

11/17/89
12-10M
8:15

File

11/17/89 P.C.D.
C.B.D.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 44974
A 38462

DISTRICT 4th

DATE 9/28/89

TAX ID# 04347080

DATE SYSTEM APPROVED 11/17/89

INDEXED

INSPECTOR C. B. D.

Olen Ketterman

IS PERMITTED TO INSTALL ALTER

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION Cole Property ROAD 15753⁸⁰ Bushy Park Road LOT 1

PROPERTY OWNER ~~James Lacroix~~ Lawrence Black

ADDRESS _____

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

GARBAGE GRINDER? YES 2000+ NO per contractor

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 3.5 feet below original grade. 2.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 245 feet off the front lot line (384.5') and 120 feet off the right lot line as seen when facing the lot from Bushy Park Road. Run trenches on contour toward the right lot lines. Maintain a minimum of 100 feet from the well.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 9-20-89 JEN

PLANS APPROVED BY Jane Nadeau DATE 3/27/89

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

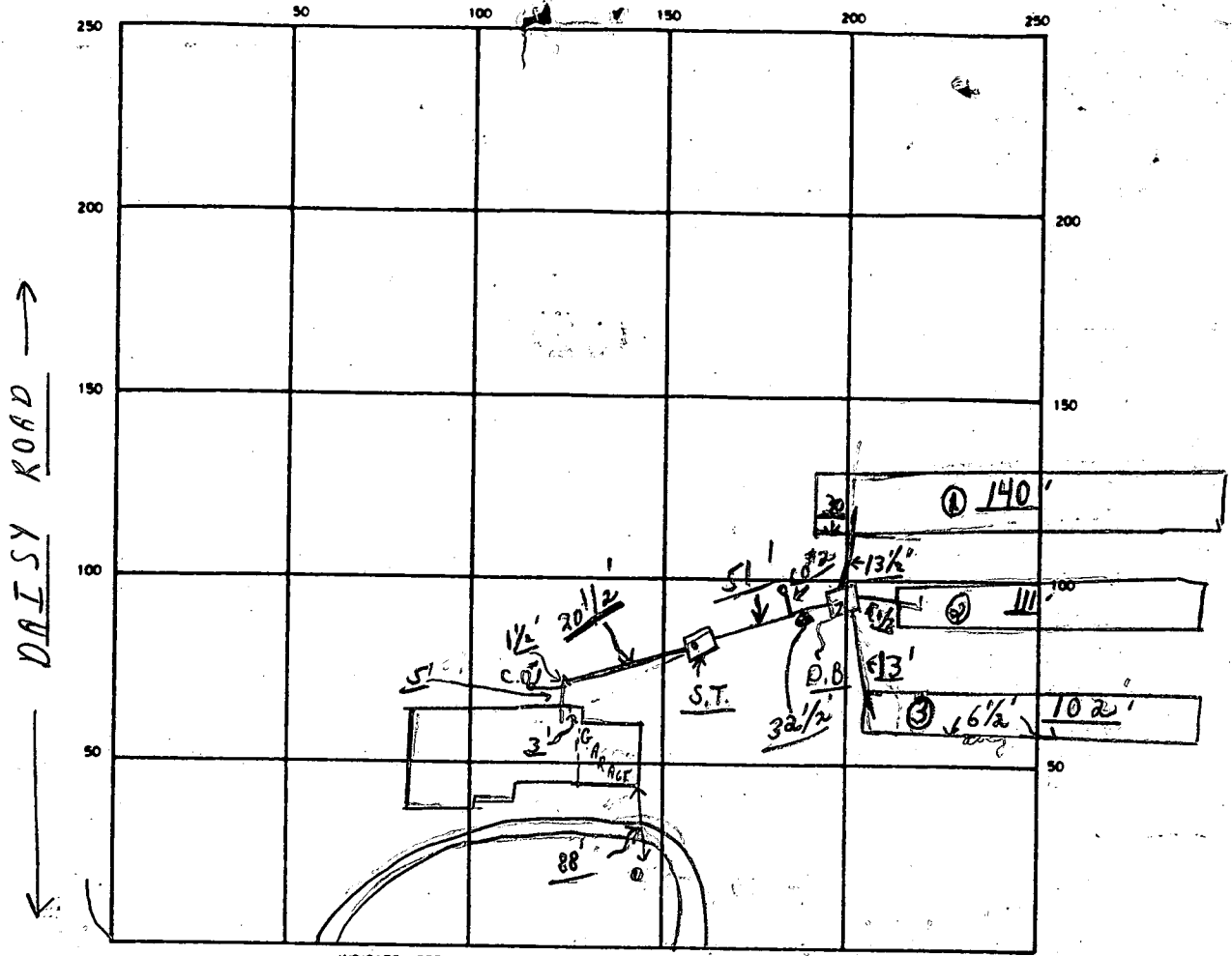
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A384162



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
BUSHY PARK ROAD

SEPTIC TANK. LEVEL	CLEANOUTS	S.T.	C.O. #1	C.O. #2
OK	OK	OK	OK	OK
DISTRIBUTION BOX. LEVEL <u>OK (Baffle is in)</u>				
DRAIN FIELD/TILE FIELD. DEPTH <u>6 avg.</u> FT.	TRENCH WIDTH <u>3</u> FT.	INLET DEPTH <u>3.5 avg.</u> FT.		
EFFECTIVE GRAVEL DEPTH <u>2.5⁺</u> FT.	TOTAL LENGTH	① 140'	② 111'	③ 102'
NUMBER OF TRENCHES <u>3</u>	ONE 2.5 /BOTTOM AREA	<u>1059⁺</u> SQ. FT.		
DRYWELL INSIDE DIAMETER <u>-</u> FT.	EFFECTIVE DEPTH BELOW INLET <u>-</u> FT.	ABSORBENT AREA <u>1059⁺</u> SQ. FT.		

