

C156540

SEQUENCE NO.  
(MDE USE ONLY)

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

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

COUNTY  
NUMBER

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

ST/CO USE ONLY  
DATE Received  
MM DD YY  
11/19/18

DATE WELL COMPLETED  
MM DD YY  
10-10-18

Depth of Well  
22 200 26  
(TO NEAREST FOOT)

OK  
12/3/18 SC

28 29 30 31 32 33 34 35 36 37

OWNER  
Dimitroco Paul  
last name first name

WELL SITE ADDRESS  
Underwood Rd.  
TOWN Sykesville

SUBDIVISION Willow Brooke SECTION LOT 4

WELL LOG  
Not required for driven wells

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

DESCRIPTION (Use  
additional sheets if needed)

FEET  
FROM TO

check  
if water  
bearing

Brown Shale 0 42

Grey L/S 42 75

Fracture 75 76 ✓

Grey L/S 76 175

Fracture 175 176 ✓

Grey L/S 176 200

GRROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

yes no  
Y N  
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 22 NO. OF POUNDS 2068

GALLONS OF WATER 132

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

CASING RECORD

casing  
types  
insert  
appropriate  
code  
below

ST STEEL CO CONCRETE  
PL PLASTIC OT OTHER

MAIN CASING TYPE

Nominal diameter  
top (main) casing  
(nearest inch)

Total depth  
of main casing  
(nearest foot)

ST 60 61 63 64 66 70

OTHER CASING (if used)

diameter  
inch

depth (feet)  
from to

EACH CASING

screen type  
or open hole

insert  
appropriate  
code  
below

ST STEEL BR BRASS  
PL PLASTIC HO OPEN  
OT OTHER

DEPTH (nearest ft.)

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 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED  
yes no  
Y N

CIRCLE APPROPRIATE LETTER  
A A WELL WAS ABANDONED AND SEALED  
WHEN THIS WELL WAS COMPLETED  
E ELECTRIC LOG OBTAINED  
P 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.

DRILLERS LIC. NO. 1 MSD 224

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

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10.4

METHOD USED TO  
MEASURE PUMPING RATE 1000

WATER LEVEL (distance from land surface)

BEFORE PUMPING 16 ft.

WHEN PUMPING 30 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine  
C centrifugal R rotary O other  
(describe below)

J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP YES 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)

PUMP HORSE POWER

PUMP COLUMN LENGTH  
(nearest ft.)

CASING HEIGHT (circle appropriate box  
and enter casing height)

+ above  
- below

LAND SURFACE 3 (nearest foot)

LATITUDE 39.318034

LONGITUDE 76.923527

(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.

TAG: 10/10/18 (SC)

<b>B 1</b>	<b>59755</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b> 563994-B please type	STATE PERMIT NUMBER <b>HO - 17 - 0358</b> 70 fill in this form completely 79
Date Received (APA) 08-30-18 8 MM DD YY 13		OWNER INFORMATION		
15 Last Name <b>Dimarco Paul</b>		34 First Name		
36 Street or RFD <b>1751 Underwood Rd</b>		55		
57 Town <b>Sykesville Md 21784</b>		76 State 72 Zip 76		
DRILLER INFORMATION		LOCATION OF WELL		
Driller's Name <b>Allen Compton</b>		8 COUNTY <b>Howard</b>		
Firm Name <b>Foxes Well Drilling, LLC</b>		23 SUBDIVISION <b>Willow Brooke</b>		
Address <b>P.O. Box 202 Woodbine Md 21797</b>		SECTION 44 46 LOT 48 50		
Signature <b>Allen Compton</b>		52 NEAREST TOWN <b>Sykesville</b>		
DATE <b>8-27-18</b>		B 3		
B 2 WELL INFORMATION		B 4		
APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b>		SOURCES OF DRILLING WATER		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b>		1. well water		
USE FOR WATER (CIRCLE APPROPRIATE BOX)		11 STREET ADDRESS <b>Underwood</b>		
<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)		
		NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST SOUTH		
		34 900 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39		
		TAX MAP: 9 BLK: 21 PARCEL 238		
		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL		
		COUNTY NAME <b>Howard</b> COUNTY NO. <b>21</b> STATE SIGNATURE <b>[Signature]</b> DATE ISSUED <b>09/17/18</b> CO SIGNATURE <b>[Signature]</b> EXP. DATE <b>09/17/19</b>		
APPROXIMATE DEPTH OF WELL <b>30.0</b> FEET		PROPOSED LOCATION OF WELL ON LOT		
APPROXIMATE DIAMETER OF WELL <b>6</b> INCH		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)		10/9 - 60' steel casing - at 200' - 10 gpm LOT 4 10/10 - 16' static - 30' meas. pt. - 10 gpm - started pumping @ 9 am - Na, Cl, TDS samples collected @ 10:30 am		
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX)		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.		
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE)				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER				
PERMIT No. <b>HO-17-0358</b>				
SPECIAL CONDITIONS				
NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED				

