

C1 574 SEQUENCE NO. (MDE USE ONLY)

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

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

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER 4516084

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY 7/6/05

Depth of Well 22 400 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-95-0009

OWNER Winchester Homes last name first name STREET OR RFD Whithorn Way TOWN Clarksville SUBDIVISION Berrwood I SECTION 29/4/20 LOT 24

WELL LOG Not required for driven wells

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include topsoil, Brown Mica, Tanish/white sand, Brown Mica, Sandstone, Brown Mica, Limestone, Sandstone, Limestone.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS 63 NO. OF POUNDS 300 GALLONS OF WATER 378 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 30 ft.

CASING RECORD (ST, CO, PL, OT) MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 100

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD (ST, BR, HO, PL, OT) screen type or open hole (insert appropriate code below)

DEPTH (nearest ft.) 1 2 400 8 9 11 15 17 21 23 28 30 32 36 38 39 41 45 47 51

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 10 ft. WHEN PUMPING 118 ft. TYPE OF PUMP USED (for test) 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. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 49 47 CASING HEIGHT (circle appropriate box and enter casing height) 7 above LAND SURFACE 2 (nearest foot) below

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (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...

DRILLERS LIC. NO. 1 MWD 040 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 JWD 727

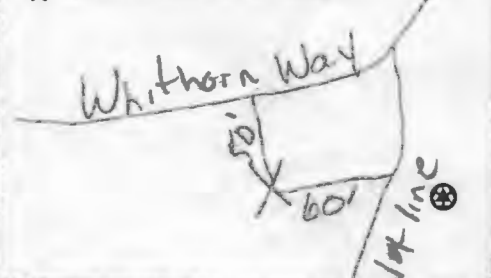
SITE SUPERVISOR (sgn. of driller or journeyman responsible for sitework if different from permittee)

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

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)



B 1 1449

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 522426

STATE PERMIT NUMBER

110-95-0009 fill in this form completely

Date Received (APA)

OWNER INFORMATION 9968

8 MM DD YY 13

Winchester Homes, Inc

15 East Name Owner First Name 34

6905 Rockledge Drive, Suite 600

36 Street or RFD 55

Bethesda, Md 20817

57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

Howard CC#

8 COUNTY 21

Riverwood Phase I

23 SUBDIVISION 42

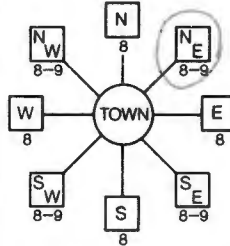
SECTION 1 LOT 24

Clarksville

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 3 MI

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Whithorn Way

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 50 37 DISTANCE FROM ROAD Ft.

ENTER FT OR MI 38 39

TAX MAP: 29 BLK: 4 PARCEL 20

DRILLER INFORMATION

George F. Easterday M WD 040

Driller's Name 76 License No. 81

L. Franklin Easterday, Inc.

Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771

Address

Signature: George F. Easterday Date: 4/25/05

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 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 AS16084

COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 6/1/05 EXP. DATE 6/1/06

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 515 000 EAST GRID 827 000

50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE REVerse-ROTary DRive-POINT

other

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

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

APPROP. PERMIT NUMBER HV 20090000

PERMIT No. HV-95-0009

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

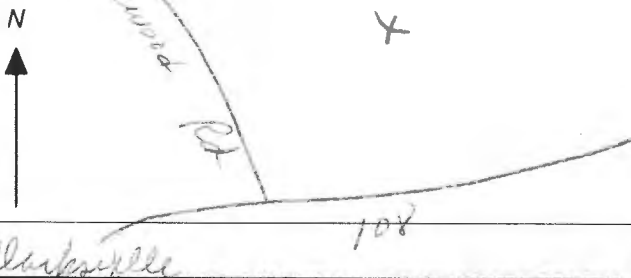
- 1. wells
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 546 827
N 820 515

yield & grout 7/6/05 8:00AM

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



15 B 1

8:00

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0009
Location of property (road) Whithorn Way
Subdivision Riverview I Lot 24 Block 4 Plat 27 Sec 20 ~~19~~
Well Driller Easterday's Owner Winchester Homes

Depth of well 400 20 gpm
Distance of measuring point (M.P.) above ground 2 FT
Static water level (S.W.L.) below M.P. 10-1/2

I. High rate pumping -- reservoir drawdown

Time pump started 9:15 Pumping rate 15 GPM
Total time 45 min to reach pumping water level 112 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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:30	50 FT	4		15
9:45	95	4		15
10:00	112	4		15
10:15	113	4		15
10:30	115	4		15
10:45	116	4		15
11:00	117	4		15
11:15	117	4		15
11:30	118	4		15
11:45	118	4		15
12:00	118	4		15
12:15	118	4		15

