

3/4/96

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-373 832

P 56459 A
A 21112
A REPAIR

DISTRICT 5th

DATE 2-27-96

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XX450933~~ 313-2640

DATE SYSTEM APPROVED 3/4/96

INDEXED

INSPECTOR DKS

Jack Fyock Septic Service _____ IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION _____ LOT Parcel 1 ROAD 6876 Mink Hollow Road

PROPERTY OWNER Webber

ADDRESS 6876 Mink Hollow Road
Highland, Maryland 20777

SEPTIC TANK CAPACITY 1500 1250 GALLONS

NUMBER OF BEDROOMS 84

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 77'±

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 02/22/96

Install trench off existing system, running parallel to existing trenches.

Trench inlet 3.5', bottom 10', stone 6.5.

PLANS APPROVED BY George H. Joe DATE 3/4/96
jr

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

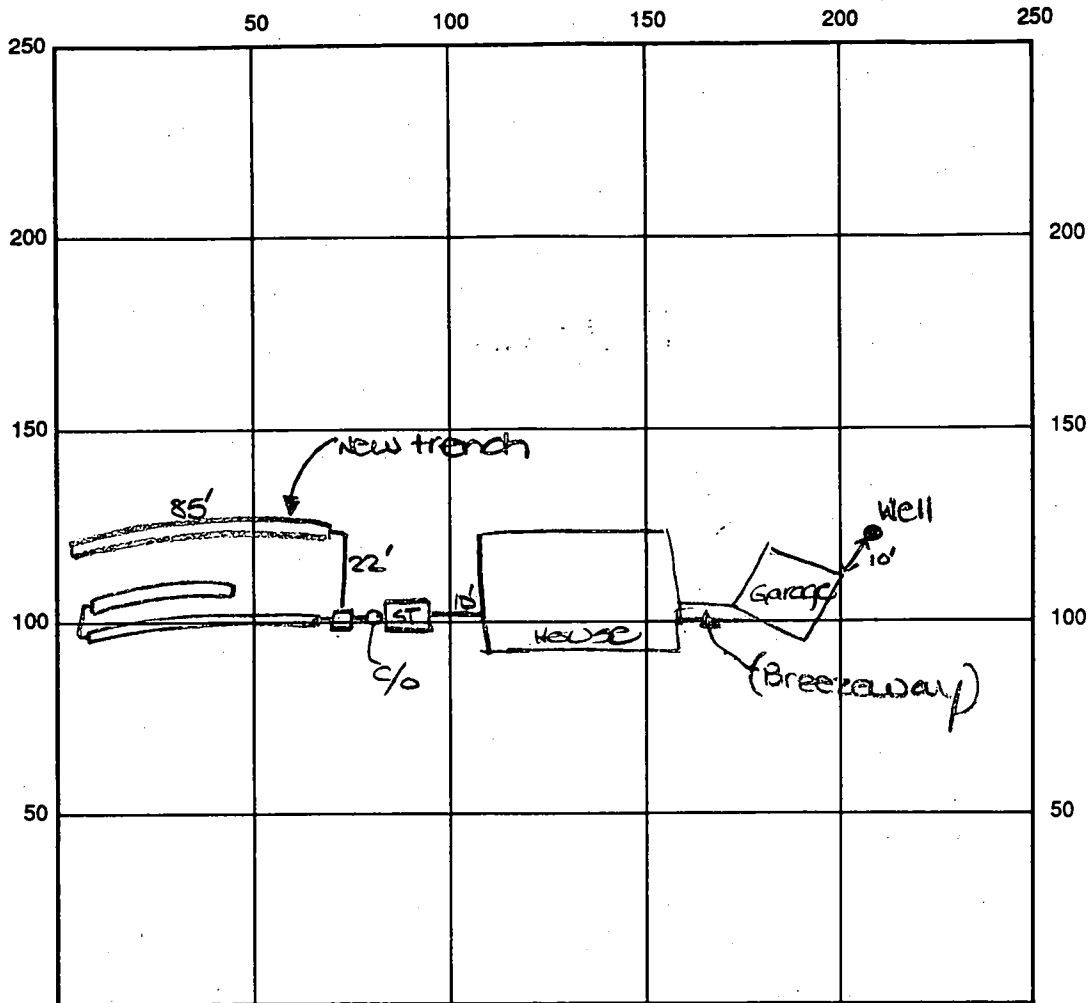
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

56459A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
Mink Hollow Road

SEPTIC TANK LEVEL 1250 gal CLEANOUTS one at s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 10.0 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 6.5 FT. TOTAL LENGTH 85 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL ~~AREA~~ AREA 552 SQ. FT. + existing

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 3/4/96 FINAL - OK to cover all work. DKS

DATE SYSTEM APPROVED 3/4/96 INSPECTOR Souma & Goe

SYSTEM TO BE INSTALLED FIRST BEFORE BUILDING PERMIT IS SIGNED.

