

4/12/85 AM 9:30  
7/13/88  
4-14-88  
2pm

03-294447

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

P 41467

A 30902

DISTRICT 3rd

DATE 4/18/88

DATE SYSTEM APPROVED 4-15-88

INSPECTOR JEN

I.C.O.P.  
Time expired

Bill Ingram

IS PERMITTED TO INSTALL  ALTER

ADDRESS 14954 Bushy Park Road, Woodbine, Maryland 21797 PHONE 442-2139

SUBDIVISION Rosemary Estates ROAD 3232 Rosemary Lane LOT 13

PROPERTY OWNER Thomas Soeder

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO

100  
720

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - NOTE - SEPTIC TANK SHOULD BE PLACED NEAR LET (603') LOT LINE AND 100 FEET FROM WELL. Start first trench 45 feet from left (603') lot line and 350 feet from rear (530') lot line. Run trench(s) along contour toward front lot line, but NO CLOSER THAN 100 FEET TO WELL.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

ADDENDUM - SET TANK AS HIGH AS POSSIBLE AS CLOSE AS 10' TO HOUSE. CALL FOR LAYOUT INSPECTION BEFORE PROCEEDING. 4/8/88

PLANS APPROVED BY C. Williams DATE 8/13/85

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.

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

TR608

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186



# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30902  
P. 1000

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT 3RD

DATE SEPT 10, 1980

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 JOHN MIKOLASKO

ADDRESS 2205 FOXLEY ROAD TIMONIUM MARYLAND PHONE \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_

SUBDIVISION ROSE MARY ESTATES LOT NO. 13

ROAD AND DESCRIPTION 250'± FROM INTERSECTION OF RTE 32 AND ROSE MARY LANE

SIZE OF LOT 6.202 AC ± TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT: Charles J. Carr

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

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING 9-16-80 Hold For Certified Holes SK /

# THIS IS NOT A PERMIT





3/28/85  
11:30 PM  
RETEST

# APPLICATION

A 35137  
P \_\_\_\_\_

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P.O. BOX 476 ELLICOTT, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT THIRD  
DATE 3/14/85

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 THOMAS B. SOEDER

ADDRESS 3450 HARRINGTON DRIVE PHONE 301-465-8460  
ELLICOTT CITY MD 21043

PROPERTY LOCATION

SUBDIVISION ROSE MARY ESTATES LOT NO. 13

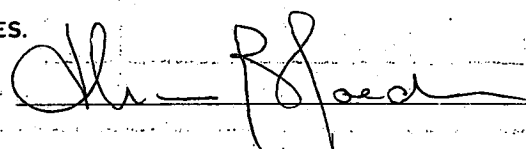
ROAD AND DESCRIPTION \_\_\_\_\_

SIZE OF LOT 6.202 Ac.<sup>±</sup> TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT 

