

1/12/01 - ~~12/13/00~~  
2:30 pm

# PERMIT

P 514710  
A 57577-L

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

ISSUE DATE 12/13/2000  
APPROVAL DATE 1/12/01

RPS# 432294

## INDEXED

Fogles Septic Clean, Inc. IS PERMITTED TO INSTALL  ALTER

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Big Branch Overlook LOT NUMBER 39 ADDRESS 14068 Big Branch Drive

PROPERTY OWNER Big Branch Overlook, LLC PROPERTY OWNER'S ADDRESS 7164 Columbia Gateway Dr.

SEPTIC TANK CAPACITY 1500 GALLONS \*\*\* WATERTIGHT SEPTIC TANK Suite 230

PUMP CHAMBER CAPACITY N/A GALLONS REQUIRED \*\*\*

NUMBER OF BEDROOMS 4 \*\* COMPARTMENTED TANK REQUIRED WITH MANHOLE ACCESS

SQUARE FEET PER BEDROOM 180 AND OUTLET BAFFLE FILTER \*\*

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES: Trenches to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth

5 feet below original grade. 2 feet of stone below distribution box.

LOCATION: Place the distribution box 160 feet down the left lot line and 20 feet off this

same lot line. Run trenches on contour to right side of lot.

Suggested layout: 60', 80', 100' 12/12/00 OK (BB)

\*\*\* Septic tank specifications apply to all lots in subdivision as agreed by builder. \*\*\*

PLANS APPROVED DATE

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

SEE PERMIT 13102  
300 134168  
39X20 DECK

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

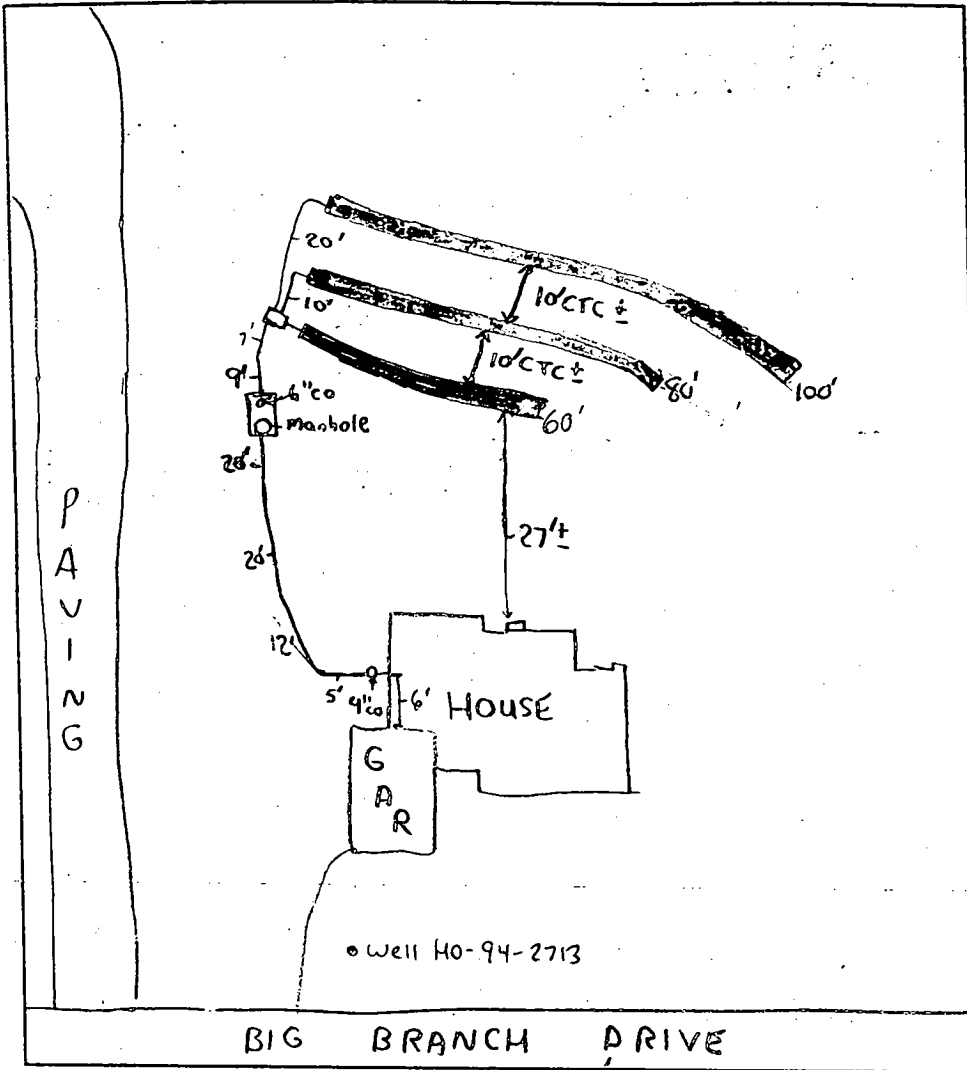
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

