

Tax ID 03-304175

8-2-88 ✓
1 pm
8-3-88 am ✓

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 42170
42170
A 24093

DISTRICT 3rd

DATE 7/22/88

DATE SYSTEM APPROVED 8-3-88

INSPECTOR JEN

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Frali Septic Service, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS P. O. Box 659, Mt. Airy, Maryland 21771 PHONE 795-5674

SUBDIVISION Shiple Property ROAD 122⁷⁵ Old Frederick Rd LOT 1

PROPERTY OWNER James Lefalvie, Jr. Ron Lovelace PAT DENNIS

ADDRESS 2780 Francis Scott Key Highway, Taneytown, MD 21787

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

GARBAGE GRINDER? YES NO

190
4
760

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 190 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4.5 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 4.5 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 135 feet up the left (259.01') lot line and 100 feet off the same lot line as seen when facing the lot from Route 99. Run trenches on contour toward the rear of lot.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. o/c/cw

BLDG. PERMIT SIGNED
AND RETURNED 4/8/92
Serial # B00104797
Not cut

PLANS APPROVED BY Sid Abel DATE 12/18/87

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.

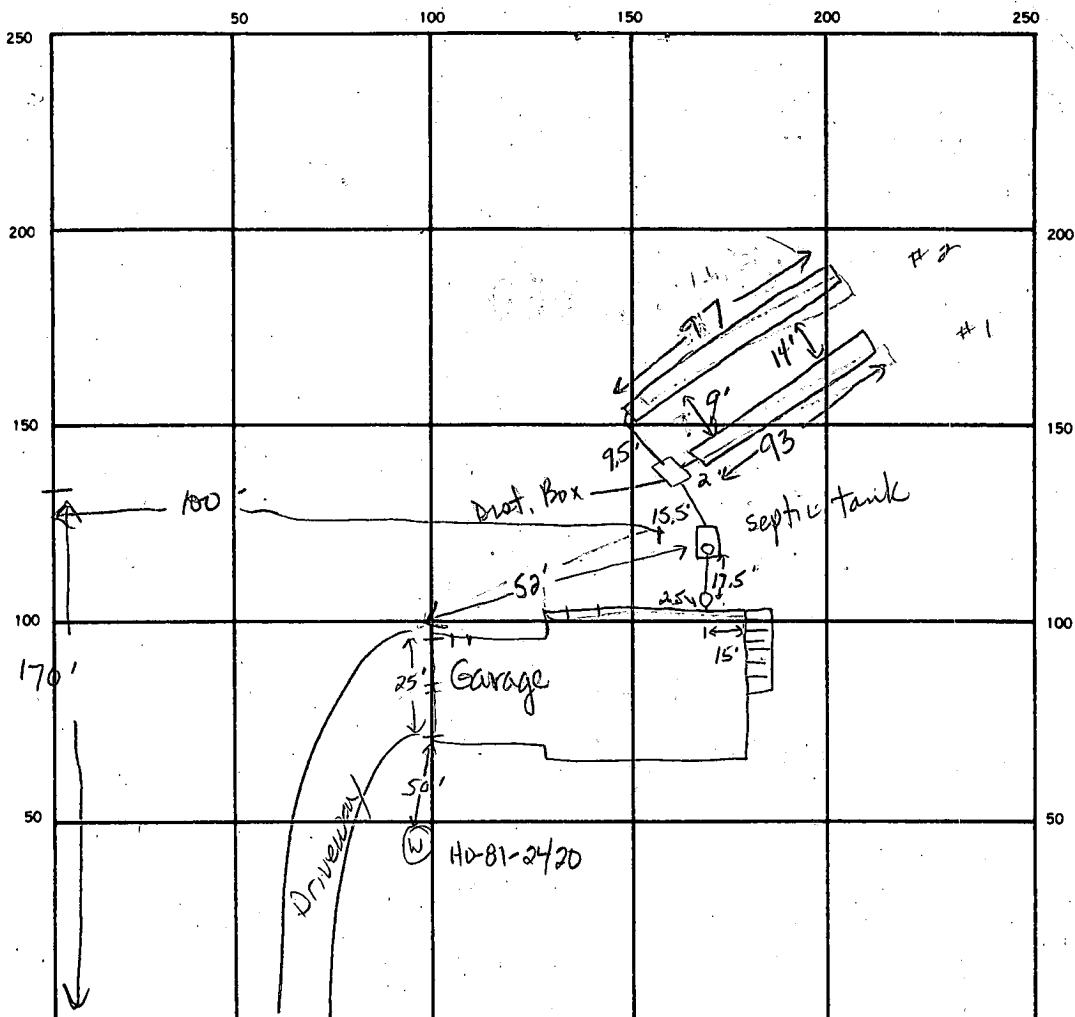
Add to - Suz-deck
BLDG. PERMIT SIGNED
AND RETURNED 7-18-96
Serial # B00101006

