

✓ 9/2/93 11:00 (Tank only)
✓ 9/7/93 MOAN
✓ 9/8/93 Final am AM
✓ 9/9/93 2nd trench (1-2) final

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-312887

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXX-XXXX~~ 313-2640

INDEXED

P 49543

A 38493

DISTRICT 3rd

DATE 08/20/93

DATE SYSTEM APPROVED 9/9/93

INSPECTOR JLM

Kastner Plumbing & Heating, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 9335 Old Scaggsville Road, Laurel, Maryland 20723 PHONE 301-725-5000

SUBDIVISION Triadelphia Woods LOT 46 ROAD 12630 Golden Oak Drive

PROPERTY OWNER Jose Valderas

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 144

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 200 feet off the right lot line (232.00') adjacent to Golden Oak Drive and 85 feet off the front lot line as seen when facing the lot from Fawn Run Court. Run trenches along contour toward the rear lot line (225.49'). MAINTAIN A MINIMUM OF 100 FEET TO ALL WELLS.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK MR 8/25/92

PLANS APPROVED BY Jane Nadeau/Mark Rifkin REVISED DATE 5/24/93

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, 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

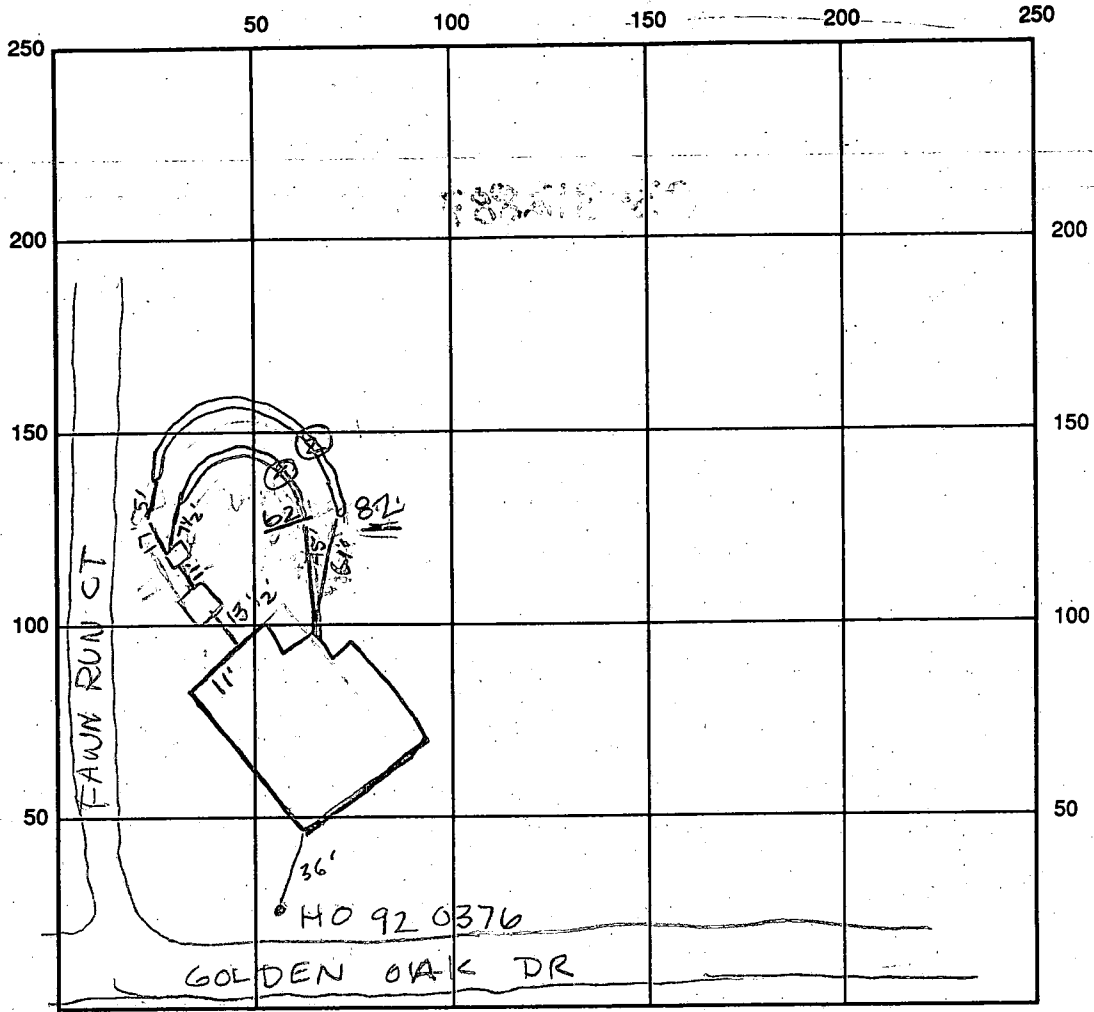
PERMIT VOID AFTER TWO YEARS

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 PVA 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 APPROVAL ON THIS PERMIT**

A 38493



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1500 gal ✓ CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 82' FT. Total 144

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS: 9/2/93 Septic tank level ACM/PP band. MSE connection made 9/2/93 9/7/93 Not ready - no inspection ACM First Trench OK to fill, May cover but leave ends open BP 9/8/93
9/9/93 Trench #1 ok to fill ends Trench #2 depth OK. ACM 12:30
2:39 9/9/93 Trench OK to cover. Seal pipes in DB; place baffle in. O.K.P cover final ACM

DATE SYSTEM APPROVED 9/9/93 INSPECTOR Amy McMillan

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Court House Square
 Ellicott City, Md. 21043
 461-9933

New Installation
 Replacement

Receipt # -0-
 Date 8/20/93

Name of Installer Kastner Plg + Htg Inc

Telephone 725-5000

License number 6500

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Hallmark Bldrs Telephone 964-4440

Subdivision Triadelphia Woods Lot # 46 Well tag # -