32002  
600134988  
Screened Porch 15X15

P 514710

NOT TO SCALE



**TRENCH DATA**

TRENCH WIDTH 3'  
 TRENCH INLET DEPTH 3'  
 TRENCH BOTTOM DEPTH 5'  
 DEPTH OF STONE 2'  
 NUMBER OF TRENCHES 3  
 TOTAL TRENCH LENGTH 240'  
 ABSORBENT AREA 720 ft<sup>2</sup>  
 DISTRIBUTION BOX LEVEL   
 BAFFLE IN DISTRIBUTION BOX

**SEPTIC TANK DATA**

SEPTIC TANK 1500 2-compartmented Top Seam GALLONS  
 MANHOLE RISER   
 6 INCH INSPECTION PORT

**PUMP CHAMBER DATA**

PUMP CHAMBER GALLONS NA  
 MANHOLE RISER NA  
 ALARM NA  
 PUMP PERFORMANCE TEST NA

PRE-CONSTRUCTION INSPECTION: 1/11/00 UNPLANNED LAYOUT INSP: OK TO START MR

INSPECTION COMMENTS: 1/12/01- OK TO COVER ALL WORK - SRM

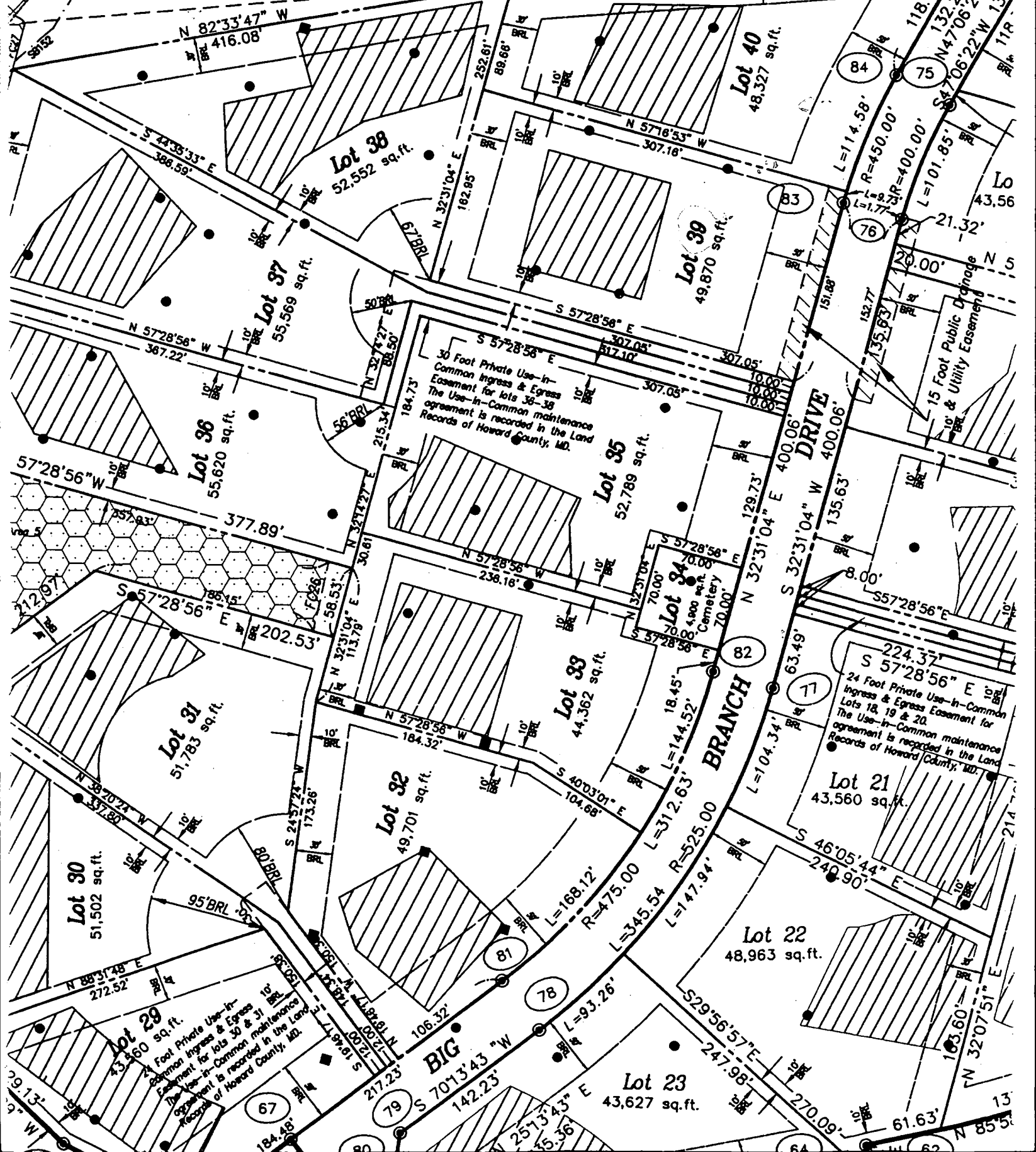
INSPECTOR Steven R. Krieg DATE SYSTEM APPROVED 1/12/01

