

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 34474-A
A REPAIR

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH

05-352355

ELLICOTT CITY

DISTRICT 5th

461-9933

INDEXED

DATE 1/29/86

Emerson Feaga

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE _____

SUBDIVISION _____ ROAD 1404¹ Howard Road LOT _____

PROPERTY OWNER Lowell K. Harman

Stoney Lane Farm

ADDRESS 14045 Howard Road

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

PERCOLATION TEST TO ESTABLISH SUFFICIENT AREA TO ALLOW FOR FUTURE REPAIRS TO EXISTING SEPTIC SYSTEM.

PLANS APPROVED BY C. Williams DATE 1/29/86

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE 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.

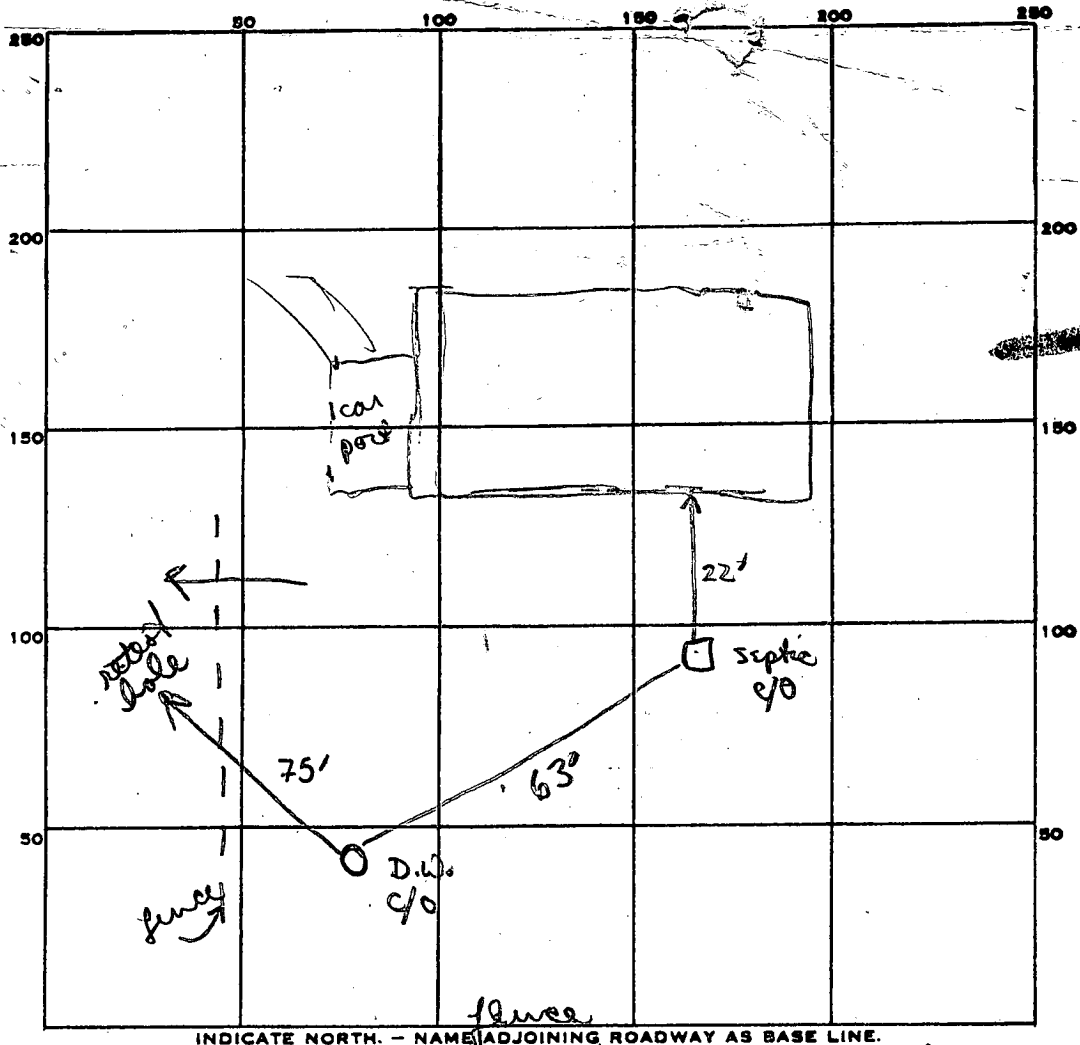
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

OR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

34474-A

1/30/86
9:30 AM



PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 1/31/86 visual hole dug for purposes of establishing
 repair area for septic field. Original system
 still functioning fine.