PERMIT

file approved 11/22
7-22-75 P 21422

A 21112

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 5/1/75

INDEXED

5/1/75
Amount
possible
5/22/75

7/22/75 on
7/23/75 -
final house
connection

Jack Fyock

IS PERMITTED TO INSTALL ALTER

ADDRESS Ten Oaks Road, Glenelg, Maryland

PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 6876 Mink Hollow Road LOT Parcel 1

PROPERTY OWNER William Webber

ADDRESS 8106 Imperial Drive, Laurel, Maryland

Phone: 490-2873

SPECIFICATIONS 5 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1500 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER TRENCH - 2 trenches - 11 ft. deep - 2 ft. wide - 85 ft. long - with 5 ft. of gravel under pipe. Call for inspection of trenches before gravel is installed. The trenches must be 15 ft. apart center to center. Begin first trench at point 90 ft. from front line and 140 ft. from left side and go towards left sideline. Second trench 15 ft. behind trench #1. Trenches to be parallel with front lot line.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY Donald W. Monaghan & R. Hodges DATE 4/14/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

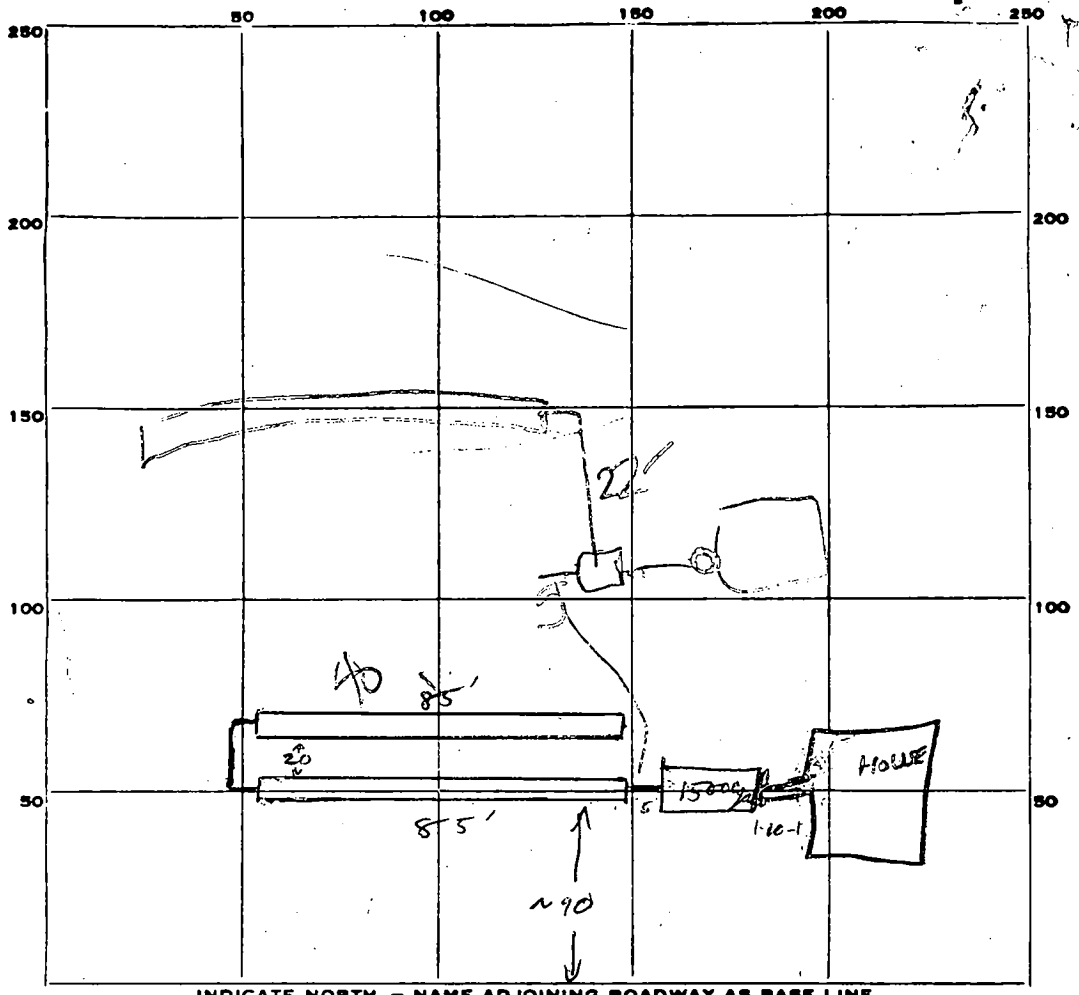
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BLDG. PERMIT SIGNED AND RETURNED 5/5/75

BLDG. PERMIT SIGNED AND RETURNED 10/26/93

Serial # 45942
addition - Shed & work shop

21112



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Mink Hollow Rd.

PERMIT CARD

SEPTIC TANK, LEVEL

CLEANOUTS

~~DISTRIBUTION BOX, LEVEL~~

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 ^{ft} IN. TOTAL LENGTH 170 FT.

NUMBER OF TRENCHES 2 TOTAL sidewall BOTTOM AREA _____

~~SEPTIC TANK, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.~~

ABSORBENT AREA 850 SQ. FT.