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

42170



22
 24
 88
 44
 52
 70
 24
 280
 198
 168
 20
 24
 80
 48
 11
 24
 44
 22

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Old Frederick Road

SEPTIC TANK. LEVEL 1750 gal ok CLEANOUTS 1 on septic tank, 1 at house in-line
 DISTRIBUTION BOX. LEVEL ok w/ baffle
 DRAIN FIELD TILE FIELD. DEPTH 85 80 FT. TRENCH WIDTH 2 FT. INLET DEPTH 40 FT.
 EFFECTIVE GRAVEL DEPTH 45 40 FT. TOTAL LENGTH 93 97 FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 418.5 388 SQ. FT.
 DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.
 ABSORBENT AREA 806 SQ. FT.

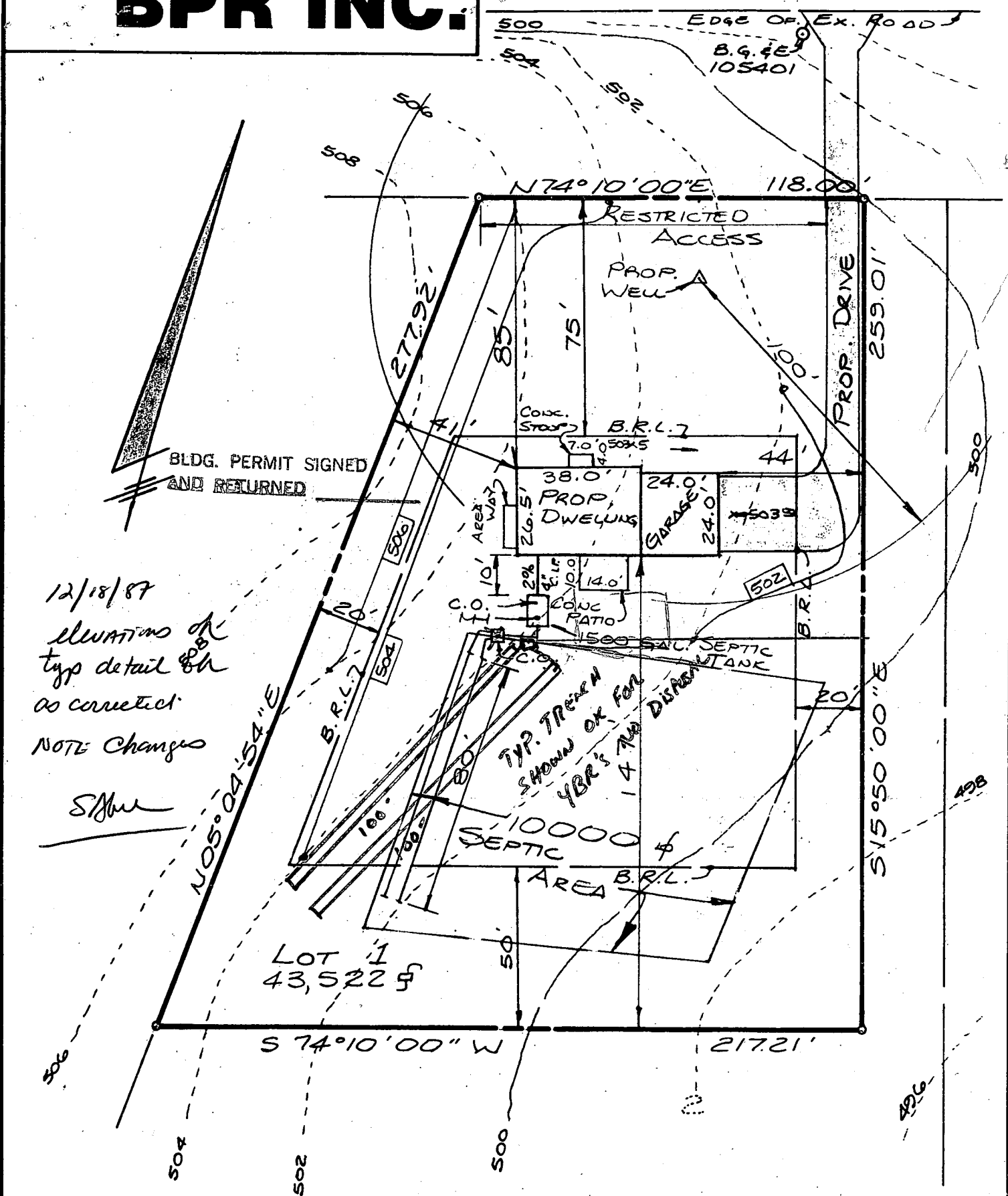
93
 45
 46.5
 37.2
 418.5

REMARKS 8-2-88 ok to add stone, pipe & paper to both trenches and cover leaving both ends open. Ok to cover from house to septic tank. Call for final JEN 8-3-88 Ok to cover all work. JEN

DATE SYSTEM APPROVED 8-3-88 INSPECTOR Jane E Madean

BPR INC.

MD. ROUTE 99



BLDG. PERMIT SIGNED AND RETURNED

12/18/87
Elevations on
typ detail & h
as corrected
NOTE Changes

SJH

LOT 1
