

1-20-98  
10:00 C.O.  
1/22/98  
C.O. 11-12  
1/26/98  
10-11  
later

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 59315

A 49645-K

DISTRICT 4th

DATE 1/16/98

DATE SYSTEM APPROVED 1/31/98

INSPECTOR ALM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

04-359313  
INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 558-R Obrecht Rd, Sykesville, Md 21784

PHONE 410-795-5674

SUBDIVISION Cattail Woods, Sec. II LOT 28

ROAD 1716 Cattail Woods Lane

PROPERTY OWNER Pulte Home Corp.

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 5 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 5 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 107 feet up the right (265.29') and 70 feet off that same lot line as seen when facing the lot from Cattail Woods Lane. Run

trenches on contour first towards the right lot line and then in both directions.

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

\*\*\* MAINTAIN AT LEAST 100 FEET FROM WELL TO SEPTIC \*\*\* OK 10/24/97 KM

PLANS APPROVED BY Kim Maiste

DATE 10/23/97

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)

BLDG PERMIT ~~SEWER~~  
AND REQUIRED 1/16/98  
B00131390 Deck

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

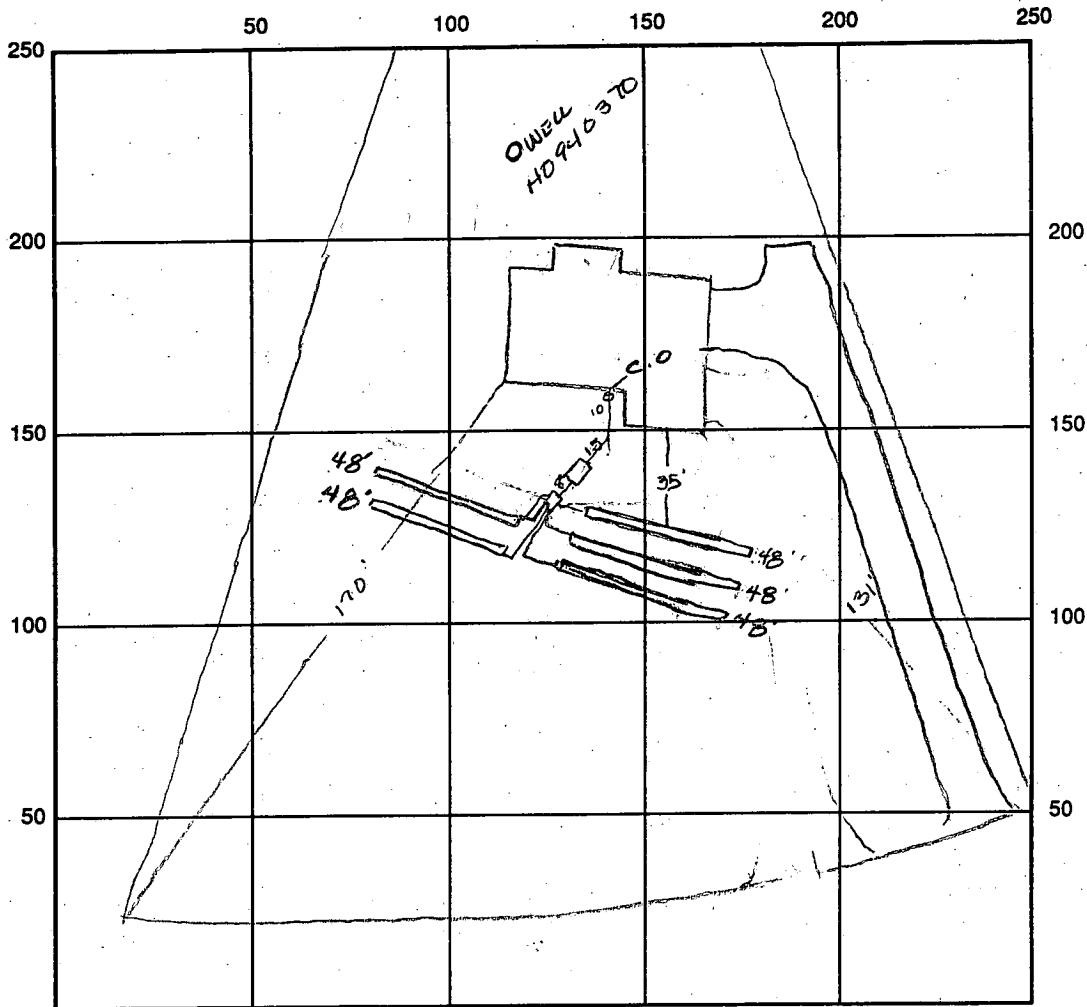
PERMIT VOID AFTER TWO YEARS

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**

A  
49645-K



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1250 gal CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK bath is in

DRAIN FIELD/TITLE DEPTH 7.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 5.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.  $\frac{240}{3}$

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

ABSORBENT AREA — SQ. FT.

