

2/13/01
2/16/01
am 10:00
CD-P

PERMIT

P 514722

SEWAGE DISPOSAL SYSTEM

A 56564-X

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

410-313-2640

ISSUE DATE 12/27/2000

APPROVAL DATE 4/12/01

2/14/01
AM

4/12/01-3 PM

RPS 432138

INDEXED

Eogle's 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 24

ADDRESS 14109 Big Branch Drive

PROPERTY OWNER Big Branch Overlook, LLC

PROPERTY OWNER'S ADDRESS 7165 Columbia Gateway Dr

SEPTIC TANK CAPACITY 1500

GALLONS

*** COMPARTMENTED SEPTIC TANK

St 230 Columbia 21046

PUMP CHAMBER CAPACITY 1500

GALLONS

WITH OUTLET BAFFLE FILTER REQUIRED***

AND MANHOLE ACCESS

NUMBER OF BEDROOMS 4

**

ONE COMPARTMENT PUMP

TANK REQUIRED WITH MANHOLE ACCESS

SQUARE FEET PER BEDROOM 210

LINEAR FEET OF TRENCH REQUIRED 280

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: From the right-front lot corner, place the distribution box 90' down the

227' lot line and 15-20' off that lot line. Run trenches of equal length (4@70')

along contour toward front of property. 12/19/00 OK BB

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

PLANS APPROVED Craig Williams, R.S.

DATE 8/22/2000

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

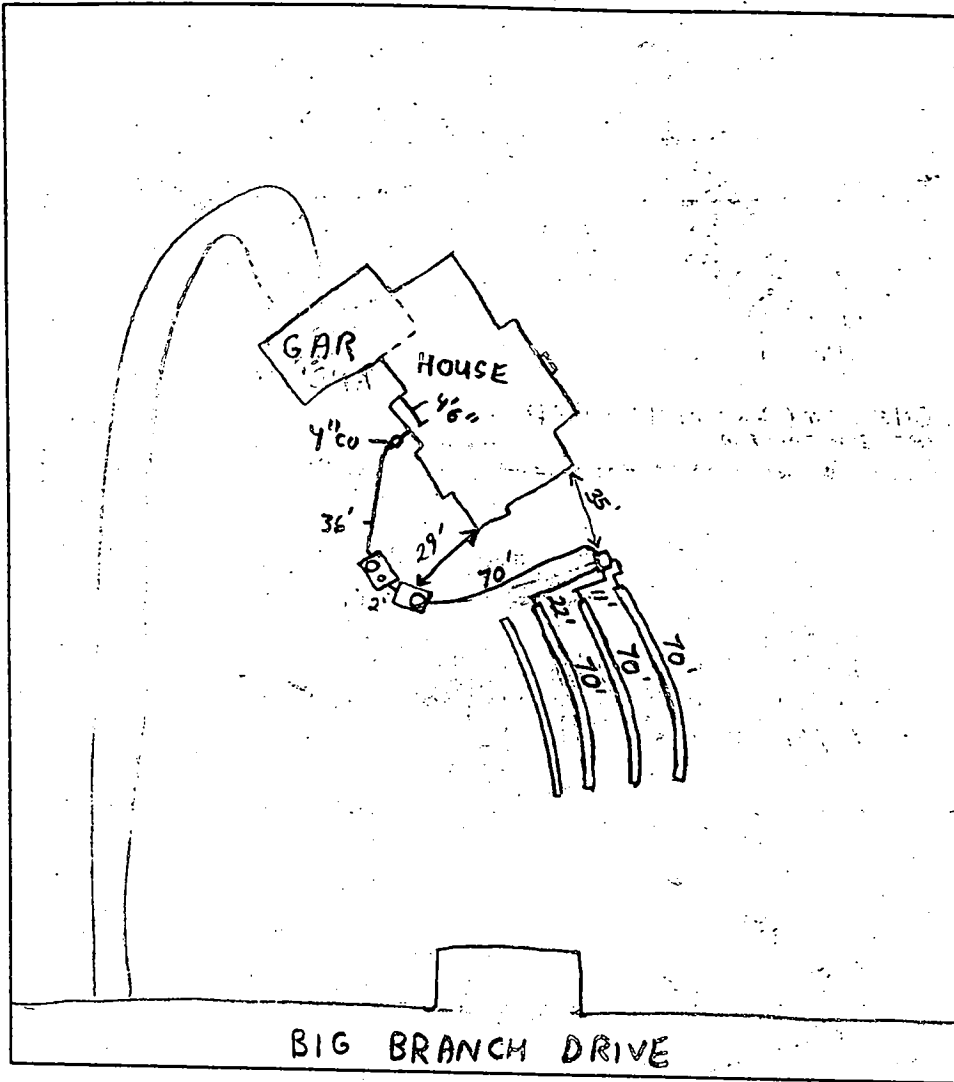
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