N 51°22'23" E - 307.02'
N 39°48'43" E - 114.27'
S 39°48'43" W - 101.57'
S 51°22'23" W - 339.34'

**MATCHLINE - SEE SHEET 4 OF 6**  
1199.69'

**F-98-165**  
**Lot 39**

To be Conveyed to Big Branch Overlook Homeowners Association, Inc.  
Open Space Lot 41  
128,594 sq.ft.; 2.9521 Ac.  
To be used as a grassed play area and hiking only  
No grading or play equipment allowed





# APPLICATION

PERCOLATION TESTING

A 57577

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2840

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 C.M.C. CONSTRUCTION, INC.

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER CHARLES A. SHARP

ADDRESS 3779 SHARP ROAD PHONE 410-489-4630

PROPERTY LOCATION: Big Branch Overlook Big Branch Drive

DIVISION ~~RESIDENTIAL~~ LOT NO. 39

ROAD AND DESCRIPTION HOWARD ROAD 3,000'± FROM INTERSECTION  
TRIDELPHIA ROAD (SOUTH)

TAX MAP 27 PARCEL # 19

SIZE OF LOT 40,000 - 50,000 SQ. FT. TYPE BLDG. SINGLE FAMILY DWELLING  
(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.

Charles A. Sharp  
(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 \_\_\_\_\_

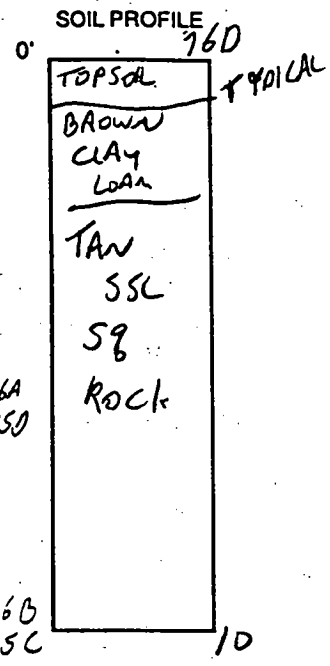
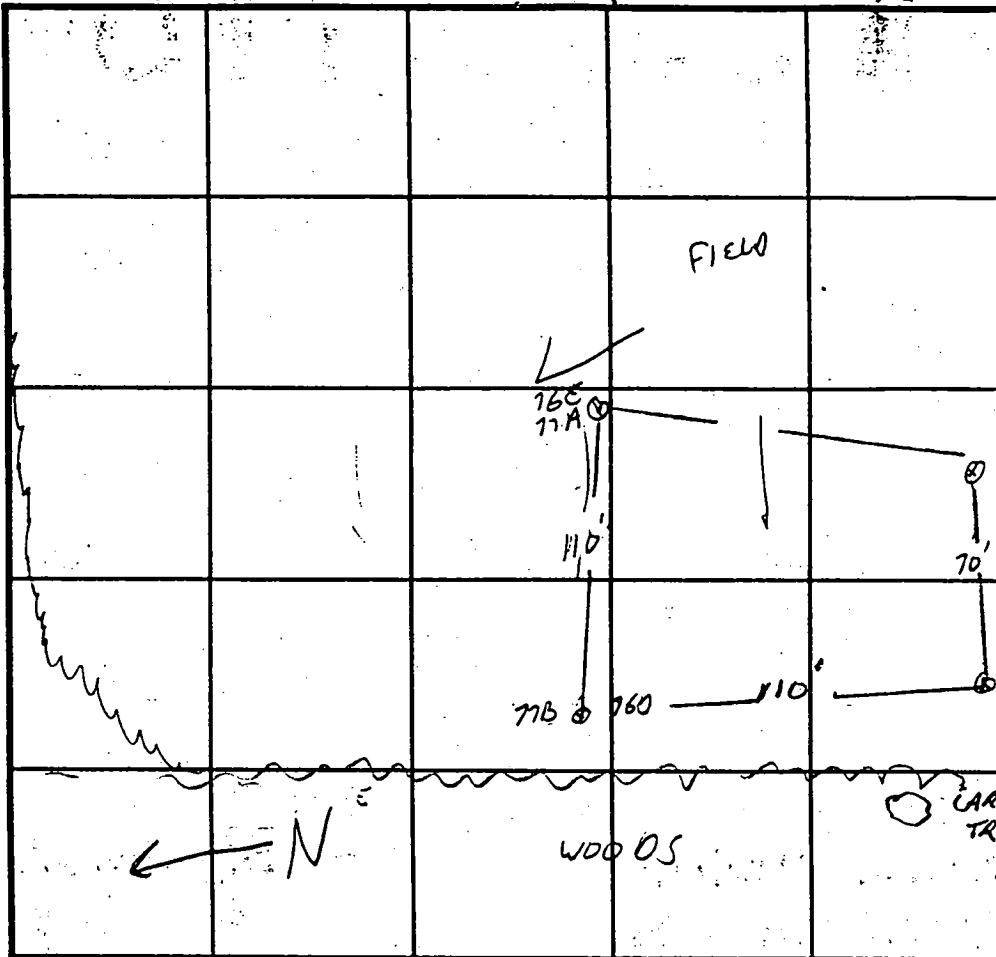
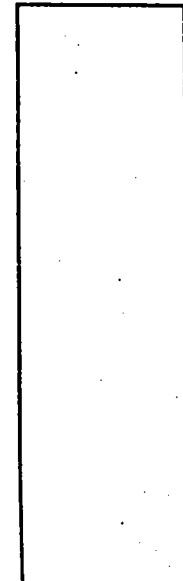
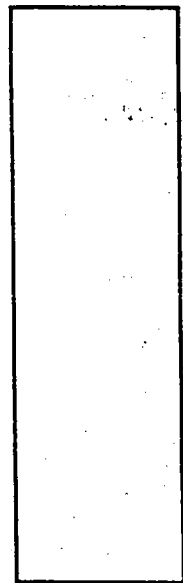
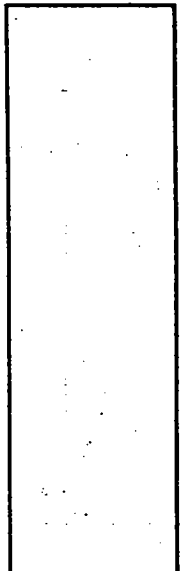
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