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

REJECTED BY C. Wilbur FOR ADJUSTMENT TO PERC AREA DATE 3/28/85

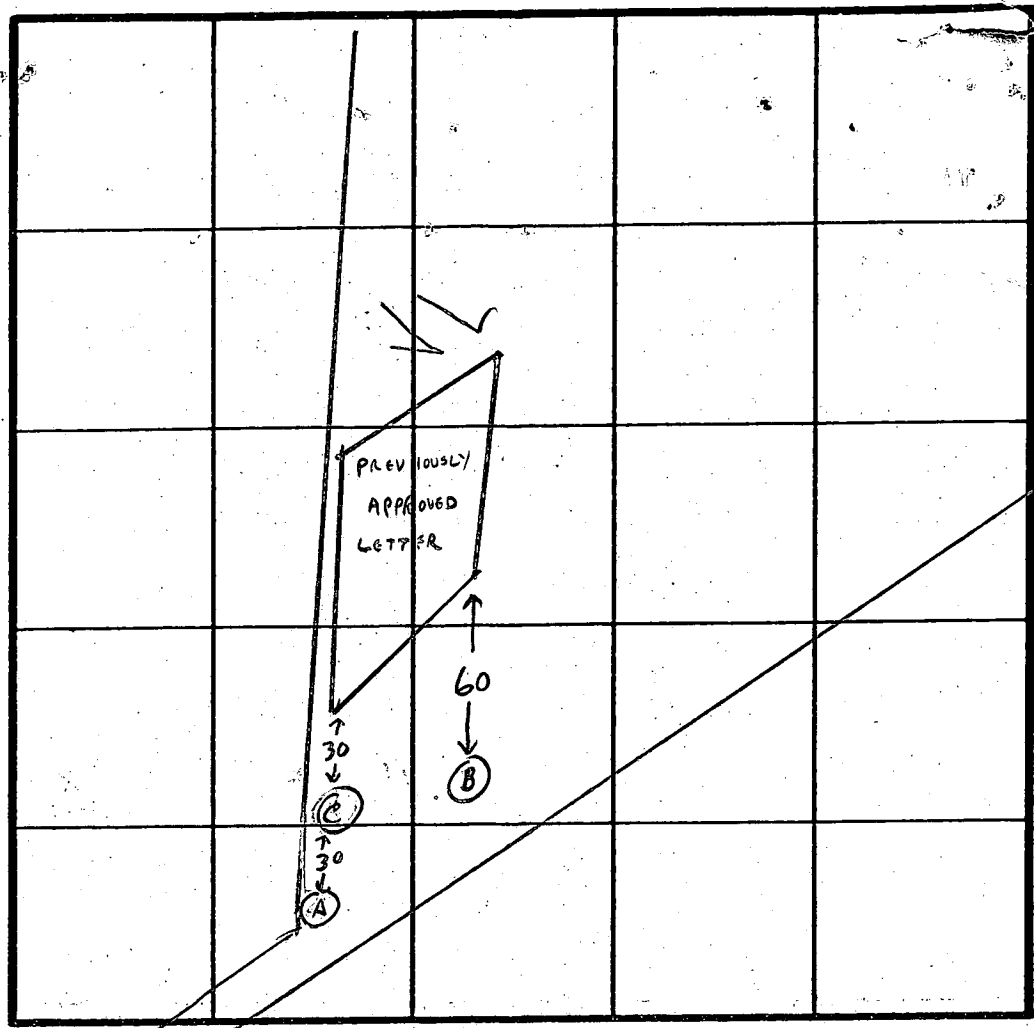
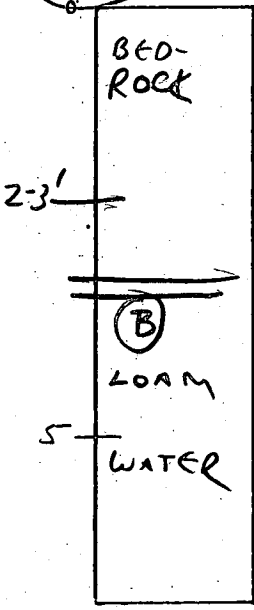
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING ROCK & WATER PREVENTS ANY DOWN HILL

ADJUSTMENT IN PERC AREA, CW

# THIS IS NOT A PERMIT

A+C  
SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-28-85	A	3'	ROCK				X
3-28-85	B	5'	WATER - INFLOOD PLAIN				X
3-28-85	C	3'	ROCK				X

REMARKS REPERCED TO ALLOW HOUSE TO SIT A TOP OF PENC AREA,

TYPE OF SOIL NO RELOCATION POSSIBLE BECAUSE OF NO ROOM TO RELOCATE RESERVE AREA

TESTED BY C. Wilman

ALSO PRESENT FYOCK, SOEDER

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 31048

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P.O. BOX 476 ELLICOTT, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT THIRD

DATE 11/25/80

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 JOHN MIKOLASKO

ADDRESS 218 TEACHERS BUILDING COLUMBIA MARYLAND 21044 PHONE 995-0212

PROPERTY LOCATION:

SUBDIVISION ROSE MARY ESTATES LOT NO. 13

ROAD AND DESCRIPTION 240'± SOUTH FROM INTERSECTION OF ROSE MARY LANE AND ROUTE 32

SIZE OF LOT 6,202 AC.± TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT Charles J. Cross Sr.

