

9/13/00
11:00
Trench layout
Needs lot # for trench inspection

INDEXED

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 513642
A 511961

ISSUE DATE 06/20/00

APPROVAL DATE 9/14/00

04-343255

C & C Utility Service IS PERMITTED TO INSTALL ALTER

ADDRESS 7398 Gaither Road Sykesville, MD 21784 PHONE (410) 549-4987

SUBDIVISION Blackert Property LOT NUMBER 2 ADDRESS 17851 Shaffers Mill Road

PROPERTY OWNER Mr. and Mrs. Richard Weems PROPERTY OWNER'S ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES: Trenches to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 4.5 feet below original grade. 1.5 feet of stone below distribution box.

LOCATION: Place the distribution box 175 feet off the edge of Shaffers Mill Road along the front lot line and 570 feet off the right lot line. Run trenches along contour towards the right lot line.

PLANS APPROVED Donna K. Soe OK 6/20/00 DS DATE 04/17/00

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

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

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

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

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

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

513642

NOT TO SCALE

TRENCH DATA

TRENCH WIDTH 3

TRENCH INLET DEPTH 3

TRENCH BOTTOM DEPTH 4.5

DEPTH OF STONE 1.5

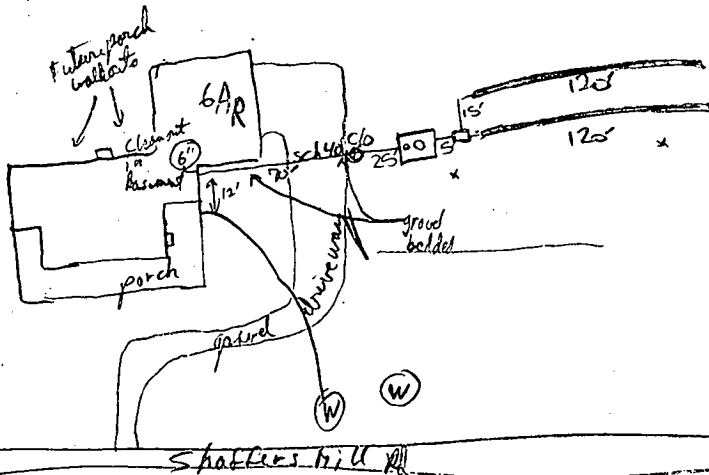
NUMBER OF TRENCHES 2

TOTAL TRENCH LENGTH 240

ABSORBENT AREA 720

DISTRIBUTION BOX LEVEL ✓

BAFFLE IN DISTRIBUTION BOX ✓



SEPTIC TANK DATA

SEPTIC TANK 1250 TopScan GALLONS

MANHOLE RISER NA (12" Max)

6 INCH INSPECTION PORT ✓

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS _____

MANHOLE RISER _____

ALARM _____

PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: Septic tank hole OK - No lock, Excessive stoney soil in house connection

line trench first 65ft from house then stone for rest thereafter. Layout same as on BP Plan - OK to place

Trenches on each side of old pipe. R/P 9/13/00
INSPECTION COMMENTS: Septic Tank Set OK, House Connection line OK first 70ft -

Needs a clean out before hit S.T. R/P 9/13/00

9/14/00 FINAL INSPECTION - call to cover all septic work. D/C

INSPECTOR D/C DATE SYSTEM APPROVED 9/14/00

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

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

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

Company Name: Tim Daws Plumbing Telephone #: 301-252-6475
Address: 10901 Magnolia Dr
Damascus md 20852

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Richard W. Hibble License# 63456

*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: Walter R. Weems Telephone #: 301-829-4463
Subdivision: _____ Lot #: _____ Well Tag #: HO-94-1778
Site Address: 17851 Shaffers Mill Rd.
Mt. Airy MD 21771

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>FLOTEC</u>	Make: <u>HARVARD</u> (1" BRASS)	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: _____	Model#: <u>PT800</u>	Screened, vented well cap: _____
Pump Capacity <u>8</u> GPM	Depth: <u>48"</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>21</u> GPM	NSF/WSC approved: <u>Yes</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>110</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.3.4

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

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

Piping to house

Type: 1"
PSI: 200 (160 psi min)
Depth of supply line: 48" (36" min)