P 514722

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3
 TRENCH INLET DEPTH 3
 TRENCH BOTTOM DEPTH 5
 DEPTH OF STONE 2
 NUMBER OF TRENCHES 4
 TOTAL TRENCH LENGTH 280
 ABSORBENT AREA 840
 DISTRIBUTION BOX LEVEL Yes
 BAFFLE IN DISTRIBUTION BOX Yes

SEPTIC TANK DATA

SEPTIC TANK 1500 ^{TWO} _{COMPARTMENT} GALLONS
 MANHOLE RISER Yes
 6 INCH INSPECTION PORT Yes

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS 1500 TS
 MANHOLE RISER Yes
 ALARM
 PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: 2/9/01 Tanks to be located in easement due to existing grade - OK (BB) 2/12/01 - INSTALL 4 (70') TRENCHES TOWARD FRONT OF PROPERTY AS STATED ON REVERSE (SRD)

INSPECTION COMMENTS: 2/13/01 First three trenches done. OK to cover. (BB)

2/14/01 NO WORK DONE NO ONE PRESENT (MR)

2/16/01 verbal approval given for last trench, due to inclement weather. Needs pump performance test for final approval. DCC

4/12/01 PUMP/ALARM OK (MR)

INSPECTOR M. Ripkin DATE SYSTEM APPROVED 4/12/01

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: Foxles Well Drilling Telephone #: 410-795-5270
Address: 500 Chestnut Rd
Sylasville MD 21154

(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 # MSD009

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Toll Brothers Telephone #: 443-555-9296
Subdivision: Philadelphia Ridge Big Branch Lot #: 24 Well Tag #: HO-99-2102
Site Address: Big Branch Dr (19109)

Submersible Pump Data:
Make: Low Lifts Pitless Adapter Make: Campbell Well Cap and Electric Conduit
Model #: ZS B10 Model #: _____ Two piece watertight cap: yes
Pump Capacity: 7 GPM Depth: 41 (36" min) Screened, vented well cap: yes
Well Yield: 3 GPM NSF approved: yes Cap secured to casing: yes
Depth of well encased at time of pump installation: 410 (feet) Conduit min 1 1/2" B.G.: yes
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque armors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt no

Piping to house Type: 1" Black Plastic House Connection
PSI: 160 (160 psi min) PVC sleeved to undisturbed soil at wall penetration: yes
Depth of supply line: 4' (36" min) Approximate length of sleeve: 7
Sleeve caulked and sealed properly: yes

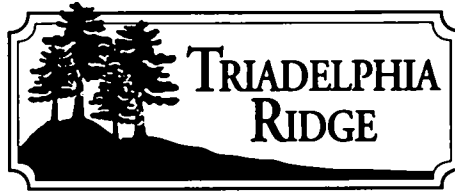
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Allen Compton date 3-6-01

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

Date Insp. Requested: 2/5/01 Date Insp. Approved: 2/6/01 (MR)
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Also, conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 5" above finished grade
Water supply line sleeved adequately at house connection
Adequate ground observed below pitless adapter

BB



Memo

Date: August 8, 2000
To: Craig Williams
From: Greg Shapard, Toll Brothers, Inc.
RE: Well Drilling of Lot 24

Due to severe grading conditions that prevent a well drilling vehicle access to the well location on Lot 24 at Big Branch Overlook, Toll Brothers, Inc. is requesting the issuance of the building permit prior to drilling of the well. By doing so, this will allow us to build the drive to its proper elevation with the dirt generated from the excavation. At this point, we will be able to provide adequate access. In reviewing the plans, there are numerous locations to move the well. Therefore, there is very low risk of any impact on any of the adjacent lots should we hit a dry hole. We appreciate the cooperation of The Howard County Health Department in this manner.

SEPTIC PERMIT
NOT TO BE ISSUED
UNTIL WELL IS
DRILLED /
12/19/00
Completion
Report
Received

ACCEPTED.
8/8/00 Craig Williams

B00124947
516262 8/22/00 CW

C1 **07787** 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
 8 13

DATE WELL COMPLETED
 MM DD YY
 11 9 00

Depth of Well
 22 500 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 HO-94-2702
 28 29 30 31 32 33 34 35 36 37

OWNER **BIG BRANCH OVERLOOK**
 STREET OR RFD **BIG BRANCH DRIVE** TOWN **DAYTON**
 SUBDIVISION **BIG BRANCH OVERLOOK** SECTION **28** LOT **24**

WELL LOG
 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		check if water bearing
	FROM	TO	
Brown shale	0	35	
Gray slate	35	110	
White	110	111	✓
Gray slate	111	460	
White	460	461	✓
Gray slate	461	500	

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 45 469 NO. OF POUNDS 48 876
 GALLONS OF WATER 54
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 31 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) **40**

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

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. **MSD009**
Allen Conpton
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. **D**

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

C 2 DEPTH (nearest ft.)

