

1-17-96
C/O 1.00

Tax ID - 05-414326

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 50997E

A 43822

DISTRICT 5th

DATE 11-28-95

DATE SYSTEM APPROVED 1/17/96

INSPECTOR [Signature]

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933 313-2640

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Clearview Estates LOT 62 ROAD 12006 Broad Meadow Lane

PROPERTY OWNER Altieri Homes, Inc. Robin Ryan John Steelman

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS NEAR 1/16/96 CONTRACTOR REPORTS HOUSE DROPPED, UNABLE TO MAKE SPECS AS DESIGNED, CAN MAKE SPECS USING 2 120" TRENCHES. OK MR/GS: [Signature]

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

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

LOCATION - Place distribution box 80' feet from rear (225.55") lot line and 80' from right lot line (289.82') as viewed from Broad Meadow Lane. Install trenches on contour in both directions away from distribution box.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 7/31/95 DKS

PLANS APPROVED BY Ronald Pinkley/Craig Williams DATE 9/9/92

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 **BLDG. PERMIT SIGNED AND RETURNED 2-27-96**

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

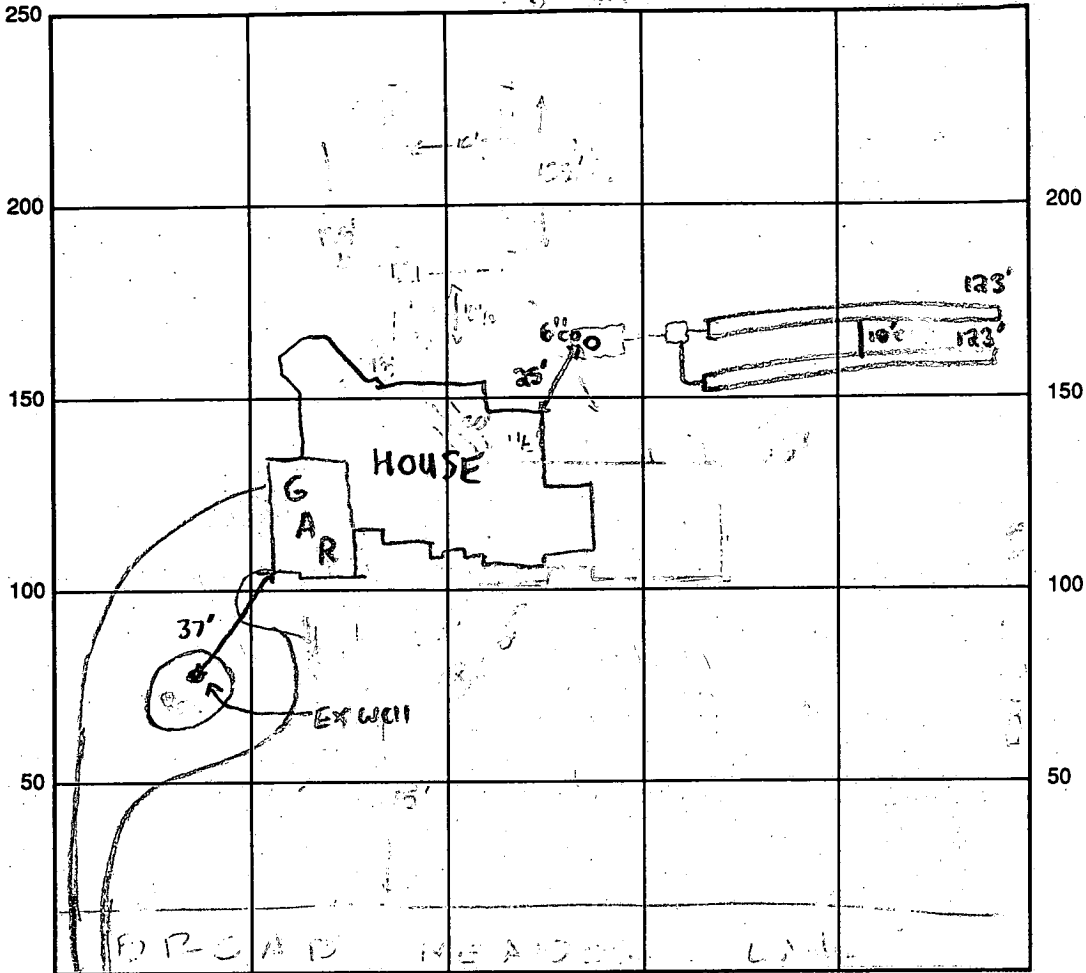
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

Serial # 63459
Swimming Pool

A 43822

SEPTIC RECORD MODIFIED BY SRK AFTER WELL SITE INSP.
 REVEALS ORIGINAL DRAWING INACCURATE - 8/14/02

PROCESS
 ADAPTED
 OK Dykes
 1/17/06



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 BROADMEADOW LANE

SEPTIC TANK LEVEL CLEANOUTS NOTED (1)

DISTRIBUTION BOX LEVEL BAFFLE OK

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 246 FT.

NUMBER OF TRENCHES 2 ~~ONE SIDEWALL~~ BOTTOM AREA 738 SQ. FT.

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

ABSORBENT AREA NA SQ. FT.

REMARKS: OK TO COVER 1/17/06

DATE SYSTEM APPROVED 1/17/06 INSPECTOR Dykes

APPLICATION

PERCOLATION TESTING

43822

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

DISTRICT 5TH

DATE 3/17/89

WET SEASON

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 CLEARVIEW ASSOCIATES LTD. c/o RANDALL CONSTRUCTION Co.
COLUMBIA 21045
ADDRESS 5501 TWIN KNOLLS Rd. SU. 102 PHONE _____

PROSPECTIVE BUYER _____
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CLEARVIEW ESTATES II LOT NO. 58A 62
ROAD AND DESCRIPTION BROAD MEADOW LANE

4 bedrooms
BLDG. PERMIT SIGNED
AND RETURNED 9-20-95
#60714

TAX MAP 29:35 PARCEL # 39:40

SIZE OF LOT 3.3 ACRES TYPE BLDG. SFO
(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.