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

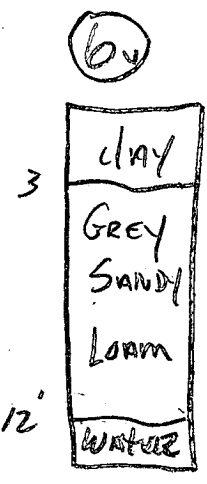
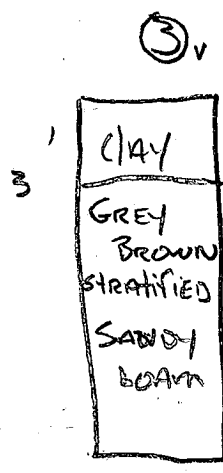
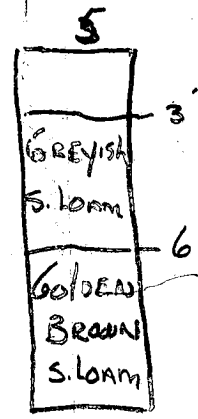
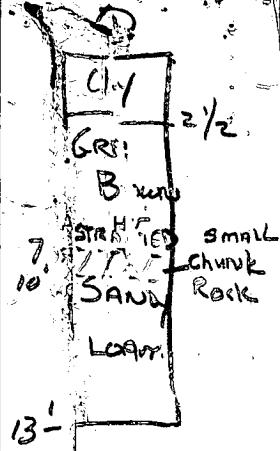
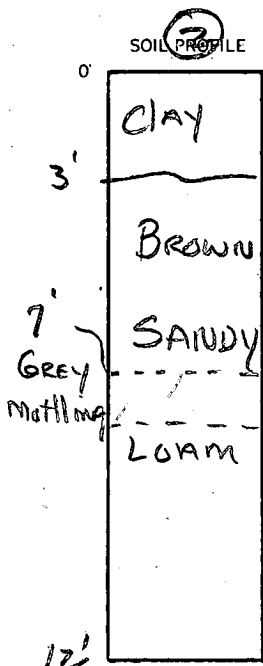
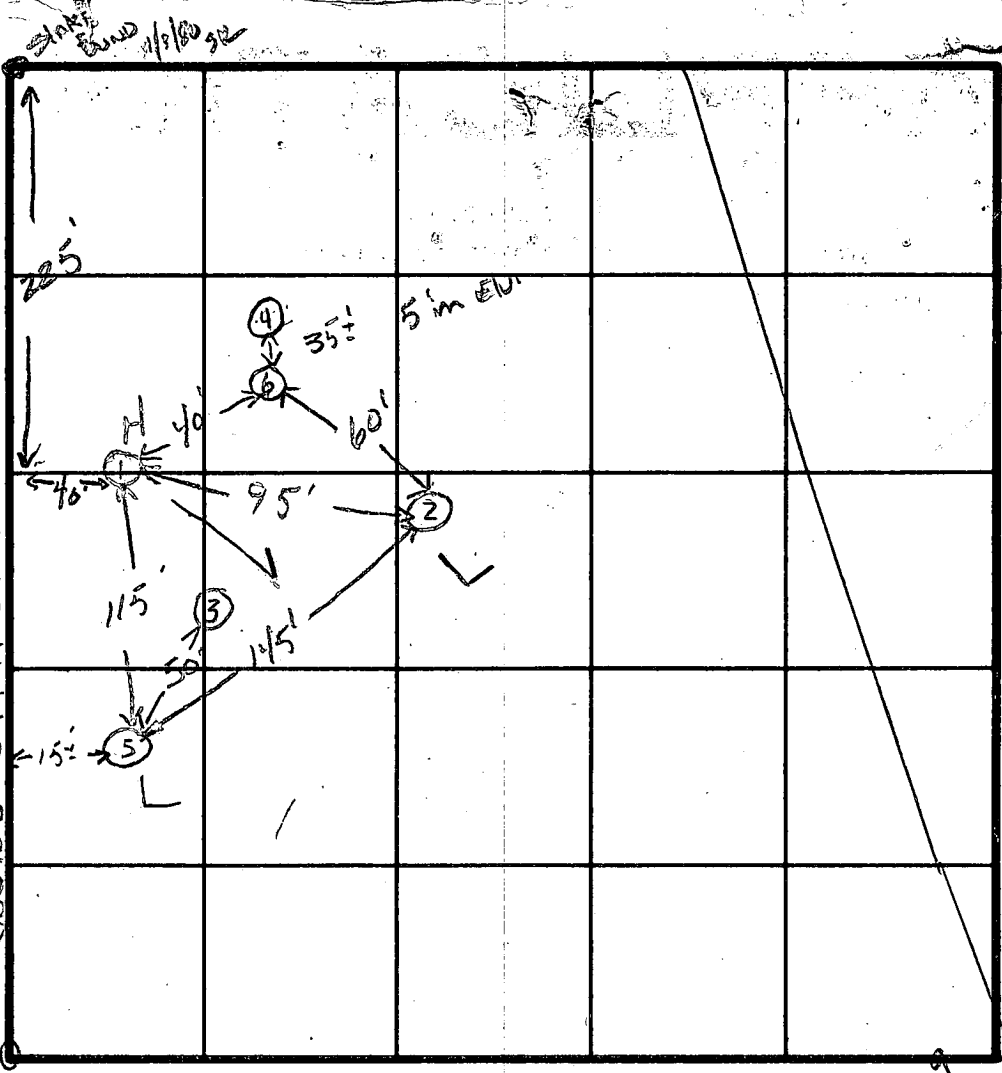
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS Stephen Reil DATE 11/3/80