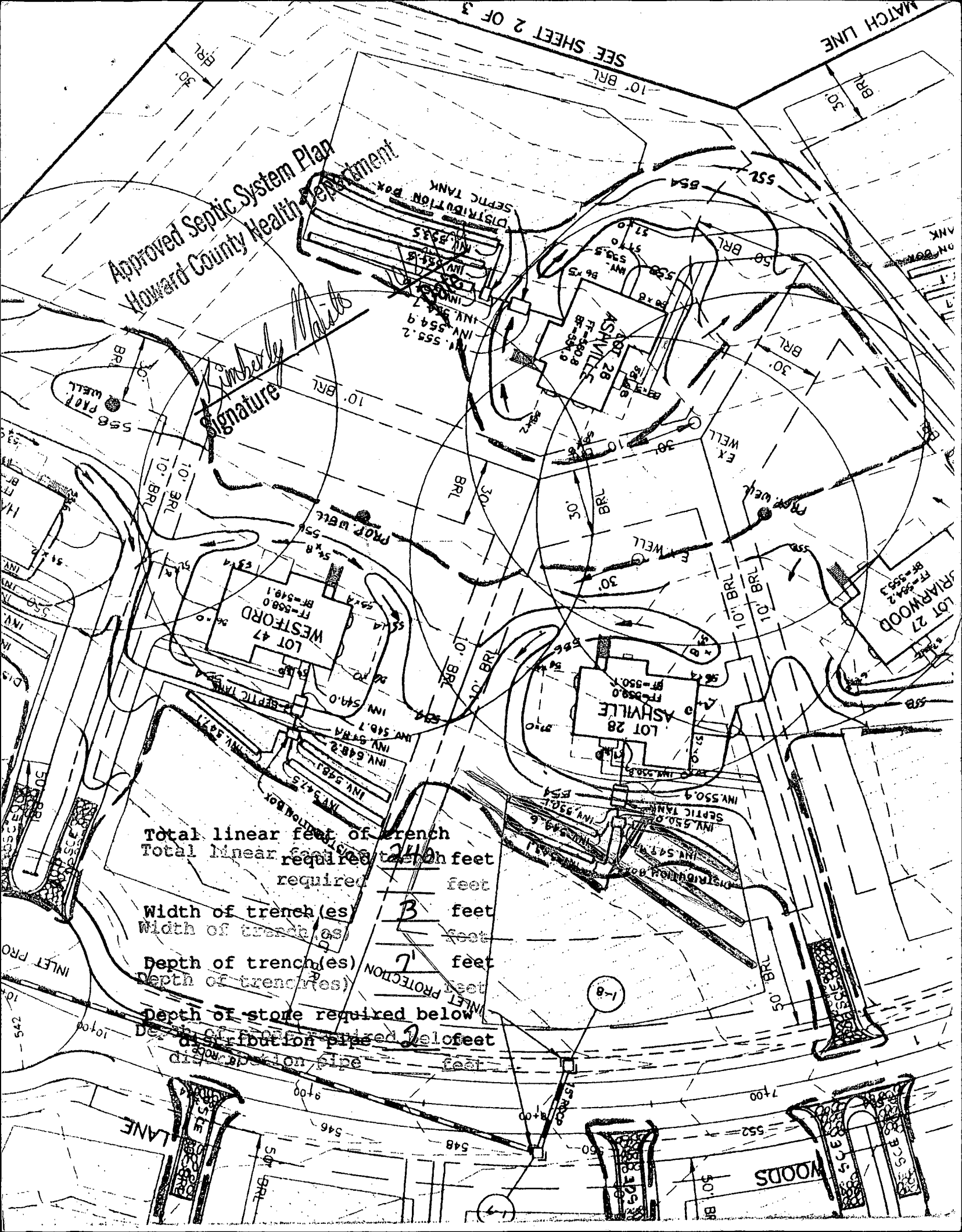
REMARKS: 1-20-98 Plan shows 1.5 to 2.0' of fill - site conditions indicate 4' of fill - Adjustment to SAA will be necessary - see approved BP plan House has not moved ALM

