

05-402476

12/17/90  
Need House Connection + verify 18" of cover over left lower trench (#2) and observ. pipe. Stand

SEPTIC SYSTEM TO BE INSTALLED  
PRIOR TO BUILDING PERMIT  
ISSUANCE.

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

DATE 3/31/88

DATE SYSTEM APPROVED 12/17/90

INSPECTOR C. B. D.

INDEXED

3/19/88  
3/17/86  
258  
778

Harman Homes

IS PERMITTED TO INSTALL  ALTER

ADDRESS 6730 Montgomery Road, Elkridge, Maryland 21227 PHONE 796-1197

SUBDIVISION Fox Hall Villas ROAD 13319 Elliott Drive LOT 8

PROPERTY OWNER Jeff Harman

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

3/776  
259

85  
92  
24  
368  
184  
220

56  
48  
57

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 194 sq. ft. per bedroom Trench to be 3 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins 3 1/2 feet below original grade. 2 1/2 feet of stone below distribution pipe.

LOCATION - SHALLOW SYSTEM ONLY. Beginning from the left front lot corner, place the distribution box 215' down the front (170.58')/327.36' lot line and 65 feet off the front line as seen when facing property from Elliott Drive. Run trenches along contour towards the left (195.11') and front (327.36') lot lines.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. (ok/cw)

PLANS APPROVED BY Bert Nixon DATE 2/05/88

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.

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

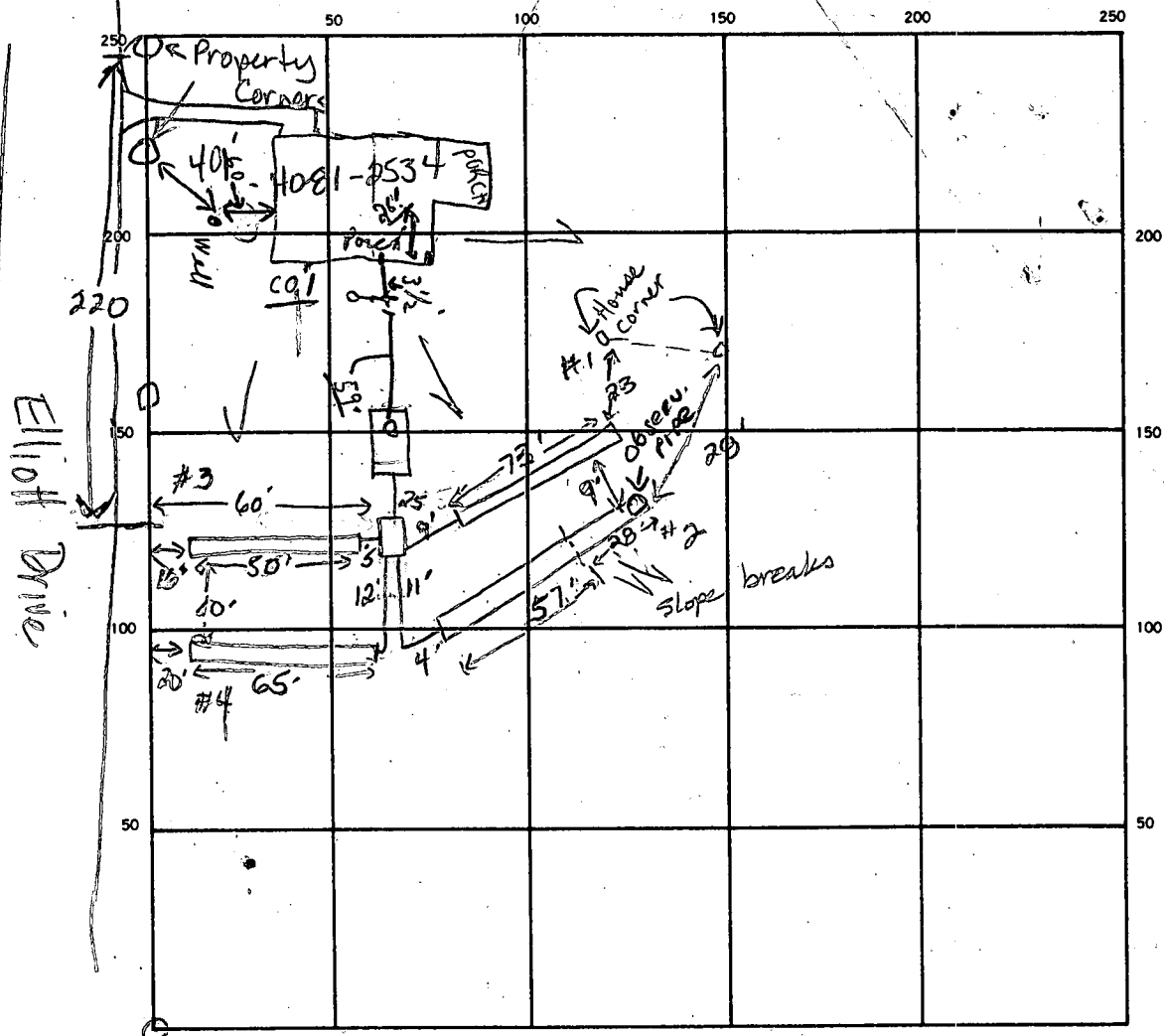
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

