

LAYOUT 9/1/04 12:1 pm INSP 4 _____
INSP 2 9/2/04 INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 8/16/2004

P 520827

APPROVAL DATE: 9/2/04

A 39163

PERMIT INDEXED

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043**

Hatfields Equipment IS PERMITTED TO INSTALL ALTER

ADDRESS: 13785 Burntwoods Rd, Glenelg PHONE NUMBER: 301-854-6172

SUBDIVISION: Waterman Estates LOT NUMBER: 23

ADDRESS: 12443 Petrillo Drive PROPERTY OWNER: Douglas Homes

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 150 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 2.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 3.5 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box about midway between the two highest easement stakes. Run two trenches on contour to right lot line as shown on plan.
NOTES:	

PLANS APPROVED: MER DATE: 6/23/04

NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

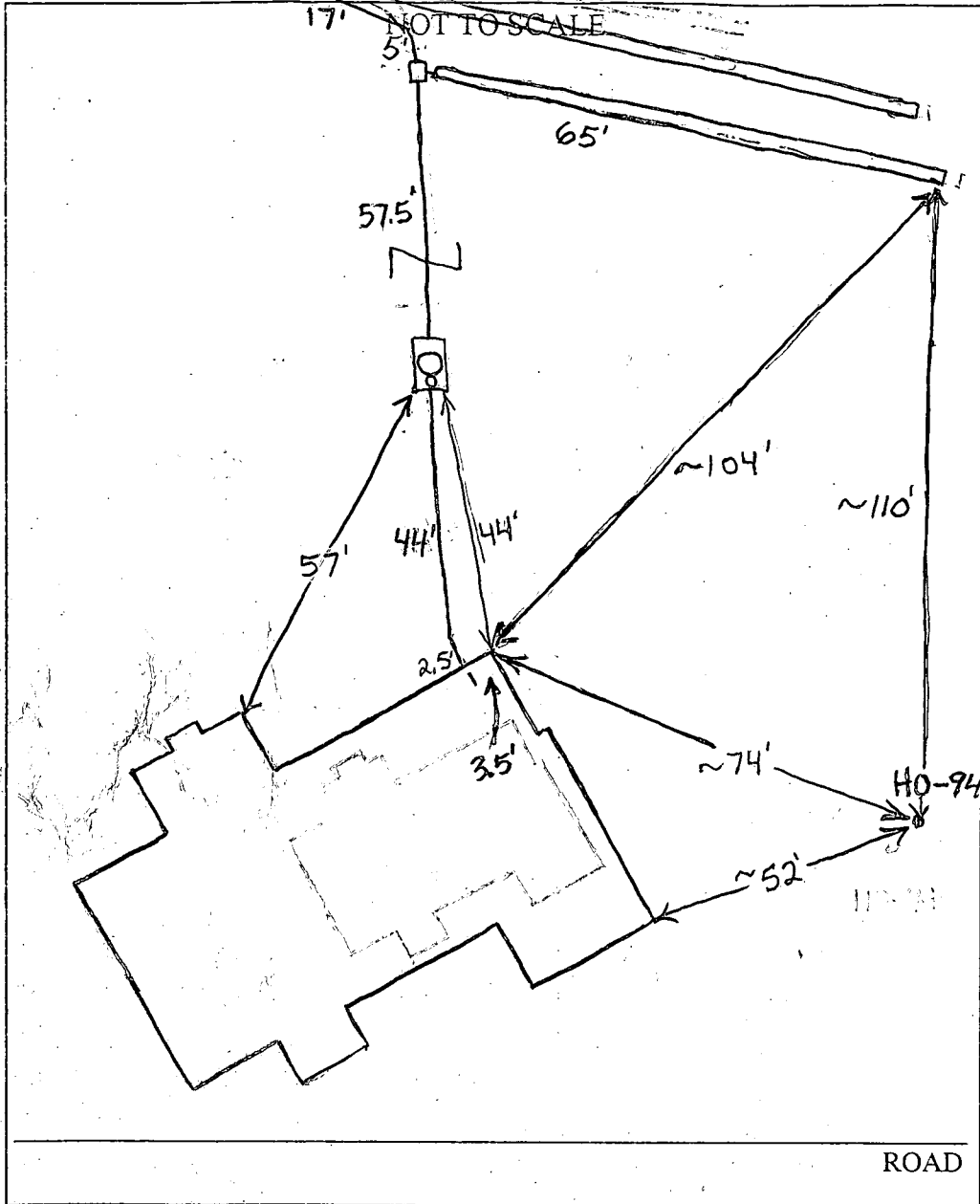
**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

BUILDING PERMITS SIGNED AND RETURNED

3-1605 BOD/SLUTS-IL POOL

A39163



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	3'	7'
NUMBER OF TRENCHES		2
TOTAL LENGTH		151'
ABSORPTION AREA		528 sq ft
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		No

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	~2'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Middle
6" PORT LOC	Front
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	N/A
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION 9/1/04 Tank set. No plumbing installed. Put in system as per B.P. plan. (BB)

INSTALLATION 9/2/04 System installed. Hatfields was concerned about how much usable sidewall that the trenches actually had. The clay may be deeper than the perc notes suggest. O.K. to backfill. (BB)

