

RECEIVED
MAY 06 2020
HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM

B 1 <div style="font-size: 2em; font-weight: bold; text-align: center;">66403</div>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type <div style="font-size: 1.5em;">56420-J</div>	STATE PERMIT NUMBER <div style="font-size: 1.5em;">HO-18-0137</div>
Date Received (APA) <u>11/01/19</u> <div style="font-size: 0.8em;">8 MM DD YY 13</div>		B 3 LOCATION OF WELL <div style="font-size: 1.2em;">Howard</div> <div style="font-size: 0.8em;">8 COUNTY 21</div> <div style="font-size: 1.2em;">Kings Forest</div> <div style="font-size: 0.8em;">23 SUBDIVISION 42</div> <div style="font-size: 0.8em;">SECTION 44 46 LOT 48 50</div> <div style="font-size: 1.2em;">Ellicott City</div> <div style="font-size: 0.8em;">52 NEAREST TOWN 71</div>	
OWNER INFORMATION <div style="font-size: 1.2em;">Jole Brothers</div> <div style="font-size: 0.8em;">15 Last Name Owner First Name 34</div> <div style="font-size: 1.2em;">7164 Columbia Gateway DR</div> <div style="font-size: 0.8em;">36 Street or RFD 55</div> <div style="font-size: 1.2em;">Columbia, Md 21046</div> <div style="font-size: 0.8em;">57 Town 70 State 72 Zip 76</div>		DRILLER INFORMATION <div style="font-size: 1.2em;">Andrew Houseman</div> <div style="font-size: 0.8em;">Driller's Name 76 License No. 81</div> <div style="font-size: 1.2em;">M S D 224</div> <div style="font-size: 1.2em;">Foales Well Drilling, LLC</div> <div style="font-size: 0.8em;">Firm Name</div> <div style="font-size: 1.2em;">P.O. Box 202 Woodbine Md 21797</div> <div style="font-size: 0.8em;">Address</div> <div style="font-size: 1.2em;">11-1-19</div> <div style="font-size: 0.8em;">Signature Date</div>	
B 2 WELL INFORMATION <div style="font-size: 0.8em;">1 2</div> <div style="font-size: 1.2em;">APPROX. PUMPING RATE 5</div> <div style="font-size: 0.8em;">(GAL. PER MIN.) 8 12</div> <div style="font-size: 1.2em;">AVERAGE DAILY QUANTITY NEEDED 500</div> <div style="font-size: 0.8em;">(GAL. PER DAY) 14 20</div>		B 4 SOURCES OF DRILLING WATER 1 Well water 2 Static 3 3/11/20 Static 21' 10 GPM Pump 180'	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input 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		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="text-align: center;"> NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> </div> <div style="font-size: 1.2em;">30</div> <div style="font-size: 0.8em;">DISTANCE FROM ROAD ENTER FT OR MI 38 39</div> <div style="font-size: 1.2em;">Ft</div> <div style="font-size: 0.8em;">TAX MAP: 23 BLK: 23 PARCEL 148</div>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET <div style="font-size: 0.8em;">24 28</div>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="font-size: 1.2em;">Howard</div> <div style="font-size: 0.8em;">COUNTY NAME COUNTY NO. 13</div> <div style="font-size: 0.8em;">STATE SIGNATURE INSERT S 41</div> <div style="font-size: 0.8em;">DATE ISSUED 12/26/19</div> <div style="font-size: 0.8em;">43 MM DD YY 48 CO SIGNATURE EXP. DATE</div> <div style="font-size: 1.2em;">DOG: 3/19/20 (S) DOY: 3/17/2020</div>	
APPROXIMATE DIAMETER OF WELL <u>6</u> INCH <div style="font-size: 0.8em;">NEAREST INCH</div>		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 	
METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> Drive-POINT other _____		REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <u>HO 2018G004</u> PERMIT No. <u>110-18-0137</u> <div style="font-size: 0.8em;">70 71 72 73 74 75 76 77 78 79</div>			
SPECIAL CONDITIONS RADIUM SAMPLES REQUIRED NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

RECEIVED

NOV 02, 2015

HOWARD COUNTY HEALTH DEPT.
FOOD PROTECTION PROGRAM

Well Permit No. HO-18-0137
Location of Property: Reynolds Ct Ellicott City, Md
Subdivision: Kings Forest Lot#: 11
Well Driller/Tech: Fogles Andrew Houseman MSD224 Owner/Buyer: Toll Brothers

Total time 15 Mins to reach pumping water level 36 ft. below M.P.