## THIS IS NOT A PERMIT

A 57577

COUNTY #

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/3/96	76A	3/11U					2MW
		7U OK					
12/4/96	76B	4.5/12U					13MW
	76O/76B	6.5/10U	10:59	11:06	11:00	11:02	2MIN ✓
		3	10:59	11:01	11:01	11:02	6MIN
	76E/76A	3/12U	11:09	11:12	11:12	11:15	3MW ✓
		7U OK					

REMARKS ~~SEE ALSO LOT 75~~ SEE ALSO LOT 75 Lots 39 ~~75~~

TYPE OF SOIL \_\_\_\_\_

TESTED BY G SAVAGE ALSO PRESENT C. SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT/BEDROOM \_\_\_\_\_

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BUREAU OF ENVIRONMENTAL HEALTH  
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TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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'B DIVISION ~~OVER BRANCH DRIVE~~ LOT NO. 39

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Charles A Sharp  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

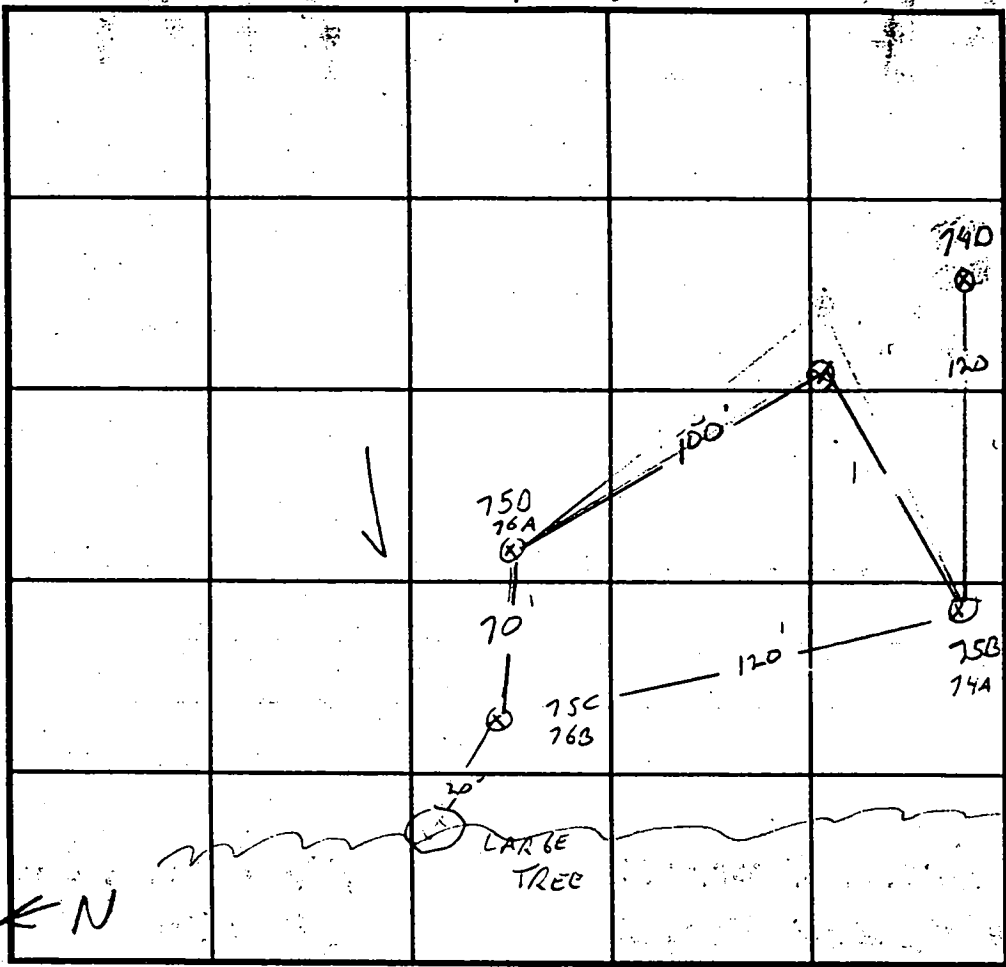
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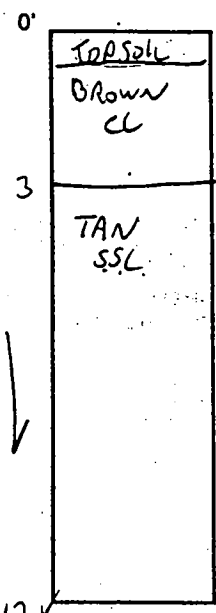
# THIS IS NOT A PERMIT

A 51577  
COUNTY #

SOIL PROFILE



SOIL PROFILE



75C  
76B

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/3/96	75A		3:47:50	3:48:50	3:48:50	3:52	4 MIN
12/4/96	<del>75C</del> 76B	4.5 / 12V	SLOW AT 3 10:35	10:44	10:44	10:57	13 min ✓
12/4/96	750/76A	11'	10:29	10:30	10:30	10:32	2 MIN ✓
	7V OK						

REMARKS LOT ~~30~~ 39

TYPE OF SOIL \_\_\_\_\_

TESTED BY G. SAVAGE ALSO PRESENT E. SHAW / R. DEAR

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

**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: Fogles Well Drilling Telephone #: 410-795-5670  
Address: 580 cobrecht RD  
Sykesville md 21784

