION) MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) WQ LIC. NO. T (E.R.O.S.) 1 Prop SITE SUPERVISOR (sign. of driller or journeyman 74 75 76 LOG TELESCOPE Le0' responsible for sitework if different from permittee) INDICATOR OTHER DATA CASING MDE/WMA/PER.071 COUNTY

PAPE CONTY OF PERMIT TO DRILL WELL  This this form completely To Drill WELL  To Date Deceased (APA)  Date Deceased (APA)  Date Deceased (APA)  Downer Information  First Name  Source Conty  Series of REP  Downer Information  MICHIGAL BRANCH MAD 11045  STO Use Permit No.  Drifted 8 have  SPECIAL ON DECEASED MAD 11045  STO Use Permit No.  Drifted 9 have  Series of REP  Drifted 1 have  SPECIAL ON DECEASED MAD 11045  SERIES TOWN  TO USE PERMIT NO.  Drifted 1 have  SUPPRINCED MAD 11045  SUPPRINCED MAD 11045	B 1 28752 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER
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NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED VDC + RSting required @ Yild @	70 71	72 73 74 75 76 77 78 79		
		· VOC testi	ng required @	Yield *

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c1 40732	SEQUENCE N (MDE USE ON		STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PU IN COLS. 3-6 ON ALL CARD			FILL IN THIS FORM COMPLETELY PLEASE TYPE	COUNTY
ST/CO USE ONLY DATE Received MAX DD YY 8 13	DATE WELL C	OMPLET )")	Depth of Well 28 SCLOTING INCOLUTE NEAREST FOOT) 25	PERMIT NO.  13/13/17  PERMIT TO DRILL WELL"  28 29 30 31 32 33 34 35 36 37
OWNER LAND WELL SITE ADDRESS SUBDIVISION		Sex		HIGHLAND PARCELA
WELL Not required for		1,	GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	Ç[3]
STATE THE KIND OF FORMAT COLOR, DEPTH, THICKNESS		EIR I	TYPE OF GROUTING MATERIAL (Circle one)	HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets it needed)	FEET I	ARIEL	NO. OF BAGS 46 21 NO. OF POUNDS 16 764	PUNIPING RATE (gal. per min.)
SOIL	0 10	1	GALLONS OF WATER 12 CONTROL OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE SUB-SUBLE
Light Brown		1	from 48 TOP 52 ft. to 54 BOTTOM 58 ft.	WATER LEVEL (distance from land surface)
Soil	10 30	-	(enter 0 if from surface)  CASING RECORD	BEFORE PUMPING LTT 20 ft.
Broun	2		types insert appropriate STEEL CONCRETE	WHEN PUMPING 198 ft.
Shale	30 61		code below PLASTIC OTHER	TYPE OF PUMP USED (for test)
HARD GRAY ROCK	رعا اعا		MAIN Nominal diameter Total depth CASING top (main) casing of main casing	A air P piston T turbine
ROCK	155 4	_	TYPE (nearest inch)! (nearest foot)  60 61 63 64 66 70	C centrifugal R rotary (describe below)
		-	60 61 63 64 66 70  E OTHER CASING (if used) diameter depth (feet)	J jet S submersible
Mc11#1-4	00, DLA		inch from to	PUMP INSTALLED
Well # 2-6	00, DE1			DRILLER INSTALLED PUMP YES NO (CIRCLE) (YES or NO)
All Dry ho	les	F	screen type SCREEN RECORD	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.  TYPE OF PUMP INSTALLED
DACKFILED	WITH DT.	11	or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.
Cutings +	Cerret		(appropriate code below BRONZE PL OT	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
			PLASTIC OTHER  DEPTH (nearest ft.)	PUMP HORSE POWER 37 41
NUMBER OF UNSUCCESSF			FD 63 285	PUMP COLUMN LENGTH (nearest ft.)
WELL HYDROFRACTURED	Ÿ (	N)	8 9 11 15 17 21	GASING HEIGHT (circle appropriate box and enter casing height)
A WELL WAS ABANDON! WHEN THIS WELL WAS	ED AND SEALED	5	23 24 28 30 32 38	LAND SURFACE (nearest)
P TEST WELL CONVERTED WELL			3 38 39 41 45 47 51	LATITUDE 39.21563
I HEREBY CERTIFY THAT THIS WEL ACCORDANCE WITH COMAR 26.04.0 IN CONFORMANCE WITH ALL CONI CAPTIONED PERMIT, AND THAT TO	L HAS BEEN CONSTRUCTION WELL CONSTRUCTION DITIONS STATED IN THE	TED IN	DIAMETER (NEAREST	LONGITUDE 76.97371
CAPTIONED PERMIT, AND THAT THEREIN IS ACCURATE AND COM- KNOWLEDGE.	THE INFORMATION PRESI IPLETE TO THE BEST O	IF MY	OF SCREEN INCH) 58 60 INCH) to	(DEFAULT COORD. WGS 84) Pursuant to 510-624 of the State Govt. Article of
DRILLERS LIC. NO.	7W355		GRAVEL PACK F WELL DRILLED	the Maryand Code personal info, requested on this form is used in processing this form pursuant to COMAR 26,04.04. Failure to provide the info.
PRILLERS SIGNATURE (MUST MATCH SIGNATURE O	N APPLICATION)	- 1	WAS FLOWING WELL NSERT F IN BOX 68 68  MDE USE ONLY	may result in this form not being processed. You have the right to inspect, amend, or correct this
LIC. NO LEY	R8109		NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made
SITE SUPERVISOR (sign. o	driller or journeyman		70 72 74 78 78	available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the pulic and other governmental
responsible for sitework if dif			TELESCOPE LOG CASING INDICATOR OTHER DATA	agencies, if not protected by federal or state law.