[illegible]

RECEIVED

MAY 06 2020

**HOWARD COUNTY HEALTH DEPT.
COMMUNITY HYGIENE PROGRAM**



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

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: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535

Address: P.O. Box 63

Woodbine, Maryland 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): Dave 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 #: 11 Well Tag #: HO-18-0137 ✓

Site Address: 10617 Reynolds Ct
Ellicott City, MD 21042

Submersible Pump Data

Make: Grundfos

Model #: 1550ED1-180

Pump Capacity: 15

Well Yield: 10

Depth of well encountered at time of pump installation: 200 (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 psi (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

Date 7/25/2023

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

Date Insp. Requested: 7/25/23 Date Insp. Approved: 11/22/23 Inspector: RR

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

✓
✓
✓
✓
✓
✓
✓

7/25/2023
well tag only 3" above grade

(Revised form 10/24/2018)



11/22/2023
RR
well tag only 3" above grade

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – JUNE 13, 2024

December 13, 2023

Homeowner
10617 Reynolds Court
Ellicott City, MD 21042

**RE: Kingsley Woods, Lot 11
10617 Reynolds Ct.
Building Permit: B23000641
Well Permit: HO-18-0137**

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 **11/17/2023**. Final approval of the well line connection to the dwelling was granted on **11/22/2023**. The well construction was completed on **3/19/2020**. Water samples were collected on **11/1/2023**.

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.

Radium samples were also collected on **11/27/2023**. Results showed a combined level of Radium 226/228 **2.6 ± 1.1 pCi/L**. The combined level of Radium 226/228 was below the maximum contaminant level (MCL) of 5 pCi/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-18-0137. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

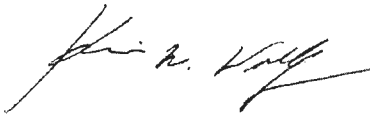
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will 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.**