43,522 sq ft

\$10,000 SEPTIC AREA

TYP. TRENCH SHOWING EX FOR 4 BR'S 1 1/4" DIA. DISCH.

F.F. ELEV. = 504.00 ✓
B.M. ELEV. = 495.50 ✓



PRELIMINARY

APPLICATION

A 24093

SEWAGE DISPOSAL TESTING

P _____

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: 465-5000, EXT. 356

DISTRICT 3rd

DATE 9/29/76

11/24/76
9:30 A.M.

E =

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 Russell M. Shipley ~~property~~
Phone: 328-2414 Any questions call Boender: 465-7777
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Proposed Lot 1

ROAD AND DESCRIPTION: Route 99 - between Sand Hill Road and Mt. View Road - third place
on left after Sand Hill Road 12275 OLD FREDERICK Rd.

SIZE OF LOT 40,000 sq. ft. plus or minus TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Russell M. Shipley

APPROVED BY William H. Zapp FOR Dry well + trench DATE 3/21/77
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS WNZ DATE 11/24/76

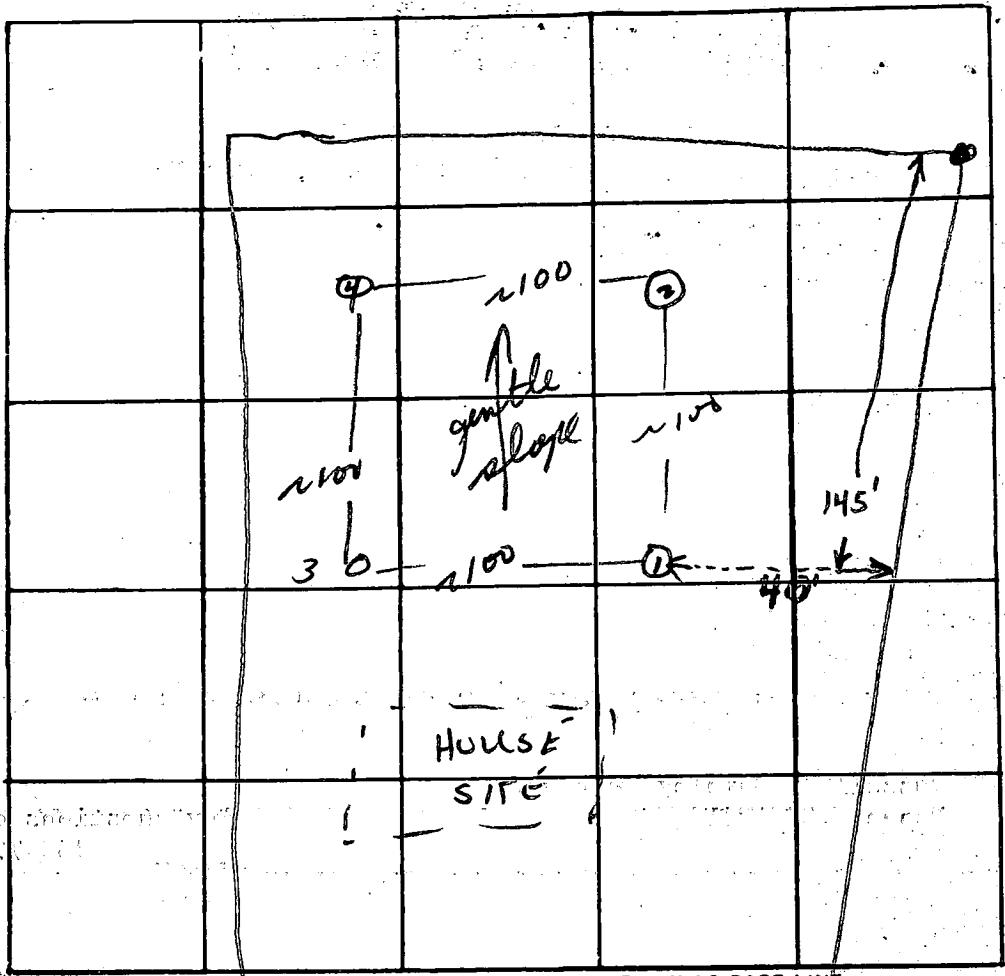
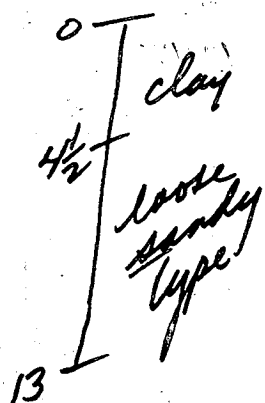
REASONS FOR REJECTION OR HOLDING final plat.