AS 404



311  
194  
4.  
3776  
258.6

311  
194  
4  
776

81d or  
Craig 14

12/7/90 c. 800  
(1 1/2' above grade)  
✓ MANHOLE TANK  
C.O. #1 12/7/90 C. 800

SEPTIC TANK LEVEL 1500 gal CLEANOUTS 252-259  
245

DISTRIBUTION BOX LEVEL OK (needs baffle)

DRAIN FIELD/TILE FIELD DEPTH	① 55	② 40	③ 60	④ 50
EFFECTIVE GRAVEL DEPTH	① 3	② 3	③ 3	④ 3

TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

TOTAL LENGTH	① 74	② 85	③ 50	④ 65
ONE SIDEWALL/BOTTOM AREA	222	255	150	195

NUMBER OF TRENCHES 4 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 8.22 SQ. FT.

REMARKS 6-21-88 OK to cover trenches 3 & 4 up to dist. box. Must show cement seals at box and tank, box needs a baffle and tank needs a manhole. Trench #2 drops too steeply for the last 29 ft. Call for final and recommendation for #2

6-22-88 Pipe in last 30' of trench 18" below NAT. GRADE AT FRONT AND 12" below NAT. GRADE AT END. Soil below pipe at end clay to approx 24" to silt loam below bottom of trench approx 36" deep. Require min. 18" cover over stone which is 10" over pipe at end of trench. Observation port to grade at end of trench required. S. Albe

DATE SYSTEM APPROVED 12/7/90 P.M. INSPECTOR Charles Bryan

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 35404

P \_\_\_\_\_

DISTRICT 577

DATE 4-24-85

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 DAVID N. ELLIOTT

ADDRESS 6501 Columbia Pike PHONE 997-5833

PROPERTY LOCATION:

SUBDIVISION FOXHALL VILLAS LOT NO. 8

ROAD AND DESCRIPTION ELLIOTT ROAD DRIVE

SIZE OF LOT 3 acre TYPE BLDG. res. 3-4  
(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.

WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. David N. Elliott  
(SIGNATURE OF APPLICANT)

APPROVED BY Raymond Hodge FOR SHALLEN TRENCHER DATE 12/2/86

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ BLDG. PERMIT SIGNED \_\_\_\_\_ DATE \_\_\_\_\_  
AND RETURNED 6/22/88 BY BP7254 DATE SN

HOLD PENDING FURTHER TESTS \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5/13/85 NO HOUSE SITE HIGHER THAN HILLS

ELLIOTT WANTS SPECIAL PERMIT TO USE PUMP.