BUILDING PERMIT SIGNED
AND RETURNED

FINAL INSPECTOR B. Baber DATE OF APPROVAL 9/2/04

10739

Health Dept

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

300/47764

MEP

Building Address 12443 PETRILLO DRIVE
HIGHLAND MD 20777
 Suite/Apt. #: N/A SDP/WP/Petition #: N/A
 Census Tract 605102 Subdivision WATERMAN ESTATES
 Section 2 Area 1 Lot # 23
 Tax Map 40 Parcel 250 Grid 24
 Zoning RRDEO Map Coordinates MAP 18 (803)
E-4 Lot size 3.29AC

Property Owner's Name DOUGLAS HOMES INC.
 Address P.O. BOX 628
 City ELLICOTT CITY State MD Zip Code 21043
 Home Phone _____ Work Phone 410-750-0522
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use VACANT LOT
 Proposed Use SFD
 Estimated Construction Cost \$ 300,000
 Description of Work WESTCHESTER JL 15 RM, 3
FULL BATHS, 1 1/2 BATH, 3 CAR GARAGE, UNFINISHED
BASEMENT, F.P.

Contractor Company SAME
 Contact Person DANA BORG
 Address _____
 City _____ State _____ Zip Code _____
 License No. 327
 Phone 410 750-0522 Fax _____

Occupant or Tenant N/A
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company D.W. Taylor + ASS
 Contact Person MIKE HAMMEL
 Address 5024 DORSEY HALL DRIVE
 City ELLICOTT CITY State MD Zip Code 21092
 Phone 410-964-1181 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: Public _____ Private _____
No. of stories: _____	Sewage Disposal: Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: Public _____ Private <input checked="" type="checkbox"/>
Depth _____ Width _____	Sewage Disposal: Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>46</u> <u>68</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2nd floor: <u>46</u> <u>68</u>	Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Basement: <u>56</u> <u>70</u>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFFPA #13D _____ NFFPA #13R _____ Other: _____
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>4</u>	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
State Certified Modular _____	
Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Dana D Borg
 Applicant's Signature
Project Manager
 Title/Company

DANA D. BORG
 Print Name
7/29/04
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>6/23/04</u>	<u>mark Rife</u>
<input checked="" type="checkbox"/> Fire Protection		

DPZ SETBACK INFORMATION
 Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? YES NO
 Is Entrance Permit required? YES NO
 Historic District? YES NO
 Lot Coverage for New Town Zone _____
 SDP/Red-line approval date _____

PROPERTY ID#: 61849
 Filing fee \$ 100
 Permit fee \$ _____
 Excise tax \$ _____
 Add'l per. fee \$ _____
 TOTAL FEES \$ _____
 Sub-total paid \$ _____
 Balance due \$ _____
 Check # 26165
 Validation # 44329

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

Accepted by [Signature]

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

**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 (All 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
Sylesville, 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# MSP 009

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. License may be subjected to field verification.

Name of Property Owner: Douglas Homes Telephone #: _____
Subdivision: Wardman Estates Lot #: 23 Well Tag #: HO-94-110
Site Address: 12443 Patville Drive

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Condu
Make: <u>Grundfos</u>	Make: <u>Cannibal</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>FT75307422</u>	Model #: <u>N/A</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>7</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: _____ GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>285</u> (feet)		Conduit secured to well cap: <u>yes</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt N/A

Piping to house	House Connection
Type: <u>1" Black Plastic</u>	PVC sleeved to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>5</u>
Depth of supply line: <u>42</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewer piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact the office for approval prior to installation.

Signature of company representative responsible for installation: Allen Compton date: 10-14-04

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

Date Insp. Requested: _____ Date Insp. Approved: 9/2/04 (BB)
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY-SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.

C1 3930	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER <u>A39163</u>	
ST/CO USE ONLY DATE RECEIVED MM/ DD/ YY	DATE WELL COMPLETED MM/ DD/ YY	Depth of Well <u>285</u> (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-94-3710</u>
OWNER <u>DOUGLAS HOMES INC.</u>		TOWN <u>FULTON</u>	
STREET OR RFD <u>12443 PETRILLO DRIVE</u>		SECTION _____ LOT <u>23</u>	
SUBDIVISION <u>(WATERMAN ESTATE)</u>		LOT <u>23</u>	
WELL LOG Not required for driven wells		GROUTING RECORD	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		WELL HAS BEEN GROUTED (Circle Appropriate Box) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Sand	0	76	
Cray Mica Rock	76	285	
TYPE OF GROUTING MATERIAL (Circle one)		NO. OF BAGS <u>25</u> NO. OF POUNDS <u>2350</u>	
CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input checked="" type="checkbox"/>		GALLONS OF WATER <u>150</u>	
DEPTH OF GROUT SEAL (to nearest foot)		DEPTH OF GROUT SEAL (to nearest foot)	
from <u>0</u> ft. to <u>72</u> ft.		from <u>0</u> ft. to <u>72</u> ft.	
(enter 0 if from surface)		(enter 0 if from surface)	
CASING RECORD		CASING RECORD	
casing types insert appropriate code below		ST STEEL CO CONCRETE PL PLASTIC OT OTHER	
MAIN CASING TYPE <u>ST</u>		Nominal diameter of main casing (nearest inch) <u>6</u>	
60-61		Total depth of main casing (nearest foot) <u>79</u>	
63-64		66-70	
OTHER CASING (if used)		OTHER CASING (if used)	
diameter inch		depth (feet) from to	
_____		_____	
SCREEN RECORD		SCREEN RECORD	
screen type or open hole		ST STEEL BR BRASS HO OPEN HOLE PL PLASTIC OT OTHER	
insert appropriate code below		insert appropriate code below	
C2		DEPTH (nearest ft.)	
NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>		1 <u>40</u> 2 <u>78</u> 3 <u>285</u>	
WELL HYDROFRACTURED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		E 8 9 11 15 17 21	
CIRCLE APPROPRIATE LETTER		A 23 24 26 30 32 36	
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED		R 38 39 41 45 47 51	
E ELECTRIC LOG OBTAINED		S 1 2 3	
P TEST WELL CONVERTED TO PRODUCTION WELL		D 56 60	
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.		E SLOT SIZE 1 _____ 2 _____ 3 _____	
DRILLERS LIC. NO. <u>MSD024</u>		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC. NO. <u>MSD027</u>		D 56 60	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		D 56 60	
DRILLERS SIGNATURE <u>Joseph L. Payne</u>		D 56 60	
(MUST MATCH SIGNATURE ON APPLICATION)		D 56 60	
LIC			

