

Tap ID - 03-314898

5/2/93
7/2/93

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48893

A 39052

DISTRICT 3rd

DATE 7/1/93

DATE SYSTEM APPROVED 7/2/93

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXX-XXXX~~ 313-2640

INDEXED

Paul Schissler/South Carroll Backhoe IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Amberwoods LOT 18 ROAD 12806 Forest View Court

PROPERTY OWNER Grayson Homes, Inc. Peter Konold

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS TOP SEAMED TANK

NUMBER OF BEDROOMS 4

220 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 220

TRENCHES - Trench to be 2 feet wide. Inlet 2½ feet below original grade. Bottom maximum depth 6½ feet below original grade. Effective area begins at 2½ feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 30 feet from front lot line and 110 feet from the right lot line. Run trenches along contour toward right lot line.

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

PLANS APPROVED BY C. Williams DATE 1/26/93

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

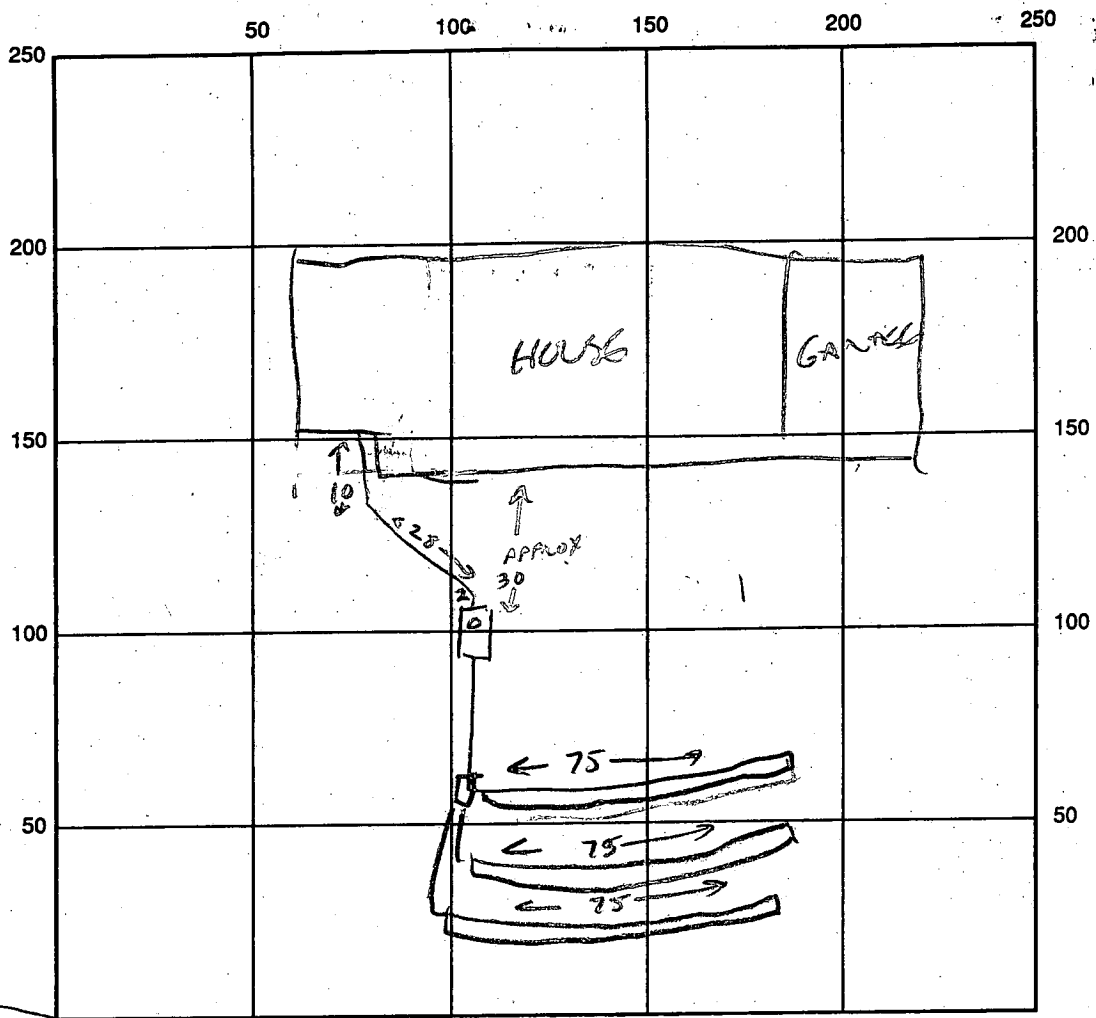
BLDG. PERMIT SIGNED

AND RETURNED 3/22/95

Serial # 58579

du

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



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 FOREST U162 ET

