

C12973

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.
COUNTY NUMBERXIII560542-B

ST/CO USE ONLY
DATE Received
MM05DD22YY17

DATE WELL COMPLETED
MM04DD28YY17

Depth of Well
2240026
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
Ho-17-0030

OWNERGILHERSE FAMILY L.L.C.

WELL SITE ADDRESSHIGH STEPIER TRAILTOWNSPYKEVILLE

SUBDIVISIONWALKER MEADOWSSECTIONLOT13

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
TAN GROUND SHALE & CLAY WITH MUD COLLAPSING AREAS & GRAVEL WITH OF HARD ROCK	0	106	X
GREEN \ GREY SCHIST	106	136	
TAN SCHIST	136	139	X
GREEN \ GREY SCHIST	139	400	

GRROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)
YESYNO4444

TYPE OF GROUTING MATERIAL (Circle one)
CEMENTCMBENTONITE CLAYBC

NO. OF BAGS46NO. OF POUNDS2300

GALLONS OF WATER920

DEPTH OF GROUT SEAL (to nearest foot)
from0ft. to50ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STSTEEL
PLPLASTIC

COCONCRETE
OTOHER

MAIN CASING TYPE
ST

Nominal diameter
top (main) casing
(nearest inch)
6

Total depth
of main casing
(nearest foot)
120

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

EACH CASING

screen type
or open hole
(insert
appropriate
code
below)

SCREEN RECORD

STSTEEL
PLPLASTIC

BRBRASS
PBRONZE
PLPLASTIC

HOOPEN
HOLE
OTOHER

DEPTH (nearest ft.)
Ho118400

EACH CASING

SLOT SIZE 123

DIAMETER
OF SCREEN
6
(NEAREST
INCH)
fromto

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.)WQ

7072747576

TELESCOPE
CASING
LOG
INDICATOR
OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)4HR 15MIN

PUMPING RATE (gal. per min.)8.5

METHOD USED TO
MEASURE PUMPING RATEWATCH & BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING33ft.

WHEN PUMPING210ft.

TYPE OF PUMP USED (for test)

AairPpistonTturbine
CcentrifugalRrotaryOother
JjetSsubmersible

PUMP INSTALLED

DRILLER INSTALLED PUMPYESNO

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)3135

PUMP HORSE POWER3741

PUMP COLUMN LENGTH
(nearest ft.)4347

CASING HEIGHT (circle appropriate box
and enter casing height)

abovebelow

LAND SURFACE
2(nearest
foot)

LATITUDE39.34314

LONGITUDE76.94106

(DEFAULT COORD. WGS 84)

NOTES:

RECEIVED

MAY 22 2017

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

B 1 <div style="font-size: 24pt; font-weight: bold;">26561</div>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL <div style="font-size: 18pt; font-weight: bold;">560542B</div> please type	STATE PERMIT NUMBER <div style="font-size: 24pt; font-weight: bold;">Ho-17-0030</div> fill in this form completely
Date Received (APA) <div style="font-size: 18pt; font-weight: bold;">02/17/17</div> OWNER INFORMATION <div style="font-size: 18pt; font-weight: bold;">Galliere Family LLC</div> <div style="font-size: 18pt; font-weight: bold;">1301 Linden Church Rd</div> <div style="font-size: 18pt; font-weight: bold;">Clarksville MD 21029</div>		B 3 LOCATION OF WELL <div style="font-size: 18pt; font-weight: bold;">Howard</div> <div style="font-size: 18pt; font-weight: bold;">Walker Meadows</div> <div style="font-size: 18pt; font-weight: bold;">13</div> <div style="font-size: 18pt; font-weight: bold;">Sykesville</div>	
DRILLER INFORMATION <div style="font-size: 18pt; font-weight: bold;">Randall Alexander MW D 576</div> <div style="font-size: 18pt; font-weight: bold;">Randall Alexander Well Drilling</div> <div style="font-size: 18pt; font-weight: bold;">126 West Main St, Fairfield PA 17320</div> <div style="font-size: 18pt; font-weight: bold;">2-12-17</div>		B 4 SOURCES OF DRILLING WATER <div style="font-size: 18pt; font-weight: bold;">Well water</div> <div style="font-size: 18pt; font-weight: bold;">Heard</div> <div style="font-size: 18pt; font-weight: bold;">1/5/17 Grout</div> <div style="font-size: 18pt; font-weight: bold;">Baroid Benseal</div> <div style="font-size: 18pt; font-weight: bold;">NSF/ANSI 60</div> <div style="font-size: 18pt; font-weight: bold;">Wyoming Sodium bentonite</div> <div style="font-size: 18pt; font-weight: bold;">EZ MUD Polymer</div> <div style="font-size: 18pt; font-weight: bold;">Emulsion</div>	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <div style="font-size: 18pt; font-weight: bold;">5</div> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="font-size: 18pt; font-weight: bold;">375</div>		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="text-align: center;"> <div style="display: inline-block; text-align: center;">NORTH W E</div> <div style="display: inline-block; text-align: center;">SOUTH W E</div> </div> <div style="font-size: 18pt; font-weight: bold;">600</div> <div style="font-size: 18pt; font-weight: bold;">ft</div>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input checked="" type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> OPEN LOOP GEOTHERMAL <input type="checkbox"/> CLOSED LOOP GEOTHERMAL		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="font-size: 18pt; font-weight: bold;">* 4 bags used</div> <div style="font-size: 18pt; font-weight: bold;">HOWARD</div> <div style="font-size: 18pt; font-weight: bold;">COUNTY NO.</div> <div style="font-size: 18pt; font-weight: bold;">DATE ISSUED 03/01/17</div> <div style="font-size: 18pt; font-weight: bold;">EXP. DATE 03/01/18</div>	
APPROXIMATE DEPTH OF WELL <div style="font-size: 18pt; font-weight: bold;">300</div> FEET APPROXIMATE DIAMETER OF WELL <div style="font-size: 18pt; font-weight: bold;">6</div> INCH		PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL <div style="font-size: 18pt; font-weight: bold;">3/30/17</div> <div style="font-size: 18pt; font-weight: bold;">60' of casing only to 200' so far and no water yet.</div> <div style="font-size: 18pt; font-weight: bold;">04/28/2017</div> <div style="font-size: 18pt; font-weight: bold;">Pump 300'</div> <div style="font-size: 18pt; font-weight: bold;">Static lvl 33'</div> <div style="font-size: 18pt; font-weight: bold;">Start @ 10:45</div> <div style="font-size: 18pt; font-weight: bold;">see file inquiry.</div> <div style="font-size: 18pt; font-weight: bold;">Lot 13</div> <div style="font-size: 18pt; font-weight: bold;">Proposed well</div> <div style="font-size: 18pt; font-weight: bold;">SDA</div> <div style="font-size: 18pt; font-weight: bold;">M9 B6 P38</div> <div style="font-size: 18pt; font-weight: bold;">Lot 12</div>	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN AIR-ROTARY <input type="checkbox"/> AIR-PERCUSION <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT other		REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE)	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER <div style="font-size: 18pt; font-weight: bold;">G</div> PERMIT No. <div style="font-size: 18pt; font-weight: bold;">Ho-17-0030</div>			
SPECIAL CONDITIONS NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

560542-B
XIII

Submit to: Bureau of Environmental Health
8930 Standford Blvd.
Columbia, Md. 21045

NOTES:

4/28/17

RECEIVED

MAY 22 2017

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

Pump Start Time	Static Water level: <u>33</u> ft.	Pumping Rate <input checked="" type="checkbox"/> Time to fill <u>1</u> gal. bucket <input type="checkbox"/> Flow meter reading (if used)	Calculated Flow (gallons per minute)
9:30			
TIME	WATER LEVEL BELOW M.P.		
Water level and pumping rate must be recorded every 15 minutes			
1 9:30	33 ft.	6	10 GPM
2 9:45	85 ft.	6	10 GPM
3 10:00	119 ft.	6	10 GPM
4 10:15	127 ft.	6	10 GPM
5 10:30	138 ft.	6	10 GPM
6 10:45	130 ft.	7	8.5 GPM
7 11:00	145 ft.	7	8.5 GPM
8 11:15	156 ft.	7	8.5 GPM
9 11:30	164 ft.	7	8.5 GPM
10 11:45	172 ft.	7	8.5 GPM
11 12:00	179 ft.	7	8.5 GPM
12 12:15	185 ft.	7	8.5 GPM
13 12:30	190 ft.	7	8.5 GPM
14 12:45	194 ft.	7	8.5 GPM
15 1:00	198 ft.	7	8.5 GPM
16 1:15	202 ft.	7	8.5 GPM
17 1:30	206 ft.	7	8.5 GPM
18 1:45	210 ft.	7	8.5 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

