

4/20/88
2 Sept
AM & PM
4-21-88
PM ASAP

4/22/88 11 AM

03-30019

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 41530

A 34070

DISTRICT 3rd

DATE 4/19/88

DATE SYSTEM APPROVED 4/22/88

INSPECTOR Ray Hodges

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

1694
672

Benjamin Grubbs IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 795-2006

SUBDIVISION Charles Amos Property ROAD 13220 Frederick Road LOT 2

PROPERTY OWNER Brian Feilinger

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

MINOR ADJUSTMENT TO SEPTIC
DESIGN OK - SEE COLLECTED DRAWINGS,
CW

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 168 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 90 feet from the left lot line and 145 feet from the rear lot line as seen when facing the property from Route 144. Run trench(s) along contour toward left lot line.

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 C. Williams DATE 2/1/85

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.

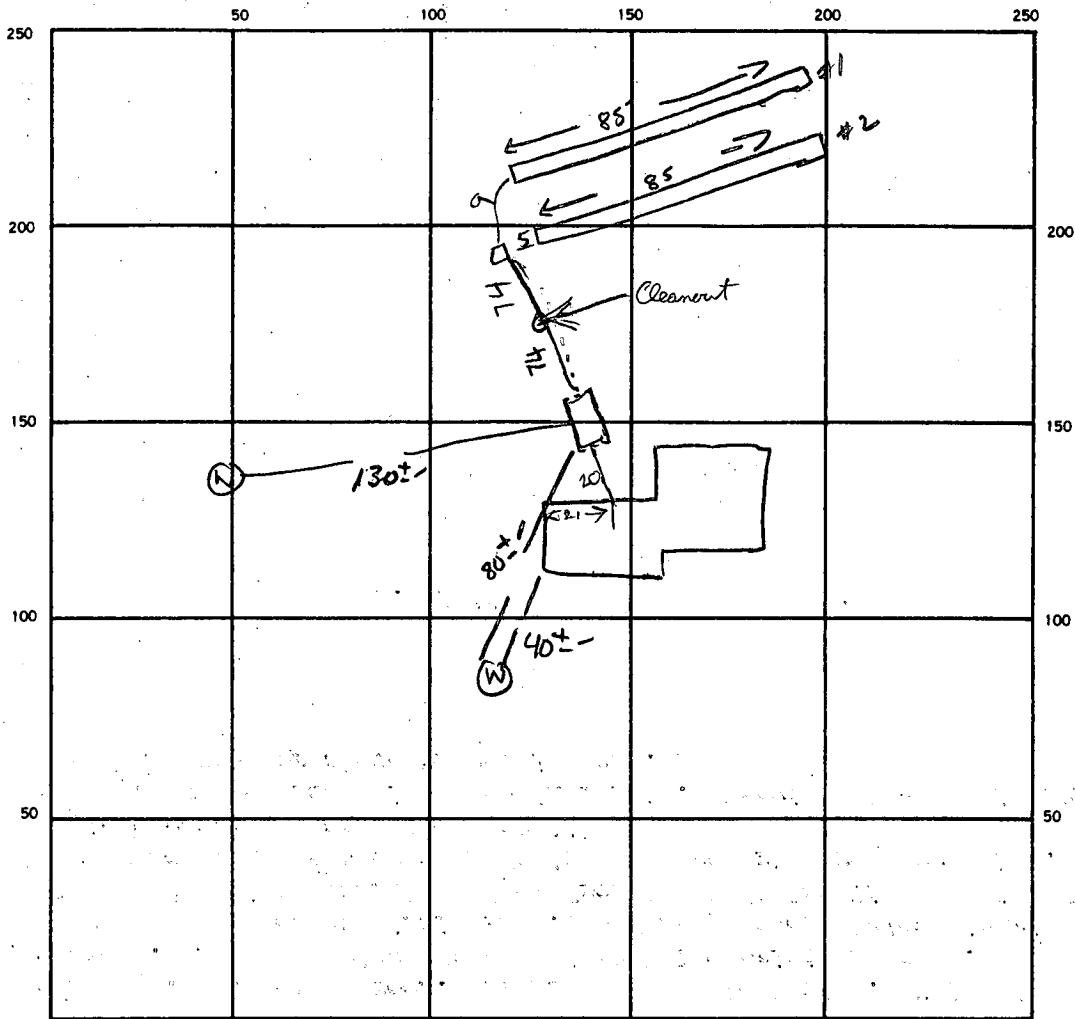
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EM - 2-1186