Site Address 12630 Golden Oaks Dr
Ellicott City, MD 21043

Pump

1. Type
 a. Deep well jet
 b. Shallow well jet
 c. Submersible

Motor

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

Pitless Adapter

1. Make Harvard
 2. Model #
 3. Depth 3ft.

2. Make Gould

3. Model #

4. Capacity 5 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

Tank

1. Capacity 42 gal
 2. Pressure relief valve? yes

Piping

1. Type #160
 2. Size 1"
 3. NSF and/or BOCA Code approved yes
 4. Depth of supply line 3ft.

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: [Signature]

Date: 8-19-93

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

APPLICATION

A1101

HOWARD COUNTY

\$25

SERIAL NUMBER

49078

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

218402

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

12600 Golden Crest Circle
Ellicott City, MD 21045

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

MITIGATED - 2 story full BA cement block
2 bedrooms 1 1/2 bath fireplace garage
(11/20/93)

| LOT NO. | PARCEL NO. | SEC. | AREA | BLOCK NO. | LIBER | FOLIO |
|-------------------|------------|------|----------|-------------|------------|-------|
| 46 | 528 | 1 | 2 | 5 | - | - |
| SUB DIVISION | | ZONE | ZONE MAP | ELEC. DIST. | CENSUS TR. | |
| Trapezoidal Woods | | RR | 22 | 301 | 6030 | |

OWNER NAME AND ADDRESS
Mr and Mrs. Joe Valdes
8108 Jandy Avenue
Columbia, Md 21023
PHONE NO. (301) 792-4180

OCCUPANT'S NAME AND ADDRESS
Joe Valdes
PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
William D. ...
Columbia, Md 21045
PHONE NO. (410) 485-1055

CONTRACTOR'S NAME AND ADDRESS
Hallmark Builders
Columbia, Md 21041
PHONE NO. (410) 701-1116

| SIZE OF BLDG. | FRONT | DEPTH | HEIGHT |
|---------------|-------|-------|--------|
| 1 | 57' | 41' | 11' |
| 2 | 57' | 41' | 11' |
| 10 | 57' | 41' | 11' |

| TYPE OF BLDG. | AREA | VOLUME | ROOF |
|---------------|-------|--------|----------|
| B. ROOMS | 2163 | 2379 | Asph/Flt |
| ROOMS | 5727 | | |
| BATHS | 1883 | 20713 | Asph/Flt |
| FIREPLACES | 11021 | 11021 | Asph/Flt |

| FOOTINGS | FOUNDATION | S. WALLS |
|----------|------------|----------|
| 20" x 8" | 12" CMU | 12" CMU |
| 20" x 8" | 12" CMU | 12" CMU |

| UTILITIES | | | | |
|-----------|--------------|-----|-------------|--------------|
| WATERWELL | SEWER/SEPTIC | GAS | ELECTRICITY | TYPE OF HEAT |
| | | | | GAS |
| | | | | AC |

