

C1 08121

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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER 4520385 4520448

ST/CO USE ONLY DATE RECEIVED MM DD YY 07 11 12

DATE WELL COMPLETED MM DD YY 07 05 12

Depth of Well 22 245 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-2313

10/3/2013 O.K. BB

OWNER Land Marketing Consultants WELL SITE ADDRESS ASHLEIGH DRIVE TOWN CLARKSVILLE MO. SUBDIVISION WALNUT CREEK SECTION LOT 30

WELL LOG

Not required for driven wells

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandy, Sand Stone, White Mica, Sand Stone, White Mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 7 NO. OF POUNDS 200 GALLONS OF WATER 42 DEPTH OF GROUT SEAL (to nearest foot) from 48 TOP 52 ft. to 54 BOTTOM 58 ft.

CASING RECORD

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 22

OTHER CASING (if used)

SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER

C2

DEPTH (nearest ft.)

Table with columns: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76. Includes slot size and diameter of screen.

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 15 ft. WHEN PUMPING 145 ft. TYPE OF PUMP USED (for test) P piston

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above 49 LAND SURFACE - below 2 (nearest foot) 50 51

LATITUDE 39.141346 LONGITUDE 76.56763 (DEFAULT COORD. WGS 84)

NOTES:

DRILLERS LIC. NO. M SD 119 DRILLERS SIGNATURE LIC. NO. SD

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 14914

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-95-2313

537317F please type

fill in this form completely

Date Received (APA)

05 31 12

OWNER INFORMATION

Land Marketing Consultants, PO Box 482, LISBON MD. 21765

B 3

LOCATION OF WELL

Howard, WALNUT CREEK, CLACKSVILLE

DRILLER INFORMATION

Ralph A MAYNE, MSD 117, Ralph MAYNE Well Drilling, 12024 Handy Rd. Mt Airy MD. 21771

B 4

SOURCES OF DRILLING WATER

well

ASHLEIGH Court., 260, DISTANCE FROM ROAD 44, TAX MAP: 28 BLK: 11 PARCEL 49

B 2

WELL INFORMATION

APPROX. PUMPING RATE 5, AVERAGE DAILY QUANTITY NEEDED 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION, FARMING, INDUSTRIAL, COMMERCIAL, DEWATERING, PUBLIC WATER SUPPLY WELL, TEST, OBSERVATION, MONITORING, OPEN LOOP GEOTHERMAL, CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13), A520385, A520448, STATE SIGNATURE, DATE ISSUED 6/13/2012, CO SIGNATURE Brian Baber 6/13/2013

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered), JETTED, Jetted & DRIVEN, AIR-ROTary, AIR-PERCussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, Drive-POINT

REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL

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

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

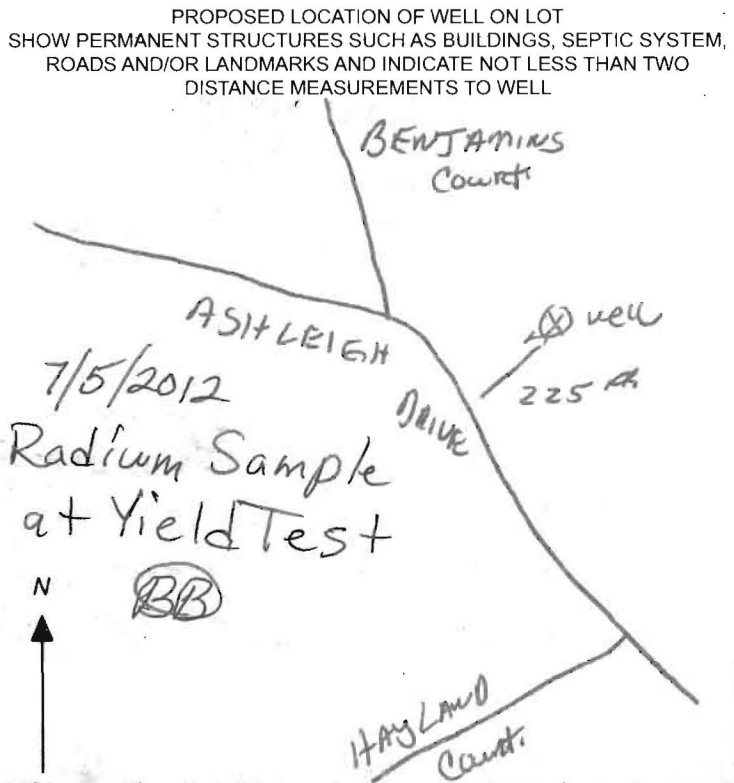
APPROP. PERMIT NUMBER H02006G020

PERMIT No. HO-95-2313

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Radium Sample, All Wells Must Be At Least 100' Apart