5/14/85 - FS SAID UNSAT RH

9/25/85 LOT LINES TO BE CHANGED. POSSIBLE

## THIS IS NOT A PERMIT

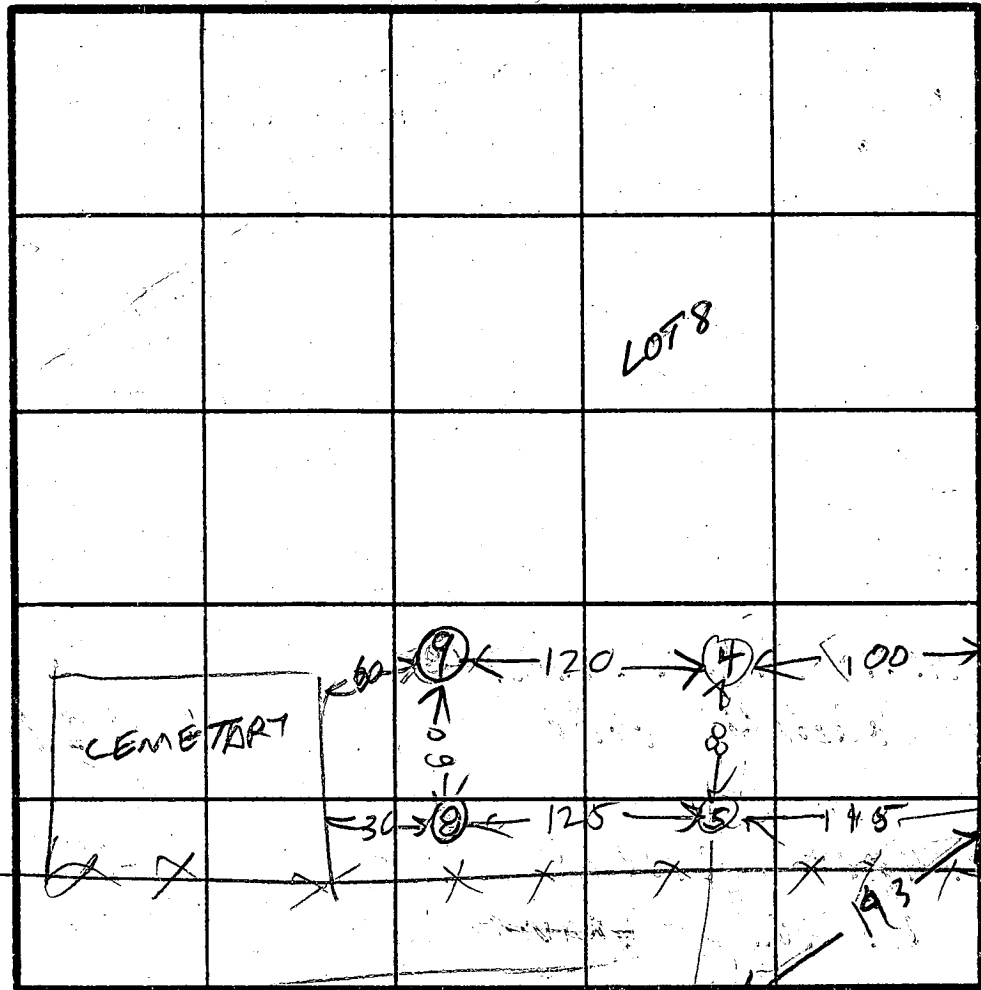
TO PASS WITH CHANGED LINES  
HOLD FOR CERTIFIED PLAN

6/12



SOIL PROFILE

0'  
3 1/2'  
BROWN CLAY  
BROWN SAND  
MICA  
LONN



ALL BROWN SAND MICA LONN

INDICATE NORTH - NAME ADJOINING ROADWAY AS PER LINE

ELLIOTT RD RD HOE

DATE	TEST NO.	DEPTH	PRE WEIGHT		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/25/85	H S	3'	151	152			
9/25/85	H S M V	3.5' 4E.	150	152	152	156	14'

HOLE ELEV  
 ② = HIGHEST  
 ③ ⑤ HIGH  
 ⑥ NEXT HIGHEST  
 ⑦ LOWEST  
 ④ NEXT LOWEST  
 X = HOLE  
 ③ ON  
 LOT 17  
 96  
 40

EH-12-1079

REMARKS \_\_\_\_\_

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

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

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476 - ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 35404

P \_\_\_\_\_

DISTRICT 573

DATE 4-24-85

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 DAVID N. ELLIOTT

ADDRESS 6581 Columbia Pike, Columbia PHONE 997-5833

PROPERTY LOCATION:

SUBDIVISION FOXHALL VILLAS LOT NO. 8

ROAD AND DESCRIPTION ELLIOTT ~~ROAD~~ DRIVE OFF TRIADELPHIA MILL RD.

