

**DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.**

<b>C1</b> 3489	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 6 ON ALL CARDS)			COUNTY NUMBER <b>(13)</b> A514619

ST/CO USE ONLY DATE Received MM DO YY 8 13	DATE WELL COMPLETED MM DO YY 5 25 04	Depth of Well 22 180 26 (TO NEAREST FOOT) 6/8/04 O.K. (BB)	PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3946 28 29 30 31 32 33 34 35 36 37
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OWNER Preserve at Waverly Glen, LLC  
 STREET OR RFD Tompkins Way TOWN Woodstock  
 SUBDIVISION Preserve at Waverly Glen SECTION \_\_\_\_\_ LOT 7

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		check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	15	
Sand Stone	15	20	
MICKA	20	35	
Sand Stone	35	40	✓
MICKA	40	55	
Sand Stone	55	60	✓
MICKA	60	180	

**GROUTING RECORD**    yes  no

WELL HAS BEEN GROUTED (Circle Appropriate Box)    **Y** **N**

TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT **(CM)**    BENTONITE CLAY **(BC)**

NO. OF BAGS 13    NO. OF POUNDS 1300

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 25 ft.  
 (enter 0 if from surface)

**CASING RECORD**

casing types insert appropriate code below

**(ST)**    **(CO)**  
STEEL    CONCRETE

**(PL)**    **(OT)**  
PLASTIC    OTHER

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

PL    6    27

60 61    63 64    66 67    70

**OTHER CASING (if used)**

diameter inch    depth (feet) from    to

E A C H C A S I N G

**SCREEN RECORD**

screen type or open hole    insert appropriate code below

**(ST)**    **(BR)**    **(HO)**  
STEEL    BRASS    OPEN HOLE

**(PL)**    **(OT)**  
PLASTIC    OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED    yes  no

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. M 50423

DRILLERS SIGNATURE [Signature]

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. D

**C 2**    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
SLOT SIZE 1 _____ 2 _____ 3 _____																																																																					
DIAMETER OF SCREEN (NEAREST INCH)																																																																					
from _____ to _____																																																																					

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)    W O

**C 3**    **PUMPING TEST**

HOURS PUMPED (nearest hour)    3

PUMPING RATE (gal. per min.)    12

METHOD USED TO MEASURE PUMPING RATE    Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING    36 ft.

WHEN PUMPING    39 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 (CIRCLE) (YES OR NO)    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    29

CAPACITY: GALLONS PER MINUTE (to nearest gallon)    31    35

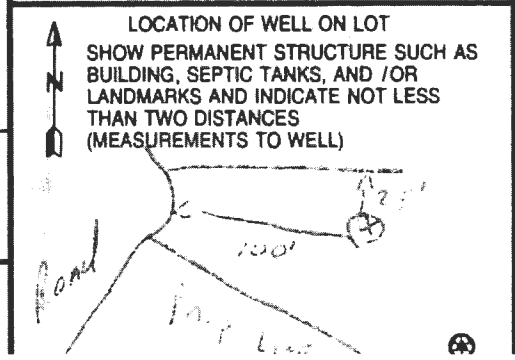
PUMP HORSE POWER    37    41

PUMP COLUMN LENGTH (nearest ft.)    43    47

CASING HEIGHT (circle appropriate box and enter casing height)

**(+)** above    **(-)** below

LAND SURFACE    2 (nearest foot)



B 1 5727  
1 2 3 4 5 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
PERMIT TO DRILL WELL

STATE PERMIT NUMBER

519599 please print or type

HO-94-3946  
70 fill in this form completely 79

Date Received (APA) \_\_\_\_\_

**OWNER INFORMATION**

8 MM DD YY 13  
Present AT Waverly Glen

15 Last Name Owner First Name 34  
3655 SAUK AVE

36 Street or RFD 55  
ELlicott City, MD 21043

57 Town 70 State 72 Zip 76

**B 3 LOCATION OF WELL**

8 COUNTY Howard 21  
The Present AT Waverly Glen

23 SUBDIVISION 42

SECTION 44 46 LOT 48 50  
WOODSTOCK

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) I MI  
73 76 77 78

**DRILLER INFORMATION**

Ralph E Mayne MSD 112

Driller's Name 76 License No. 81

Ralph E. Mayne Inc

Firm Name

17024 Handy Rd Mt Airy MD 21071

Address

Ralph E Mayne 9-18-03

Signature Date

**B 4**

1 2  
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 Tompkins way 30  
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 50 37  
DISTANCE FROM ROAD 14  
ENTER FT OR MI 38 39

TAX MAP: 10 BLK: 23 PARCEL 102

**B 2 WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 5  
8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500  
14 20