REMARKS House to septic tank connection - OK to
cover. H-2-7-22-75

DATE SYSTEM APPROVED 5/12/75
7-22-75 INSPECTOR [Signature]

PRELIMINARY

APPLICATION

Webber

A 21112

P _____

2/14/75
9:30 A.M.

Well & septic first before bldg permit.
SEWAGE DISPOSAL TESTING PERMIT

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 2/4/75

*11' deep trench
start 140 off left line
depth 12'
6' gravel*

Septic Tanks - 1500 gal

Trench - 2 Trenches - 11 ft deep - 2 ft wide - 85 ft long - with 5 ft of gravel under pipe. Call for insp. of trenches before gravel is installed. Trenches must be 15 ft apart center to center.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND
Begin first trench at point 90 ft from front line and 140 ft from left side & go towards left sideline. Second trench 15 ft & behind trench #1.

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
Trenches to be 11 with front lot line

PROPERTY OWNER Phillip M. Henry

Any questions call John Schneider:
465-7777

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 1

ROAD AND DESCRIPTION Mink Hollow Road

SIZE OF LOT 2 acres TYPE BLDG. 3 of 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Schneider

✓ APPROVED BY Dr. Nancy Lee & R. Hodge FOR Trench DATE 4-14-75
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2/20/75 - Hold for review (water) RH

2/21/75 - Held for review with DM. OK for trenches RH

3/5/75 - DM & RH APPROVE FINAL PLAN FOR SIGNATURE

Wm Webber - 8106 Imperial Dr. Laurel

THIS IS NOT A PERMIT

490-2873

APPLICATION

A 18375

PRELIMINARY

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 4/27/73

House elevation plans to be submitted and system to be installed before Bldg. permit is released.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Phil Henry

Any questions call Ron Bailey
837-0194

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. EA

ROAD AND DESCRIPTION Mink Hollow Road

SIZE OF LOT XXXXXXX 2 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Ron BAiley

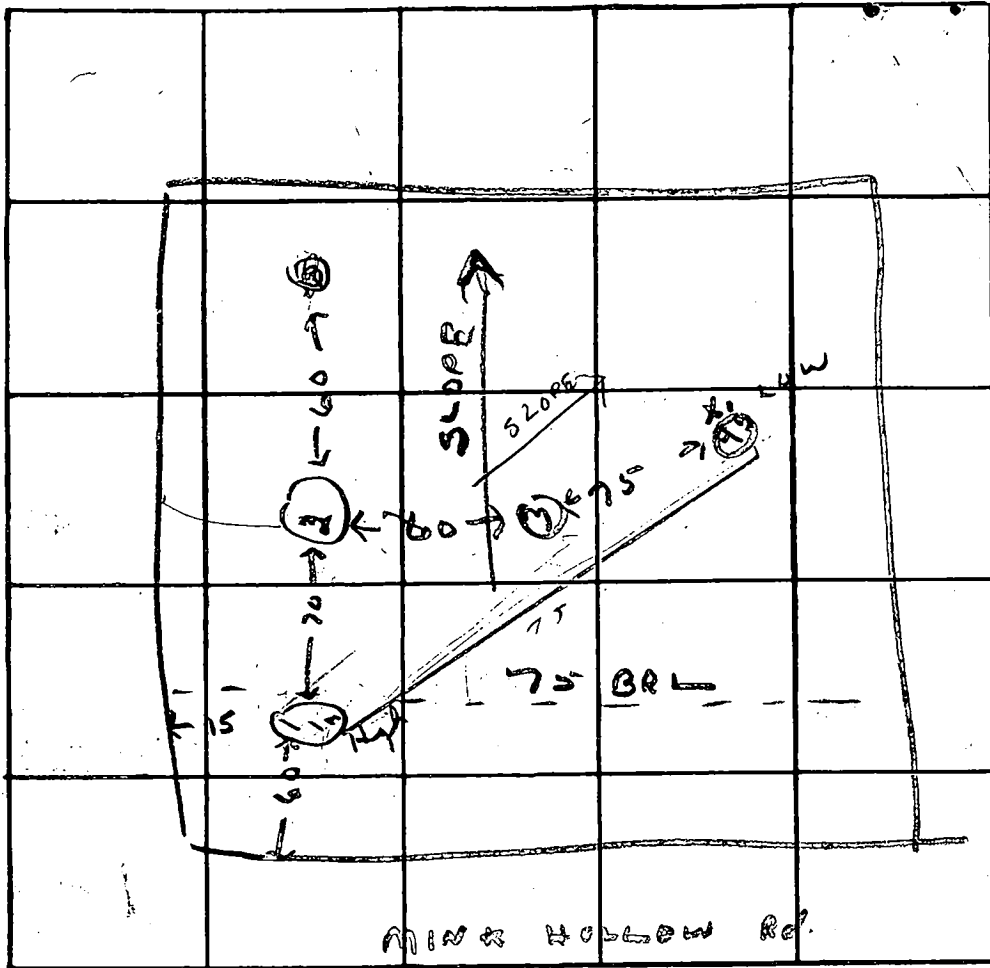
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/11/72	1	4 1/2 ft	11 16	11 22	11 22	11 32	10 min	
	1A	11 1/2 ft	11 16	11 25	11 25	11 41	16 min	
	2	11 ft	time out	end				
	3	10 1/2 ft	good	end				
	4	11 ft	11 26	11 31	11 31	11 45	14 min	
	5	5 1/2 ft	11 26	11 29	11 29	11 36	7 min	
	6	10 ft	water - Deep clay, lime					
			Design in 1 & 1A.					

