

C1 57849

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER 13

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED 12/05/23

71-9-23

500

OK 8/27/24

HO-20-0311

OWNER WILLIAMSBURG BUILDERS
WELL SITE ADDRESS 7264 MAISEL FARM LANE
SUBDIVISION BRADSHAW WOODS SECTION TOWN Glenelg LOT 50

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)
TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 5 NO. OF POUNDS 250
GALLONS OF WATER 130
DEPTH OF GROUT SEAL (to nearest foot) 70

C 3

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 13 ft.
WHEN PUMPING 146 ft.
TYPE OF PUMP USED (for test) air piston turbine centrifugal rotary other jet submersible

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 Topsoil, Brown Mica, Grey Mica, opening, etc.

CASING RECORD
casing types insert appropriate code below
STEEL ST CONCRETE CO
PLASTIC PL OTHER OT

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 125

OTHER CASING (if used) diameter inch ST 10 depth (feet) from 0 to 68

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

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED YES Y NO N

DEPTH (nearest ft.)
H 0 124 500
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH) 56

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO
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 LAND SURFACE
- below (nearest foot) 50 51

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. MWD 603
Daren E. Wilson
DRILLERS SIGNATURE
LIC. NO. AHD 091

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CASING LOG INDICATOR OTHER DATA

LATITUDE 39.253014
LONGITUDE 77.964509
(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: 11/7/23

1 2 3 6	SEQUENCE NO. (MDE USE ONLY) 77170	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER H0-20-0311 70 fill in this form completely 79
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OWNER INFORMATION

8 MM DD YY 13
 15 WILLIAMSBURG BUILDERS
 Last Name Owner First Name 34
 36 5485 HARPERS FARM RD
 Street or RFD 55
 57 COLUMBIA MD 21044
 Town 70 State 72 Zip 76

LOCATION OF WELL

B 3
 8 HOWARD COUNTY 21
 23 BUCKSKIN WOODS SUBDIVISION 42
 SECTION 44 46 LOT 50 48 50
 52 Colenelg NEAREST TOWN 71

DRILLER INFORMATION

Driller's Name DARREN E. WILSON MWD603 76 License No. 81
 Firm Name EASTERDAY Well Drilling 21771
 Address 9265 BR. CH. RD MT AIRY MD
 Signature Darren E. Wilson 7-20-23 Date

SOURCES OF DRILLING WATER

1. Wells
 2.
 3.

MAISEL FARM LANE
 11 STREET ADDRESS 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 34 500 37
 DISTANCE FROM ROAD FT
 ENTER FT OR MI 38 39
 TAX MAP: 22 BLK: 22 PARCEL 535

WELL INFORMATION

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

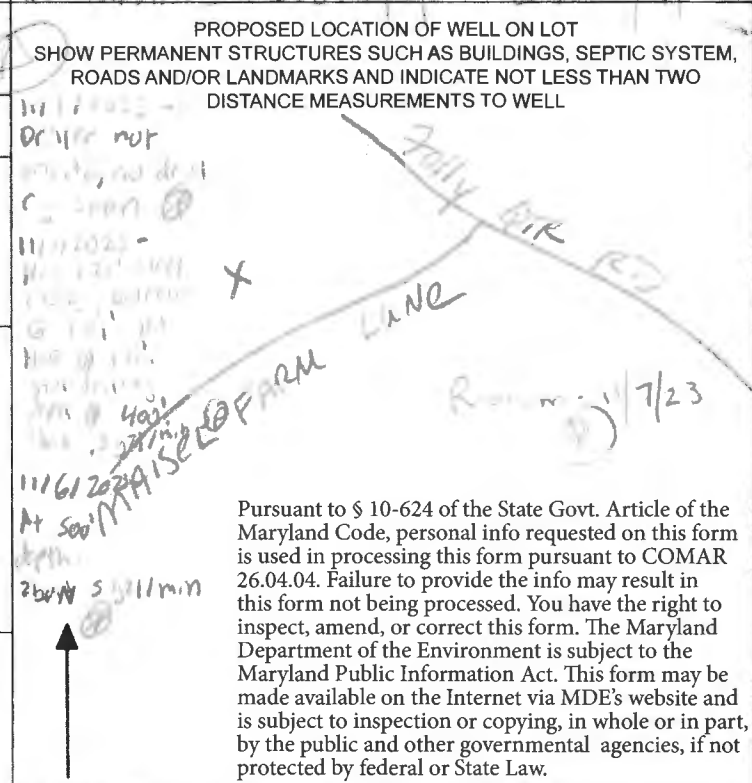
USE FOR WATER (CIRCLE APPROPRIATE BOX)

