0894	(MDE USE ONL)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PU IN COLS. 3-6 ON ALL CARDS	S)	FILL IN THIS FORM COMPLETELY PLEASE TYPE	NUMBER 59935
ST/CO USE ONLY DATE Received MM DD YY 8 13	DATE WELL CO	100	PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 94 - 3853 28 29 30 31 32 33 34 35 36 3
OWNER	Robert	DAG RIVERCREST POORTTOWN	glenwood
SINELI ON NID	Property /Rix		LOT 13
WELL I	LOG	GROUTING RECORD (yes no	C 3
Not required for STATE THE KIND OF FORMATK COLOR, DEPTH, THICKNESS	The second second	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST
DESCRIPTION (Use	FEET chi	CEMENT CIM BENTONITE CLAY BIC	HOURS PUMPED (nearest hour)
additional sheets if needed)	FROM TO bes	NO. OF BAGS NO. OF POUNDS	PUMPING RATE (gal. per min.) 14 28
Overburden Gray Rock	35 200 2	DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE
		from 48 TOP 52 ft. to 54 BOTTOM 58 ft.	WATER LEVEL (distance from land surface)
water at48', 62'	& 186	(enter 0 if from surface) CASING RECORD	BEFORE PUMPING 34 ft.
Harman Control		types insert appropriate STEEL CONCRETE	WHEN PUMPING 46.
		code below PL OTHER	TYPE OF PUMP USED (for test)
•		MAIN Nominal diameter Total depth	A air P piston T turbine
*		CASING top (main) casing of main casing (nearest inch)! (nearest foot)	centrifugal R rotary O other (describe below)
		60 61 63 64 66 70	J jet S sylomersible
		E OTHER CASING (if used) A diameter depth (feet)	27 22
		inch from to	DRILLER INSTALLED PUMP YES NO
2		S I N G	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
		screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED
		or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.
		(appropriate code BRONZE HOLE	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 36
		below PLASTIC OTHER	PUMP HORSE POWER
NUMBER OF UNSUCCESSFU	UL WELLS:	C 2 DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
WELL HYDROFRACTURED	yes no	E 8 9 11 15 17 21	CASING HEIGHT (circle appropriate box
	YN		and enter casing height) LAND SURFACE
A WELL WAS ABANDONE WHEN THIS WELL WAS	ED AND SEALED	23 24 26 30 32 36 S C 3	below (nearest)
E ELECTRIC LOG OBTAINE D TEST WELL CONVERTED		R 38 39 41 45 47 51	49 LOCATION OF WELL ON LOT
WELL HEREBY CERTIFY THAT THIS WELL	L HAS BEEN CONSTRUCTE	E SLOT SIZE 1 2 3 N DIAMETER (NEAREST	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR
ACCORDANCE WITH COMAR 28.04.0. IN CONFORMANCE WITH ALL COND CAPTIONED PERMIT, AND THAT TO HEREIN IS ACCURATE AND COM KNOWLEDGE.	DITIONS STATED IN THE AB	VE OF SCREEN INCH	LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIC. NO. 1 N	D 1 5 2	GRAVEL PACK IF WELL ORILLED WAS FLOWING WELL INSERT F IN BOX 68 68	1
DRILLERS SIGNATURE ON IMPORTANT MATCH SIGNATURE ON		MDE USE ONLY	30'
LIC. NO.1 A	IMD I COR	T (E.R.O.S.) W Q	l l'im' ●
SITE SUPERVISOR (sign. of		70 72 74 75 76 TELESCOPE LOG 74 75 76	100
Onside for Silework if diffe	erent from permittee)	CASING INDICATOR OTHER DATA COUNTY	1/

DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.