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

EXISTING USE: Vacant lot
PROPOSED USE: single family dwelling

EST. CONSTRUCTION COST: 100,000
LICENSE NUMBER: _____
PERMIT FEE: _____

SIGNATURE: [Signature]
TITLE: [Title]
DATE: 6/9/93

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM RW LINE TO FRONT BUILDING LINE _____
SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE) _____
TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET _____
BACK (CORNER LOT ONLY) _____
SDP # _____

| FUNCTION | DATE | SIGNATURE APPROVAL |
|-------------------|---------|--------------------|
| ZONING/PLANNING | X | |
| SHA | X | |
| SEDIMENT/GRADING | | |
| BUILDING OFFICIAL | X | |
| WATER & SEWER | | |
| HEALTH DEPT. | 6/14/93 | B. Hodger |
| FIRE PROTECTION | | |
| STORM WATER MGM. | | |

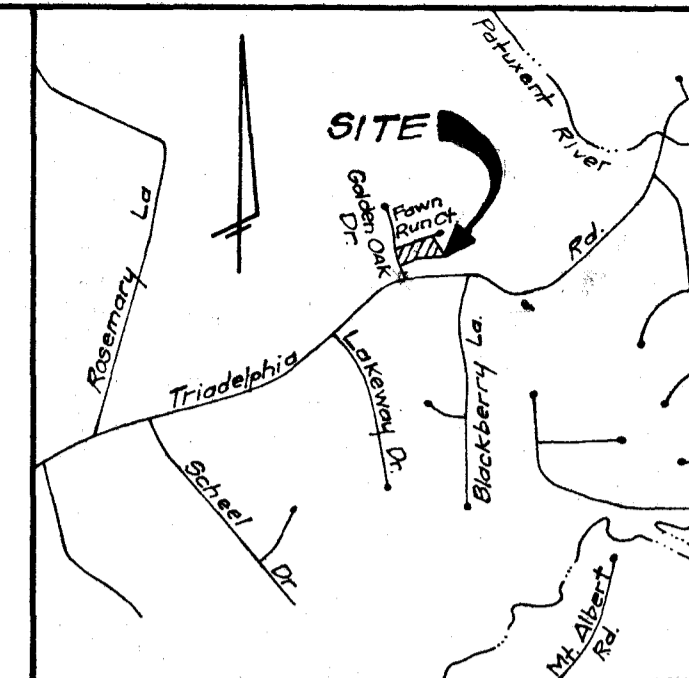
Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
To be placed in position before a permit is issued and has been issued and displays the job is a violation of the law.
Use and occupancy permit must be applied for 10 weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

APPROVED _____ DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.