SIZE OF LOT 3 acres TYPE BLDG. res. 3-4  
(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.

David N. Elliott  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

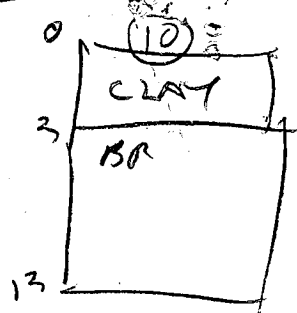
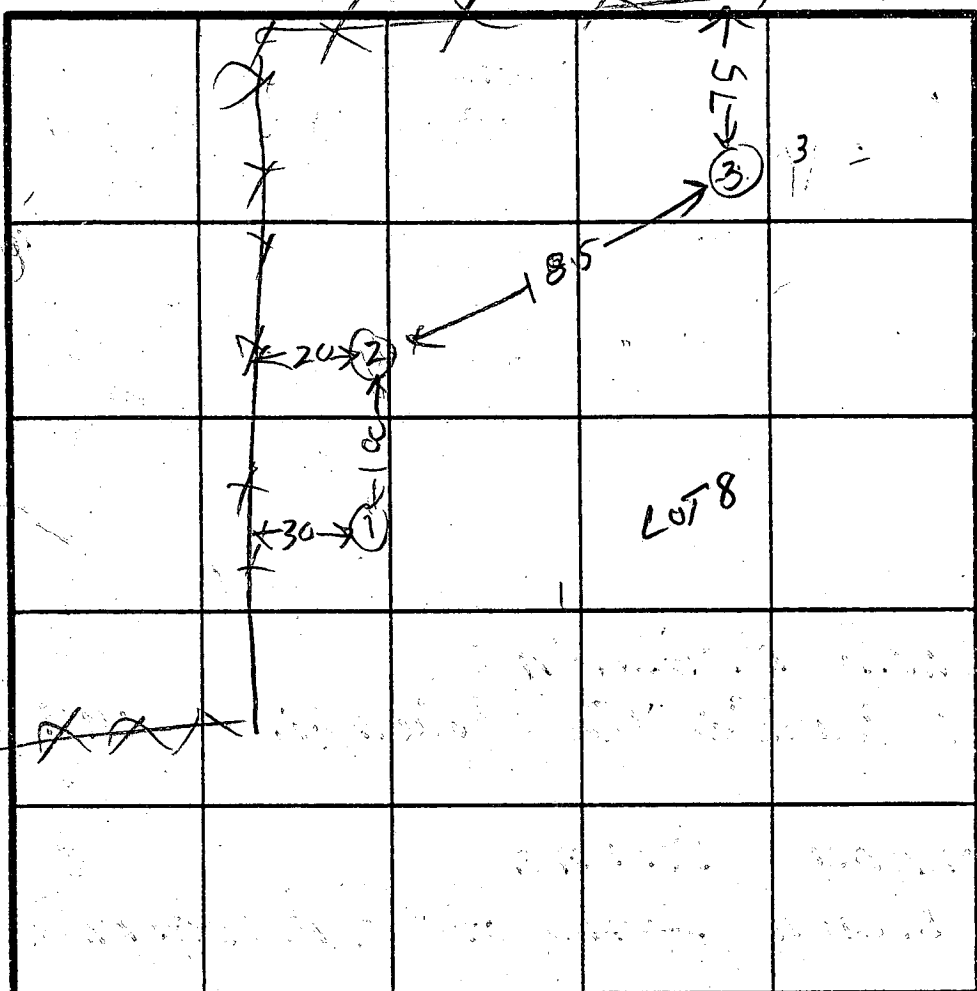
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