13' hole: soil fine tan/brown powdery soil. little
 or no clay layer. 5%-10% small tree fragments
 mixed in

area OK
 BN

1/31/86

DATE SYSTEM APPROVED _____

INSPECTOR D. Wilson

PERMIT

P 17031

A 13990

SEWAGE DISPOSAL SYSTEM

12/11/72 *inspect*
Road to Muddy
MARYLAND STATE DEPARTMENT OF HEALTH
HOWARD COUNTY

ELLICOTT CITY
DISTRICT 5

DATE 5/18/72

INDEXED

Lowell Harman IS PERMITTED TO INSTALL ALTER

ADDRESS 12916 ~~Claxton~~ ^{Claxton} Drive, Laurel, Md. PHONE 725-2474

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Harman Subdivision ROAD 10451 14041 Howard Rd. (see appli. LOT 3)
for better directions

PROPERTY OWNER ~~same as above~~ John & Elyse Parsons

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 300 sq. ft. below the inlet pipe of absorbent sidewall area.

Maximum depth of dry well 11 ft. Location 40 ft. off right rear corner of house
150 ft. from front lot line and 170 ft. from R.T.

Set line as seen from facing lot standing on Howard Road.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

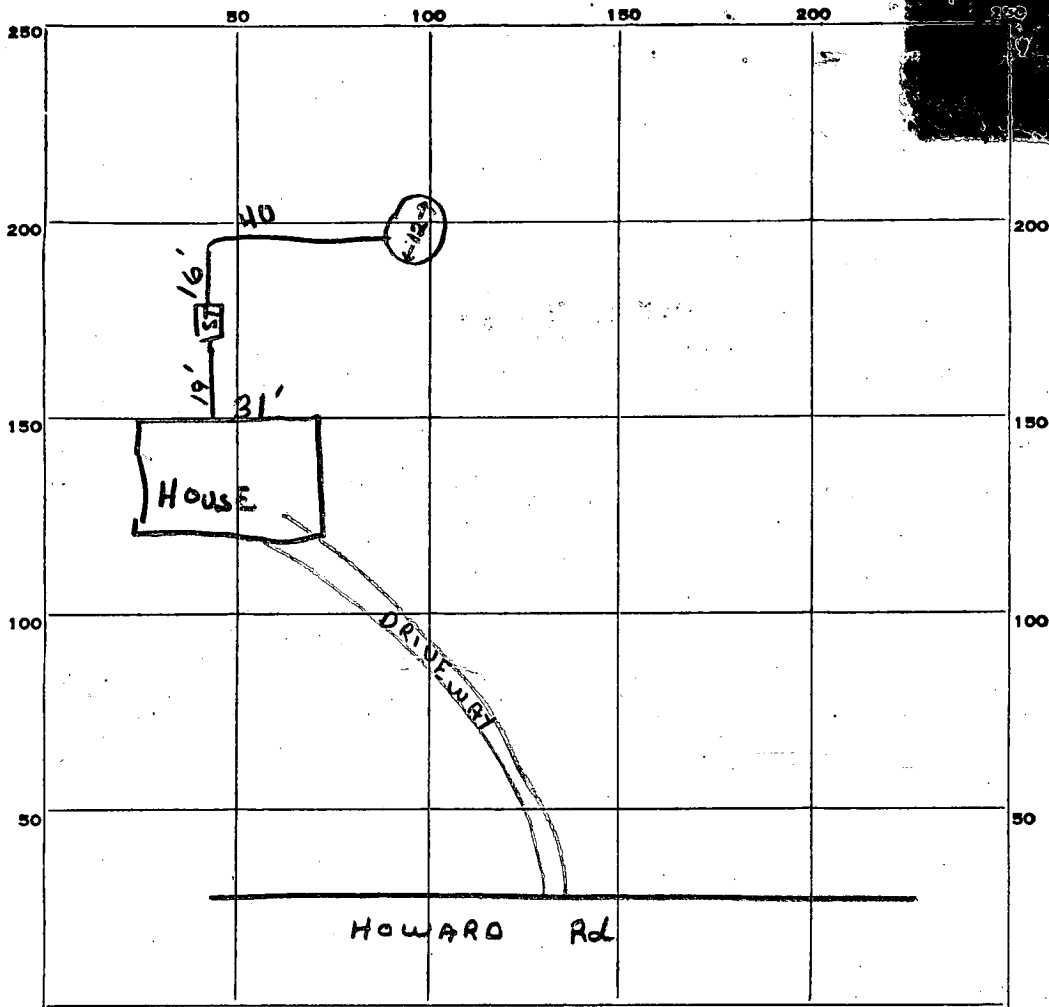
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY James T. Wright, DATE 11/13/68

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A 13990



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

$$\begin{array}{r} 12\frac{1}{2} \\ 3 \\ \hline 37 \\ 2 \\ \hline 407 \end{array}$$

PERMIT CARD _____

SEPTIC TANK, LEVEL 1000 gal. CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, ^{outside} INSIDE DIAMETER 12 $\frac{1}{2}$ FT. DEPTH BELOW INLET 11 $\frac{1}{2}$ FT.