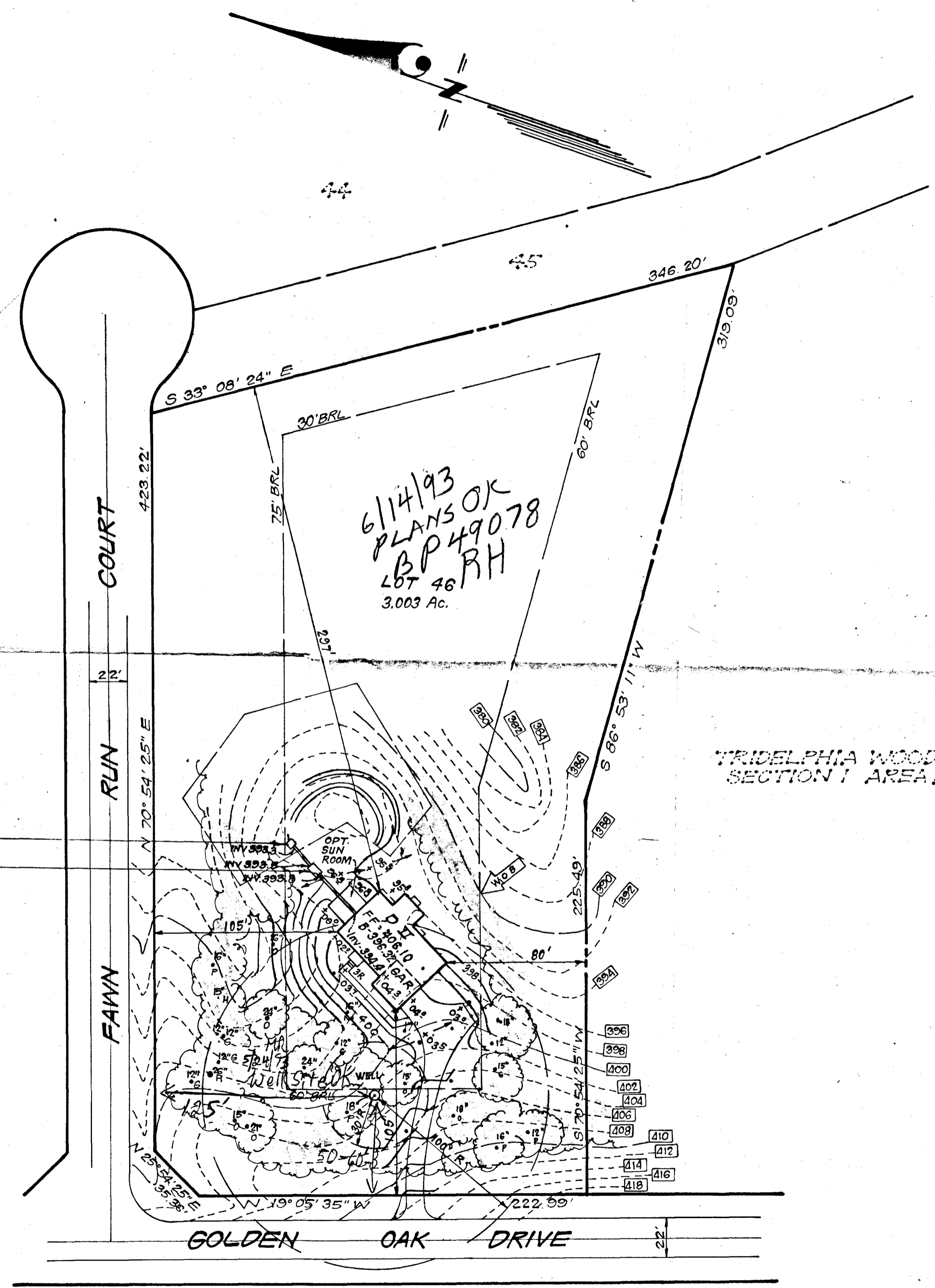
VICINITY MAP
Scale: 1" = 2000'

LEGEND

- Contour Interval 2 Ft
- Existing Contour 380
- Proposed Contour 380
- Spot Elevation \pm 80%
- Direction of Drainage

GENERAL NOTES


1. Reference Plat Number 7740.
2. Subject property is zoned R.
3. Length of trench to be determined at time of permit issuance
4. Basement will not sewer by gravity



Distribution Box
Ex Grd. 396.3
Invert El. 393.3
1250 Gal. Septic
Tank. Ex. Grd. 396.0

TRIDELPHIA WOODS
SECTION 1 AREA 1

4 Bedrooms

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
|  CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (410) 621-8100 - WASH. | | |
| DESIGNED JME | SITE DEVELOPMENT PLAN LOT 46 TRIDELPHIA WOODS SECTION 1 AREA 2 3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND | SCALE 1" = 50' |
| DRAWN BAL | | DRAWING 1 OF 1 |
| CHECKED JME | | JOB NO. 93-006 |
| DATE Jan. 1993 | FOR: JOSE VALDERAS 8408 Jandy Avenue Laurel, Md. 20723 | FILE NO. 93-006X |

APPLICATION

PERCOLATION TESTING

A 38493

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 3

DATE 10/20/86

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 ~~Puterbaugh Land Co., Inc.~~ Mr & Mrs. Jose Valderas

ADDRESS _____ PHONE 331-5538

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Triadelphia Woods LOT NO. 2644 ^{LOT 46 Prelim.} 629

ROAD AND DESCRIPTION Triadelphia Rd. on right 1/2 mile west of Carroll Mill Rd. (12630 Golden Oak Drive)

TAX MAP 02 PARCEL # 528

SIZE OF LOT 3+ Acre TYPE BLDG. _____
(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.

[Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

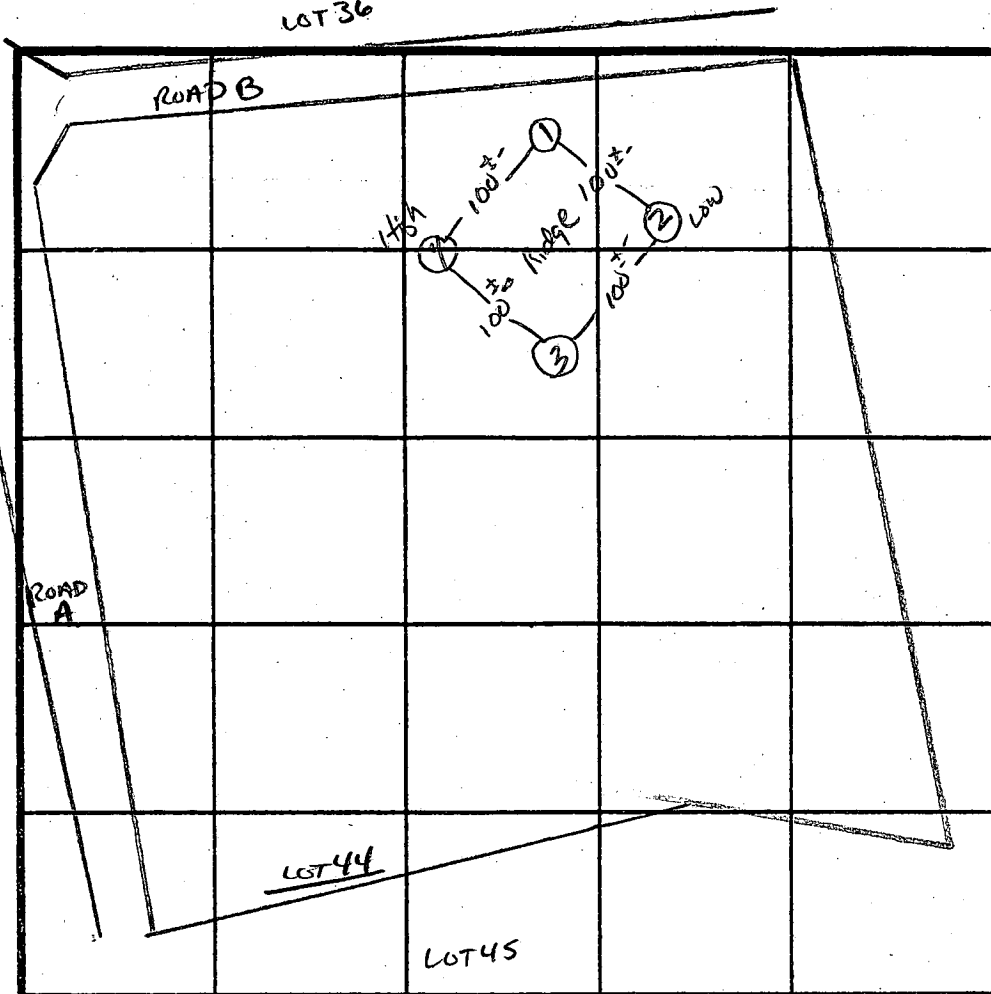
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-13-87 lue satisfactory; hold for subdivision plat. S.A.H.L.