#### 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:		March 26, 2015
	Well Depth:	400	feet
Customer	Land Design & Development	Permit #	H0-14-0117
Road	Triadelphia Mill Rd	Subdivision	Jacks Landing
City	Highland	Section	
State	Maryland	Lot #	Parcel A

40		
	3	20.00
175	4	15.00
200	15	4.00
200	15	4.00
200	15	4.00
200	15	4.00
200	15	4.00
200	15	4.00
200	15	4.00
200	15	4.00
199	15	4.00
199	15	4.00
199	15	4.00
199	15	4.00
198	15	4.00
198	15	4.00
	note the yield may increase or deci	ease
-	175 200 200 200 200 200 200 200 200 200 20	175     4       200     15       200     15       200     15       200     15       200     15       200     15       200     15       200     15       199     15       199     15       199     15       199     15       199     15       199     15       199     15       198     15

# HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH WELL & SEPTIC PROGRAM TEL: (410)313-1771 FAX: (410)313-2648

4. 1000

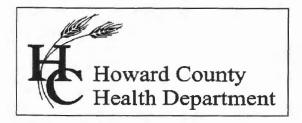
# I sett to many allatton of the Well Pump. Pittess Adapt or, and Supply Ploin

NOTE: The installer is re needing an inspection prior to 9 am on the day of the desired roved by the Health Department. All installations must comply (NSPC, as amended locally) and COMAR 26.94.94 (MD Well

