

B 1 7483

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

40-94-2185 fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13 Highland Development P.O. Box 228 Clarksville Md. 21029

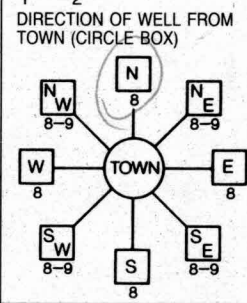
LOCATION OF WELL

Howard COUNTY Knapp Property SECTION 44 46 LOT 7 50 Glenwood NEAREST TOWN MILES FROM TOWN 3

DRILLER INFORMATION

Joseph L. Mayne M S D 024 Driller's Name License No. 81 Firm Name Joseph L. Mayne Well Drilling Address 5512 Ridge Rd. Mt. Airy 21111 Signature Date 3/8/99

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Sheet A NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST DISTANCE FROM ROAD 60 FT ENTER FT OR MI 38 39 TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE 5 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

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 COUNTY NAME 13 COUNTY NO. STATE SIGNATURE DATE ISSUED 03/10/99 CO SIGNATURE EXP. DATE 03/09/00 NORTH GRID 544 000 EAST GRID 0797 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST 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-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) 41

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

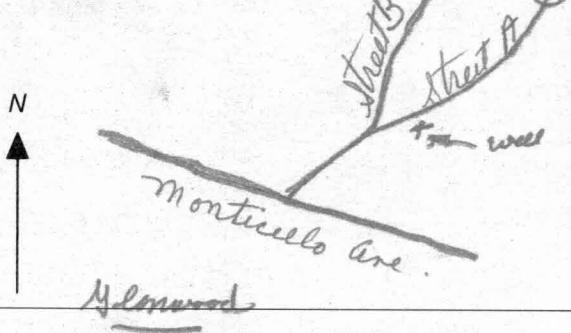
SOURCES OF DRILLING WATER

- Well

WRITE THE BOX NUMBER FROM THE MAP HERE

E 797 N 544

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



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

APPROP. PERMIT NUMBER 54 GAP 63 PERMIT No. 40-94-2185

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

**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 Obrecht 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# MSD009

*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: D.R. Horton Telephone #: _____
Subdivision: Monticello Lot #: 7 Well Tag #: HO-94-2185
Site Address: 1726 Oakdale Drive

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Corliss</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>Y</u>
Model #: <u>105807</u>	Model#: _____	Screened, vented well cap: <u>Y</u>
Pump Capacity <u>10</u> GPM	Depth: <u>4'</u> (36" min)	Cap secured to casing: <u>Y</u>
Well Yield: <u>20</u> GPM	NSF/WSC approved: <u>Yes</u>	Conduit min 18" B.G.: <u>Y</u>
Depth of well encountered at time of pump installation: <u>185</u> (feet)		Conduit secured to well cap: <u>Y</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, 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" 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: 5'
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: 4-30-01

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

Date Insp. Requested: 4/13/01 Date Insp. Approved: 7/27/01 Inspector: DKC SRK

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope not seen outside of well cap/casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

7/27/01 DKC

LOT 5
49,606± S.F.

LOT 6
49,741± S.F.

LOT 7
49,979± S.F.

LOT 8
49,979± S.F.

LOT 25
45,615± S.F.

LOT 24
48,162± S.F.

LOT 23
49,957± S.F.

LOT 9
48,891± S.F.

LOT
49,929±

WELL SITE
3/11/99

WELL LOCATION
FOR PRES.
PARCEL 'D'

SEPTIC LOCATION
FOR PRES.
PARCEL 'D'