House Connection

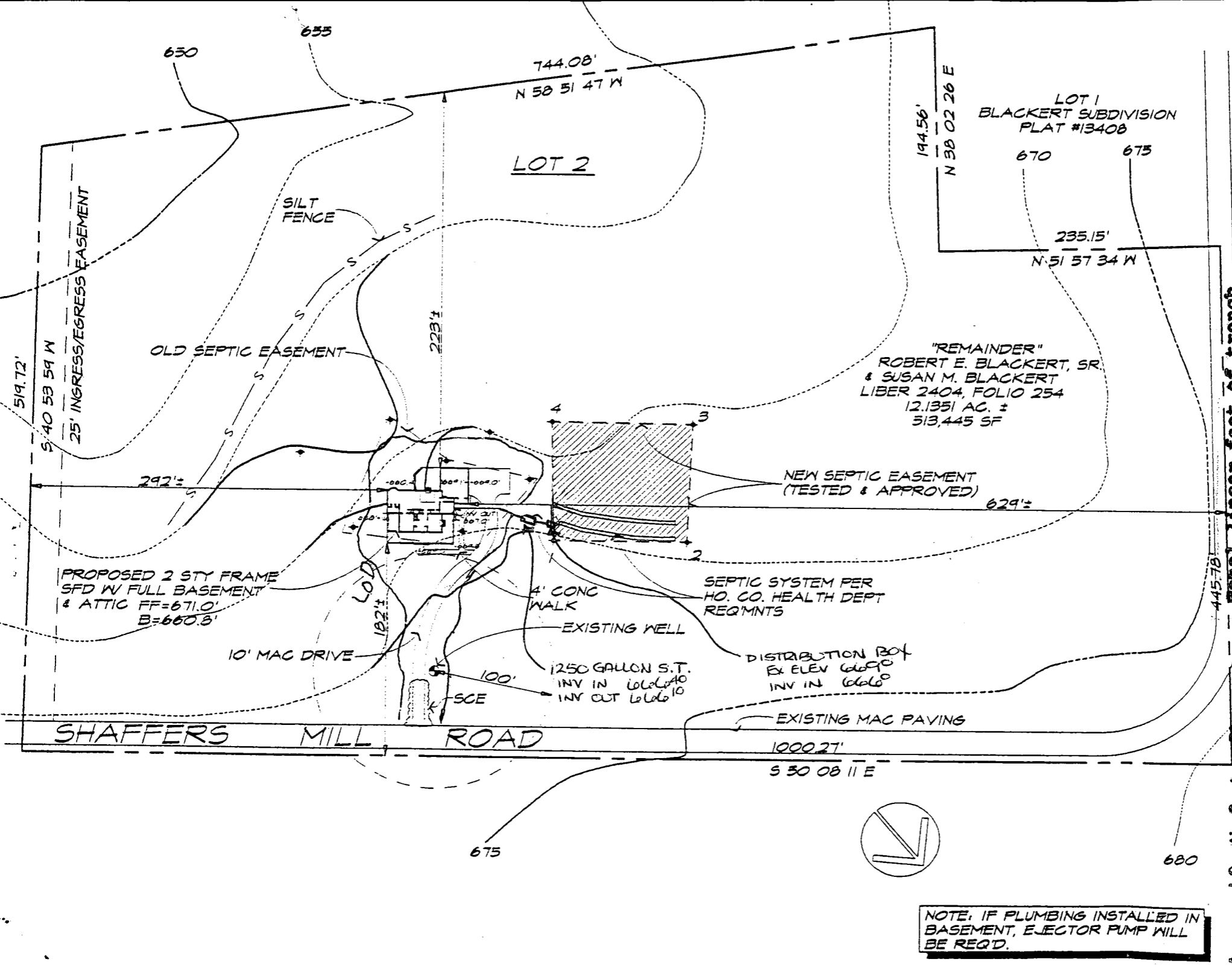
PVC sleeve to undisturbed soil at wall penetration:
Approximate length of sleeve: 24"
Sleeve caulked and sealed properly:

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

Richard W. Hibble Signature of company representative responsible for installation
4-13-01 date

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

Date Insp. Requested: 7/26/00 Date Insp. Approved: 7/26/00 Inspector: BB SRH
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 seen 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



SITE PLAN 1"=100'

NOTE: IF PLUMBING INSTALLED IN BASEMENT, EJECTOR PUMP WILL BE REQ'D.

Approved Septic System Plan
 Howard County Health Department

Width of trench(es) 3 feet
 Depth of trench(es) 4.5 feet

Depth of stone required below distribution pipe 16.5 inches

4/2/00 Date

[Signature]
 Signature

DATE: 12
 SCALE: A
 JOB NO:
 SHEET

STE. McCH ARCHITECT
 9229 MA ELICOTT C
 FAX (410) (410) 48

THE WEEMS RESIDENCE

REVISION

STEWART/MCCREARY ARCHITECTS, P.A.

Linear feet of trench 240 feet
 Stepped 240 feet

LOT 1
 BLACKERT SUBDIVISION
 PLAT #13408

"REMAINDER"
 ROBERT E. BLACKERT, SR.
 & SUSAN M. BLACKERT
 LIBER 2404, FOLIO 254
 12.1351 AC. ±
 313,445 SF

OLD SEPTIC EASEMENT

SILT FENCE

PROPOSED 2 STY FRAME
 SFD W/ FULL BASEMENT
 & ATTIC FF=671.0'
 B=660.8'

NEW SEPTIC EASEMENT
 (TESTED & APPROVED)