**Well Permit No. HO-17-0358**

**Location of Property:** Underwood Rd Sykesville, Md

Subdivision: Willow Brooke Lot: 4

**Well Driller/Tech:** Fogles Andrew Houseman MSD224 **Owner/Builder:** Paul DiMarco

**Depth of Well: 200'**

**Distance of measuring point (M.P.) above ground: 3'**

Static water level (S.W.L.) below M.P.: 16'

### High rate pumping—reservoir Drawdown

Time pump started: 9:00 Pumping rate: 10

Total time 30 mins to reach pumping water level 30 ft. below M.P.

**Recovery pump test data – observations to be recorded every 15 minutes**

[illegible]



HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WELL & SEPTIC PROGRAM  
TEL: (410)313-1771 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: All Around Plumbing, Inc Telephone #: 301-698-1028  
Address: 530 E. Church St  
Frederick 21701

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

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

Name (Print): J. Brendan Madden

License# 20020018121

\*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: Paul Dimarco Telephone #: 301-698-1028  
Subdivision: Willow Brooke Lot #: 4 Well Tag #: HO-17-0358 (ST)  
Site Address: 1735 Underwood Rd  
Sykesville MD 21784

**Submersible Pump Data**

Make: Goulds  
Model #: 7G510422C  
Pump Capacity 7 GPM  
Well Yield: 10 GPM

**Pitless Adapter**

Make: Boshart  
Model#: P-100-55  
Depth: 42" (36" min)  
NSF/WSC approved: ✓

**Well Cap and Electric Conduit**

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

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

Torque arrestors Cable guards, or other acceptable method used- Must circle one

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

**Piping to house**

Type: POLY  
PSI: 200 (160 psi min)  
Depth of supply line: 42" (36" min)

**House Connection**

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

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: J. Brendan Madden

date: 4/9/2020

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

Date Insp. Requested: 4/13/2020 Date Insp. Approved: 4/13/2020 Inspector: (ST)

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓ 48" \*  
Two piece cap installed and attached to casing securely ✓  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓ 46"  
Safety rope not outside of well cap/casing ✓  
Correct well tag attached properly and casing 8" above finished grade ✓ 24"  
Water supply line sleeved adequately at house connection ✓ 5'  
Adequate grout observed below pitless adapter ✓

\* extremely muddy conditions & flooding. Not able to stand on pitless. (ST) 4/13/20  
Contractor affirmed it was tight.