FIELD DATA SHEET
 HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-2313
 Location of property (road) ASHLEIGH DRIVE
 Subdivision Walnut Creek Lot 30 Block Plat Sec.
 Well Driller Ralph W. Wynn Owner Canal Marketing Consultants
 Depth of well 240 ft
 Distance of measuring point (M.P.) above ground 2 ft
 Static water level (S.W.L.) below M.P. 15

I. High rate pumping -- reservoir drawdown

Time pump started 10:30 Pumping rate 10 GPM
 Total time 15 min to reach pumping water level 45 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 \int gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:30	15 ft.	6 Sec	Test Started	10 GPM
10:45	45 ft	12 Sec		5 GPM
11:00	45 ft	12 Sec		5 GPM
11:15	45 ft	12 Sec		5 GPM
11:30	45 "	12 "		5 "
11:45	45 "	12 "		5 "
12:00	45 "	12 "		5 "
12:15	45 ft	12 Sec		5 GPM
12:30	45 ft	12 Sec		5 GPM
12:45	45 ft	12 Sec		5 GPM
1:00	45 "	12 "		5 "
1:15	45 "	12 "		5 "
1:30	45 ft	12 Sec		5 GPM
1:45	45 ft	12 Sec		5 GPM

**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# PI 0145

*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: WINCHESTER Telephone #: _____
Subdivision: WALNUT CREEK Lot #: 30 Well Tag #: HO-95-2913V
Site Address: 12138 HAVLAND FARM WAY
ELLICOTT CITY MD

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>GRUND FOS</u>	Make: <u>CAMPBELL</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>1550E10-220</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>5</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>245</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

Piping to house	House Connection
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 11-3-14

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

Date Insp. Requested: <u>11/5/14</u> <u>SC</u>	Date Insp. Approved: <u>11/21/14</u> <u>SC</u>
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"/> <u>1 1/2" x 1000 bolts 11/5 SC</u>
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"/> <u>1 1/2" x sleeve less than 5' 11/5 SC</u>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

11/21: line covered at foundation. David at NWS said that line runs under footer.



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

Peter L. Bielenon, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

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

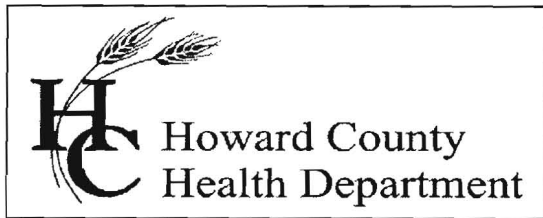
Well Site Location:

Walnut Creek	30	Ashleigh Drive
<u>Subdivision/Property Name</u>	<u>Lot #</u>	<u>Road Name</u>

- The well site has been staked by Fisher, Collins, and Carter, Inc.,
(professional land surveyor or company employing professional land surveyors)
on 04/22/12 (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.

Revised 3/11/07



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21046-2147

Main: 410-313-1774 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – JUNE 12, 2015

December 12, 2014

Homeowner
12138 Hayland Farm Way
Ellicott City, MD 21042

**RE: Walnut Creek, Lot 30
12138 Hayland Farm Way
Building Permit: B14001895
Well Permit: HO-95-2313**

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 **12/12/2014**. Final approval of the well line connection to the dwelling was granted on **11/21/2014**. The well construction was completed on **7/5/2012**. Water samples were collected on **11/10/2014**.

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 **7/5/2012**. Results showed a Gross Alpha level of **2.2 ± 2.2 pCi/L** and **Gross Beta** level of **< 4.0 ± 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.

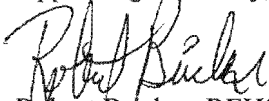
This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-95-2313. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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 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:

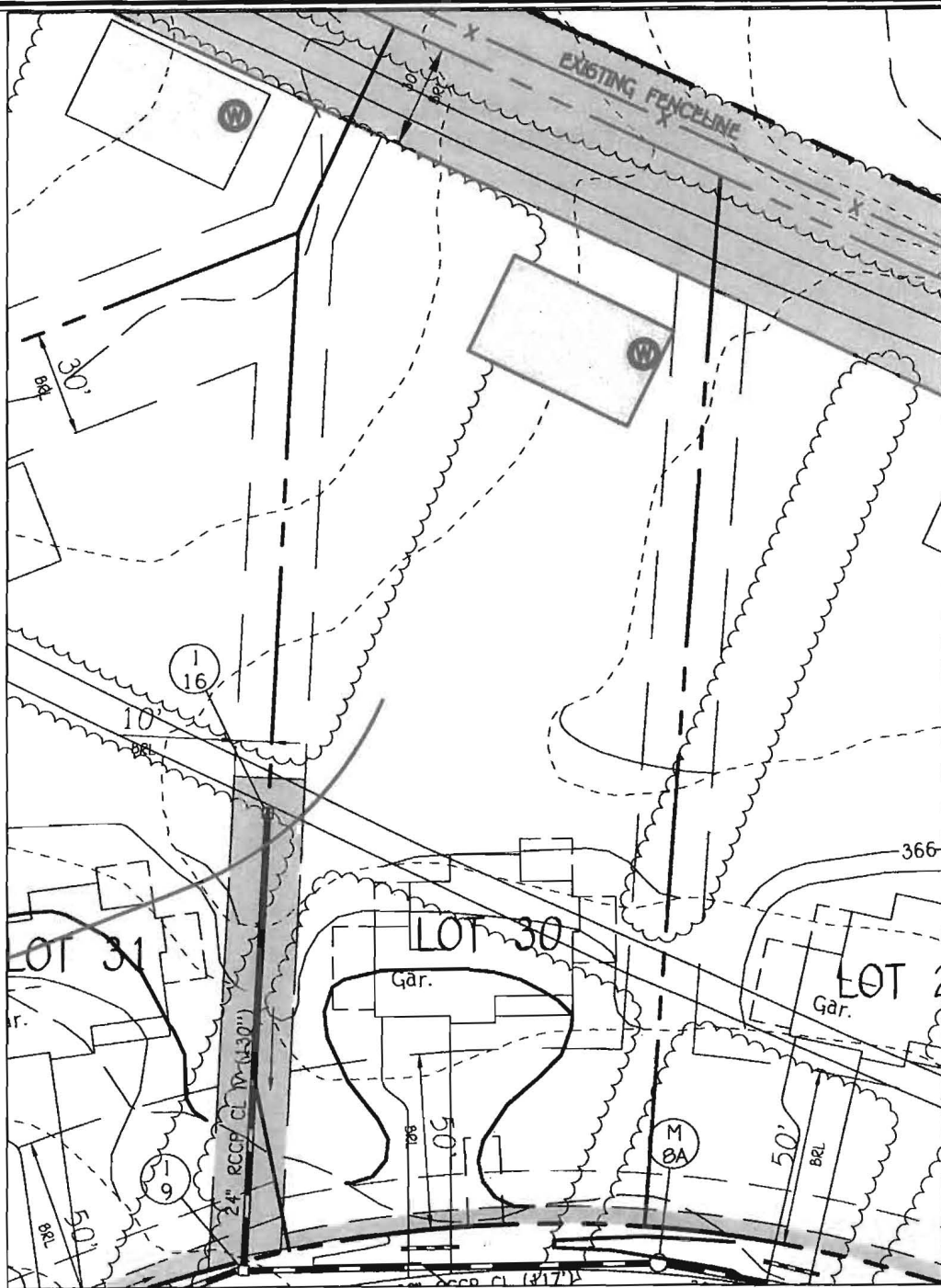
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,



Robert Bricker, REHS/R.S., L.E.H.S.
Environmental Sanitarian
Well & Septic Program

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



6/13/2012
Well Site
Plan (PB)



WELL LOCATION INFORMATION:

NORTHING = 572669
 EASTING = 1327616
 LATITUDE = 39°14'21"
 LONGITUDE = 76°56'46"

**LOT 30 WELL MAP
 WALNUT CREEK**

**PHASE TWO
 LOTS 1 THRU 22,
 NON-BUILDABLE PRESERVATION PARCELS 'A'-'D'
 & BUILDABLE BULK PARCELS 'E' & 'F'**

FISHER, COLLINS & CARTER, INC.

CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

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

ZONED: RC-DEO & RR-DEO

TAX MAP No. 28 GRID Nos. 4, 5, 10-12, 17, AND 18
 PARCEL No. 49

FIFTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

DATE: MAY 25, 2012 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 #: 97665 *Creek*
Reference: Walnut ~~Grove~~ Lot 30
Location: 12138 Hayland Farm Way
Ellicott City, MD 21042
Date/ Time Collected: 11/10/2014 0925
Date/Time Rec'd: 11/10/2014 1145
Chlorine ppm: Free: ND Total: ND
Collected By: J. Yeager 6176JY
Account #: 3123
Company: National Water Servicing
Requested By: Dave Rycke
Source: Well Water
Site: Pressure Tank
Treatment: Sediment Filter**
pH: 7.8
Well #: HO-95-2313