REMARKS _____

TYPE OF SOIL _____

TESTED BY R.T. ALSO PRESENT: _____

Alvin H. ...

APPLICATION

A 18375

PRELIMINARY

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 463-5000, EXT. 356

DISTRICT 5th
DATE 4/27/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Phil Henry
ADDRESS _____
Any questions call Ron Bailey
PHONE 837-0194

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 8 A

ROAD AND DESCRIPTION Mink Hollow Road

SIZE OF LOT ~~XXXXXX~~ 2 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Ron BAiley

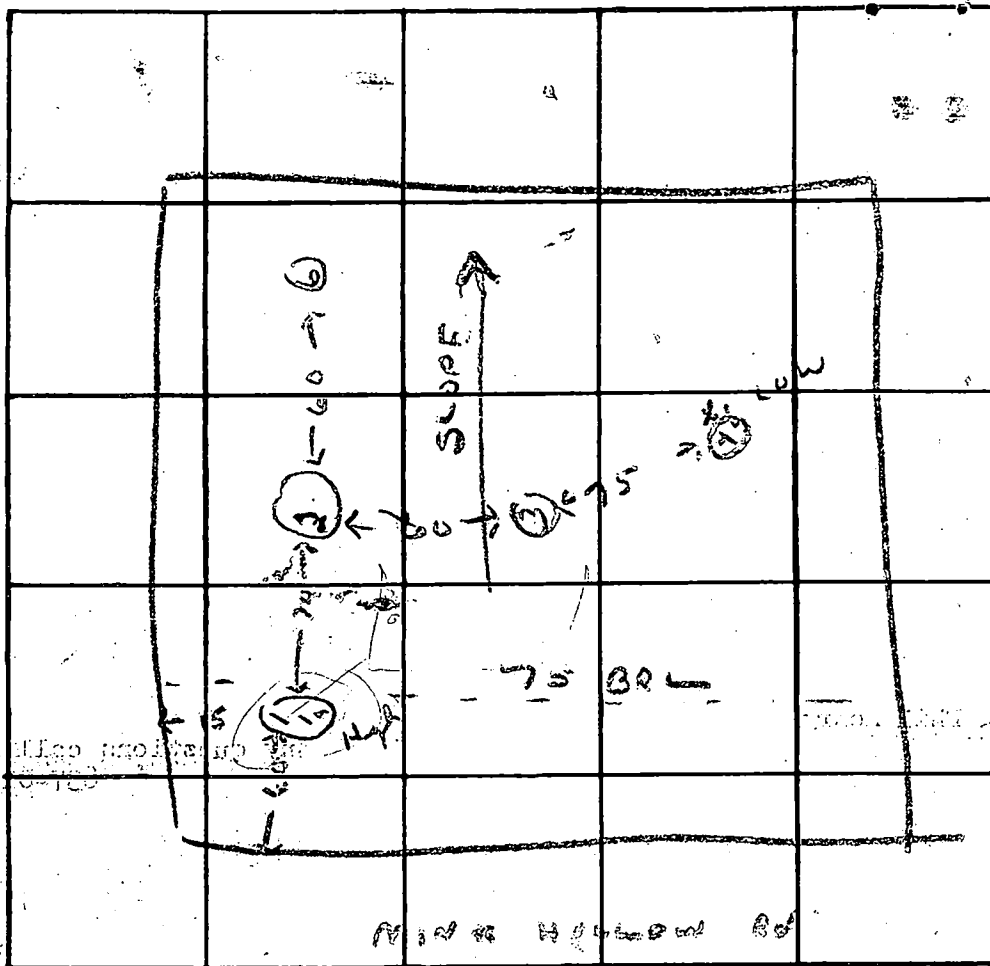
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/11/72	1	4 1/2 ft	11:16	11:25	11:25	11:32	10 min
	1A	11 1/2 ft	11:16	11:25	11:25	11:30	16 min
	2	11 ft	hard	hard			
	3	10 1/2 ft	hard	hard			
	4	11 ft	11:26	11:31	11:31	11:45	14 min
	5	8 1/2 ft	11:26	11:29	11:29	11:36	7 min
	6	10 ft	water	- Deep	Deep	Deep	

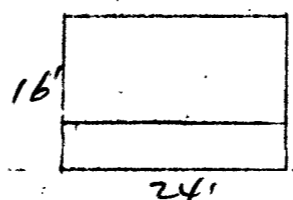
REMARKS _____

TYPE OF SOIL _____

TESTED BY R.T. ALSO PRESENT: _____

944 28'39"E 311.74'

SHED
24'x16'



85'