Patricia J. Sweeper for Randy Lewis
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A#43822

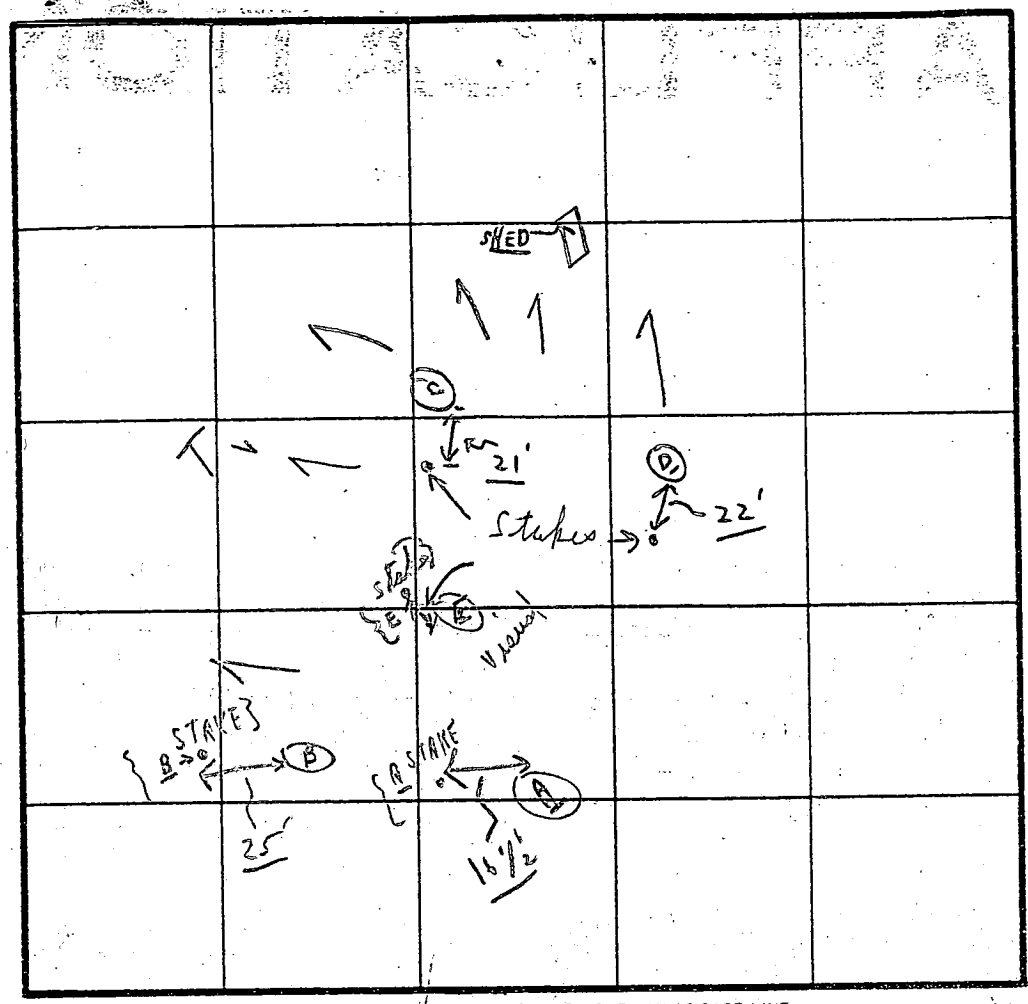
58A

SOIL PROFILE

T. SOIL
CLAY

LOAM
TO

BOTTOM
IN
HOLES



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

Rx 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/29/89	58A	4'	12:40	12:42	12:42	12:46	4 min
	<u>A</u>	13 1/2'					
	58A	3 1/2'	12:42	12:45	12:45	12:45	lowy stuff
	<u>B</u>	12' Water		X	X	X	X
	58A	4' 10"	1:01	1:03	1:03	1:05	2 min
	<u>C</u>	12 1/2'					
	58A	3 1/2'	1:08	1:09	1:11	1:11	
	<u>D</u>	6 1/2'	1:08	1:09	1:09	1:11	2 min
	4 1/2' Visual		LOAM	4 1/2' to 5'	5' to 14 1/2'		DRY
	14'	4 1/2'	1:00	1:02	1:02	1:05	3 min

4' to 12' LOAM WATER 12'

3 1/2' to 6 1/2'

ok at 4 1/2'

sandy loam Dry to 15'

EH-12-1079

REMARKS 3/29 { Tests in open }
 { Tests per stake }

TYPE OF SOIL

TESTED BY C. B. V.

ALSO PRESENT { Phil }
 { and }

APPLICATION

SEWAGE DISPOSAL TESTING

A 37821

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE. 992-2330

DISTRICT _____

DATE 10/09/86
June 30, 1986

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 Conrad J. and Patricia Langenfelder Martha V. Langenfelder
11904 Clarksville Road 5511 Hamilton Avenue
ADDRESS Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:

SUBDIVISION ~~Langenfelder Farm~~ Clearview Est. Sec. 1 LOT NO. 39 ^{COT 8} ^{fauler holes}
ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane ^{Now P/O 62}

SIZE OF LOT 3.0 AC. TYPE BLDG. Residential
(NUMBER OF BEDROOMS)

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.