REASONS FOR REJECTION OR HOLDING 11/3/80 Certified holes + wet season tests

SK -

# 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	
12/3/80	15	2 1/2'	10:11	10:12	10:12	10:13	1 min
	10	13'	10:11	10:13	10:13	10:17	4 min
	2S	3'	10:05	10:06	10:06	10:07	1 min
	2D	12'	10:05	10:07	10:07	10:10	3 min
	5S	3'	10:36	10:37	10:37	10:39	2 min
	5D	12'	10:36	10:39	10:39	10:47	8 min
	3v	12 1/2'					
	6v	WATER AT 12'					
	4	WATER AT 12'					

\*6v is 40' uphill + 5' higher in E.V.

REMARKS Wooded lot, staked

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

TESTED BY SK ALSO PRESENT J. Fyock

C. CROSBY  
J. Mikilasco

PRELIMINARY

# APPLICATION

A 22048

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3rd

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

DATE 8/27/75

*12/21/76  
9:30 A.M.  
lot*

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 John Mikolasko and A. A. Krometis

ADDRESS 2205 Foxley Road, Timonium, Md. 21093

PHONE 252-3478  
Work: 765-2930 (Westinghouse)

PROPERTY LOCATION:

SUBDIVISION (Rosemary Estates)

LOT NO. 13

ROAD AND DESCRIPTION Rosemary Lane

SIZE OF LOT 6.202 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/ John Mikolasko

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

(KIND OF SYSTEM)

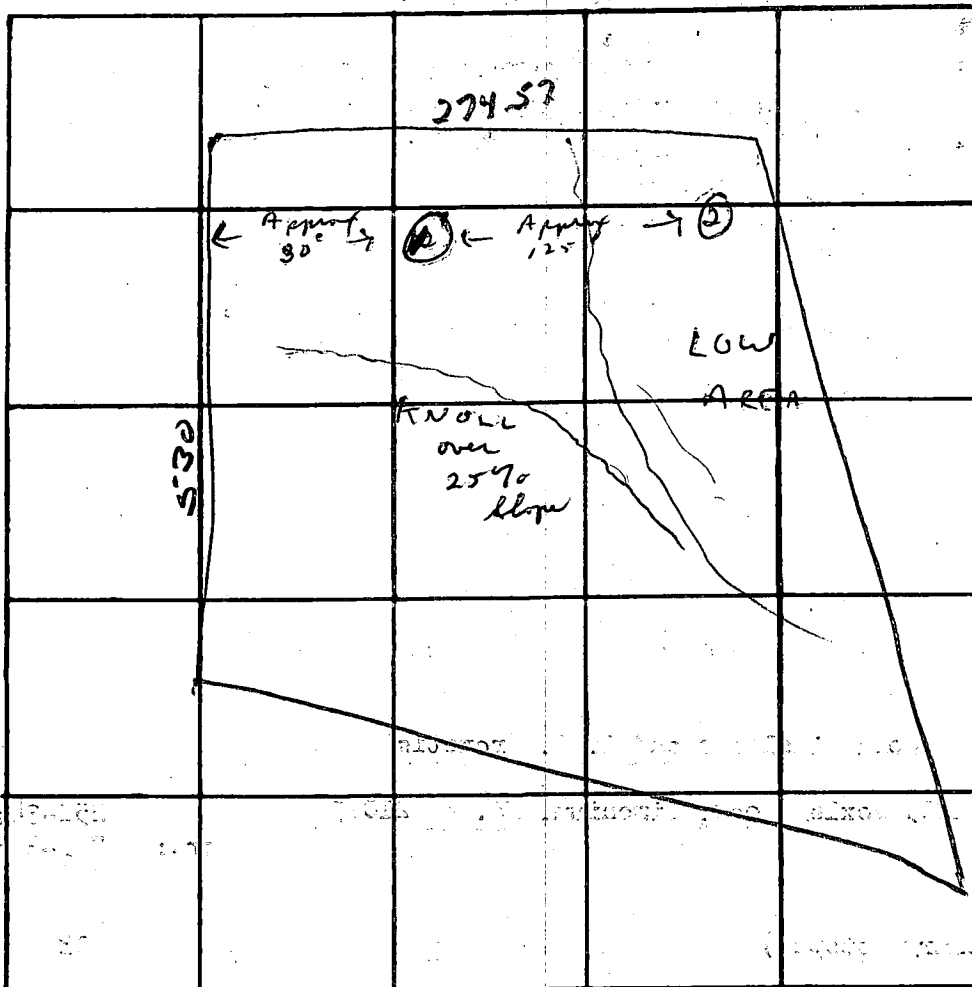
REJECTED BY R. Mansfield FOR None DATE 12/27/78