ABSORBENT AREA 407 SQ. FT.

REMARKS 12/1/72 Did Not inspect Muddy Road R.H.

12/4/72 - Talked with owner about reinforcement around
stew. Could not determine how far it extended into ground.

*Access to
 goes down
 about 14 ft.
 does not have
 check block.*

DATE SYSTEM APPROVED 12-6-72 INSPECTOR R. Tare, per P.F. Wene

Re-test

APPLICATION

A 17405

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 9/5/72

See permit for specs.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Lowell Harman

ADDRESS 12916 Claxton Drive, Laurel, Md. PHONE 725-2474

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. K

ROAD AND DESCRIPTION Howard Road- West on Rt. 32, North on Ten Oaks Rd., West on Howard Road out of Dayton. Property about 1 mile down Howard Rd. on left.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.000 acres TYPE BLDG. 3 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Alyce W. Harman

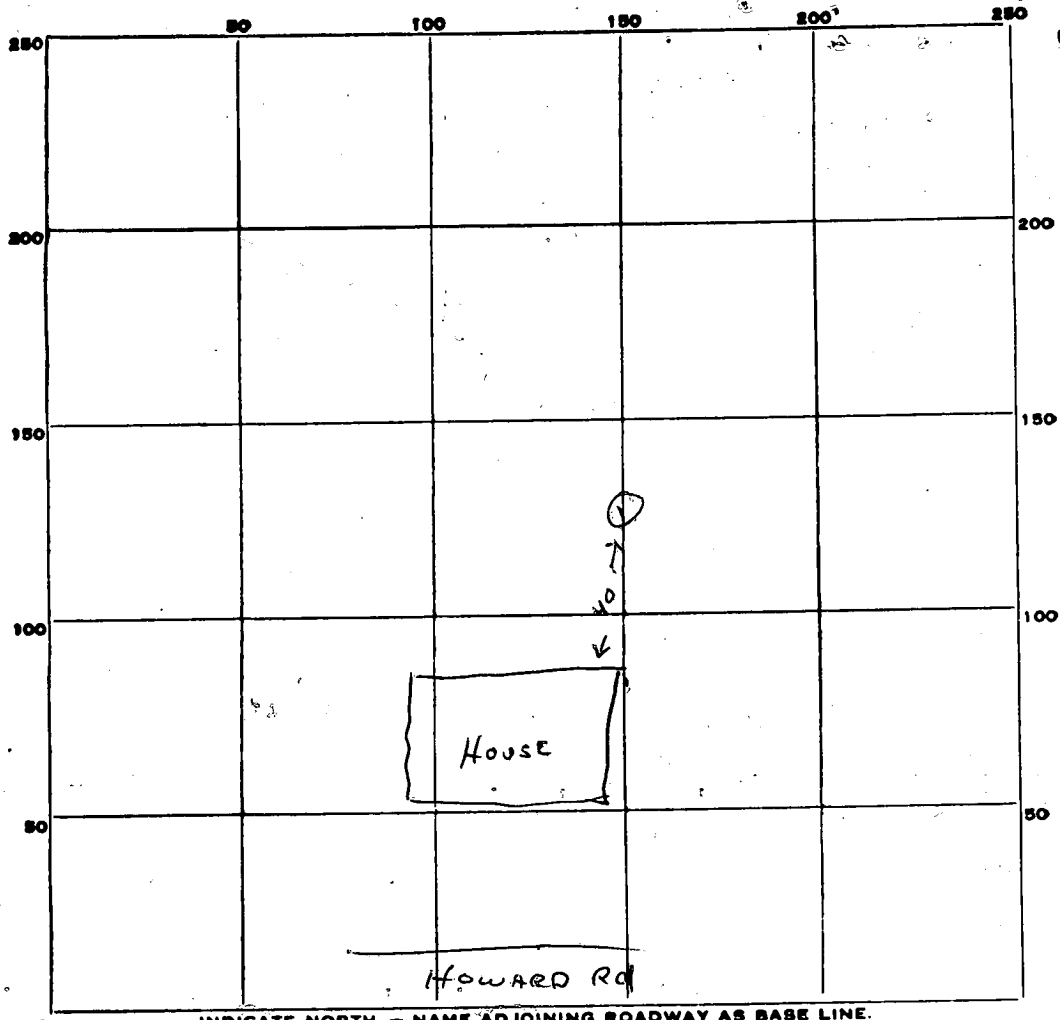
APPROVED BY R. Kane FOR Day Well DATE 9/8/72
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/17/72	1	10 1/2 ft.	11 08	11 11	11 11	11 18	2 min
	1A	3 1/2 ft.	11 18	11 20	11 20	11 23	3 min
Tested in same area as shown on application in 1971							