1	2	HO	31	500		
E	8	9	11	15	17	21
A						
C	23	24	26	30	32	36
H						
S						
C	38	39	41	45	47	51
3						
R						
E						
E						
N						

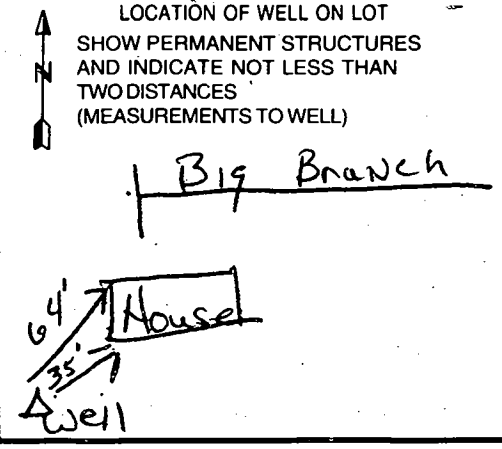
SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN (NEAREST INCH)
 56 _____ 60 _____
 from _____ to _____

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) **07**
 PUMPING RATE (gal. per min.) **2.7**
 METHOD USED TO MEASURE PUMPING RATE **1 GAL**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **26** ft.
 WHEN PUMPING **266** 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 **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)



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94 - 2702
 Location of property (road) Big Branch Drive
 Subdivision Big Branch Overlook Lot 24 Block Plat Sec.
 Well Driller Compton/Fogle Owner Big Branch Overlook LLC

Depth of well 500'
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 26'

I. High rate pumping -- reservoir drawdown

Time pump started 11:00 Pumping rate 13
 Total time 45 MIN to reach pumping water level 266 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
11:00	26	22		13.6
11:15	142	26		11.5
11:30	211	35		8.5
11:45	266	19 ^{gal} 12 seconds		5
12:00	260	25		2.4
12:15	258	22		2.7
12:30	256	22		2.7
12:45	254	22		2.7
1:00	252	22		2.7
1:15	250	22		2.7
1:30	248	22		2.7
1:45	246	22		2.7
2:00	244	22		2.7
2:15	242	22		2.7
2:30	240	22		2.7
2:45	238	22		2.7
3:00	236	22		2.7
3:15	234	22		2.7
3:30	232	22		2.7
3:45	231	22		2.7
4:00	231	22		2.7
4:15	231	22		2.7
4:30	231	22		2.7
4:45	231	22		2.7

Maryland State Grid
NAD 83/91

Big Branch Overlook
See Sheet 5 of 6

MATCHLINE - SEE SHEET 5 OF 6

Reservation Parcel "F"

Big Branch Overlook, LLC
Sellers: Howard County, Maryland &
Overlook Homeowners Association, Inc.
39,179 sq.ft.; 0.8994 Ac.