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION 11/7/23 - 109-00
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 5 yem
 INDUSTRIAL, COMMERCIAL, DEWATERING 1 mile H
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING 134
 OPEN LOOP GEOTHERMAL
 CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME 13 COUNTY NO.
 STATE SIGNATURE _____ INSERT S → 41
 DATE ISSUED 9/28/2023 43 MM DD YY 48 CO SIGNATURE 9/28/2023 EXP. DATE

APPROXIMATE DEPTH OF WELL 400 FEET 24 28
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST



METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
 30 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
 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 _____ G _____
 PERMIT No. H0-20-0311
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS Please call for notification of drilling, start, & yield.
 NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED-



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: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535

Address: P.O. Box 63
 Woodbine, Maryland 21797

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer

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

Name (Print): Dave C. Fogle License# MSD226

*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: Williamsburg Homes Telephone #: _____
 Subdivision: Buckskin Woods Lot #: 50 Well Tag #: HO-20-0311 ✓
 Site Address: 4264 Maisel Farm Lane
Ellicott City, MD 21042

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Grufos</u>	Make: Campbell	Two piece watertight cap: yes
Model #: <u>ISSQED-290</u>	Model#: N/A	Screened, vented well cap: yes
Pump Capacity <u>15</u>	GPM Depth: 36" (36" min)	Cap secured to casing: yes
Well Yield: <u>5</u>	GPM NSF/WSC approved: yes	Conduit min 18" B.G.: yes
Depth of well encountered at time of pump installation: <u>500</u> (feet)		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 N/A

Piping to house
 Type: 1" poly pipe
 PSI: 200 psi (160 psi min)
 Depth of supply line: 36" (36" min)

House Connection
 PVC sleeve to undisturbed soil at wall penetration: yes
 Length of sleeve (5' minimum from foundation): 6'
 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.

Signature of company representative responsible for installation: [Signature] Date: 11/23/2025

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

Date Insp. Requested: 11/23/2025 Date Insp. Approved: 11/23/2025 Inspector:
 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
 Adequate grout observed below pitless adapter

SP/MB	
✓	34"
✓	23'
✓	20"
✓	
✓	



INTERIM CERTIFICATE OF POTABILITY

Expiration Date – November 8, 2025

May 8, 2025

Homeowner
4264 Maisel Farm Road
Ellicott City, MD 21042

RE: Buckskin Woods, Lot 50
4264 Maisel Farm Road
Building Permit: B24002927
Well Permit: HO-20-0311

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 **5/1/2025**. Final approval of the well line connection to the dwelling was granted on **1/23/2025**. The well construction was completed on **11/7/2023**. Water samples were collected on **3/7/2025, 3/14/2025**.

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 **11/7/2023**. Results showed a Gross Alpha level of **10.1 ± 2.3 pCi/L** and **Gross Beta** level of **15.5 ± 2.5 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-20-0311. 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.**



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

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 Environment website which elaborates in further detail operation and maintenance of your Septic System.

Approving Authority,

A handwritten signature in black ink, appearing to read 'Kevin M Wolf', is written over a light blue horizontal line.

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

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

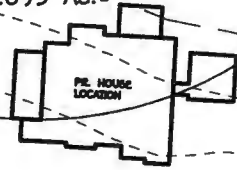
HO-20-0311

INFORMATION - GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230

Well site Approved
9/28/2023

LOT 51
BUCKSKIN WOODS
LOTS 50 THRU 54
(PLAT NOS. 11116
AND 11117)
ZONED: RR-DEC

Lot 50
4.395 Ac. ±



EXISTING PRIVATE DRIVEWAY ACCESS AND
MAINTENANCE EASEMENT LIBER 3579, FOLIO
433 AND LIBER 3579, FOLIO 447

PUBLIC FOREST CONSERVATION
EASEMENT NO. 12
CREATED BY RECORDATION
OF THIS PLAT
(RETENTION)
(0.654 AC. ±)

LOT 39
REVISION PLAT
BUCKSKIN WOODS
LOTS 39, 40, 50, 52,
58, 63 AND 64
(PLAT NOS. 22437
THRU 22440)
ZONED: RR-DEC

PUBLIC FOREST
CONSERVATION
EASEMENT NO. 8A
(RETENTION)
0.520 AC. ±

EXISTING PRIVATE
SEPTIC EASEMENT
(PLAT NOS. 11116
AND 11117)
75' B.R.L.