SEPTIC TANK CLEAN-OUT
LOCATED!
24 FEET FROM REAR CORNER
16 FEET FROM FRONT CORNER
11.5 FEET FROM SIDE
OF BUILDING

FUEL TANK

WELL

SEPTIC SYSTEM DRAIN FIELD
TRENCH LOCATION APPROXIMATE
DEPTH RANGES FROM 15 TO 18 FEET

FUEL FILL PIPE

ELECTRIC SERVICE
AND TELEPHONE

10/26/92
OK TO SIGN
BP 45942
BRH

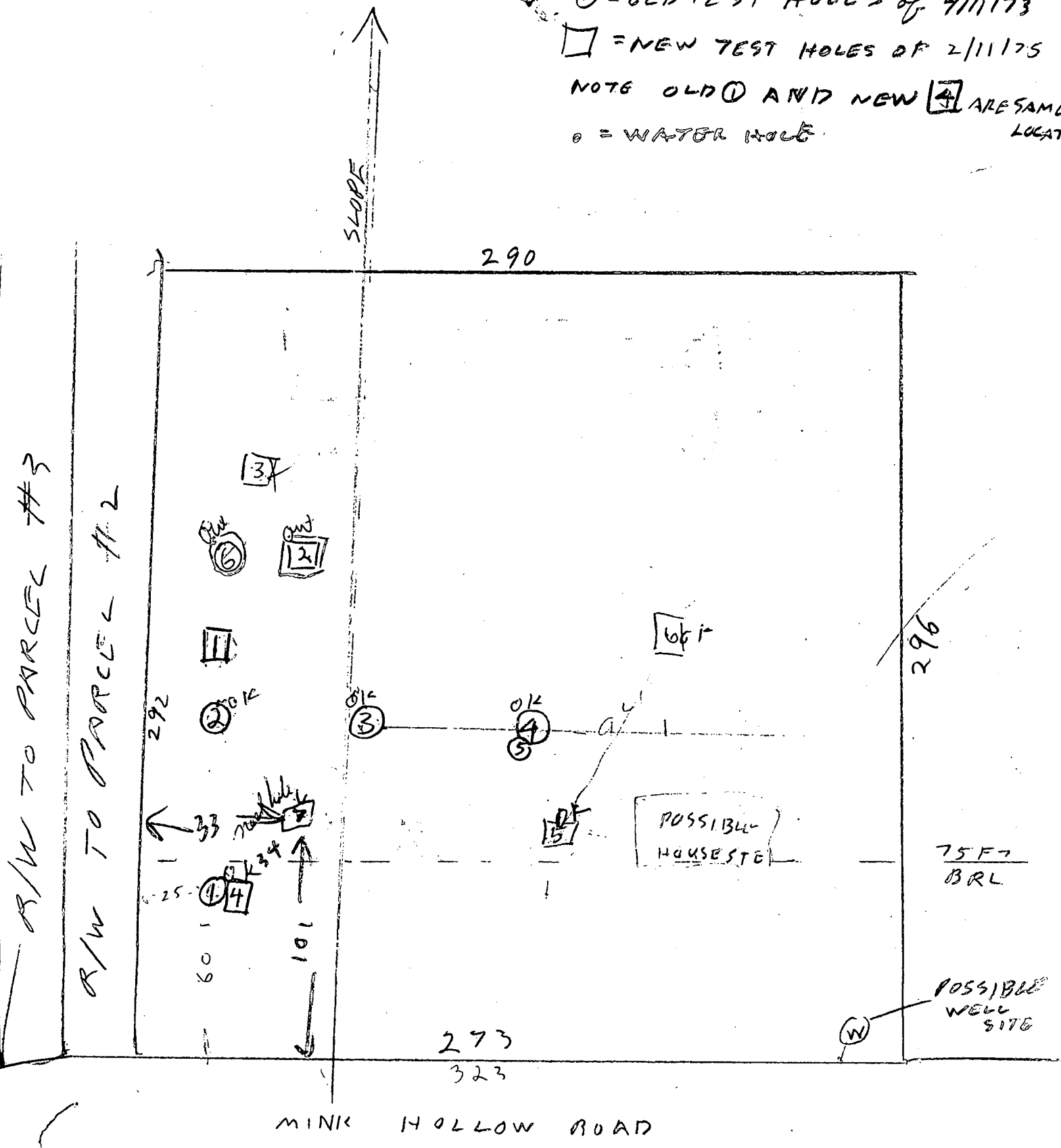
152'

S46 29'33"W 273.72'

6876 MINK HOLLOW ROAD

PHILLIP M HENRY
 PARCEL #1 2AC
 MINK HOLLOW RD
 SCALE 1" = 50 FT

- = OLD TEST HOLES OF 4/11/73
- = NEW TEST HOLES OF 2/11/75
- NOTE OLD ○ AND NEW □ ARE SAME LOCATION
- = WATER HOLE

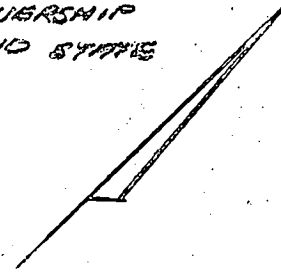


MINK HOLLOW ROAD

REAL INVESTORS ASSOCIATES, INC.