SOIL AUGER FINDING _____

TESTED BY R. Toner

REMARKS _____

APPLICATION

SEWAGE DISPOSAL TESTING

Hannon

A 13990

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY *Septic tank to be 750 gal* ELLICOTT CITY

Dry well: 300 sq ft below the inlet pipe of apartment sidewalk area. Maximum depth of dry well 11 ft. Location 150 ft from front lot line and 170 ft from left lot line as seen from facing lot standing on Howard Rd

DISTRICT 5

DATE 10/3/68

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Kathryn E. Thompson et al

Louise H. Adams

ADDRESS Clarksville, Maryland PHONE 531-5458

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. K

ROAD AND DESCRIPTION Howard Road - West on Rt. 32, North on Ten Oaks Road, West on Howard Road out of Dayton. Property about 1 mile down Howard Rd. on left.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Louise H. Adams

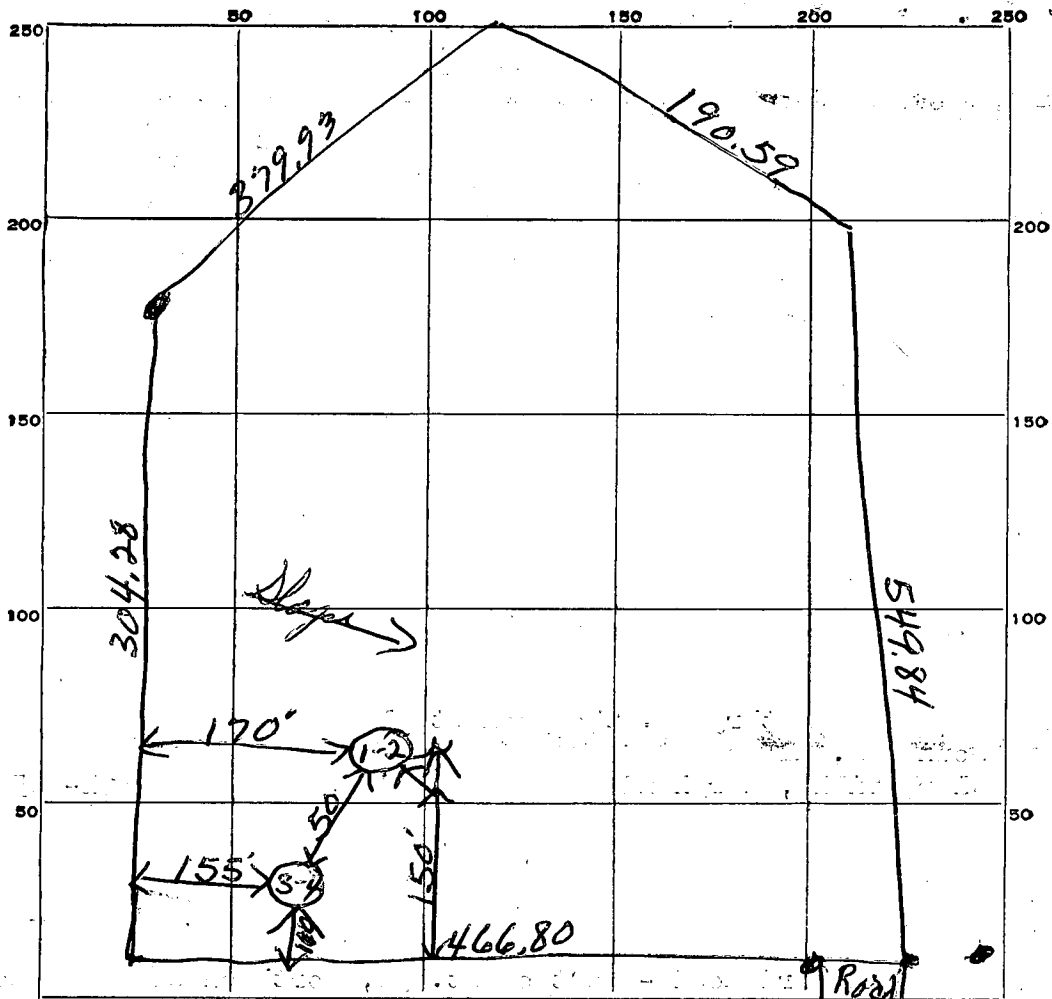
APPROVED BY James T. Wright FOR Dry well DATE 11/13/68
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Howard Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/4/68	1	10'	10 ¹⁰	10 ¹¹	10 ¹¹	10 ¹²	6 min
	2	3 1/2'	10 ¹⁰	10 ¹¹	10 ¹¹	10 ¹⁶	5 min
	3	10	10 ¹⁴	10 ¹⁶	10 ¹⁶	10 ²⁰	4 min
	4	3 1/2'	10 ¹⁵	10 ²⁰	10 ²⁰	10 ²⁸	8 min