Name: BACLOIA UALN DAINIT Totaphone #: 410-838-6410  Marie: BAL AR. and AR. and Archivate for the first installation:  Licensed Flumber Licensed Well Dailier  Licensed Well Pump Installation:  Licensed Well Pump Installation:  Licensed Well Pump Installation:  Licensed Installation:  Licensed Installation:  Licensed Well Tag #: HO - 1-4 - 1  A Vell Can and Electric Can Involve Adaptive Continue Secretary ventred well cap:  Archolation Daily  Licensed Installation:  Licensed Well Tag #: HO - 1-4 - 1  A Vell Can and Electric Can Involve Archive Adaptive Continue Secretary ventred well cap:  Archolation Daily  Licensed Installation:  Two piece without grade and installation:  Two piece without grade and installation:  Two piece without grade with the Balary Vell Can and Electric Can Involve Continue Secretary Vell Can Involve Continue Secretary Vell Can and Electric Can Involve Continue Secretary Vell Can Involve Continue Secretary Vell Can Involve Can Invo	<u> </u>			ev.
10	The Health Denartment Use Only—Not to be completed by Installer  sted: 10/09/0018 Date Imp. Approved: 10/09/0018 Inspector:  Pitless adapter watertight & water supply line at least 36" below grade  Two piece cap installed and strached to easing socurely  Blec. 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	To house  Do 14  PVC sloeve to undisturbed soil at wall penetration: VCS  of supply line: 42 (36" min)  Sleeve scaled property: VCS  ster supply line is required to be accomplished, contact this off  ention box, drainfields, ship savege reserve area. If this cannot be accomplished, contact this off  val prior to introducing  we of company representative responsible for installation  House Connection  PVC sleeve to undisturbed soil at wall penetration: VCS  Length of sleeve (5" minimum from foundation): 40 is  Length of sleeve to undisturbed soil at wall penetration: VCS  Sleeve scaled property: VCS  I this cannot be accomplished, contact this off  val prior to installation  date	Tolophono #: 443- 643-  Tolophono #: 461 Tag #: HO-14- 6  Tolophono #: 461 Tag #: HO-14- 6  Tolophono #: 461 Tag #: HO-14- 6  Well Tag #: HO-14- 6  Well Tag #: HO-14- 6  Well Tag #: HO-14- 6  Two piece watertight cap: 465  Screened, vented well cap: 465  GPM	SACLOW WENT OF MANY Triophone # 410 838 - 6110 522 Under Well Driller Licensed Plumber Licensed Well Driller of individual responsible for the field installation:  Licensed Plumber Dock Wall Driller in the field installation:  Licensed Well Pump Installation:  Licensed Well Pump Installer or well driller. Licenses may be subject the appropriate licensing agency.

.25.

rved below pitless adapted



#### Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

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

#### INTERIM CERTIFICATE OF POTABILITY

Expiration Date - MAY 27, 2020

November 27, 2019

James Smith 13280 Triadelphia Mill Road Clarksville, MD 21029

RE:

Jack's Landing, Parcel A 13280 Triadelphia Mill Road Building Permit: B17003342 Well Permit: HO-14-0117

#### 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 10/31/2019. Final approval of the well line connection to the dwelling was granted on 10/9/2018. The well construction was completed on 3/30/2015. Water samples were collected on 11/5/2019.

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-14-0117. 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

## ENVIRO-CHEM LABORATORIES. INC.



47 Loveton Circle, Suite K . Sparks, Maryland 21152

410-472-1112

#### FINAL REPORT OF ANALYSIS

Michael Barlow Well Drilling 522 Underwood Lane

Bel Air, MD 21014

Report Date: 11/06/2019 Report Number: 191106170124

WELL #

HO 14-0117

S Shelley #5510 SS

SAMPLER- S Shelley #5. CHLORINE- <0.05 mg/L

Use and Occupancy

PERMIT #:

LAB#- E061080-01 SAMPLE ID- 13280 Triadelphia Mill Rd

| DATE RECEIVED | Stephen Shelley | RECEIVED BY- | Ginny Shelley | Control |

COMMENTS-

COMMENTS-

		ANALYSIS			DATA
ANALYSIS	METHOD	DATE/TIME	BY	RESULT	FLAG

Microbiology by Enviro-Chem

Total Coliform	SM 9223B	11/05/19 15:00	VPS	Absent 2	PASS
E. Coli	SM 9223B	11/05/19 15:00	VPS	Absent i	PASS

Based on coliform bacteriological standards, at the time of sampling this water was SAFE for drinking water purposes.