SEPTIC SYSTEM PER
 HO. CO. HEALTH DEPT
 REQ'MNTS

DISTRIBUTION BOX
 EX ELEV 6690
 INV IN 6666

EXISTING WELL

4' CONG
 WALK

1250 GALLON S.T.
 INV IN 6666
 INV OUT 6666

EXISTING MAC PAVING

10' MAC DRIVE

LOD

SCE

1000.21'

S 30 08 11 E

629'

235.15'

N 51 57 34 W

194.56'

N 38 02 26 E

LOT 2

744.08'

N 50 51 47 W

650

655

519.72'

S 40 53 51 W

25' INGRESS/EGRESS EASEMENT

223'

292'

223'

182'

445.78'

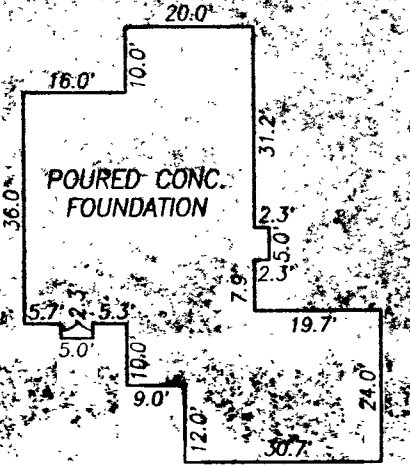
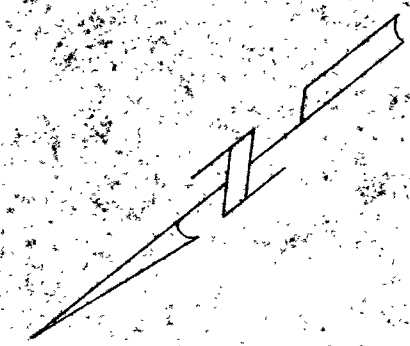
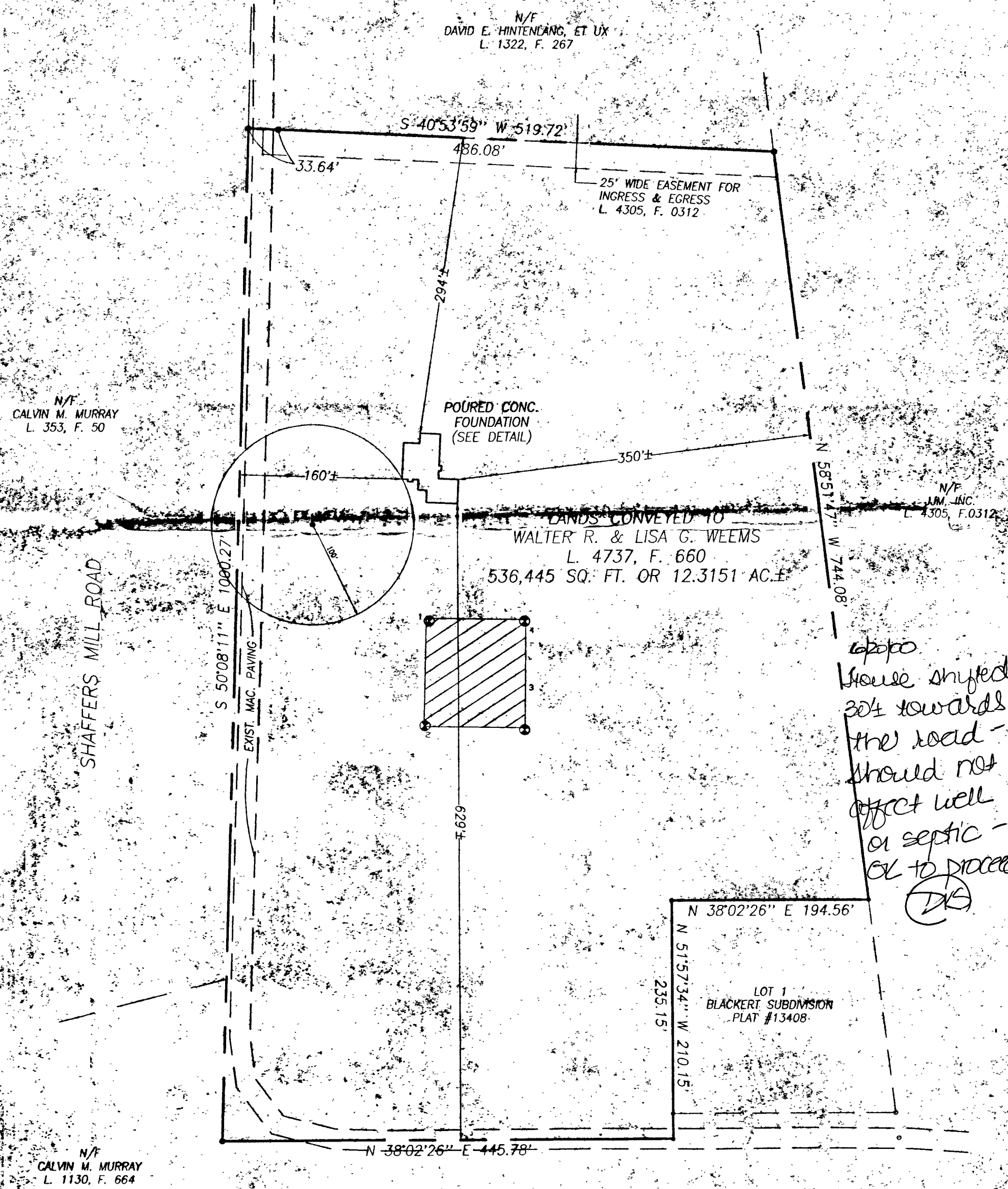
N 44 57 11 W

