

12/14/95
1.00 C/D

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56371 A

A 49337F

DISTRICT 5

DATE 12-12-95

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~461-2938~~ 313-2640

DATE SYSTEM APPROVED 12/19/95

INSPECTOR M. R. Fikin

INDEXED

Adamson Plumbing & Heating IS PERMITTED TO INSTALL ALTER

ADDRESS 7825 McClellan Avenue, Boonsboro, Maryland 21713 PHONE (301)831-7497

SUBDIVISION Fulton Manor LOT 40 ROAD 12325 Pleasant View Drive

PROPERTY OWNER CST/LC
T/A Jamestown Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 65 feet up the right lot line (287.18) and 95 feet off that same lot line when facing the lot from Pleasant View drive. Run trenches on contour towards the front lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 12/8/95 DKS

PLANS APPROVED BY Amy McMillen DATE 12/19/94

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

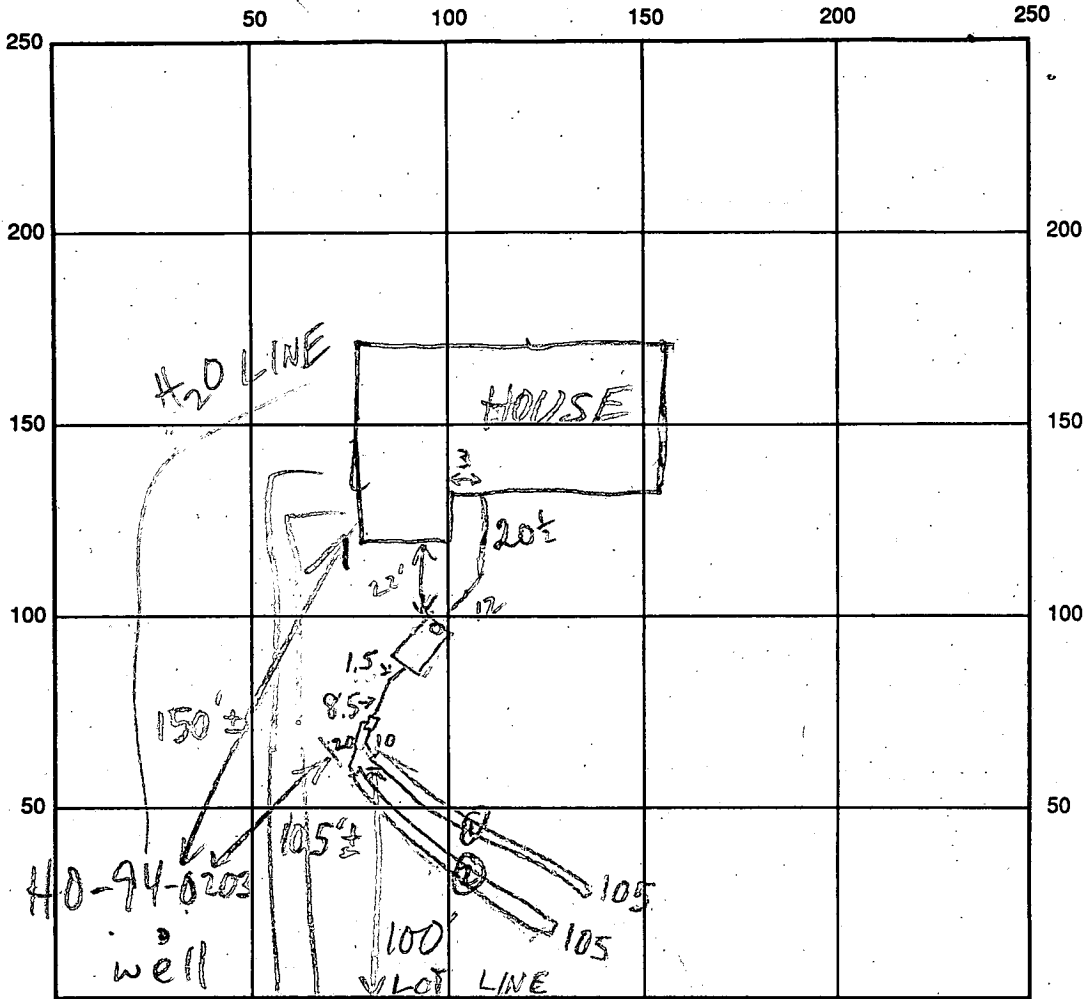
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMIT SIGNED
AND RETURNED 4/18/97
Serial # B00 104852 -
addition - deck

A
49337F



PLEASANT VIEW DR INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL-OK CLEANOUTS S.T. -OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TITLE DEPTH 8 1/8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 4 1/4 FT. TOTAL LENGTH 2@105 FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 2@420 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA 840 SQ. FT.