REMARKS ① 11/17/89 Partial - ok to cover all dirt laid trench closest to road; ② Final - ok to cover all work as finished.
 C.B.D.

DATE SYSTEM APPROVED 11/17/89 INSPECTOR Charles Bryan Stecker

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

A 38462
P _____

DISTRICT _____
DATE 1/10/87

*2/27/87
perc OK'd
pending approval
per [initials]*

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 Cole JAME LACKOIX

ADDRESS 15751 Bushey Park Road PHONE _____

PROPERTY LOCATION:

GOOD AREA Final Lot I

SUBDIVISION Cole Property LOT NO. 15753

ROAD AND DESCRIPTION North east corner of Daisey Road and Bushy Park Road

SIZE OF LOT 3 acre TYPE BLDG. SFD
(NUMBER OF BEDROOMS)

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]
(SIGNATURE OF APPLICANT)

APPROVED BY [Signature] FOR Standard trench DATE 6-7-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for certified field locations (holes) + plot plan

BOG. PERMIT SIGNED
AND RETURNED 6-7-89

*BP 26795
874*

THIS IS NOT A PERMIT

⑤

SOIL PROFILE

0
 orange purple
 clay soil
 thin
 fairly
 uniform
 8'
 small
 red fragments
 5-10%
 10' gets
 hard

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2/27/77	⑤	4'5"	136	139	139	149	10 min	
		10' D	(getting hard bottom)					

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION

2/27/87
9:30

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A. 38461
P. _____

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

perc test failed 2/27/87
(BR)

DISTRICT _____

DATE 1/10/87

1/27/87

OK TO PROCESS

Sylvia (Boenker) called w/ date.

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 Cole

ADDRESS 15751 Bushey Park Road PHONE _____

PROPERTY LOCATION:

SUBDIVISION Cole Property LOT NO. _____

*Area combined w/
prelim plat #2 to get
final plat*

ROAD AND DESCRIPTION North east corner of Daisey Road and Bushy Park Road

SIZE OF LOT 3 acre TYPE BLDG. SFD

(NUMBER OF BEDROOMS)

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.

S. Bal

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

B Nuyon

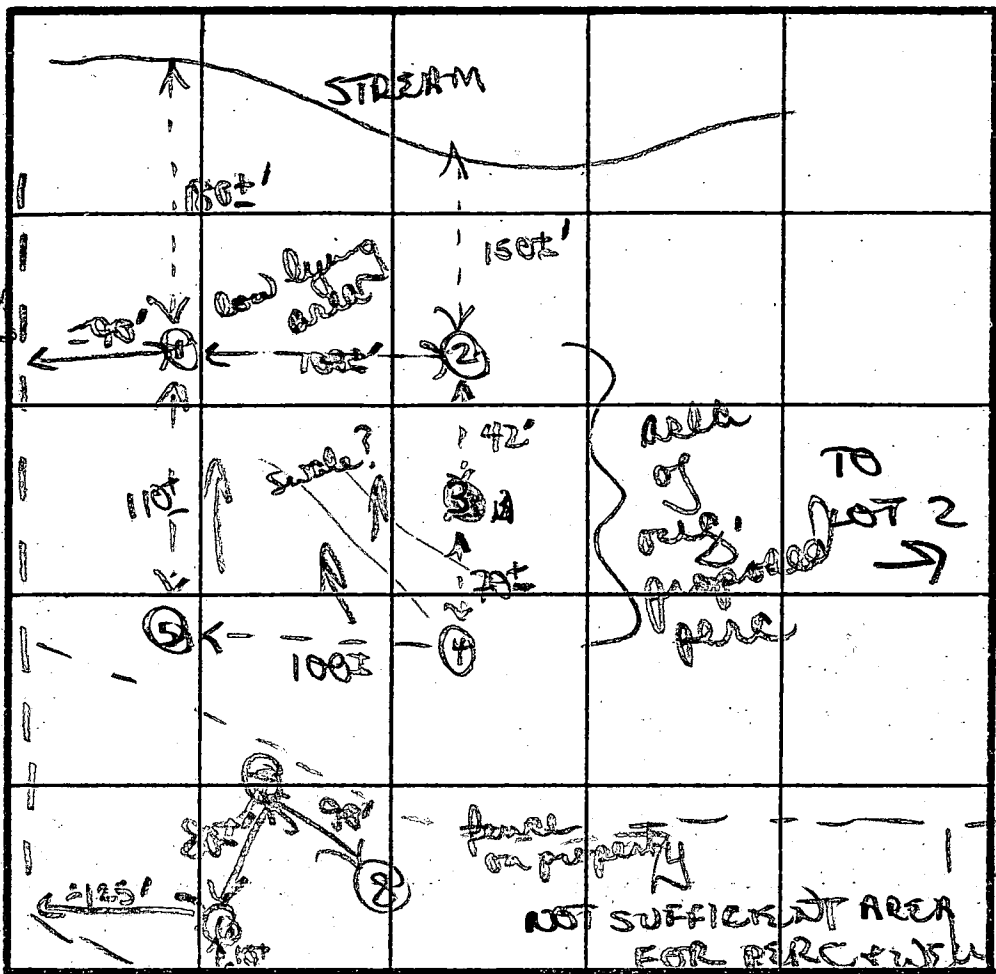
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING rock over entire lot in higher areas; H₂O in lower area (flood plain/stream)