} 23
6 min AV

latk

SOIL AUGER FINDING

TESTED BY *JW*

REMARKS

APPLICATION

A 15857

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 4/14/71

*Se test
4/21/71
9:30
2nd*

*Do you want old or new
locations?*

*Use original
Per. Holes.
Tested by
J.T. Wright*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Lowell K. Harman

ADDRESS 12916 Claxton Dr., Laurel, Md. PHONE 982-2189 - office
725-2474 - home

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. K

ROAD AND DESCRIPTION Howard Road (see original application)

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.00 acres TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Lowell K. Harman

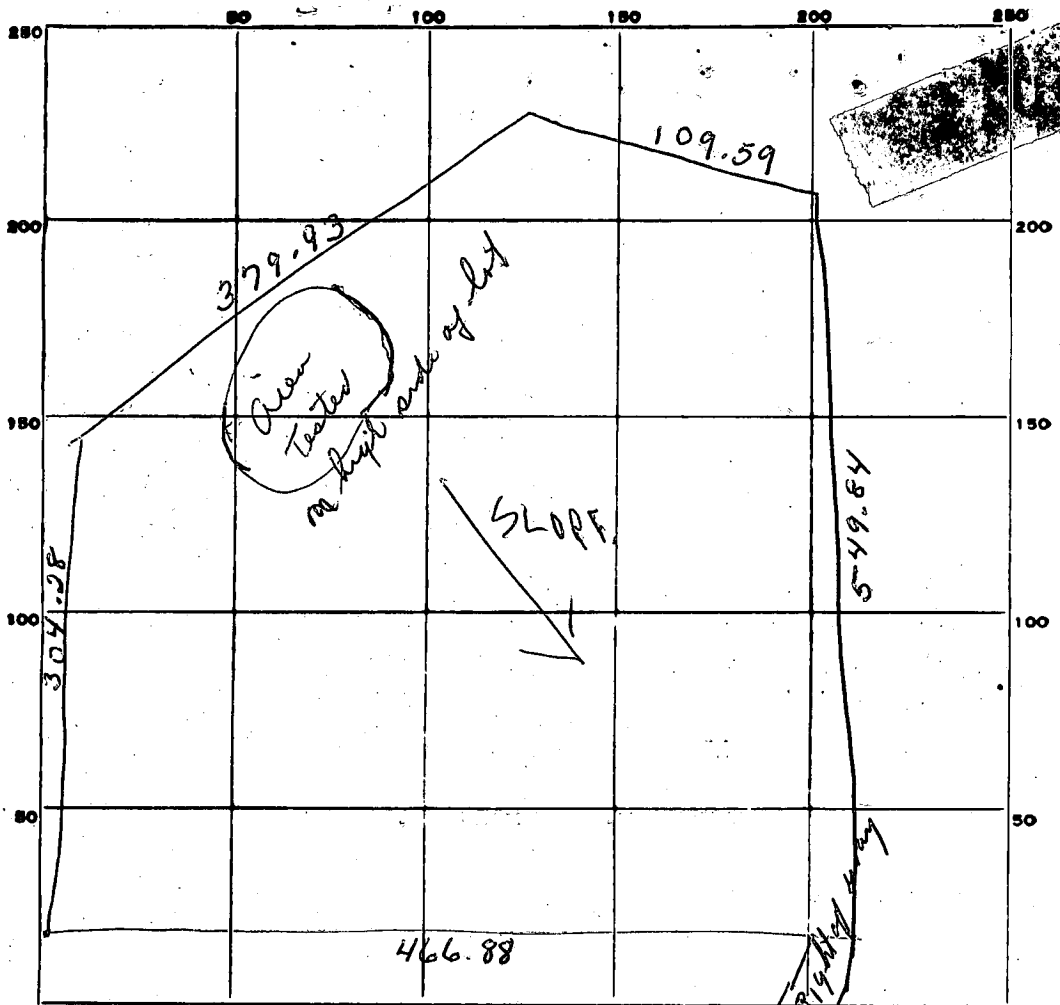
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4/21/71 Believe holes are on
right side of lot
R. T. One

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/2 1/71	1	3 ft.	10 ¹⁶	10 ¹⁸	10 ¹⁸	10 ²⁰	2 min
	1A	10 ft.	10 ¹⁸	10 ²¹	10 ²¹	10 ²⁵	4 min
	2	3 1/2 ft.	10 ²⁴	10 ²⁶	10 ²⁶	10 ²⁹	3 min
	2A	10 ft.	10 ²⁵	10 ²⁸	10 ²⁸	10 ³⁴	6 min

SOIL AUGER FINDING _____

TESTED BY R. Toner

REMARKS No stakes posted to determine ^{dot} line is
Will have to receive plat from certified engineers
showing location of holes. R. T.