(KIND OF SYSTEM)

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

REASONS FOR REJECTION OR HOLDING not worth retesting in future due to insufficient available perc area 9/29/80 (see) - retest in different area.

# 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	
RT? { 8/25/75	1	12'	Sandy soil - could not fully measure				
	2	5 1/2'	water				
(RM/RH) { 12/2/76	3	10'	water				
	4	10'	water				

REMARKS

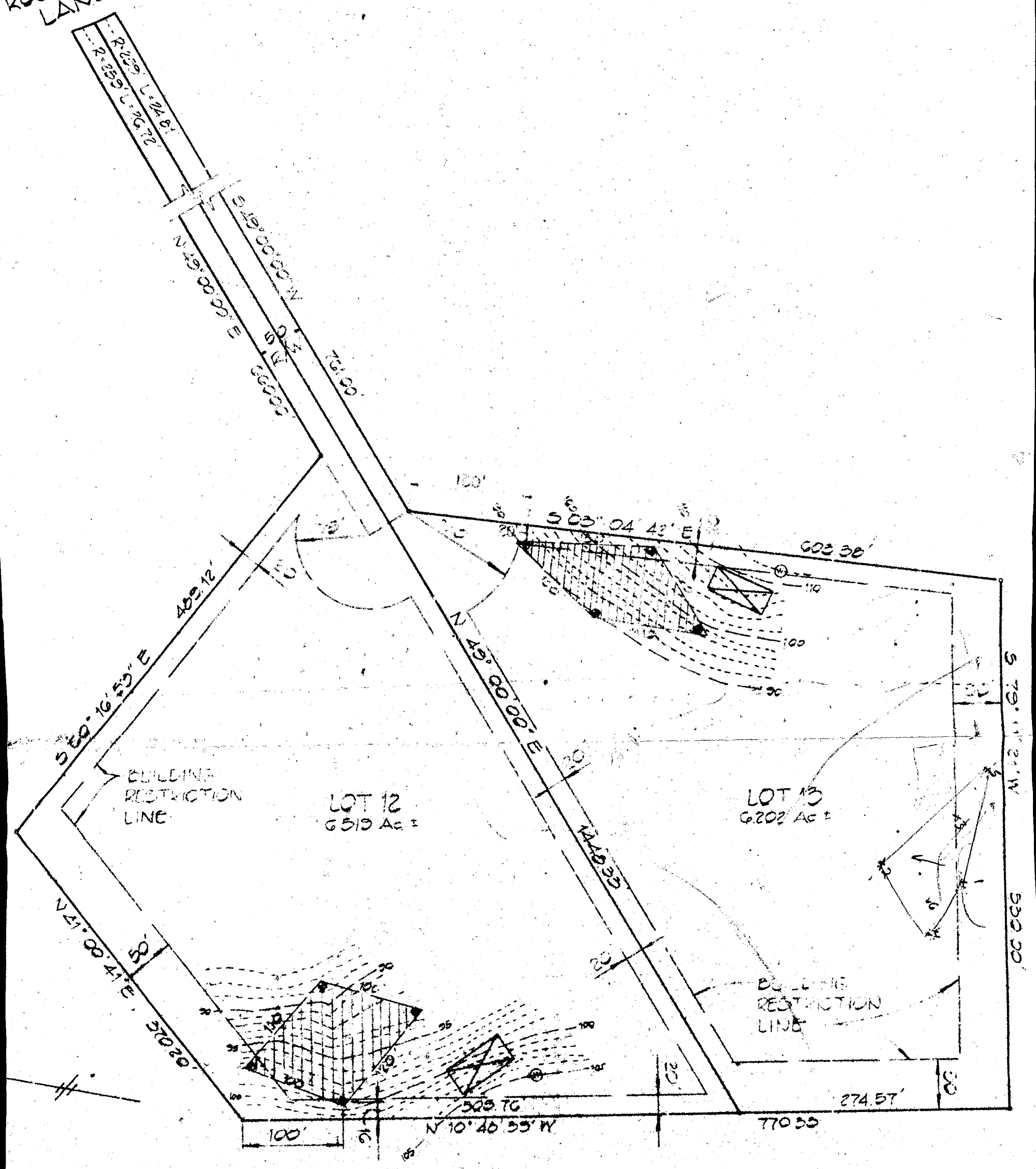
Does not appear to have 100,000 sq ft of pavement