c 1 3884 SEQUENCE NO. (MDE USE ONLY)			STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 (THIS NUMBER IS TO BE IN COLS. 3-6 ON ALL CAP		í	FILL IN THIS FORM COMPLETELY PLEASE TYPE	COUNTY 59935
ST/CO USE ONLY DATE Received MM DO YY 13	DATE WELL	COMPL 20	Depth of Well 3// 22 300 26 (TO NEAREST POOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" - 94 - 3853 28 29 30 31 32 33 34 35 36 37
OWNER	Buice		Robert	(66)
STREET OR RFD		crest	C† first name TOWN	6 lenwood
SUBDIVISION	Rivercrest	10.5	SECTION	LOT X (Future)
	L LOG for driven wells		WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF FORM, COLOR, DEPTH, THICKNES	ATIONS PENETRATED,	THEIR	TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST 2
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
Overburden	0 30		NO. OF BAGS NO. OF POUNDS SOLUTIONS OF WATER	PUMPING RATE (gal. per min.)
Gray Rock	30 30	'. x	DEPTH OF GROUT SEAL (to nearest foot)	MEASURE PUMPING RATE SUBMETSIL
The second secon	- interest		from 48 TOP 52 ft. to 54 BOITOM 58 ft.	WATER LEVEL (distance from land surface)
water at 42',	110' & 283	1	(enter 0 if from surface) casing CASING RECORD	BEFORE PUMPING 15 ft.
			types insert appropriate STEEL CONCRETE	WHEN PUMPING 26 ft.
	1		code below PL OT	TYPE OF PUMP USED (for test)
		7	MAIN Nominal diameter Total depth	A air P piston T turbine
			CASING top (main) casing of main casing TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O (describe
	-		PE 6 137	27 below)
			60 61 63 64 66 70	J jet S submersible
	-i4		E OTHER CASING (if used) A diameter depth (feet) H inch from to	21 2
4			H inch from to	PUMP INSTALLED DRILLER INSTALLED PUMP YES NO
			S	(CIRCLE) (YES or NO)
			Ğ	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
1			screen type or open hole SCREEN RECORD	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) 29
			insert STEEL BRASS OPEN	IN BOX 29. CAPACITY:
			(appropriate code below) BRONZE BRONZE HOLE O T	GALLONS PER MINUTE (to nearest gallon) 31 36
			below PLASTIC OTHER	PUMP HORSE POWER
			C 2 DEPTH (nearest ft.)	PUMP COLUMN LENGTH
MBER OF UNSUCCESS	SFUL WELLS:	0	13H) 37 3(P)	(nearest ft.) 43 47
HYDROFRACTURE	yes Y	N	E 8 9 11 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPRO	OPRIATE LETTER		C 2 4 28 30 32 36	above LAND SURFACE
VELL WAS ABANDO		-	S C3	below (nearest)
TRIC LOG OBTAI	INED TED TO PRODUCTION	,	R 38 39 41 45 47 51	49 50 51 A LOCATION OF WELL ON LOT
1	WELL HAS BEEN CONSTR		E SLOT SIZE 1 2 3	SHOW PERMANENT STRUCTURE SUCH AS
NITH COMAR 26.0	04.04 "WELL CONSTRUCT ONDITIONS STATED IN T	HE ABOVE	DIAMETER (NEAREST OF SCREEN INCH)	BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS
CURATE AND C	T THE INFORMATION PEOMPLETE TO THE BES	T OF MY	56 60 from to	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
LIC. NO.	M W D. 1 2	0 .	GRAVEL PACK	1
hade B	Cochan	1	IF WELL DRILLED WAS FLOWING WELL	7 21
S SIGNIATURE	ON APPLICATION)	= -	INSERT F IN BOX 68 68 MDE USE ONLY	5-16-20
LIC. NO.	AW076	Le.	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	2 1 36/
L) . 0.	10			ā 1/20' - @