484/E17

THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH REGULATIONS.



PARCEL 3
2.00 AC. ±

PARCEL 2
2.00 AC. ±

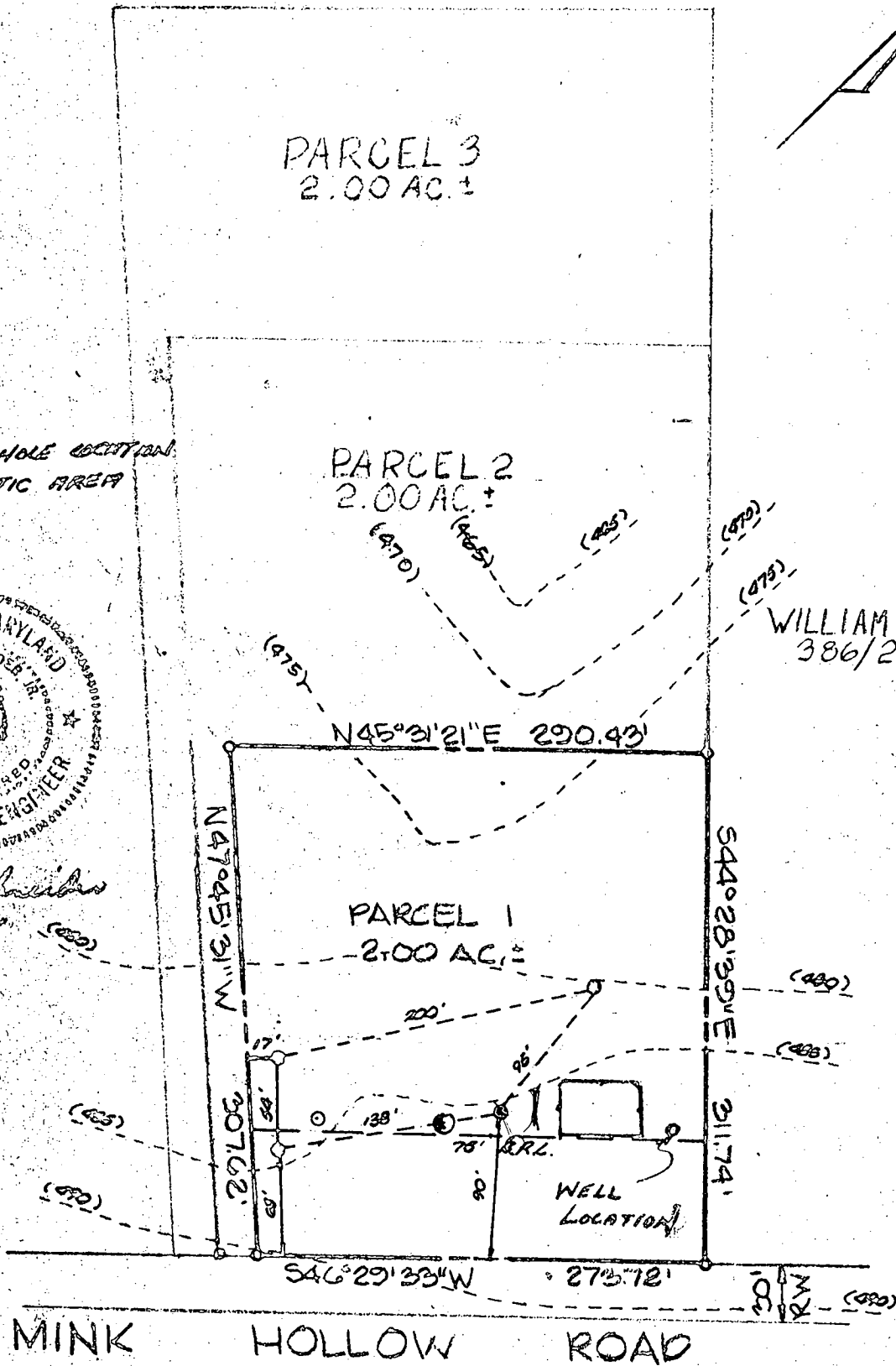
PARCEL 1
2.00 AC. ±

WILLIAM A. DUGAN
386/260

○ PERC HOLE LOCATION
--- SEPTIC AREA



John L. Schneider
3/13/75



MINK HOLLOW ROAD

APPROVED FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS

[Signature]
HOWARD COUNTY HEALTH OFFICER

3/13/75
DATE

TITLE PROPERTY PLAT & PERC TEST PLAT		ENGINEERING PLANNING SURVEYING BY BOENDER ASSOCIATES INC. BALTIMORE, MD. 465-7777 SALISBURY, MD. 749-1286 WESTMINSTER, MD. 848-5588	
PROJECT HENRY PROPERTY			
LOCATION 5 TH ELECTION DISTRICT HOWARD CO., MD.			
DATE: 2/7/75	DES. BY:		DRAWN BY: P.D.
SCALE: 1" = 100'	JOB NO. 73153	DRWG. NO.:	