Steven P. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

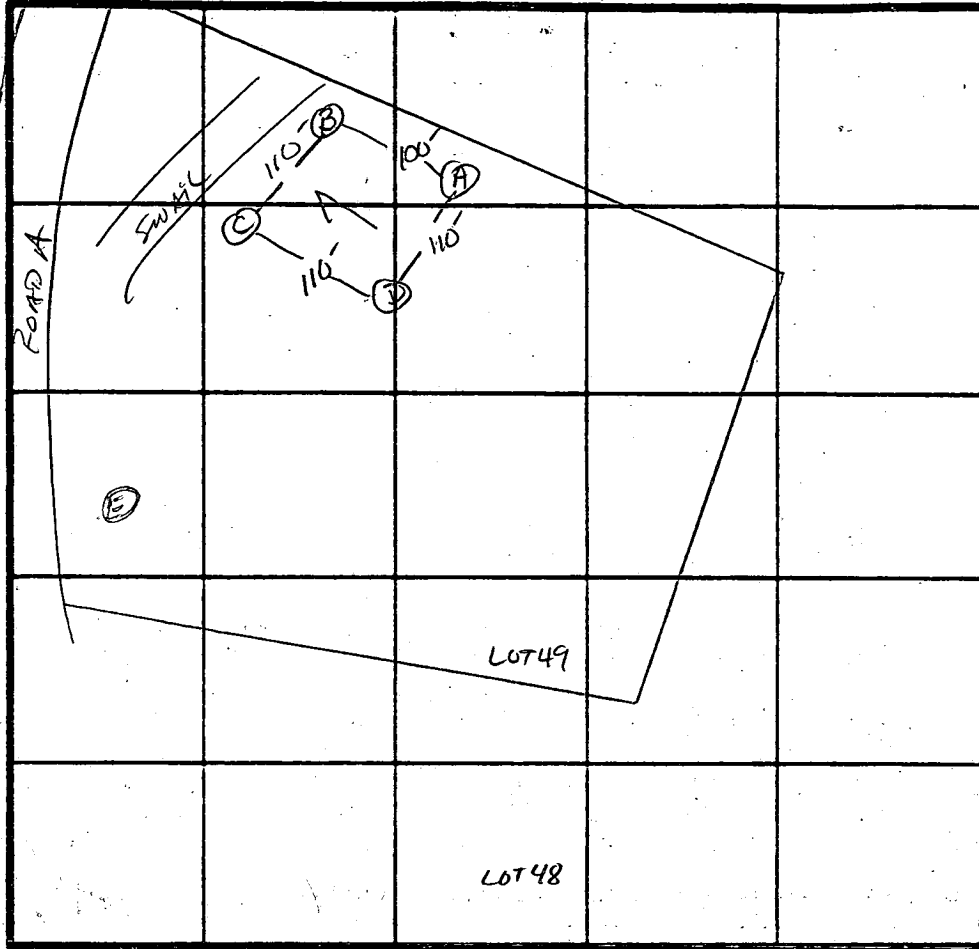
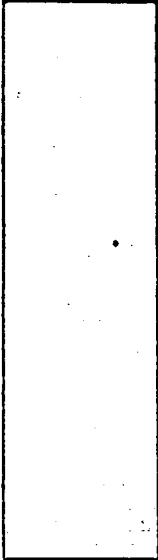
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/21/86 Unsatisfactory Perc. Rock + H₂O AT shallow depths requires
Lot A Redesign. S. Abel

THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
 Rt 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/21/84	A	SOLID ROCK AT 5 FE	SANDSTONE -	MASSIVE AT 4.5'			
	B	SOLID ROCK AT 5 FE	MASSIVE AT 4.0'				
	C	WATER 8.5' CAP FRINGE 7.5'	MOTTLES TO 7' (GREY/YELLOW)				
	D	SOLID ROCK AT 7.5'	MASSIVE AT 7'	CLAY TO 4.5 FE			
	E	WATER AT 8 FE	MOTTLES 3-4 FE				

REMARKS Requires Redesign

TYPE OF SOIL Glenville / Chester

TESTED BY S. Abel

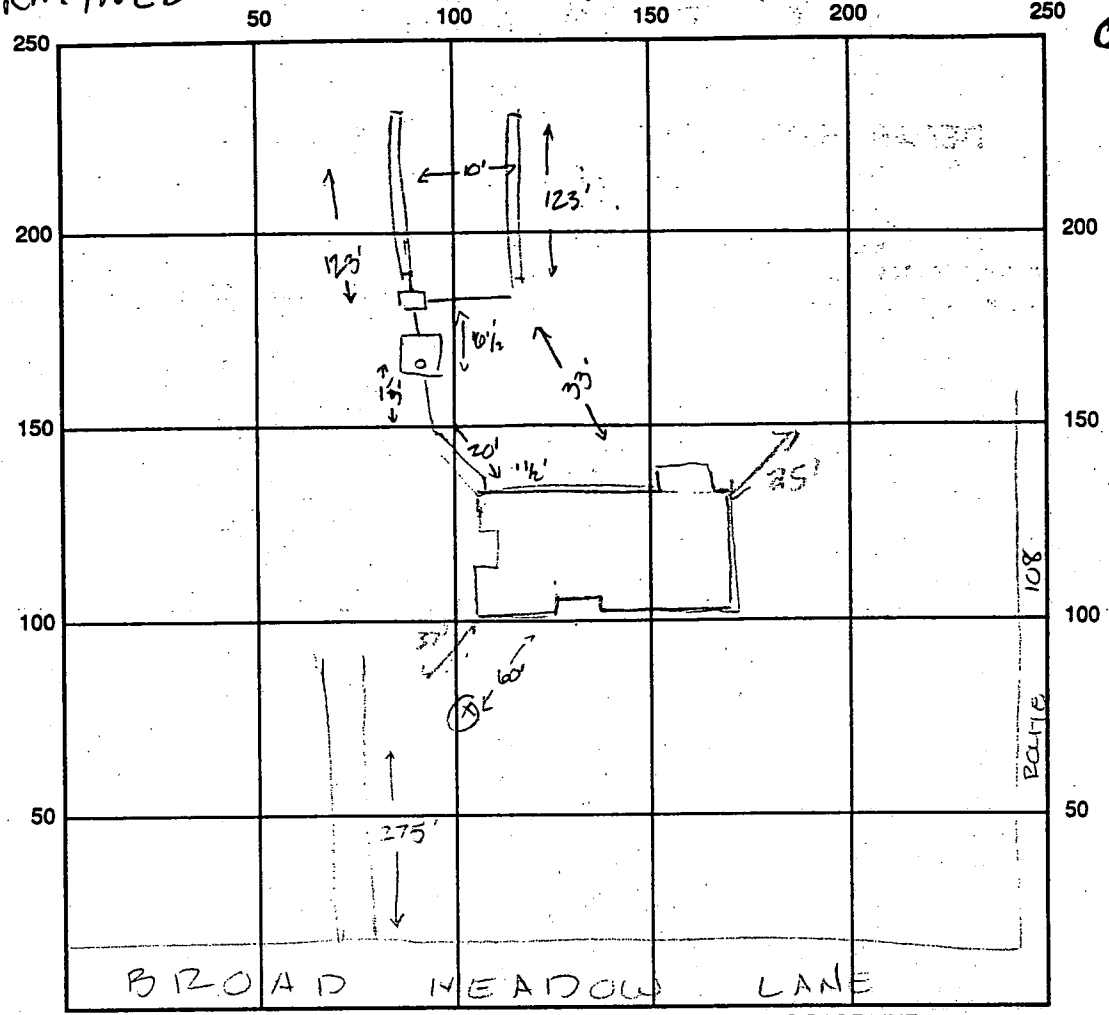
ALSO PRESENT Allen BACKHOFF
JANE NADDE

EHS 12 10/9

ORIGINAL RECORD DRAWN BY K. SYKES
 DETERMINED TO BE INACCURATE BY FIELD INSP.