B 1 SC70 SEQUENCE NO: STATE OF	MARYLAND	STATE PERMIT NUMBER		
(MDF USE ONLY)	(MDE USE ONLY)			
	e type	$\frac{HO-94-3853}{^{70}}$ fill in this form completely 79		
Date Received (APA)	B 3	LOCATION OF WELL		
8 MM DD YY 13 OWNER INFORMATION	8 COUNTY	21		
Bure Robert	Bone Pront	H - Rivercrest		
15 Last Name Owner First Name 34	23 SUBDIVISION	12 (5) 42		
36 Street or RFD 55	SECTION 44 46	LOT 15 (Future)		
57 Town 70 State 72 Zip 76	52 NEAREST TOWN			
DRILLER INFORMATION	MILES FROM TOWN (ente	er 0 if in town)		
Driller's Name 7.6 License No. 81	B 4	RIVERCREST		
G Edgar Harr Sons Cop	1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30		
1 12047 FANS R& COULGISUIL 21030	N	ON WHICH SIDE OF BOAD		
Address 11/5/03	8 N _E 8-9	(CIRCLE APPROPRIATE BOX)		
Signature Date	W TOWN E	34 300 37 SOUTH		
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE		DISTANCE FROM ROAD ENTER FT OR MI 38 39		
(GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED 14 20	Sw S SE S	TAX MAP: 21 BLK: 20 PARCEL 84		
USE FOR WATER (CIRCLE APPROPRIATE BOX)		D BE FILLED IN BY DRILLER		
DOMESTIC POTABLE SUPPLY & RESIDENTIAL RRIGATION	Howard	H DEPARTMENT APPROVAL 59975		
FARMING (LIVESTOCK WATERING & AGRICULTURAL	COUNTY NAME	COUNTY NO.		
IRRIGATION 22 I INDUSTRIAL COMMERICIAL DEWATERING	STATE SIGNATURE	INSERT S -		
P PUBLIC WATER SUPPLY WELL	DATE ISSUED	St. 70 V. 11 1704		
T TEST, OBSERVATION, MONITORING	43 MM DD YY 48	CO SIGNATURE EXP. DATE		
G GEO-THERMAL	NORTH 510 0	0 0 GRID 780 000		
		35 37 63		
APPROXIMATE DEPTH OF WELL 24 28 FEET	SHOW MAJOR FEATURES BOX & LOCATE WELL '_ WITH AN X			
APPROXIMATE DIAMETER OF WELL NEAREST INCH	SOURCES OF DRILLING	WATER		
METHOD OF DRILLING (circle one)	2. 3			
BORED (or Augered) JETTED Jetted & DRIVEN 30 AID DOTARY (I.I. drawling Parker)				
AIR-HOTARY (Hydraulic Hotary)	WRITE THE BOX NUMBER	R		
Other DRive-POINT	FROM THE MAP HERE	(B)		
REPLACEMENT OR DEEPENED WELLS	E 780	000		
(CIRCLE APPROPRIATE BOX)	N 510	őőő		
THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE		/ SHOWING LOCATION OF WELL IN		
ABANDONED AND SEALED	RELATION TO NEARBY"T	OWNS AND ROADS AND GIVE O NEAREST ROAD JUNCTION		
39 S AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED	1			
(IF AVAILABLE) 41	N .	2+97		
Not to be filled in by driller (MDE OR COUNTY USE ONLY)		0 1 4		
APPROP. PERMIT NUMBER		Poxba		
PERMIT No. 10 - 94 - 3853		019 40		
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =		₩		

Page of Date			Review _	
		FIELD DATA HOWARD COUNTY WEL		
Wall Dormit No.	. но - 94-	3853		
Location of pro	operty (road)	Rivercrest Ct	13 Block Plater Robert Bune	
Subdivision	RivercrestCt	Lot	13 Block Plat	Sec.
Well Driller _	G. Edgar H	arr Own	er Robert Bure	
Distance	f well e of measuring p water level (S.W	oint (M.P.) above g	round	
	pumping rese			
Time pump	p started		Pumping rateft.	
Total til	me to	reach pumping wate.	r level ft.	below M.P.
II. Recovery	pump test data -	observations to be	recorded every 15 minu	tes
	WATER LEVEL below M.P.	time to fill 5	FLOW METER READING (if used)	(gallons per minute)
tervals		gallon bucket		ишпасе)
`				
Marine Control of the				

Pageor	Review
FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST	
Well Permit No. HO - 94-3853	
Location of property (road) Riverest (+	
Subdivision Riverast Lot 13 Block Well Driller G. Edgar Narr Owner Rehert	Plat Sec.
Depth of well 200 Feet	
Distance of measuring point (M.P.) above ground	00 F +
Static water level (S.W.L.) below M.P. 34/17 +	
I. High rate pumping reservoir drawdown	
Time pump started //30 Pumping rate Total time 45 min to reach pumping water level //4	ft. below M.P.