Yield Test Data Sheet

County File #

560542-B
XIIIMD Well Permit #: ~~HO-17-0030~~ HO-17-0030Subdivision Name: WALKER MADONSSection: 13 Lot # 13Street Address: HIGH STEPPER TRAILMeasuring Point (MP) Description: Top of casing
(for ex. "Top of casing")Distance from MP to ground surface 2 ft.Well Depth 400 ft.Well Driller: William L. Ward JSO-095

ALEXANDER'S WELL DRILLING

Must be submitted with the State of Maryland Well Completion Report

Submit to: Bureau of Environmental Health
8930 Standford Blvd.
Columbia, Md. 21045

NOTES:

4/28/17

RECEIVED

MAY 22 2017

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

Pump Start Time <u>9:30</u>	Static Water level: <u>33</u> ft.	Pumping Rate <input checked="" type="checkbox"/> Time to fill <u>1</u> gal. bucket () Flow meter reading (if used)	Calculated Flow (gallons per minute)
TIME	WATER LEVEL BELOW M.P.		

Water level and pumping rate must be recorded every 15 minutes

1	9:30	33 ft.	6	10 GPM
2	9:45	85 ft.	6	10 GPM
3	10:00	119 ft.	6	10 GPM
4	10:15	127 ft.	6	10 GPM
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8	11:15	156 ft.	7	8.5 GPM
9	11:30	164 ft.	7	8.5 GPM
10	11:45	172 ft.	7	8.5 GPM
11	12:00	179 ft.	7	8.5 GPM
12	12:15	185 ft.	7	8.5 GPM
13	12:30	190 ft.	7	8.5 GPM
14	12:45	194 ft.	7	8.5 GPM
15	1:00	198 ft.	7	8.5 GPM
16	1:15	202 ft.	7	8.5 GPM
17	1:30	206 ft.	7	8.5 GPM
18	1:45	210 ft.	7	8.5 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

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

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: Foale's Well Pump & Water Treatment LLC Telephone #: 410 795 5670
Address: 5580 Oberlin Rd
Sykesville, MD 21784

Must circle one: Licensed Plumber / ☒ Licensed Well Driller / Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): David C Foale 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: Walker meadows Lot #: 13 Well Tag #: HO-17-0030 ✓ 03/06/2020
Site Address: 1037 Stepping Place
Sykesville, MD 21784

Submersible Pump Data

Make: Goulds
Model #: 7H507422
Pump Capacity: 7
Well Yield: 8.5

Depth of well encountered at time of pump installation: 400 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

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

Pitless Adapter

Make: Campbell
Model#: N/A
GPM Depth: 36" (36" min)
GPM NSF/WSC approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: YES
Screened, vented well cap: YES
Cap secured to casing: YES
Conduit min 18" B.G.: YES
Conduit secured to well cap: YES

Piping to house

Type: 1" poly pipe
PSI: 200 (160 psi min)
Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: YES
Length of sleeve (5' minimum from foundation): 6'
Sleeve sealed properly: YES

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

Signature of company representative responsible for installation: David C Foale date: 3/6/2020

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

Date Insp. Requested: 03/06/2020 Date Insp. Approved: 03/06/2020 Inspector: [Signature]

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

45" 03/06/2020 [Signature]
42" 03/06/2020 [Signature]
15" 03/06/2020 [Signature]
11" 03/06/2020 [Signature]

(Revised form 10/24/2018)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – NOVEMBER 22, 2020

May 22, 2020

Homeowner
1037 Stepping Place
West Friendship, MD 21794

**RE: Walker Meadows, Lot 13
1037 Stepping Place
Building Permit: B19004354
Well Permit: HO-17-0030**

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 **4/2/2020**. Final approval of the well line connection to the dwelling was granted on **3/6/2020**. The well construction was completed on **4/28/2017**. Water samples were collected on **5/19/2020**.