B 1 5194

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 519020

STATE PERMIT NUMBER

HO - 94 - 3710 fill in this form completely

Date Received (APA) 06/19/03

OWNER INFORMATION

Douglas Homee Inc P.O. Box 628 Ellicott City MD 21041

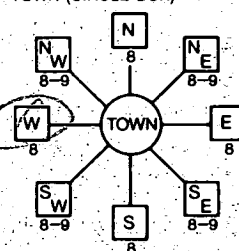
LOCATION OF WELL

Howard Waterman Estates SECTION 23 LOT 23 Fulton MILES FROM TOWN 2

DRILLER INFORMATION

Joseph L. Maigne MS D 224 Jacoby H. Maigne Well Drilling 5512 Ridge Rd. Nat. Driv. Md 21111 Joseph L. Maigne 6/17/03

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



12443 Petrillo Drive NEAR WHAT ROAD ON WHICH SIDE OF ROAD 800 FT DISTANCE FROM ROAD ENTER FT OR MI TAX MAP 40 BLK PARCEL 250

WELL INFORMATION APPROX. PUMPING RATE 4 (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 A39163 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 8/11/03 CO SIGNATURE 8/11/04 NORTH GRID 481 000 EAST GRID 816 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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)

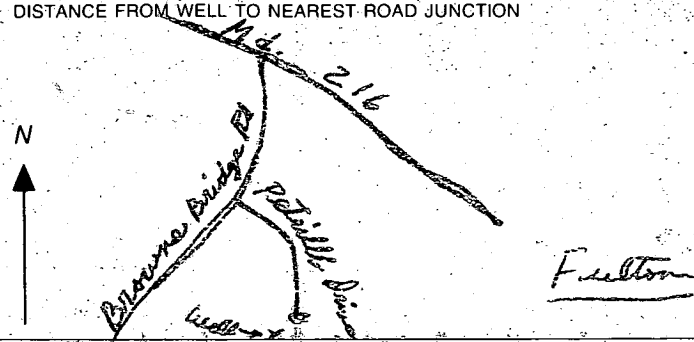
- THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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 816 N 481