BLDG. PERMIT ~~SIGNED~~
AND RETURNED 6/14/83
Health # 49078-
SFD - 4 Bedrooms

THIS IS NOT A PERMIT

LOT 36



① SOIL PROFILE

| | |
|----|-------------------------------------------------------------------------------------------------------------|
| 0' | A1-3 |
| 4' | Yellow BR Silt LOAM 9-12% CLAY 10-15% FRAGS |
| 3' | Yellow BR Silty SAND LOAM Highly micaceous 20-25% FRAGS hole 1+3+4 30-35% hole 2 |

PERC 3min
160 PSI
INLET 3'
BOTTOM 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

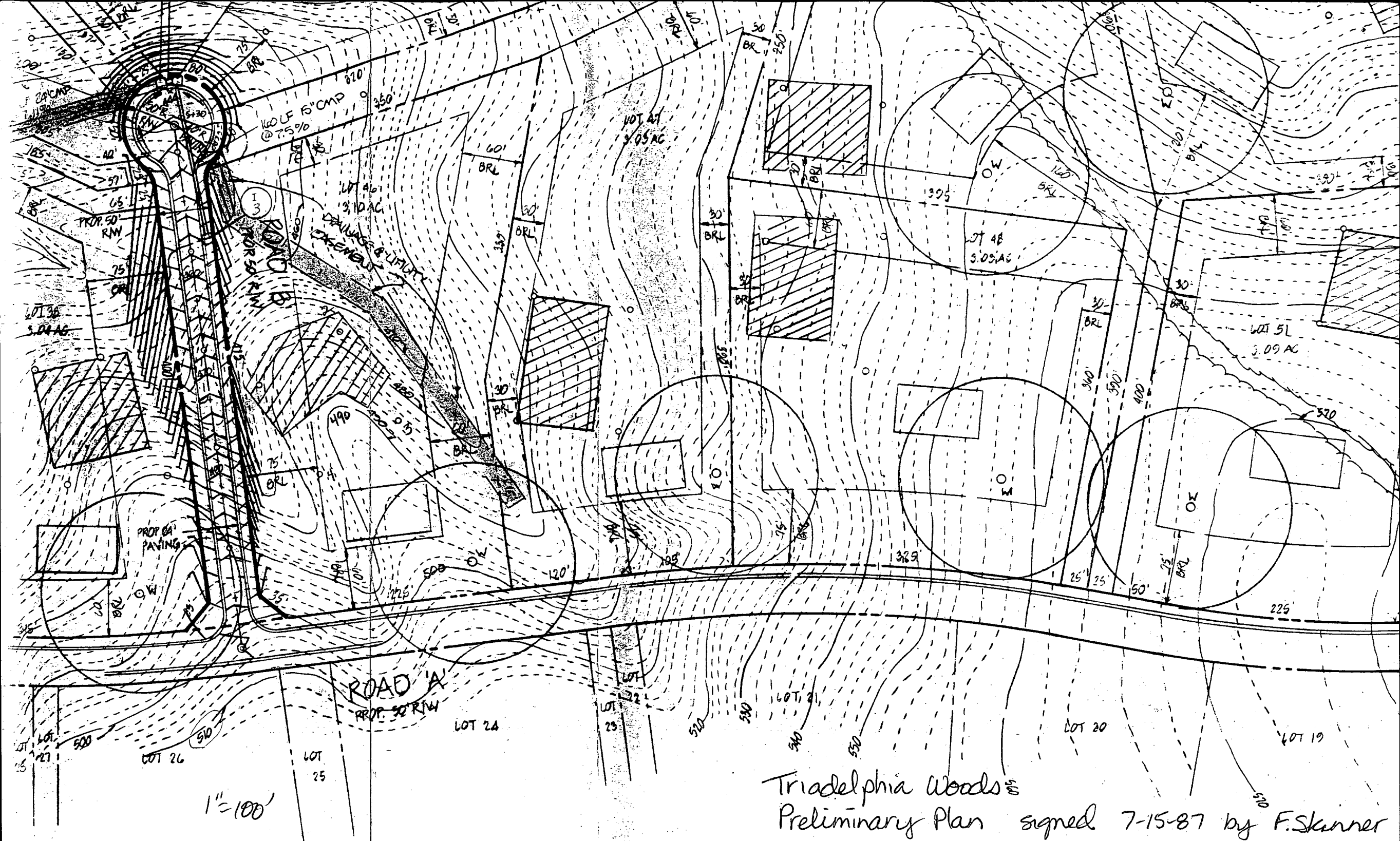
↓ TO TRIADOLPHIA DEL.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|-------|-----------------------|-------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 2/13/87 | 4 S | 3.5' | 11:40 | 11:42 | 11:42 | 11:45 | 3min |
| | | 7.5' | 11:41 | 11:42 | 11:42 | 11:44 | 2min |
| | 4 V | 12' | UNIFORM soil below 3' | | | | |
| | 1 V | 12.5' | UNIFORM soil below 3' | | | | |
| | 2 S | | 11:54 | 11:56 | 11:56 | 11:59 | 3min |
| | 2 V | 12' | UNIFORM soil below 3' | | | | |
| | 3 S | 3.5' | 11:50 | 11:52 | 11:52 | 11:55 | 3min |
| | 3 V | 12' | UNIFORM soil below 3' | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS Perced Per PLAT