REMARKS: 12/14/95 D.B. NOT @ HIGHEST PART OF SDA BUT FIRST TRENCH
WILL BE @ HIGHEST LOCATION - CONTINUE MR/KS
12/15/95 OK TO STONE TRENCHES; TRENCHES DEEPER THAN
SPECS, BUT ACCEPTED MR
12/18/95 OK TO COVER ALL MR

DATE SYSTEM APPROVED 12/19/95 INSPECTOR M. Ripkin

APPLICATION

PERCOLATION TESTING

A 49337F

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT Fifth

DATE JUNE 8, 1993

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER OTHA D. UPGHURCH CST/LC HA Jamestown Builders

ADDRESS 457 Old Orchard Circle PHONE _____

AGENT OR PROSPECTIVE BUYER SAME AS OWNER

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION UPGURCH PROPERTY Fulton Manor LOT NO. 40

ROAD AND DESCRIPTION 12276 Hall Stoe Road (12325 Pleasant View Drive)

HIGHLAND MARYLAND

BLDG. PERMIT SIGNED SFD-4Bedroom

~~NOT~~ RETURNED 9-22-95

Serial # 61618

TAX MAP 40 PARCEL # 164 & 205

SIZE OF LOT 53,500⁰¹ TYPE BLDG. SINGLE FAMILY DWELING
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

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

THIS IS NOT A PERMIT

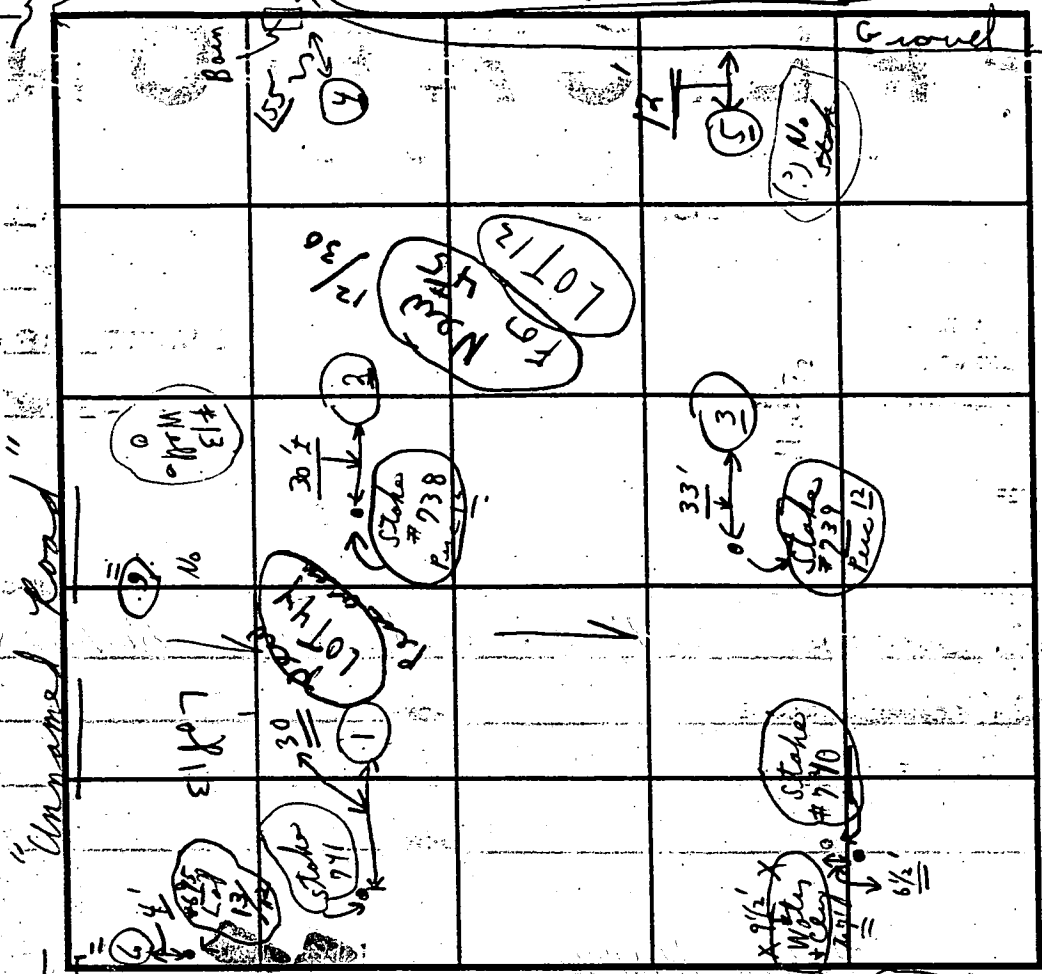
#49337 F

COUNTY #
LOT #12
SOIL PROFILE

Hole 0
0'-4 1/2'
Clay
4 1/2' to
Sandy
Loam
13'

Hole 2
0-4'
clay
4'
Sandy
Loam
12'

Hole 3
0'-5'-4"
clay
5'-4"
Sandy
Loam
12 1/2'



SOIL PROFILE
Hole 4
0' to 4 1/2' (dead)
clay
4 1/2' to
LOAM
to
12'-3"

6/23
Moving
12+13
per cross

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|-----------|-----------|--------------|-----------|---------------|----------------|-------------------------------------|--------|
| | | | START | STOP | START | STOP | |
| 6/23/93 | 1 | 4 1/2' | 10:02 | 10:05 | 10:05 | 10:12 | 7 min |
| Wednesday | near #741 | 13' | 0'-4 1/2' | 4 1/2' to 13' | clay | Sandy Loam | ok |
| | 2 | 4' | 10:15 | 10:18 | 10:18 | 10:25 | 7 min |
| | near #738 | 12' | 10:14 | 10:16 | 10:14 | 10:18 | 2 min |
| | 3 | 5'-4" | 10:27 | 10:31 | 10:31 | 10:43 | 12 min |
| | near #739 | 12 1/2' | 0'-5 1/2' | 5'4"-12 1/2' | clay | Sandy Loam | |
| | 4 | 0' to 4 1/2' | No stake | 12'-3" | Clays | Viewed | |
| | 5 | 4' | 10:33 | 10:35 | 10:35 | 10:41 | 6 min |
| | No stake | 12'-3" | | | (Loam) | 0'-4' clay 4 1/2' to 12'-3" LOAM | |

REMARKS Tests in open field; (Tests per stake are not)
TYPE OF SOIL Loam below clay
TESTED BY C.R.D. ALSO PRESENT {K. Kitterman} (10:00-)
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 min TRENCH WIDTH 2'
INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 7' SQ. FT./BEDROOM 240 (10:00-)