HD-224
PUMP SET AT 300 FT
Drew

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-0009
Location of property (road) Whithorn Way
Subdivision Riverview I Lot 24 Block 4 Plat 29 Sec 20 Range 20
Well Driller Eustace J. S. Owner Winchester Homes

Depth of well _____
Distance of measuring point (M.P.) above ground _____
Static water level (S.W.L.) below M.P. _____

I. High rate pumping -- reservoir drawdown

Time pump started _____ Pumping rate _____
Total time _____ to reach pumping water level _____ 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 $\frac{1}{2}$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:45	116	4 sec	N/A	15



Bureau of Environmental Health
 8930 Stanford Blvd | Columbia, MD 21045
 410.313.2640 - Voice/Relay
 410.313.2648 - Fax
 1.866.313.6300 - Toll Free

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

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: White Hall Plumbing Telephone #: 410.557.9648
 Address: 4532 Norrisville Road
Whitehall MD 21161

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:
 Name (Print): Harry Newcomer License# _____

*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: Ayub Telephone #: _____
 Subdivision: _____ Lot #: _____ Well Tag #: HO - -
 Site Address: 11209 Whithorn way
ellicott city md 21042

Submersible Pump Data

Make: Grundfos
 Model #: 15SQE10-250
 Pump Capacity 10gpm
 Well Yield: 8gpm
 Depth of well encountered at time of pump installation: 400' (feet)

Pitless Adapter

Make: myers +
 Model#: 2-SSRC-1210 1-1/4X1"
 GPM Depth: 42" (36" min)
 GPM NSF/WSC approved: yes
 Depth of well encountered at time of pump installation: 400' (feet)

Well Cap and Electric Conduit

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

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

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

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

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: yes
 Length of sleeve(5' minimum from foundation): yes
 Sleeve sealed properly: yes

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

Harry Newcomer President

8.21.24

Signature of company representative responsible for installation

date

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

Date Insp. Requested: 8/20/2024 Date Insp. Approved: 8/26/2024 Inspector: SP/MB
 Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
 Two piece cap installed and attached to casing securely ✓
 Elec. conduit extends at least 18" below grade/attached to cap properly ✓
 Safety rope not outside of well cap/casing ✓
 Correct well tag attached properly and casing 8" above finished grade ✓
 Water supply line sleeved adequately at house connection N/A
 Adequate grout observed below pitless adapter ✓

*8/20/2024
 see file inquiry.
 SP/MB*

(Revised form 10/24/2018)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – February 22, 2025

August 22, 2024

Homeowner
11209 Whithorn Way
Ellicott City, MD 21042

RE: Riverwood, Lot 24
11209 Whithorn Way
Building Permit: B22004102
Well Permit: HO-95-0009

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 **8/19/2024**. Final approval of the well line connection to the dwelling was granted on **8/20/2024**. The well construction was completed on **7/6/2005**. Water samples were collected on **7/16/2024, 7/23/2024, 7/30/2024**.

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.

Gross Alpha and Beta samples were also collected on **7/26/2005**. Results showed a Gross Alpha level of **2.0 ± 1.0 pCi/L** and **Gross Beta** level of **6.0 ± 2.0 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-95-0009. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

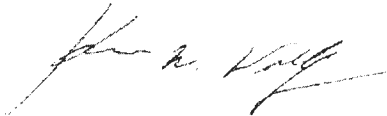
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will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

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

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

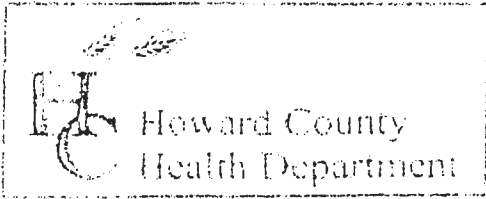
In closing, please refer to our “Homeowner Fact Sheet” for understanding your onsite sewage disposal system. You will also find a link to Maryland Department of the Environments website which elaborates in further detail operation and maintenance of your Septic System.

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



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., 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:

- The well site has been staked by Engineer Benchmark,
 (professional land surveyor or company employing professional land surveyors)
 on 4/1/05 (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 6/10/03

Riverwood Phase I
 Lots 11, 24-33, 42
 preservation parcel 0

GRID NORTH

NON-BUILDABLE
PRESERVATION PARCEL R
DEDICATED TO HOWARD COUNTY, MARYLAND
HOMEOWNERS' ASSOCIATION EASEMENT HOLDER

*6/1/05 will
site OK*

LOT 24
44,947 S.F.