670

675

675

680



HOUSE DETAIL
NOT TO SCALE

6000
House shifted
30% towards
the road -
should not
affect well
or septic -
OK to proceed.
(DS)

I CERTIFY THIS PLAN TO BE CORRECT. IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF CARROLL COUNTY, MARYLAND, AS REFERENCED HEREON.

Sourabh Munshi 4/26/00
SOURABH G. MUNSHI, PROFESSIONAL LAND SURVEYOR, MD. REG. No. 10770 DATE



WALL CHECK DRAWING
LAND CONVEYED TO:
WALTER R. & LISA G. WEEMS
L. 4737 F. 660

17851 SHAFFERS MILL ROAD
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 100' APRIL, 2000

VANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
310 South Main Street P.O. box 328 Mount Airy, Maryland 21771
(301) 829 2890 (301)831 5015 (410) 549 2751

N/F CALVIN M. MURRAY
L. 353, F. 50

N/F DAVID E. HINTENLANG, ET UX
L. 1322, F. 267

POURED CONC. FOUNDATION
(SEE DETAIL)

LANDS CONVEYED TO
WALTER R. & LISA G. WEEMS
L. 4737, F. 660
536,445 SQ. FT. OR 12.3151 AC.±

N/F J.M. INC.
L. 4305, F. 0312

N/F CALVIN M. MURRAY
L. 1130, F. 664

SHAFFERS MILL ROAD

30
7/23/99
10/10
8/12/99
10/00

APPLICATION

PERCOLATION TESTING

A 511961

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

PROBLOW OK
PROPOSED CHANGED
5607IC 1161.

DISTRICT _____

DATE 6-21-99

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Richard and Lisa Weems

ADDRESS 102 Estelle Court Sykesville MD PHONE 410-795-8676

AGENT OR PROSPECTIVE BUYER Charles G Zepp Jr (CFC Utility Service)

ADDRESS 7398 Gaither Rd Sykesville PHONE _____

PROPERTY LOCATION:

SUBDIVISION Black Kent Property LOT NO. Lot 2

ROAD AND DESCRIPTION South side of Shaffers mill Rd

TAX MAP 6 PARCEL # 249

SIZE OF LOT 13.81A TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

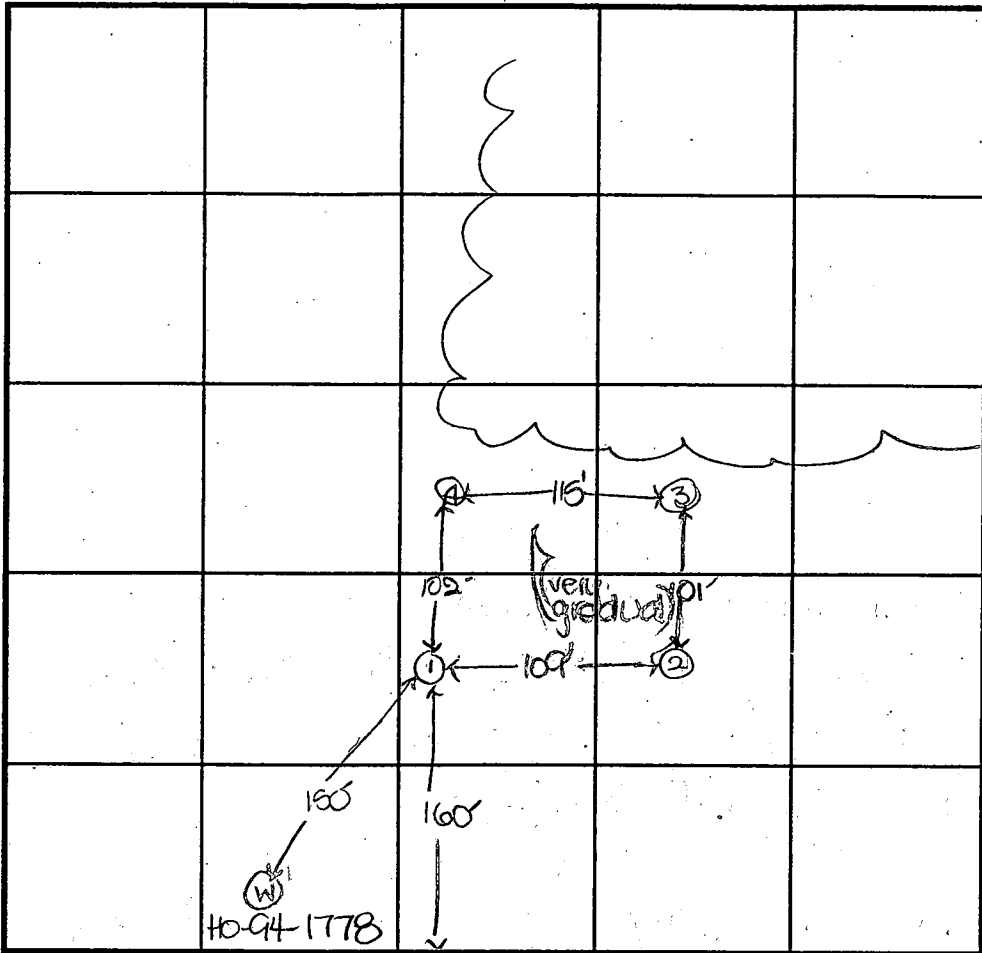
0' (1)
 1' topsoil
 3' org brn cl Lm
 3.5' pale org tan si Lm
 10.5' 35%+ hard sh

