

<b>C 1</b>	<b>55757</b>	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 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
ST/CO USE ONLY DATE RECEIVED MM <u>01</u> DD <u>17</u> YY <u>19</u>		DATE WELL COMPLETED MM <u>01</u> DD <u>03</u> YY <u>19</u>		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-17-0374</u>
		Depth of Well <u>302</u> 26 (TO NEAREST FOOT)		COUNTY NUMBER <u>XIII</u>
OWNER <u>ZIGLER JESSICA &amp; SOPHIE - TOLL BROTHERS INC.</u>				
WELL SITE ADDRESS <u>PROPOSED PUDDING LANE</u> TOWN <u>ELLIOTT CITY</u>				
SUBDIVISION <u>KINGS FOREST</u> SECTION <u>    </u> LOT <u>17</u>				

<b>WELL LOG</b> Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>SOFT BROWN MICACEOUS CLAYEY SAPROLITE GRADING INTO WEATHERED BEDROCK</td> <td>0</td> <td>40</td> <td>X</td> </tr> <tr> <td>COMPETENT GRAY QUARTZITE GNEISS</td> <td>40</td> <td>55</td> <td></td> </tr> <tr> <td>SOFT BROWN WEATHERED</td> <td>55</td> <td>56</td> <td></td> </tr> <tr> <td>GRAY GNEISS</td> <td>56</td> <td>80</td> <td></td> </tr> <tr> <td>BLACK &amp; GRAY GNEISS</td> <td>80</td> <td>105</td> <td></td> </tr> <tr> <td>SOFT BLACK GNEISS</td> <td>105</td> <td>110</td> <td>X</td> </tr> <tr> <td>GRAY/BLACK GNEISS</td> <td>110</td> <td>302</td> <td></td> </tr> </tbody> </table>	DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	SOFT BROWN MICACEOUS CLAYEY SAPROLITE GRADING INTO WEATHERED BEDROCK	0	40	X	COMPETENT GRAY QUARTZITE GNEISS	40	55		SOFT BROWN WEATHERED	55	56		GRAY GNEISS	56	80		BLACK & GRAY GNEISS	80	105		SOFT BLACK GNEISS	105	110	X	GRAY/BLACK GNEISS	110	302		<b>GROUTING RECORD</b> yes no WELL HAS BEEN GROUTED (Circle Appropriate Box) <u>Y</u> <u>N</u> TYPE OF GROUTING MATERIAL (Circle one) CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u> NO. OF BAGS <u>19</u> NO. OF POUNDS <u>950</u> GALLONS OF WATER <u>380</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> ft. to <u>51</u> ft. (enter 0 if from surface)	<b>C 3</b> <b>PUMPING TEST</b> HOURS PUMPED (nearest hour) <u>4</u> HOURS 15 MIN. BLOWN YIELD WITH DRILL <u>28 GPM</u> PUMPING RATE (gal. per min.) <u>12</u> METHOD USED TO MEASURE PUMPING RATE <u>WATCH &amp; BUCKET</u> WATER LEVEL (distance from land surface) BEFORE PUMPING <u>34</u> ft. WHEN PUMPING <u>75</u> ft. TYPE OF PUMP USED (for test) <u>A</u> air <u>P</u> piston <u>T</u> turbine <u>C</u> centrifugal <u>R</u> rotary <u>O</u> other <u>J</u> jet <u>S</u> submersible
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<b>C 2</b> DEPTH (nearest ft.) <u>HO 51 302</u>	<b>PUMP INSTALLED</b> DRILLER INSTALLED PUMP YES NO (CIRCLE) (YES or 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) <u>31</u> <u>35</u> PUMP HORSE POWER <u>37</u> <u>41</u> PUMP COLUMN LENGTH (nearest ft.) <u>43</u> <u>47</u> CASING HEIGHT (circle appropriate box and enter casing height) <u>+</u> above } LAND SURFACE <u>-</u> below } (nearest foot) <u>1</u>																																			