WHITHORN WAY
PUBLIC ACCESS STREET
(100' R/W, 18' HDPE)

EX. 20' PUBLIC STORM DRAIN
AND UTILITY EASEMENT

EX. 15" HDPE

EX. 15" HDPE

EX. 18" HDPE

394

M 13

M 14

31

32

M 15

394

396

398

390

400

400

RIVERWOOD

LOT 24

BENCHMARK

ENGINEERS • LAND SURVEYORS • PLANNERS

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELICOTT CITY, MD 21043

PHONE: 410-465-6644 FAX: 410-465-6644

DATE: 5/17/05 4:37:09 PM

THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 10/12/04

REVISED: 3/29/05, 5/25/05, 6/01/05

Plot: 1132 Homewood
Date: 5/17/05
Time: 4:37:09 PM
File: KM-2530 KX.nc3



AQUA LABS, LLC

21429 York Rd Freeland MD 21053 (410) 472-1112

www.aqualabsusa.com

FINAL REPORT OF ANALYSIS

FC Batton & Son
14815 Manor Rd.
Monkton, MD 21111

Report Date: 08/22/2024
Report Number: 240822091101
Use and Occupancy
PERMIT #:

LAB#- E074684-02	SAMPLE ID- 11209 Whithorn Way	WELL #	HO-95-0009
LOCATION- Kitchen Sink		SAMPLER-	L Hill #3376LH
DATE SAMPLED- 07/16/2024	TIME SAMPLED- 10:00	CHLORINE-	<0.05 mg/L
DATE RECEIVED- 07/16/2024	TIME RECEIVED- 11:30	FIELD DATA- pH:	7.7;
DELIVERED BY- Logan Hill	RECEIVED BY- Courtney Jacobs		
COMMENTS- No Treatment			

COMMENTS-

ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
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Microbiology by Aqua Labs, LLC

Total Coliform	SM 9223B	07/16/24 12:42	CMJ	Present	FAIL
E. Coli	SM 9223B	07/16/24 12:42	CMJ	Absent	PASS

Based on coliform bacteriological standards, at the time of sampling this water was **NOT SAFE** for drinking water purposes.

Wet Chemistry by Aqua Labs, LLC

Nitrate (as N)	EPA 300.0	07/16/24 15:20	SMR	<	0.15	mg/L	PASS
pH	SM4500-H+B	07/16/24 12:40	LTH		6.9	SU	
Turbidity	EPA 180.1	07/16/24 12:40	LTH		6.7	NTU	

Courtney Jacobs

Courtney Jacobs For Robert Shumate
Laboratory Director

Certifications

State of Maryland Laboratory

#368



AQUA LABS, LLC

21429 York Rd Freeland MD 21053 (410) 472-1112

www.aqualabsusa.com

FINAL REPORT OF ANALYSIS

FC Batton & Son
14815 Manor Rd.
Monkton, MD 21111

Report Date: 08/22/2024
Report Number: 240822091101
Use and Occupancy
PERMIT #:

LAB#- E074684-01	SAMPLE ID- 11209 Whithorn Way	WELL #	HO-95-0009
LOCATION- Pressure Tank		SAMPLER-	L Hill #3376LH
DATE SAMPLED- 07/16/2024	TIME SAMPLED- 09:50	CHLORINE-	<0.05 mg/L
DATE RECEIVED- 07/16/2024	TIME RECEIVED- 11:30	FIELD DATA-	pH: 7.7;
DELIVERED BY- Logan Hill	RECEIVED BY- Courtney Jacobs		
COMMENTS- No Treatment			

COMMENTS-

ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
Wet Chemistry by Aqua Labs, LLC					
Sand	EPA 160.5	07/16/24 14:53	LTH	< 0.5	ml/L/Hr

www.aqualabsusa.com



AQUA LABS, LLC

21429 York Rd Freeland MD 21053 (410) 472-1112

www.aqualabsusa.com

FINAL REPORT OF ANALYSIS

FC Batton & Son
14815 Manor Rd.
Monkton, MD 21111

Report Date: 08/22/2024
Report Number: 240822091011
Use and Occupancy
PERMIT #:

LAB#- E074717-01	SAMPLE ID- 11209 Whithorn Way	WELL #	HO-95-0009
LOCATION- Bathroom Sink		SAMPLER-	L Hill #3376LH
DATE SAMPLED- 07/23/2024	TIME SAMPLED- 11:00	CHLORINE-	<0.05 mg/L
DATE RECEIVED- 07/23/2024	TIME RECEIVED- 12:40	FIELD DATA-	pH: 6.7;
DELIVERED BY- Logan Hill	RECEIVED BY- Garrett Dymond		
COMMENTS- No Treatment			

COMMENTS-

ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
Microbiology by Aqua Labs, LLC					
Total Coliform	SM 9223B	07/23/24 13:09	SMR	< 1.0 MPN/100 mL	PASS
E. Coli	SM 9223B	07/23/24 13:09	SMR	< 1.0 MPN/100 mL	PASS

Based on coliform bacteriological standards, at the time of sampling this water was **SAFE** for drinking water purposes.