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



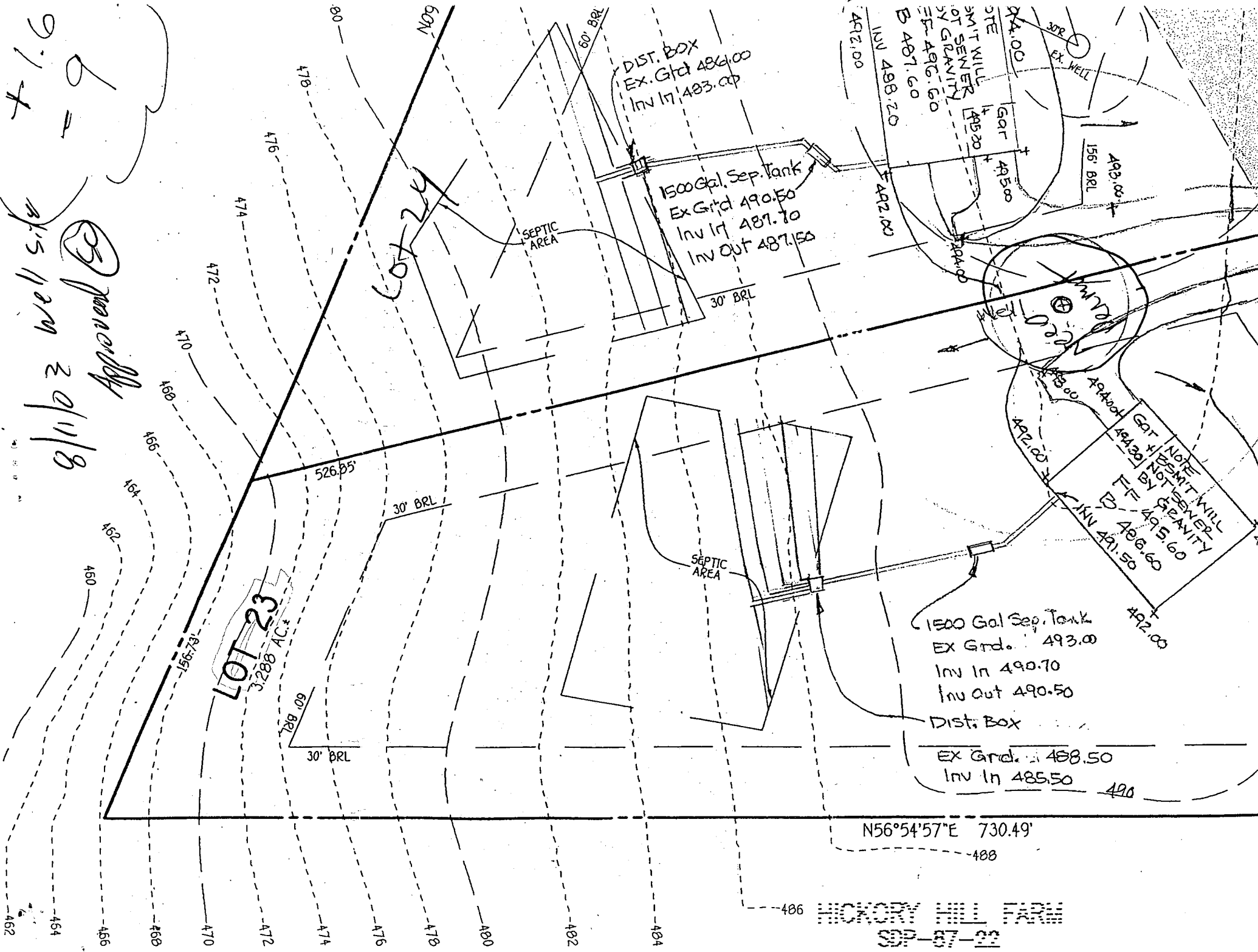
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER G PERMIT No. HO 94 3710

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

917
 6 =
 3:15 PM 2/11/8
 Approval 



LOT 23
 3.288 AC.

LOT 24

DIST. BOX
 Ex. Grd 486.00
 Inv In 483.00

1500 Gal. Sep. Tank
 Ex Grd 490.50
 Inv In 487.70
 Inv Out 487.50

1500 Gal. Sep. Tank
 EX Grd. 493.00
 Inv In 490.70
 Inv Out 490.50
 Dist. Box

EX Grd. 488.50
 Inv In 485.50

490

NOTE: WILL NOT BE SERVED BY GRAVITY
 FF 495.60
 FF 496.60
 IN 491.50

N56°54'57"E 730.49'

HICKORY HILL FARM
 2007-07-21

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 6-30-04 (month/day/year)

9/9/04
 O.K. (BB)

* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 88 - 0613

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: Joseph Mayne

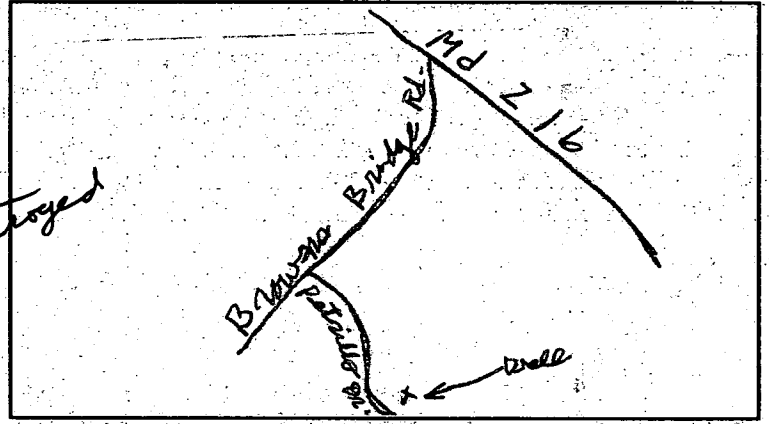
WELL DRILLERS LICENSE NUMBER: 024

* OWNER'S NAME: Douglas Homes Inc

CIRCLE: MWD/MSD/MGD

* WELL LOCATION:
 COUNTY: Howard
 NEAREST TOWN: Highland
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: Waterman Estates
 SECTION: _____ LOT: 15 23
 NEAREST ROAD: Potrillo Drive

SITE LOCATION MAP



Well tag returned & destroyed 7/6/04

* TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED
- _____ BORED/AUGERED _____ HAND DUG
- _____ OTHER (specify) _____

* USE CODE:

- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:

- STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify) _____

* SIZE OF CASING: 6 5/8 INCHES IN DIAMETER

* DEPTH OF WELL: 385 FEET DEEP

* WAS ANY CASING REMOVED? _____ YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? _____ YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Cement + gravel mixed</u>	<u>0</u>	<u>385</u>
VOLUME OF MATERIAL USED		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN _____

LICENSE # 024

MWD/MSD/MGD CIRCLE ONE

DATE 7-1-04



C1 2464

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 A-39164

DATE Received

DATE WELL COMPLETED 052189

Depth of Well 985 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-1613

OWNER United Development last name Keadle DA. first name TOWN FREDON Now ON SUBDIVISION WARDMAN ESTATES SECTION 1 LOT 23

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for SANDSTONE, GRAY SILTSTONE, and ROCK.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 11, NO. OF POUNDS 1029, GALLONS OF WATER 66, DEPTH OF GROUT SEAL 48 to 54 ft.

