

C1 8736

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER 9517422

ST/CO USE ONLY DATE Received MM DD YY 8 13

DATE WELL COMPLETED MM DD YY 15 2 2007

Depth of Well 22 100 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-95-0427

OWNER Do Francis last name Wiggins first name Bridge LA TOWN Clarksville SUBDIVISION Walnut Grove SECTION 26/16/19 LOT 81

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows: Sand (0-86), Mica Rock (86-100).

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (25), GALLONS OF WATER (150), DEPTH OF GROUT SEAL (0-86).

CASING RECORD Form: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter (6), Total depth (90).

OTHER CASING (if used) Form: diameter, depth (feet) from to.

SCREEN RECORD Form: screen type or open hole (ST, BR, HO, PL, OT), DEPTH (nearest ft.) 10, 88, 100.

NUMBER OF UNSUCCESSFUL WELLS: 0, WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P).

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...

DRILLERS LIC. NO. 1 MSD 024, DRILLERS SIGNATURE (Must match signature on application), LIC. NO. 1 D

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST Form: HOURS PUMPED (3), PUMPING RATE (15), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (distance from land surface) BEFORE PUMPING (26), WHEN PUMPING (26), TYPE OF PUMP USED (S) submersible.

PUMP INSTALLED Form: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31), PUMP HORSE POWER (37), PUMP COLUMN LENGTH (43), CASING HEIGHT (+) above LAND SURFACE (2) (nearest foot).

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) See attached location.

B 1 0946  
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-95-0427  
70 fill in this form completely 79

Date Received (APA)  
11/3/05

OWNER INFORMATION

8 MM DD YY 13  
15 Last Name Owner First Name 34  
Land MKT& Consultants Inc  
36 Street or RFD 55  
3060 Washington RD  
57 Town 70 State 72 Zip 76  
Glenwood MD 21738

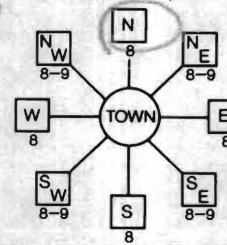
B 3 LOCATION OF WELL

8 COUNTY 21  
Howard  
23 SUBDIVISION 42  
Walnut Grove  
SECTION 44 46 LOT 48 50  
81  
Clarksville  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 73 2 M I 76 77 78

DRILLER INFORMATION

76 Driller's Name M S D 81 License No. 117  
Ralph E. Mayne  
81 Firm Name  
Ralph E. Mayne Inc  
Address  
17024 Hardy Rd Mt. Airy MD 21771  
Signature Date  
11-20-05

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD 30  
Watkins Bridge Ln  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
34 275 37 DISTANCE FROM ROAD 38 39  
ENTER FT OR MI  
TAX MAP: 28 BLK: 18 PARCEL 74

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12  
5  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20  
500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, DEWATERING
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13) A517422  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S  
DATE ISSUED 41  
12/20/06 Brian Baker 9/20/2007  
43 MM DD YY 48 CO SIGNATURE EXP. DATE  
NORTH GRID 509 000 EAST GRID 814 000  
50 55 57 63

APPROXIMATE DEPTH OF WELL 150 FEET  
24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

30 BORED (or Augered) JETTED Jetted & DRIVEN  
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)  
37 CABLE REVerse-ROTary DRive-POINT  
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. Well
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 814  
N 509

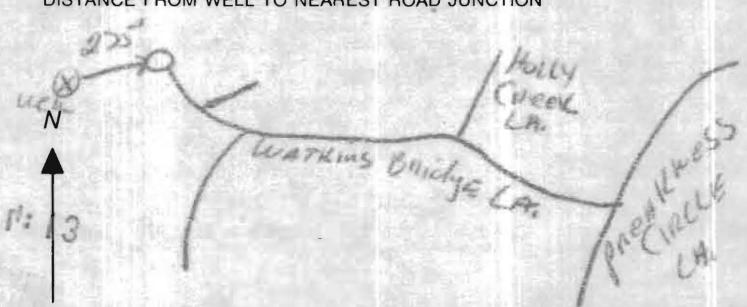
Sample taken during yield test  
1/2/07 (K)

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



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

APPROX. PERMIT NUMBER H02005G006  
PERMIT No H0-95-0427  
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0427  
 Location of property (road) Watkins Bridge La  
 Subdivision Walnut Grove Lot B1 Block 1B Plat 28 sec. Parc 74  
 Well Driller Joseph ~~Ralph~~ Mayne Owner De Frances  
 Depth of well 100  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 26'