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

ROSEMARY LANE



APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS

*Josephine Boyd*  
County Health Officer      9-30-80      Date

B 1 **8554** SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 PERMIT TO DRILL WELL *SM*  
 please print or type

OEP PERMIT NUMBER  
**40-81-1042**  
 fill in this form completely

Date Received **7/1/85**  
 OWNER INFORMATION  
 SOEBER THOMAS  
 BUSTO HARRINGTON DR.  
 F.L.L. C. ST. CIT + MO 21043

B 3 LOCATION OF WELL  
 HOWARD  
 COUNTY  
 ROSEMARY ESTATES  
 SUBDIVISION  
 SECTION LOT 13  
 WEST FRIENDSHIP  
 NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **2 MI**

DRILLER INFORMATION  
 Jacob L. Wayne  
 238  
 77 License No. 80  
 Jacob L. Wayne WITH DRILLING  
 5512 Ridge Rd. Mt. Airy, Md 21071  
 Address  
 Jacob L. Wayne 4/23/85  
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
 NEAR WHAT ROAD  
 Rose Mary Lane  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 DISTANCE FROM ROAD  
 ENTER FT or MI **M 1**

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 HOWARD A30902 A-31248  
 COUNTY NAME COUNTY NO.  
 OEP SIGNATURE STATE HEALTH INSERT S  
 DATE ISSUED  
 052985 CO SIGNATURE EXP. DATE  
 NORTH GRID 527000 EAST GRID 0809000

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL **200** FEET

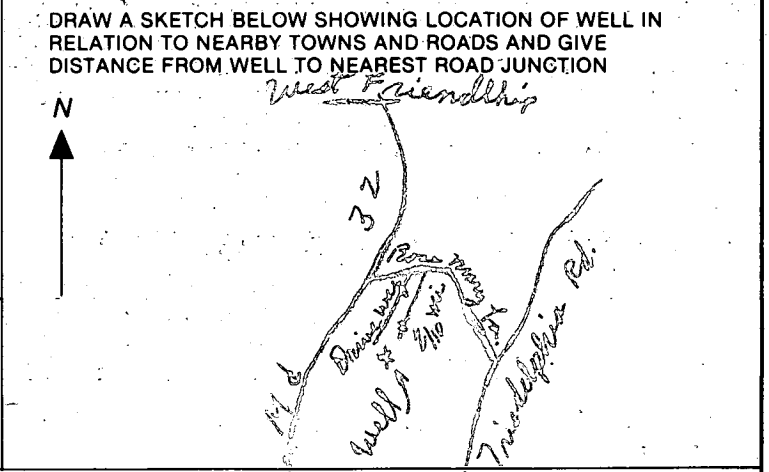
APPROXIMATE DIAMETER OF WELL **6** INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)  
 CABLE REVERSE-ROTARY Drive-POINT  
 other