BLDG. PERMIT SIGNED AND RETURNED 12-29-81

SAW
BP 15983

THIS IS NOT A PERMIT

all holes



Lot 1

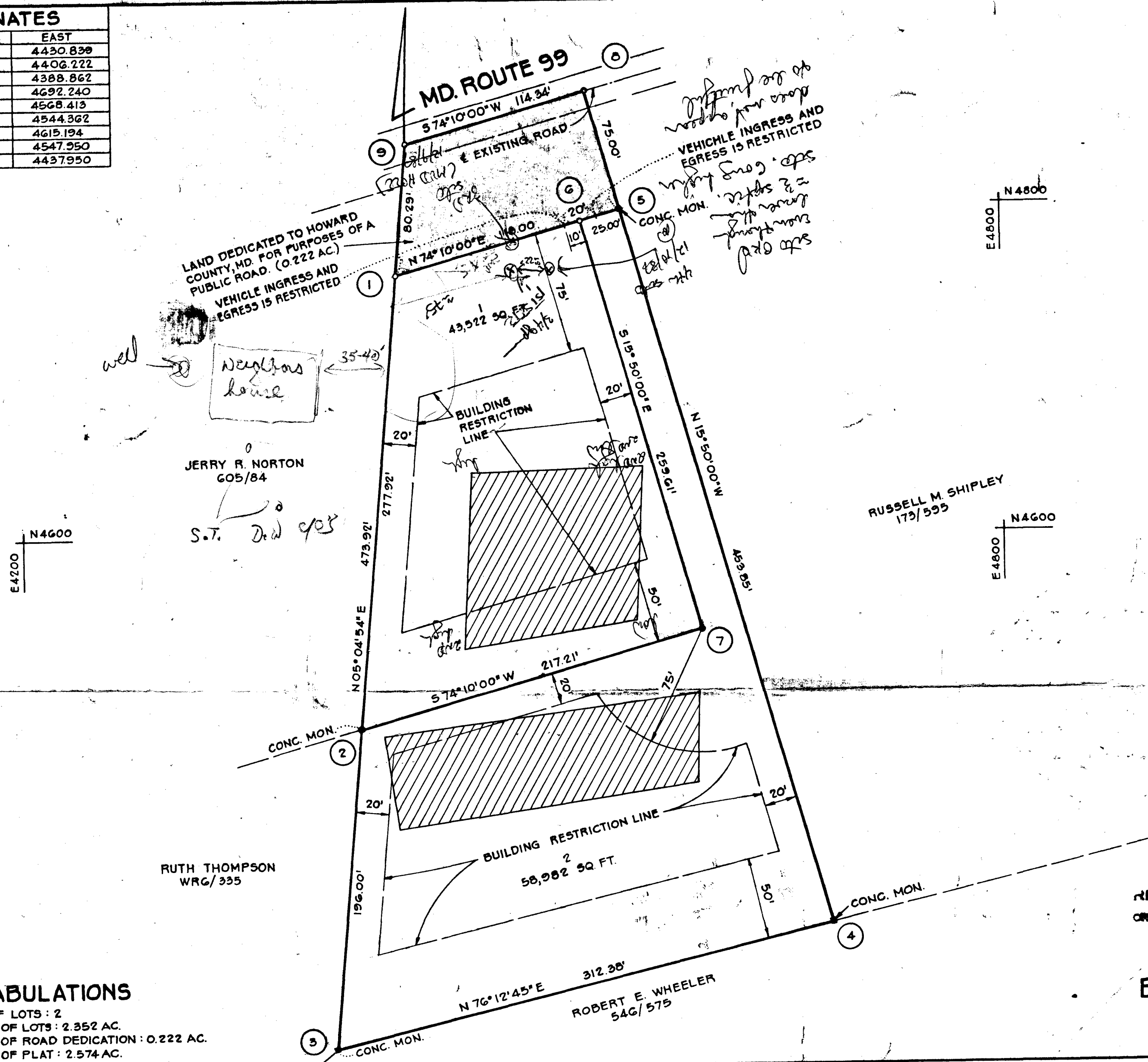
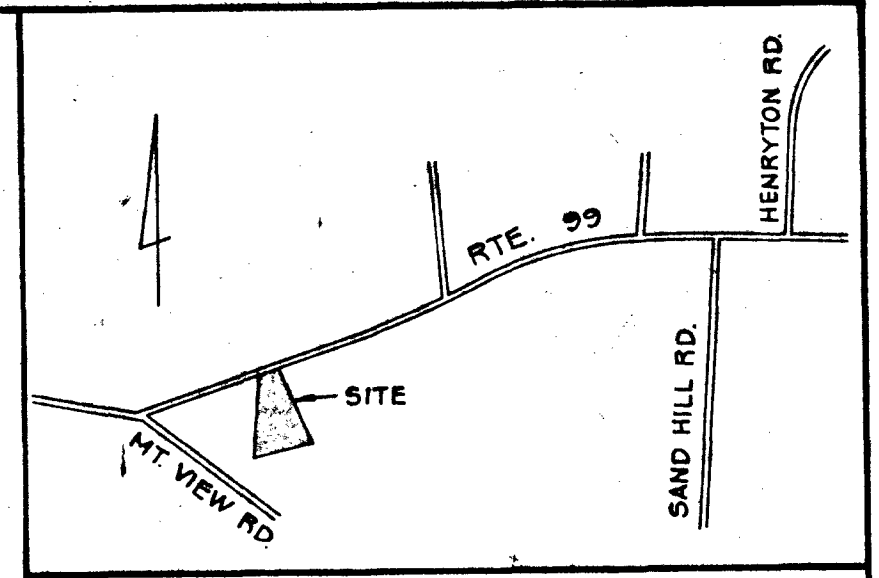
INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.
Rt 99