(4)

0' topsoil
 1' org brn cl Lm
 3' pale org tan si Lm
 11.5' 10-15% sapr sh

(3)/(2)

0' topsoil
 1' org brn cl Lm
 3' pale org tan si Lm
 15' 15%+ sapr sh



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Shafers Mill Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-12-99	1	4.5'S	10:50	10:51	10:51	10:56	4
		10.5'D	visual	-see	profile		OK
	4	4.5'S	11:03	11:04	11:04	11:05	1
		11.5'D	visual	-see	profile		OK
	3	4.0'S	11:09	11:10	11:10	11:11	1
		15.0'D	visual	-see	profile		OK
	2	12.0'D	visual	-see	profile		OK

REMARKS test holes not staked

TYPE OF SOIL

TESTED BY DKS/BRK ALSO PRESENT C. Zoppo, R. Weems

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH 3

INLET DEPTH 2.5 MAXIMUM BOTTOM DEPTH 4.5 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 58083C

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____
DATE 4/15/97

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Robert E Blackett

ADDRESS 9530 McKinstry Mill Rd PHONE 410-775-0640

AGENT OR PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION _____

SUBDIVISION Blackett Property LOT NO. Lot 2

ROAD AND DESCRIPTION South side of Shoppers Mill Rd

TAX MAP 6 PARCEL # 249

SIZE OF LOT 13.81A TYPE BLDG. SFP
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

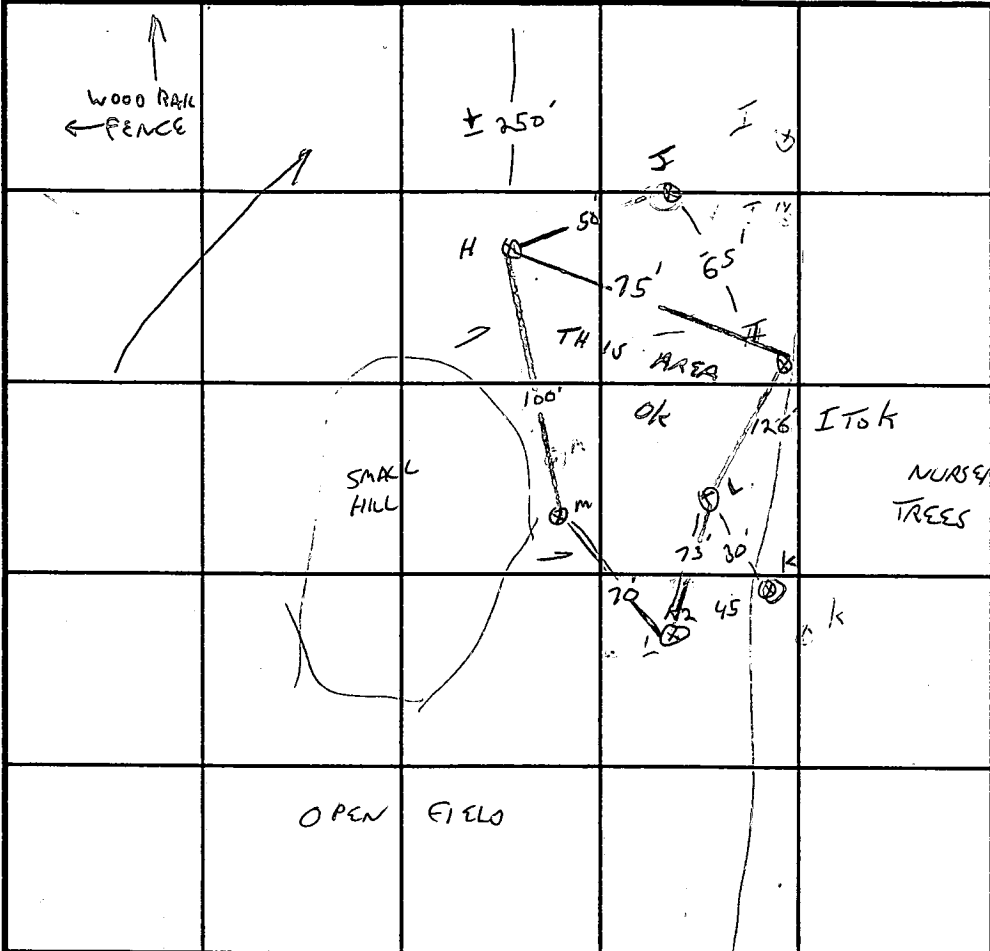
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