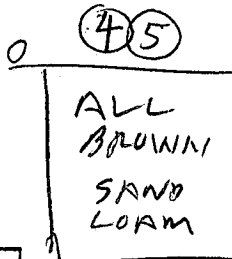
REASONS FOR REJECTION OR HOLDING 5

# THIS IS NOT A PERMIT

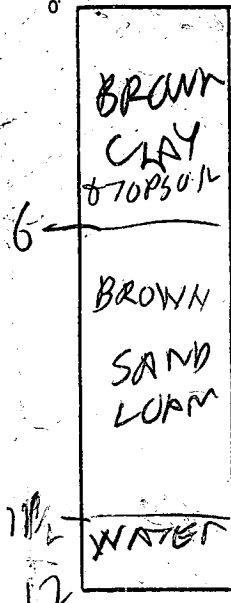
67 1/2  
11 1/2



HOLE ELEVATION  
 ① HIGH  
 ② MEDIUM  
 ③ LOW



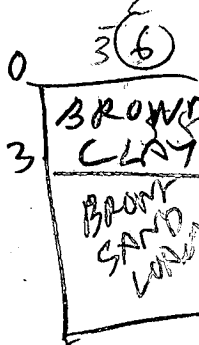
SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/10/85	1V	1L	WATER		11FT	FAILS	
	2V	1 1/2	WATER		10FT	FAILS	
	3V	6 1/2	WATER		5FT	FAILS	
5/13/85	4S	5 1/2	141	142	142	145	3
	4V	11	LOOKS OK				
	5S	13	144	146	146	149	4
	5V	11 1/2	LOOKS OK				
	6S	4	149	154	154	150	4
	6V	12	LOOKS OK				
	7S	3	150	152	152	154	2
	7V	12	LOOKS OK				
	8V	11 1/2	LOOKS OK				
9/25/85	9V	10 1/2	LOOKS OK				
	10S	4	146	148	148	150	4
	10V	13	LOOKS OK				



REMARKS NO HOUSE SIT HIGHER THAN PERC. HOLES WANTS SPECIAL PER MISSION TO HAVE HOUSE

TYPE OF SOIL TESTED BY B. HOLLIGES

ALSO PRESENT FLYCK CO JEFF

1/19/90

1/19/90 Partial ↓

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 X  
Replacement \_\_\_\_\_

Receipt # 45437  
Date 1/16/90

Name of Installer J.A. Smith & Co INC.

Telephone 796-7537

License Number 5581

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber ✓

Name of Property Owner JANET + Jeff Harmon

Telephone 997-0139

Subdivision FOX HILL Lot # 8

Well Tag # HO-81-2534

Site Address ~~9238 EVERGREEN AVE~~  
13319 ELLIOTT DR CLARKSVILLE MD 21029

- Pump**
- Type
    - Deep well jet \_\_\_\_\_
    - Shallow well jet \_\_\_\_\_
    - Submersible \_\_\_\_\_
  - Make Coulds
  - Model # 7EH07412
  - Capacity 5 GPM
  - Pump exceeds well capacity Yes ✓ No \_\_\_\_\_
  - If Yes, is low pressure cutoff switch installed? Yes ✓ No \_\_\_\_\_
  - What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ✓ Cable guards ✓ Other \_\_\_\_\_

- Motor**
- Horsepower 3/4
  - RPM 3450
  - Voltage \_\_\_\_\_
    - 110 \_\_\_\_\_
    - 220 ✓

- Pitless Adapter**
- Make HARVARD
  - Model # \_\_\_\_\_
  - Depth 42"

- Tank**
- Capacity 40
  - Pressure relief valve? YES

- Piping**
- Type NPT 1/2
  - Size 1"
  - NSF and/or BOCA Code approved ✓
  - Depth of supply line 42"

- Well data**
- Depth 300 ft.
  - Yield 4 GPM
  - Static water level 45' ft.
  - Will water supply be disinfected by installer? NO

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: J. Allen Smith Jr.  
Date: 1/10/90

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

HD-215

1/19/90 Partial - pitless adapter and water line from well to house only is ok. c. R. D.