Wet Chemistry by Enviro-Chem

Nitrate (as N)	EPA 300.0	11/05/19 22:53	SES	<	0.20	mg/L	PASS
Hq	SM4500-H+B	11/05/19 16:00	FRD		7.2	SU	
Turbidity	EPA 180.1	11/05/19 16:00	FRD		0.3	NTU	

# **ENUIRO-CHEM** LABORATORIES. INC.



47 Loveton Circle, Suite K . Sparks, Maryland 21152

410-472-1112

#### FINAL REPORT OF ANALYSIS

Michael Barlow Well Drilling 522 Underwood Lane

Bel Air, MD 21014

Report Date: 11/06/2019 Report Number: 191106170124

Use and Occupancy

PERMIT #:

LAB#- E061080-02

SAMPLE ID- 13280 Triadelphia Mill Rd

WELL #

HO 14-0117

S Shelley #5510 SS

LOCATION- Pressure Tank DATE SAMPLED-

11/05/2019

TIME SAMPLED-12:27 TIME RECEIVED- 14:25 SAMPLER-

CHLORINE-

DELIVERED BY- Stephen Shelley

DATE RECEIVED- 11/05/2019

RECEIVED BY- Ginny Shelley

COMMENTS-

COMMENTS-

ANALYSIS

METHOD

ANALYSIS

DATE/TIME

BY

RESULT

DATA FLAG

Wet Chemistry by Enviro-Chem

Sand

EPA 160.5

11/05/19 15:15

ml/L/Hr

Stephen Shelley Laboratory Director

Certifications

State of Maryland Laboratory

#192

# ENVIRO-CHEM LABORATORIES, INC.



#### 47 Loveton Circle, Suite K • Sparks, Maryland 21152

410-472-1112

#### FINAL REPORT OF ANALYSIS

Michael Barlow Well Drilling 522 Underwood Lane Bel Air, MD 21014

Report Date: 11/06/2019 Report Number: 191106170124 Use and Occupancy

PERMIT #:

LAB#- E061080-01

SAMPLE ID- 13280 Triadelphia Mill Rd

WELL # HO 14-0117

LOCATION- Basement Bathroom Sink
DATE SAMPLED- 11/05/2010

SAMPLER-

TIME SAMPLED- 12:34

S Shelley #5510 SS

DATE RECEIVED- 11/05/2019 DELIVERED BY- Stephen Shelley

TIME RECEIVED- 14:25 RECEIVED BY- Ginny Shelley

<0.05 mg/L CHLORINE-

COMMENTS-

COMMENTS-

NALVSTS	METHOD

ANALYSIS DATE/TIME BY DATA FLAG

Microbiology by Enviro-Chem

SM 9223B

11/05/19 15:00

Absent ~

PASS

Total Coliform E. Coli

SM 9223B

11/05/19 15:00

Absent /

RESULT

PASS

Based on coliform bacteriological standards, at the time of sampling this water was SAFE for drinking water purposes.

Wet Chemistry by Enviro-Chem

Nitrate (as N)

Turbidity

рΗ

EPA 300.0 SM4500-H+B

EPA 180.1

11/05/19 22:53 11/05/19 16:00

SES FRD 11/05/19 16:00 FRD

VPS

VPS

0.20 7.2 SU

NTU

0.3 /

PASS

# ENUIRO-CHEM LABORATORIES, INC.



#### 47 Loveton Circle, Suite K . Sparks, Maryland 21152

410-472-1112

#### FINAL REPORT OF ANALYSIS

Michael Barlow Well Drilling 522 Underwood Lane Bel Air, MD 21014

Report Date: 11/06/2019 Report Number: 191106170124 Use and Occupancy

PERMIT #:

LAB#- E061080-02

SAMPLE ID- 13280 Triadelphia Mill Rd

WELL # HO 14-0117 S Shelley #5510 SS

LOCATION-

Pressure Tank 11/05/2019

SAMPLER-

DATE SAMPLED-

TIME SAMPLED- 12:27 TIME RECEIVED- 14:25 CHLORINE-

COMMENTS-

DATE RECEIVED- 11/05/2019
DELIVERED BY- Stephen Shelley

RECEIVED BY- Ginny Shelley

COMMENTS-

ANALYSIS METHOD ANALYSIS

DATE/TIME

RESULT BY

DATA FLAG

Wet Chemistry by Enviro-Chem

Sand

EPA 160.5

11/05/19 15:15

Stephen Shelley Laboratory Director

ml/L/Hr

Certifications

State of Maryland Laboratory

#192

# ENVIRO-CHEM LABORATORIES. INC.



#### 47 Loveton Circle. Suite K . Sparks, Maryland 21152

410-472-1112

#### FINAL REPORT OF ANALYSIS

Michael Barlow Well Drilling 522 Underwood Lane

Bel Air, MD 21014

Report Date: 06/01/2015 Report Number: 150601105515

LAB#- E039578-03

SAMPLE ID- Parcel A

TIME SAMPLED- 12:30
TIME RECEIVED- 14:28
RECEIVED BY- Stephen Shelley

WELL # HO 14-0117 SAMPLER- M Dixon Residual Chlorine-

DATE SAMPLED- 05/21/2015
DATE RECEIVED- 05/21/2015
DELIVERED BY- M Dixon

LOCATION-

COMMENTS-

COMMENTS-

DATA ANALYSIS METHOD DATE/TIME RESULT FLAG ANALYSIS Metals by Enviro-Chem 05/29/15 09:31 7.19 mg/L EPA 200.7 CHK \*! Sodium Wet Chemistry by Enviro-Chem 05/21/15 19:29 EJF 5.5 mg/L EPA 300.0 \$ Chloride 05/22/15 13:10 SES 115 mg/L Dissolved Solids SM 2540C

Send Report To: Bert Nixon Howard Co. Env. Health 8930 Stanford Blvd. Columbia MD 21045

State of Maryland DHMH - Laboratories Administration

Division of Environmental Chemistry

#### **ENVIRONMENTAL METALS SECTION**

201 W. Preston Street, Baltimore, Maryland 21201

Lab No. Date Received

E15003326002

Received: 04/22/2015

Metals 14-0117

# LABORATORY ANALYSIS REQUEST Please Print

Sample ID No: 14-	0117 Site Name: Jac	ksLanding	-Par A County: Ho	ward
Sample Source: /39	38 Highland Rd. Street T	Clarksville own or City	21029 Collector: B.	Baker
Date Collected: 4/	16 120 15 Time Colle	cted: 11: 45 a.n	n p.m. Phone #	410)313-2643
Sample Preserved By:	Field Preservative Used: HNO <sub>3</sub>	□ ESRL pH 4-2	10 4-22-15 Ay	Central Lab
Sample Type:	<b>▶</b> Drinking Water	☐ Landfill ☐ Stream	✓ Source (Raw Water)  □ Distribution (Treated)	□ Liquid
Specify Program:	SDWA 🗆 NPDES 🗆 CWA	A □ RCRA □	Consumer Products   Otl	ner
Type of Sample Prepa	ration: Dotal Metals  Ole Collected ]	□ Total Metals  During	TCLP Dissolved Meta	ls ed)

¥.	Element	Results (ppm)	~	Element	Results (ppm)
	Antimony (Sb)			Copper (Cu)	
	Arsenic (As)			Lead (Pb)	•
	Barium (Ba)		77 145	Silver (Ag)	Manual Harman
7.	Beryllium (Be)		1 1	Zinc (Zn)	
	Cadmium (Cd)			Aluminum (Al)	
	Chromium (Cr)		1 Et. 3).	Iron (Fe)	
	Mercury (Hg)			Manganese (Mn)	
10	Nickel (Ni)			Calcium (Ca)	
1 1	Selenium (Se)			Magnesium (Mg)	
/	Sodium (Na)	6.3		Potassium (K)	Name of the last o
	Thallium (Tl)			Uranium (U)	RECEIVED

Lab Supervisor:

Sadra Mensen

Date Reported AY 2,8 2015/

• Phone: (410) 767 - 6186

• Fax: (410) 333 - 5122

HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM

DHMH 4432 (7/10)