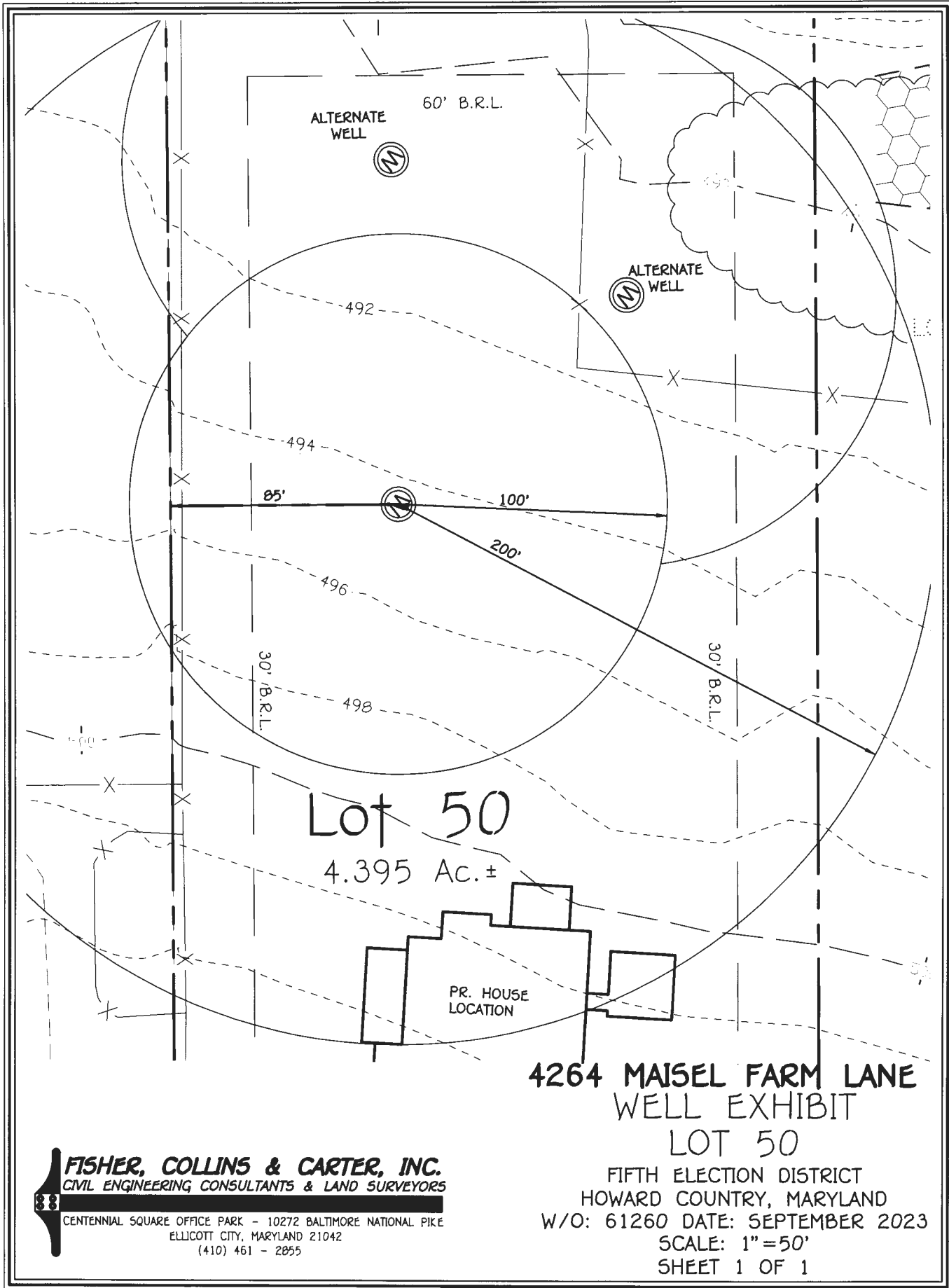
EXISTING PRIVATE
SEPTIC EASEMENT
(PLAT NO. 7281)