Now #40

A 47337 J

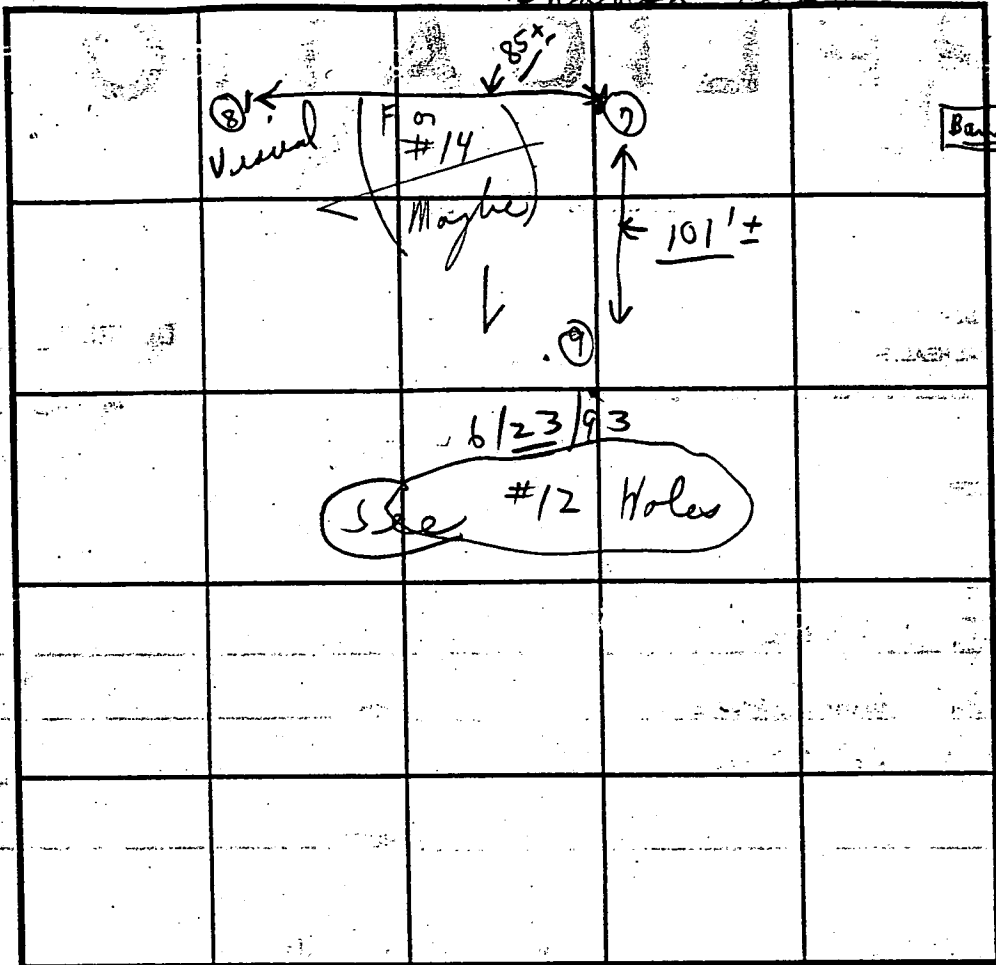
Unnamed Road

Hole
sh
K

COUNTY #
LOT #13
SOIL PROFILE
Hole ⑥

0' to 5'
Clay
5' to
Sandy
Loam

DRY
13'



SOIL PROFILE
Hole ⑨

0'-3 1/2'
Clay
3 1/2'
(Loam)

11' ±

Hole ⑦

#695
0' to 4'
Clay
4'
Sandy
Loam

11'

Hole ⑧

0' to 4'
Clay
4' to
Sandy
Loam

12 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

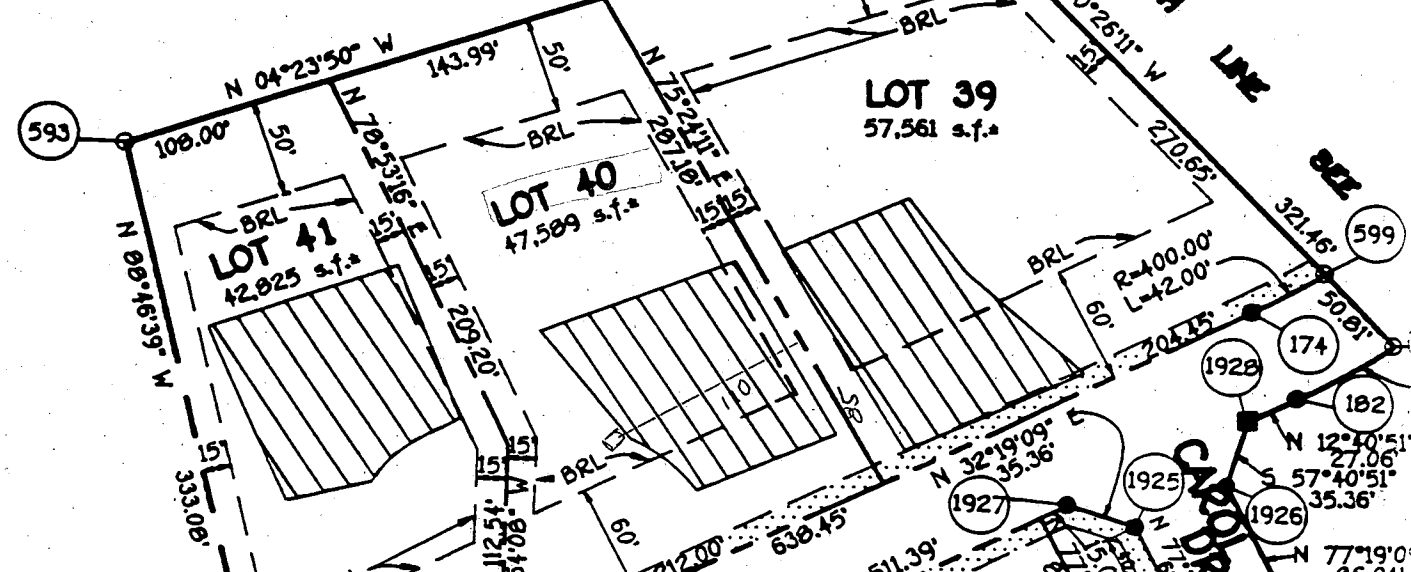
| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|-----------|---------------------|----------------|---------|-------------------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 6/23/93 | ⑥ | 0'-5' (Clay) | | | | | |
| Wednesday | No test | 13' | 0'-5' | Clay (Sandy Loam) | | | |
| | ⑦ | 4' | 11:07 | 11:10 | 11:10 | 11:16 | 6 m |
| | #695 | 11' | 0'-4' | Clay | | | |
| | | | 4'-11' | Sandy Loam | | | |
| See Lot | #12 for other holes | 0' - 1' | | | | | |
| | ⑧ | 0-4 clay | | | | | |
| | | 12 1/2' | 0'-4' | Clay (Visual) | | | |
| | ⑨ | 3 1/2' | 11:13 | 11:15 | 11:15 | 11:20 | 5 m |
| | | 11' ± (Recall) | | | | | |