2168 SEQUENCE NO. (OEP 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 35 404

DATE Received DATE WELL COMPLETED 030888

Depth of Well 305 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" W10-81-2534

OWNER HARMAN last name ELLIOTT DRIVE first name JEFFREY TOWN CLARKSVILLE SUBDIVISION FOX HALL VILLAS SECTION 2 LOT 8

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. Includes handwritten entries: SAND, Gray Micaceous Rock, DRY WELL 365, Filled in with cement + Drilling materials.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 15 NO. OF POUNDS 1410

CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 72

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 BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) H0 69 305 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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 10.17.13 "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. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 43 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 33 WHEN PUMPING 216 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES OR 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)

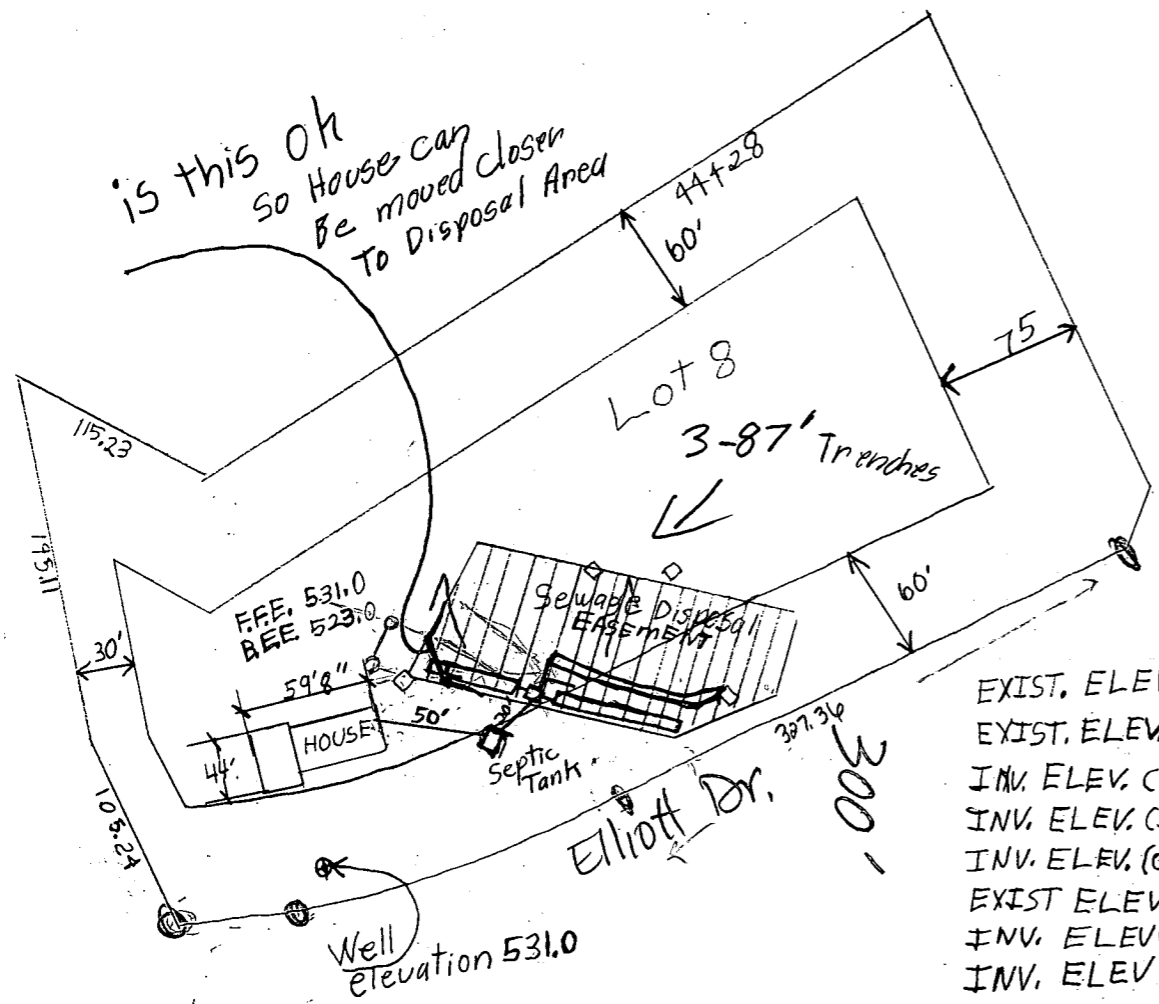
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) See Attached Well Sites