NUMBER OF UNSUCCESSFUL WELLS: <u>0</u> WELL HYDROFRACTURED yes no <u>Y</u> <u>N</u> CIRCLE APPROPRIATE LETTER <b>A</b> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <b>E</b> ELECTRIC LOG OBTAINED <b>P</b> TEST WELL CONVERTED TO PRODUCTION WELL 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.	<b>SCREEN RECORD</b> screen type or open hole (insert appropriate code below) <u>ST</u> <u>BR</u> <u>HO</u> STEEL BRASS OPEN BRONZE HOLE <u>PL</u> <u>OT</u> PLASTIC OTHER	LATITUDE <u>39.256265</u> LONGITUDE <u>76.882531</u> (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.
DRILLERS LIC. NO. <u>1 MWD 576</u> DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) <u>DR. H. ALL</u> LIC. NO. <u>1 MWD 594</u> DRILLER	GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE LOG OTHER DATA CASING INDICATOR	

B 1

59804

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

STATE PERMIT NUMBER

40-17-0374  
fill in this form completely

Date Received (APA)

8 MM DD YY 13

## OWNER INFORMATION

Ziegler Jessica i Sophie  
 730 Dolores Street  
 San Francisco CA 94110

## DRILLER INFORMATION

RANDALL L. ALEXANDER MWD 576  
 Driller's Name License No.  
 ALEXANDER'S WELL DRILLING  
 Firm Name  
 126 W. MAIN ST. P.O. BOX 443 FAIRFELD, PA. 17820  
 Address  
 Signature Date 10-7-18

B 2

## WELL INFORMATION

APPROX. PUMPING RATE  
 (GAL. PER MIN.) 22  
 AVERAGE DAILY QUANTITY NEEDED  
 (GAL. PER DAY) 606

## USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☐ 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 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

## METHOD OF DRILLING (circle one)

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

REPLACEMENT OR DEEPEMED WELLS  
(CIRCLE APPROPRIATE BOX)

- ☒ 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 DEEPMEN AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER 402018-G004

PERMIT No. 70 71 72 73 74 75 76 77 78 79

## SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

STEEL CASING 50' OR 10' INTO COMPETENT BEDROCK, WHICHEVER IS DEEPER. RADIUM SAMPLES REQUIRED

B 3

## LOCATION OF WELL

Howard  
 8 COUNTY 21  
 Kings Forest  
 23 SUBDIVISION 42  
 SECTION 44 46 LOT 17 48 50  
 Ellioth City  
 52 NEAREST TOWN 71

B 4

## SOURCES OF DRILLING WATER

1. WELL WATER  
 2.  
 3.

Proposed  
 Pudding Lane  
 11 STREET ADDRESS 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  
 WEST EAST  
 SOUTH  
 34 37  
 DISTANCE FROM ROAD  
 ENTER FT OR MI 38 39  
 TAX MAP: 23 BLK: 23 PARCEL 148

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

Howard  
 COUNTY NAME COUNTY NO.  
 STATE SIGNATURE INSERT S 41  
 DATE ISSUED 11/20/18  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE 11/20/19

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

12/26/2018  
 52 casing  
 ~220' ~22' ~105'  
 Lot 17  
 15' Well Box  
 25'  
 Pudding Lane  
 12/27/2018  
 19 Bags  
 Benbrook - 10524153

N

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.





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: Fogles Well Pump & water treatment, LLC Telephone #: 410-795-1535  
 Address: PO Box 63  
Woodbine, MD 21797

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: Toll Brothers Telephone #: \_\_\_\_\_  
 Subdivision: Kingsley Woods Lot #: 17 Well Tag #: HO-17-0374 (S)  
 Site Address: Woodbine Lane  
Ellicott City, MD 21043

### Submersible Pump Data

Make: Gundorf  
 Model #: 153607-K60  
 Pump Capacity: 15  
 Well Yield: 12

Depth of well encountered at time of pump installation: 300 (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 wrenches / Cable guards / Other acceptable method used

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

### Pitless Adapter

Make: Campbell +  
 Model #: NA  
 GPM Depth: 36" (36" min)  
 GPM NSF/WSC approved: VS

### Well Cap and Electric Conduit

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

### Piping to house

Type: 1" poly pipe  
 PSI: 200 (150 psi min)  
 Depth of supply line: 36" (36" min)

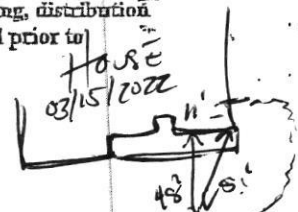
### House Connection

PVC sleeve to undisturbed soil at wall penetration: VS  
 Length of sleeve (5' minimum from foundation): 10'  
 Sleeve sealed properly: VS

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: [Signature]

date: 3/15/2022



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

Date Insp. Requested: 03/15/2022 Date Insp. Approved: 6/29/22 Inspector: KW

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

46" FROM CAP 03/15/2022 (P)  
42.5" FROM CAP 03/15/2022 (P)  
36" 5/26/22  
15' 03/15/2022 (P)  
KAD

(Revised form 10/24/2018)

5/26/22  
 Casing now 36" above grade,  
 cap needs to be secured

03/15/2021  
 Casing is currently Below  
 grade.