ON 8/14/02
 by SRK

PITLESS
 ADAPTOR
 OK Dykes
 1/17/06



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ✓ CLEANOUTS NOTED (1)

DISTRIBUTION BOX LEVEL ✓ SATTLE OL

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 246 FT.

NUMBER OF TRENCHES 2 ~~ONE SIDEWALL~~ BOTTOM AREA 738 SQ. FT.

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

ABSORBENT AREA NA SQ. FT.

REMARKS: OK to cover 1/17/02 IDS

DATE SYSTEM APPROVED 1/17/06 INSPECTOR Dykes

LEGEND

- Contour Interval
- Existing Contour
- Proposed Contour
- Spot Elevation
- Direction of Dr.
- Limit of Disturb.

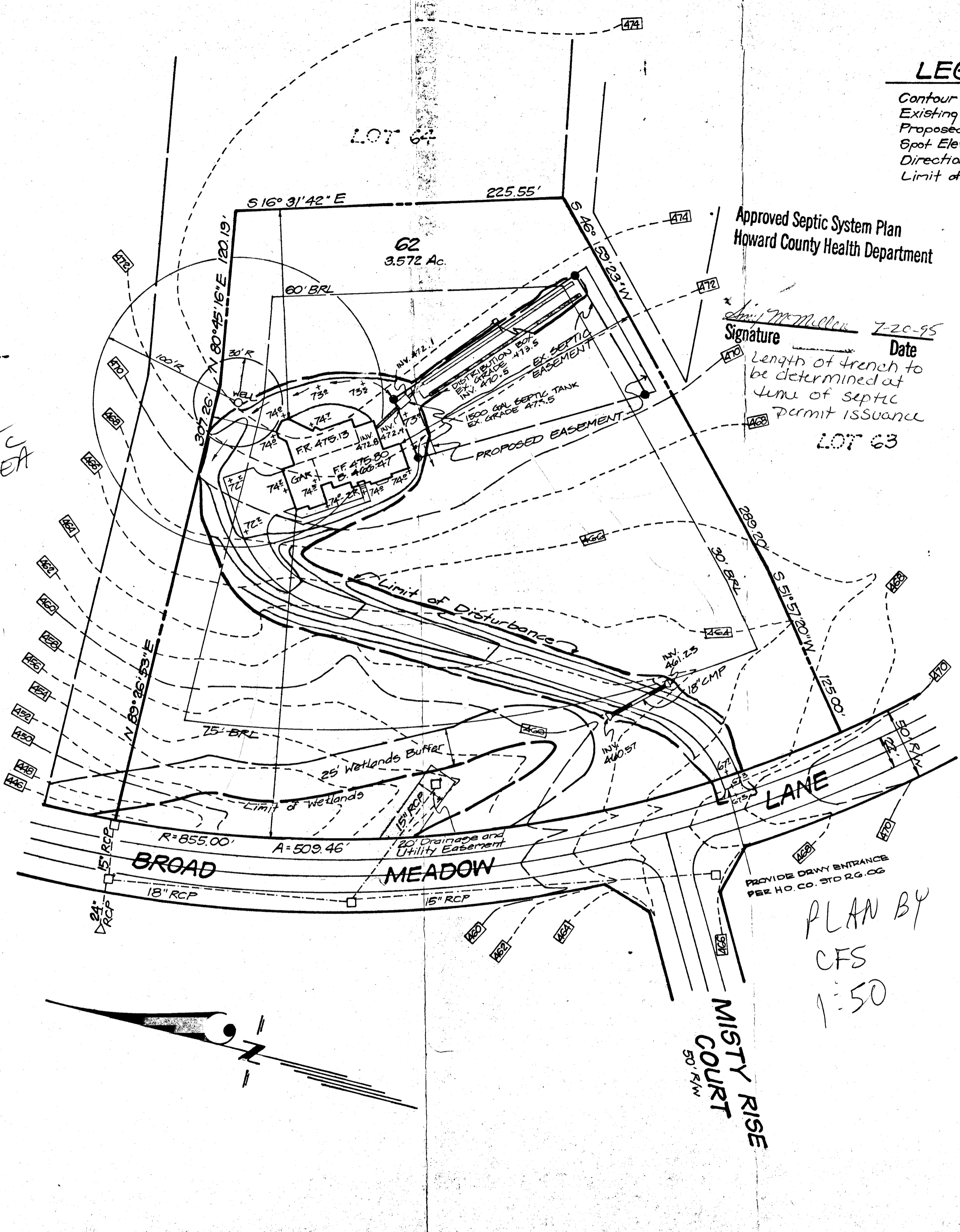
Approved Septic System Plan
Howard County Health Department