SEPTIC TANK LEVEL 15006 TOP 56AM ✓ CLEANOUTS 51 ✓

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TITLE DEPTH 6 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 2 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 225 FT.

NUMBER OF TRENCHES 3 @ 75' ONE SIDEWALL/BOTTOM AREA 900 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 5/3/93 TANK, DIST. BOX & TRENCHES OK TO COVER
HOUSE CONNECTION NEEDED, (CW)
7/22/93 HOUSE CONNECTION COMPLETE - OK TO COVER CW

DATE SYSTEM APPROVED 7/22/93 INSPECTOR Cwellman

12/15/92

APPLICATION

PERCOLATION TESTING

A 39052

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

NO FEE RE TEST
REQUESTED BY HEALTH DEPT
TO CONFIRM/ADJUST
PREVIOUSLY PLATTED
SEPTIC AREA

DISTRICT _____

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 GRAYSON HOMES

ADDRESS _____ PHONE 461-5900

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION AMBERWOODS LOT NO. 18

ROAD AND DESCRIPTION 12806 FORESTVIEW CT

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3+ ACRES TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 01/27/93
Serial # 47005-SFD
Bedroom

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 OF APPLICANT) (REDS FOR GRAYSON HOMES) (EW)

APPROVED BY C. Willian FOR TROUCHES DATE 1/27/93

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # REVISED PLAT OK DATE 12/28/92