Courtney Jacobs

Courtney Jacobs For Robert Shumate
Laboratory Director

Certifications

State of Maryland Laboratory #368

www.aqualabsusa.com



AQUA LABS, LLC

21429 York Rd Freeland MD 21053 (410) 472-1112

www.aqualabsusa.com

FINAL REPORT OF ANALYSIS

FC Batton & Son
14815 Manor Rd.
Monkton, MD 21111

Report Date: 08/22/2024
Report Number: 240822090902
Use and Occupancy
PERMIT #:

LAB#- E074745-01	SAMPLE ID- 11209 Whithorn Way	WELL #	HO-95-0009
LOCATION- Bathroom Sink		SAMPLER-	C Jacobs #3125CJ
DATE SAMPLED- 07/30/2024	TIME SAMPLED- 09:50	CHLORINE-	<0.05 mg/L
DATE RECEIVED- 07/30/2024	TIME RECEIVED- 13:00	FIELD DATA-	pH: 7.6;
DELIVERED BY- Courtney Jacobs	RECEIVED BY- Logan Hill		
COMMENTS- No Treatment			

COMMENTS-

ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
Microbiology by Aqua Labs, LLC					
Total Coliform	SM 9223B	07/30/24 13:02	SMR	Absent	PASS
E. Coli	SM 9223B	07/30/24 13:02	SMR	Absent	PASS

Based on coliform bacteriological standards, at the time of sampling this water was **SAFE** for drinking water purposes.

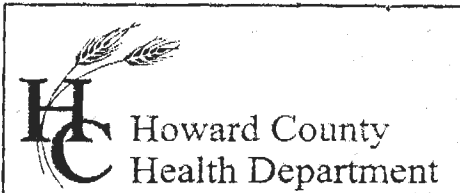
Courtney Jacobs

Courtney Jacobs For Robert Shumate
Laboratory Director

Certifications

State of Maryland Laboratory #368

www.aqualabsusa.com



7178 Columbia 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

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

July 26, 2005

Winchester Homes, Inc.
6905 Rockledge Drive, Suite 800
Bethesda, MD 20817

RE: Riverwood Subdivision, lot 24
Whithorn Way

Well Tag No: HO-95-0009

To Whom It May Concern:

Samples were taken from a yield test on July 6, 2005 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 activity in a water supply. In turn, this can provide information regarding naturally occurring radiation (i.e. Radionuclides) that may exist in your water supply.

Results from this screening revealed a **Gross Alpha** of 2 ± 1 picocuries/liter (pCi/L); while the **Gross Beta** level was 6 ± 2 pCi/L. The **Gross Alpha** result was below the maximum contaminant level (MCL) of 15 pCi/L, while the **Gross Beta** was below the MCL of 50 pCi/L.

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, Assistant Director
Bureau of Environmental Health

Eric Dougherty, MDE, Water Mgmt., Groundwater
Well & Septic Property File

Send Report To:

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
J. Mehsen Joseph, Ph.D., Director

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: HD-45-0009 No. B: _____ Field Blank Bottle No. 1: _____ No. 2: _____

Plant/Site Name: Riverwood Subdivision County: HOWARDS

Sample Source: Well Location: HD-45-0009
LOT 24 Withhorn way (well no., lab sink, sample tap, etc.)

County: 1 3 Plant No.

Collector: G. Coiglier Telephone No.: 410 313 2775

Date Collected: 7/6/2005 Time Collected: 10:45 a.m. _____ p.m.

Nitric Acid Preserved: Yes No Iced: Yes No

Submitters Code: Federal Project: S Field Data: -6.0 N/A
pH Chlorine

Remarks: pH fixed to - 2.6 w/ Nitric Acid

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Reported
✓	Gross Alpha	4000	0060	2 ± 1	7/8/05
✓	Gross Beta	4100	0060	6 ± 2	7/8/05
	Radon-222 Bottle A	4004			
	Radon-222 Bottle B	4004			
	Field Blank #1	4004			
	Field Blank #2	4004			
	Tritium				
	Ra - 226	4020			
	Ra - 228	4030			
	Total Uranium	4006			

Date Received: 7/6/05
Section Chief: [Signature]