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**Maura J. Rossman, M.D., Health Officer****INTERIM CERTIFICATE OF POTABILITY****Expiration Date – FEBRUARY 28, 2021**

August 28, 2020

Homeowner  
1735 Underwood Road  
Sykesville, MD 21784**RE: Willowbrook, Lot 4**  
**1735 Underwood Road**  
**Building Permit: B20000078**  
**Well Permit: HO-17-0358**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **4/15/2020**. Final approval of the well line connection to the dwelling was granted on **4/13/2020**. The well construction was completed on **10/10/2018**. Water samples were collected on **8/12/2020, 8/14/2020**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-17-0358. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

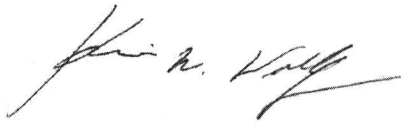
Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:  
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

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

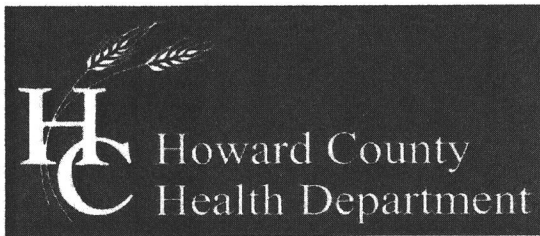
In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



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

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



## 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

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:

LOT 3 9/10/2018 (1)