I. High rate pumping -- reservoir drawdown

Time pump started 7:00 Pumping rate 15 gpm.  
 Total time 0 min. to reach pumping water level 26 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <u>5</u> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:15	26'	4 sec.	N/A	15 gpm.
7:30	26	4		15
7:45	26	4		15
8:00	26	4		15
8:15	26	4		15
8:30	26	4		15
8:45	26	4		15
9:00	26	4		15
9:15	26	4		15
9:30	26	4		15
9:45	26	4		15
10:00	26	4		15

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 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: NATIONAL WATER SVC Telephone #: 301-854-1333  
Address: P.O. Box 138  
Ashton, MD 20861

(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 RYCKE License# \_\_\_\_\_  
\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Selfridge Builders Telephone #: 410-531-8930  
Subdivision: Walnut Grove Lot #: 81 Well Tag #: HO-95-0427  
Site Address: 12449 WATKINS BRIDGE LA  
CLARKSVILLE

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>15 SQE 07-180</u>	Model #: <u>PA 800</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity: <u>15</u> GPM	Depth: <u>48"</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>15</u> GPM	NSF approved: <u>Yes</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>100</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

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

Torque arrestors or Cable guards are required - Must circle one CPS

Safety rope, if used, attached to inside of well casing with eye bolt N/A

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>Poly</u>	PVC sleeved to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>5'</u>
Depth of supply line: <u>4'</u> (36" min)	Sleeve caulked and sealed properly: <u>Yes</u>

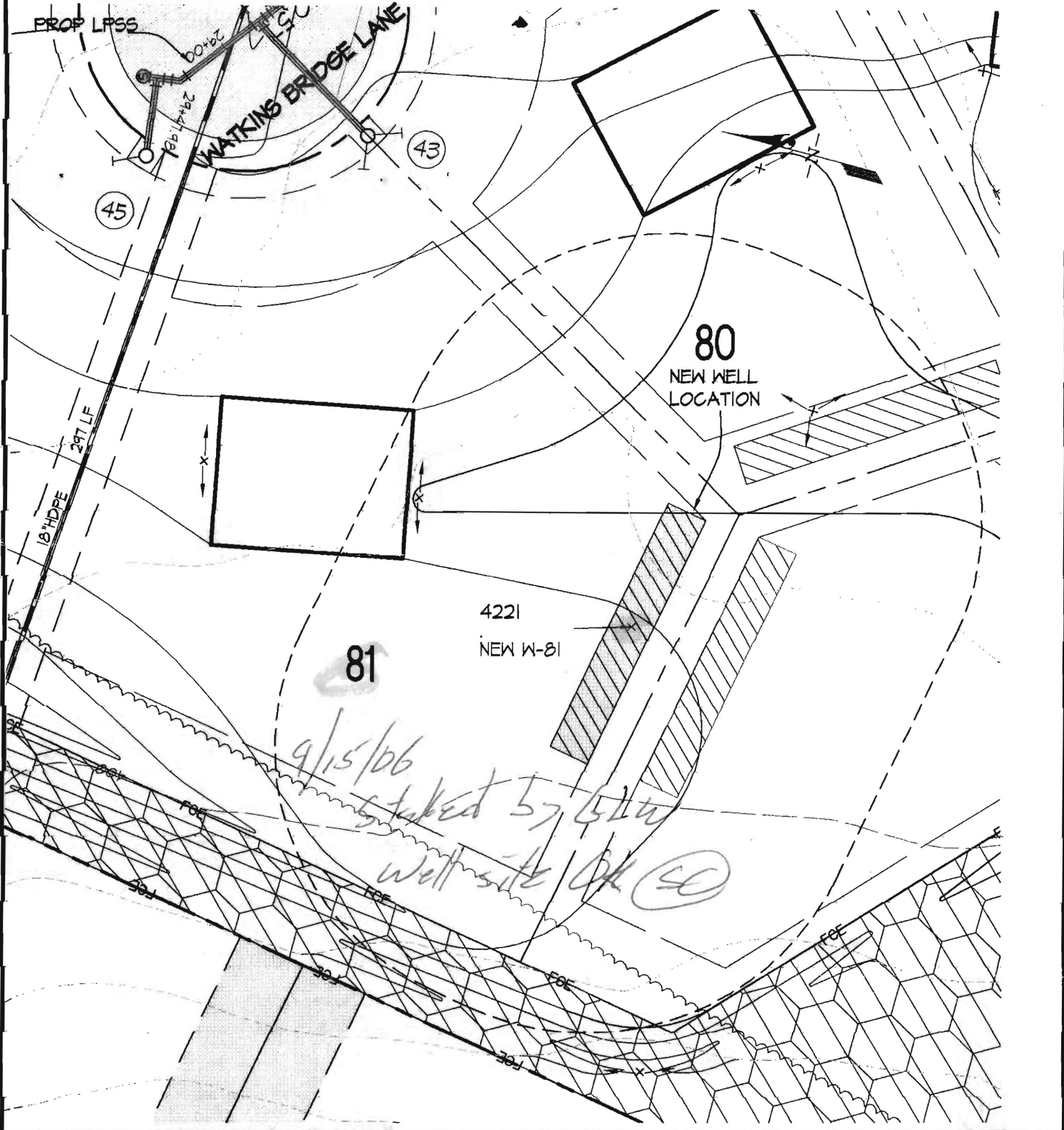
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation \_\_\_\_\_ date 1-8-11