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

THIS IS NOT A PERMIT

A 39052

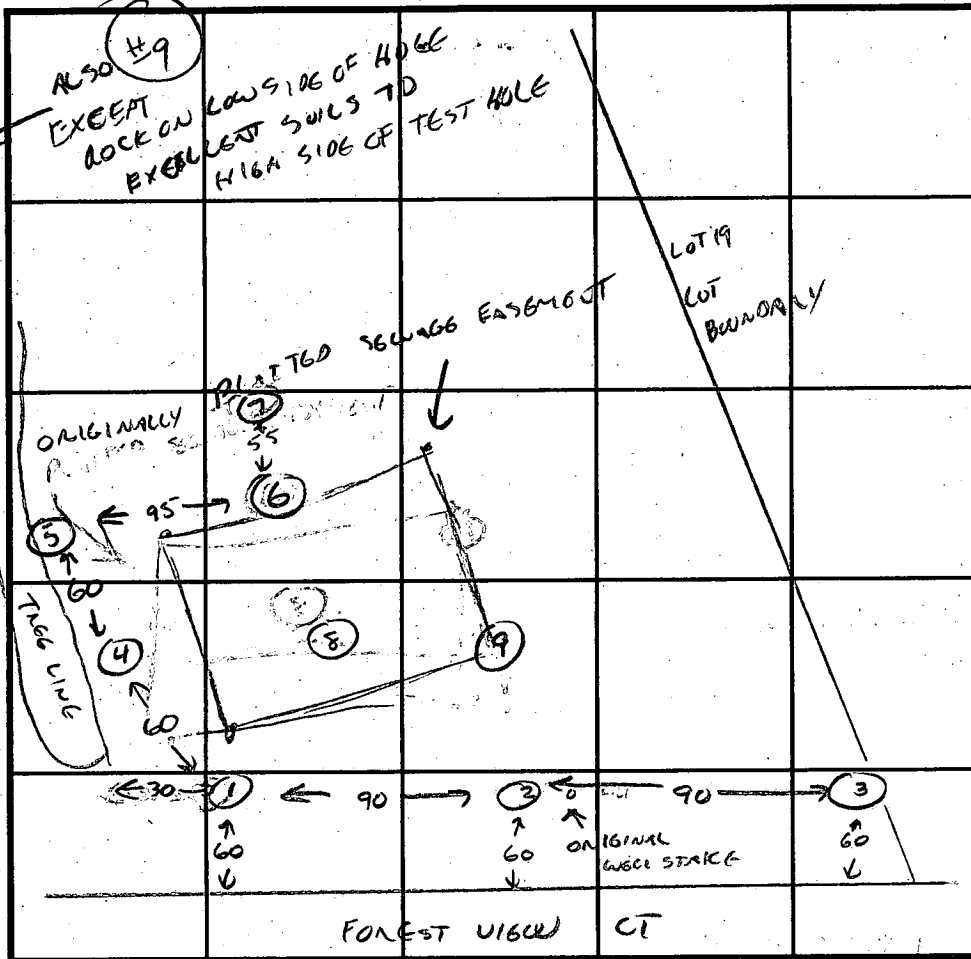
COUNTY #

SOIL PROFILE

CLAY
3'
CLAY
LOAM
MIXED
6'
SAND
LOAM
12'
HAND BOTTOM

TOPSOIL
2'
SAND
LOAM

CLAY
3'
CLAY
LOAM
MIX
5'
SAND
LOAM
8'
LOAM,
ROCK
VEIN,
DIGGABLE
13'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

CLAY
3'
CLAY
LOAM
MIX
7'
LOAM,
SEWAGE
ROCK
ROCKETS
12'
WATER

FAIL
SEWAGE
ROCK AT 3-5'
#7 HAS WATER
AT 8'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/15/92	1	VIS	OK	3-12'	SEE TEST	20 E 4/87	EST 3-4 MIN ✓	
	2	VIS	OK	2-13'	SEE TEST	20 E 4/87	3-4 MIN ✓	
	3	VIS	OK	2-13'	SAME AS TEST 2		✓	
	4	MARGINAL FOR SHALLOW SYSTEM						X
	5	ROCK	AT 7'				X	
	6	ROCK	AT 3'				X	
	7	ROCK	AT 5'				X	
	8	VIS	OK	3-12'	SAME AS TEST 1		✓	
	9	FAILS	ROCK ON LOW SIDE BUT OK TO HIGH SIDE					✓
			PROVIDE 25" SAFE RADIUS TO THIS HOLE					✓

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____

ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____

TRENCH WIDTH _____

INLET DEPTH _____

MAXIMUM BOTTOM DEPTH _____

SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 39052

P _____

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

DISTRICT 3

DATE 3/4/87

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 George Arrington

ADDRESS 1050 Sykesville Rd. West Friendship MD PHONE 301-776-7454

PROSPECTIVE BUYER Amberwoods Limited Partnership

ADDRESS 420 Fenwick Lane Silver Spring MD PHONE 301-587-5455

PROPERTY LOCATION:

SUBDIVISION Amberwoods (S-87-42) LOT NO. 20 NW 18

ROAD AND DESCRIPTION RT 32 north of RT 99

TAX MAP 9 PARCEL # 144

SIZE OF LOT 3.0 Ac. TYPE BLDG. Single Family
(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. Sam Negalle
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