Fox Hall Villas  
 13319 Elliott Drive  
 Lot #8

if change is unable to be made  
 Go with location as it is.

owner Jeff Harman  
 3/31/88



is this ok  
 so House can  
 be moved closer  
 to Disposal Area

ELEVATIONS OK  
 SYSTEM TO BE INSTALLED  
 PRIOR TO B.P.  
 3/31/88 *Carlin*

- EXIST. ELEV. AT TRENCH 523.5
- EXIST. ELEV. AT DIST. Box 523.5
- INV. ELEV. (INTO) DIST. BOX 520.5
- INV. ELEV. (INTO) TRENCH 520.0
- INV. ELEV. (OUT OF) SEPTIC TANK 520.9
- EXIST. ELEV. AT SEPTIC TANK 526
- INV. ELEV. (INTO) SEPTIC TANK 521.2
- INV. ELEV. (OUT OF) HOUSE 522.7

I certify that the above measurements are actual and  
 correct for this property

Signed: Jeff Harman - 796-1197 - Home 997-0139  
 BP-17254

B 1 3631

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-81-2034

(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)

072588

OWNER INFORMATION

HARMAN S. JEFFERY

7733 EVERGREEN HVE

CLVNBVA MD 21046

B 3

LOCATION OF WELL

HOWARD

FOXHALL VILLAGES

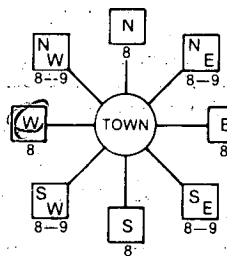
SECTION 2 LOT 8

CHICKSVILLE

MILES FROM TOWN (enter 0 if in town) 2.70 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Elliott Ave

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD

ENTER FT or MI

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 500

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 ASSY04

COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED

CO SIGNATURE EXP. DATE

NORTH GRID EAST GRID

APPROXIMATE DEPTH OF WELL 240 FEET

APPROXIMATE DIAMETER OF WELL 6 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
This well will deepen an existing well

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER GAP

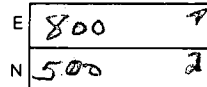
FORCE PERMIT NO.

SPECIAL CONDITIONS

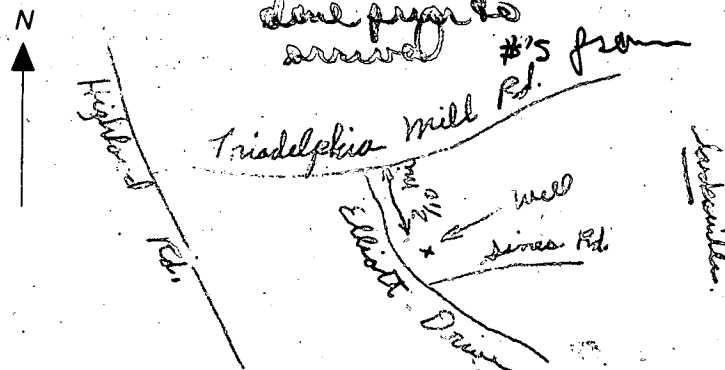
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