See #12 Lot Test

REMARKS: Tests in open; tests per stake or noted
 TYPE OF SOIL: Loam below clay
 TESTED BY: C.B.D.
 ALSO PRESENT: {0 Ketterman + brass}
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

MARYLAND STATE
GRID NORTH (NAD '83)

MATCH LINE



10' PUBLIC TREE MAINTENANCE EASEMENT

10' PUBLIC TREE MAINTENANCE EASEMENT

5' TEMPORARY REVERSIBLE SLOPE EASEMENT

1" OPEN END IRON PIPE FOUND

VIEW
L=245.08'
L=273.92'

LOT 4
58,736 s.f.

LOT 6
59,422 s.f.

LOT 7
45,432 s.f.

OPEN SPACE LOT 5

TOTAL AREA = 3.685 AC.
OPEN SPACE DEDICATED TO FULTON MANOR HOMEOWNER'S ASSOCIATION CONSERVATION EASEMENT

OPEN SPACE LOT 5

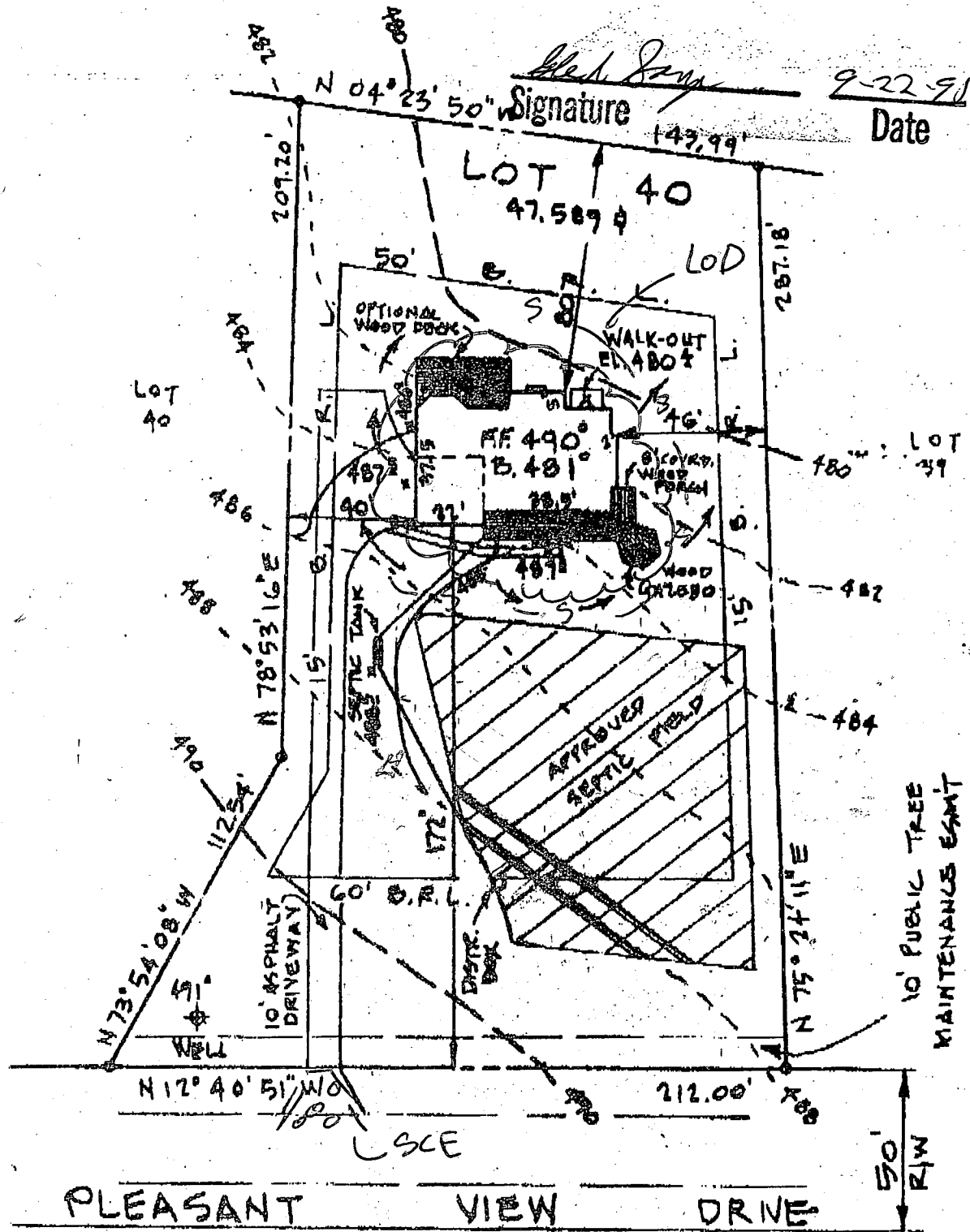
PROPERTY CARLETON & HEINICK LIBER 312, FC

1 1/4" Iron Pipe Found

Approved Septic System Plan
Howard County Health Department

John L. Schneider
Signature

9-22-95
Date



PLEASANT VIEW DRIVE

SEPTIC DATA

| | |
|----------------|------------------|
| HOUSE FIN. FL. | 491 [±] |
| " BSM'T | 481 [±] |
| " SEWER INV. | 487 [±] |
| SEPTIC INV. IN | 486 [±] |
| TANK INV. OUT | 486 [±] |
| FIN. GR. | 488 [±] |
| DISTR. INV. IN | 485 [±] |
| BOX FIN. GR. | 480 [±] |
| WATER EX. GR. | 491 [±] |
| WELL FIN. GR. | 491 [±] |

NOTE:
TRENCH LENGTH TO BE DETERMINED
AT TIME OF SEPTIC PERMIT ISSUANCE.

ENGINEER
JOHN L. SCHNEIDER, P.E.
100 N. ROLLING RD.
CATONSVILLE, MD. 21228
410-744-1945

0296-26

1" = 58'

118-95
WPI anytime
HO-94-0263
NOT 006-941

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Receipt # _____ Date _____
Name of Installer WILCOUGHBY Telephone 781-7051
License Number #6992
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner JAMESTOWN BLDS Telephone 381-9300
Subdivision FULTON MANOR Lot # 40 Well Tag # HO-94-0203
Site Address 12325 PLEASANT VIEW DR.

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make SACUTTI
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes _____ No
6. If Yes, is low pressure cutoff switch installed? Yes _____ No
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other TAPE

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220

Pitless Adapter
1. Make HARVARD
2. Model # _____
3. Depth 4 FT

Tank
1. Capacity 40gal.
2. Pressure relief valve? YES

Piping
1. Type CRESLINE
2. Size 1"
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 4 FT.