(Must circle one) Licensed Plumber  **Licensed Well Driller**  Licensed Well Pump Installer   
License # and name of individual responsible for the field installation:  
Name (Print): Allen Compton License# MSD 009

\*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: Toll Brothers Telephone #: 443-535-9296  
Subdivision: ~~Goodstone Ridge~~ Big Branch Lot #: 39 Well Tag #: HO-94-2713  
Site Address: Dg Branch DR ~~2010284~~ 14068

<b><u>Submersible Pump Data</u></b>	<b><u>Pitless Adapter</u></b>	<b><u>Well Cap and Electric Conduit</u></b>
Make: <u>Goulds</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>25B07422</u>	Model#: _____	Screened, vented well cap: <u>YES</u>
Pump Capacity <u>7</u> GPM	Depth: <u>4</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>8</u> GPM	NSF approved: <u>YES</u>	Conduit min 18" B.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>300</u> (feet)		Conduit secured to well cap: <u>YES</u>
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors, Cable guards, other - Must circle one		
Safety rope, if used, attached to inside of well casing with eye bolt. <u>DD</u>		

**Piping to house**  
Type: 1" Black Plastic  
PSI: 160 (160 psi min)  
Depth of supply line: 4' (36" min)

**House Connection**  
PVC sleeve to undisturbed soil at wall penetration: YES  
Approximate length of sleeve: 7'  
Sleeve caulked and 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.

Allen Compton Signature of company representative responsible for installation      2-21-01 date

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

Date Insp. Requested: 2/23/01 Date Insp. Approved: 2/27/01 Inspector: MR/RJP **BB**  
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

N32°31'04"E

162.95'

LOT 39  
49,870 s.f.

LOT 40  
48,327 s.f.