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-17-0030. 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>



**HOWARD COUNTY
HEALTH DEPARTMENT**

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

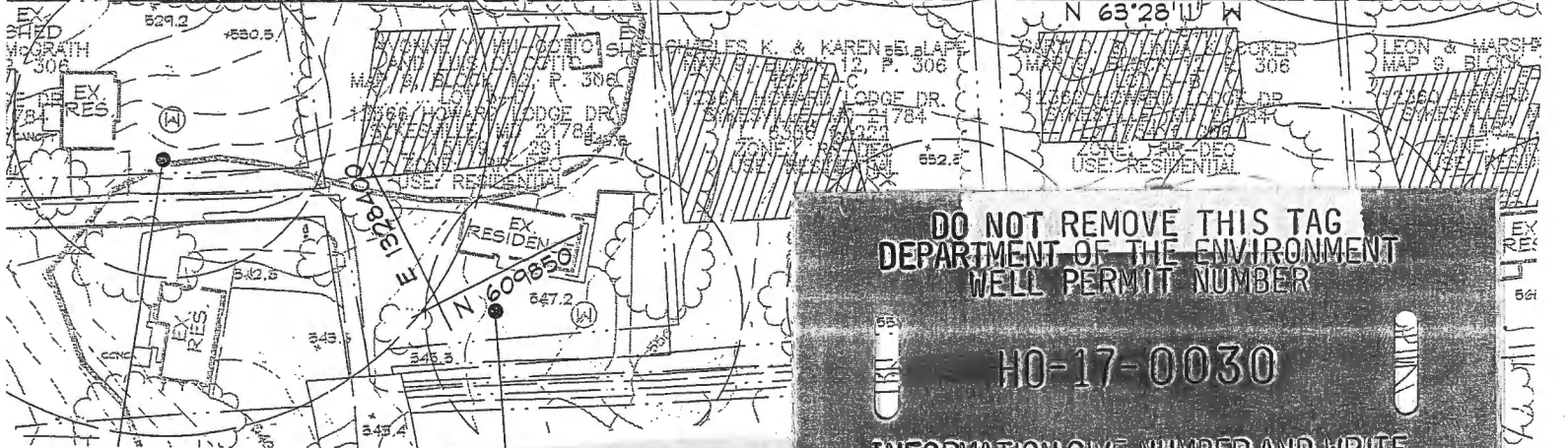
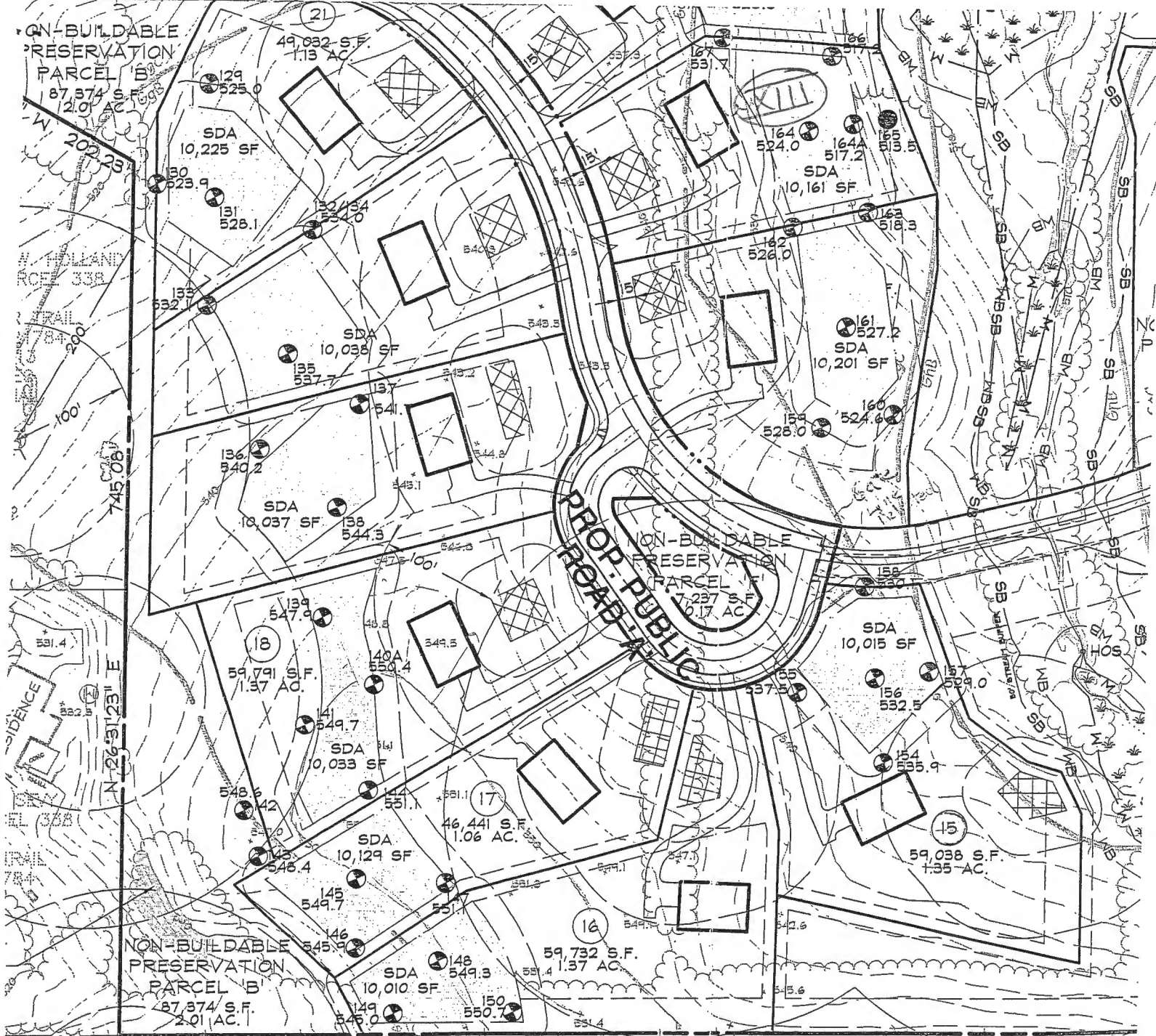
Maura J. Rossman, M.D., Health Officer