## **INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – JANUARY 27, 2023**

July 27, 2022

Homeowner  
10508 Pudding Lane  
Ellicott City, MD 21042

**RE: King's Forest, Lot 17**  
**10508 Pudding Lane**  
**Building Permit: B21003436**  
**Well Permit: HO-17-0374**

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 **7/22/2022**. Final approval of the well line connection to the dwelling was granted on **6/29/2022**. The well construction was completed on **1/3/2019**. Water samples were collected on **5/26/2022, 6/7/2022, 6/21/2022, 6/22/2022**.

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.

Gross Alpha and Beta samples were also collected on **1/3/2019**. Results showed a Gross Alpha level of **0.5 ± 0.0 pCi/L** and **Gross Beta** level of **0.7 ± 0.0 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

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-17-0374. 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.**

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

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website: <http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

In closing, please refer to our "Homeowner Fact Sheet" for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environment's website which elaborates in further detail operation and maintenance of your Septic System.

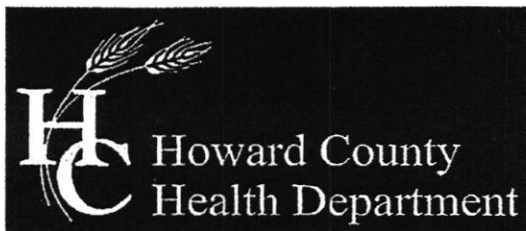
Approving Authority,



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

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





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

Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

### TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well, please indicate one of the following:

Well Site Location:

Kings Forest  
Subdivision/Property Name

17  
Lot #

Peddling Lane  
Road Name

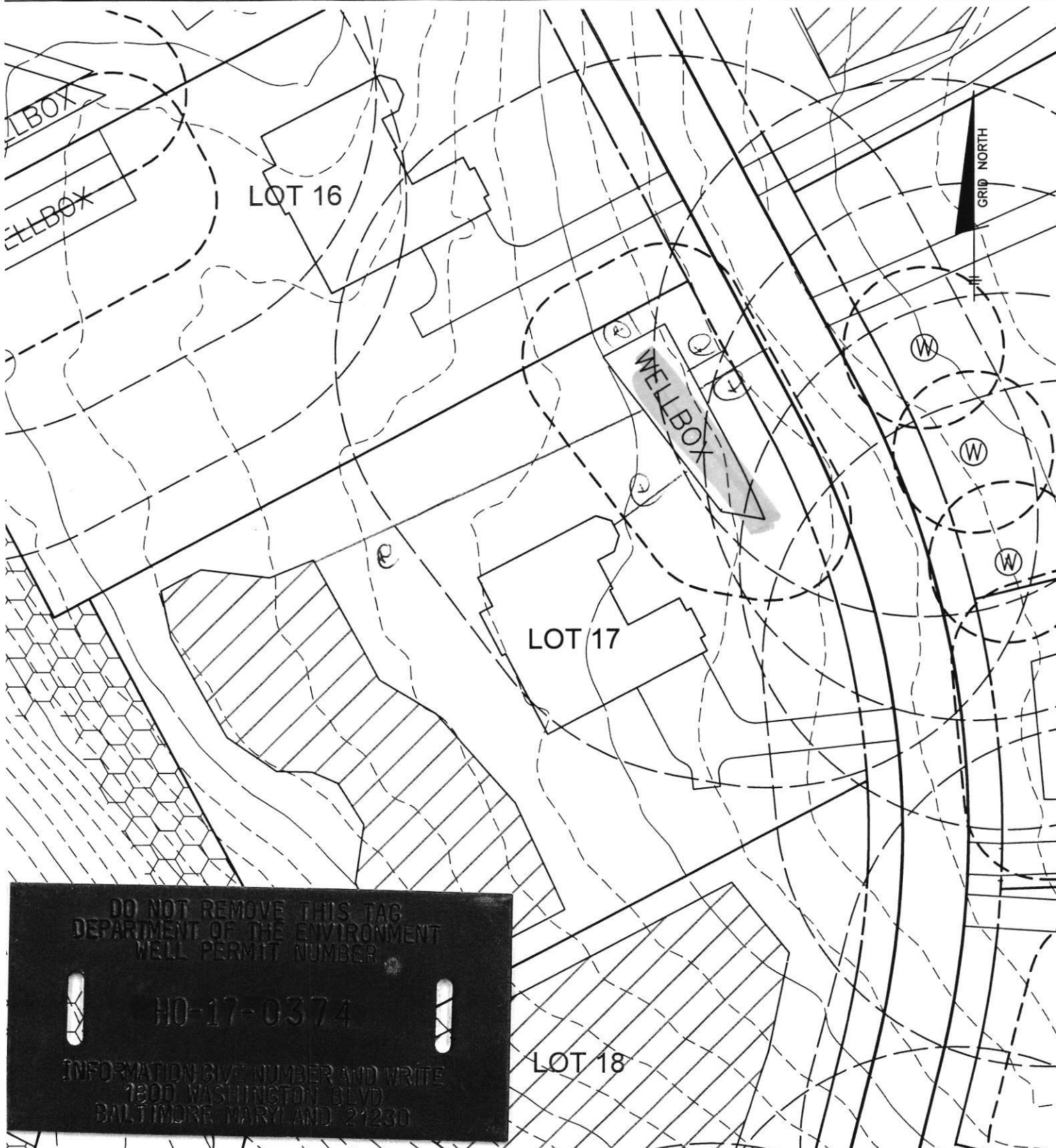
☒ The well site, as shown on the attached well site plan, has been staked by