CASING RECORD: casing types insert appropriate code below. MAIN CASING TYPE SF, Nominal diameter 6, Total depth of main casing 90.

OTHER CASING (if used) diameter inch, depth (feet) from to. Includes handwritten note: Well sealed.

SCREEN RECORD: screen type or open hole insert appropriate code below. SCREEN TYPE HO, DEPTH (nearest ft.) 19.

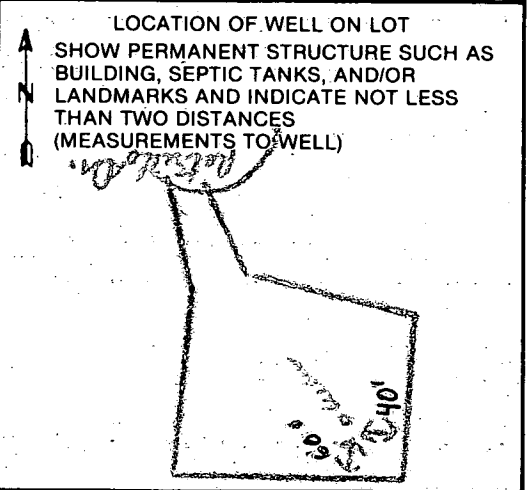
SCREEN RECORD continued: SLOT SIZE 1, 2, 3; DIAMETER OF SCREEN (NEAREST INCH) 56 to 60.

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.), WQ (74, 75, 76), TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: HOURS PUMPED 4, PUMPING RATE 1 gal. per min. to nearest gal., METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 29 before, 28.6 when pumping, TYPE OF PUMP USED submersible (S).

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES (NO), TYPE OF PUMP INSTALLED, CAPACITY GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



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 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. 208, DRILLERS SIGNATURE (Must match signature on application), SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).

COUNTY

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0613
 Location of property (road) Petrillo Dr.
 Subdivision Watman's Est Lot 1/3 Block Plat Sec. 1
 Well Driller J. Mayne Owner Hilltop Develop.

Depth of well 385'
 Distance of measuring point (M.P.) above ground 1'
 Static water level (S.W.L.) below M.P. 29'

I. High rate pumping -- reservoir drawdown

Time pump started 12:00 Pumping rate 15 gpm.
 Total time 40 min. to reach pumping water level 286 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 $\frac{1}{2}$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
12:15	147	4 sec.		15 G.P.M.
12:30	238	4		15
12:40	286	4		15
12:55	282	60		1
1:10	281	60		1
1:25	279	60		1
1:40	278	60		1 +
1:55	276	60		1
2:10	273	60		1
2:25	273	60		1 +
2:40	273	60		1
2:55	273	60		1 +
3:10	273	60		1
3:25	273	60		1
3:40	273	60		1
3:55	273	60		1
4:10	273	60		1
4:25	273	60		1
4:40	273	60		1
4:55	273	60		1
5:10	273	60		1
5:25	273	60		1
5:40	273	60		1
5:55	273	60		1