Willow Brook

Subdivision/Property Name

2-3-4

Lot #

Underwood Rd

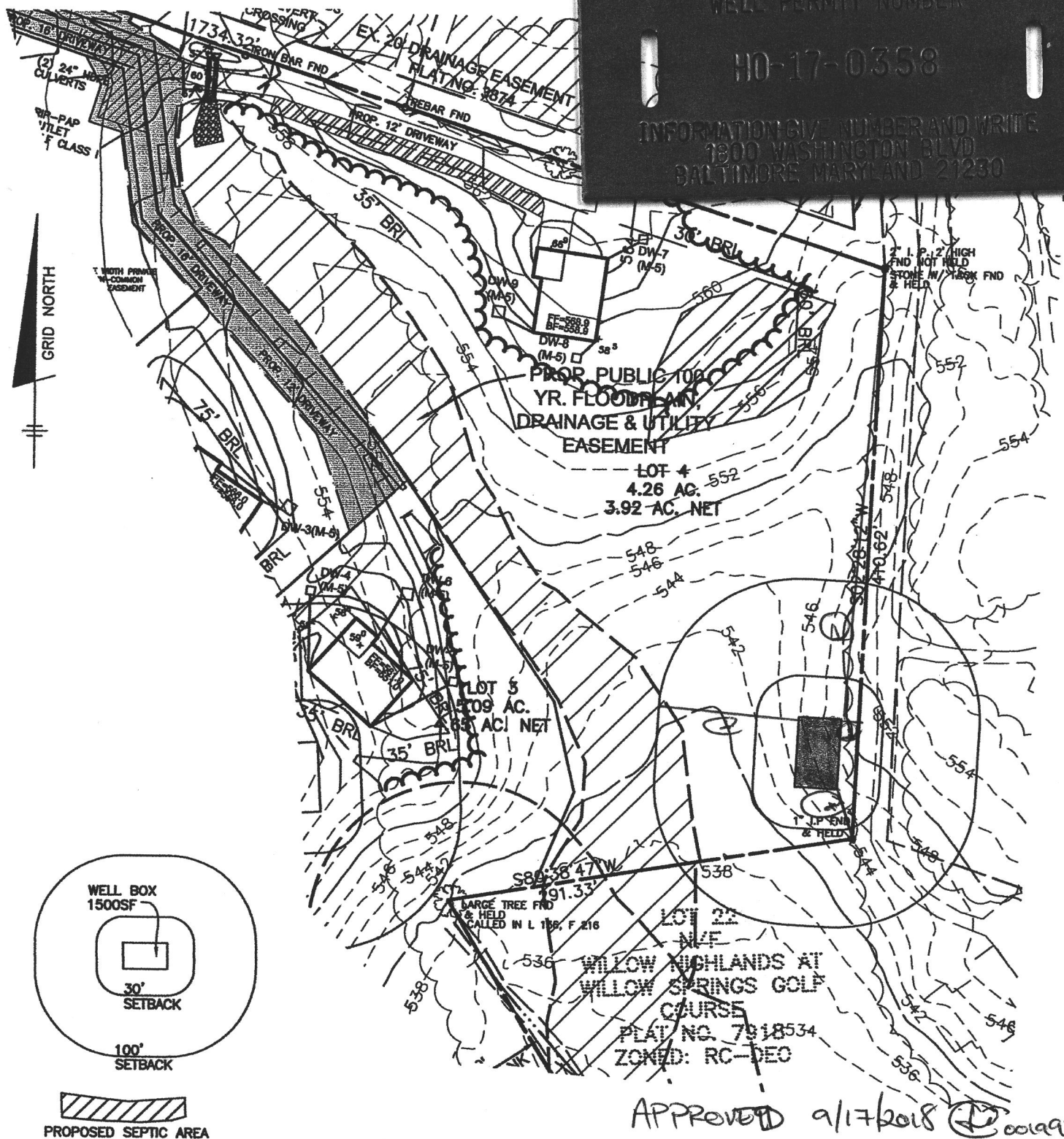
Road Name


☒ The well site has been staked by Benchmark Engineering  
(professional land surveyor or company employing professional land surveyors)  
on September 10, 2018 (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.





APPROVED 9/17/2018  001997  
STAKED BY Benchmark

PROJECT: **WILLOW BROOKE  
LOT 4**

TITLE: **WELL PLAN**

DATE: AUGUST 2018 PROJECT NO. 2661

DRAFT: JCO

F-18-065

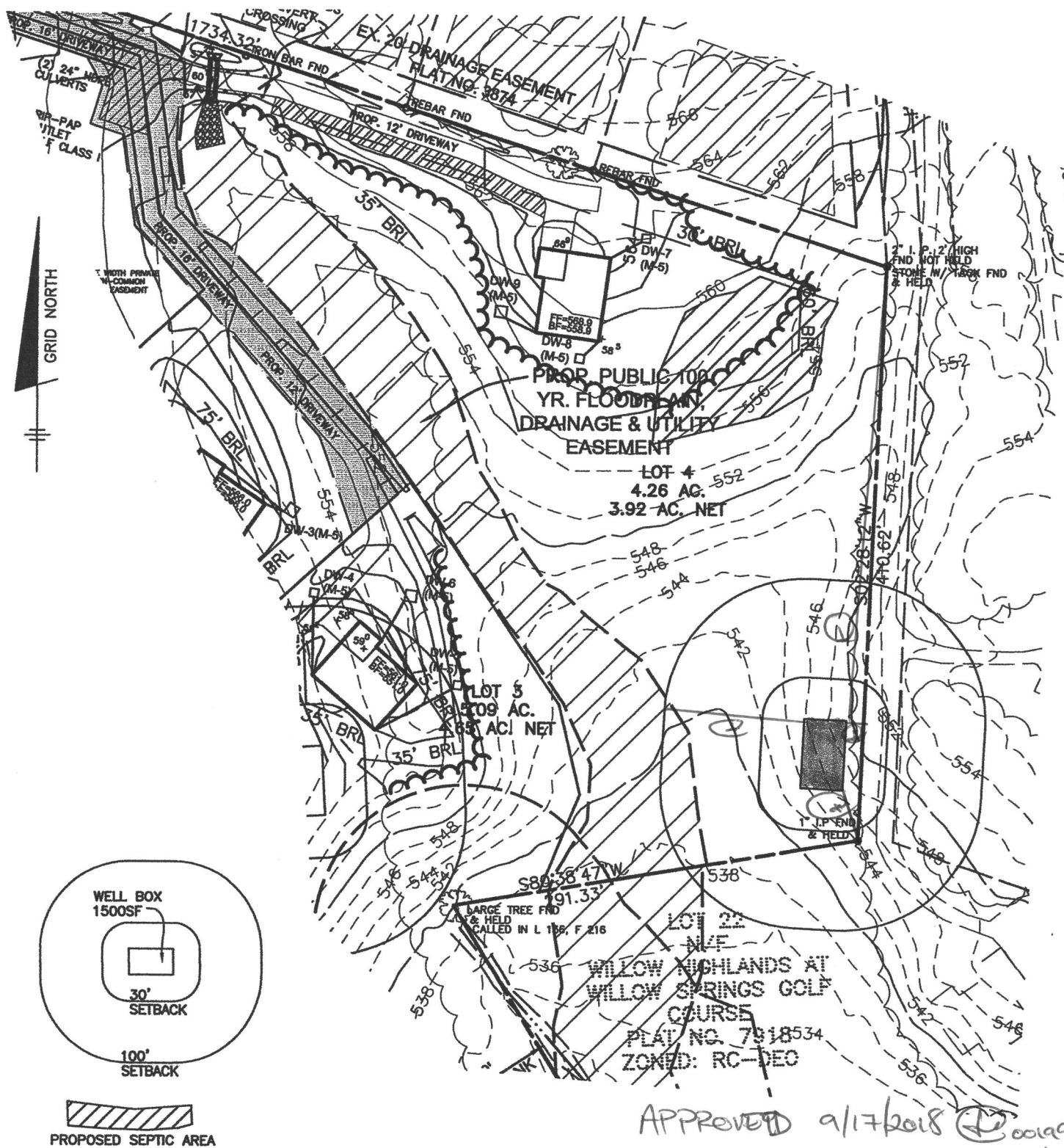
**ENGINEERS • LAND SURVEYORS • PLANNERS**