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

WELL LINE OK
3 1/2 - 4' B.G.
MR 12/14/95

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Chris J. Williams
Date: 12/10/95

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

PROPERTY OF
VALLEY BROOK COMMUNITY
CHURCH, INC.
L. 2212 F. 18
ZONED RR-DEO

9-7-94
259' from long garage
to stake
253' from barn to stake
well site OK
ALM

24' EASEMENT FOR
INGRESS AND EGRESS
TO PROPERTY OF
MAX A. SMITH

25' WETLAND
BUFFER

WETL
(0.54)

75' STREAM
BUFFER

LANDSCAPING PERIMETER No. 11

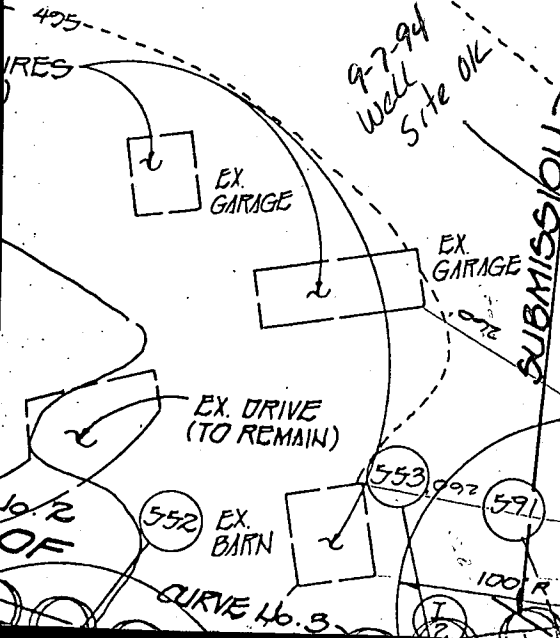
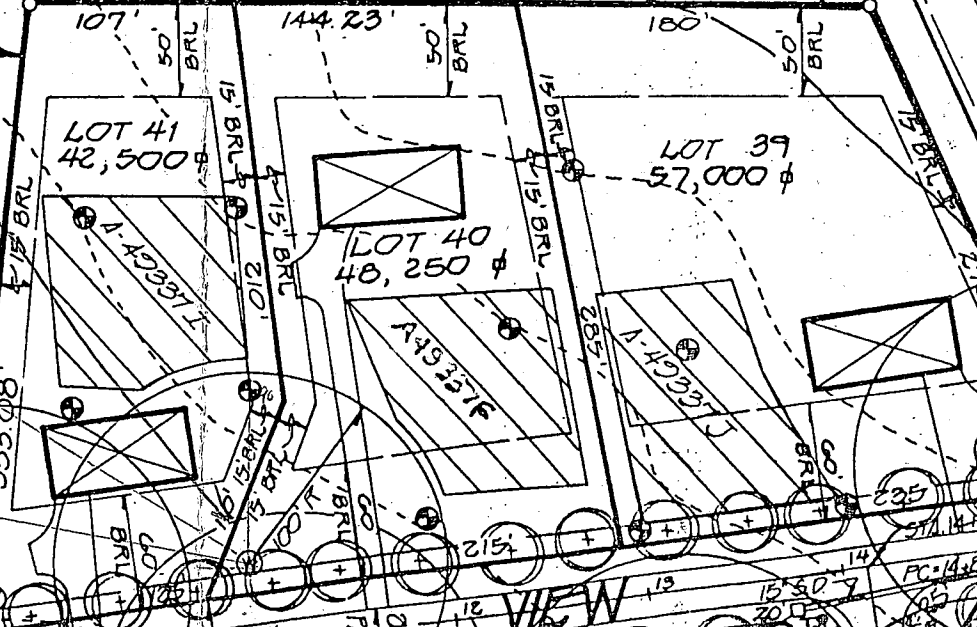
TYPE 'A'

LIMIT OF SUBMISSION

2 Ac. PARCEL CREATED
BY ADJOINER TRANSFER
(PART OF THIS SUBMITTAL)

9-7-94
Well
Site OK

SUBMISSION



No. 2
OF
CURVE No. 3

EMERGENCY/TEMP NO. IF ANY

B 1 **1247**

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-0203

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

please print or type

fill in this form completely

Date Received (APA)

082594

OWNER INFORMATION

FISHER COLLINS CARTER

9101 BALTA MATL PIKE

ELLICOTT CITY MD 21042

DRILLER INFORMATION

Ralph MAYNE

MSD/MGD/MWD

116

Driller's Name **Ralph MAYNE (well drilling)**

Firm Name **9120 Brown Church Rd. Mt. Airy**

Address **Ralph Mayne 8/19/94**

Signature

Date

B 3

LOCATION OF WELL

HOWARD

UP CHURCH PROP

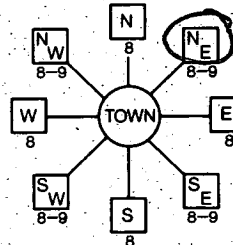
SECTION **40** LOT **40**

HIGHLAND

MILES FROM TOWN (enter 0 if in town) **2** MI

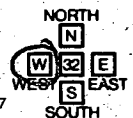
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



PLEASANT VIEW DR.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD **25**

ENTER FT OR MI **FT**

TAX MAP: _____ BLK: _____ PARCEL _____

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co.