THIS IS NOT A PERMIT

6



Orange/brown clay 3'
to clay layer 4+1'
Sun to edge
fragile
↑ to hard
7'

Orange/brown rock 3'
hard by 5'

fence area w/ barn

SOIL PROFILE

①
brown orange clay 4'
fragile
sun to edge
fragile
↑ to hard
7'
Daisy Rd
12' D

②
orange/yellow clay 4 1/2'

to brown/yellow silty loam w/ 10% sand med frags 8' to 10 1/2' to

3, 4 + 5

orange/brown clay 2-3' layers of med frags 3'

10% 35% 5% 10% 5% 10%

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BUSHY PARK RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/27/87	①	med to heavy rock by 9'					
	②	4 1/2' clay		NOT TESTED			
		10 1/2' D hard earth					
	③, ④, ⑤	rock 3' ↓		NOT TESTED			
	⑥	rock 4' → hard by 6 1/2'					
	⑦	rock hard by 5'					
	⑧	Rock hard by 6'					

eliminates most of any potential perc area

REMARKS: stated in approx area as shown; initially confg. changed, then adjusted due to land holes

TYPE OF SOIL: orange/brown clay

TESTED BY

ALSO PRESENT

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 38462
P _____

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

427187

DISTRICT _____

DATE 1/10/87

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 Cole

ADDRESS 15751 Bushey Park Road PHONE _____

PROPERTY LOCATION:

SUBDIVISION Cole Property LOT NO. final lot 1

ROAD AND DESCRIPTION North east corner of Daisey Road and Bushy Park Road

SIZE OF LOT 3 acre TYPE BLDG. SFD
(NUMBER OF BEDROOMS)

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.

S.P.A.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located holes + plat plan

SHALLOW SYSTEM ONLY, HOLES (A ROCK FRAGS) TOWARDS LOWER END

THIS IS NOT A PERMIT

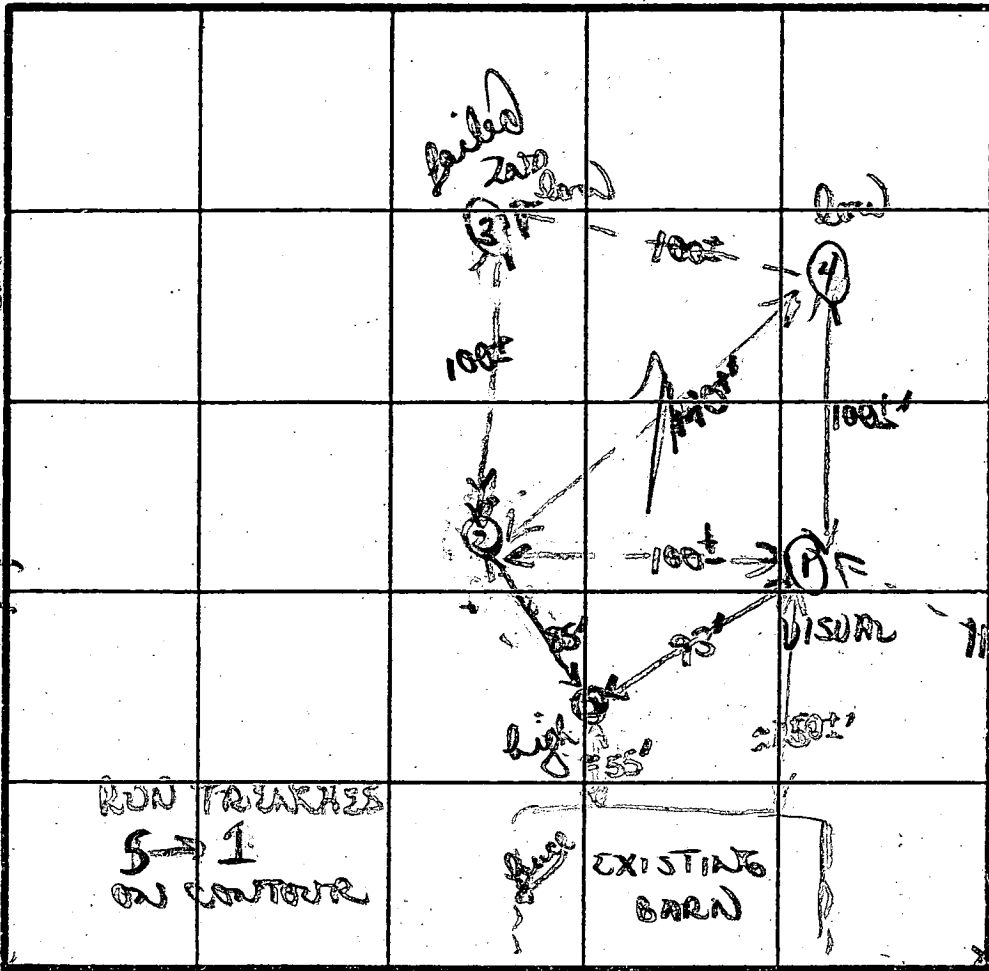
Lot 2

200 #/BDRM
INLET 3 1/2
MAY D (6'D)
X = 7 MIN

SOIL PROFILE

0'
orange clay
3"
to clay
lean
6'
to orange
brown to
silty lean
w/ 10% small
red frags
12'D