Water Level

Pumping rate

Flow

6:25 273

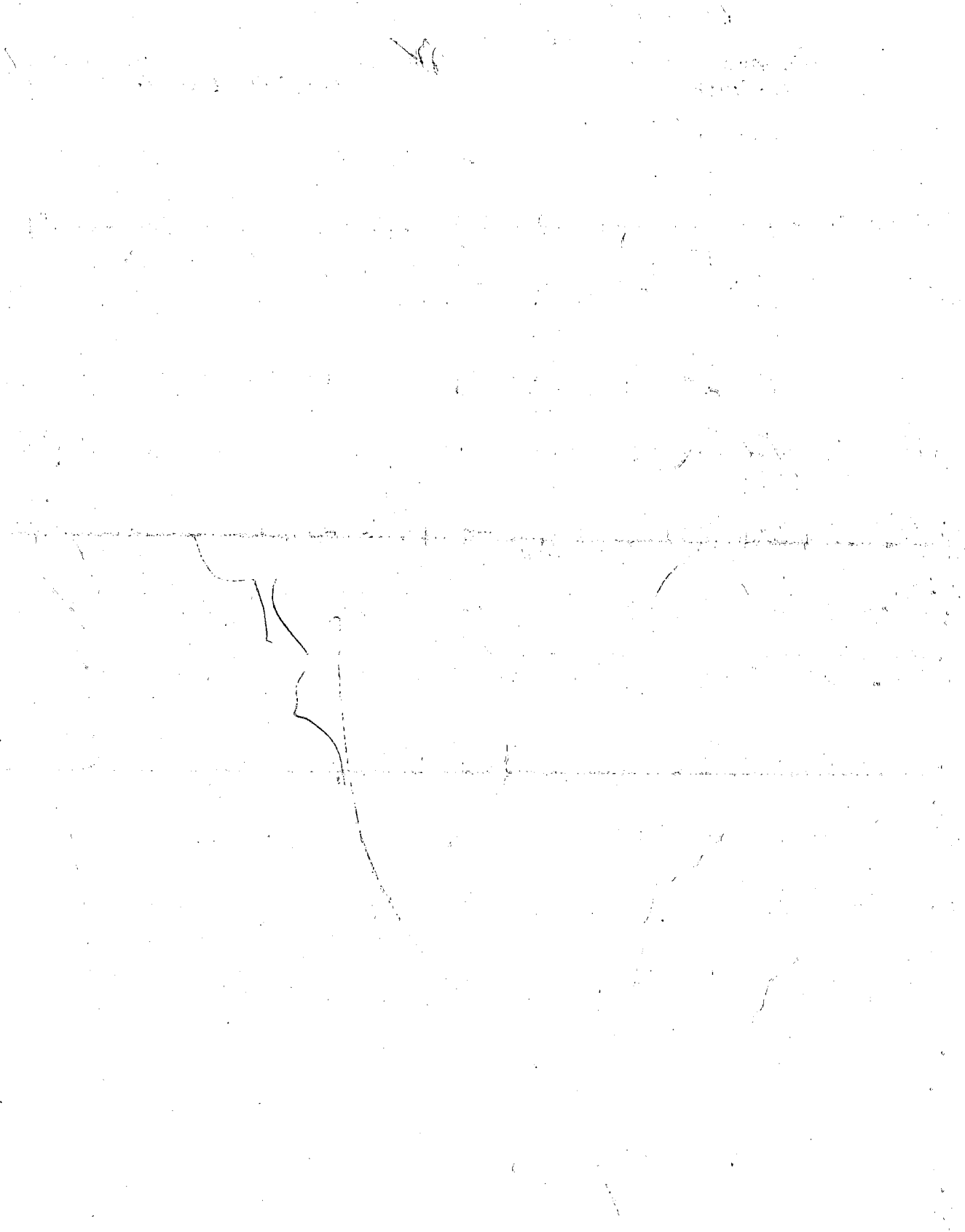
60 sec

273

6:40 273

60 sec

1



B 1 2238

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-88-0613

fill in this form completely

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

please print or type

Date Received (APA)

8 13

OWNER INFORMATION

HILLTOP Development

PO BOX 208

CLARKSVILLE MD 21029

B 3

LOCATION OF WELL

HOWARD

WATERMAN Estates

SECTION 1 LOT 23 Now on Lot 23

FULTON

MILES FROM TOWN (enter 0 if in town) 1 MI

DRILLER INFORMATION

Joseph L. MAYNE 238

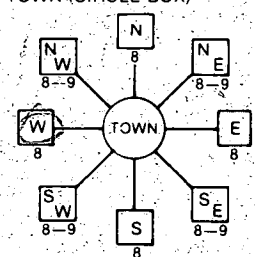
Joseph L. mayne WELL DRILLING

5512 Ridge RD. Mt. Airy 2111

Joseph L. Mayne 5/1/89

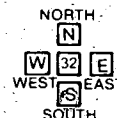
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Pettillo Drive

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



67.5

ENTER FT or MI FT

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A-39164

STATE SIGNATURE INSERT S

DATE ISSUED 05/589 CO SIGNATURE Silas Abdul 11-14-89

NORTH GRID 480000 EAST GRID 0814000

APPROXIMATE DEPTH OF WELL 260 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 DEEPEAN AN EXISTING WELL

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

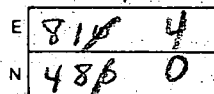
Not to be filled in by driller. (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

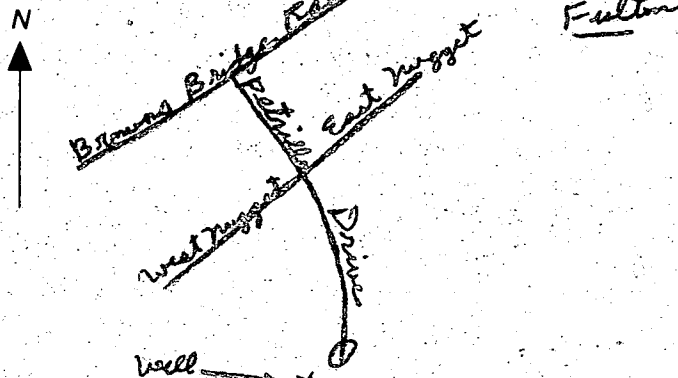
FORCE SA PERMIT No. 40-88-0613

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



APPLICATION

PERCOLATION TESTING

A 39163

P _____

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

DISTRICT 5

DATE 4/2/87

TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER ~~W-I Research, Inc.~~ Hilltop Development Corp - 531-5539

ADDRESS 7625 Brown Bridge Road PHONE _____

PROSPECTIVE BUYER Richard J. Demmitt

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 301-531-5539

PROPERTY LOCATION:

SUBDIVISION Waterman Estates, Section One LOT NO. Eight (8) ^{LOT 12} OFFINAL

ROAD AND DESCRIPTION ~~7625 Brown's Bridge Road~~ 12433 Petriello Drive New 23

TAX MAP 40 PARCEL # 250

SIZE OF LOT 3 acres 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.

Richard J. Demmitt
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 5-12-87 Percolation Factory Hold For Plat. S.A.C.