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/24/76	1	4 1/2	9:52	NO	PERC	CLAY	
	1-A	13	9:55	10:00	10:00	10:08	8
	2	4 1/2	10:35	10:40	10:40	10:50	10
	2-A	13	10:35	10:42	10:42	10:50	8
	3	13'	VISUAL; SIMIL SOIL		FROM		
	3-A	5 1/2	10:15	10:22	10:22	10:35	13
	4	6 1/2	10:42	10:55	10:55	11:18	23
	4-A	14	10:42	10:45	10:45	10:52	7

21
18
30
69
11
6769
36
E = 12 m

REMARKS System in hole #1
 TYPE OF SOIL Sandy mica
 TESTED BY WWE ALSO PRESENT: owner

COORDINATES		
NO.	NORTH	EAST
1	4760.628	4430.839
2	4483.798	4406.222
3	4288.569	4388.862
4	4363.015	4692.240
5	4799.643	4568.413
6	4792.823	4544.362
7	4543.062	4615.194
8	4871.797	4547.950
9	4840.601	4437.950



VICINITY MAP
SCALE: 1"=1200'

GENERAL NOTES

1. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND HYGIENE.
2. ALL PERC TEST HOLE LOCATIONS HAVE BEEN FIELD LOCATED.
3. THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.
4. TAX MAP-10 PARCEL-15
5. DEED REFERENCE 173/595
6. COORDINATES SHOWN HEREON ARE ASSUMED.
7. SUBJECT TO VP. 77-12

RECORDED PLAT 3666
ON 4-1-77 AMONG THE LAND RECORDS OF
HOWARD COUNTY, MD.