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

Date Insp. Requested: 10/14/2010 Date Insp. Approved: OK (KW) 10/14/10

Inspection Data: Pitless adapter and water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope installed inside of well casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>



CONCEPTUAL HOUSE BOX



WELL BOX

4022 W-05

WELL SURVEY POINT

**LEGEND**

**WELL LOCATION EXHIBIT - LOT 81**

**WALNUT GROVE**  
 Lots 1 thru 88, Buildable Preservation Parcel "A",  
 Non-Buildable Preservation Parcels "B" thru "I" And  
 and Non-Buildable Bulk Parcel "J"

**GLW GUTSCHICK LITTLE & WEBER, P.A.**

CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS  
 3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK  
 BURTONSVILLE, MARYLAND 20866  
 TEL: 301-421-4024 BALT: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186

SCALE: 1"=50'

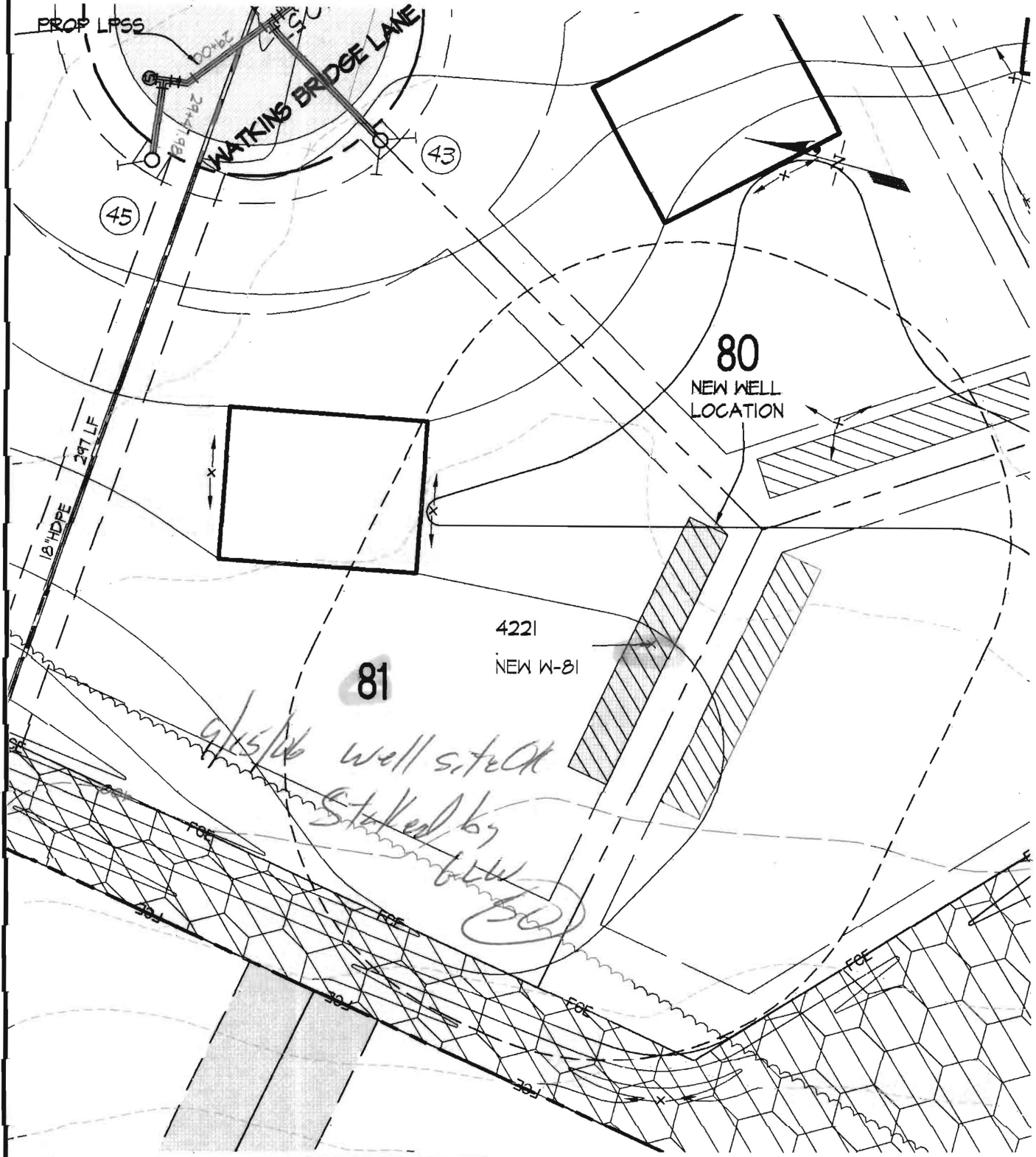
ZONING: RC/RR-DEO

TAX MAP/GRID: 28-18/17

GLW JOB NO: 00153

AUG., 2006

1 OF 1



80  
NEW WELL  
LOCATION

4221  
NEW W-81

81

*9/5/06 well site  
Staked by  
[Signature]*



CONCEPTUAL HOUSE BOX



WELL BOX

4022  
W-05

WELL SURVEY POINT

**LEGEND**

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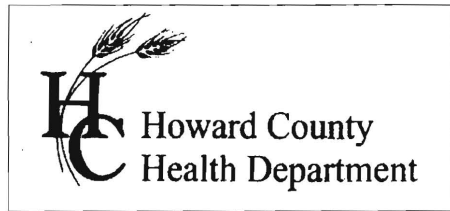
ZONING: RC/RR-DEO

TAX MAP/GRID: 28-18/17

GLW JOB NO: 00153

AUG., 2006

1 OF 1



7178 Columbia Gateway Dr. • Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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Penny E. Borenstein, M.D., M.P.H., Health Officer

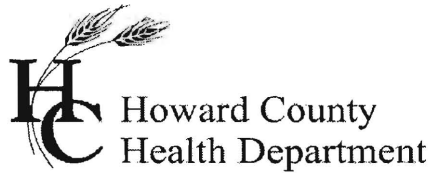
## ATTENTION WELL DRILLERS!!!

When submitting a well application for a new or replacement well, please indicate one of the following:

- The well site has been staked by Gutschick, Little & Weber  
on 11/10/2005
- \_\_\_\_\_ will 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



Bureau of Environmental Health  
7178 Gateway Drive Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
Website: [www.hchealth.org](http://www.hchealth.org)

*Peter Beilenson, M.D., M.P.H., Health Officer*

February 11, 2011

Homeowner  
12449 Watkins Bridge Lane  
Clarksville, MD 21029

RE: Walnut Grove, Lot 81  
12449 Watkins Bridge Lane  
BP #: B10001527  
Well Tag: HO-94-0427

Dear Sir:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 01/31/2011. Final approval of the well line connection to the dwelling was approved on 10/14/2010.**

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. The water sample results were found to be in compliance with COMAR water quality standards.

Gross Alpha and Beta samples were also collected on 01/02/2007. Both findings were below the maximum limit suggested by the EPA. At the time of the testing and with respect to these parameters, the future well water supply appears safe for all uses. No additional testing **for these parameters** will be required to secure the future Use and Occupancy.

Enclosed with this certificate, is a copy of the septic permit and the as-built along with important information regarding the use and maintenance of your septic system. Please read through carefully and thoroughly. Any questions regarding your well and/or septic, please call this office for guidance 410-313-1771.

#### **INTERIM CERTIFICATE OF POTABILITY**

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-94-0427. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.