GRID NORTH

30' BRL

SEPTIC EASEMENT

S57°16'53"E

Approved Septic System Plan  
Howard County Health Department

*Craig Williams*  
Signature MR Date 8/8/00

Total linear feet of trench required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

$l=9.73'$   
 $R=450.00'$

INV 459.3

INV. OUT 461.3

INV. IN 462.6

SEPTIC TANK

SOLARIUM

COVENTRY FEDERAL FOUNDATION

FF = 474.83  
BF = 465.04

3-CAR SIDE LOAD GARAGE

PORCH

WELL

WELL

S32°30'56"W

151.88'

BIG BRANCH DRIVE

462  
N57°28'56"W  
LOT 38  
464  
466  
307.05'

472  
474  
472  
70.0

460  
10' BRL  
462.12  
464  
466  
468  
470  
472  
472  
472

193.4±  
67.9  
72.8  
72.8  
50.0±

60  
80  
64.37  
50' BRL  
100' BAB

464  
466  
468  
470  
472  
472  
470  
460  
458

307.18±

460

460

460

460

460

460

460

460

460

460

460

460

460

C 1 0799

SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER 13

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED MM DD YY 7-30-00

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 08/cw 8/28/00 H0-94-2713

OWNER BIG BRANCH OVERLOOK LLC last name first name STREET OR RFD BIG BRANCH DRIVE TOWN DAYTON SUBDIVISION BIG BRANCH OVERLOOK SECTION LOT 39

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Brown shale, Gray, Flint, Gray, Flint, Gray.

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD Form: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) Form: diameter, depth (feet).

SCREEN RECORD Form: screen type or open hole (ST, BR, HO, PL, OT).

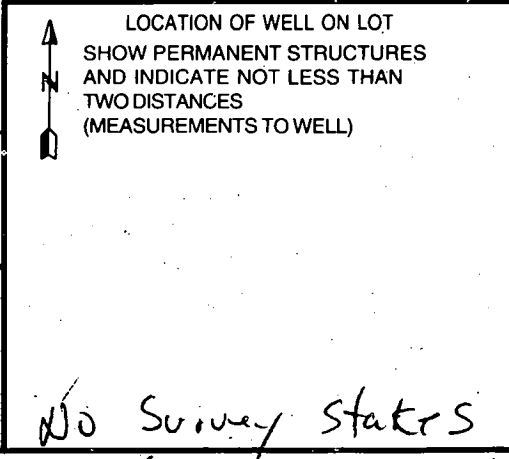
DEPTH (nearest ft.) Form: C 2, H0, 40, 300, A, C, H, S, R, E, N, SLOT SIZE, DIAMETER OF SCREEN.

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

PUMPING TEST Form: C 3, HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED.

PUMP INSTALLED Form: DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



NUMBER OF UNSUCCESSFUL WELLS: WELL HYDROFRACTURED (Y/N)

- CIRCLE APPROPRIATE LETTER: A WELL WAS ABANDONED AND SEALED, 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...

DRILLER'S LIC. NO. 1 M5 D009, DRILLER'S SIGNATURE, LIC. NO. 1 D

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



07799

(MDE USE ONLY)

# STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

FILL IN THIS FORM COMPLETELY  
PLEASE TYPE

COUNTY NUMBER **13**

ST/CO USE ONLY  
DATE Received  
**AUG 29 2000**

DATE WELL COMPLETED

MM **7** DD **30** YY **00**

Depth of Well

**300**  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
**H0 94 2713**

OWNER **BIG BRANCH OVERLOOK LLC**  
STREET OR RFD **BIG BRANCH DRIVE** TOWN **PAYTON**  
SUBDIVISION **BIG BRANCH OVERLOOK** SECTION \_\_\_\_\_ LOT **39**

WELL LOG			check if water bearing
Not required for driven wells			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			
DESCRIPTION (Use additional sheets if needed)	FEET		
	FROM	TO	
Brown shale	0	53	
Gray Slaty Flint	53	90	
Gray Limestone Flint	90	91	✓
Gray Limestone Flint	91	245	
Gray Limestone Flint	245	246	✓
Gray Limestone	246	300	

**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 **9** NO. OF POUNDS **846**

GALLONS OF WATER **54**

DEPTH OF GROUT SEAL (to nearest foot)  
from **0** ft. to **40** ft.  
48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

**CASING RECORD**

casing types insert appropriate code below

ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch)! **06** Total depth of main casing (nearest foot) **57**

60 61 63 64 66 70

**OTHER CASING (if used)**

diameter inch \_\_\_\_\_ depth (feet) from \_\_\_\_\_ to \_\_\_\_\_

**SCREEN RECORD**

screen type or open hole (insert appropriate code below)

ST STEEL  BR BRASS  HO HOLE  PL PLASTIC  OT OTHER

**DEPTH (nearest ft.)**

**C 2**

**H0** 40 300

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)  
from \_\_\_\_\_ to \_\_\_\_\_

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T \_\_\_\_\_ (E.R.O.S.) W Q \_\_\_\_\_

70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76 \_\_\_\_\_

TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3**

**PUMPING TEST**

HOURS PUMPED (nearest hour) **04**

PUMPING RATE (gal. per min.) **7.5**

METHOD USED TO MEASURE PUMPING RATE **1 Gal**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **62** ft.