Ann M. McLean 7-20-95
Signature Date

Length of trench to
be determined at
time of septic
permit issuance

LOT 63

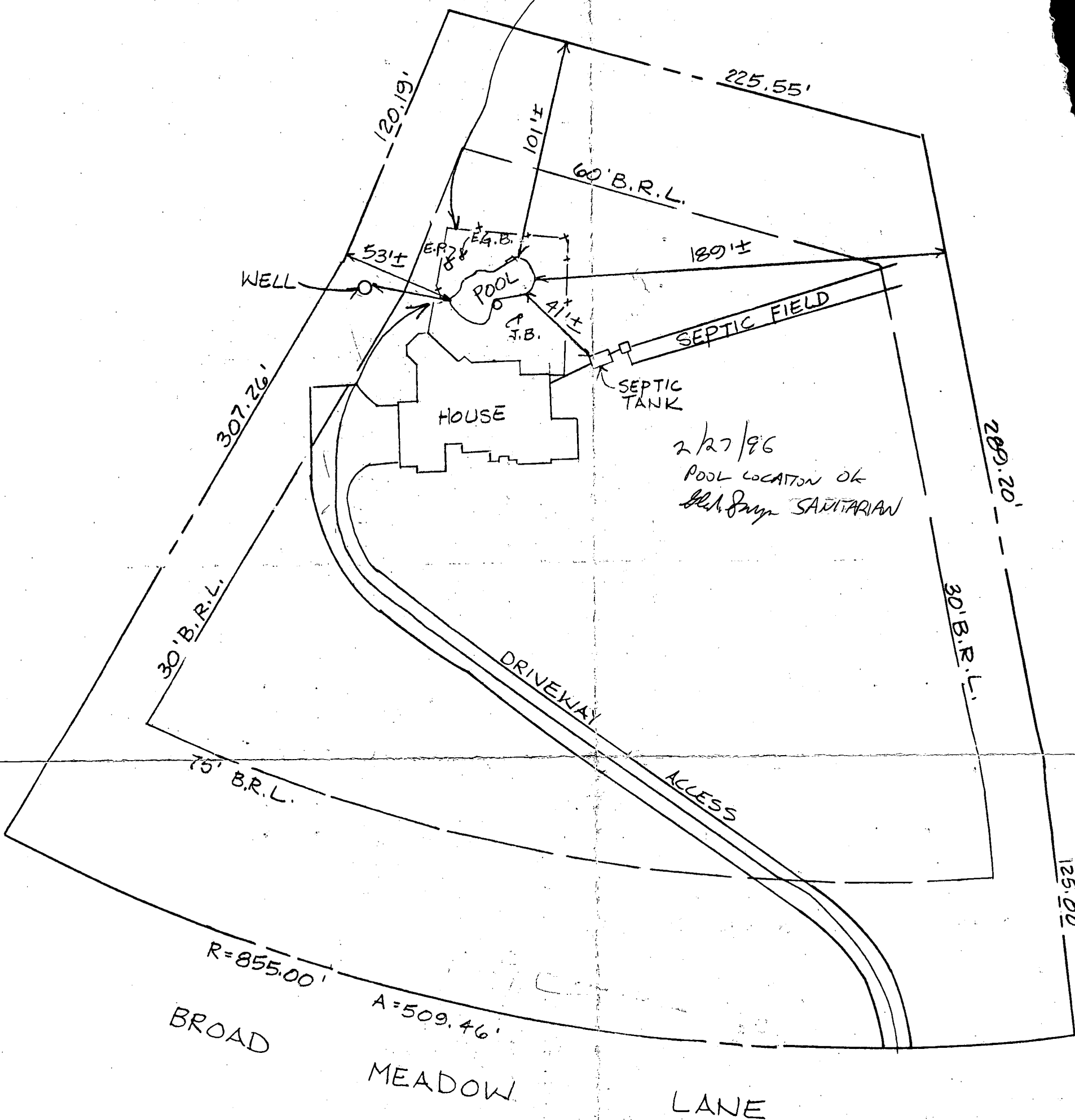
LOT 22
ADJ
SEPTIC
AREA



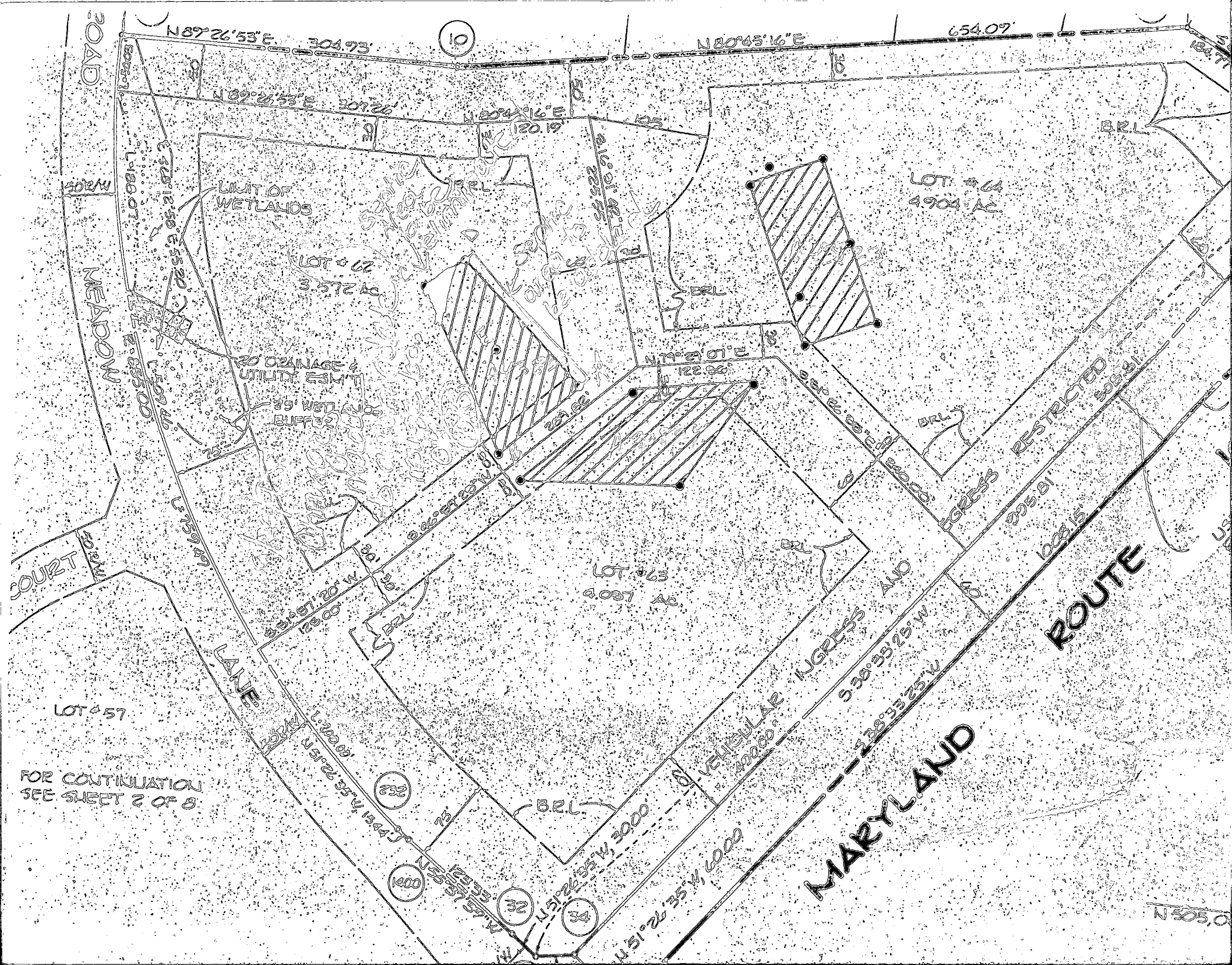
PROVIDE DRYWY ENTRANCE
PER HO. CO. STD RG.06