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, DEWATERING

PUBLIC WATER SUPPLY WELL

TEST, OBSERVATION, MONITORING

GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

Howard (13) A514619

COUNTY NAME COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED 5/11/2004 Brian Baber 5/11/2005  
43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 542 000 EAST GRID 832 000  
50 55 57 63

APPROXIMATE DEPTH OF WELL 150 FEET  
24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

**METHOD OF DRILLING (circle one)**

BORED (or Augered) JETTED Jetted & DRIVEN

39 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)

37 CABLE REVerse-ROTary DRive-POINT

other \_\_\_\_\_

**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  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 DEEPEM AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER H02003 GAP 005(01)  
34 63

PERMIT No. HO-94-3946  
70 71 72 73 74 75 76 77 78 79

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 832  
N 542

000  
000

5/25/04  
8:50 AM  
3 Hour Yield  
Grout - No Insp.



**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WELL & SEPTIC PROGRAM  
TEL: (410)313-1771 FAX: (410)313-2648**

**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: Do-It Plumbing Heating LLC Telephone #: 240 8820069  
Address: 106 Estelle Ct  
Sykesville, md 21784

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

License # and name of individual responsible for the field installation:  
Name (Print): Duane Gilbert License# 21899

\*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: TBI Telephone #: 410-980-0023  
Subdivision: Preserves of Waverly Glen Lot #: 7 Well Tag #: HO-94-3946 ✓  
Site Address: 10918 Tompkins Way  
Woodsack, md 21163

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Myers</u>	Make: <u>BTR</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>ZSF52-1LPLCS-P4-2</u>	Model#: <u>P-100-55</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>5</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>12</u> GPM	NSF/WSC approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>180</u> (feet)		Conduit secured to well cap: <u>yes</u>

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 NO

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>BLACK Poly</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>yes</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>10ft</u>
Depth of supply line: <u>yes</u> (36" min)	Sleeve sealed properly: <u>yes</u>

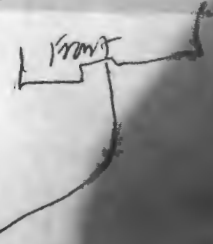
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] date: July-12-2023

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

Date Insp. Requested: 7/12/2023 Date Insp. Approved: 7/13/2023 Inspector: SP

Inspection Data: Pitless adapter watertight & 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 not outside of well cap/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"/>



## INTERIM CERTIFICATE OF POTABILITY

Expiration Date – November 28, 2024

May 28, 2024

Homeowner  
10918 Tompkins Way  
Woodstock, MD 21163

**RE: Preserve @ Waverly Glen, Lot 7**  
**10918 Tompkins Way**  
**Building Permit: B22004319**  
**Well Permit: HO-94-3946**

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 **8/4/2023**. Final approval of the well line connection to the dwelling was granted on **7/13/2023**. The well construction was completed on **5/25/2004**. Water samples were collected on **5/6/2024**.

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 **5/6/2024**. Results showed a Radium 226 level of **4.2 ± 1.5 pCi/L** and a Radium 228 level of **5.8 ± 1.2 pCi/L**. The combined radium 226/228 was below the maximum contaminant level (MCL) of 5 pCi/L. 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-94-3946. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

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

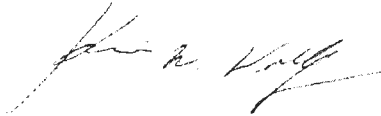
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**Maura J. Rossman, M.D., Health Officer**

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

In closing, please refer to our “Homeowner Fact Sheet” for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environments 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

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 166081 Account #: 4035  
Reference: Trinity Quality Homes, Inc. Client: Trinity Quality Homes, Inc.  
Location: 10918 Tompkins Way Requested By: Michael Pfau  
Granite, MD 21163 Source: Well Water  
Date/ Time Collected: 5/6/2024 0906 Site: Kitchen Sink Tap  
Date/Time Rec'd: 5/6/2024 1503 Treatment: Sediment Filter/Softener  
Chlorine ppm: Free: ND Total: ND pH: 5.4  
Collected By: R. Ott 0266RO Well #: HO-94-3946

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Gross Alpha, Short Term	<1.9	pCi/L	15	900.0	5/9/2024 / 0708 / MJN
Gross Beta, Short Term	<1.6	pCi/L	50	900.0	5/9/2024 / 0708 / MJN
Gross Alpha, Long Term	<1.8	pCi/L	15	900.0	5/16/2024 / 0537 / MJN
Gross Beta, Long Term	<1.6	pCi/L	50	900.0	5/16/2024 / 0537 / MJN
Radium-226	0.5	pCi/L	****	903.0	5/15/2024 / 1126 / MJN
Radium-228	<0.7	pCi/L	****	Ra-05	5/14/2024 / 1349 / MJN