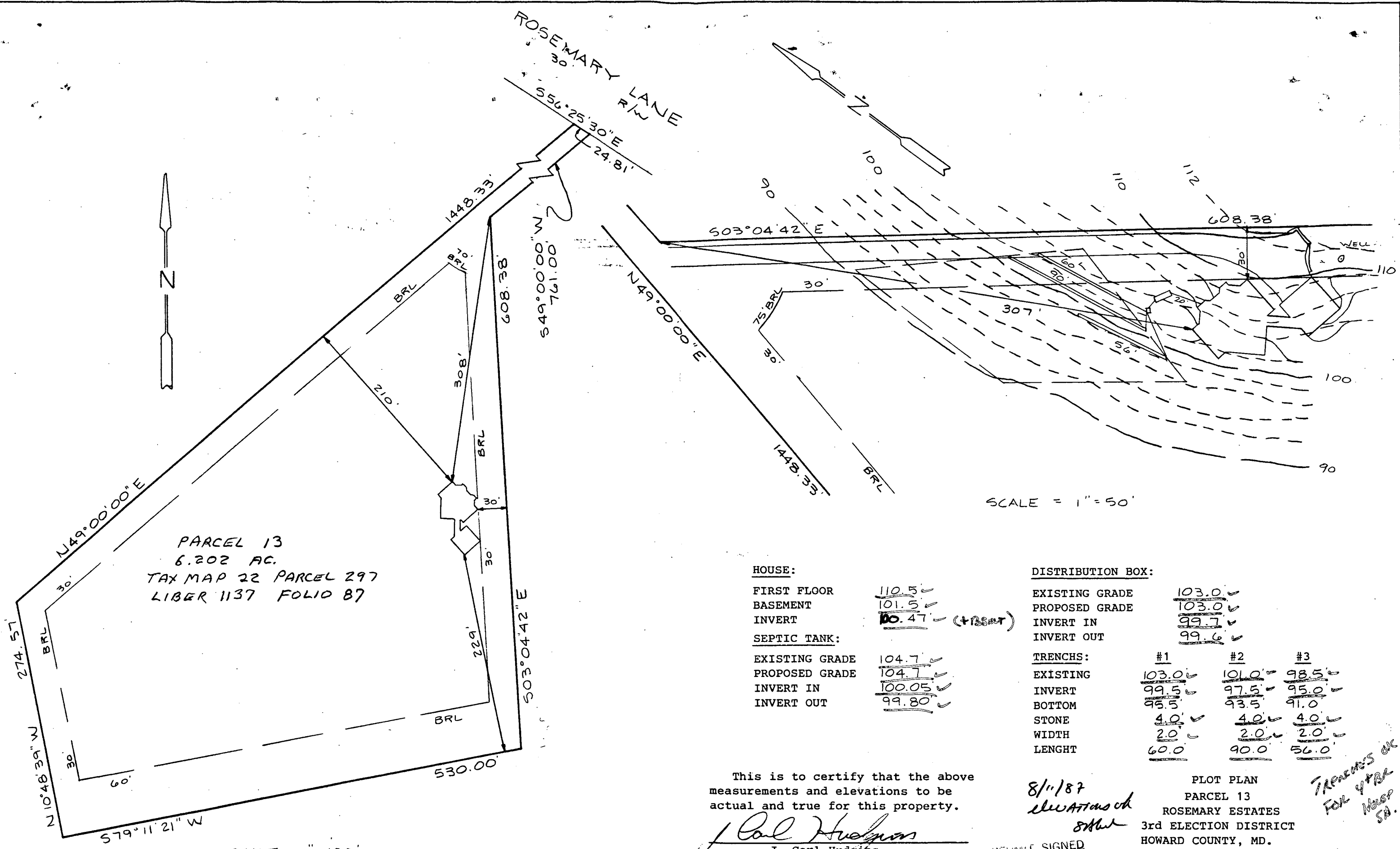
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPM AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) **41** **52**

Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER **GAP**  
 FORCE **CU** WRITE INITIALS IN BOX PERMIT No. **40-81-1042**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. WELL  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E **800 9**  
 N **520 7**



SPECIAL CONDITIONS



PARCEL 13  
6.202 AC.  
TAX MAP 22 PARCEL 297  
LIBER 1137 FOLIO 87

SCALE = 1" = 50'

HOUSE:

FIRST FLOOR 110.5 ✓  
BASEMENT 101.5 ✓  
INVERT 100.47 (+135) ✓

SEPTIC TANK:

EXISTING GRADE 104.7 ✓  
PROPOSED GRADE 104.7 ✓  
INVERT IN 100.05 ✓  
INVERT OUT 99.80 ✓

DISTRIBUTION BOX:

EXISTING GRADE 103.0 ✓  
PROPOSED GRADE 103.0 ✓  
INVERT IN 99.7 ✓  
INVERT OUT 99.6 ✓

TRENCHS:

	#1	#2	#3
EXISTING	<u>103.0</u> ✓	<u>101.0</u> ✓	<u>98.5</u> ✓
INVERT	<u>99.5</u> ✓	<u>97.5</u> ✓	<u>95.0</u> ✓
BOTTOM	<u>95.5</u> ✓	<u>93.5</u> ✓	<u>91.0</u> ✓
STONE	<u>4.0</u> ✓	<u>4.0</u> ✓	<u>4.0</u> ✓
WIDTH	<u>2.0</u> ✓	<u>2.0</u> ✓	<u>2.0</u> ✓
LENGHT	<u>60.0</u> ✓	<u>90.0</u> ✓	<u>56.0</u> ✓

This is to certify that the above measurements and elevations to be actual and true for this property.

*J. Carl Hudgins*  
J. Carl Hudgins

8/11/87  
Elevations ok  
S.H.W.

DESG. PERMIT SIGNED  
AND RETURNED 8/11/87  
BP 13900  
S.H.W.

PLOT PLAN  
PARCEL 13  
ROSEMARY ESTATES  
3rd ELECTION DISTRICT  
HOWARD COUNTY, MD.  
SCALE AS SHOWN DATE 08/05/87

TRENCHES OK  
FOR 4" DIA  
HOUSE  
S.H.W.

SCALE 1" = 100'

C1 **2309** (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND WELL COMPLETION REPORT**  
 (FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE)

THIS REPORT SHOULD BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER ~~A 2309~~ **A 30902**

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED **12 15 2009** Depth of Well/ FROM "PERMIT TO DRILL WELL" **NO-81-1092**  
 (TO NEAREST FOOT) 28 29 30 31 32 33 34 35 36 37

OWNER **SOEDER THOMAS**  
 STREET OR RFD: last name **ROSEMARY LANE** first name **THOMAS** TOWN **WEST FRIENDSHIP**  
 SUBDIVISION **ROSEMARY EST.** SECTION **SECTION** LOT **13**

**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	
SAND	0	36	
GRAY Mica Rock	36	205	✓

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **9** NO. OF POUNDS **846**  
 GALLONS OF WATER **34**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **35** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **43**

**OTHER CASING** (if used)  
 diameter inch [ ] [ ] depth (feet) from [ ] to [ ]

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

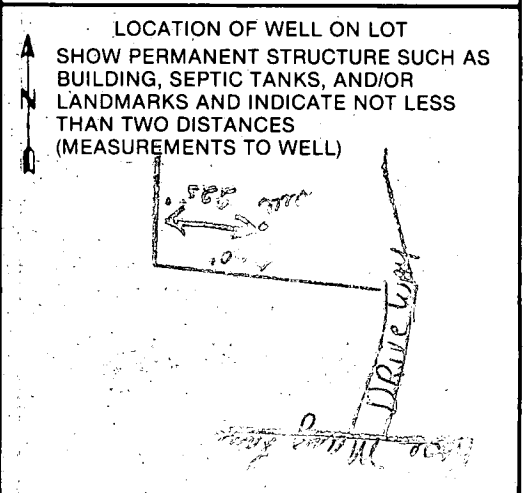
**C 2**  
 DEPTH (nearest ft.)  
 1 **H O** **42** **205**  
 2 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 3 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 SLOT SIZE 1 [ ] 2 [ ] 3 [ ]  
 DIAMETER OF SCREEN [ ] [ ] [ ] (NEAREST INCH)  
 from [ ] to [ ]

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T [ ] (E.R.O.S.) WQ [ ] [ ] [ ]  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C 3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **4**  
 METHOD USED TO MEASURE PUMPING RATE **bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **26**  
 WHEN PUMPING **135**  
 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 WILL INSTALL PUMP YES **(NO)**  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED [ ]  
 PLACE (A,C,J,P,R,S,T,O) [ ]  
 IN BOX - SEE ABOVE: 29  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [ ] [ ] [ ] [ ]  
 PUMP HORSE POWER [ ] [ ] [ ] [ ]  
 PUMP COLUMN LENGTH (nearest ft.) [ ] [ ] [ ] [ ]  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 (+) above } LAND SURFACE **✓**  
 (-) below } (nearest foot) **1**



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 10.17.13 "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 IDENT. NO. **238**  
 Joseph L. Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