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

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 5	(if used)	(gallons per
tervals		gallon bucket		minute)
1/30	34' Ft	18		16.66
1145	Si.	iq		15.78
1200	43`	20		15.00
1215	66	21		14.28
1230	66	21		14.28
1245	66	21		14.28
/300	66	21		14.28
1315	46	21		14.28
1.330	66	21		14.28
1345	66	21		14.28
1400	66	21		14.28
1415	66	21		14.78
14.30	66	21		14.28
L			L	

Re	e v	í	ew	

11112 24

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST 3853

	Permit No. HO - 44-		
O FA	tion of property (road) RIVERCREST Con	ראיך	
direc	vision RIVERCKERT	Lot # 13 Block Plat Sec	
(Part)	Driller G EDGAR HARR	Owner MOBERT PUICE	
1			
17	Depth of well 300'	*	
	Distance of measuring point (M.P.) about		
	Staric water level (S.W.L.) below M.P.	151	
0 3			
	High rate pumping reservoir drawdo:n		
4	Time pump started 1015	Pumping rate 14:66	
	Total time 60000 to reach pumping w	water level) (ft balou M.B.	
	to teach pumping w	water level it. Delow M.P.	

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

WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METRIC READING (if used)	CALCULATED FLOW (gallons per minute)
15'	18		166:
			/5 /
	19		15 7
	20		15 %
26'	20		15.6
			15 00
		· ·	15:00
21			15 00
			15 01
di	20		15.69
26'	Î'		150
	20		1563
26'	20	· •	1500
	``		
	:		
	26' 26' 26' 26' 26' 26'	below M.P. time to fill 5 gillon bucket 15' 18 19 19 19 19 19 19 19	below M.P. time to fill 5 (If used)

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:			
	Sykesville, MD 21784		
(Must circle one) Licensed Plumber	Licensed Well Driller	Licensed Well Pump Installer
License # and nar	me of individual responsi	ble for the field installation:	
Name (Print): Rol	bert L. Feezer		License# 2122
			entices must be under the supervision of a
			ller. Licenses may be subjected to field
verification. Un	licensed individuals may	y be reported to the approp	riate licensing agency.
		- 11	
Name of Property	y Owner: <u>Columbia</u>	Builders Telepho	one #:
Subdivision:		Lot #: /	Well Tag #: HO -94- 3853
Site Address: 1	5451 Rivercies 1	t Ct	
_ 7	Brookville Md	2083.3	
Submersible Pu	mp Data	Pitless Adapter	Well Cap and Electric Conduit
Make: Gould		Make: Campbell	Two piece watertight cap: Yes
Model #: <u>565</u>		Model#: PT800	Screened, vented well cap: Yes
Pump Capacity _		Depth: 42" (36" min)	Cap secured to casing: Yes
Well Yield:/	5 GPM	NSF/WSC approved: Yes	Conduit min 18" B.G.: Yes
Depth of well end	countered at time of pump	p installation: 300 (feet)	Conduit secured to well cap: Yes
			red by NSPC 1990 Section 17.8.4
		cceptable method used- Must	
Safety rope, if u	sed, attached to brass re	ope adapter or other accept	able method <u>inside of well casing</u> N/A
Piping to house		House Connection	
Type: Poly			soil at wall penetration: Yes
PSI: 200 (160 p		Length of sleeve(5' minimum	
Depth of supply	line: 42" (36" min)	Sleeve sealed properly: Ye	<u> </u>
TD11	1 11 1 1 1 A - 1		
I ne water suppl	y line is required to be a	at least ten leet from the sep	otic tank, pump chamber, sewage piping,
approval prior t		e reserve area. If this cam	not be accomplished, contact this office for
Robert L. Feezer	Ching Street Hause Control of Related Lands Co	turnarija disebili sem, (TV)	5-10-21
Signature of com	pany representative response	neible for installation	5-12-21 date
orginature or com	pany representative respe	mistore for mistarration	date
	For Health Depart	ment Use Only - Not to be	completed by Installer
	/	ment ose only - Not to be	completed by instance
Date Insp. Reque	ested: #1/4/21 D	ate Insp. Approved: 4/14/	21 Inspector: (SF)
Inspection Data:	Pitless adapter watertigh	nt & water supply line at least	36" below grade 36"
		and attached to casing secure	
		least 18" below grade/attach	
	Safety rope not outside	of well cap/casing	
	Correct well tag attache	d properly and casing 8" above	ve finished grade // 16
		ed adequately at house conne	
	Adequate grout observe		
	_	= =	