1/22/98 WPI OK 4' below grade ALM

DATE SYSTEM APPROVED 1/31/98 INSPECTOR A M Mello

Approved Septic System Plan  
 Howard County Health Department

*Signature*



Total linear feet of trench required 2410 feet  
 Total linear feet of trench required 2410 feet  
 Width of trench (es) B feet  
 Width of trench (es) 6 feet  
 Depth of trench (es) L feet  
 Depth of trench (es) 4 feet  
 Depth of stone required below inlet protection 2 feet  
 Depth of distribution pipe 2 feet  
 Depth of distribution pipe 2 feet

MATCH LINE

SEE SHEET 2 OF 3

LOT 27 SHARWOOD

LOT 28 ASHVILLE

LOT 47 WESTFORD

LANE

WOODS

# APPLICATION

## PERCOLATION TESTING

A 49645 K

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

DISTRICT 4th

DATE 9/30/93

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 ~~Parcel 137, Inc.~~ Pulte Home Corp

ADDRESS 15298 Union Chapel Road Woodbine, MD 21797 PHONE (410) 442-2101

AGENT OR PROSPECTIVE BUYER Engineer: TSA Group, Inc.

ADDRESS 8480 Baltimore National Pike, Ste. 418  
Ellicott City, MD 21043 PHONE (410) 465-6105

### PROPERTY LOCATION:

SUBDIVISION Cattail Woods - Section 2 LOT NO. 28

ROAD AND DESCRIPTION End of Brittle Branch Way (1716 Cattail Woods Lane)

TAX MAP 7 PARCEL # 137

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family Dwelling - 4 Br  
**BLDG. PERMIT SIGNED AND RETURNED 11-23-97**  
Serial # B7108245  
(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. Parcel 137, Inc. Bruce B. Benda President  
(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

COUNTY # \_\_\_\_\_

SOIL PROFILE

0'


SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

# APPLICATION

PERCOLATION TESTING

A 49645R

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE 9-27-93

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 Bruce Brendle

ADDRESS 15298 Union Chapel Rd PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER Joint Venture

ADDRESS 1555 Union Chapel Rd PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Cattail Woods Sec II LOT NO. 28

ROAD AND DESCRIPTION Rt 97 sld

TAX MAP 7 PARCEL # 137

SIZE OF LOT 1 ACRE TYPE BLDG. SFD  
(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 \_\_\_\_\_

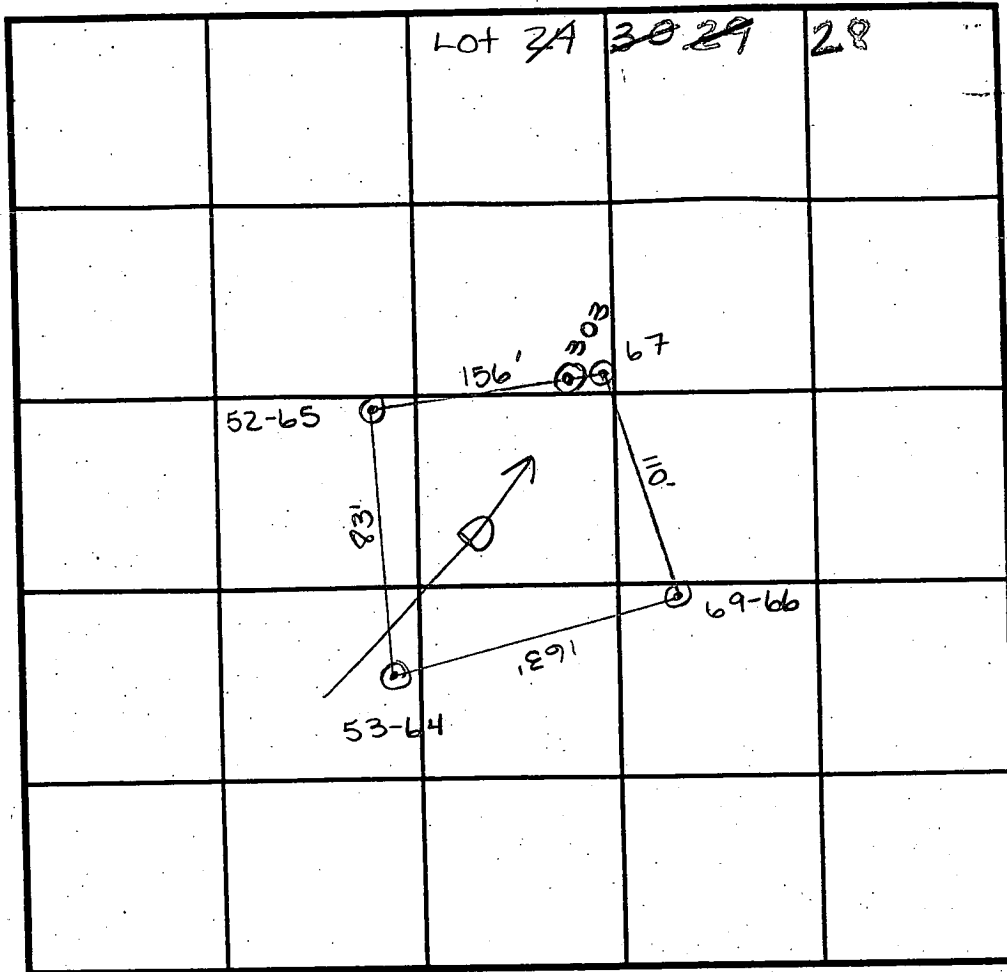
REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