①



④
orange/brown
clay 3'
to clay lean
4 1/2'
to brown
silty lean
w/ layers 15%
small blue
fragments

③
LOT
3

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASELINE.

BUSHY PARK RD

check
lot 2/3

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/2/81	①	VISUAL ONLY/ 12'D					
		2'	1226	NO movement			
	②	3 1/4' 6' 1/2'	1235 1226	1238 1228	1238 1228	1245 1232	7min 4min
		12'D					
	③	2' 1/2' 3 1/4' 11 1/2'	1246 1257	shelved 118	shelved 2 1/2" pulled		
		11 1/2'					
	④	4 1/2' 11'D	1248	1251	1251	1258	7min
		11'D					

SHALLOW SYSTEM ONLY

REMARKS

perc field adj up = 60' than originally proposed
orange/brown clays to 4"; to brown/orange silty
lean up to 2 1/2' frags

TYPE OF SOIL

TESTED BY

B Nivan

ALSO PRESENT

skip rocky

see page 2

purple/orange
silty clay
lean
3"
to purple
brown
silty lean
w/ 15% s-
red frags
6"
12' hard

③

brown/orange
clay to clay
lean 3'

to layers
w/ 20%
small blue
fragments

11-29/89
AM

11/29/89
Partial
C.B. d

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Receipt # 45214
Date 11/3/89
Name of Installer DENNISSON PLUMBING HEATING Telephone 473-4015
License Number 10040
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner JAMES LACROIX Telephone 921-2072
Subdivision COLE PROP Lot # 1 Well Tag # 40-88-0512
Site Address 15780 BUSHY PARK RD.
GLENWOOD, MD.

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make
3. Model #
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes _____ No _____
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth _____

Tank
1. Capacity _____
2. Pressure relief valve? _____
11/8/89 NOT INSTALLED M.A.

Piping
1. Type _____
2. Size _____
3. NSF and/or BOCA Code approved _____
4. Depth of supply line _____

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? _____

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.
Signature of Applicant: Robert M. Dennison Jr.
Date: 11-3-89

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215 (P.M.) 11/17/89 No inspection, not ready. C.B. d
Partial P.M. 11/29/89 OK TO COVER PITLESS ADAPTER & LINE ONLY
C.B. d

HOUSE:

FIRST FLOOR 536.6 ✓
 BASEMENT 527.0 ✓
 INVERT 526.05 ✓ + BSMT

SEPTIC TANK:

EXISTING GRADE 527.8 ✓
 PROPOSED GRADE 527.8 ✓
 INVERT IN 525.80 ✓
 INVERT OUT 525.55 ✓

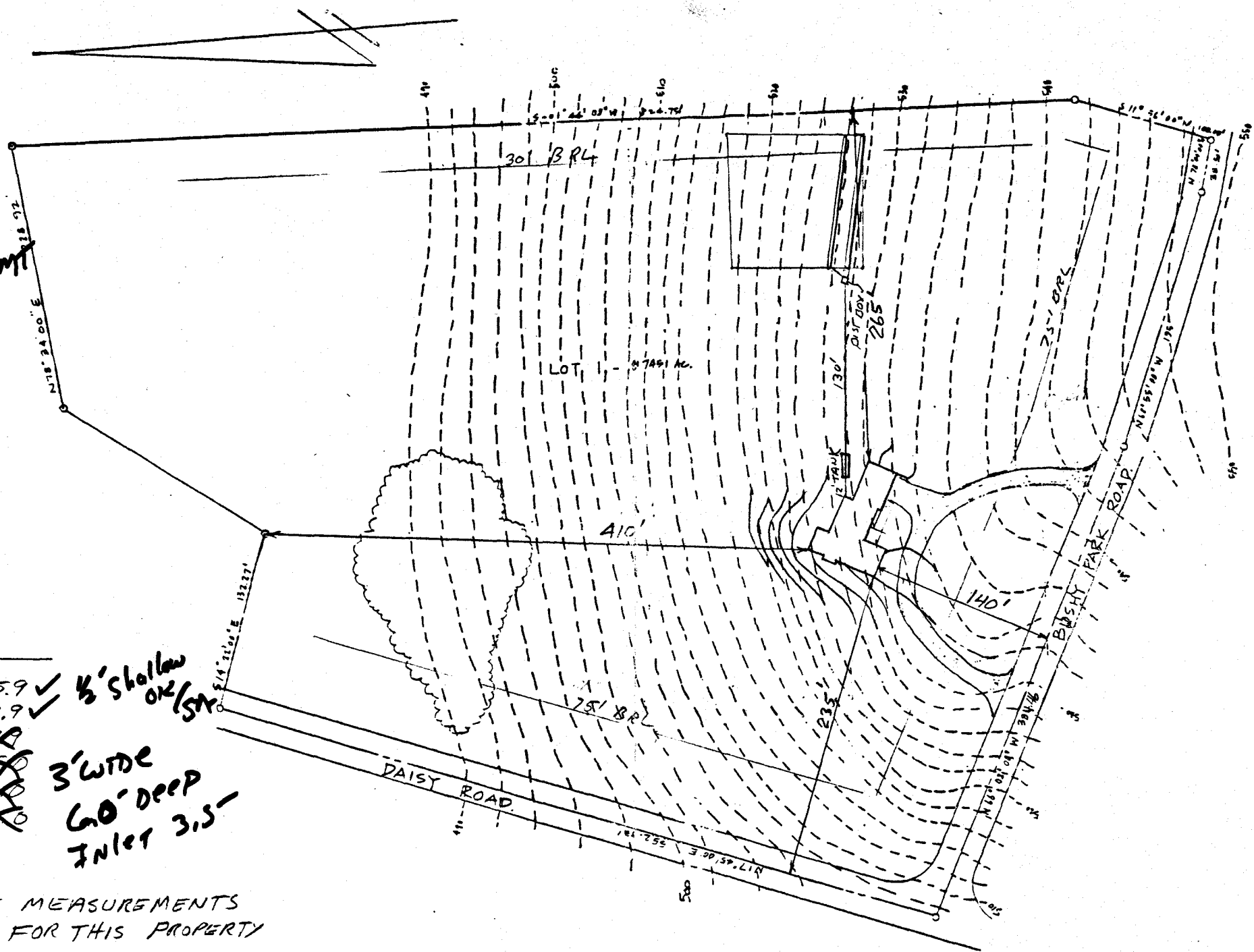
DISTRIBUTION BOX:

EXISTING GRADE 527.0 ✓
 INVERT IN 524.2 ✓
 INVERT OUT 524.1 ✓

TRENCHES:

	#1	#2
EXISTING GRADE	527.0 ✓	525.9 ✓
INVERT	524.0 ✓	522.9 ✓
BOTTOM	510	510
STONE	50	50
WIDTH	20	20
LENGTH	100	100

1/2' shallow on 1/2" slope
 3' wide
 60" deep
 Inlet 3.5"



RECEIVED
 HOWARD COUNTY
 HEALTH DEPT
 JUN 6 2 35 PM '89
 ENVIRONMENTAL
 HEALTH

I CERTIFY THE ABOVE MEASUREMENTS
 TO BE ACTUAL AND TRUE FOR THIS PROPERTY

J. Carl Hudbins
 J. CARL HUDBINS

BUDG. PERMIT SIGNED
 AND RETURNED 6-7-89
 8710
 BP 26795

PLOT PLAN
 LOT 1 COLE PROPERTY
 TAX MAP 14 PARCEL 8
 4th ELECTION DISTRICT
 HOWARD COUNTY MD
 Scale 1"=100' DATE 6-5-89

C1 8418

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER A38462

DATE Received

DATE WELL COMPLETED 040889

Depth of Well 22 205 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HC-88-0512

OWNER IACROK JAMES last name first name STREET OR RFD 12805 WICKLOW M. TOWN CLIFTON JA SUBDIVISION Park Group SECTION LOT I

WELL LOG Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Brown Slate, Blue Slate, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below MAIN CASING Nominal diameter Total depth top (main) casing of main casing TYPE

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

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.) EACH SCREEN

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED ELECTRIC LOG OBTAINED 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. 273 DRILLERS SIGNATURE

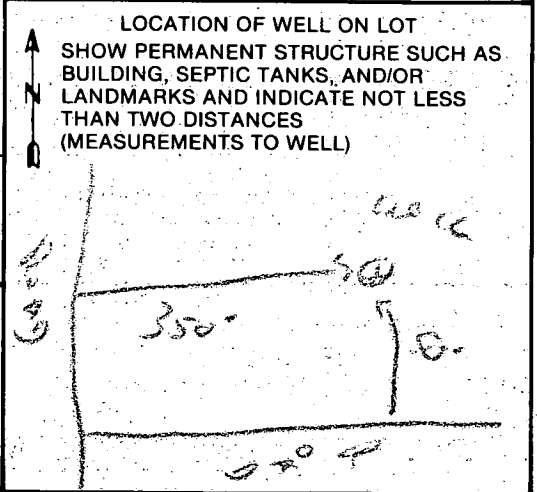
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test)