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	11/11/2014 / 0915 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	11/11/2014 / 0915 / LLO
Nitrate	<1.0	mg/L	10	601	11/11/2014 / 1330 / CRS
Turbidity	0.85	NTU	<10	SM18 2130B	11/11/2014 / 1400 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	11/11/2014 / 1400 / CRS

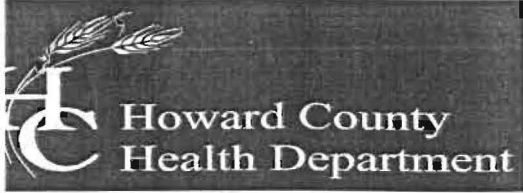
'OK' rd 12/10/2014

NOTES

- 1 ** Sample collected prior to Sediment Filter
- 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 NS = None Seen (NS indicates less than 5 mg/L)
- 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 Visual well check: Sealed, vented cap
- 9 pH tested in lab, chlorine level tested on site

Reason for Test : Use & Occupancy
Building Permit # : 14001895

Date Reported: 11/11/2014



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

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

September 4, 2012

Heritage Realty & Land Management
Attn. Tim Feaga
15950 North Avenue, P.O. Box 482
Lisbon, Maryland 21765

RE: Walnut Creek Lot 30
Ashleigh Drive
Well Tag: HO - 95 - 2313

Dear Mr. Feaga:

A sample was collected during a yield test on July 5, 2012 and submitted to the Department of Health & Mental Hygiene 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 2.2 ± 2.2 picocuries/liter (pCi/L), while the **Gross Beta** level was $< 4.0 \pm 0.0$ 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 targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply meets EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

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.

Sincerely,

A handwritten signature in black ink that reads 'Bert Nixon'.

Bert Nixon, Director

Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.

✓ Well & Septic property file

Send Report To: Bert Nixon

Howard Co. Env. Health

7178 Columbia Gateway Dr. Columbia, MD 21046

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY
301 W. Preston Street, Baltimore, Maryland 21201
John M. DeBoy, Dr. P. H., Director

Field 2313A
Blank

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: 952313BB No. B: Field Blank Bottle No. 1: 2313A No B:

Plant/Site Name: Walnut Creek - Lot 30 County: Howard

Sample Source: Ashleigh Dr. Location: HO-95-2313 (well no, lab sink, sample tap, etc.)

County: [1] [3] Plant No. [] [] [] [] [] [] [] [] [] []

CHECK (one per box)

Drinking Water [x]
Landfill []
Stream []
Other []

Community []
Non-community []
Private [x]
Other []

Source (raw water) [x]
Distribution (treated) []
MCL []

Emergency []
Routine [x]
Recheck []
Special []

Collector: B. Baker

Telephone No.: (410) 313-2643

Date Collected: 7/15/2012

Time Collected: a.m. 1:30 p.m.

Nitric Acid Preserved: Yes [x] No []

Iced: Yes [] No [x]

Submitters Code: [] []

Federal Project: []

Field Data: pH Chlorine

Remarks: Field Blank

Table with 7 columns: Test, EPA Code, Laboratory No., Results (pCi/L), Date Analyzed, Date Reported. Rows include Gross Alpha, Gross Beta, Radon-222 (Bottle A/B), Field Blank #A/B, Tritium, Ra-226, Ra-228, Total Uranium.

Date Received: 07/09/12

Supervisor: [Signature]

Tel. No.: (410) 767-5537 Fax No.: (410) 333-5373

Report To: Bert Nixon
Howard Co. Env. Health

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

7178 Columbia Gateway Dr.
Columbia, MD 21046

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: 952313BB No. B: _____ Field Blank Bottle No. 1: 2313A No B: _____

Plant/Site Name: Walnut Creek - Lot 30 County: Howard

Sample Source: Ashleigh Drive Location: H0-95-2313
(well no, lab sink, sample tap, etc.)

County: 1 3 Plant No.

CHECK (one per box)

Drinking Water
Landfill
Stream
Other

Community
Non-community
Private
Other

Source (raw water)
Distribution (treated)
MCL

Emergency
Routine
Recheck
Special

Collector: B. Baker

Telephone No.: (410) 313-2643

Date Collected: 7/5/2012

Time Collected: _____ a.m. 1:30 p.m.

Nitric Acid Preserved: Yes No

Iced: Yes No

Submitters Code:

Federal Project:

Field Data: _____
pH _____ Chlorine _____

Remarks: Sample Collected During Yield Test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	0035	2.2 ± 2.2	07/10/12	07/11/12
✓	Gross Beta	4100	0035	< 4.0	"	"
	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: 07/09/12

Supervisor: [Signature]

•Tel. No.: (410) 767 - 5537 •Fax No.: (410) 333- 5373