This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 02/02/2011  
Date of Well Completion: 01/02/2007

Approving Authority,



Brian Baker, R. S.  
Environmental Sanitarian  
Well & Septic Program

cc: Building Inspector's Office  
Community Hygiene Program  
File



## TRACE LABORATORIES, INC

5 North Park Drive

Hunt Valley, MD 21030 USA

Telephone: 410/584-9099 / Fax: 410/584-9117

Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

## CERTIFICATE OF ANALYSIS

## Requester:

James H. Selfridge Builders Inc  
4781 Ten Oaks Road  
Dayton, Maryland 21036

S/O Number: 80264

Report Date: February 3, 2011

Property Sampled: 12449 Watkins Bridge Lane, 21029  
Sample Location: Pressure Tank  
Residual Chlorine: <0.1 mg/L

Building Permit #: B10001527  
Sampler ID #: 9813AM  
Samples Iced: Yes

County: Howard  
Map: 28

Subdivision: Walnut Grove  
Parcel: 74

Lot #: 81

Date/Time Collected in Field: February 2, 2011 @ 11:25 am

Date/Time Received in Lab: February 2, 2011 @ 3:00 pm

Well Tag #: HO-95-0427

Well Condition: 2-Piece Cap, Satisfactory Condition

Water Treatment/Conditioning: Sediment Filter

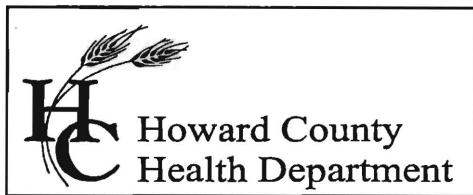
PARAMETER	METHOD	MCL/*SMCL	RESULT	PASS/FAIL
Total Coliform	SM 9223B	Absent	Absent	Pass
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass
Nitrate	SM 4500D	10 mg/L as N	4.5 mg/L as N	Pass
Turbidity	EPA 180.1	10 NTU	8.7 NTU	Pass
pH	EPA 150.1	*6.5-8.5 Units	7.8 Units	***
Sand		Negative	Negative	

Katherine C. Higgs  
Administrative Assistant

MCL: Maximum Contamination Level, an enforceable level established by the EPA

\*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA

\*\*\*A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



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website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

January 22 2007

Walnut Grove, LLC  
10705 Charter Drive  
Suite 320  
Columbia, Maryland 21044

*Watkins Bridge*

RE: Walnut Grove Subdivision, Lot 81  
Well Tag: HO - 95 - 0427

To Whom It May Concern:

A sample was collected during a yield test on January 2, 2007 and submitted to GPL Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of  $2.0 \pm 0.9$  picocuries/liter (pCi/L); while the **Gross Beta** level was  $3.3 \pm 1.1$  pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its target value of 50 pCi/L (roughly equivalent to the MCL of 4 millirem/year). At the time of testing and with respect to these parameters, the future well water supply appears safe for all uses. No additional testing for these parameters will be required to secure the future Use & Occupancy. However, other standard (potability) testing will still be necessary.

A copy of the test results is enclosed for your information. Please call this office at (410) 313 - 1773 if you have any further questions or concerns.

Sincerely,

*Bert Nixon*  
Bert Nixon, Deputy Director  
Bureau of Environmental Health

cc: Eric Dougherty, MDE Water Mgmt., Groundwater  
✓ Well & Septic property file

Send Report To:

Burt Nixon  
\_\_\_\_\_  
\_\_\_\_\_

State of Maryland  
DHMH - Laboratories Administration  
Division of Environmental Chemistry  
**RADIATION LABORATORY**

201 W. Preston Street, Baltimore, Maryland 21201  
*John M. DeBoy, Dr. P.H., Director*

**LABORATORY ANALYSIS REQUEST**

Sample Bottle No. A: KW81WA0427 No. B: \_\_\_\_\_ Field Blank Bottle No. A: \_\_\_\_\_ No. B: \_\_\_\_\_

Plant/Site Name: Walnut Grove County: Howard

Sample Source: Watkins Bridge Cr. Location: HO-95-0427  
(well no., lab sink, sample tap, etc.)

County:   Plant No.

CHECK (one per box)

Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (raw water) <input type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Collector: K. Wolf Telephone No: 410-313-2645

Date Collected: 1/2/07 Time Collected: 10 a.m. \_\_\_\_\_ p.m.

Nitric Acid Preserved: Yes  No  Iced: Yes  No

Submitters Code:   Federal Project:  Field Data: \_\_\_\_\_

Remarks: Sample taken during yield test  
pH \_\_\_\_\_ Chlorine \_\_\_\_\_

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	<u>201005-001</u>	<u>2.0 ± 0.9</u>	<u>1/5/07</u>
✓	Gross Beta	4100		<u>3.3 ± 1.0</u>	
	Radon-222 Bottle A	4004			
	Radon-222 Bottle B	4004			
	Field Blank A	4004			
	Field Blank B	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Supervisor: \_\_\_\_\_