58083C
COUNTY #

GREEN METAL BLOG

SOIL PROFILE



SOIL PROFILE: TYPICAL



SHAEERSMILL

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/28/97	H	5/11V	12:53	1:02	1:02	1:06	4 MW
	I	5.5/12	12:50	12:56	12:56	1:13	17 MW
	J	WATER @	11.5	50% Rock	76'		F
	K	7.5% Rock	4'	10'			F
	L	5.5/12V	1:03	1:12	1:12	1:28	16 MW
	M	6/11V	1:16	1:21	1:21	1:29	8 MW
	K2	5/12V	3:50	4:09	4:09	4:38	29 MW

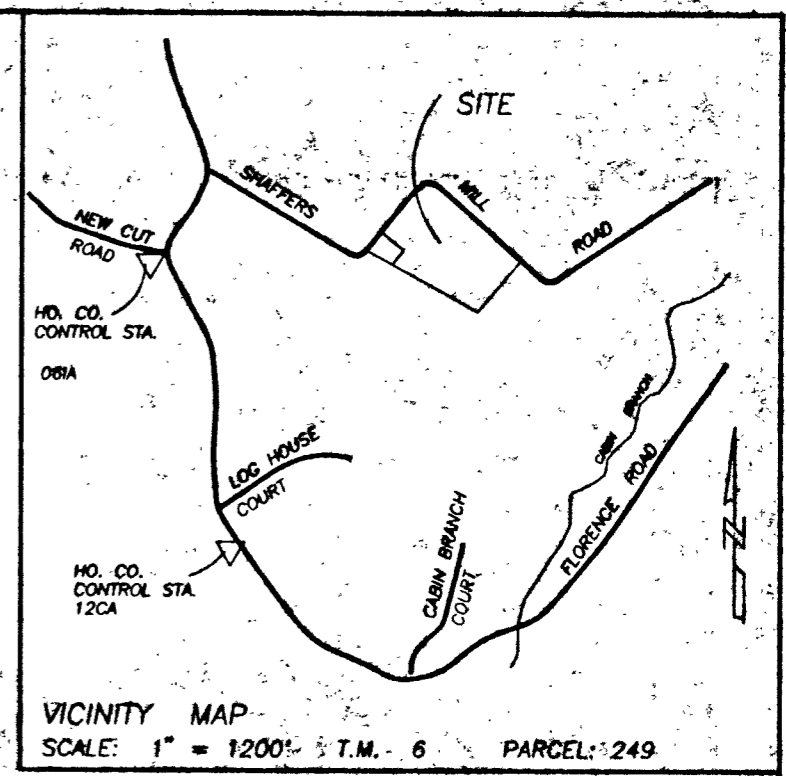
REMARKS LOT 2

TYPE OF SOIL _____

TESTED BY G. SAUVAGE ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 16 MW TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 240



THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.

PROPOSED PERCOLATION TEST SITE: PASSED
 FAILED

PROPOSED HOUSE SITE:

NOTE: THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF ANY PROPERTY BOUNDARIES UNLESS OTHERWISE SHOWN HEREON.

I CERTIFY THAT THE PERCOLATION TEST HOLE LOCATIONS SHOWN HEREON HAVE BEEN ACCURATELY STAKED OUT ACCORDING TO THIS PLAN, IF PROPOSED, OR HAVE BEEN ACCURATELY FIELD LOCATED IF EXISTING, UNLESS OTHERWISE STATED HEREON.