EXISTING
PUBLIC FOREST
CONSERVATION
EASEMENT NO. 7
(RETENTION)
1.399 AC. ±
TO REMAIN



Maisel Farm

INC.
BYORS
L PIKE



Lot 50
4.395 Ac. ±

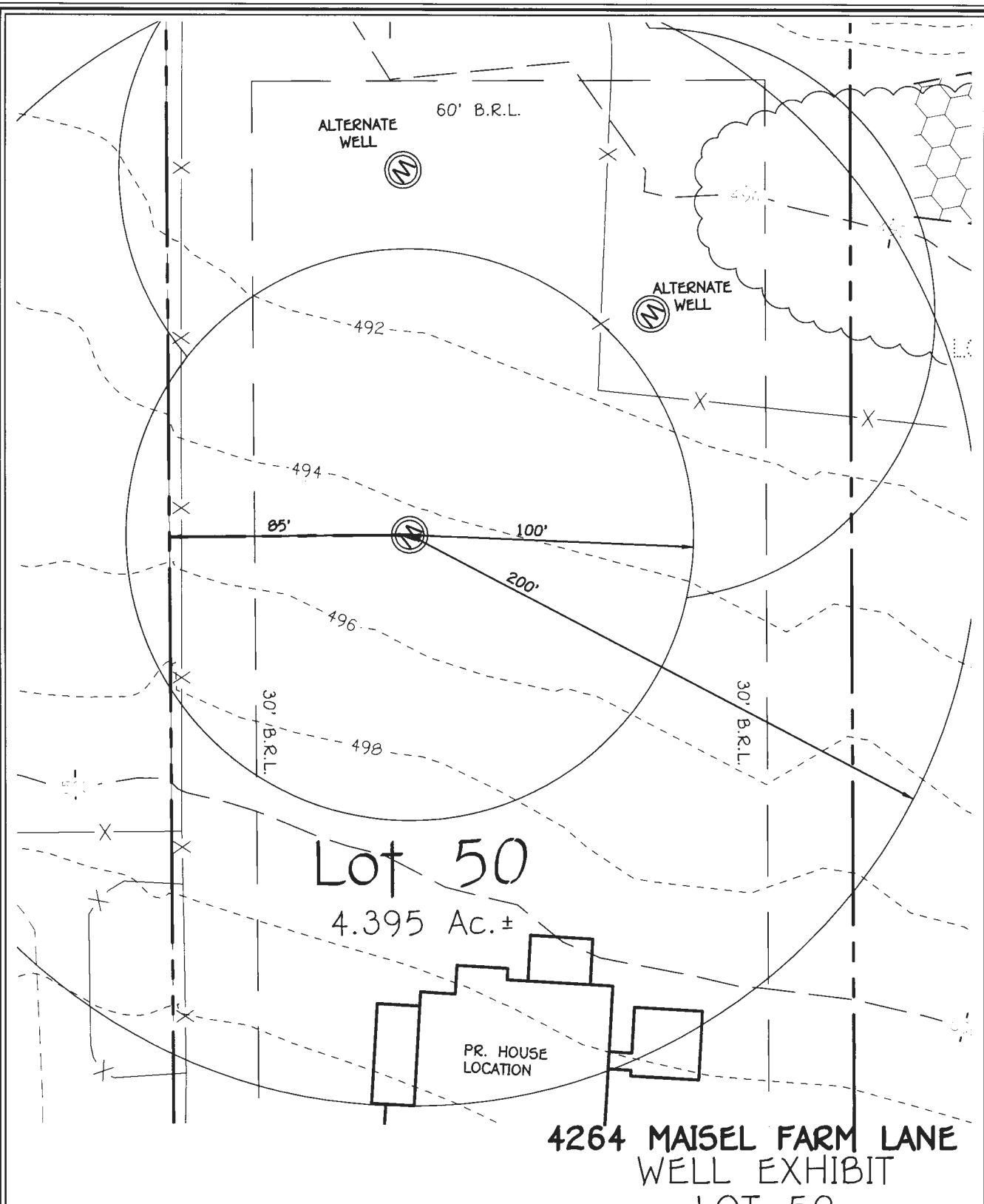
PR. HOUSE
LOCATION

4264 MAISEL FARM LANE
WELL EXHIBIT

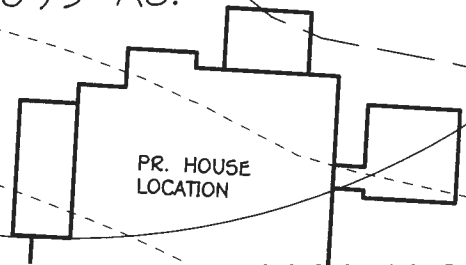
LOT 50

FIFTH ELECTION DISTRICT
HOWARD COUNTRY, MARYLAND
W/O: 61260 DATE: SEPTEMBER 2023
SCALE: 1"=50'
SHEET 1 OF 1

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855



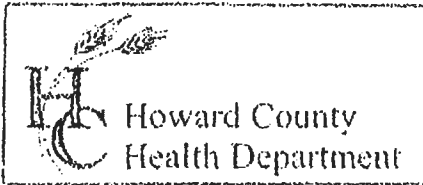
Lot 50
4.395 Ac.±



**4264 MAISEL FARM LANE
WELL EXHIBIT
LOT 50**

FIFTH ELECTION DISTRICT
HOWARD COUNTRY, MARYLAND
W/O: 61260 DATE: SEPTEMBER 2023
SCALE: 1"=50'
SHEET 1 OF 1

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855



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 Fisher, Collins, Carter,
(professional land surveyor or company employing professional land surveyors)
on 7-27-23 (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 WILLIAMSBURG BUILDERS
MAISEL FARM Lane
LOT 50
BUCKSKIN WOODS

Existing Private Driveway Access
And Maintenance Easement Liber
3579, Folio 433 And Liber 3579,
Folio 447

Existing Private Driveway
Access And Maintenance
Easement Liber 3579, Folio
433 And Liber 3579, Folio
447