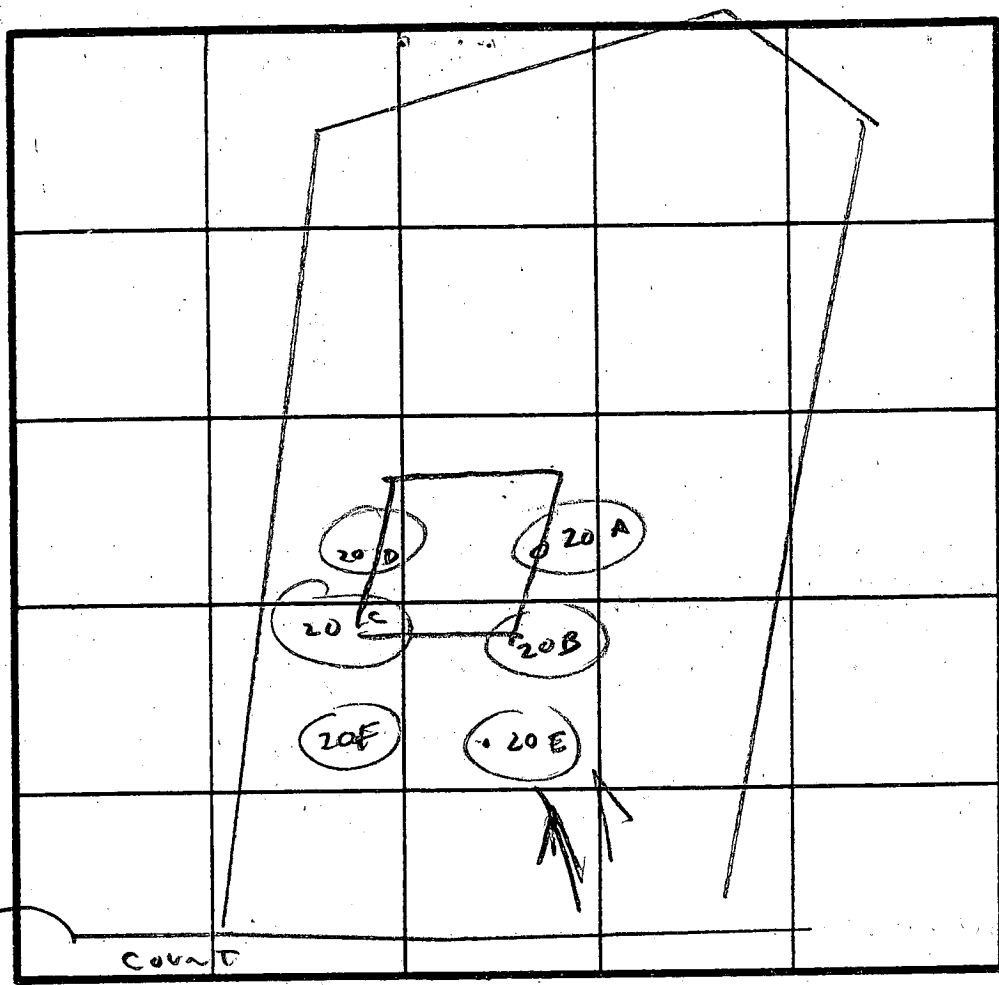
REASONS FOR REJECTION OR HOLDING _____

Handwritten notes:
566 notes of 12/15/92
5015 BUT PLATTED
no connection
[Signature]

THIS IS NOT A PERMIT

20A
CLAY
ROCK

20B SOIL PROFILE
0
CLAY
3'
CLAY SAND LOAM
10-20% ROCK
12



20B&F
CLAY
3'
CLAY SAND LOAM
7'
SAND LOAM
10% ROCK
12' ROCK BOTTOM

20C
SIMILAR TO B&F
12' SLIGHTLY MOIST

20D
3'
CLAY
MIXED CLAY LOAM
8'
50% ROCK
9'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