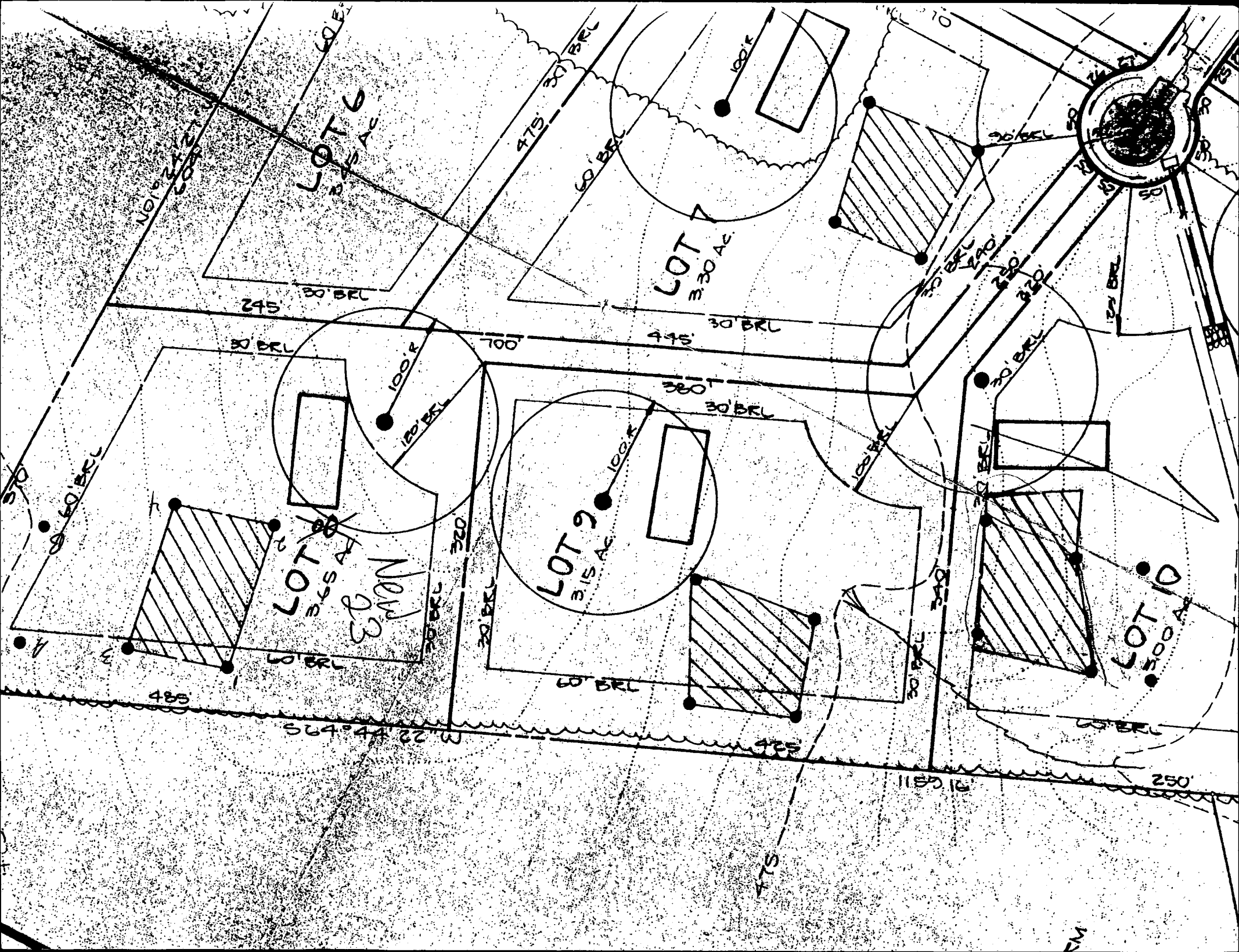
BLDG. PERMIT SIGNED

AND RETURNED 4/2/87

Serial # 20998

SFD - 3 Bedroom (new work started)
permitted construction

THIS IS NOT A PERMIT



LOT 6
3.15 AC

LOT 7
3.30 AC

LOT 8
3.65 AC
New
365

LOT 9
3.15 AC

LOT 10
3.00 AC

101° 22' 20"

245

975

445

30' BRL

700

30' BRL

380

30' BRL

485

N. 22° 44' 56.4"

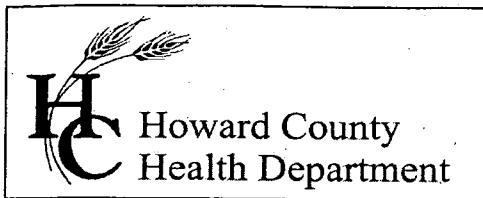
425

1150 16'

250'

975

CM



7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

November 10, 2004

Douglas Homes
5034 Dorsey Hall Drive, Suite 102
Ellicott City, MD 21041

RE: Waterman Estates, Lot 23
12443 Petrillo Drive
Highland, MD 20777
BP # B00147764
Well Permit # HO-94-3710

Dear Sir:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 09/02/2004. Final approval of the well line connection to the dwelling was approved on 09/02/2004.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the **initial** sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3710. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department, as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Sample: 11/04/2004
Date of Well Completion: 08/26/2003