WHEN PUMPING **137** ft.

TYPE OF PUMP USED (for test)

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

**PUMP INSTALLED**

DRILLER INSTALLED PUMP 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.) \_\_\_\_\_ 43 \_\_\_\_\_ 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE  
 - below } **02** (nearest foot)  
49 50 51

**LOCATION OF WELL ON LOT**

SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

NUMBER OF UNSUCCESSFUL WELLS: \_\_\_\_\_

WELL HYDROFRACTURED yes  no  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. **MSD009**

*Allen Compton*  
DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **D**

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

*No Survey States*



B 1 13986

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

Ho - 94 - 2713

fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

Big Branch Overlook LLC
1164 Columbia Gateway Dr. Suite 230
Columbia MD 21046

B 3

LOCATION OF WELL

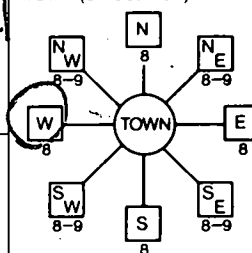
Howard
Big Branch Overlook 14068
Dayton
MILES FROM TOWN (enter 0 if in town) 2

DRILLER INFORMATION

Allen Compton M S D 009
Fogle's Well Drilling
580 Obrecht RD Sykesville, Md 21784

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Big Branch DR

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



22'
DISTANCE FROM ROAD
ENTER FT OR MI

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)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled)
FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
INDUSTRIAL, COMMERCIAL, DEWATERING
PUBLIC WATER SUPPLY WELL
TEST, OBSERVATION, MONITORING
GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 05 26 00 Craig Wilbur 5/25/00
NORTH GRID 511 000 EAST GRID 0795 000

APPROXIMATE DEPTH OF WELL 360 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

AIR-ROTARY (circled)
CABLE
JETTED
AIR-PERCussion
ROTARY (Hydraulic Rotary)
Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled)
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)

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

APPROP. PERMIT NUMBER 54 GAP 63
PERMIT No. Ho - 94 - 2713

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

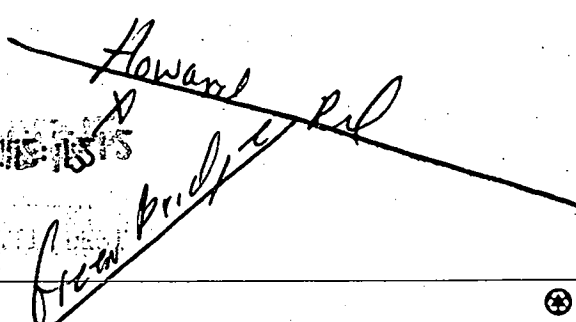
SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

800 795
510

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

N



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Lot 35  
52,789 SF

EXISTING 30' PRIVATE  
U-TURN INGRESS/EGRESS  
EASEMENT FOR LOTS 36-38.

Lot 39  
49,870 SF

LOT 39 SITE OK  
WELL S/C/NO CW  
W/O

MADISON  
2584 S.F.  
70 x 88

PRIMARY KIT. GREENHOUSE  
MADISON  
2584 S.F. 88  
Foot Tree  
Mud Pond  
Fence Easement

ANCH

15' PUBLIC DRAINAGE  
UTILITY EASMT

36+00

400.06

35+00

400.06

135.63

15' PUBLIC DRAINAGE  
UTILITY EASMT

20.00'

N57.28

50' B.R.L.

PHILLIP

N57.28

50' B.R.L.

13.86

BAR FLOODPLAIN

52.50 48

3104'E  
46162.95'

252.6

30' B.R.L.

89

30'

10' B.R.L.

Lo  
48

N57.16

10' B.R.L.

307.15

P-2

460

30' B.R.L. GREENHOUSE

50'