A 34070



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

RT144

ST	1
OK	

SEPTIC TANK. LEVEL 1250

CLEANOUTS OK

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD TILE FIELD. DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 85 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 850 SQ. FT. 672 REQUIRED

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 4-20-88 TANK LOCATION OK - CONTINUE TO WORK ON TO STONE #1 CA

4-20-88 OK TO STONE #2 S.A

4-21-88 MAKE ALL CONNECTIONS - SET TANK AND CALL FOR FINAL IN AM SA

4/22/88 1201 PM TRENCH #2 OK COVER WORK TANK TO TRENCH RH

4/22/88 330 - JOB FINISHED

DATE SYSTEM APPROVED 4/22/88

INSPECTOR J. S. Hodges

672
135CF
2-68
125
5/10/82
1/2
1/2

APPLICATION

SEWAGE DISPOSAL TESTING

A 34070

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3rd

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

DATE July 9, 1984

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 Fisher, Collings and Carter Brian Feilinger

ADDRESS _____ PHONE 461-2855

PROPERTY LOCATION:

SUBDIVISION Amoss Property - Tax Map, Parcel 106¹⁵ LOT NO. 2

ROAD AND DESCRIPTION Route 144 13220 Frederick Rd

SIZE OF LOT _____ TYPE BLDG. _____
(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. /s/ Fisher, Collings and Carter
(SIGNATURE OF APPLICANT)