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>

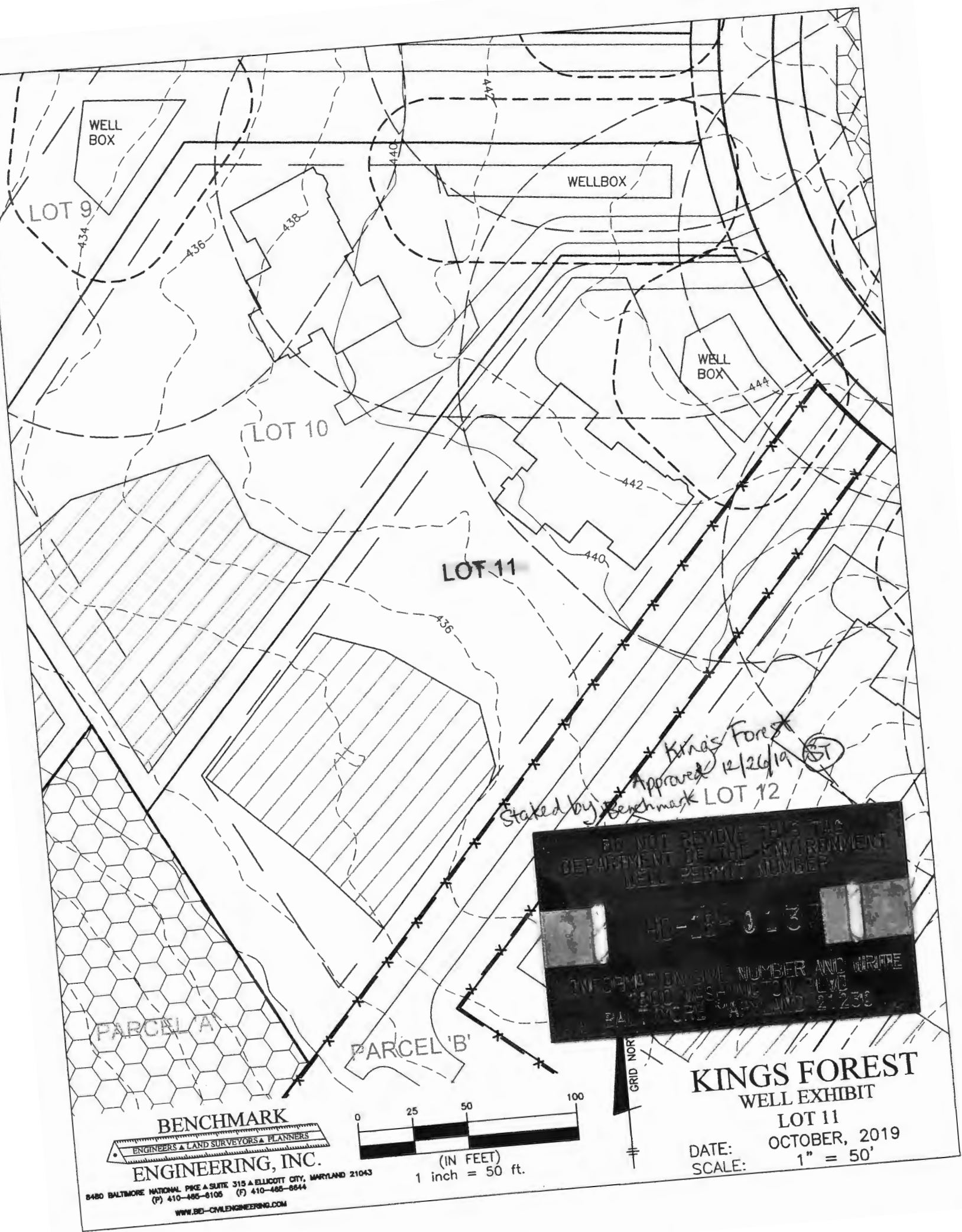
In closing, please refer to our "Homeowner Fact Sheet" for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environment website which elaborates in further detail operation and maintenance of your Septic System.

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



WELL BOX

LOT 9

WELLBOX

WELL BOX

LOT 10

LOT 11

Kings Forest
Approved 12/26/19

Staked by Benchmark LOT 12

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

HC-11-013

INFORMATION NUMBER AND WRITE
2000 WASHINGTON LANE
BALTIMORE, MARYLAND 21230

PARCEL 'A'

PARCEL 'B'

BENCHMARK

ENGINEERS & LAND SURVEYORS & PLANNERS

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE & SUITE 315 & ELICOTT CITY, MARYLAND 21043
(P) 410-465-8105 (F) 410-465-8644
WWW.BE-CVLENGINEERING.COM



(IN FEET)
1 inch = 50 ft.

GRID NORTH

KINGS FOREST
WELL EXHIBIT

LOT 11

DATE: OCTOBER, 2019
SCALE: 1" = 50'

Send Report To: Bert Nixon

Howard County Health Department
Bureau of Environmental Health
6 Stanford Blvd.
Columbia, Maryland 21045

State of Maryland
MDH - Laboratories Administration
Division of Environmental Sciences
TRACE METALS LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

Lab No. Date Received



E20003221002

Received: 03/20/2020

Metals

HOST0137NA

LABORATORY ANALYSIS REQUEST

DO NOT WRITE ABOVE THIS LINE

Please Print

Sample ID No: HOST0137NA Site Name: King's Forest Lot 11 County: Howard

Sample Source: Pudding Ln, King's Forest, Lot 11 Collector: Susan Thomas
Street Town or City Name

Date Collected: 3/19/2020 Time Collected: 1:22 a.m. / 6 p.m. Phone #: 410-313-6287

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

Preservative Used: ☒ HNO₃ 2 mL pH: 5.5 pH: 1.99
(field use only) (lab use only)

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid
Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid
Code ☐ ☐ ☐ Non-Community ☐ Sediment ☐ Other _____
☒ Private

Specify Program: ☐ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other _____

Type of Sample Preparation: ☒ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals
(field preparation required)