April 6, 1971

Howard County Health / Sanitation Dept
P.O. Box 476
Ellicott City, Maryland 21043

Dear Sir:

Enclosed is a check for five dollars in application for a repercolation test on parcel K of the land owned by Thompson et al, located on Howard Road in Howard County, North of Dayton, Md.

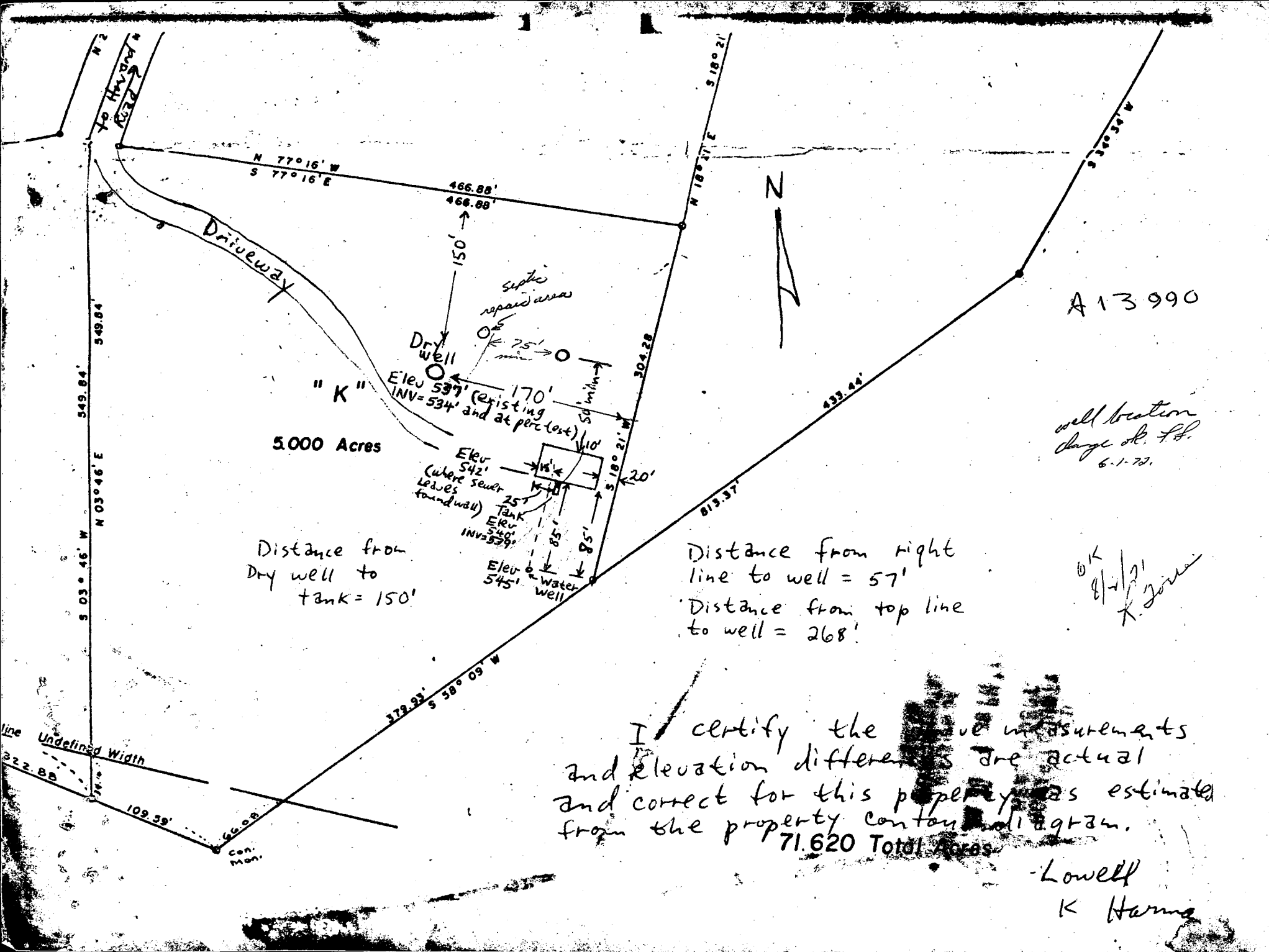
We understand from the Broker's agent, Mrs. Louise Adams, that a successful percolation test was performed on the land. The reason for this reperc test is to assure that the land will perc at the planned building site, which is slightly above the 540' contour line, near the Northeast corner of the "K" parcel. The house will contain three bedrooms.

Sincerely yours,

Lowell K Harman
12916 Claxton Dr.
Laurel, Md.