PI 34.10

42.1

114.58

34+00

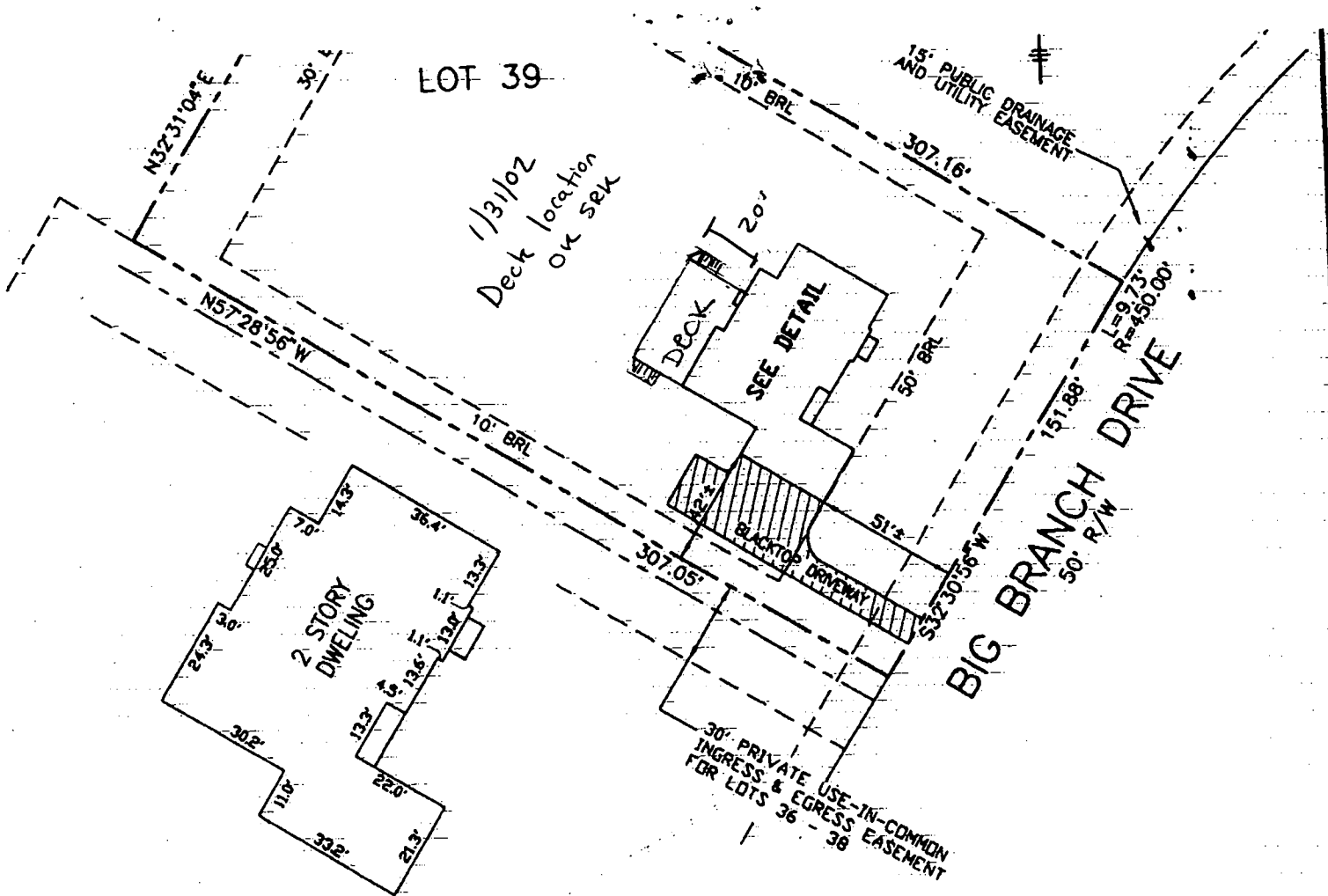
33+

101.85

33+

196.4

13.86



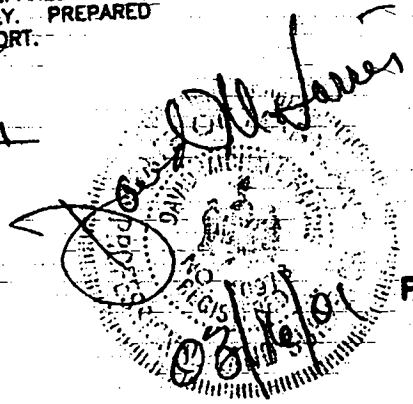
**DETAIL**  
SCALE: 1" = 30'

**SURVEYOR'S CERTIFICATE**

I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THE DWELLING(S) SHOWN ON THIS DRAWING LIES WITHIN THE LOT LINES SHOWN AS COMPILED FROM TITLE OR OTHER SOURCES. OTHER IMPROVEMENTS ARE FOR PICTORIAL PURPOSES ONLY. THIS DRAWING IS NOT A BOUNDARY SURVEY AND HAS BEEN PREPARED EXCLUSIVELY FOR TITLE PURPOSES ONLY. PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT.

*[Signature]*  
REG. No. 10978

RECORD PLAT No. 13855  
FEMA FIRM No. 240044 0025 B  
ZONE: C  
DATED: 12/4/86



**BENCHMARK**  
ENGINEERS • LAND SURVEYORS • PLANNERS  
**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE - SUITE 418  
ELLICOTT CITY, MD 21043

LOCATION DRAWING  
**BIG BRANCH OVERLOOK**  
LOTS 1 THROUGH 49  
PRESERVATION PARCELS A THROUGH G  
NON-BUILDABLE BULK PARCEL H  
LOT No. 39  
14068 BIG BRANCH DRIVE  
5TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE: 1" = 60' DATE: 03/08/01