SUBMITTER'S COPY



State of Maryland DHMH-Laboratories Administration Division of Environmental Chemistry TRACE METALS LABORATORY 201 W. Preston Street, Baltimore, Maryland 21201 Robert Myers, Ph.D., Director



#### **Certificate of Analysis**

HOWARD CO ENVIRONMENTAL HLTH 8930 STANFORD BLVD

COLUMBIA, MD 21045

Date Received 04/22/2015

Submitted By: BAKER

Field ID: 14-0117

Lab No.: E15003326002

Method

**Element** 

Result

Units

Date Analyzed

EPA 200.7

Sodium

Lab Project No: E15003326 Date Coll.: 04/16/2015

6.30

ppm

04/30/2015

Par A

RECEIVED

MAY 28 2015

HOWARD COUNTY HEALTH DEPT.

COMMUNITY HYGIENE PROGRAM

Comments:

Approved by:

Approval date: 05/12/2015

\*\*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: (410) 767 - 6944

Fax: (410) 728-7055

S:\EnviroFinal-Metals.rpt

#### Send Report To: Bert Wixon DEPARTMENT OF HEALTH AND MENTAL HYGIENE to Ward Co, Env. Health Laboratories Administration 201 W. Preston St 201 W. Preston St P.O. Box 2355, Baltimore, Maryland 21203 E15003314002 Robert A. Myers, Ph. D., Director Received: 04/22/2015 Inorganic WATER ANALYSIS 14-0117 Name Jacks Landing A Data Category M Code P Collector & B. Baker (410) 313-2643 L 6/2015 Time 11:45 AM E CHECK (one per box) Drinking Water Landfill Community Non-community Source (raw water) Distribution (treated) Emergency Routine I Stream Other Recheck D Special Project Sampling Type of F Plant No. Preservation: Iced Station Acid I Specific E L D The state of the s Error CHECK **TESTS** RESULTS TESTS Code Alkalinity (Total) Ammonia - N Chloride Conductance\*, Spec. Dissolved Solids (Total) Hardness Fluoride Nitrite, N Nitrate - Nitrite, N Sulfate **Total Solids** Turbidity\* Other: \* Results reported in Units, all others in milligrams per liter (ppm) Date Number of **Tests Requested** Section Chief\_ Reported DHMH 90-A 01/13 SUBMITTER'S COPY



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
INORGANICS ANALYTICAL LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
Robert Myers, Ph.D., Director



#### **Certificate of Analysis**

HOWARD CO ENVIRONMENTAL HLTH 8930 STANFORD BLVD COLUMBIA, MD 21045

Lab Project NoE15003314 Date Coll. 04/16/2015 Date Received 04/22/2015 Submitted By: B. Baker

Field ID: 14-0117

Lab No.: E15003314002

Analyte
Chloride

SM 4500-CI E

Result <10

Units mg/L Date Analyzed

**Total Dissolved Solids** 

SM 2540C

Method

Rejected

mg/L

04/27/2015

Par A

Comments:

Approved by:

Shakler andi

Approval date: 04/30/2015

\*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.

Telephone: (410) 767 - 6190

Fax: (410) 225 - 3175

S:\EnviroFinal-InorganicsA.rpt



#### **Bureau of Environmental Health**

7178 Columbia Gateway Drive, Columbia, MD 21046-2147
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org

Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

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

#### **MEMORANDUM**

TO:

Michael Barlow, MWD 355

**Barlow Well Drilling** 

FROM:

Ryan Rappaport, LEHS

Well & Septic Program

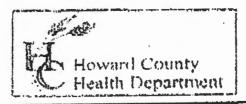
RE:

VOC Testing required of all wells at Jack's Landing Lots 1-8 & Parcel A

DATE:

October 20, 2014

As per the approved and signed Percolation Certification Plan dated February 6, 2014, general note #13: VOC Testing will be required on all wells prior to health signature of final plat. See special condition on each well permit for specific requirements.