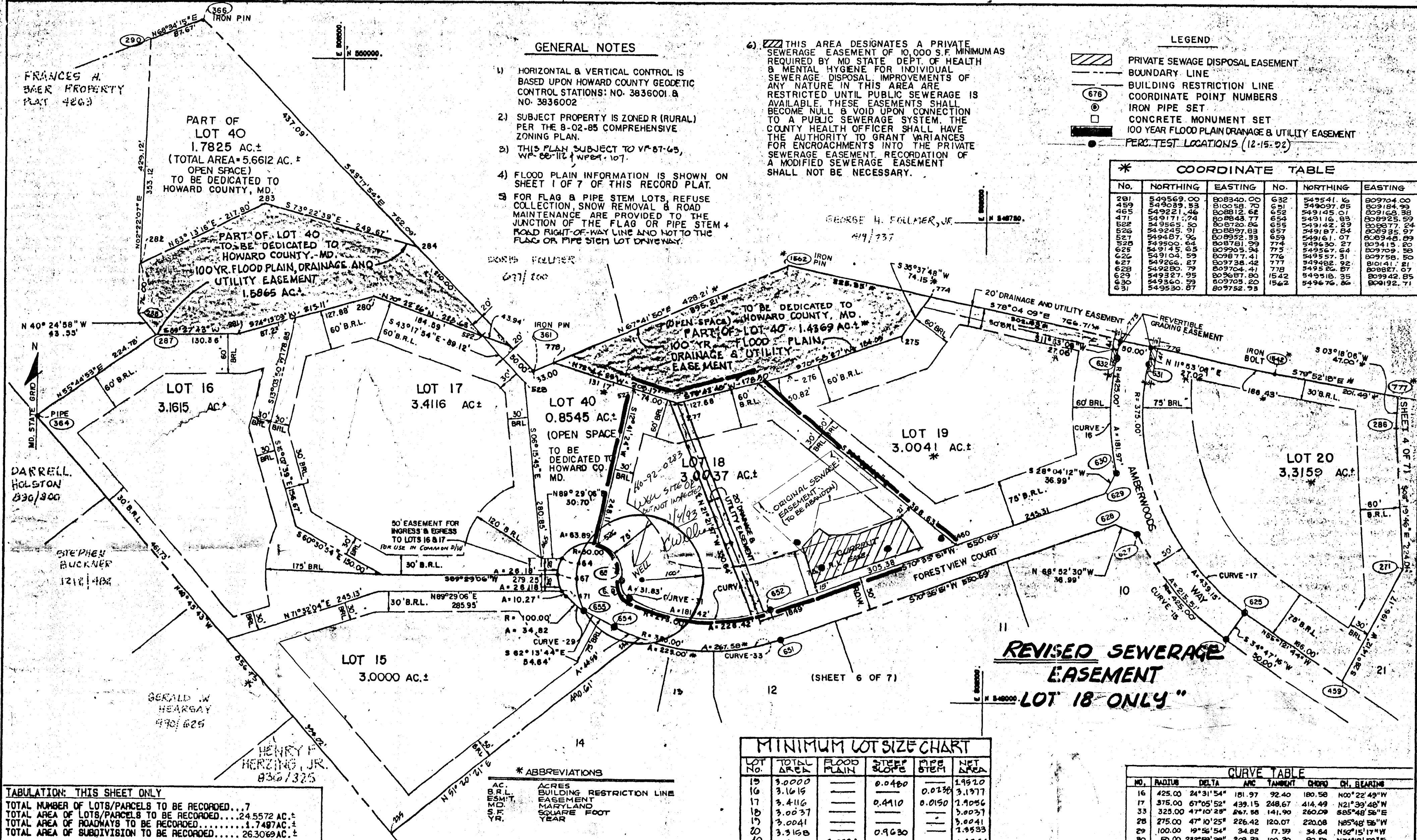
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/13/87	20 A	4'	ROCK				X	
	20 B	3' 8'	3:03 VLS OK	3:06	3:06	3:10	4 MIN	
		12'	VLS OK				OK	
	20 C	3-13'	VLS OK, LOAM		MOIST	AT 12'	OK	
	20 D	MADE DUG WELL 50' ROCK 8', 1/2 WAY		FROM ST REC 9'				X
	20 E	3' 8'	2:51 2:58	2:53	2:53	2:57 2:56	4 MIN 3 MIN	
	20 F	12'	VLS OK				OK	
	20 F	2-12'	VLS OK				OK	