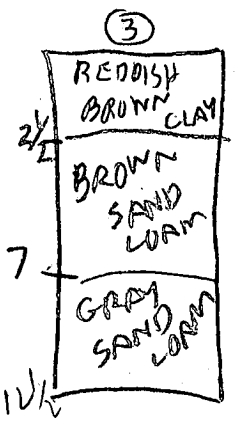
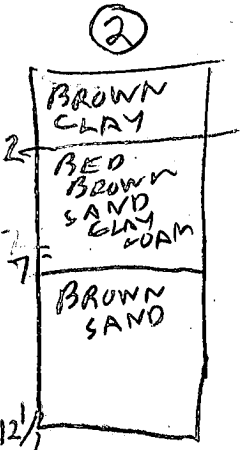
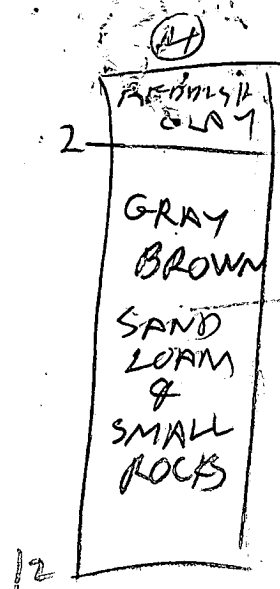
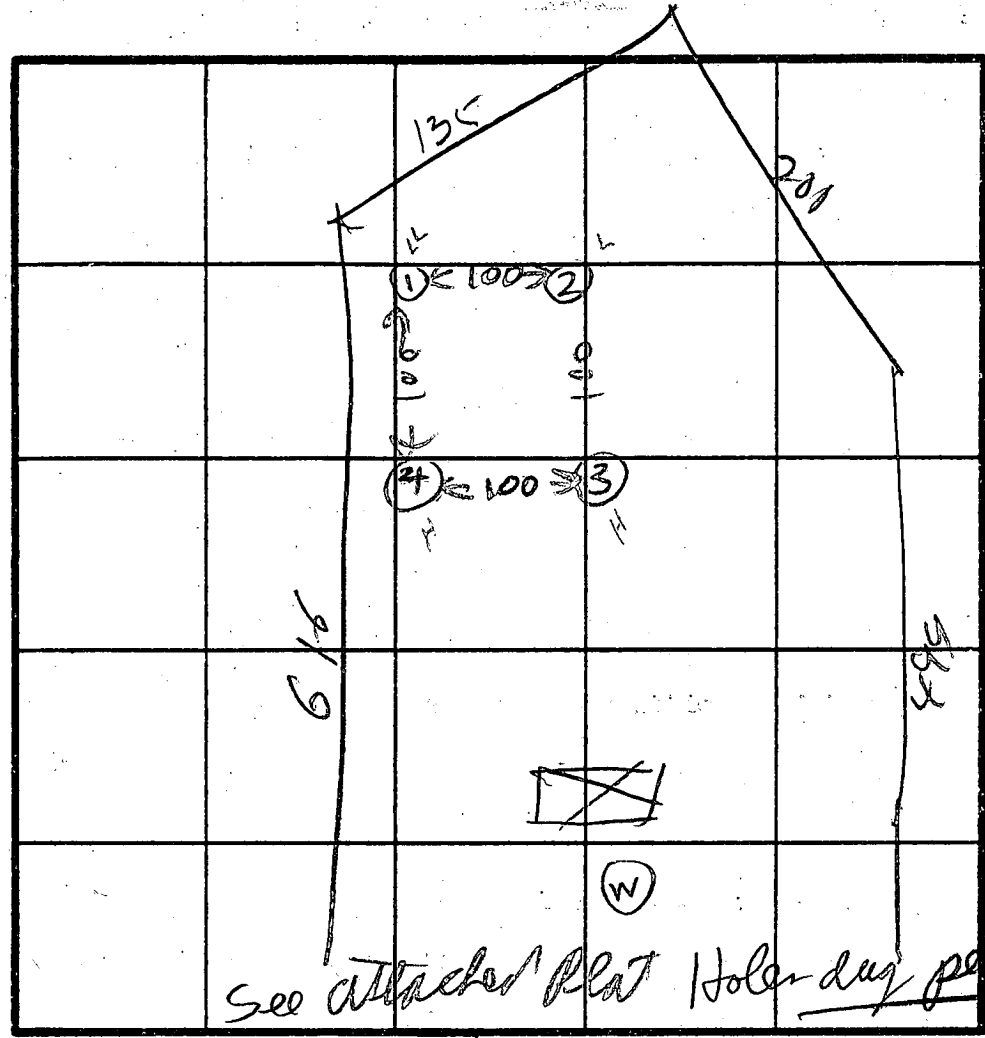
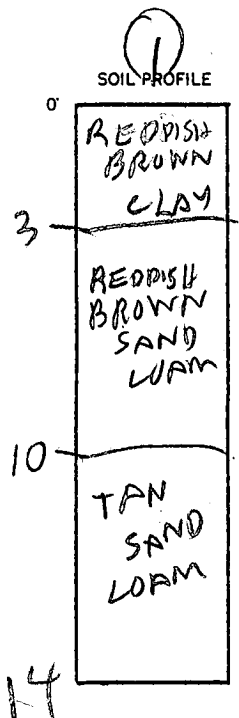
APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HOLE ELEV
① = LOWEST
② = NEXT LOW
③ = HIGHEST

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/7/84	1S	5	213	215	215	218	3
	1V	14	LOOKS	OK	BELOW	3FT	
	2S	3 1/2	226	236	236	253	1.7
	2V	12 1/2	LOOKS	OK	BELOW	2FT	
	3S	4 1/2	230	232	232	238	6
	3V	12	LOOKS	OK	BELOW	2 1/2 FT	
	4S	4 1/2	257	301	301	305	4
	4V	12	LOOKS	OK	BELOW	2FT	

REMARKS THIS LOT WASTESTED BEFORE & IT DID NOT PASS RECORDS LOST UNSATISFACTORY HOLES NEAR FRONT

TYPE OF SOIL _____
TESTED BY B. HODGES

BACKHOE OKETTERMAN & POP
REAL ESTATE BRENDEN
ALSO PRESENT

Prel.

APPLICATION

7/27/84 A.M.
9:30

A 34070
P _____

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

DISTRICT _____
DATE 7/9/84

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.

ESTATE OF CHARLES O. AMOSS ; C.F. SYBERT, JR. PERSONAL REPRESENTATIVE
PROPERTY OWNER
ADDRESS 9025 CHEVROLET DR., ELLICOTT CITY, MD. PHONE 465-5300

PROPERTY LOCATION:

SUBDIVISION TAX MAP 15, PARCEL 106 LOT NO. PROPOSED LOT. NO. 2 (TOTAL PARCEL = ± 20 Ac.)