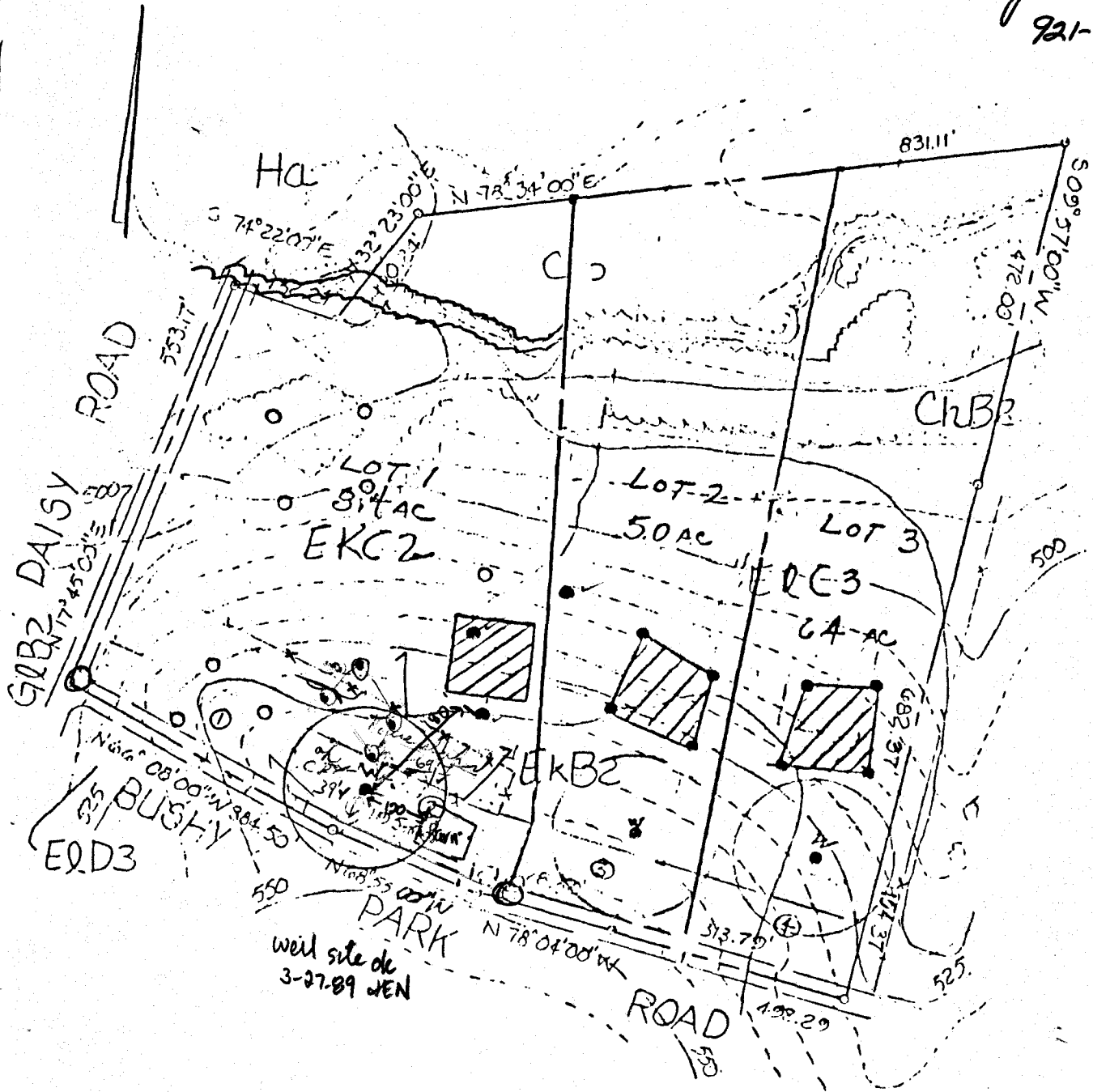
PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)




COUNTY

North

Jim & Kathy La Croix
921-8056



1) The lots shown hereon comply with the minimum ownership width and lots required by the Maryland State Department of Health and Mental Hygiene.

2)  This area designated a private sewage easement of a MINIMUM OF 10,000 sq. ft. as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewerage is available and servicing any residential structures constructed on these building sites. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewer easement. Recordation of a modified sewage easement shall not be necessary.

3) ALL GOOD PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED & SHOWN AS THUS (●) ALL BAD HOLES SHOWN AS THUS (○)



APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEM, HOWARD COUNTY HEALTH DEPARTMENT.

James Byrum 2-11-88
HOWARD COUNTY HEALTH OFFICER (P.M.) DATE

TITLE: PERCOLATION TEST PLAT				
PROJECT: COLE PROPERTY				
LOCATION: TAX MAP: 14 BLOCK: 1 PARCEL: 8				
4 TH ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1" = 200'	DESIGNED BY: J.C.O.	DRAWN BY: J.C.O.	CHECKED BY: J.A.B.	DATE: DEC., 1986
FIELD BOOK:	PAGE NO.:	JOB NO.: 86435	DRAWING NO.: 1 OF 1	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MD. 21043
13011 465-7777

C1 - 3796 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A 38 462

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

ST/CO USE ONLY DATE RECEIVED DATE WELL COMPLETED

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-4017

OWNER Black Linde STREET OR RFD 15700 Bushy Park Rd TOWN Woodbine SUBDIVISION SECTION 14/1/230 LOT 1

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: GEO Thermal Well, Brown Shale, Gray Limestone, White, Gray Limestone.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD (Casing types insert appropriate code below) MAIN CASING TYPE, Nominal diameter, Total depth

OTHER CASING (if used) diameter, depth

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

DEPTH (nearest ft.)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A, E, P

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. M S D 009 DRILLERS SIGNATURE