# ENGINEERING, INC.

480 BALTIMORE NATIONAL PKWY SUITE 315 ELICOTT CITY, MARYLAND 21043  
(P) 410-485-8105 (F) 410-485-8844  
WWW.BE-CIVILENGINEERING.COM

**OWNER/DEVELOPER**  
**PAUL S. DI MARCO**  
**1751 S. UNDERWOOD ROAD**  
**SYKESVILLE, MD 21784**  
**443-668-0100**

TAX MAP 9 AND 15, GRID 21,  
PARCEL 328 3rd ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



APPROVED 9/17/2018 STAKED BY Benchmark

**BENCHMARK**  
ENGINEERS & LAND SURVEYORS & PLANNERS  
ENGINEERING, INC.

OWNER/DEVELOPER  
PAUL S. DI MARCO  
1751 S. UNDERWOOD ROAD  
SYKESVILLE, MD 21784  
443-668-0100  
TAX MAP 9 AND 15, GRID 21,  
PARCEL 328 3rd ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

PROJECT: **WILLOW BROOKE LOT 4**  
TITLE: **WELL PLAN**  
DATE: AUGUST 2018 PROJECT NO. 2661  
DRAFT: JCO F-18-065

8480 BALTIMORE NATIONAL PIKE A SUITE 315 A ELICOTT CITY, MARYLAND 21043  
(P) 410-485-8100 (F) 410-485-8044  
WWW.BE-CIVILENGINEERING.COM

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

November 1, 2018

Paul DiMarco  
1751 Underwood Road  
Sykesville, MD 21784

Re: Water sample results for well #HO-17-0358, Willow Brooke Lot 4

Dear Mr. DiMarco,

The Health Department received results from testing for sodium, chloride, and total dissolved solids (TDS) from the new well drilled at Willow Brooke Lot 4.