X = 4 MIN
180 G
INLET 3'
BOTTOM 7'

REMARKS NOT DUG AS STAKED
TYPE OF SOIL SILT SAND LOAM - WATER TABLE ON LOW SIDE OF LOT
TESTED BY C. W. ... ALSO PRESENT SKIP

WELL SITE INSP 12/19/92 RAISED CONCERN SEPTIC AREA MAY BE PLATTED INCORRECTLY - BEST OF 12/15 CONFIRMS PROBLEM SEE NEXT STREET

EH-12-1079



TABULATION: THIS SHEET ONLY

TOTAL NUMBER OF LOTS/PARCELS TO BE RECORDED...7
 TOTAL AREA OF LOTS/PARCELS TO BE RECORDED...24,552 AC.±
 TOTAL AREA OF ROADWAYS TO BE RECORDED...1,749 AC.±
 TOTAL AREA OF SUBDIVISION TO BE RECORDED...26,301 AC.±

APPROVED: FOR PRIVATE WATER & PRIVATE SEWERAGE SYSTEMS. IN CONFORMANCE WITH THE MASTER PLAN OF WATER AND SEWERAGE FOR HOWARD COUNTY. (REVISED) (LOCATION) (DATE)

Joyce M. Bond 1/13/93
 HOWARD COUNTY HEALTH OFFICER (CW) DATE

APPROVED: HOWARD COUNTY DEPT. OF PLANNING AND ZONING.

 DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND ROADS. HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.

 DIRECTOR DATE

SURVEYOR'S CERTIFICATE *

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT THAT IT IS A SUBDIVISION OF ALL THE LANDS CONVEYED BY N.V. LAND, INC. TO GRAYSON AMBERWOODS LIMITED PARTNERSHIP, BY A DEED DATED JUNE 1, 1989 AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 2003 AT FOLIO 582, AND THAT ALL MONUMENTS ARE IN PLACE OR WILL BE IN PLACE PRIOR TO ACCEPTANCE OF THE STREETS IN THE SUBDIVISION BY HOWARD COUNTY, AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED, ALSO BEING LOTS 1 THROUGH 42 SECTION ONE, SHEET 7 OF 7, AMBERWOODS, RECORDED 5-26-89 AS PLAT NO. 8650.

 DATE

COMPUTED BY: A.F.N. DRAWN BY: C.L.D. CHECKED BY: JAM DATE 16-18-90

OWNER'S CERTIFICATE *

WE, GRAYSON AMBERWOODS LIMITED PARTNERSHIP, BY FLOYD E. GRAYSON, PRESIDENT, OWNERS OF THE PROPERTY AMBERWOODS, SHOWN AND DESCRIBED HEREON, HEREBY ACCEPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAN BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND PRINT UPON HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS: (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN sewers, drains, pipes and other municipal utilities and services, in and under all roads and street rights-of-way and the specific easements shown hereon; (2) the right to require dedication for public use the beds of the streets and/or roads, and floodplains and open space where applicable and for good and other valuable consideration, hereby grant the right and option to Howard County to acquire the fee simple title to the beds of the streets and/or roads and floodplains, storm drainage facilities and open space where applicable; and (3) the right to require dedication of waterways and drainage easements or the specific purpose of their construction, repair and maintenance; and (4) that no building or similar structure of any kind shall be erected on or over the said easements and rights-of-way.