Respectfully,

Brian Baker
Brian Baker, R. S.
Well and Septic Program

BB/mlb

cc: Building Inspector's Office
Community Services Program
File

MASTELLOE
 # 05-034034
 APPROVED

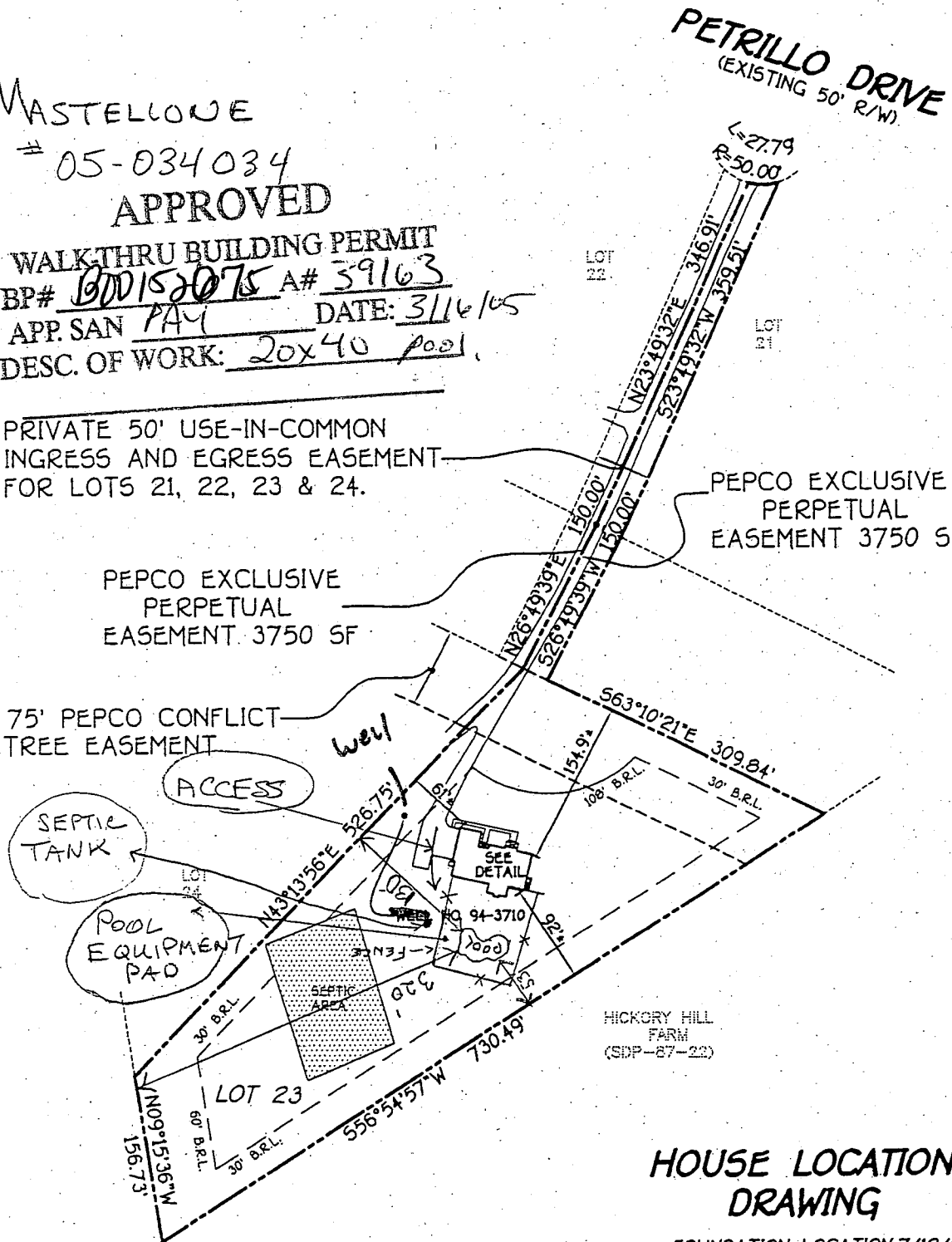
WALKTHRU BUILDING PERMIT
 BP# 000152075 A# 39163
 APP. SAN PAY DATE: 3/16/05
 DESC. OF WORK: 20x40 pool

PRIVATE 50' USE-IN-COMMON
 INGRESS AND EGRESS EASEMENT
 FOR LOTS 21, 22, 23 & 24.

PEPCO EXCLUSIVE
 PERPETUAL
 EASEMENT 3750 SF

PEPCO EXCLUSIVE
 PERPETUAL
 EASEMENT 3750 SF

75' PEPCO CONFLICT
 TREE EASEMENT



**HOUSE LOCATION
 DRAWING**

FOUNDATION LOCATION: 7/12/04
 FINAL LOCATION: 11/9/04
 BOUNDARY SURVEY: _____

SCALE: 1"=150'
 DATE: 11/10/04
 DRAWN BY: V.L.J.
 CHECKED BY: MLR
 PROJECT No.: 61733

12443 PETRILLO DRIVE
 BRL - DENOTES BUILDING RESTRICTION LINE
 TOP OF FOUNDATION ELEVATION = 494.9'

2-4,
 IN 2
 7481 & 7482.

VD