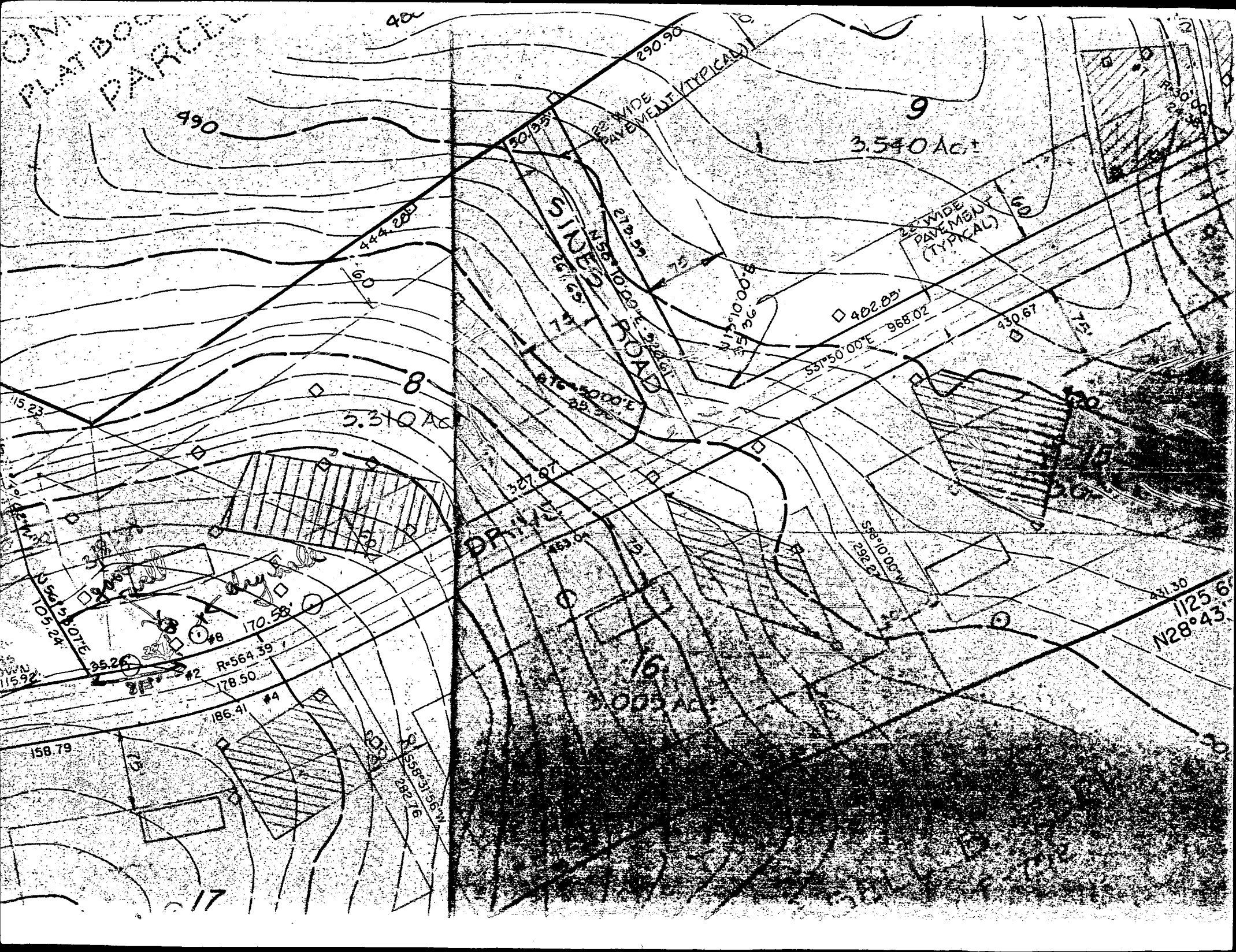
1. WELL
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE



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



PLAYBOY PARCEL



490

480

9

3.540 Ac.±

SIGNED ROAD

22' WIDE PAVEMENT (TYPICAL)

8

5.310 Ac.±

DRAIN

6

3.023 Ac.±

1125.6'  
N28°43'

158.79

186.41 #4

178.50

170.58

115.23

S50°10'00\"/>

S50°10'00\"/>

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