PLAN BY
CFS
1:50

PROPOSED 4' WOOD BOARD FENCE PER CODE



R=855.00'
A=509.46'
BROAD MEADOW LANE



FOR CONTINUATION
SEE SHEET 2 OF 8

LOT #57

LOT #62
3.572 AC

LOT #63
4.037 AC

LOT #64
4.904 AC

MARYLAND

ROUTE

LIMIT OF WETLANDS

20' DRAINAGE & UTILITY EASMENT

75' WETLAND BUFFER

VEHICULAR EGRESS AND INGRESS

RESTRICTED ACCESS

B.R.L.

B.R.L.

B.R.L.

B.R.L.

730

1000

37

34

10

N89°26'53"E 304.93'

N80°45'16"E 654.09'

N89°26'53"E 307.26'

N80°45'16"E 120.19'

E 525°12'58" 555.20'

E 81°52'47" 120.19'

N 77°28'01"E 122.88'

E 35°29'46" 150.94'

S 86°57'20"W 237.82'

S 51°26'55"E 240.44'

S 51°57'20"W 126.00'

E 35°29'46" 150.94'

L 200.00'

N 51°26'35"W 1344'

N 35°55'45" 173.94'

N 51°26'35"W 3000'

N 51°26'35"W 6000'

S 28°33'25"W 238.33'

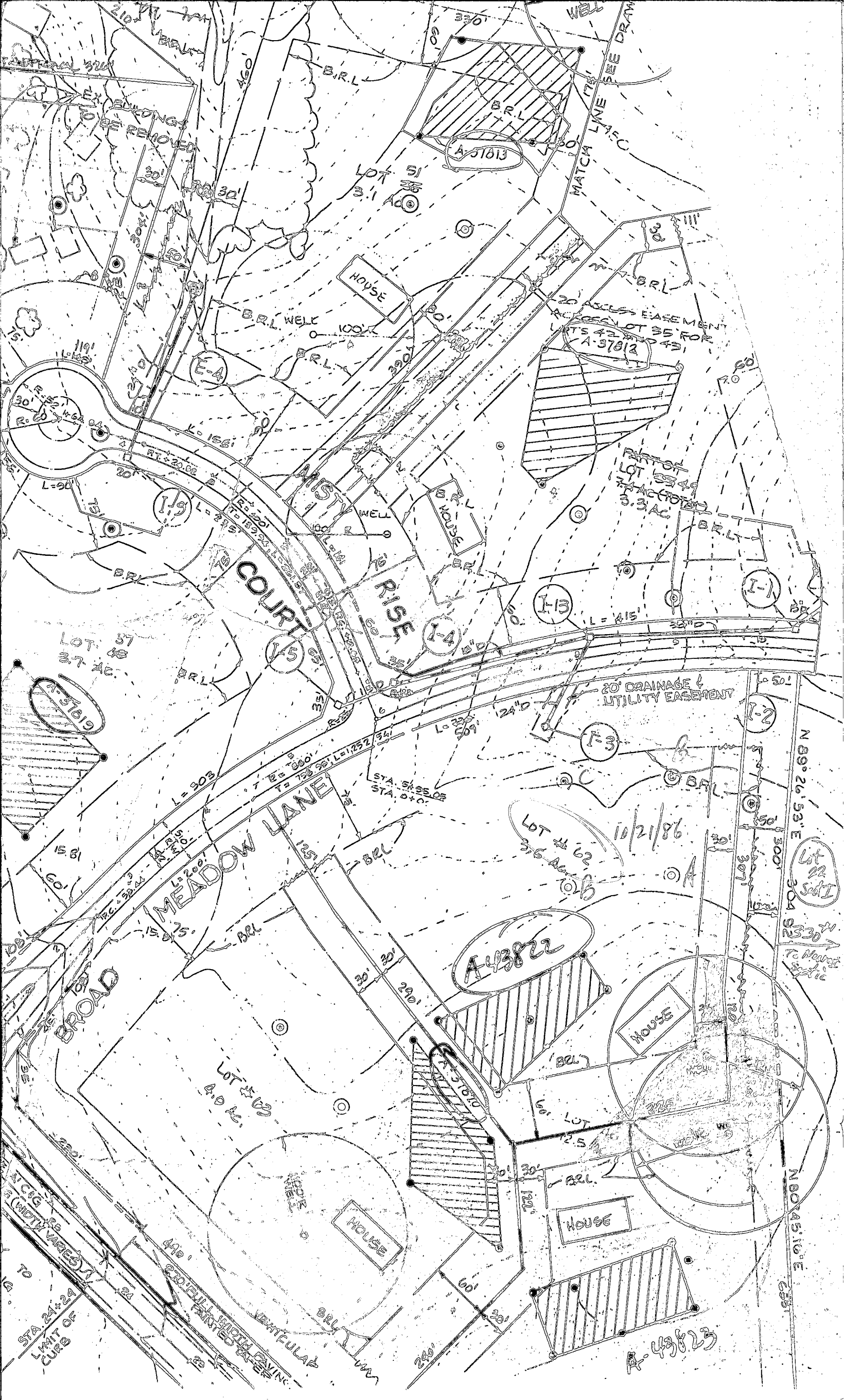
S 99°5'01" 1028.15'

N 505.0'

DRAIN

MEADOW COURT

COURT



EXISTING BUILDINGS TO BE REMOVED

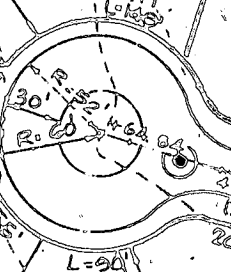
B.R.L.