EXISTING PRIVATE DRIVEWAY ACCESS AND
MAINTENANCE EASEMENT LIBER 3579, FOLIO
433 AND LIBER 3579, FOLIO 447

EXISTING PRIVATE
POND EASEMENT
(L. 1730, F. 238)

PUBLIC FOREST CONSERVATION
EASEMENT NO. 12
CREATED BY RECORDATION
OF THIS PLAT
(RETENTION)
(0.654 AC.±)

LOT 51
BUCKSKIN WOODS
LOTS 50 THRU 54
(PLAT NOS. 11116
AND 11117)
ZONED: RR-DEO

LOT 38
REVISION PLAT
BUCKSKIN WOODS
LOTS 39, 40, 50, 52,
58, 63 AND 64
(PLAT NOS. 22437
THRU 22440)
ZONED: RR-DEO

LOT 40
REVISION PLAT
BUCKSKIN WOODS
LOTS 39, 40, 50, 52,
58, 63 AND 64
(PLAT NOS. 22437
THRU 22440)
ZONED: RR-DEO

LOT 63
REVISION PLAT
BUCKSKIN WOODS
LOTS 39, 40, 50, 52,
58, 63 AND 64
(PLAT NOS. 22437
THRU 22440)
ZONED: RR-DEO

Lot 50
4.395 AC.±

PUBLIC FOREST CONSERVATION
EASEMENT NO. 8A
(RETENTION)
0.520 AC.±

EXISTING PRIVATE
SEPTIC EASEMENT
(PLAT NOS. 11116
AND 11117)
75' B.R.L.

EXISTING PRIVATE
SEPTIC EASEMENT
(PLAT NO. 7201)

EXISTING PRIVATE
SEPTIC EASEMENT
(PLAT NO. 7201)

EXISTING
PUBLIC FOREST
CONSERVATION
EASEMENT NO. 7
(RETENTION)
1.399 AC.±
TO REMAIN

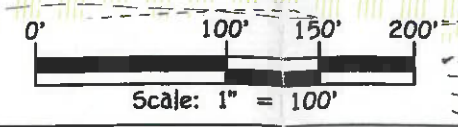
4264 MAISEL FARM LANE SUPPLEMENTAL WELL EXHIBIT LOT 50

FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
W/O: 61260 DATE: SEPTEMBER 2023
SCALE: 1"=100'
SHEET 1 OF 1