100 Year Floodplain,
Drainage & Utility
Easement

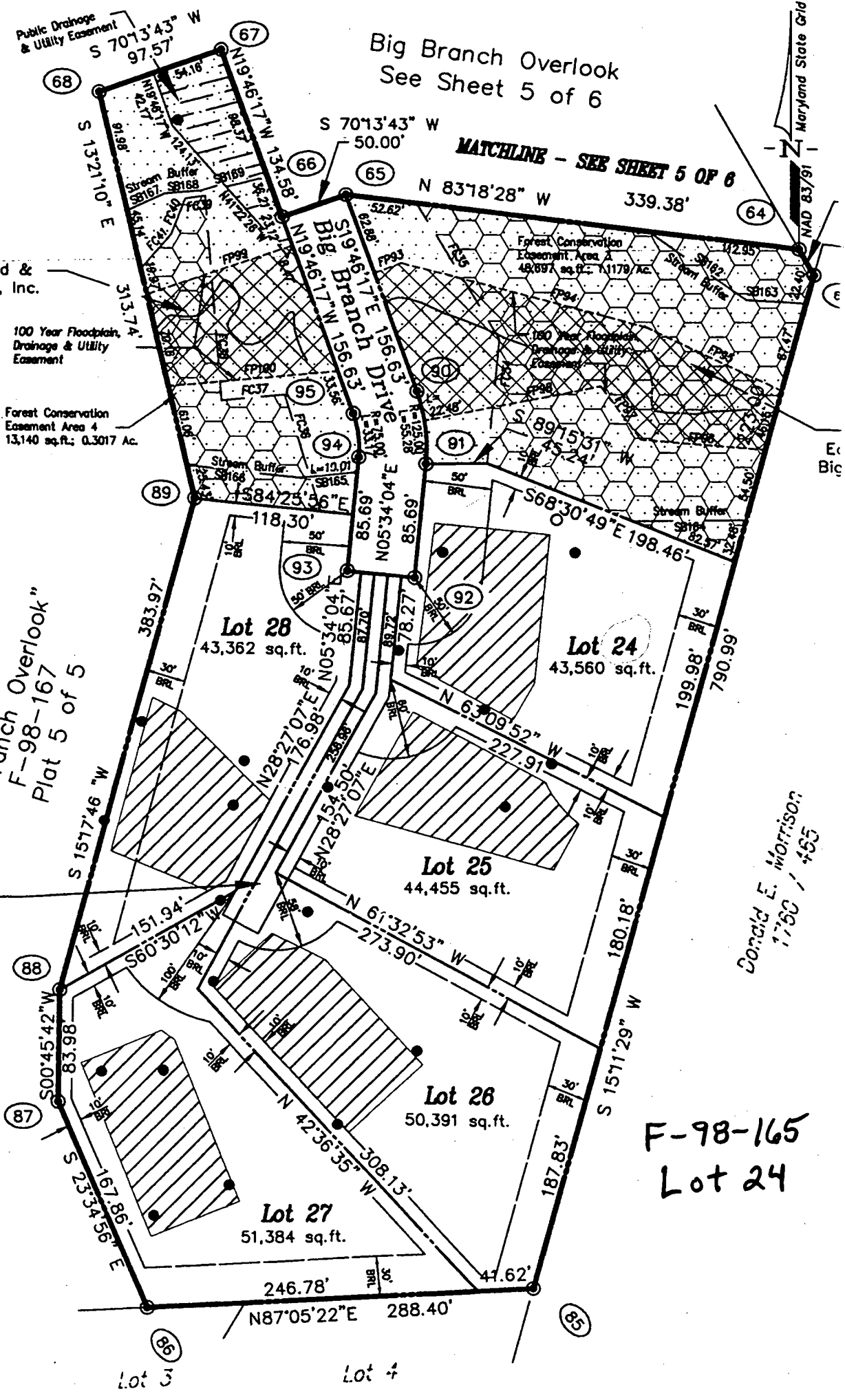
Forest Conservation
Easement Area 4
13,140 sq.ft.; 0.3017 Ac.

"Big Branch Overlook"
F-98-167
Plat 5 of 5

30 Foot Private Use-in-Common
Ingress & Egress Easement for
Lots 25, 26, 27 & 28.
The Use-in-Common maintenance
agreement is recorded in the
Land Records of Howard County, MD.