Ph: office 982-~~2789~~
home 725-2474

69⁰⁵



A 13990

well location
 change of F.S.
 6-1-77.

OK
 8/2/77
 K. Jones

5.000 Acres

Distance from
 Dry well to
 tank = 150'

Distance from right
 line to well = 57'
 Distance from top line
 to well = 268'

I certify the above measurements
 and elevation differences are actual
 and correct for this property as estimated
 from the property contour and 1973m.
 71.620 Total Acres

-Lowell
 K Hanna

C 1 07519
 SEQUENCE NO. (DWR USE ONLY)
 1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 DEPARTMENT OF WATER RESOURCES
 STATE OFFICE BLDG., ANNAPOLIS, MD 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER 4951

DATE RECEIVED (DWR USE ONLY) 9/5/72
 DATE WELL COMPLETED
 8-13 15 20

DEPTH OF WELL 150
 22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"
40-73-0013
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 209

OWNER HARMAN LOWELL K
 LAST NAME
 STREET OR RFD 14051 HOWARD RD POST OFFICE DAYTON MD
 FIRST NAME

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<u>BOULDERS</u>	<u>0</u>	<u>60</u>	
<u>Mica Rock</u>	<u>60</u>	<u>150</u>	<u>X</u>

WELL DESCRIPTION

GROUTING RECORD YES NO
 WELL HAS BEEN GROUTED
 (CIRCLE APPROPRIATE BOX) 44 44

TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT BENTONITE CLAY
 45 46 45 46

NO. OF BAGS 10 NO. OF POUNDS 970

GALLONS OF WATER 100

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 60 FT.
 (ENTER 0 IF FROM SURFACE) 48 52 54 58

C 3
 1 2 3 (SEQ. NO.) 6

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6
 8 9

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 3
 11 15

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 30 (NEAREST FOOT)
 17 20

WHEN PUMPING 120 (NEAREST FOOT)
 22 25

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 27 27 27
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 27 27 27
 JET SUBMERSIBLE
 27 27

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW)
 STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE
 60 61 63 64 66 70

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 60

PUMP-INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)
 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
 Y N

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) _____ 31 35
 PUMP HORSE POWER _____ 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) _____ 43 47

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)
 STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

C 2
 1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)
 FROM TO

1	8	9	11	15	17	21
2	23	24	26	30	32	36
3	38	39	41	45	47	51

SLOT SIZE 1, _____ 2, _____ 3, _____

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE (NEAREST FOOT)
 BELOW } 2
 49 50 51

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME HOWARD DILLON

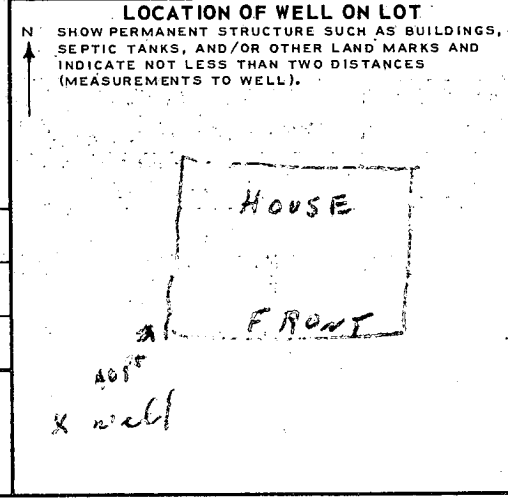
(PLEASE PRINT) SIGNATURE Howard Dillon

DIAMETER OF SCREEN _____ (NEAREST INCH)
 56 60
 FROM TO

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX. 68 F

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE



B 1 **8075** SEQUENCE NO. (DWR USE ONLY)
 1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 DEPARTMENT OF WATER RESOURCES
 STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
 APPLICATION FOR PERMIT TO DRILL WELL

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY)
 10/11/72
 2 P.M.

OWNER HORNAN LOWELL K
 COL 15 LAST NAME FIRST NAME COL 34
 STREET OR RFD 14051 HOWARD ROAD
 COL 36 COL 55
 POST OFFICE DAYTON MD
 COL 57 COL 76

B 1 CONTINUED DRILLER INFORMATION
 1 2 3 (SEQ. NO.) 6
 DATE 7/12/72 LICENSE NUMBER 209
 77 80
HOWARD Dilled
 FIRST NAME DRILLER LAST NAME
 SIGNATURE Howard Dilled

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6
 COUNTY HOWARD
 8 (DO NOT ABBREVIATE COUNTY NAME) 21
 SUBDIVISION 23 42
 SECTION 44 46 LOT K 50
 NEAREST TOWN DAYTON 71
 MILES FROM TOWN (ENTER 0 IF INTOWN) 4 MI 73 76 77 78