### NOTES:

- \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- Gross Alpha Long Term Detection Limit: 1.8 pCi/L; Gross Long Short Term Error: +/- 1.0 pCi/L
- Gross Alpha Short Term Detection Limit: 1.9 pCi/L; Gross Alpha Short Term Error: +/- 1.2 pCi/L
- Gross Beta Long Term Detection Limit: 1.6 pCi/L; Gross Beta Long Term Error: +/- 1.0 pCi/L
- Gross Beta Short Term Detection Limit: 1.6 pCi/L; Gross Beta Short Term Error: +/- 1.0 pCi/L
- pCi/L = picocuries per liter
- Radium 226 Detection Limit: 0.2 pCi/L; Radium 226 Error: +/- 0.3 pCi/L; Chemical Yield: 0.9861
- Radium 228 Detection Limit: 0.7 pCi/L; Radium 228 Error: +/- 0.5 pCi/L
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- Sub-contracted to Reference Lab #278
- ND:None Detected
- Visual well check: Sealed, vented cap
- pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B22004319

Date Reported: 5/20/2024

Reviewed By: Loi Ott

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 166079 Account #: 4035  
Reference: Trinity Quality Homes, Inc. Client: Trinity Quality Homes, Inc.  
Location: 10918 Tompkins Way Requested By: Michael Pfau  
Granite, MD 21163 Source: Well Water  
Date/ Time Collected: 5/6/2024 0916 Site: Pressure Tank  
Date/Time Rec'd: 5/6/2024 1503 Treatment: Prior to Sediment Filter/Softener  
Chlorine ppm: Free: ND Total: ND pH: 5.7  
Collected By: R. Ott 0266RO Well #: HO-94-3946

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/7/2024 / 1000 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/7/2024 / 1000 / KDR
Nitrate.	9.12	mg/L (as N)	10	EPA 300.0	5/6/2024 / 1555 / KDR
Turbidity	0.35	NTU	<10	SM2130B	5/7/2024 / 0915 / KDR
Sand	ND	mg/L	5	Visual/Gravimetric	5/7/2024 / 0840 / KDR

### NOTES:

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NTU = Nephelometric Turbidity Units
- 4 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 5 ND:None Detected
- 6 Visual well check: Sealed, vented cap
- 7 pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B22004319

Date Reported: 5/7/2024

Reviewed By:

*Catherine C. Holland*



# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

## REPORT OF ANALYSIS

Laboratory ID #: 166080 Account #: 4035  
Reference: Trinity Quality Homes, Inc. Client: Trinity Quality Homes, Inc.  
Location: 10918 Tompkins Way Requested By: Michael Pfau  
Granite, MD 21163 Source: Well Water  
Date/ Time Collected: 5/6/2024 0918 Site: Pressure Tank  
Date/Time Rec'd: 5/6/2024 1503 Treatment: Prior to Sediment Filter/Softener  
Chlorine ppm: Free: ND Total: ND pH: 5.7  
Collected By: R. Ott 0266RO Well #: HO-94-3946

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Gross Alpha, Short Term	4.2	pCi/L	15	900.0	5/9/2024 / 0708 / MJN
Gross Beta, Short Term	5.8	pCi/L	50	900.0	5/9/2024 / 0708 / MJN
Gross Alpha, Long Term	1.7	pCi/L	15	900.0	5/16/2024 / 0537 / MJN
Gross Beta, Long Term	5.6	pCi/L	50	900.0	5/16/2024 / 0537 / MJN
Radium-226	1.4	pCi/L	****	903.0	5/15/2024 / 1126 / MJN
Radium-228	1.0	pCi/L	****	Ra-05	5/14/2024 / 1349 / MJN

### NOTES:

- \*\*\*\*Radium 226 and Radium 228 combined have a reference of 5 pCi/L
- Gross Alpha Long Term Detection Limit: 1.2 pCi/L; Gross Alpha Long Term Error: +/- 1.2 pCi/L
- Gross Alpha Short Term Detection Limit: 1.5 pCi/L; Gross Alpha Short Term Error: +/- 1.5 pCi/L
- Gross Beta Long Term Detection Limit: 1.5 pCi/L; Gross Beta Long Term Error: +/- 1.2 pCi/L
- Gross Beta Short Term Detection Limit: 1.5 pCi/L; Gross Beta Short Term Error: +/- 1.2 pCi/L
- pCi/L = picocuries per liter
- Radium 226 Detection Limit: 0.2 pCi/L; Radium 226 Error: +/- 0.5 pCi/L; Chemical Yield: 0.8576
- Radium 228 Detection Limit: 0.7 pCi/L; Radium 228 Error: +/- 0.5 pCi/L
- Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- Sub-contracted to Reference Lab #278
- ND:None Detected
- Visual well check: Sealed, vented cap
- pH & Chlorine level tested on site