Donald E. Morrison
1750 / 465

F-98-165
Lot 24

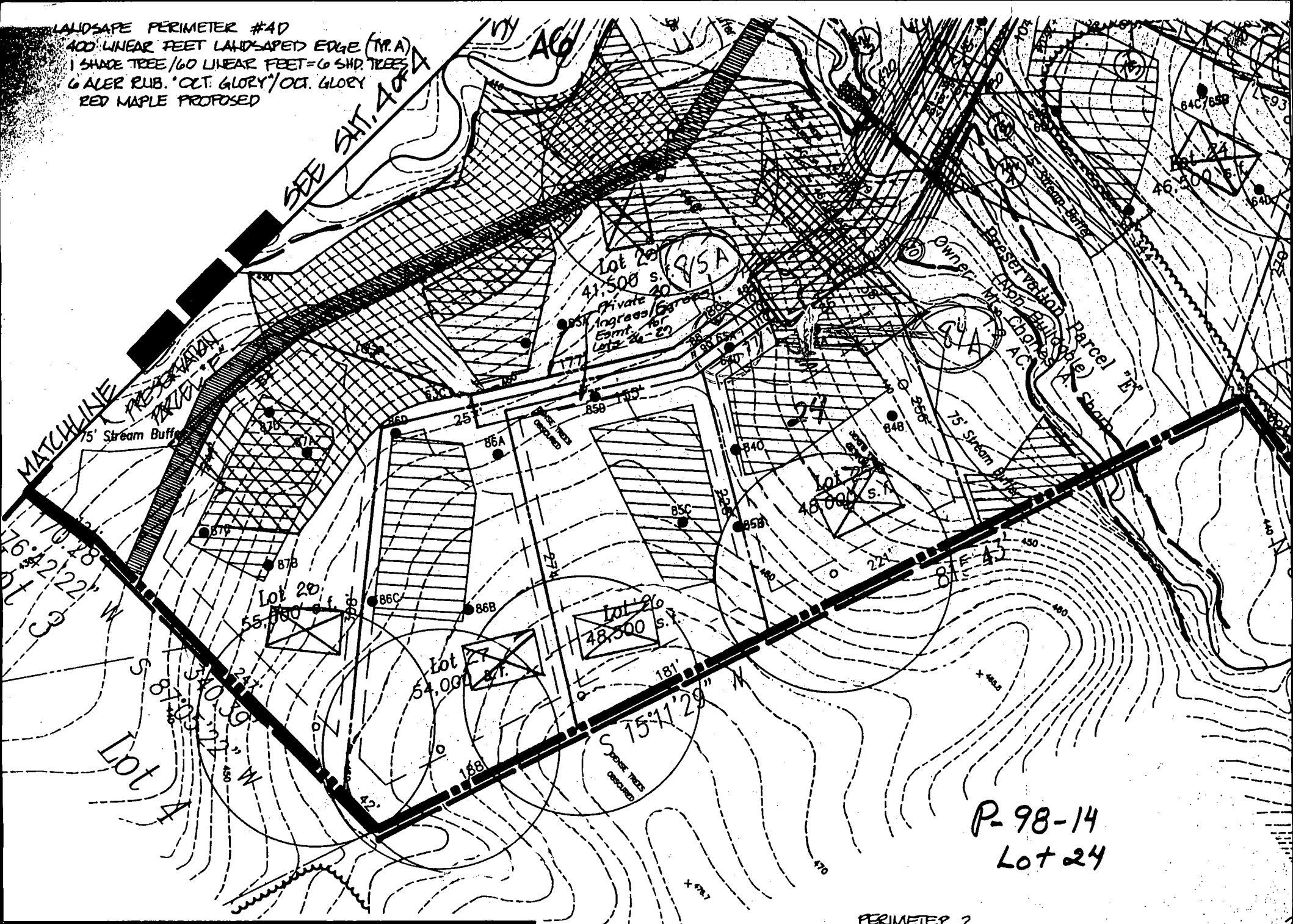


N 571500
E 1507720

Lot 3

Lot 4

LANDSCAPE PERIMETER #4D
 400' LINEAR FEET LANDSCAPED EDGE (TP.A)
 1 SHADE TREE/60 LINEAR FEET = 6 SHD. TREES
 6 ALER RUB. 'OCT. GLORY'/OCT. GLORY
 RED MAPLE PROPOSED



APPROVED:
 HOWARD COUNTY DEPT. OF PLANNING AND ZONING

PERIMETER 2
 LANDSCAPE PERIMETER DESIGNATION
 SEE SCHEDULE 4: PERIMETER 2A, 2B

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 _____

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 410-989-4630

PROPERTY LOCATION: Big Branch Overlook Big Branch Dr.

PROPERTY DIVISION ~~Big Branch Overlook~~ LOT NO. 24

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

LOCAL 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 _____

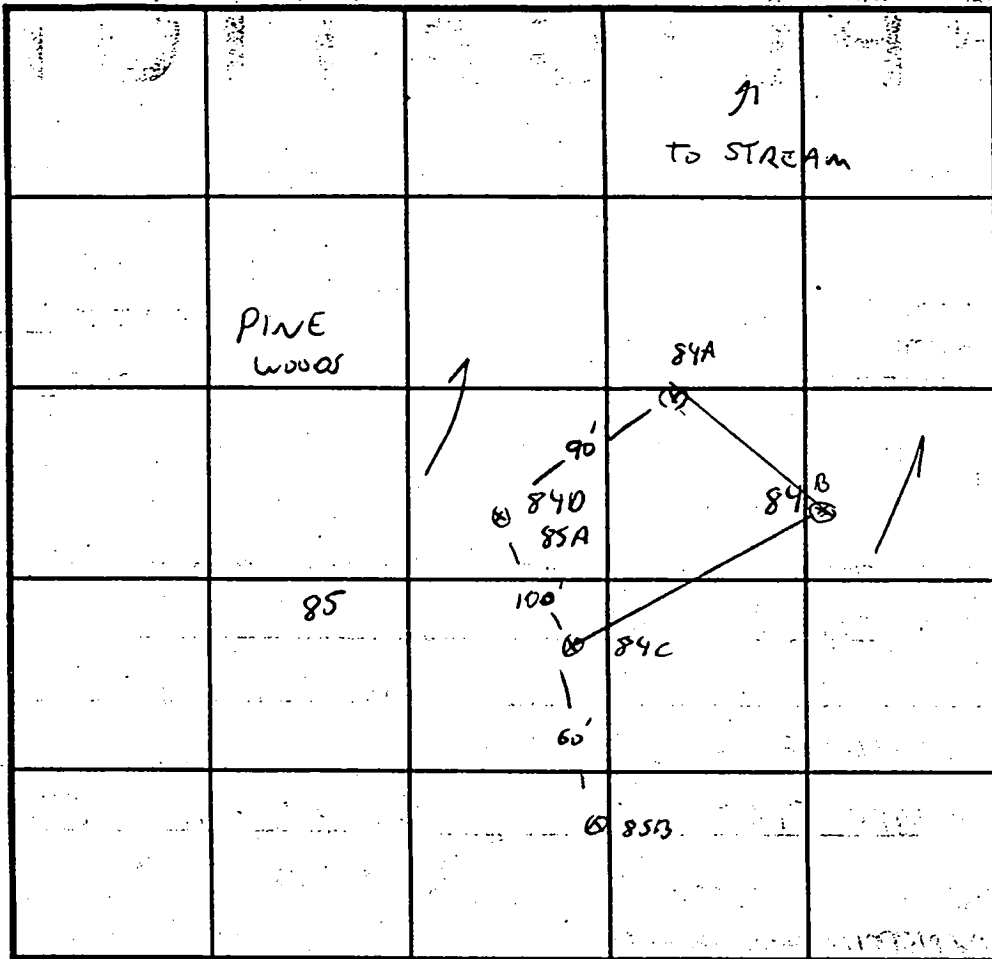
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