LIC. NO. D

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

GRAVEL PACK (IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68) MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 0

PUMPING RATE (gal. per min.) 11 15

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20

WHEN PUMPING 22 25

TYPE OF PUMP USED (for test) A, P, T, C, R, O, J, S

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or 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

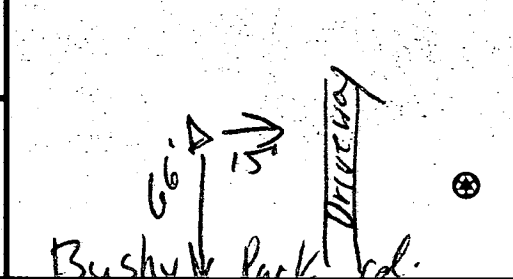
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot) 45

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



B 1 2715

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 520755

STATE PERMIT NUMBER HD-94-4017 fill in this form completely

Date Received (APA)

OWNER INFORMATION

Black Linda 15780 Bushy Park Coolsville Md. 21797

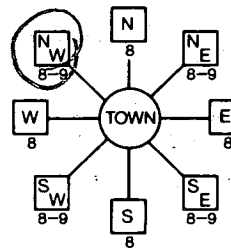
B 3 LOCATION OF WELL

8 COUNTY O.K. 23 SUBDIVISION SECTION 44 46 LOT 48 50 woodbine 52 NEAREST TOWN DORR STANWOOD MILES FROM TOWN 3

DRILLER INFORMATION

Allen Compton MS D 009 Fugles Well Drilling 580 Obrecht Rd 6-28-04

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Daisy Rd NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 130 FT DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 14 BLK: 1 PARCEL 230

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 A38462 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 9/1/04 CO SIGNATURE EXP. DATE 9/1/05 NORTH GRID 539000 EAST GRID 783000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH 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

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
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)

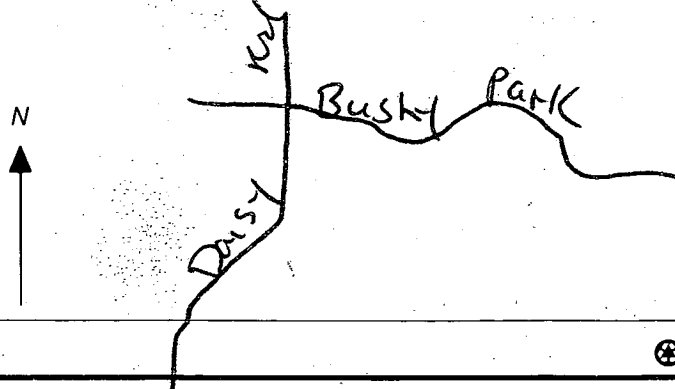
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 7803 N 5309