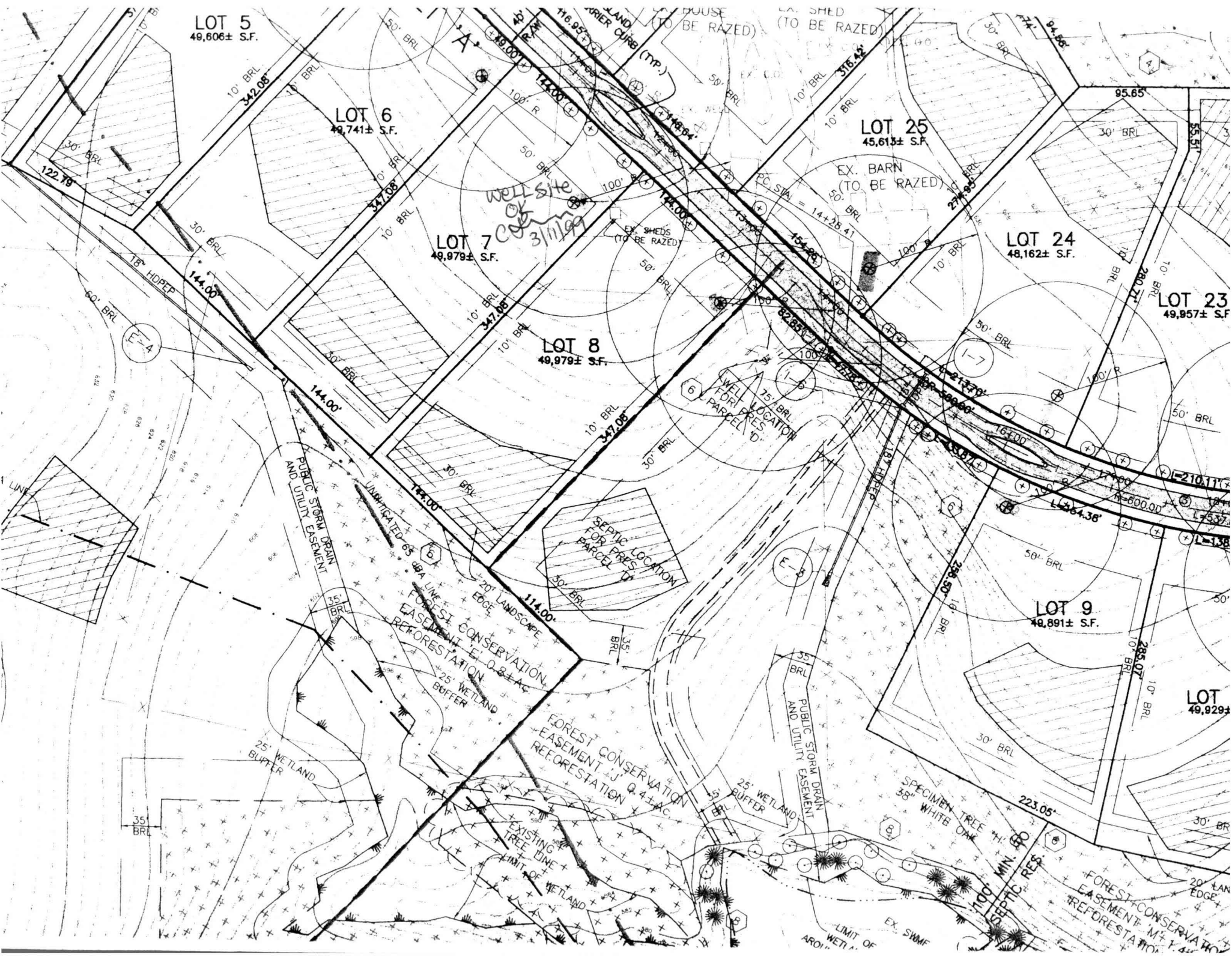
UNIMPAIRED 65' 0/4 LINE
PUBLIC STORM DRAIN
AND UTILITY EASEMENT
20' LANDSCAPE
EDGE
FOREST CONSERVATION
EASEMENT - E, Q, 8-LAC
REFORESTATION
25' WETLAND
BUFFER

FOREST CONSERVATION
EASEMENT - J, Q, 4-LAC
REFORESTATION

PUBLIC STORM DRAIN
AND UTILITY EASEMENT

SPECIMEN TREE
38" WHITE OAK
100' MIN. 60'
UTILITY RES.

FOREST CONSERVATION
EASEMENT - M, Y, 4-LAC
REFORESTATION





HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

April 17, 2001

Denise Swatzbaugh
Groundwater Permits Program

RE: **Replacement Well Tag**
Monticello – Lot 7
1726 Oakdale Drive
Cooksville, MD 21771
Well Permit #: HO-94-2185

Dear Ms. Swatzbaugh:

Upon a well line inspection for the above referenced property, it was observed that the above assigned well tag was not located on the well casing. Field/office research could not locate the missing tag. Therefore, I am requesting a replacement tag reading HO-94-2185 to be sent to this office.

Thank you for your help with this matter.

Sincerely,

Brian Baker

Brian Baker, Sanitarian
Water and Septic Program

cc: File