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date - February 24, 2022

August 24, 2021

Homeowner 15451 Rivercrest Court Brookeville, MD 20833

RE: Rivercrest, Lot 11

15451 Rivercrest Ct.

Building Permit: B20004484 Well Permit: HO-94-3853

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 5/25/2021. Final approval of the well line connection to the dwelling was granted on 4/14/2021. The well construction was completed on 1/15/2004. Water samples were collected on 7/20/2021, 8/9/2021, 8/20/2021.

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-94-3853. 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

Website: www.hchealth.org Facebook: www.facebook.com/hocohealth Twitter: @HoCoHealth



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

Lin Kall

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

REPORT OF ANALYSIS

Laboratory ID #:

146744

Account #:

1920

Reference:

Rivercrest Lot 11

Client:

Robert L Feezer Co- New Homes

Location:

15451 Rivercrest Court

Requested By: Rick Cross

Brookeville, MD 20833

Source:

Well Water

Date/ Time Collected: 8/20/2021

1029

Site:

Date/Time Rec'd:

8/20/2021

1117

Treatment:

Bath Sink None

Chlorine ppm:

Free: ND

Total: ND

pH:

5.4

Collected By:

R. George

3611RG

Well #:

HO-94-3853

PARAMETERS	RESULTS	UNITS REI	FERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/21/2021 / 0930 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/21/2021 / 0930 / CCH

NOTES:

- MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample. 1
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of 2 sampling.
- 3 ND:None Detected
- pH and Chlorine level tested in lab (pH tested after recommended holding time) 4
- Visual well check: Sealed, vented cap 5

Reason for Test:

Use & Occupancy

Building Permit#:

20004484

Date Reported:

8/23/2021

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:

146412

Rivercrest Lot 11

Client:

1920

Reference:

15451 Rivercrest Court

Account #:

Robert L Feezer Co- New Homes

Location:

Brookeville, MD 20833

Requested By: Rick Cross Source:

Date/ Time Collected: 8/9/2021

1314 Site: Well Water

Date/Time Rec'd:

Tap At Booster Pump

8/9/2021

1545

Treatment:

None

Chlorine ppm:

Free: ND

Total: ND

pH:

5.6

Collected By:

J. Yeager

0819JY

Well #:

HO-94-3853

PARAMETERS	RESULTS	UNITS RE	FERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	5.3	MPN/ 100 ml	<1.0	SM20 9223B	8/10/2021 / 1000 / TSD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/10/2021 / 1000 / TSD

NOTES:

- MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample. 1
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of 2 sampling.
- ND:None Detected 3
- pH & Chlorine level tested on site 4
- Visual well check: Sealed, vented cap 5

Reason for Test:

Use & Occupancy

Building Permit #:

20004484

Date Reported:

8/10/2021

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:

145941

Account #:

Reference:

Rivercrest Lot 11

Client:

1920

15451 Rivercrest Court

Robert L Feezer Co- New Homes

Location:

Brookeville, MD 20833

Requested By: Rick Cross

Date/ Time Collected: 7/20/2021

1240

Source:

Well Water

Date/Time Rec'd:

1440

Site: Treatment: Tap At Booster Pump

Chlorine ppm:

7/20/2021 Free: ND

Total: ND

pH:

None 5.5

Collected By:

J. Yeager

0819JY

Well #:

HO-94-3853

PARAMETERS	RESULTS	UNITS RE	PORENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	30.6	MPN/ 100 ml	<1.0	SM20 9223B	7/21/2021 / 0930 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	7/21/2021 / 0930 / CRS
Nitrate	<1.0	mg/L	10	601	7/20/2021 / 1600 / CRS
Sand	ND	mg/L	5	Visual/Gravimetric	7/20/2021 / 1620 / CRS
Turbidity	0.62	NTU	<10	SM20 2130B	7/20/2021 / 1630 / TSD

NOTES:

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

Reason for Test:

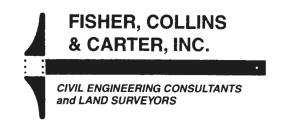
Use & Occupancy

Building Permit #:

20004484

Date Reported:

7/21/2021



Terrell A. Fisher, P.E., L.S. Earl D. Collins, P.E. Charles J. Crovo, Sr., P.E., L.S.

Paul W. Kriebel, P.E. Mark L. Robel, P.L.S. Aldo M. Vitucci, P.E.

August 22, 2007

Ms. Sara Fegel, R.S. Well and Septic Program Howard County Health Department 7178 Columbia Gateway Drive Ellicott City, Maryland 21046

Re: F-06-241

Rivercrest Lots 11 and 12

Documentation for Drilled Wells

Dear Ms. Fegel:

On behalf of our client, Mr. Bobby Jo Wheeler, we are in the process of submitting the original plat for the above referenced project to the Division of Land Development (DLD) for signature approval and recordation. As you are aware, one of the requirements of processing by DLD is written documentation that all required wells have been drilled. We have such documentation and are forwarding it to your office to ensure that it is available when the plat is submitted for signature approval by the Health Officer.

It should be noted that the documentation refers to Lots 13 and 14 of the Buice Property because those were the numbers assigned to those lots at the time the wells were drilled. Subsequently, Lots 13 and 14 of the Buice property became Non-Buildable Bulk Parcel "D" when Plats No. 18208 thru 18210 for "Rivercrest, Lots 1 thru 10, Buildable Preservation Parcel "A", Non Buildable Preservation Parcels "B" & "C" and Non-Buildable Bulk Parcel "D" were recorded. Now, with the recordation of "Rivercrest, Lots 11 and 12 (A Resubdivision of Non-Buildable Bulk Parcel "D", Rivercrest Subdivision, Plat No's 18208 thru 18210)", Non-Buildable Bulk Parcel "D" will become known as Lots 11 (formerly Lot 13, Buice Property) and 12 (formerly Lot 14, Buice Property). Hence, the documentation is correct for those lots.

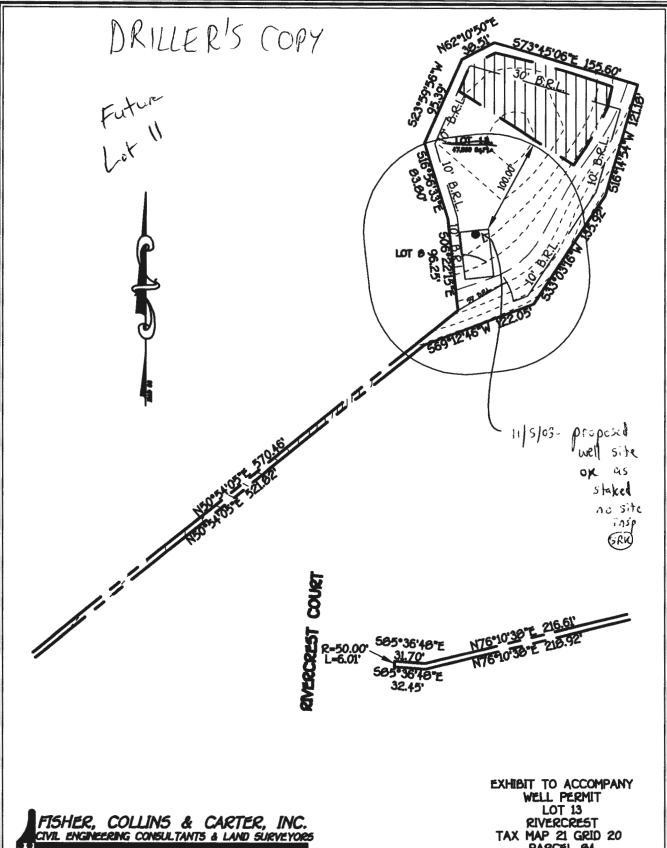
Should you have questions, or require additional information, please contact this office at 410-461-2855.