Remarks: collected at end of yield

*Place a ☒ by the element(s) requested for testing

<input checked="" type="checkbox"/>	Element	Lab Use	<input checked="" type="checkbox"/>	Element	Lab Use	<input checked="" type="checkbox"/>	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Uranium (U)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cobalt (Co)			Zinc (Zn)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
<input checked="" type="checkbox"/>	Sodium (Na)	<u>SHS</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: _____

Date Reported: ____/____/____

•Phone: (443) 681 - 4596

•Fax: (443) 681 - 4507

Send Report To: Bar N. Ken

Health Department
Environmental Health
1700 Ashland Avenue
Baltimore, Maryland 21202

State of Maryland
MDH - Laboratory Administration
Division of Environmental Services
TRACE METALS LABORATORY
1700 Ashland Avenue
Baltimore, Maryland 21202

LABORATORY ANALYSIS REQUEST

Please Print

Sample ID No: 88010114 Site Name: King's Forest Lot 11 County: Baltimore
Sample Source: Surface Water Collector: Bar N. Ken
Date Collected: 3/17/2005 Time Collected: 10:30 AM Phone #: 410-326-5447

REC'D BY WELL & SEPTIC
20 APR 14 AM 9:11

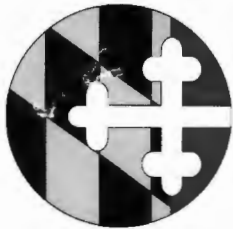
Sample Preserved By: ☐ Field ☒ FSR1
Preservative Used: None ml. pH: 7
Sample Type: ☐ Private ☐ Non-Community ☐ Community ☐ Drinking Water
Data Category: ☐ Sediment ☐ Sludge ☐ Source (Raw Water) ☐ Other
☐ Liquid ☐ Solid ☐ Distribution (Finished)

Specify Program: ☐ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other
Type of Sample Representation: ☒ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals
Remarks: collected at end of yield

*Place a 2 by 4 by 6 label on the container for testing

#	Element	Lab Use	#	Element	Lab Use	#	Element	Lab Use
	Antimony (Sb)			Aluminum (Al)			Trivalent (T)	
	Arsenic (As)			Calcium (Ca)			Vanadium (V)	
	Barium (Ba)			Cadmium (Cd)			Nickel (Ni)	
	Beryllium (Be)			Copper (Cu)				
	Cadmium (Cd)			Iron (Fe)				
	Chromium (Cr)			Lead (Pb)				
	Mercury (Hg)			Magnesium (Mg)				
	Nickel (Ni)			Manganese (Mn)				
	Selenium (Se)			Molybdenum (Mo)				
	Sodium (Na)	<u>252</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: _____ Date Reported: _____
*Phone: (410) 521-4506 *Fax: (410) 581-4507



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
TRACE METALS LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project No: E20003221 Date Coll.: 03/19/2020 Date Received: 03/20/2020 Submitted By: Susan Thomas

Field ID: HOST0137NA
Lab No.: E20003221002

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	5.31	ppm	03/25/2020

Comments:

Approved by:

Wanda L. Thomas

Approval date: 04/09/2020

**The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1. Samples are tested as received.

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.

REC'D BY WELL & SEPTIC
'20 APR 14 AM9:11

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

State of Maryland
MDH-Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205
WATER ANALYSIS



CHECK TESTS	TESTS	Error Code	RESULTS
	Alkalinity (Total)		
	Ammonia - N		
✓	Chloride		
	Conductance*, Spec.		
✓	Dissolved Solids (Total)		
	Hardness		
	Fluoride		
	Nitrite, N		
	Nitrate + Nitrite, N		
	Sulfate		
	Total Solids		
	Turbidity*		
	Other:		
	* TEMP. BLANK - 7°C ; INSUFFICIENT AMOUNT OF ICE IN COOLER TO SURROUND TEMP. BLANK JBB 3/20/22		