TYPE OF SOIL MANOR

TESTED BY S. Abel ALSO PRESENT Neil, Richard, Jim, self



Triadelphia Woods
 Preliminary Plan signed 7-15-87 by F. Skinner

C1 **7886** SEQUENCE NO. (DENV USE ONLY)
 1 2 3 6
 (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 MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A38493**

ST/CO. USE ONLY DATE Received [] [] [] [] DATE WELL COMPLETED **060493** Depth of Well **400** PERMIT NO. FROM "PERMIT TO DRILL WELL" **NO-92-0376**

OWNER **Hallmark Builders** last name first name
 STREET OR RFD **Golden Oak Dr** TOWN **W Friendship**
 SUBDIVISION **TRIADELPHIA WOODS** SECTION **SECTION** LOT **46**

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 | |
| Top Soil | 0 | 2 | |
| Brown shale | 2 | 15 | |
| Brown mica | 15 | 35 | ✓ |
| Sand stone | 35 | 43 | |
| Gray mica | 43 | 60 | |
| Brown mica | 60 | 61 | ✓ |
| Gray mica | 61 | 83 | ✓ |
| Brown mica | 80 | 83 | |
| Gray mica | 83 | 105 | |
| Brown mica | 103 | 106 | |
| Gray mica | 106 | 400 | |

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** YES **N** NO
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **15** NO. OF POUNDS **500**
 GALLONS OF WATER **15**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **30** ft.

CASING RECORD
 casing types insert appropriate code below
ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER
 MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
ST **6** **#4**

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** OPEN HOLE
PL PLASTIC **OT** OTHER

C2
 DEPTH (nearest ft.)
 1 **HO** **72** **900**
 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

OEP 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

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **6**
 PUMPING RATE (gal. per min. to nearest gal.) **11**
 METHOD USED TO MEASURE PUMPING RATE **Buck**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **9** WHEN PUMPING **141**
 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 (CIRCLE) (YES) (NO) **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) **31** **35**
 PUMP HORSE POWER **37** **41**
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**
 CASING HEIGHT (circle appropriate box and enter casing height) **+** above **-** below } LAND SURFACE (nearest foot) **2**

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)

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 IDENT. NO. **40**
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) **Bruce Simpson**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

9:15
 6-4-93

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 92-0376
 Location of property (road) Golden Oak Dr
 Subdivision TRIA WOODS Lot 46 Block _____ Plat _____ Sec. _____
 Well Driller Easterday Owner Hallmark Builders

Depth of well 400 16pm
 Distance of measuring point (M.P.) above ground 2
 Static water level (S.W.L.) below M.P. 9