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
Well & Septic Program

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



DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER
H0-17-0030
INFORMATION GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230

WALKER MEADOWS - LOT 13
Approved 03/01/2017 *le*
H0-17-0030
SHELLY L. DDC INC

LOT 13

Test well

FILE INQUIRY NOTES

Walker Meadows Sub
Highstepper Trail
Bentland
Alexander Well 7 gal/bag

DATE	RESULTS OF REVIEW FOR FILE		
4/15/17	Lot 13		Bentonite 20 gal/bag
	Baroid - Benscal	grout	NSF/ANSI 60
	uniform granular Wyoming sodum bentonite		
	Nexteel API Spec 5L-0554 (P) - Casing		
	07-16 6.625" x 6.188" x 20'		
	12-94 API 5 lb x 42 PSI ASTM A53B		
			A53B/ASME
			SA53B
	EZ-MOD polymer Emulsion		
	100 ft Casing 50 ft tremie pipe		
	Brett the apprentice		
	20 gal 20 lb water / 50 lb bag		
	46 48 bags used		
	See fn		
4/28/2017	300' pump placement		
	33' static level		
			water level
	10:45	7 sec	1 gal fill
	11:00	7 sec	1 gal 145'
	11:15	7 sec	1 gal 158'
	11:30	7 sec	1 gal 164'
	11:45	7 sec	1 gal 174'
	12:00	7 sec	1 gal 179'

WALKER MEADOWS
SUB DIVISION

Test well

DATE	RESULTS OF REVIEW FOR FILE
3/1/17	Site visit for test well lots. 11, 12, 13, 14, 15 informed of 16, 17, 18, 20, 33 (e)
3/2/17	Spoke w/ Jeff Lindau - Special conditions for potable wells lots 15, 16, 20 Developer wishes to proceed w/ All testwell applications but may only drill 5. (e)
3/3	Permits mailed. Notification of spec. cond sent to developer driller, cc H&D WTS (P) (e)
* Inquiry Notes Split into Lot sheets (e)	
04/24/2017	Blanket Reminder Set for Conversion of test wells DUE 10/24/2017 DEADLINE NOV 1 st 2017 (e) Lot 18 to Be granted

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 #: 137350 Account #: 1933
Reference: Walker Meadows Lot 13 Company: Fogles Well Pump & Treatment
Location: 1037 Stepping Place Requested By: Dave Fogle
Sykesville, MD 21784 Source: Well Water
Date/ Time Collected: 5/19/2020 0735 Site: Kitchen Sink Tap
Date/Time Rec'd: 5/19/2020 0952 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.1
Collected By: J. Evans 0309JE Well #: HO-17-0030

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/20/2020 / 1000 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/20/2020 / 1000 / CRS
Iron	0.08	mg/L	0.3*	FR, 45 (126)	5/20/2020 / 0920 / RER
Nitrate	<1.0	mg/L	10	601	5/19/2020 / 1050 / RER
Turbidity	1.04	NTU	<10	SM20 2130B	5/19/2020 / 1015 / RER
Sand	ND	mg/L	5	Visual/Gravimetric	5/19/2020 / 1015 / RER

NOTES

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 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 # : 19004354

Date Reported: 5/20/2020