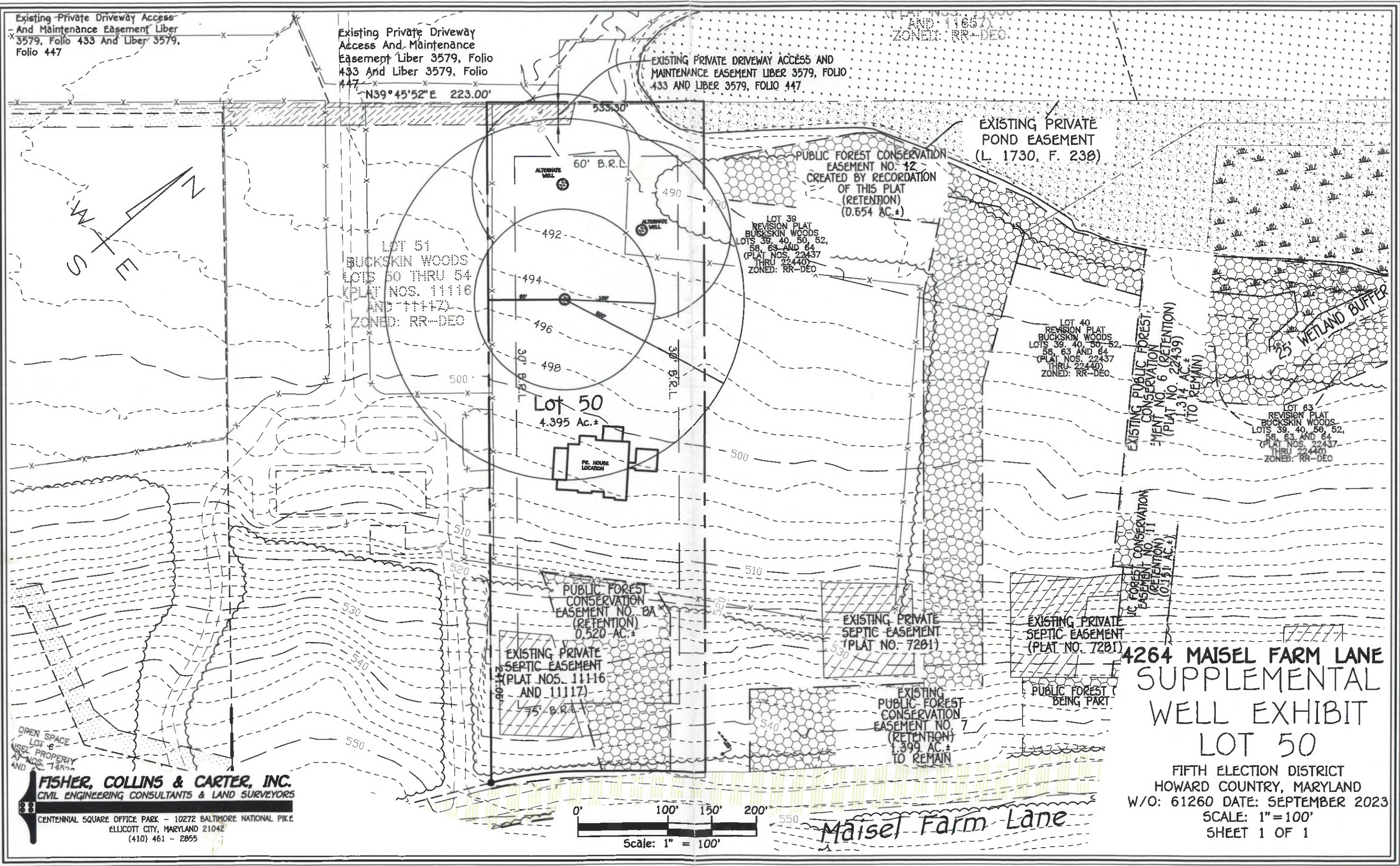
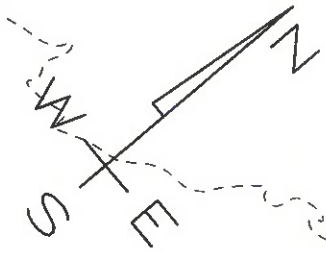
OPEN SPACE
LOT 6
USEL PROPERTY
AT NOS. 7450A
AND

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

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



Maisel Farm Lane



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

MEMORANDUM

Sent via email to: Cataldo, Anthony acataldo@howardcountymd.gov

Cc: Steven James Steven@james-group.com, Frank Manalansan II frankm@fc-eng.com

TO: Anthony Cataldo, Chief
Dept. Planning & Zoning (DPZ)

FROM: Shepsura Page
Environmental Health Specialist.
Well & Septic Program

DATE: October 11, 2024

RE: 'All-Wells-Drilled' -- F-24-060
Buckskin Woods Lots 50, 64, 67, 68, & 69

All wells for *Buckskin Woods* subdivision have been drilled and received preliminary approval by the Health Department.

The recordation of plat **F-24-060** should not be held up any longer due to issues involving well drilling. The developer of this project has fulfilled this prerequisite. If there are any questions involving this memorandum, I can be reached at (410) 313 – 1789.