Elevated sodium levels in drinking water could affect individuals on low-salt diets. The action level for sodium is 20 milligrams per liter (mg/L); **sodium from the well measured 9.56 mg/L.**

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 the well measured 20 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from the well measured 104 mg/L.**

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

Sincerely,



Sarah Collins, L.E.H.S.  
Howard County Health Department  
Well & Septic Program  
[SCollins@howardcountymd.gov](mailto:SCollins@howardcountymd.gov)  
410-313-6287

*Cc: Community Hygiene Program  
File*



Send Report To: Bert Nixon

Howard County Health Dept  
Bureau of Environmental Health  
8930 Stanford Blvd  
Columbia, MD 21046

State of Maryland  
DHMH - Laboratories Administration

Division of Environmental Sciences

**TRACE METALS LABORATORY**

1770 Ashland Avenue  
Baltimore, Maryland 21205

Lab No. Date Received



**E19001235001**

Received: 10/11/2018

Metals

HO-17-0358

**LABORATORY ANALYSIS REQUEST**

Do not write above this line

**SAMPLE TESTED AS RECEIVED**

Please Print

Sample ID No: HO-17-0358 Site Name: Willow Brooke - Lot 4 County: Howard

Sample Source: 1721 Underwood Rd. Sykesville Collector: S. Collins  
Street Town or City Name

Date Collected: 10/10/2018 Time Collected: 10:30 a.m. / p.m. Phone #: 410-313-6287

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

Preservative Used: ☒ HNO<sub>3</sub> 10/11/18 mL pH: 2.5

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid

Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid

Code ☐ Non-Community ☐ Sediment ☐ Other 4F  
☒ 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: Sample collected during yield test.

✓	Element	Lab Use	✓	Element	Lab Use	✓	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)				
✓	Sodium (Na)	<u>SHS</u>		Potassium (K)				
	Thallium (Tl)			Silver (Ag)				

Lab Supervisor: \_\_\_\_\_ Date Reported: \_\_\_\_/\_\_\_\_/\_\_\_\_

•Phone: (443) 681 - 4596

•Fax: (443) 681 - 4507

DHMH 4432 (05/17)

SUBMITTER'S COPY

# HOME LAND LABS

9106 Philadelphia Road, Suite 106  
Rosedale, MD 21237  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 353

108 Old Solomons Island Road, Suite 12  
Annapolis, MD 21401  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 106

3430 Rockefeller Court  
Waldorf, MD 20602  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 139

## Certificate of Analysis

Date Reported: 08/17/2020

Hague Quality Water  
814 E. College Parkway  
Annapolis, MD 21409

Date & Time Received: 08/14/2020 14:20

*This report is the sole property of Hague Quality Water. Any questions about the report MUST be directed to Hague Quality Water at (410) 757-2992.*

*Home Land Labs is not at liberty to discuss this report without written consent from Hague Quality Water.*

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<b>Sample Number:</b> 191072-01	Sample Time: 08/14/20 13:00	Preservation: Ice
<b>Location:</b> 1735 Underwood Road	Chlorine Residual: 0.0	Sampler: TEwards8309TE (Exp. 5/14/2022)
Sykesville, MD	Field pH: 6.0	Sample Point: Bathroom Sink

---

Parameter	Method	Result	Pass/Fail or Acceptable/High	RL	Units	MCL / SMCL	Date of Analysis	Analyst
Bacteria-Total Coliform	Colitag Test	Absent	Pass	1	Per/100ml	Present	08/15/2020	MAV-106
Bacteria-E.coli	Colitag Test	Absent	Pass	1	Per/100ml	Present	08/15/2020	MAV-106

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Approved By

*Kevin Barnette*

Lab Director

Is the sample for a public water system? ☐ Yes ☐ No

# HOME LAND

LABS



191072

Date Due: 8/17/20

Client: Hague Quality Water

Project:

Phone: (443) 505-8375 Email: lab@homelandhealthyhonor

9106 Philadelphia Road, Suite 106  
Rosedale, MD 21237

MD Lab # 353

108 Old Solomons Island Road, Suite L2  
Annapolis, MD 21401

MD Lab # 106

3430 Rockefeller Court  
Waldorf, MD 20602

MD Lab # 139

Client Name:

HAGUE WATER OF MARYLAND

Email Address:

TEDWARDS@HAGUEWATEROFMD.COM

Phone Number:

410. 757-2992

Property Address:

1735 UNDERWOOD RD.

SYKEVILLE, MD

## Field Collection Information

Sampler Name:	TIM EDWARDS	Field pH:	6.0
Sampler ID #:	TE 8309	Field Chlorine (mg/L):	Ø
Date and Time Sampled:	9/17/2020 1:00pm	Sand:	Ø
Well Tag Number:		Clarity:	Good

## Well Casing and Cap Condition

Height Above Grade:	Cap Type:	Casing:	Conduit:
Sample Point: BATHROOM SINK		Water Conditioning:	

## Requested Testing: (Please check all that apply)

- |   |                                     |                                       |
|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Potability (Bacteria, Nitrate + Nitrite, pH, Turbidity)                  |                                     |                                       |
| <input type="checkbox"/> FHA/VA (Bacteria, Nitrate + Nitrite, Nitrite, pH, Turbidity, Lead, Iron) |                                     |                                       |
| <input checked="" type="checkbox"/> Bacteria  | <input type="checkbox"/> Arsenic    | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lead   | <input type="checkbox"/> Cadmium    | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Nitrate + Nitrite  | <input type="checkbox"/> Fluoride   | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Iron   | <input type="checkbox"/> Pesticides | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Gross Alpha  | <input type="checkbox"/> VOC        | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Saltwater Intrusion  | <input type="checkbox"/> Hardness   | <input type="checkbox"/> Other: _____ |

List rush samples below

\*Refer to table for rush turnaround times and fees\*

## Release Signatures

Released By:

Date/Time:

8/14/2020 2:20

Released By:

Date/Time:

Released By:

Date/Time:

Received in lab by:

Date/Time:

8/14/2020 2208



# HOME LAND LABS

9106 Philadelphia Road, Suite 106  
Rosedale, MD 21237  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 353

108 Old Solomons Island Road, Suite 12  
Annapolis, MD 21401  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 106

3430 Rockefeller Court  
Waldorf, MD 20602  
Phone 443.505.8375  
lab@homelandhealthyhomes.com  
State Certified Water Quality Lab 139

## Certificate of Analysis

Date Reported: 08/13/2020

Hague Quality Water  
814 E. College Parkway  
Annapolis, MD 21409

Date & Time Received: 08/12/2020 16:00

*This report is the sole property of Hague Quality Water. Any questions about the report MUST be directed to Hague Quality Water at (410) 757-2992.*

*Home Land Labs is not at liberty to discuss this report without written consent from Hague Quality Water.*

Sample Number: 190915-01

Location: 1735 Underwood Road  
Sykesville, MD 21784

Sample Time: 08/12/20 13:30

Chlorine Residual: 0.0  
Field pH: Not noted

Preservation: Ice

Sampler: TEEdwardsS309TE (Exp. 5/14/2022)  
Sample Point: Bathroom Sink

Parameter	Method	Result	Pass/Fail or Acceptable/High	RL	Units	MCL / SMCL	Date of Analysis	Analyst
Iron, Total	H 8008	0.86 *	High	0.05	mg/l	0.3	08/13/2020	DLB-139
Bacteria-Total Coliform	Colitag Test	Absent	Pass	1	Per 100ml	Present	08/13/2020	MAV-106
Bacteria-E.coli	Colitag Test	Absent	Pass	1	Per 100ml	Present	08/13/2020	MAV-106
Nitrate + Nitrite as N	EPA 353.2	6.2	Pass	0.5	mg/l	10	08/13/2020	DLB-139
Turbidity	EPA 180.1	4.6	Acceptable	0.5	NTU	10	08/12/2020	MAV-106