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

AH9645K  
COUNTY #



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE\*  
52-65  
0' topsoil  
6" brn C  
3' red Sil w/ some Saprolite and few shale frags  
12'  
303  
5' yell/brn C  
brn Sil  
OK  
12'

SOIL PROFILE  
67  
10' topsoil  
6" yell/brn C  
4' dk reddish brn w/ some orange Sil  
12'

66-69  
1' red C  
yell/brn  
(red streaks)  
Sil  
7' Saprolite  
13'

53-64  
5' yell/brn CL  
red Sil w/ some shale through hole  
13'

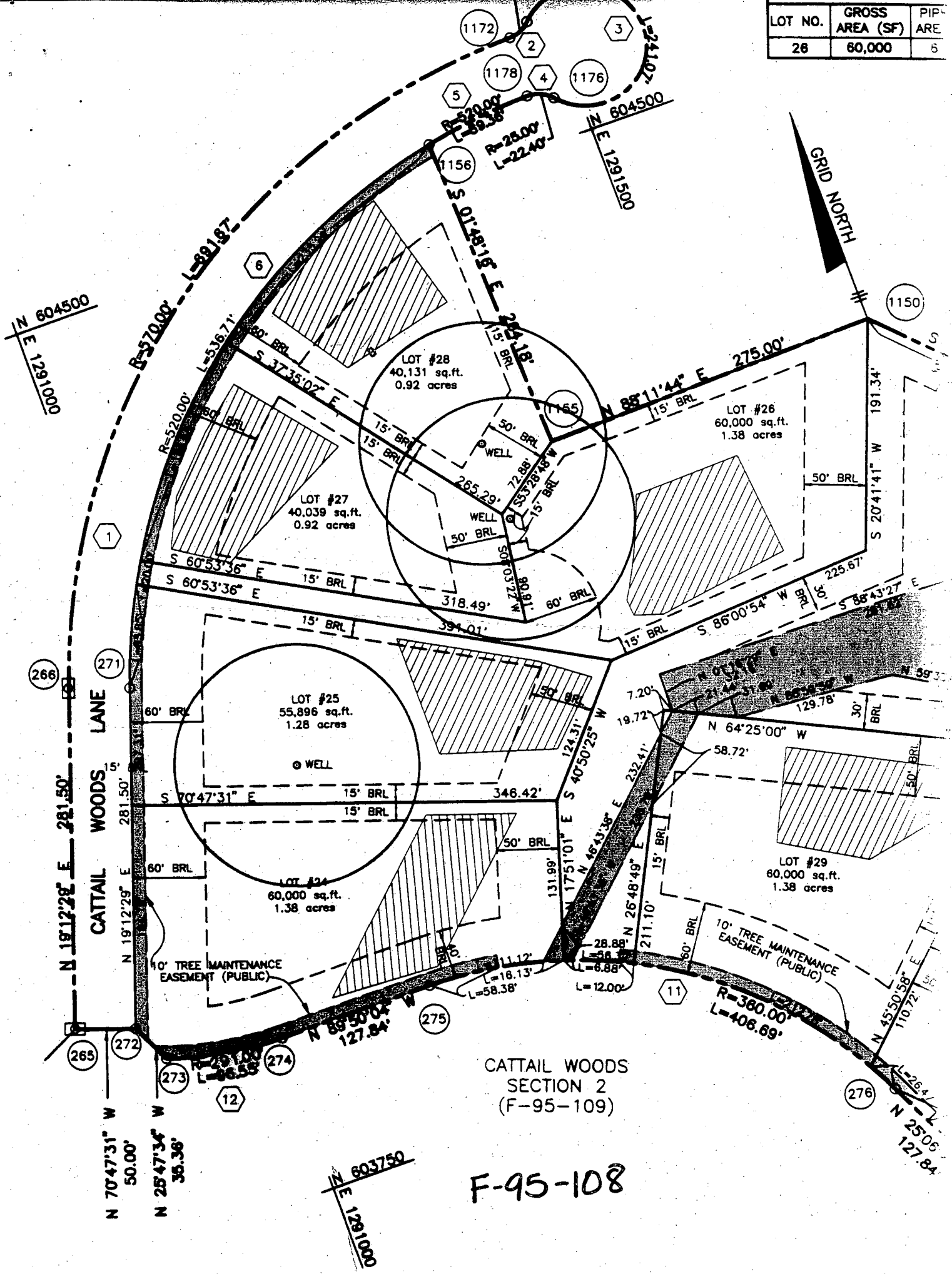
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/1/93	67	4 1/2' / 12'	2:41	2:43 <sup>30</sup>	2:43 <sup>30</sup>	2:48	4 1/2 min
	66-69	2 1/2' / 13'	2:43 <sup>15</sup>	2:45	2:45	2:47 <sup>30</sup>	2 1/2 min
	53-64	5 1/2' / 13'	2:31 <sup>45</sup>	2:36	2:36	2:40	4 min
	52-65	3' / 12'	2:26 <sup>30</sup>	2:32	2:32	2:38	6 min
4/26/94	303	Visual	to 12 (w/ test)		---		OK