BOENDER ASSOCIATES, INC.
SUITE 101-107
TOWN & COUNTRY PROFESSIONAL BUILDING
ELLCOTT CITY, MD. 21043

AREA TABULATIONS

1. TOTAL NO. OF LOTS: 2
2. TOTAL AREA OF LOTS: 2.352 AC.
3. TOTAL AREA OF ROAD DEDICATION: 0.222 AC.
4. TOTAL AREA OF PLAT: 2.574 AC.

OWNERS STATEMENT

WE, EDITH AND RUSSELL M. SHIPLEY, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MD. ITS SUCCESSORS AND ASSIGNS; 1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES IN AND UNDER ALL ROADS AND STREET RIGHT OF WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; 2) DEDICATE TO PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOOD PLAINS AND OPEN SPACE WHERE APPLICABLE AND FOR ONE DOLLAR CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOOD PLAINS AND OPEN SPACE WHERE APPLICABLE; 3) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED ON OR OVER THE SAID EASEMENTS AND RIGHT OF WAYS AND 4) IT IS FURTHER AGREED THAT MAINTENANCE OF ALL WATERWAYS, DRAINAGE EASEMENTS, AND/OR FLOOD PLAINS SHOWN HEREON ARE THE RESPONSIBILITY OF THE PROPERTY OWNERS, ITS SUCCESSORS AND ASSIGNS. WITNESS OUR HANDS THIS 3RD DAY OF JANUARY, 1977

SURVEYORS CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT, THAT IT IS A SUBDIVISION OF PART OF THE LANDS CONVEYED BY TALBOTT G. SHIPLEY AND RUTH E. SHIPLEY, HIS WIFE, TO RUSSELL M. SHIPLEY AND EDITH S. SHIPLEY, HIS WIFE, BY DEED DATED MARCH 10, 1942 AND RECORDED IN LIBER 173 AT FOLIO 595 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