Benchmark Engineering, Inc.  
(professional land surveyor or company employing professional land surveyors)

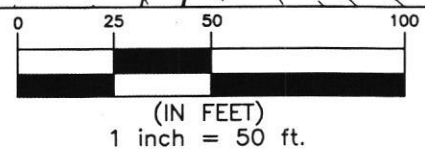
on 9/26/18  
(date)

☐ 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.



DO NOT REMOVE THIS TAG  
DEPARTMENT OF THE ENVIRONMENT  
WELL PERMIT NUMBER  
  
HO-17-0374  
  
INFORMATION GIVE NUMBER AND WRITE  
1800 WASHINGTON BLVD  
BALTIMORE MARYLAND 21230



**BENCHMARK**  
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS

**ENGINEERING, INC.**

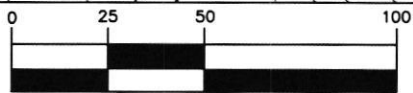
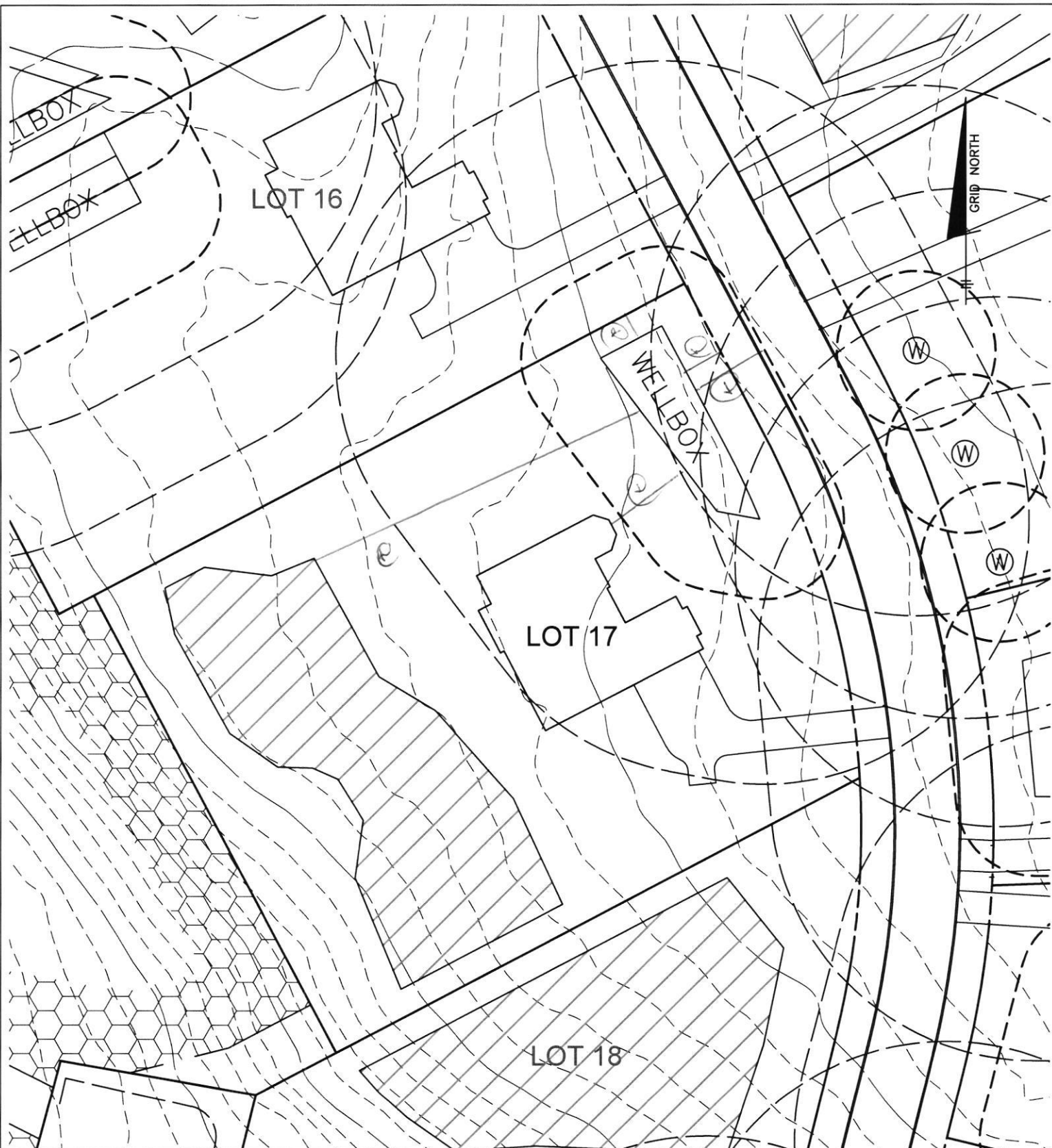
8480 BALTIMORE NATIONAL PIKE ▲ SUITE 315 ▲ ELLICOTT CITY, MARYLAND 21043  
(P) 410-485-8105 (F) 410-485-8644  
WWW.BEI-CIVILENGINEERING.COM

APPROVED 11/20/2018 @ 001997  
STAKED BY BENCHMARK 09/26/2018  
HO-17-0374

**KINGS CROSSING**  
LOT 17 (WELL EXHIBIT)

DATE: NOVEMBER 2018  
SCALE: 1" = 50'





(IN FEET)  
1 inch = 50 ft.



**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE • SUITE 315 • ELLICOTT CITY, MARYLAND 21043  
(P) 410-485-8105 (F) 410-485-8044

WWW.BE-CVLENGINEERING.COM

APPROVED 11/20/2018 @ 001997  
STAKED BY BENCHMARK 09/26/2018  
HO-17-0374

## KINGS CROSSING

LOT 17 (WELL EXHIBIT)

DATE: NOVEMBER 2018  
SCALE: 1" = 50'

**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 #: 127724 Account #: 2440  
Reference: Toll Brothers/King Forest Company: Hydro-Terra Group  
Location: Manor Lane, Lot 17 Requested By: Jeff Lindaw  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 1/3/2019 1320 Site: Pumped from Well  
Date/Time Rec'd: 1/4/2019 0720 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.4  
Collected By: \*\* Well #: HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Radium-226	0.5	pCi/L	****	903.1	1/15/2019 / 0956 / MJN
Radium-228	0.7	pCi/L	****	Ra-05	1/15/2019 / 0926 / SN

**NOTES**

- \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- \*\*Alexander's Well Drilling
- pCi/L = picocuries per liter
- Radium 226 Detection Limit: 0.3 pCi/L; Radium 228 Detection Limit: 0.7 pCi/L
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- Sample collected by client, analyzed as received
- ND = None Detected
- pH and Chlorine level tested in lab (pH tested after recommended holding time)
- Subcontracted to Reference Lab #278

Reason for Test : HoCHD

Date Reported: 1/16/2018

Reviewed By:



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 152227 Account #: 1933  
Reference: Kingsley Woods Lot 17 Client: Fogle's Well Pump & Treatment  
Location: 10508 Pudding Lane 21042 Requested By: Dave Fogle  
Ellicott City, MD 21042 Source: Well Water  
Date/ Time Collected: 5/26/2022 1205 Site: Pressure Tank  
Date/Time Rec'd: 5/26/2022 1420 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 6.4  
Collected By: J. Evans 0309JE Well #: HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/27/2022 / 0905 / MEH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/27/2022 / 0905 / MEH
Nitrate.	<0.40	mg/L	10	EPA 300.0	5/26/2022 / 1957 / CRS
Turbidity	<u>52.1</u>	NTU	<10	SM2130B	5/26/2022 / 1625 / MEH
Sand	ND	mg/L	5	Visual/Gravimetric	5/26/2022 / 1550 / 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 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B21003436

Date Reported: 6/2/2022



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #:	152422	Account #:	1933
Reference:	Kingsley Woods Lot 17	Client:	Fogle's Well Pump & Treatment
Location:	10508 Pudding Lane	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	6/7/2022 0930	Site:	Pressure Tank
Date/Time Rec'd:	6/7/2022 1519	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	6.2
Collected By:	J. Evans 0309JE	Well #:	HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Iron	5.04	mg/L	0.3*	Hach 8146	6/7/2022 / 1600 / TSD
Turbidity	63.3	NTU	<10	SM2130B	6/8/2022 / 0920 / TSD

### NOTES:

- 1 \*SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy  
Building Permit # : B21003436

Date Reported: 6/8/2022

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #:	152423	Account #:	1933
Reference:	Kingsley Woods Lot 17	Client:	Fogle's Well Pump & Treatment
Location:	10508 Pudding Lane	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	6/7/2022 0930	Site:	Pressure Tank
Date/Time Rec'd:	6/7/2022 1519	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	6.2
Collected By:	J. Evans 0309JE	Well #:	HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Manganese	0.238	mg/L	0.05*	EPA 200.7	6/9/2022 / 1109 / MAP

### NOTES:

- 1 \* SMCL = Secondary Maximum Contaminant Level
- 2 Manganese Detection Limit: 0.010 mg/L
- 3 mg/L = milligrams per liter (also, parts per million)
- 4 Sub-contracted to Reference Lab #192
- 5 ND = None Detected
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 7 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B21003436

Date Reported: 6/17/2022

MD State Certification # 133

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #:	152747	Account #:	1933
Reference:	Kingsley Woods Lot 17	Client:	Fogle's Well Pump & Treatment
Location:	10508 Pudding Lane	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	6/21/2022 0955	Site:	Kitchen Sink Tap
Date/Time Rec'd:	6/21/2022 1426	Treatment:	Multimedia
Chlorine ppm:	Free: ND Total: ND	pH:	6.1
Collected By:	J. Evans 0309JE	Well #:	HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Manganese	0.260	mg/L	0.05*	EPA 200.7	6/23/2022 / 0931 / MAP

### NOTES:

- 1 \* SMCL = Secondary Maximum Contaminant Level
- 2 Manganese Detection Limit: 0.010 mg/L
- 3 mg/L = milligrams per liter (also, parts per million)
- 4 Sub-contracted to Reference Lab #192
- 5 ND = None Detected
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 7 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : B21003436

Date Reported: 6/29/2022



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #:	152746	Account #:	1933
Reference:	Kingsley Woods Lot 17	Client:	Fogle's Well Pump & Treatment
Location:	10508 Pudding Lane	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	6/21/2022 0955	Site:	Kitchen Sink Tap
Date/Time Rec'd:	6/21/2022 1426	Treatment:	Multimedia
Chlorine ppm:	Free: ND Total: ND	pH:	6.1
Collected By:	J. Evans 0309JE	Well #:	HO-17-0374

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Turbidity	<0.30	NTU	<10	SM2130B	6/21/2022 / 1635 / TSD
Iron	<0.02	mg/L	0.3*	Hach 8146	6/21/2022 / 1640 / TSD

### NOTES:

- 1 \*SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 ND = None Detected
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 7 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy  
Building Permit # : B21003436