REMARKS Hold low holes for wet season perc  
 TYPE OF SOIL Glenelg Loam  
 TESTED BY Amey McMillan / Craig Williams ALSO PRESENT B Sanders  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 min TRENCH WIDTH 3'  
 INLET DEPTH 5 MAXIMUM BOTTOM DEPTH 7 SQ. FT./BEDROOM 180 ft<sup>2</sup>





LOT NO.	GROSS AREA (SF)	PIP ARE
26	60,000	5



CATTAIL WOODS  
SECTION 2  
(F-95-109)

F-95-108

N 603750  
E 1281000

APPLICATION

HOWARD COUNTY

# PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT  
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

16825  
Bal 4134  
off 3,475  
3,931  
B00108245

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

1717 Cattail Woods La.  
Ellicott City, MD 21043

32550

GRADING/SEDIMENT CONTROL  YES  NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

Model: Ashville  
Plan on File  
2 Sty, full bsmt., 10R, 2FB, 3HB  
FP, Garage, (GBR), Opt. Deck, Fln. L.L.

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
28	137	2		18		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Cattail Woods		KC	7	4	6040	

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
4,344	52'	46'	10'
	52'	30'	10'
	52'	30'	10'

OWNER NAME AND ADDRESS  
Pulte Home Corp.  
1501 S. Edgewood St. Suite X  
Balto., MD 21227

PHONE NO.  
410-644-5603

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	1801		ASP
ROOMS	1176		CABLE
BATHS			
FIREPLACES	1367		

OCCUPANT'S NAME AND ADDRESS  
na

PHONE NO.

FOOTINGS	FOUNDATION	S. WALLS
16" x 8"	8" Conc.	Wd. Fra.
		Siding

ARCHITECT OR ENGINEER'S NAME AND ADDRESS  
Building permit Services, Inc. Inc 410-515-1717  
2602 Parallel Path  
Abingdon, MD 21009

PHONE NO.

UTILITIES					
WATER WELLS	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
water	sewer	yes	yes	gas	yes

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

CONTRACTOR'S NAME AND ADDRESS  
Same As Owner

PHONE NO.