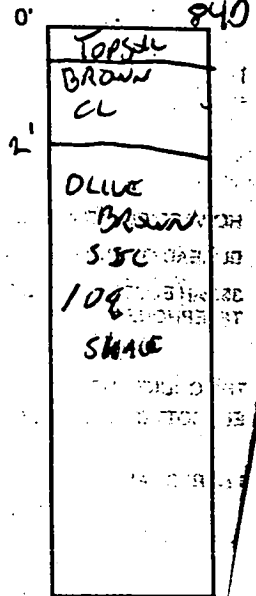
A 57577

COUNTY #

SOIL PROFILE



SOIL PROFILE



84A

Topsoil
Brown CL

Brown S.S.C.
Orange mottling
Low chroma
Tannous bottom

2

11

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/22/96	840/85A	3 / 12V	3:23	3:24	3:24	3:28	4 MIN
		7	3:28	3:36	3:26	3:35	6 MIN
	84A	2.5 / 11V	3:30	3:33	3:33	3:36	3 MIN
		7V					
	84	2 / 11.5	3:28	3:45	3:45	4:02	19 MIN
		6 ok	3:28	3:33	3:33	3:43	10 MIN

REMARKS Lot ~~24~~, no area Lot ~~24~~

TYPE OF SOIL _____

TESTED BY G. SAUSAGE ALSO PRESENT C. SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

X

APPLICATION

PERCOLATION TESTING

A 57577

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

DISTRICT _____

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

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 Dr.

SUBDIVISION ~~ELLICOTT CITY~~ LOT NO. ~~24~~ 24

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 _____

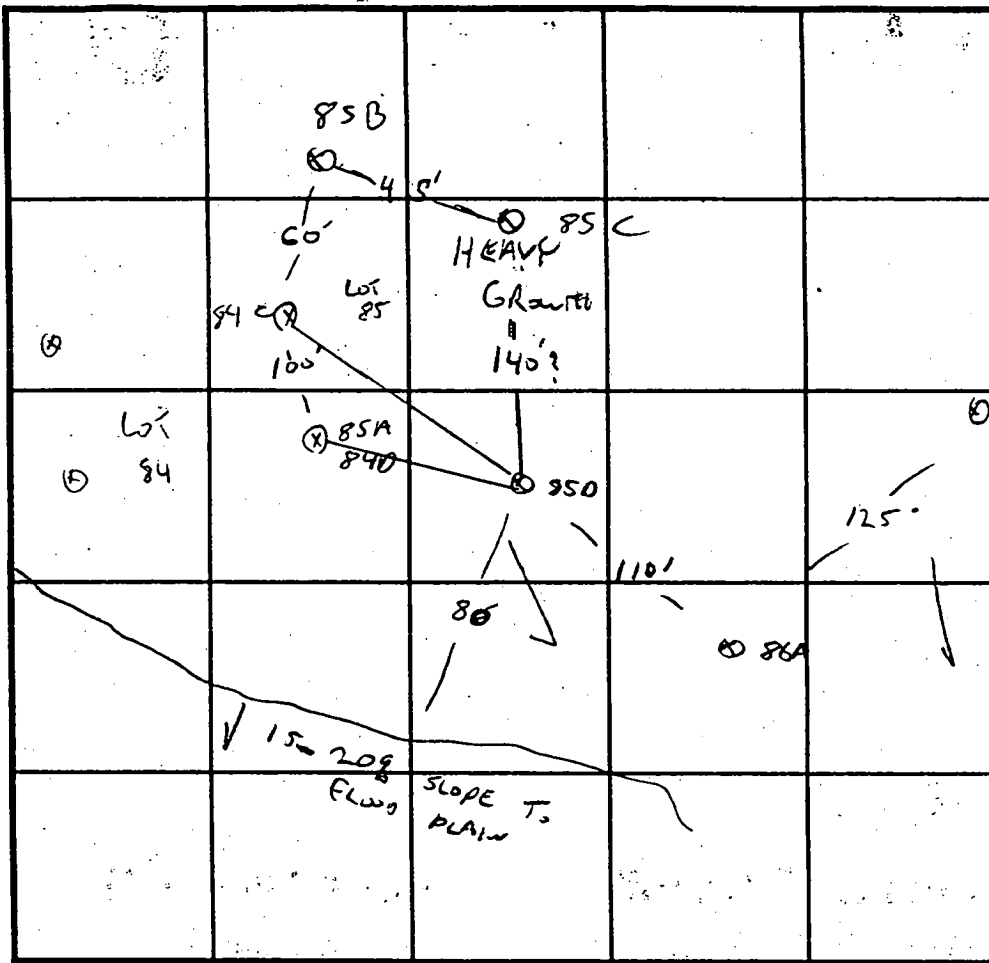
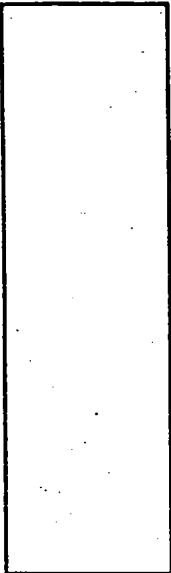
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