Date Reported: 6/22/2022

## Wolf, Kevin

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**From:** Wolf, Kevin  
**Sent:** Wednesday, June 29, 2022 9:02 AM  
**To:** Jeffrey Hyde  
**Cc:** Nick Mace  
**Subject:** RE: Toll Brothers - Kingsley Woods 17 - 10508 Pudding Lane - Radium Test  
**Attachments:** Analysis Report.pdf; Analysis Report.pdf; Analysis Report.pdf; O&M agreement 4.23.18.pdf

Jeff,  
Based on the results, it looks like the elevated turbidity is caused by excess iron. You will need install an iron removal treatment device and retest after treatment for turbidity and iron again. If the turbidity comes down below 10NTU's, an ICOP can be issued. If not, we will need to look at other options for well development as there is no deviation for turbidity in COMAR.

I also see that the septic permit has not been finalized. I need a copy of the BAT start-up certification letter from the manufacturer. I also do not have a copy of the operations and maintenance agreement. If this has been completed, please forward me a copy of the recorded document. If not, please get this completed as similar fashion as 10500 Pudding Lane. Let me know if you have any questions.

Kevin

**From:** Jeffrey Hyde <jhyde2@tollbrothers.com>  
**Sent:** Tuesday, June 28, 2022 7:51 AM  
**To:** Wolf, Kevin <KWolf@howardcountymd.gov>  
**Cc:** Nick Mace <nmace@tollbrothers.com>  
**Subject:** Re: Toll Brothers - Kingsley Woods 17 - 10508 Pudding Lane - Radium Test

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Morning Kevin

Have you had a chance to check on that radium result? Chavis should be setting up their final inspection soon so we can request the ICOP letter.

Thanks for your help

Jeff Hyde  
Senior Construction Manager  
Toll Brothers  
7164 Columbia Gateway Drive Columbia, MD 21046

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**From:** Jeffrey Hyde  
**Sent:** Friday, June 24, 2022 10:12:44 AM  
**To:** Wolf, Kevin <KWolf@howardcountymd.gov>  
**Cc:** Nick Mace <nmace@tollbrothers.com>  
**Subject:** Toll Brothers - Kingsley Woods 17 - 10508 Pudding Lane - Radium Test

Morning Kevin

We are getting close to submitting for ICOP for this lot. Do you have radium test results for this house? Would like to get ahead of it if remediation/testing is needed.

Thanks

**Jeff Hyde**

**Senior Construction Manager, DC Metro**

Toll Brothers

3103 Cavalier Wood Rd, Ellicott City, MD - MARYLAND 21042

**FORTUNE**  
**WORLD'S MOST**  
**ADMIRED**  
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**10<sup>TH</sup> YEAR ON FORTUNE WORLD'S  
MOST ADMIRED COMPANIES LIST**

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HOWARD COUNTY HEALTH DEPARTMENT

64741

DATE 1/25/19

WS

Received From

PHONE #

778-5963

For

☐ CASH  
☒ CHECK

NO.

5093

Well permits (6)  
Conversion of Test Wells  
lots 14, 15, 16, 17, 32 and 36

Nine hundred sixty

Dollars

\$ 960.00

Received By

Alene

---

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

**MEMORANDUM**

**TO:** Alexander's Well Drilling  
Attn: Randall Alexander MSD 576  
P.O. Box 443  
126 W. Main St  
Fairfield, PA 17320

**FROM:** Joseph Cabahug  
Licensed Environmental Health Specialist 001997 *Dec 19/2018*  
Howard County Health Department  
Well & Septic Program

**RE:** Kings Forest Subdivision – Test well Permits  
Special Conditions for Conversion to Potable Well

**DATE:** December 19<sup>th</sup>, 2018

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The following comments apply to the above referenced Well Permit Application. Please Read through and complete as needed.

**A. Lot 17 Will require 50' of Steel Casing or 10' into competent bedrock, whichever is deeper.**

10. A waiver for the location of the septic systems and wells, as shown on [Percolation Certification Signed 06/18/2014 and Revision Submitted 12/18/2018], has been approved by MDE. As a condition of the approved [sic] of this waiver the initial and all replacement wells on lots 17, 26, 27, and 33 – 35 Will require Steel Casings to be installed to 50' or 10' into competent bedrock, whichever is deeper.

**B. All lots in the Kings Forest Subdivision are within the Baltimore Gneiss Formation and will require Water Quality Tests for Radium to be collected at the time of the Yield Test.**