B 1 6348 (SEQ. NO.)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 5 & 6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
 46-7-2-1011
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
 6/8/75
 10:30

OWNER WEBER WILLIAM
 COL 15 LAST NAME FIRST NAME COL. 34
STREET OR RFD 306 IMPERIAL DR.
 COL 36 COL. 55
POST OFFICE LAUREL MD 20811
 COL 57 COL. 76

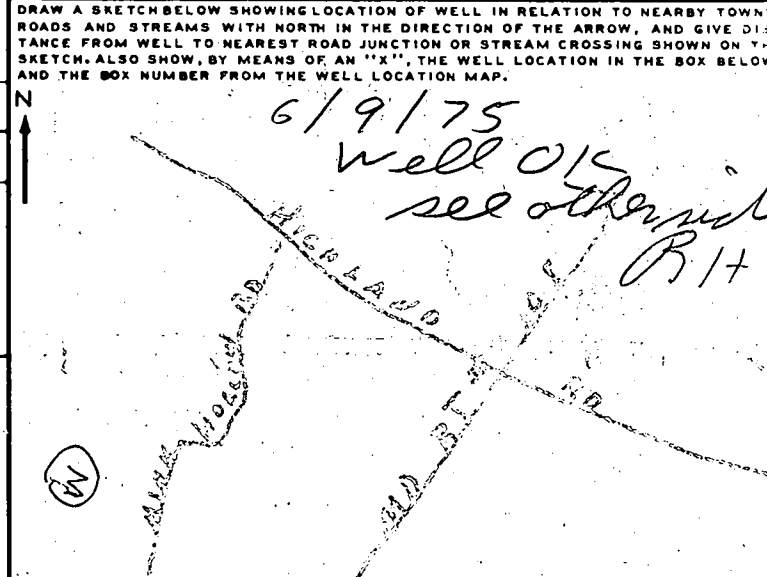
B 1 CONTINUED **DRILLER INFORMATION**
 1 2 3 (SEQ. NO.) 6
DATE 6/23/75 **LICENSE NUMBER** 208
 77 80
FIRST NAME **DRILLER** **LAST NAME**
SIGNATURE

B 3 **LOCATION OF WELL**
 1 2 3 (SEQ. NO.) 6
COUNTY HOWARD 21
 (DO NOT ABBREVIATE COUNTY NAME)
SUBDIVISION HENRY BRADERT 42
SECTION 2081 44 46 48 50
LOT
NEAREST TOWN HIGHLAND 52 71
MILES FROM TOWN (ENTER 0 IF IN TOWN) 4 MI 76 77 78

B 2 **WELL INFORMATION**
 1 2 3 (SEQ. NO.) 6
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 14 300 20
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING, AGRICULTURE, IRRIGATION
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 MUNICIPAL WATER SUPPLY
 PRIVATE WATER COMPANY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 TEST

B 4 **DIRECTION FROM TOWN**
 (CIRCLE APPROPRIATE BOX)
 NORTH EAST NE NORTHEAST SE SOUTHEAST
 SOUTH WEST NW NORTHWEST SW SOUTHWEST
NEAR WHAT ROAD 11 NORTH 30 SOUTH 30 EAST 30 WEST 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 100 MI 34 37 38 39

APPROXIMATE DEPTH OF WELL 200 FEET
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED) JETTED DRIVEN
 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
 CABLE REVERSE-ROTARY DRIVE-POINT
OTHER (DESCRIBE)



REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER 54 **ENGINEER REVIEW DISTRICT NO.** 65
FORCE **WRITE INITIALS IN BOX** **CONDITIONS** A E N S G W Q C L U
 67 68 70 71 72 73 74 75 76 77 78 79

BOX NUMBER E 800 N 490
NORTH COORDINATE 50 51 52 53 54 55
EAST COORDINATE 57 58 59 60 61 62 63
ELEVATION AT WELL HEAD (FEET) 65 66 67 68
 0/0 5/0