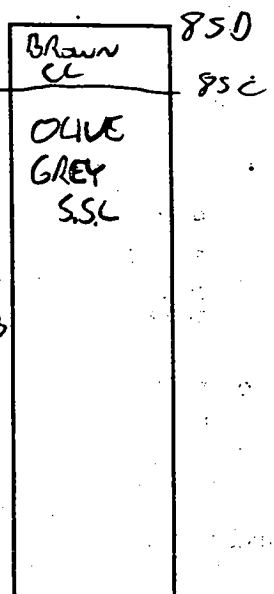
A 5757

COUNTY #

SOIL PROFILE



SOIL PROFILE



85C B

SIMILAR TO "D"

LESS OLIVE

COLORATION MORE

BROWN
 FEW CHUNKS
 MIXED
 COLORS
 MATERIAL
 W/ ORANGE
 BLACK
 NODULES
 DRY

S.E. PORTION OF PROPERTY



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/22/96	85D	3/12	3:02	3:03	3:03	3:06	3 MIN
		7U					
	85C	3/12	3:10	3:17	3:17	3:36	19 MIN
		7U OK					
	85B	3/12	3:11	3:12	3:12	3:17	2 MIN
		7U OK					
	84C	3/12.5	3:16	3:19	3:19	3:25	6 MIN
		7U OK					
	85A/84D		3:23	3:26	3:26	3:35	9 MIN

REMARKS ~~RE~~ NO ROAD WET SEASON Lot 24

TYPE OF SOIL _____

TESTED BY C. SAVAGE ALSO PRESENT C. SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



B 1 13997

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

Ho - 94 - 2702

fill in this form completely

Date Received (APA)

OWNER INFORMATION

Big Branch Overlook LCC
7164 Columbia Gateway Dr. Suite 230
Columbia MD 21046

B 3 LOCATION OF WELL

Howard
Big Branch Overlook 14109
Dayton

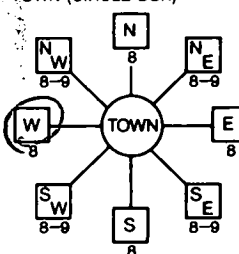
DRILLER INFORMATION

Allen Compton MS D 009
Fogles Well Drilling
580 Obrecht Rd Sykesville, Md 21784

MILES FROM TOWN (enter 0 if in town) 2

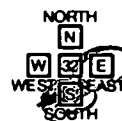
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Big Branch Dr.
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



220'
DISTANCE FROM ROAD
ENTER FT OR MI

TAX MAP: BLK: PARCEL

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
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 5/25/01
CO SIGNATURE EXP. DATE
NORTH GRID 510 000 EAST GRID 0795 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

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

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)

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

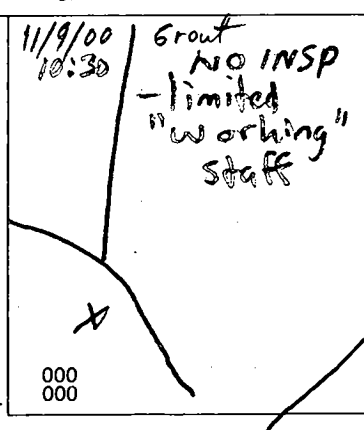
APPROP. PERMIT NUMBER
PERMIT No. Ho - 94 - 2702