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 8 12
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 700 14 20
 USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING, AGRICULTURE, IRRIGATION
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 PRIVATE WATER COMPANY }
 TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
 1 2 3 (SEQ. NO.) 6
 NORTH EAST NE NORTHEAST SE SOUTHEAST
 SOUTH WEST NW NORTHWEST SW SOUTHWEST
 NEAR WHAT ROAD HOWARD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH EAST WEST
 32 32 32 32
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 1000 MI 34 37 38 39

APPROXIMATE DEPTH OF WELL 150 FEET
 24 28

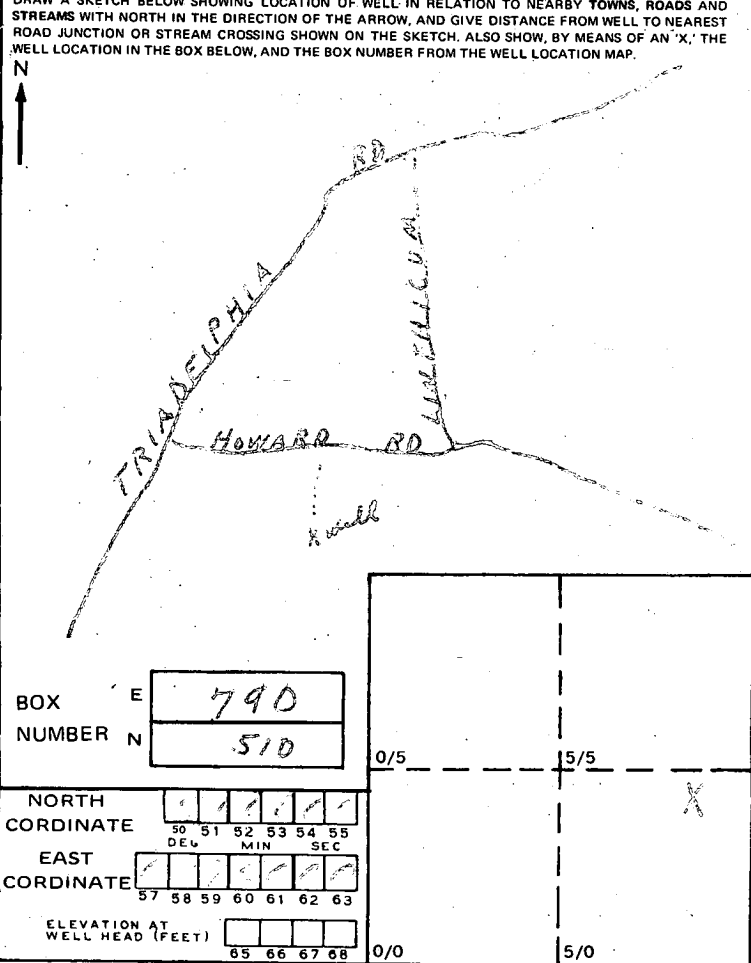
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED) JETTED DRIVEN
 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
 CABLE REVERSE ROTARY DRIVE-POINT
 OTHER (DESCRIBE)

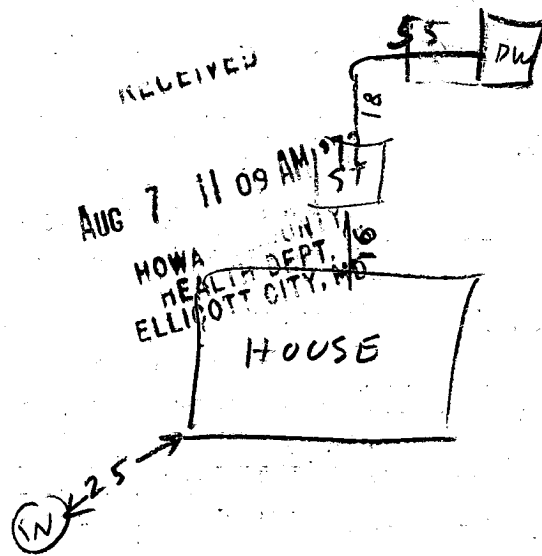
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEIN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)
 41 52

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY)
 APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63
 FORCE 67 WRITE INITIALS IN BOX 68 CONDITIONS 70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
 1 2 3 (SEQ. NO.) 6
 STATE HEALTH (CIRCLE BOX) S COUNTY NAME Howard COUNTY NO. 2951
 MO. DAY YR. 9 27 72
 DATE APPROVED BY Palmer Director



B 5 SPECIAL CONDITIONS 8-63 (DWR USE ONLY)
 1 2 3 (SEQ. NO.) 6



DRIVE WAY

TO HOWARD RD

10/17/72 2:10PM

- ① 25 FT depth to be grouted
- ② Well is 150 FT deep with 50 FT of casing
- ③ 10 Bags of cement used to grout well

Raymond Hodger