Sourabh G. Munshi 4/12/00
SOURABH G. MUNSHI, PROFESSIONAL LAND SURVEYOR, MD. REG. No. 10770 DATE



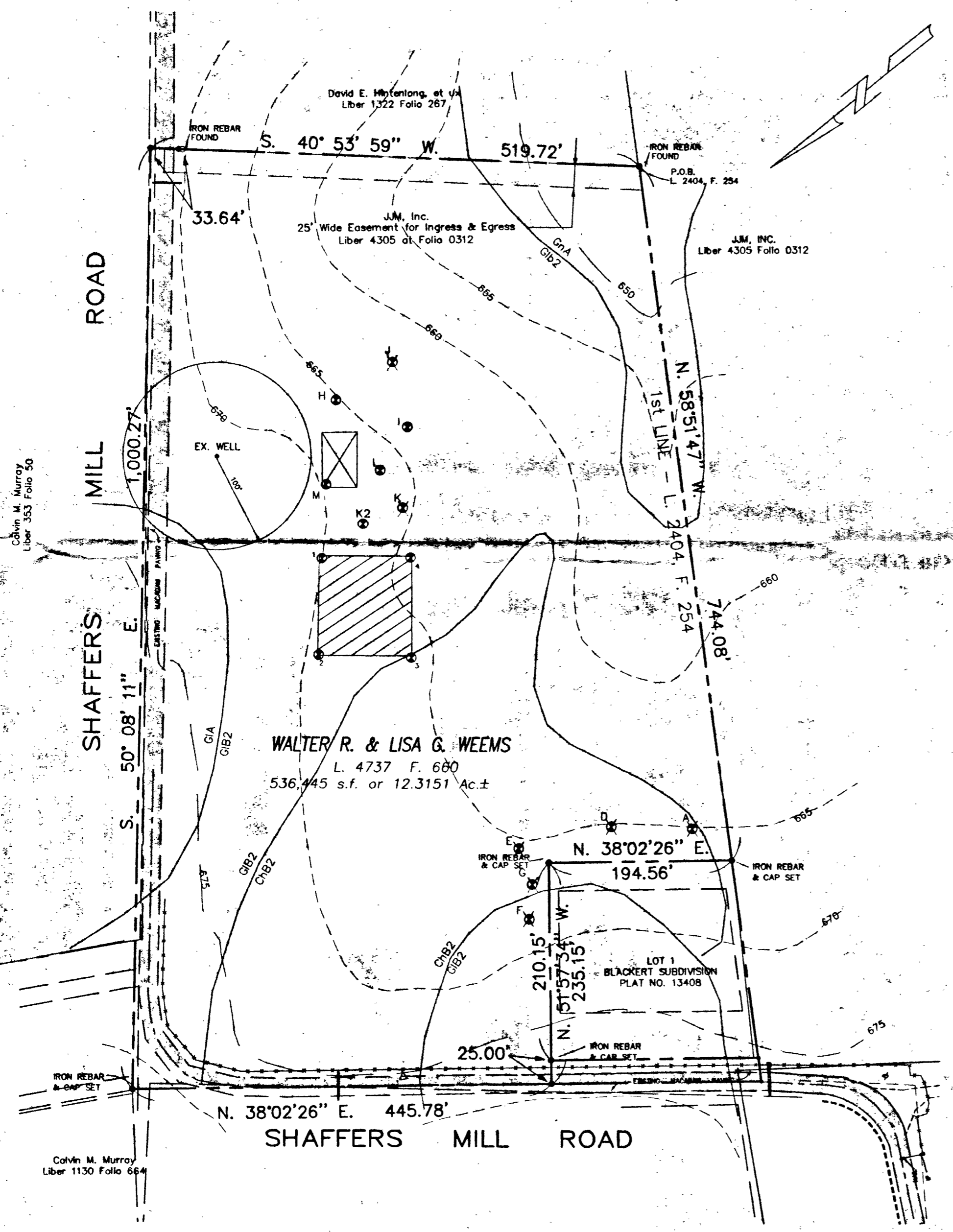
APPROVED:
FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS.
HOWARD COUNTY HEALTH DEPARTMENT

Dine M. Stutz 4/17/00
HOWARD COUNTY HEALTH OFFICER DATE

PERCOLATION CERTIFICATION PLAT
LAND CONVEYED TO:
WALTER R. & LISA G. WEEMS
L. 4737 F. 660
BLACKERT PROPERTY - LOT 2
TAX MAP: 6; PARCEL: 249
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 100' APRIL, 2000

VANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
310 South Main Street P.O. Box 328 Mount Airy, Maryland 21771
(301) 829 2890 (301) 831 5015 (410) 549 2751



Calvin M. Murray
Liber 353 Folio 50

Calvin M. Murray
Liber 1130 Folio 664

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

THIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.

COUNTY NUMBER A 58083C

DATE WELL COMPLETED

MM 11 DD 10 YR 98

Depth of Well

22 160 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

HO-94-1778

OWNER BLACKERT ROBERT
STREET OR RFD SHAFER MILL RD TOWN MT AIRY
SUBDIVISION BLACKSB SECTION LOT 2

WELL LOG

Not required for driven wells:

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N
TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 10 NO. OF POUNDS 1000
GALLONS OF WATER 50
DEPTH OF GROUT SEAL (to nearest foot) 31
from 0 TOP 52 ft. to 31 BOTTOM 58 ft.
(enter 0 if from surface)

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 15.0
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 31 ft.
WHEN PUMPING 33 ft.