Very truly yours,

Fisher, Collins and Carter, Inc.

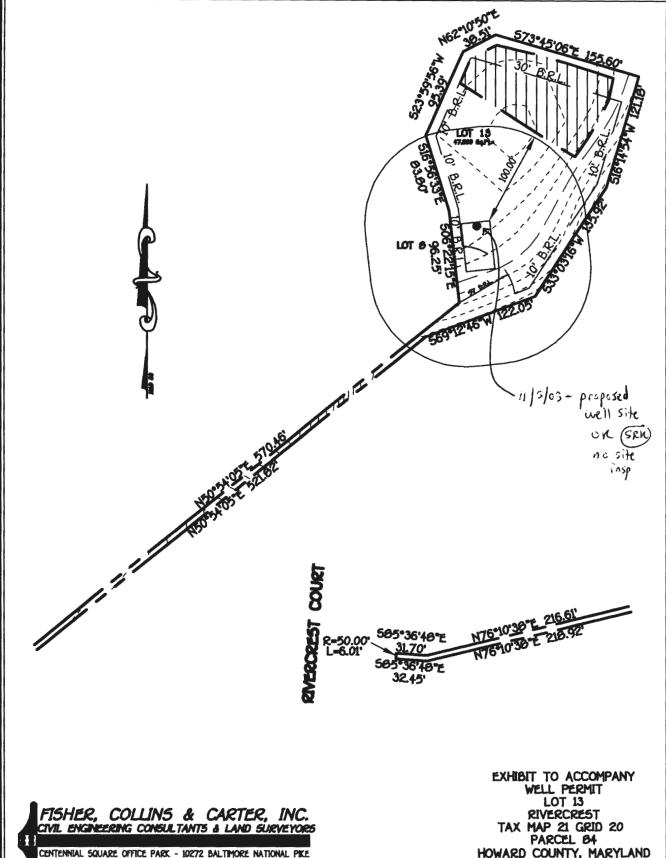
Terrell A. Fisher, P.E., L.S.

WO #30636



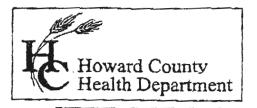
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE ELLICOTT CITY, MARYLAND 21042 (410) 461 - 2055

TAX MAP 21 GRID 20
PARCEL 84
HOWARD COUNTY, MARYLAND
SCALE 1"-100"
DATE OCTOBER 22, 2003



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

HOWARD COUNTY, MARYLAND SCALE 1"-100" DATE OCTOBER 22, 2003



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: Rivercrest Substitution,	an lots
The well site has been staked by Fisher Collins + Carter	
on 11-2-03 and is ready for site inspection.	
uill 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

DO NOT DISCARD



Terrell A. Fisher, P.E., L.S. Earl D. Collins, P.E. Ronald B. Carter, L.S. Charles J. Crovo, Sr., P.E., L.S.

November 4, 2003

Mr. Steve Kreig Howard County Health Department 3525 Ellicott Mills Drive Ellicott City, Maryland 21043

> RE: Rivercrest Subdivision Well Stakeout

Dear Steve:

This is to advise you that the proposed well location for Lots 3 thru 12; 2 future lots in Bulk Parcel 'D' and Buildable Preservation Parcel A were staked by our firm on October 30th and November 2, 2003 and is ready for site inspection.

Very truly yours, Fisher, Collins & Carter, Inc.

Terrell A. Fisher, P.E., L.S.

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WO #30636 c.c. Mr. Mike Isom Mr. John Komsa