3525 H Ellicott Mills Drive, Ellicott City, MI) 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

Barlow Well Driller

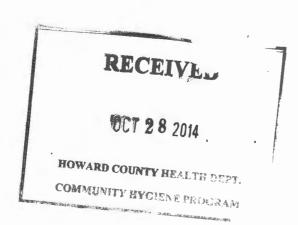
#### TO ALL INTERESTED PARTIES

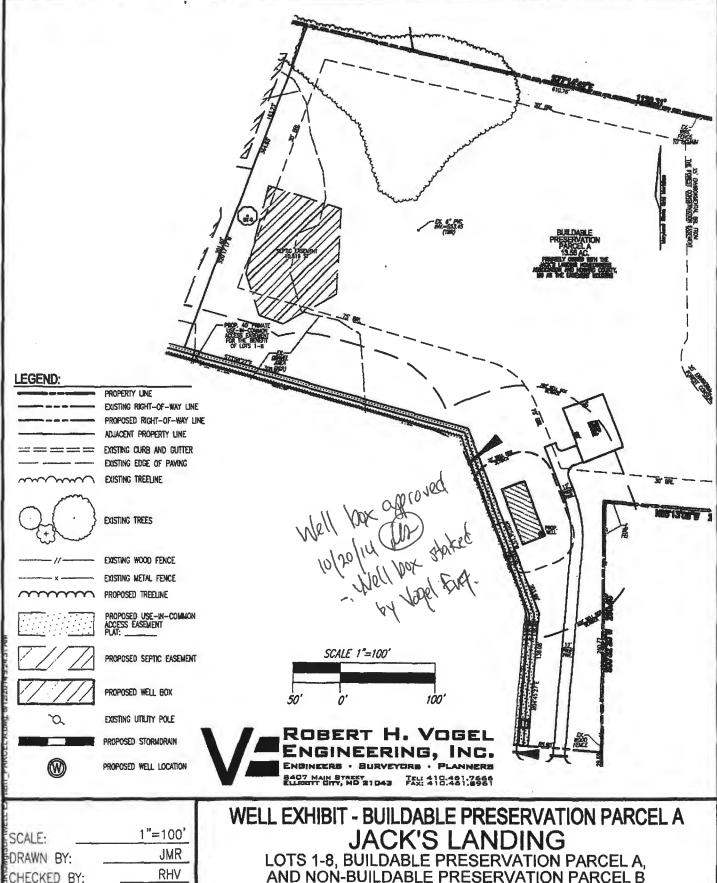
When submitting a well permit application for a proposed well for new
construction, please indicate one of the following:
JACKS LANding Lots 1-8+ PARCEL A
The well site has been staked by Robert Vogel Engineer va
(professional land surveyor or company employing professional land surveyors)
on 10 29 2014 (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





CHECKED BY: MARCH 2014 DATE: 13 - 31W. O. #: SHEET # 1 OF 1

AND NON-BUILDABLE PRESERVATION PARCEL B A SUBDIVISION OF TAX MAP 34

PARCEL 414 (L. 3172 / F. 336)

TAX MAP 34 BLOCK 03 5TH ELECTION DISTRICT

PARCEL 414 ZONED RR-DEO HOWARD COUNTY, MARYLAND

## FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
2/25/15	Site virit during drilling one well already drilled near a '323' bench-
	mark and Boutow is drilling a second. Casing already in, nitting
	water + rock. Can't get anyone to answer questions. (SC)
2/11/15	
3/4/15	be from Barlow or site to grout. He said that two wells were
	drilled ble one was a dry hole Good hole has 60' PVC casing.
	Couldn't get grouter to work during site visit. (0)
3/26/15	On site during yield test. Started primping at 10 am test start at
	10:30 am. 4 gpm, 32' static 300' m.p. Took VOC sample at 11:30 am (2)
3/31/15	Received a call from DHMH Lab. You camples can't be processed
	old samples contain sediment and would ruin machine. Contact
17	+ 410-767-6648.(SC)