SUBMITTER'S COPY

Partial List of Submitter Codes

Code	Description	Code	Description
1-30	County Codes	53	Chesapeake Bay & Special Projects
41	Individual Septics & Wells Program	59	Standards & Certification Program
42	Public Drinking Water	63	Division of Food Control
43	Recreational Sanitation & Migrant Camps, MDH	64	Engineering & Maintenance, MDH
44	STP Inspection Division	65	Division of Community Services
45	Hazardous & Solid Waste Admin. (Landfill Samples)	66	Office of Attorney General
46	Pre-Treatment Enforcement Division	67	Dept. of General Services
48	Licensing and Certification, MDH	77	E.P.A.
52	Water Quality Monitoring Program	91	State Highway Administration
		96	L.U.S.T./U.S.T./CERCLA
		99	Unknown

Codes for Federally Funded Projects (leave box blank if not federal)

Code	Description	Code	Description
S	Safe Drinking Water Act (SDWA)	N	National Pollution Discharge Elimination System (NPDES)
R	Resource Conservation and Recovery Act (RCRA)	M	Miscellaneous (Other)

Partial List of Data Category Codes

Code	Description	Code	Description
1F	Sediment Samples	2F	Innovative Disposal
2A	Industrial Effluents/Compliance	5A	Solid Waste/Landfills
2B	Industrial Grab	5B	Kidney Dialysis
2C	Municipal Compliance	5C	Commercial Bottled Waters
2D	Municipal Grab	5D	Misc. Wastewaters
4A	MCL Surveys	5E	Misc. River/Stream
4B	Routine Monitoring & Other Communities	5F	Misc. Drinking Water
4D	Potable - County Community	5G	Swimming Pools
4E	Potable - Non Community	5H	Marine or Estuarine Natural Bathing Areas
4F	Potable - Private Wells		
4G	Real Estate Trans./Change Samples		

Partial List of Error Codes

Code	Description	Code	Description
A	Laboratory Accident	J	Wrong sample type
C	Mechanical/Materials failure	RR	No sample received
D	Insufficient Sample	X	Improper preservation
E	Sample past holding time	LL	Mislabeled sample

REC'D BY ENV HEALTH
20 APR 1 AM 9:14



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Certificate of Analysis

Lab Project NoE20003220 Date Coll. 03/19/2020 Date Received: 03/20/2020 Submitted By: S. Thomas

Field ID: HOST0137CLTDS
Lab No.: E20003220001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	<10	mg/L	03/30/2020
Total Dissolved Solids	SM 2540C	62	mg/L	03/23/2020

Comments:

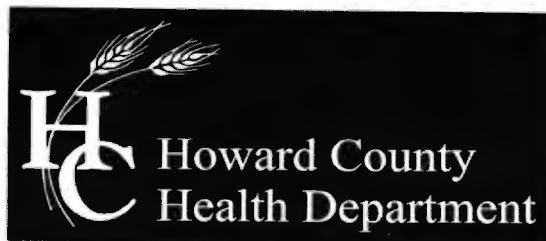
Approved by:

Approval date: 03/31/2020

*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. Samples are tested as received.

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.

REC'D BY ENV HEALTH
'20 APR 1 AM 9:14



Bureau of Environmental Health

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

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

Sodium, Chloride and Total Dissolved Solids water sampling results

February 16, 2021

Toll Brothers
7164 Columbia Gateway Dr, Suite 230
Columbia, MD 21046

Re: Kings Forest Lot 11
Reynolds Ct
Well Permit: HO-18-0137

Dear Toll Brothers,

The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from your well water. These samples were collected directly from the raw well water when your well was drilled.

Sodium from your well measured 5.31 mg/L. There is no maximum contaminant level for sodium, however elevated sodium levels in drinking water could affect individuals on low-salt diets. If anyone in your household is on a low-salt diet, you may want to discuss these results with your physician.

Chloride and TDS are both considered secondary contaminants, meaning high concentrations can affect taste, color, odor, or corrosive properties of water but present no risk to health. The secondary maximum contaminant level for chloride is 250 mg/L; **chloride from your well measured <10 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 62 mg/L.**

Feel free to contact me at the number or email below with any questions regarding the results of water sampling.

