

**B 1** 3267 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER 40-94-1177  
70 fill in this form completely 79

**B 2** OWNER INFORMATION  
 Date Received (APA) 051597  
 Last Name BURGIN Owner First Name CHARLES  
 Street or RFD GOOS OAKLAND MILL RD  
 Town SYKESVILLE State MD Zip 21224

**B 3** DRILLER INFORMATION  
 Driller's Name Ralph MAYNE License No. 1116  
 Firm Name Ralph MAYNE Well Drilling  
 Address 9120 Brown Church Rd Pitts Hill  
 City Nash Mills State MD Zip 21139

**B 2** 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)

APPROXIMATE DEPTH OF WELL 150 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 \_\_\_\_\_

**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 DEEPEAN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_

**Not to be filled in by driller** (MDE OR COUNTY USE ONLY)  
 APPROX. PERMIT NUMBER GAP  
 FORCE AM WRITE INITIALS IN BOX PERMIT No. 40-94-1177

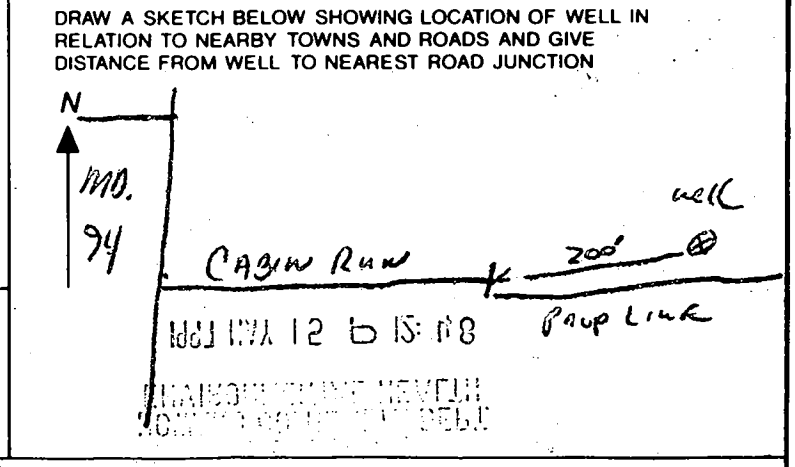
**SPECIAL CONDITIONS**  
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - 795-7632

**B 3** LOCATION OF WELL  
 COUNTY HOWARD  
 SUBDIVISION FLORENCE FARMS  
 SECTION FLORENCE LOT \_\_\_\_\_  
 52 NEAREST TOWN \_\_\_\_\_  
 MILES FROM TOWN (enter 0 if in town) \_\_\_\_\_ MI

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD CABIN Run  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 200 DISTANCE FROM ROAD ENTER FT OR MI ft  
 TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
 Signature Howard Co COUNTY NAME COUNTY NO. A56450A  
 STATE SIGNATURE \_\_\_\_\_ DATE ISSUED 5/27/97 EXP. DATE 5/27/98  
 NORTH GRID 532000 EAST GRID 0766000

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 7600  
 N 5302



DRILLER