SIGNATURE  
BPS, Inc - Pat Orla  
TITLE  
DATE 10-7-97

EXISTING USE  
Vacant Lot

PROPOSED USE  
SFD

EST. CONSTRUCTION COST  
90,000.00

LICENSE NUMBER

PERMIT FEE

W/S CODE FOR OFFICE USE ONLY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	10/23/97	Kimberly Christie
FIRE PROTECTION		
STORM WATER MGMT		

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE \_\_\_\_\_  
SIDE YARD \_\_\_\_\_  
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)  
TO SIDE BUILDING LINE \_\_\_\_\_  
DISTANCE IN FEET, REAR YD. REQUIRING SET \_\_\_\_\_  
BACK \_\_\_\_\_ (CORNER LOT ONLY) \_\_\_\_\_  
SDP # \_\_\_\_\_

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

### CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.  
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

B 54501

APPROVED

DATE

Distribution of Copies:  
White - Building Official  
Green - Planning & Zoning

Yellow - Engineering  
Pink - Health Dept.  
Gold - S.H.A.

C1 3533

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# 49645-K

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

031795

030395

22 403 26 (TO NEAREST FOOT)

110-94-0370

OWNER 206 JOINT VENTURE last name CATTAIL WOODS TOWN LISBON SUBDIVISION CATTAIL WOODS SECTION 2 LOT 28

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 Dirt, Soft Br. Mica, Soft Blue Mica, Gravel, Hard Blue Schist, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 42 NO. OF POUNDS 3948

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE submersible WATER LEVEL (distance from land surface) BEFORE PUMPING 31 WHEN PUMPING 289 TYPE OF PUMP USED (for test) S submersible

CASING RECORD

MAIN CASING TYPE S T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 107

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole insert appropriate code below ST BR HO PL OT

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED yes (Y) no (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. 256 DANA KYKER JR II

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Dana Kyker

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

Table for screen depth with columns for depth (nearest ft.) and rows for screen slots.

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

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,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)

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)

Cattail Woods



SCHEDULE D  
STORMWATER MANAGEMENT AREA LANDSCAPING

LINEAR FEET OF PERIMETER	5 385	7 1260
NUMBER OF TREES REQUIRED		
SHADE	8	25
EVERGREEN	10	32

Army McMillen Hatch  
point locations  
taken off surveys  
measurements  
of well site  
2-23-95  
DR

CATEGOR
LANDSCAP
LINEAR FE
CREDIT FOR
CREDIT FOR
NO. SHADE
NO. SHADE

**B 1** **7830** SEQUENCE NO. (DP USE ONLY) **STATE OF MARYLAND** STATE PERMIT NUMBER  
**APPLICATION FOR PERMIT TO DRILL WELL** please print or type **40-94-0370**  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) fill in this form completely

**OWNER INFORMATION**  
 Date Received (APA) **020195**  
**206 HOWARD VENTURE**  
 Last Name Owner First Name  
**WESS UNION CHAPEL**  
 Street or RFD  
**WOODBINE** **MD 21177**  
 Town State Zip

**B 3** **LOCATION OF WELL**  
**HOWARD** COUNTY  
**CATTAIL WOODS** SUBDIVISION  
 SECTION **2** LOT **28**  
**LISBON** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **1** MI

**DRILLER INFORMATION** MSD/MGD/MWD  
**DANA KUKER JR II** **056**  
 Driller's Name License No. 80  
**Westminster Rotary Well Drilling**  
 City Name  
**10156, Westminster Md 21158**  
 Address  
**Dana Kuker Jr** **13195**  
 Signature Date

**B 4** **DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**  
 N, NE, E, SE, S, SW, W, NW  
**S** (circled)  
**CATTAIL WOODS LANE** NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH, WEST, SOUTH, EAST  
**225** DISTANCE FROM ROAD  
 ENTER FT OR MI **FT**  
 TAX MAP: **7** BLK: \_\_\_\_\_ PARCEL **B7**

**B 2** **WELL INFORMATION**  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **450**

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**  
 **D** HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 **F** FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 **I** INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 **P** PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 **T** TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
**HOWARD** COUNTY NAME **A 49645-K** COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ INSERT S   
 DATE ISSUED **022495** **SOMA K JOE** **2/24/96**  
 NORTH GRID **542000** EAST GRID **0781000**

APPROXIMATE DEPTH OF WELL **200** 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  
 other \_\_\_\_\_

**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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 **D** 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. **City**  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
**781**  
**59242**  
 000  
 000

*Not to be filled in by driller. (OEP USE ONLY)*  
 APPROX. PERMIT NUMBER \_\_\_\_\_  
 FORCE **DS** WRITE INITIALS IN BOX PERMIT No. **40-94-0370**

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
  
**225' Well**  
**CATTAIL WOODS LANE**  
**BEHLE BRANCH WAY**