Witness Our Hands this 5th Day of JAN. 1993

 GRAYSON AMBERWOODS LIMITED PARTNERSHIP *
 By: *Floyd E. Grayson* 1/5/93
 Attest: *Barbara J. Grayson* 1/5/93
 BARBARA J. GRAYSON

RECORDED AS PLAT NO. 8650 ON 5-26-89 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND

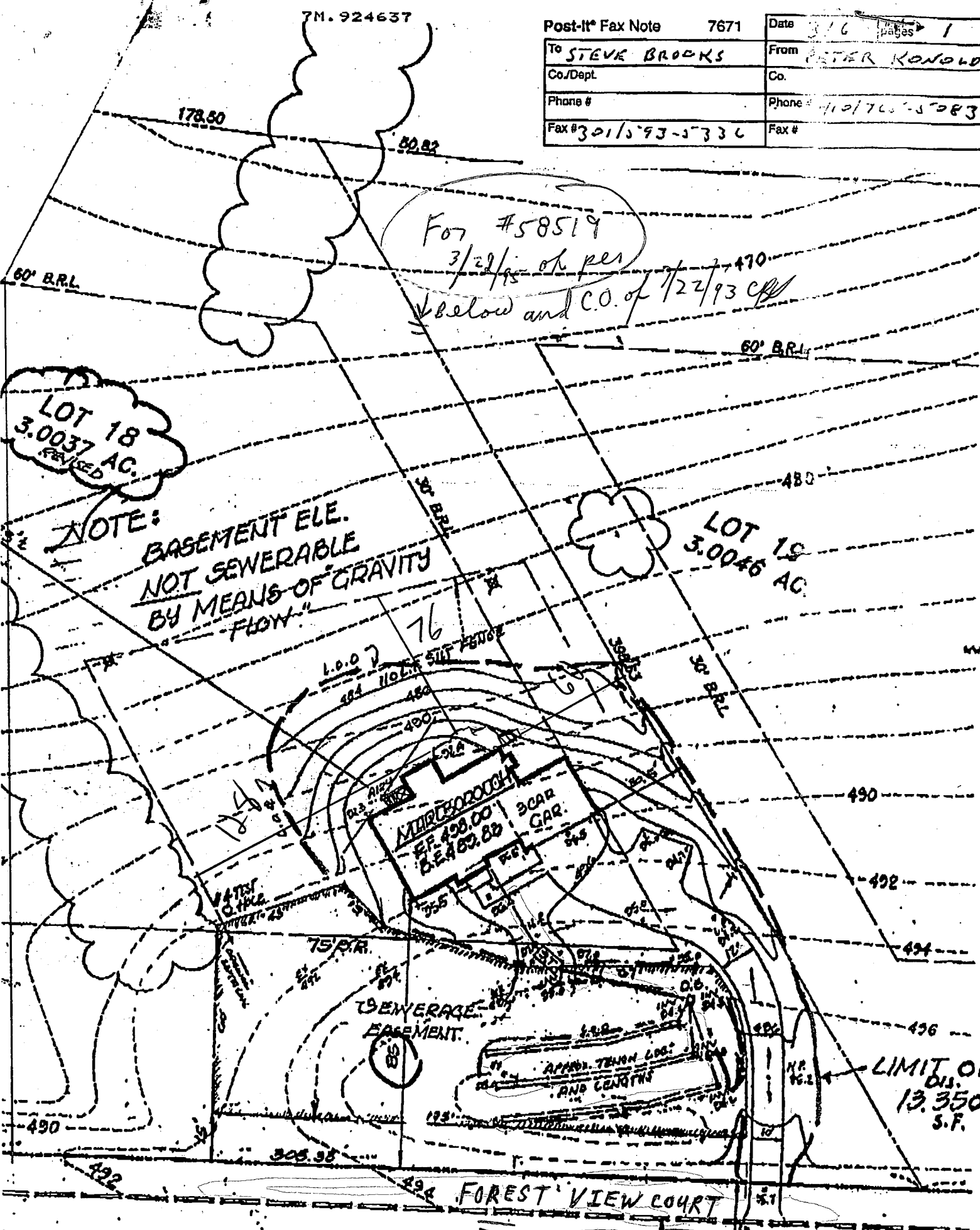
AMBERWOODS
 * PLAT OF CORRECTION
 SECTION ONE LOT 18 ONLY
 TAX MAP NO. 9 PARCEL NO. 4 & 144
 SHEET 7 OF 7
 3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1"=100' JUNE, 1990
 DEPT. OF PLANNING & ZONING P-87-88, SBT-42, WPT-65, WFB-112, WPD-107