*\* mentioned to  
Builder*

Approved By

*Sean Barnette*  
Lab Director

## Chain of Custody Form

Is the sample for a public water system? ☐ Yes ☐ No

# HOME LAND

## LABS



190915 Date Due: 8/14/20  
Client: Hague Quality Water  
Project:

Phone: (443) 505-8375 Email: lab@homelandhealthyhomes.com

9106 Philadelphia Road, Suite 106  
Rosedale, MD 21237

MD Lab # 353

108 Old Solomons Island Road, Suite L2  
Annapolis, MD 21401

MD Lab # 106

3430 Rockefeller Court  
Waldorf, MD 20602

MD Lab # 139

Client Name:  
HAGUE WATER OF MARYLAND

Email Address:  
TEDNARCOS@HAGUEWATEROFMD.COM

Phone Number:  
410. 757-2992

Property Address:  
1735 UNDERWOOD RD.  
SYKESVILLE, MD 21784

### Field Collection Information

Sampler Name:	<u>TIM EDWARDS</u>	Field pH:	
Sampler ID #:	<u>TE 8309</u>	Field Chlorine (mg/L):	<u>Ø</u>
Date and Time Sampled:	<u>8/12/2020 1:30</u>	Sand:	<u>Ø</u>
Well Tag Number:		Clarity:	<u>Good</u>

### Well Casing and Cap Condition

Height Above Grade:	Cap Type:	Casing:	Conduit:
Sample Point: <u>BATHROOM SINK</u>		Water Conditioning: <u>NONE</u>	

### Requested Testing: (Please check all that apply)

- ☒ Potability (Bacteria, Nitrate + Nitrite, pH, Turbidity)  
☐ FHA/VA (Bacteria, Nitrate + Nitrite, Nitrite, pH, Turbidity, Lead, Iron)  
☐ Bacteria ☐ Arsenic ☐ Other: \_\_\_\_\_  
☐ Lead ☐ Cadmium ☐ Other: \_\_\_\_\_  
☐ Nitrate + Nitrite ☐ Fluoride ☐ Other: \_\_\_\_\_  
☒ Iron ☐ Pesticides ☐ Other: \_\_\_\_\_  
☐ Gross Alpha ☐ VOC ☐ Other: \_\_\_\_\_  
☐ Saltwater Intrusion ☐ Hardness ☐ Other: \_\_\_\_\_

List rush samples below

\*Refer to table for rush turnaround times and fees\*

### Release Signatures

Released By: [Signature]

Date/Time: 8/12/2020 4:00pm

Released By: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Released By: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Received in lab by: [Signature]

Date/Time: 8/12/2020 4:00p



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: E19001235 Date Coll.: 10/10/2018 Date Received 10/11/2018 Submitted By: Collins

Field ID: HO-17-0358  
Lab No.: E19001235001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	9.56	ppm	10/17/2018

### Comments:

Approved by: *Shahen Aneli*

Approval date: 10/18/2018

\*\*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.



Howard County Health Dept  
Bureau of Environmental Health  
8930 Stanford Blvd  
Columbia, MD 21045

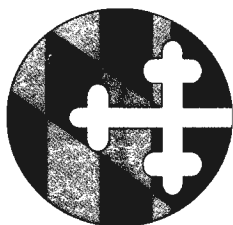
**E19001230001**  
Received: 10/11/2018  
Inorganic HO-17-0358

FIELD	Plant No.	<input type="text"/>	Sampling Station	<input type="text"/>	Preservation: Iced	<input checked="" type="checkbox"/>	Acid	<input type="checkbox"/>	Type of Acid	<input type="text"/>
	pH	<input type="text"/>	Chlorine: Free	<input type="text"/>	Total	<input type="text"/>	Specific Conductance	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Notes to Lab/Remarks: <u>Sample collected during yield test.</u>									

[illegible]

Number of Tests Requested	
------------------------------	--

Date Reported \_\_\_\_\_



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



## Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH  
8930 STANFORD BLVD  
COLUMBIA, MD 21045

Lab Project NoE19001230 Date Coll. 10/10/2018 Date Received 10/11/2018 Submitted By:S. Collins

Field ID: HO-17-0358  
Lab No.: E19001230001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	20	mg/L	10/15/2018
Total Dissolved Solids	SM 2540C	104	mg/L	10/15/2018

### Comments:

Approved by:

Approval date: 10/17/2018

\*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.

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