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 12 - 2 P.M.
 Total time 30 min to reach pumping water level 141 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 gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) |
|-------------------------------|------------------------|-----------------------------------------|------------------------------|--------------------------------------|
| 8:30 | 141 | 60 sec | Pump Set/250' | 1 |
| 8:45 | 141 | 60 sec | | 1 |
| 9:00 | 141 | 60 sec | Jet Disturb | 1 |
| 9:15 | 141 | 60 sec | | 1 |
| 9:30 | 141 | 60 sec | | 1 |
| 9:45 | 141 | 60 sec | | 1 |
| 10:00 | 141 | 60 sec | | 1 |
| 10:15 | 141 | 60 sec | | 1 |
| 10:30 | 141 | 60 sec | | 1 |
| 10:45 | 141 | 60 sec | | 1 |
| 11:00 | 141 | 60 sec | | 1 |
| 11:15 | 141 | 60 sec | | 1 |
| 11:30 | 141 | 60 sec | | 1 |
| 11:45 | 141 | 60 sec | | 1 |
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| 12:30 | 141 | 60 sec | | 1 |
| 12:45 | 141 | 60 sec | | 1 |
| 1:00 | 141 | 60 sec | | 1 |
| 1:15 | 141 | 60 sec | | 1 |
| 1:30 | 141 | 60 sec | | 1 |
| 1:45 | 141 | 60 sec | | 1 |
| 2:00 | 141 | 60 sec | | 1 |
| 2:15 | 141 | 60 sec | | 1 |
| 2:30 | 141 | 60 sec | | 1 |

B 1 05445

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

70 fill in this form completely 78 HD-92-0376

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

OWNER INFORMATION: Date Received (APA) 051293, Last Name HALLMARK, Owner BLDS, First Name, Street or RFD COLUMBIA, Town MD, State 21, Zip 644

LOCATION OF WELL: 8 COUNTY HOWARD, 23 SUBDIVISION TRI DELPHIC WOODS, SECTION 1, LOT 46, 52 NEAREST TOWN WEST FRIENDSHIP, MILES FROM TOWN 2 MI

DRILLER INFORMATION: George F. Easterday, L. Franklin Easterday, Inc., Firm Name Brown Church Rd., MT. Airy, Md. 21771, Address, Signature, Date 5-11-93

DIRECTION OF WELL FROM TOWN (CIRCLE BOX) S, NEAR WHAT ROAD Golden Oak Dr., ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST, DISTANCE FROM ROAD 75 FT

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, A38493, STATE SIGNATURE Mark E. Riffin, DATE ISSUED 5/27/94, NORTH GRID 527000, EAST GRID 0814000

USE FOR WATER (CIRCLE APPROPRIATE BOX): D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY), F FARMING, I INDUSTRIAL, P PUBLIC OR PRIVATE WATER COMPANY, T TEST, OBSERVATION, MONITORING

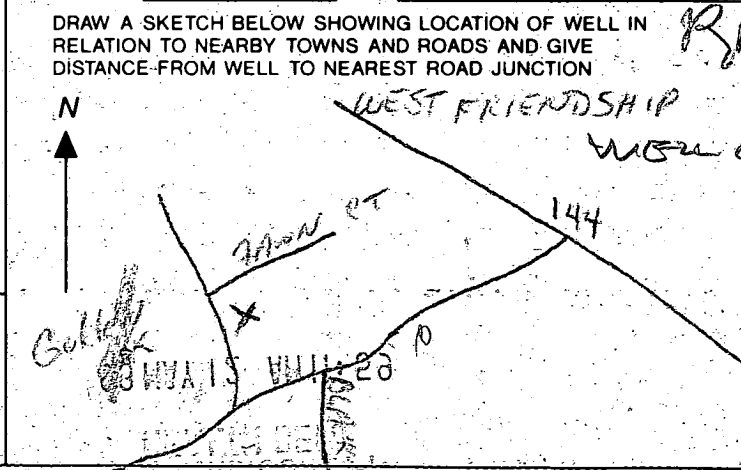
APPROXIMATE DEPTH OF WELL 200 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH, NEAREST TOWN

METHOD OF DRILLING (circle one): BORED (or Augered) AIR-ROTary, AIR-PERcussion, CABLE, JETTED, ROTARY (Hydraulic Rotary), Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): N THIS WELL WILL NOT REPLACE AN EXISTING WELL, Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED, S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY, D THIS WELL WILL DEEPEM AN EXISTING WELL

Not to be filled in by driller. (OEP USE ONLY): APPROX. PERMIT NUMBER GAP, FORCE MK, PERMIT No. HD-93-0376

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X: 6/4/93 815, 44 FT CASING, 30' OPEN HOLE, 15 BAGS CEMENT ARRIVED AFTER GROUT TALKED TO JOBS



SPECIAL CONDITIONS