William G. Hartel 1-3-77
WILLIAM G. HARTEL, P.L.S. NO. 9436 DATE

OWNER & DEVELOPER

RUSSELL M. SHIPLEY
12195 ROUTE 99
MARRIOTSVILLE, MD. 21104

**LOTS 1 AND 2
SHIPLEY PROPERTY**

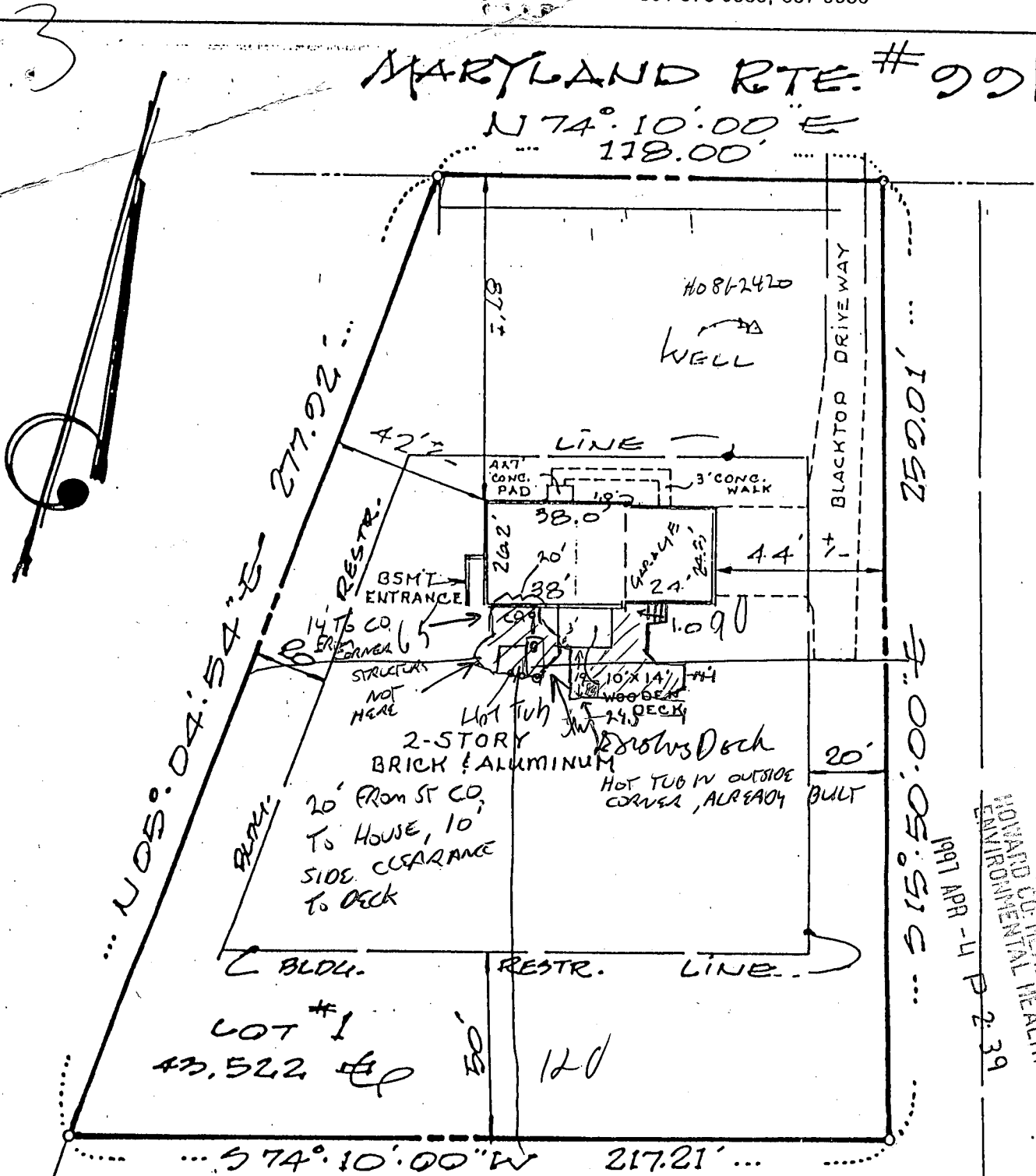
THIRD ELECTION DISTRICT HOWARD COUNTY, MD.
SCALE: 1"=50' DECEMBER 13, 1976

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT.
Joyce M. Boyles 3-21-77
COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING.
Thomas E. Harink 3-28-77
DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS. HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.
P. J. Ryan Jr 3-25-77
DIRECTOR DATE

Russell M. Shipley *Edith M. Shipley*
John A. Boender *John A. Boender*
WITNESS WITNESS



1991 APR - 4 P 2 39
HOWARD CO. HEALTH DEPT
ENVIRONMENTAL HEALTH



SHIPLEY PROPERTY

RECORDED IN P.B. No: 3666
3RD ELECTION DISTRICT
HOWARD COUNTY, MD.

I hereby certify that I have surveyed the property shown hereon for the purpose of locating the improvements only, and the improvements are located as shown. Exact property corners have not been established or set. We assume no responsibility or liability for any rights-of-way or easements recorded or unrecorded, not appearing on the record plat and/or mentioned in the title deed referred to hereon.

Signed this 19th day of April, 1988
George R. Palamini
SURVEYOR

SCALE 40 ft. = 1 inch

Revisions and Updates
UPDATED 7-20-89

B 1 **5005** SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

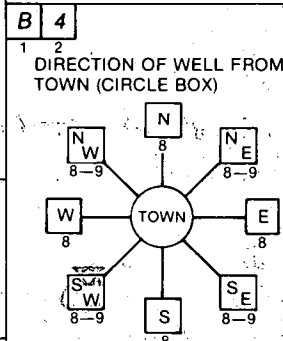
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

OEP PERMIT NUMBER
40-81-2420
fill in this form completely

Date Received **11/12/87**
OWNER INFORMATION
LeFavre J.R. (Shipley)
Last Name Owner First Name
2780 Frances Scott Keyway
Street or RFD
Taneytown Md 21787
Town State Zip

B 3 LOCATION OF WELL
Howard COUNTY
Shipley Property SUBDIVISION
SECTION **21** LOT **21** (P/O 8298)
Marriottville NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) **2** MI

DRILLER INFORMATION
Charles C. Campbell Driller's Name
Campbell Well Drilling & Supply Co. Inc. Firm Name
14531 Hanover Pike Upperco, Md. 21155 Address
11-04-87 Date
Charles C. Campbell Signature



12275 Old Frederick NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD **100** FT
ENTER FT or MI **FT**

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) **5**
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **300**

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 COUNTY NAME
A24093 COUNTY NO.
OEP SIGNATURE **B. Wilson** DATE ISSUED **11/16/87**
STATE HEALTH INSERT S **05/16/88** EXP. DATE
NORTH GRID **540000** EAST GRID **081700**