Reason for Test : Use & Occupancy

Building Permit # : B22004319

Date Reported: 5/20/2024

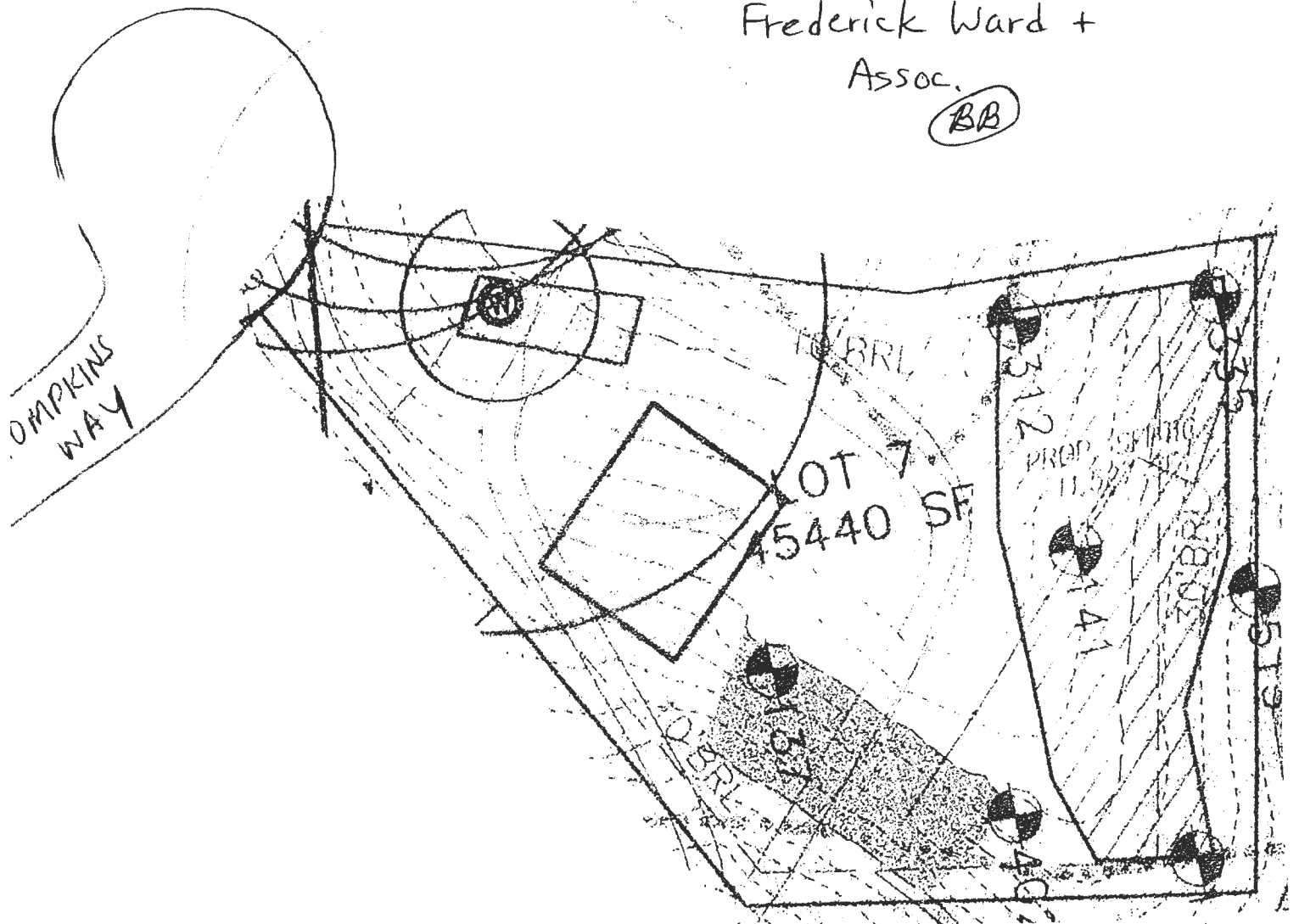
Reviewed By: Loi Ob

PRESERVE AT WAVERLY GLEN

5/11/04

Well site staked by  
Frederick Ward +  
Assoc.

BB



WELL LOCATION SURVEY

SCALE 1" = 50'