Respectfully,

Susan Thomas
Environmental Health Specialist
Howard County Health Department
Well and Septic Program
410-313-6287
sathomas@howardcountymd.gov

✓Cc: File

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:	162372	Account #:	1933
Reference:	Kingsley Woods Lot 11	Client:	Fogle's Well Pump & Treatment
Location:	10617 Reynolds Court	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	11/1/2023 1030	Site:	Pressure Tank
Date/Time Rec'd:	11/1/2023 1423	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	6.1
Collected By:	J. Evans 0309JE	Well #:	HO-18-0137

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	11/2/2023 / 1000 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	11/2/2023 / 1000 / KDR
Nitrate.	<0.40	mg/L (as N)	10	EPA 300.0	11/1/2023 / 1644 / CRS
Turbidity	9.58	NTU	<10	SM2130B	11/1/2023 / 1605 / KDR
Sand	ND	mg/L	5	Visual/Gravimetric	11/2/2023 / 1030 / CJM
Iron	0.59	mg/L	0.3*	Hach 8146	11/2/2023 / 0900 / CJM

NOTES:

- 1 Report revised to change lot number to Lot 11. 11/6/23 CH/FVAL
- 2 *SMCL = Secondary Maximum Contaminant Level
- 3 mg/L = milligrams per liter (also, parts per million)
- 4 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 5 NTU = Nephelometric Turbidity Units
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 ND:None Detected
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 9 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : B23000641

Date Reported: 11/6/2023

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #:	162803	Account #:	1933
Reference:	Kingsley Woods Lot 11	Client:	Fogle's Well Pump & Treatment
Location:	10617 Reynolds Court	Requested By:	Dave Fogle
	Ellicott City, MD 21042	Source:	Well Water
Date/ Time Collected:	11/27/2023 0815	Site:	Kitchen Sink
Date/Time Rec'd:	11/27/2023 1445	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	5.9
Collected By:	J. Evans 0309JE	Well #:	HO-18-0137

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Radium-226	0.6	pCi/L	****	903.0	12/11/2023 / 0920 / MJN
Radium-228	2.0	pCi/L	****	Ra-05	12/8/2023 / 1229 / SN

NOTES:

- 1 ****Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- 2 pCi/L = picocuries per liter
- 3 Radium 226 Detection Limit: 0.2 pCi/L; Radium 226 Error: +/- 0.4 pCi/L
- 4 Radium 228 Detection Limit: 0.8 pCi/L; Radium 228 Error: +/- 0.7 pCi/L
- 5 Sub-contracted to Reference Lab #278
- 6 ND:None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy**Building Permit # :** B23000641Date Reported: 12/11/2023

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

MEMORANDUM

TO: Fogle's Well Drilling
580 Obrecht Road
Sykesville, MD 21784

FROM: Susan Thomas
Environmental Health Specialist *ST 12/27/19*
Howard County Health Department
Well & Septic Program

RE: Kings Forest Subdivision – Well Permits Lots 1-36 and Parcel D
Special Conditions for wells

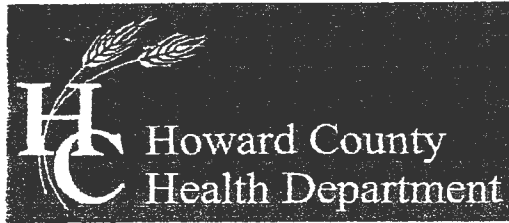
DATE: December 26th, 2019

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

- A. Lots 17, 26, 27, and 33-35 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 [Revised Percolation Certification Signed 11/12/2019] 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.**
- C. If the wells on Lot 13 or Lot 28 are within 10' of the driveway the well must be surrounded by bollards.**
- D. Lots 2, 8, 9, 13, 18, 21, 24, 26, 27, 28, 33, 34 and 35 will require samples for Sodium, Chloride and TDS to be collected at the time of the Yield Test.**



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

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Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

TO ALL INTERESTED PARTIES

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

Well Site Location:

Kings Forest Lot # 1 thru 17 Reynolds Ct
Subdivision/Property Name Lot # Road Name

☒ The well site has been staked by Benchmark
(professional land surveyor or company employing professional land surveyors)
on OCT 22, 2019 (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.



HOWARD COUNTY HEALTH DEPARTMENT

66428

DATE 11/17/19

Received From

PHONE #

☐ CASH
☐ CHECK

NO.

For

Dollars

\$

Received By