A-49337F

COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S _____

DATE ISSUED **90894** **Amy McMillen** **9/8/95**

COUNTY SIGNATURE EXP. DATE NORTH GRID **488000** EAST GRID **814000**

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

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) _____

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

APPROX. PERMIT NUMBER **GAP**

FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **HO-94-0203**

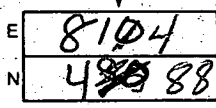
SPECIAL CONDITIONS

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

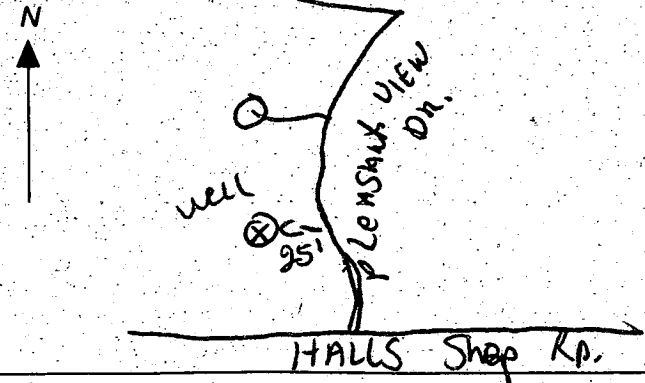
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. **well**
 - 2.
 - 3.
- WRITE THE BOX NUMBER FROM THE MAP HERE



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



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-0203
 Location of property (road) Picasant View DR
 Subdivision UPCHURCH PROP Lot 40 Block _____ Plat _____ Sec. _____
 Well Driller RALPH MAYNE Owner FISHER COLLINS' CARTER

Depth of well 205 #
 Distance of measuring point (M.P.) above ground 2 #
 Static water level (S.W.L.) below M.P. 23 #

I. High rate pumping -- reservoir drawdown

Time pump started 8:45 Pumping rate 10 GPM
 Total time 15 min to reach pumping water level 32 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 I gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) | |
|-------------------------------|------------------------|--|---|--------------------------------------|--|
| 9:00 | 32 # | 6 Sec | Flow meter reading column is crossed out with a large X. | 10 GPM | |
| 9:15 | 32 # | 6 Sec | | 10 GPM | |
| 9:30 | 32 # | 6 Sec | | 10 GPM | |
| 9:45 | 32 " | 6 " | | 10 " | |
| 10:00 | 32 " | 6 " | | 10 " | |
| 10:15 | 32 " | 6 " | | 10 " | |
| 10:30 | 32 # | 6 Sec | | 10 GPM | |
| 10:45 | 32 # | 6 Sec | | 10 GPM | |
| 11:00 | 32 # | 6 Sec | | 10 GPM | |
| 11:15 | 32 " | 6 " | | 10 " | |
| 11:30 | 32 " | 6 " | | 10 " | |
| 11:45 | 32 # | 6 Sec | | 10 GPM | |
| 12:00 | 32 # | 6 Sec | | 10 GPM | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

HD-224 34 casing 31 open 9 bags

C1 4554

SEQUENCE NO. (DENY 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 A49337F

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 22 205 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-0203

OWNER Fisher Collins Carter last name Pleasant View Dr first name TOWN Highland SUBDIVISION Upchurch Prop SECTION LOT 40

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, Sandy, Sandstone, Micka, Sandstone, Micka.

GROUTING RECORD WELL HAS BEEN GROUTED (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 to 31 ft.

CASING RECORD casing type's insert appropriate code below MAIN CASING TYPE PL 6 24 70 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

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

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

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED yes (Y) no (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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT NO. 116 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.) 1 40 32 205 21 23 24 26 30 32 36 38 39 41 45 47 51 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 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 23 WHEN PUMPING 32 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: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