A-37813

MATCH LINE SEE DRAWING

HOUSE

20' ACCESS EASEMENT
ACROSS LOT 35 FOR
A-37812



E-4

B.R.L. WELL

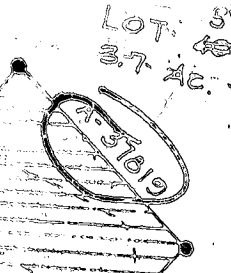
PORTION
LOT 53 & 49
3.3 AC

COURT RISE

HOUSE

I-13

I-17



LOT 57
3.7 AC

20' DRAINAGE &
UTILITY EASEMENT

MEADOW LANE

STA. 5+85 OF
STA. D+O.

LOT # 62
376 AC

10/21/86

N 89° 26' 53" E
304.92'
3330'
To Nearest
Metric

BROAD

A-43822

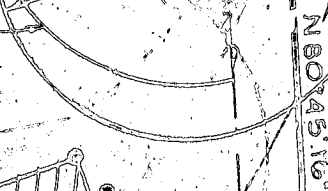
HOUSE

TO
LIMIT OF
CURB OF
STATION 24+20



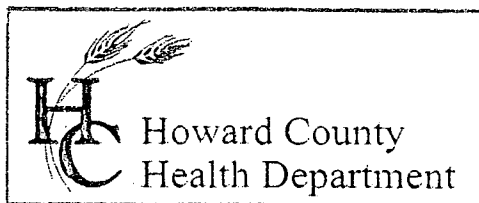
HOUSE

HOUSE



N 80° 45' 10" E
655'

A-43823



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(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

February 11, 2003

Mr. & Mrs. Mark Stilper
12006 Broad Meadow Lane
Clarksville, MD 21029

RE: **Replacement Well Issues**
12006 Broad Meadow Lane
Well Permit #: HO-94-3470

Dear Mr. Frazier:

This office is informing you that the well line for your replacement well was not inspected on 11/02/2002 due to inclement weather. The plumber or pump installer who was responsible for the installation of the well pump, well water line connection and related plumbing in the referenced replacement well, never called in another inspection. At this point in time, it's assumed that all the work has been covered without the final inspection.

This office is also requesting that you contact the Community Environmental Health Program at (410) 313-1773 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). **Currently, there is no charge for this sampling.**

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

If you have any questions, or would like to discuss these matters further please call me at (410) 313-1771. Thank you for your attention to these important matters.

Respectfully,

Kacie Noonan
Environmental Sanitarian
Well & Septic Program

Enclosure

cc: Community Environmental Health Program
File

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 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Robert L. Feezer Co. Inc Telephone #: 410-781-4655
Address: 6321 Barnett Avenue
Sykesville, 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): Robert L. Feezer License# 2122
*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. Licenses may be subjected to field verification.

Name of Property Owner: Mr. + Mrs. Mark Stilper Telephone #: 410-531-6595
Subdivision: Clearview Estates Lot #: 62 Well Tag #: HO-94-3470
Site Address: 12006 Broadmeadow Lane
Clarksville, Md. 21029

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Stante Make: Campbell Two piece watertight cap: Yes
Model #: SP4FOARL Model #: PA800 Screened, vented well cap: Yes
Pump Capacity 5 GPM Depth: 42" (36" min) Cap secured to casing: Yes
Well Yield: 2 GPM NSF approved: Yes Conduit min 18" B.G.: Yes
Depth of well encountered at time of pump installation: 80 (feet) Conduit secured to well cap: Yes
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt Yes

Piping to house House Connection
Type: polyethylene PVC sleeved to undisturbed soil at wall penetration: Yes
PSI: 200 (160 psi min) Approximate length of sleeve: 5
Depth of supply line: 42" (36" min) Sleeve caulked and sealed properly: Yes

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

Robert L. Feezer 11/7/02
Signature of company representative responsible for installation date

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

Date Insp. Requested: 11/21/02 Am Date Insp. Approved: _____
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 _____

11-21-02
-water in well area
need another insp
on dry day

(RN)

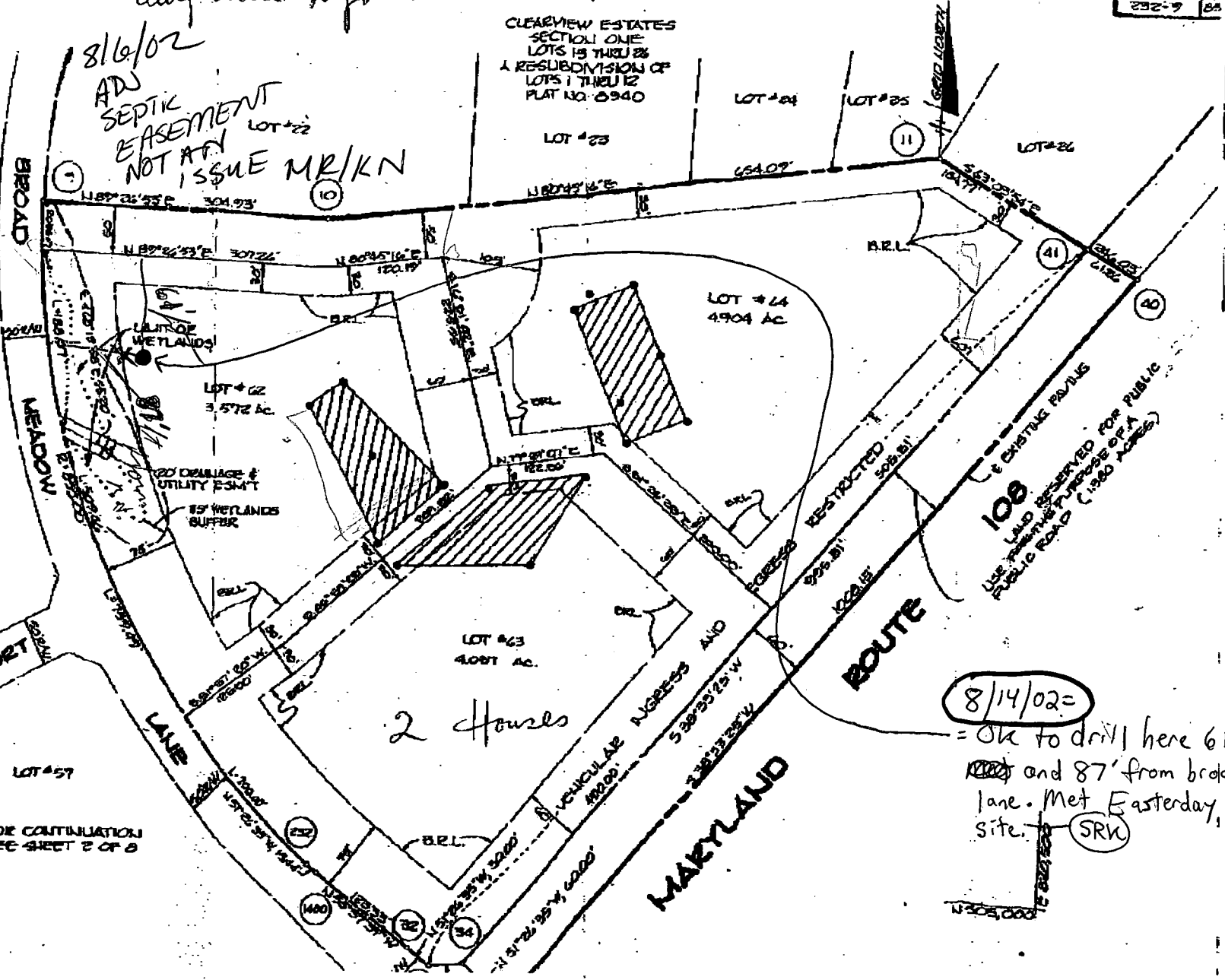
FROM: RASAQ ABU M.D., P.C. PHONE NO.: 301 854 5431
Apr 25 02 10:31a Patricia Miller 410.203-1319
May. 06 2002 10:09PM P1