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	
Shaley Clay	2	6	
brown shale	6	25	
gray + brown shale mixed	25	38	
gray slate	38	50	
brown slate	50	52	✓
gray slate	52	70	
brown slate	70	75	✓
gray slate	75	155	
brown slate	155	160	

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) 44
60 61 63 64 66 70

TYPE OF PUMP USED (for test)

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

OTHER CASING (if used)

diameter inch _____ depth (feet) from _____ to _____

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 2 (nearest foot) below

NUMBER OF UNSUCCESSFUL WELLS: _____

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. MWD 040
Mercel F. Estrom
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. DWD 501
Charles R. Estrom
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

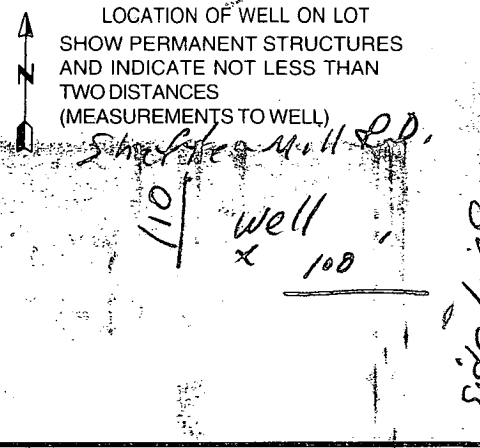
DEPTH (nearest ft.)

C 2

1	2	42	160
E 8	9	11	15 17 21
A 23	24	26	30 32 36
C 38	39	41	45 47 51
E N	SLOT SIZE 1 _____ 2 _____ 3 _____		
DIAMETER OF SCREEN _____ (NEAREST INCH)		_____ (NEAREST INCH)	
from _____ to _____		_____ 56 _____ 60 _____ 68	

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA



B 1	2452	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>HO-94-1778</u> <small>70 fill in this form completely 79</small>
-----	-------------	--------------------------------	---	---

Date Received (APA) _____

OWNER INFORMATION RN 7506

8 MM 00 YY 13

Blackert, Sr. Robert

15 Last Name Owner First Name 34

9530 Mc Kinstry's Mill Road 301-831-7299

36 Street or RFD 55

New Windsor, Md 21776

57 Town 70 State 72 Zip 76

B 3 **Howard** LOCATION OF WELL CC#

8 COUNTY 21

Blackert Subdivision

23 SUBDIVISION 42

SECTION 44 46 LOT X2 48 50

Mt. Airy

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 3 - M I
73 76:77 78

DRILLER INFORMATION

George F. Easterday M W D 040

Driller's Name 76 License No. 81

L. Franklin Easterday, inc.

Firm Name

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

Address

George F. Easterday 7/11/98

Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Shaffer Mill Rd

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 1100 37

DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: 6 BLK: 24 PARCEL 249

B 2 **WELL INFORMATION**

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

7 2 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A 50083C

COUNTY NAME COUNTY NO.

STATE SIGNATURE _____ INSERT S →

DATE ISSUED 10/14/98 10/14/99

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 542 000 EAST GRID 760 000

50 55 57 63

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 300 FEET

24 28

APPROXIMATE DIAMETER OF WELL 6 INCH

NEAREST INCH

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 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

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 DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52

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

APPROP. PERMIT NUMBER _____ G A P

54 63

FORCE 65 WRITE INITIALS IN BOX PERMIT No. HO-94-1778

67 68 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X 11/2/98 8:30

SOURCES OF DRILLING WATER

- wells
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E 760

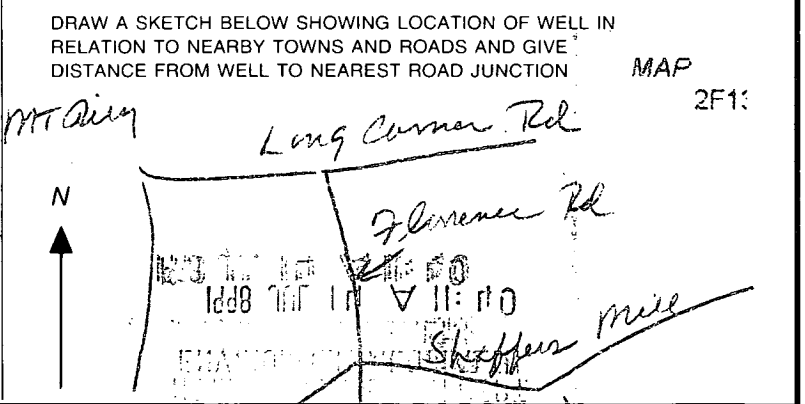
N 55042

000 x

40' OPEN OBTAINED OFFSITE

19 BAGS MR 11/2/98

44' CASING NO INSP OPPORTUNITY



12 ACRES
\$149,900

SHAFFERS MILL ROAD

N. 46° 19' 42" E

695.00'

REMAINDER
LIBERZACA
ROBERT E. BLAKE (LOT 2)
12.00 ACRES

S. 41° 05' 03" E

1001.50'

GIBBY

S. 48° 54' 57" W 525.35'

25' 10" W 167'