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

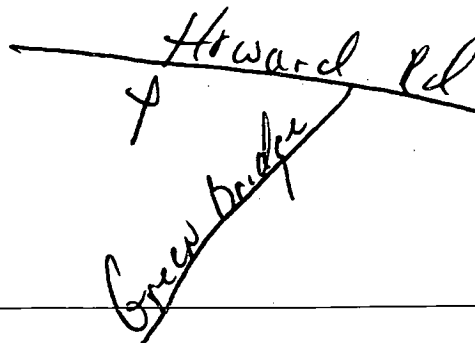
WRITE THE BOX NUMBER FROM THE MAP HERE

800 795
5100



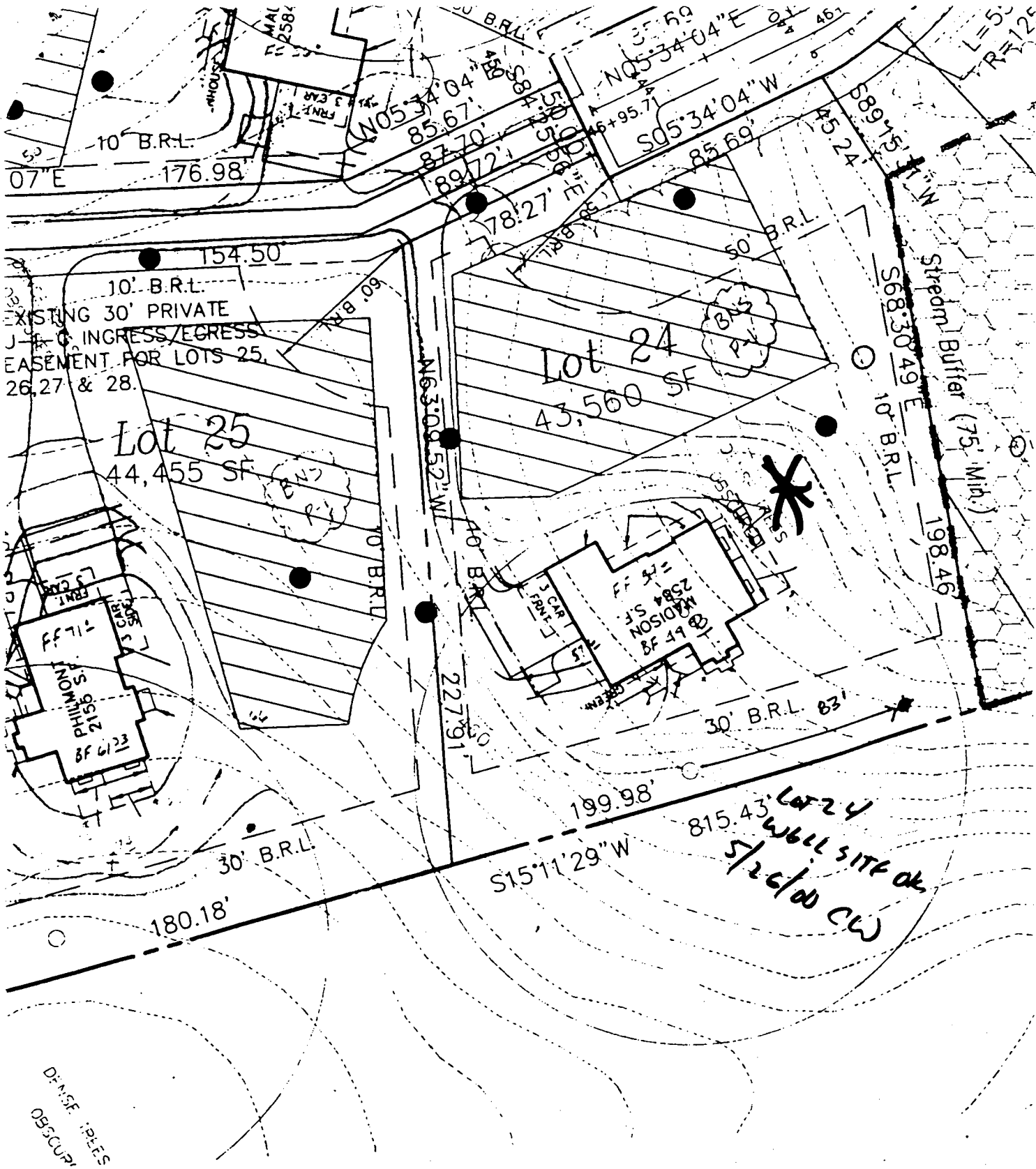
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N



SPECIAL CONDITIONS

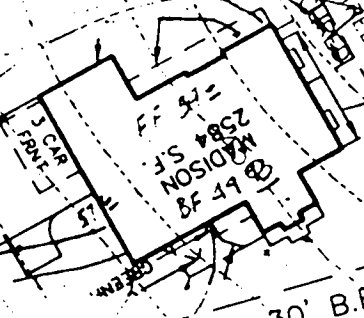
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



EXISTING 30' PRIVATE
J-E-C INGRESS/EGRESS
EASEMENT FOR LOTS 25,
26, 27 & 28.

Lot 25
44,455 SF

Lot 24
43,560 SF



DIANE TREES
OBSCURE

Lot 24
WELL SITE ok
5/26/00 CW

APPROVED:
THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND
SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

APPROV
REVIEW
MEETS