Need address +
any other info on the lot

8/16/02
ADJ
SEPTIC
EASEMENT
NOT AT
ISSUE MR/KN

CLEARVIEW ESTATES
SECTION ONE
LOTS 13 THRU 26
& RESUBDIVISION OF
LOTS 1 THRU 12
PLAT NO. 0940

NO	R
232-9	84



NOT TO SCALE Health Dept. Copy

C1 4564

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A#43822

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

ST/CO USE ONLY. DATE RECEIVED

DATE WELL COMPLETED 10/19/94

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-02112

OWNER S.S.R.R. last name BROAD MEADOW LANE first name TOWN CLARKSVILLE SUBDIVISION CLEARVIEW SECTION LOT 62

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entry for Overburden Gray Rock and water encountered at 230 & 370'.

GROUTING RECORD form including fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL, CEMENT, BENTONITE CLAY, NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form including fields for casing types (ST, CO, PL, OT), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form including fields for screen type (ST, BR, HO, PL, OT), SLOT SIZE, DIAMETER OF SCREEN.

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED (Y/N).

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) Allen Cuyler

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

Table with columns for E A C H I N G S C R E E N and rows for screen depth (1-3) and slot size.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST form including fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL, TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form including fields for DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT, LAND SURFACE.

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). NA

B 1 **2191**

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
W 517374 please type

STATE PERMIT NUMBER

HO-94-3470
fill in this form completely

Date Received (APA)
07 22 02

OWNER INFORMATION **9136**

15 Last Name **STIELPER MARK** Owner First Name 34
36 Street or RFD **12006 BROADMEADOW LANE** 55
57 Town **CLARKSVILLE, MD 21029** 70 State 72 Zip 76

B 3 LOCATION OF WELL
8 COUNTY **Howard** 21 CC#
23 SUBDIVISION **Clearview Estates** 42
SECTION 44 46 LOT **62** 48 50
52 NEAREST TOWN **Clarksville** 71
MILES FROM TOWN (enter 0 if in town) **1** M I 73 76 77 78

DRILLER INFORMATION
76 Driller's Name **George F. Easterday** M D License No. **060**
Firm Name **L. Franklin Easterday, Inc.**
Address **9265 Brown Church Rd., MT. Airy, Md. 21771**
Signature *George F. Easterday* Date **7/19/2002**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
12006 Broadmeadow Lane
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **75** 37
DISTANCE FROM ROAD **75** Ft. ENTER FT. OR MI 38 39
TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION
1 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME COUNTY NO. **A 43822**
STATE SIGNATURE **Steven R. Krieg** INSERT S → 41
DATE ISSUED **08 14 02** EXP. DATE **08 14 03**
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID **500** 000 EAST GRID **810** 000
50 55 57 63

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

APPROXIMATE DEPTH OF WELL **300** FEET 24 28
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)
37 CABLE REVerse-ROtary DRive-POINT
other

REPLACEMENT OR DEEPENE D 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 DEEPEEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENE D (IF AVAILABLE) 41 **HO-94-0216**

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER **G**
PERMIT No. **HO-94-3470**
70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. wells
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E **810**
N **500**
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION **14 G 5**
Clarksville
Broadmeadow Lane
108

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

C1 14218 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.

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

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED 9/5/02 Depth of Well 800 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3470

OWNER STILPER, MARK STREET OR RFD 12006 BROAD MEADOWS TOWN CHARLKVILLE SUBDIVISION CHARLKVILLE SECTION A LOT 62

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. Rows include Top Soil, Brown shale, sand stone, Gray mica, Brown mica, Gray mica, Gray mica Flint, Gray mica, Gray mica Flint, Gray mica, Gray mica Flint, Gray mica, Gray mica Flint, Gray mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 13 NO. OF POUNDS 1300 GALLONS OF WATER 78 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 26 ft.

CASING RECORD

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 29

Table for OTHER CASING (if used) with columns for diameter and depth.

SCREEN RECORD

screen type or open hole (ST) (BR) (HO) (PL) (OT)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER 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...

DRILLERS LIC. NO. 1 MW 040 Sign: George F. Kestelary

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 JS D 038 Sign: Bruce Shampson

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

C 2 DEPTH (nearest ft.)

Table with columns T, E, A, C, H, S, C, R, E, E, N and rows for depth measurements (800 ft).

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 2. METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 5 ft. WHEN PUMPING 289 ft. TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES) (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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 2 (nearest foot)

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)