APPROXIMATE DEPTH OF WELL **200** FEET

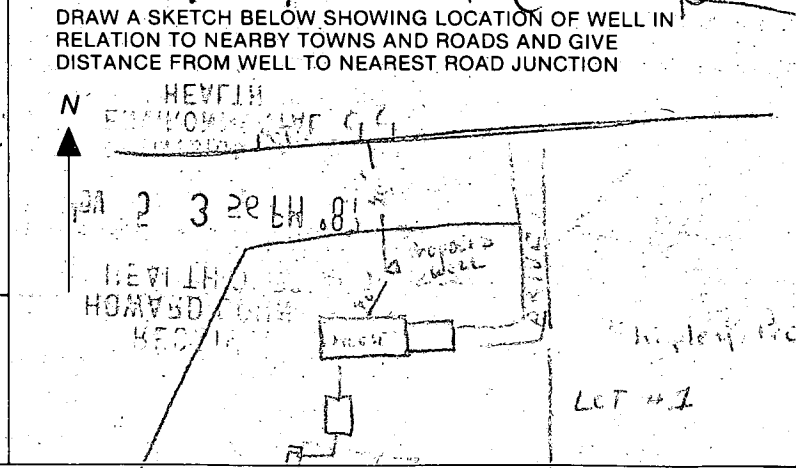
APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary Drive-POINT
other _____

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 **820 17**
N **540 10**

*12/14/87 well #4
60' casing (extra pipe)
38' open hole
9' bags (jetted)
(over)*

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
 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)
APPROP. PERMIT NUMBER _____ GAP _____
FORCE **A** WRITE INITIALS IN BOX PERMIT NO. **40-81-2420**

SPECIAL CONDITIONS
Builder # 751-1375

C1 2024 SEQUENCE NO. (OEP USE ONLY)
 (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 **A 24093**

DATE RECEIVED [] DATE WELL COMPLETED **12 10 87** Depth of Well **330** (TO NEAREST FOOT)
 PERMIT NO. **MC-81-2420**

OWNER **E. FAIVRE J.R.**
 STREET OR RFD **12275 OLD FREDERICK ROAD** TOWN **MARRIOTTSVILLE**
 SUBDIVISION **SHIPLEY PROP. MAP 9 V/O P. 298** SECTION [] LOT **1**

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	
Overburden	0	24	
brown shale	24	62	
gray rock	62	330	✓

305' well - 3/4 gph. Sealed open casing. We will remove casing & finally sealing off. 255' dry hole 105' mud hole

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **9** NO. OF POUNDS **900**
 GALLONS OF WATER **54**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **22** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types: **ST** **CO** **PL** **OT**
 Insert appropriate code below
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **ST** **G** **AS**
 Nominal diameter top (main) casing (nearest inch) **6** **63** **64**
 Total depth of main casing (nearest foot) **65** **70**

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

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

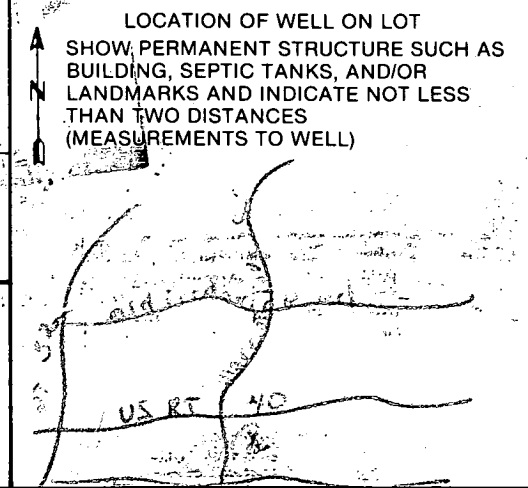
C2
 DEPTH (nearest ft.)
 1 **HO** **42** **330**
 2 [] [] [] [] [] [] [] []
 3 [] [] [] [] [] [] [] []
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN [] [] [] (NEAREST INCH)
 from [] to []

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.) WQ
 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.) **3**
 METHOD USED TO MEASURE PUMPING RATE **1 GAL BUCKET**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **40**
 WHEN PUMPING **184**
 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 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) **29**
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] [] [] [] []
 PUMP HORSE POWER [] [] [] [] [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] [] [] []
 CASING HEIGHT (circle appropriate box and enter casing height)
+ above } LAND SURFACE (nearest foot)
- below } **2** (nearest foot)



A 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. **290**
Charles P Campbell
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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