LAND DESIGN ASSOCIATES
 *718 HIGHWOOD DRIVE
 BALTIMORE, MD. 21212 410-323-6344

1260

7M. 924637

Post-It® Fax Note	7671	Date	3/6 pages 1
To	STEVE BROOKS	From	PETER KONOLD
Co./Dept.		Co.	
Phone #		Phone #	410/765-5283
Fax #	301/593-5336	Fax #	



LOT 18
3.0037 AC.
REVISED

NOTE:
BASEMENT ELE.
NOT SEWERABLE
BY MEANS OF GRAVITY
FLOW

For #58519
3/29/95 ok per
below and C.O. of 7/22/93 C/P

LOT 19
3.0046 AC

LIMIT OF DIS.
13.350
S.F.

FOREST VIEW COURT

B 1 01521

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO- - - - - fill in this form completely

Date Received (APA)

Grid for date received

OWNER INFORMATION

Owner: Grayson Amberwoods, Street: Centre Park Drive, Town: Columbia, MD 21045

B 3

LOCATION OF WELL

Location: Howard County, Subdivision: Amberwoods, Section: 44, Lot: 18, Nearest Town: Sykesville, 2 MI from town

DRILLER INFORMATION

Driller: Paul M. Fabiszak, License No. 399, Firm: G. Edgar Harr Sons' corp., Address: 12047 Falls Rd, Cockeysville 21030, Date: 11/11/92

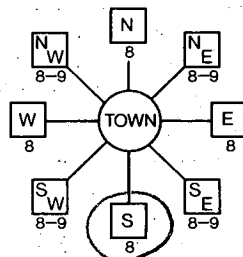
B 2

WELL INFORMATION

Approx. Pumping Rate: 5 GPM, Average Daily Quantity Needed: 750 GAL PER DAY

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



12806 Forest View Ct NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



300 DISTANCE FROM ROAD

ENTER FT OR MI

Distance input box: Ft

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

County Name: Howard, County No: A39052, State Signature: Craig Wilton, Date Issued: 11/4/93, North Grid: 549000, East Grid: 0809000

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T 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

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

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GAP

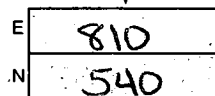
FORCE CW PERMIT No. HO-92-0283

SPECIAL CONDITIONS

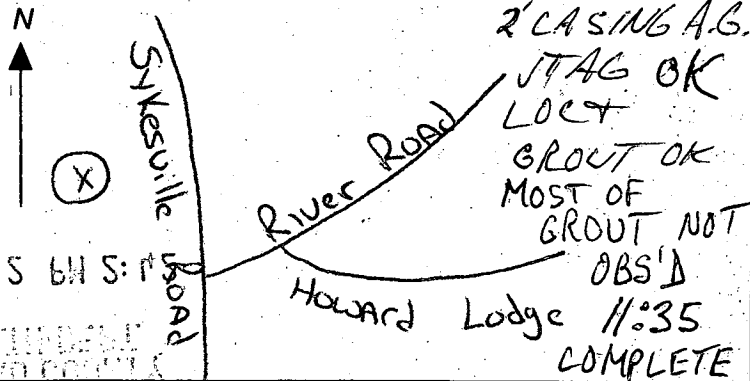
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE



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



C1 7630

SEQUENCE NO. (DENV USE ONLY)

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 A39052

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 2002

22 200 26 (TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37 40-92-0283

OWNER last name first name TOWN SUBDIVISION SECTION LOT

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 entry for Overburden Granite from 0 to 18 and 18 to 200 feet.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from ft. to ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing of main casing (nearest inch) Total depth of main casing (nearest foot)

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

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

DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

CIRCLE APPROPRIATE LETTER 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...

DRILLERS IDENT. NO. 399

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

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 (CIRCLE) (YES OR 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)