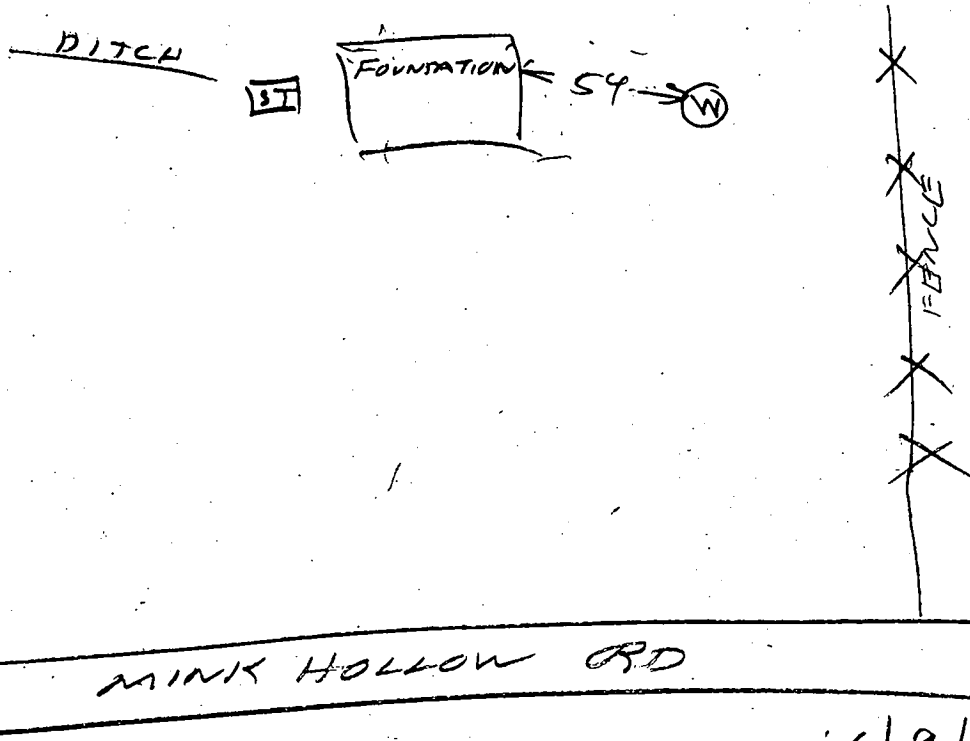
B 4 CONTINUED **HEALTH DEPARTMENT APPROVAL**
 1 2 3 (SEQ. NO.) 6
 STATE HEALTH (CIRCLE BOX) COUNTY NAME COUNTY NO.
DATE 6/25/75
 MO. DAY YR.
APPROVED BY Donald H. ...
 43 48

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 6

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

APR 31 9 07 AM '75

DIVISION OF
ENVIRONMENTAL
HEALTH



6/9/75 120

- ① Depth to be grouted is 30 ft
- ② Casing is 35 ft long with 3 ft out of ground
- ③ Grout hole has 4 or 5 ft water standing in it
- ④ 12 bags of cement
- ⑤ Septic System and foundation of house finished
- ⑥ Well is OK

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
APR 30 8 09 AM '75
DIVISION OF
ENVIRONMENTAL
HEALTH

R. Hodger

SEQUENCE NO. (WRA USE ONLY)
 C 1. **6476**
 1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 30 ON ALL CARDS)

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
 FILL IN THIS FORM COMPLETELY
 COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) _____ DATE WELL COMPLETED 5/20/75
 DEPTH OF WELL 250 (TO NEAREST FOOT) 22 26
 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-72-1001
 28 29 30 31 32 33 34 35 36 37
 DRILLERS IDENTIFICATION NO. 209

OWNER: WEBER WILLIAM LAST NAME FIRST NAME
 STREET OR RFD 8106 IMPERIAL DR POST OFFICE LAUREL MD 20811

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<i>Clay</i>	0	25	
<i>Mica Sand</i>	25	35	
<i>Mica Rock</i>	35	250*	

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO
 44 44

TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT BENTONITE CLAY
 45 46 45 46

NO. OF BAGS 12 NO. OF POUNDS 1175
 GALLONS OF WATER 120

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 30 FT.
 (ENTER 0 IF FROM SURFACE) 48 52 54 58

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW)

ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER

MAIN CASING TYPE 6
 60 61 63 64 66 70

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
	FROM	TO	FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)

ST STEEL BR BRASS OR BRONZE HO OPEN HOLE
 PL PLASTIC OT OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM TO

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
1	<u>30</u>	<u>250</u>
2		
3		

SLOT SIZE 1. _____ 2. _____ 3. _____

DIAMETER OF SCREEN _____ (NEAREST INCH)
 FROM _____ TO _____

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

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

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6
 8 9

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 4
 11 15

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 50 (NEAREST FOOT) 17 20
 WHEN PUMPING 250 (NEAREST FOOT) 22 25

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

AIR PISTON TURBINE
 27 27 27
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 27 27 27
 JET SUBMERSIBLE
 27 27

PUMP INSTALLED

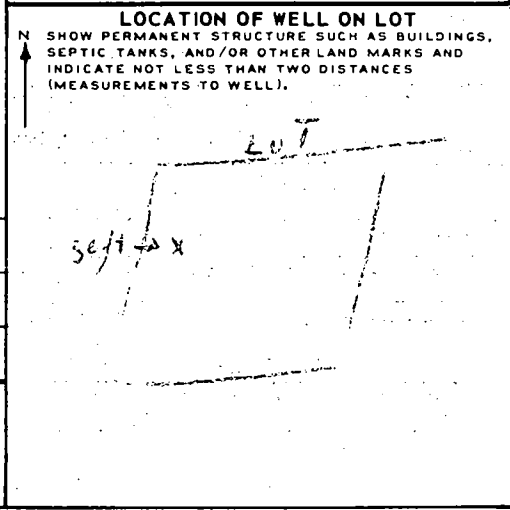
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) _____ 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
 Y N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) _____ 31 35
 PUMP HORSE POWER _____ 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) _____ 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT) 2
 BELOW } 49 50 51



CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME
 (PLEASE PRINT) HOWARD DILLON
 SIGNATURE Howard Dillon