Respectfully,



Shepsura Page
Environmental Health Specialist
Howard County Health Department
Well and Septic Program

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 172180 Account #: 1933
Reference: Buckskin Farms Lot 50 Client: Fogle's Well Pump & Treatment
Location: 4264 Maisel Farm Lane Requested By: Dave Fogle
Ellicott City, MD 21042 Source: Well Water
Date/ Time Collected: 3/7/2025 0900 Site: Pressure Tank
Date/Time Rec'd: 3/7/2025 1420 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.3
Collected By: T. Cassell 0767TC Well #: HO-20-0311

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/8/2025 / 0900 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/8/2025 / 0900 / LLO
Nitrate.	<0.40	mg/L (as N)	10	EPA 300.0	3/7/2025 / 1606 / KDR
Turbidity	6.78	NTU	<10	SM2130B	3/7/2025 / 1540 / KDR
Sand	ND	mg/L	5	Visual/Gravimetric	3/7/2025 / 1600 / KDR

OK
Buckskin Farms
Nucleo Return

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 Sample collected by client, analyzed as received
- 6 ND = None Detected
- 7 Visual well check: Sealed, vented cap
- 8 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : B24002927

Date Reported: 3/10/2025

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

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

REPORT OF ANALYSIS

Laboratory ID #: 172296 Account #: 1933
Reference: Buckskin Farms Lot 50 Client: Fogle's Well Pump & Treatment
Location: 4264 Maisel Farm Lane Requested By: Dave Fogle
Ellicott City, MD 21042 Source: Well Water
Date/ Time Collected: 3/14/2025 1030 Site: Pressure Tank
Date/Time Rec'd: 3/14/2025 1334 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.2
Collected By: J. Evans 0309JE Well #: HO-20-0311

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/15/2025 / 1045 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	3/15/2025 / 1045 / CCH



NOTES:

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND = None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : B24002927

Date Reported: 3/17/2025

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

December 26, 2023

Williamsburg Builders
5485 Harpers Farm Rd.
Columbia, MD 21044

RE: Maisel Farm Ln. /
Buckskin Woods - Lot 50
Glennelg, MD 21737
(Well Tag # HO-20-0311)

Dear **Property Owner / Homeowner:**

A sample was collected on November 07, 2023 and submitted to the Maryland Department of Health Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the 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 sample screening revealed a **Gross Alpha** of 10.1 ± 2.3 picocuries/liter (pCi/L), while the **Gross Beta** level was 15.5 ± 2.5 pCi/L.

For the sample results, the **Gross Alpha** result was below its **maximum contaminant level (MCL)** of **15 pCi/L**, while the **Gross Beta** level was below its targeted standard 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, your well water supply **does meet** EPA regulatory standards for **Gross Alpha and Gross Beta**. Given these screening results, additional testing to further evaluate these findings does not appear to be necessary.

A copy of the test results is enclosed for your information. Please call the well & septic program at **410-313-1771** and ask for R. Rappaport or an assigned well inspector for this project if you have any further questions.

Sincerely,



Ramar Martin, Program Supervisor
Bureau of Environmental Health

Enclosure
cc: Property file

SEND REPORT TO:

State of Maryland
MDH Laboratories Administration
Division of Environmental Sciences
RADIATION LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

Lab No.

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

LABORATORY ANALYSIS REQUEST FORM

Plant/Site Name: Buckskin Woods - Lot 50 County: Howard

Sample Source: North of 11th Ave. E. 100-2-0311 Sample # 100-1-111 Location: 11111 M. St. 11111 Pines

(Well no., lab sink, sample tap, etc.)

Radon-222 Bottle A _____ Radon-222 Field Blank Bottle A _____
Bottle B _____ Bottle B _____

County: 13 Plant No.

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CHECK (one per Box)

Type
Drinking Water <input type="checkbox"/>
Landfill <input type="checkbox"/>
Stream <input type="checkbox"/>
Other _____ <input type="checkbox"/>

Service
Community <input type="checkbox"/>
Non-Community <input type="checkbox"/>
Private <input type="checkbox"/>
Other _____ <input type="checkbox"/>

Point of Collection
Source (Raw) <input type="checkbox"/>
Distribution (treated) <input type="checkbox"/>
MCL <input type="checkbox"/>

Testing
Emergency <input type="checkbox"/>
Routine <input type="checkbox"/>
Recheck <input type="checkbox"/>
Special <input type="checkbox"/>

Submitters Code: 4 F Federal Project:

Collector: Telephone No.: 410-328-1781

Date Collected: 11/1/03 Time Collected: 11:30 a.m. _____ p.m.