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

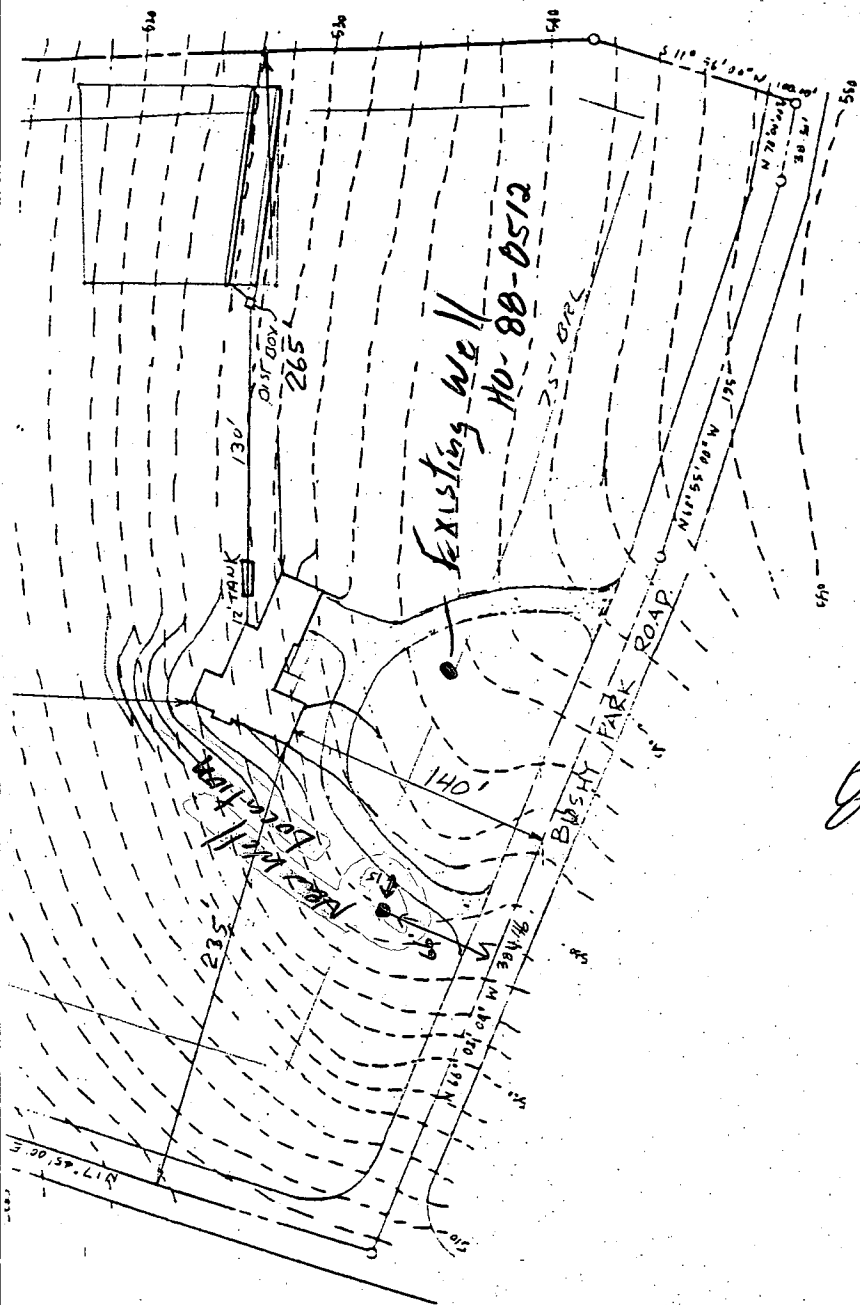


Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G PERMIT No. HD-94-4017

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



RECEIVED
HOWARD COUNTY
HEALTH DEPT

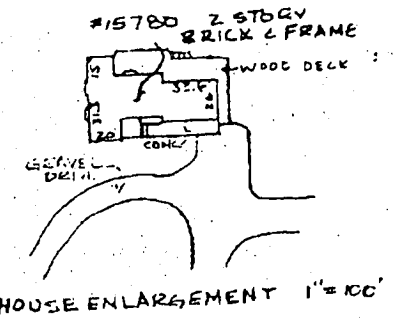
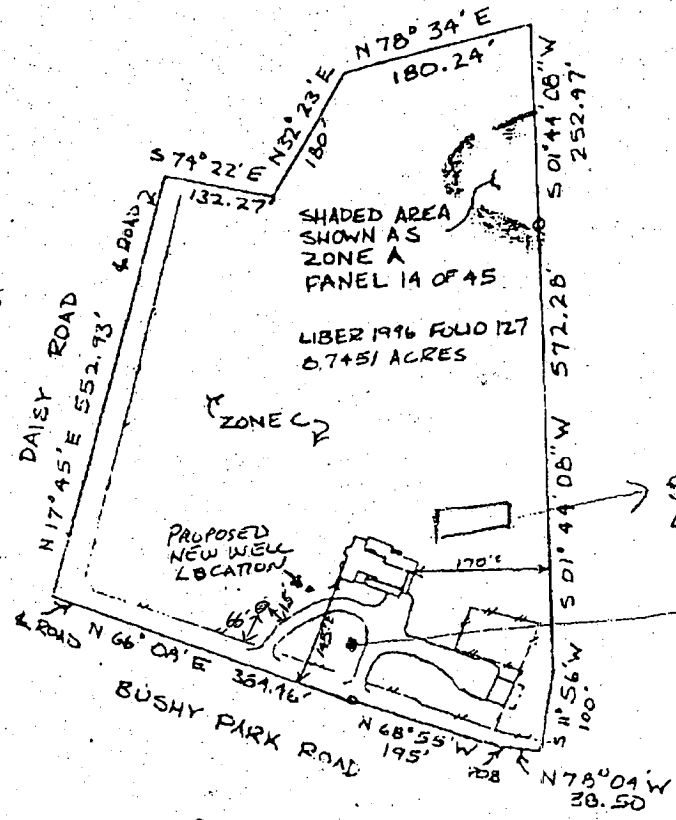
JUN 6 2 35 PM '89

HOWARD COUNTY
HEALTH

8/31/04
New well location
OK (80)

PLOT PLAN
LOT 1 COLE PROPERTY
TAX MAP 14 PARCEL 8
4th ELECTION DISTRICT
HOWARD COUNTY MD
Scale 1"=100' DATE 6-5-89

1/25/05
Well site Staked
By NTT Associates
on 6/26/2004
BB

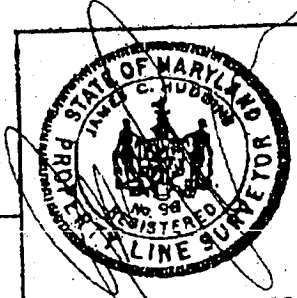


SEPTIC SYSTEM LEACHING FIELD
EXISTING Well

Subject property is shown in Zone A on the National Flood Insurance Program Flood Insurance Rate Map of HOWARD County, Maryland. Panel # 147 25 Community Panel # 240045 0014 G Effective Date: DECEMBER 4, 1985

This is to certify that I have surveyed the property shown hereon, being the same property conveyed by John B. Cole, Jr. and wife to James P. LaCroix and wife by deed dated May 10, 1989 and recorded among the Land Records of Howard County in Liber 1996 Folio 127.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Hudgins PLS#96

LOCATION SURVEY
15780 BUSHY PARK ROAD
4th ELECTION DISTRICT
HOWARD COUNTY, MD

NTT ASSOCIATES, INC.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Phone 442-2031

Scale	1" = 200'
Date	3-21-94
Field By	[Signature]
Drawn By	[Signature]
Drawing #	MISC-2