Field pH: 7.1 Field Chlorine: 0

Nitric Acid Preserved: Yes No Iced: Yes No

Remarks: Sample taken during site yield test

<input checked="" type="checkbox"/>	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input type="checkbox"/>	Gross Alpha	4000	361	EM100.0	15.1 ± 2.3	11/13/03	HI	11/19/03
<input type="checkbox"/>	Gross Beta	4100	361	EM100.0	12.5 ± 2.5	11/13/03	HI	11/19/03
<input type="checkbox"/>	Radium-226	4020						
<input type="checkbox"/>	Radium-228	4030						
<input type="checkbox"/>	Total Uranium	4006						
<input type="checkbox"/>	Radon-222 (Bottle A)	4004						
<input type="checkbox"/>	Radon-222 (Bottle B)	4004						
<input type="checkbox"/>	Radon Field Blank A	4004						
<input type="checkbox"/>	Radon Field Blank B	4004						
<input type="checkbox"/>	Tritium							
<input type="checkbox"/>								
<input type="checkbox"/>								

Date Received: 11/13/03 Received By:

Data Release Signature: Date: 11/13/03

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?			
Sample pH <2.0?			
Received within holding time?			

•Tel. No.: (443) 681-3766 •Fax No.: (443) 681-4507

SEND REPORT TO:

State of Maryland
MDH Laboratories Administration
Division of Environmental Sciences
RADIATION LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

Lab No.

Ramar Marlin
~~Howard County Health Department~~
~~Bureau of Environmental Health~~
8930 Stanford Blvd.
Columbia, Maryland 21045

LABORATORY ANALYSIS REQUEST FORM

Plant/Site Name: Field Blank

County: Howard

Sample Source: distilled water (HC0000)

Location: HCHD EH Lab

(Well no., lab sink, sample tap, etc.)

Radon-222 Bottle A _____
Bottle B _____

Radon-222 Field Blank Bottle A _____
Bottle B _____

County 113

Plant No.

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CHECK (one per Box)

Type	
Drinking Water	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>
Stream	<input type="checkbox"/>
Other	<input type="checkbox"/>

Service	
Community	<input type="checkbox"/>
Non-Community	<input type="checkbox"/>
Private	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

Point of Collection	
Source (Raw)	<input checked="" type="checkbox"/>
Distribution (treated)	<input type="checkbox"/>
MCL	<input type="checkbox"/>

Testing	
Emergency	<input type="checkbox"/>
Routine	<input checked="" type="checkbox"/>
Recheck	<input type="checkbox"/>
Special	<input type="checkbox"/>

Submitters Code: 4 E

Federal Project: 5

Collector: K. Koppert

Telephone No.: 410-313-1781

Date Collected: 11/7/23

Time Collected: _____ a.m. 2 p.m.

Field pH: < 6.0

Field Chlorine: 0

Nitric Acid Preserved: Yes No

Iced: Yes No

Remarks: Sample taken in the EH lab

<input checked="" type="checkbox"/>	TEST	EPA Code	Lab No.	Method No.	Results (pCi/L)	Date Analyzed	Analyst	Date Reported
<input checked="" type="checkbox"/>	Gross Alpha	4000	962	EPA9000	<2	11/13/23	AJ	11/14/23
<input checked="" type="checkbox"/>	Gross Beta	4100	962	EPA9000	<4	11/13/23	AJ	11/14/23
<input type="checkbox"/>	Radium-226	4020						
<input type="checkbox"/>	Radium-228	4030						
<input type="checkbox"/>	Total Uranium	4006						
<input type="checkbox"/>	Radon-222 (Bottle A)	4004						
<input type="checkbox"/>	Radon-222 (Bottle B)	4004						
<input type="checkbox"/>	Radon Field Blank A	4004						
<input type="checkbox"/>	Radon Field Blank B	4004						
<input type="checkbox"/>	Tritium							
<input type="checkbox"/>								
<input type="checkbox"/>								

* Reported from the re-counted analyzed batch. on 7 11/14/23

Date Received: 11/14/23 Received By: AJ

Data Release Signature: Melvinha Tusa Date: 11/14/23

Lab Use Only	Yes	No	N/A
Sample Intact upon arrival?			
Sample pH <2.0?			
Received within holding time?			

HoCo Health Depart
NOV 15 2023
Environmental Health

•Tel. No.: (443) 681-3766 •Fax No.: (443) 681-4507