ROAD AND DESCRIPTION ON THE NORTH SIDE OF MD. RTE 144, ± 2100' WEST OF THE ENTRANCE TO HOWARD CO. FAIRGROUNDS

SIZE OF LOT 3 Ac. TYPE BLDG. SINGLE FAMILY -
(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.

FOR THE OWNER
Joseph L. Mareau
(SIGNATURE OF APPLICANT)
Fisher, Collins + Carter, Inc., 461-2855, Engineers

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING See A 33983 for lot 1 perc tests 7/27/84 HOLD
SLAY & ROCK RH

THIS IS NOT A PERMIT

①
SOIL PROFILE

BROWN
CLAY
LOAM

5
ROCK
BOTTOM

②

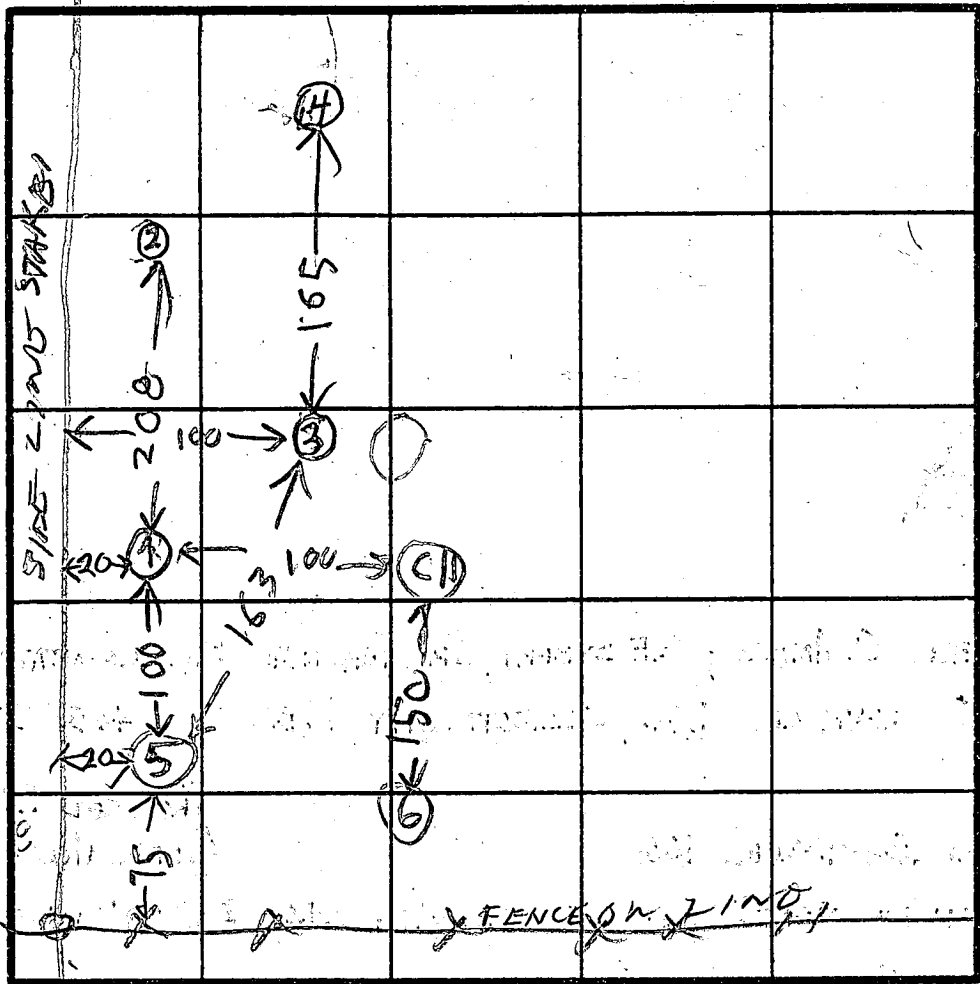
BROWN
CLAY
LOAM

BROWN
SAND
CLAY
LOAM

③

RED
BROWN
CLAY
LOAM
SAND
LOAM
SANDS

ROCK
BOTTM



④
BROWN
CLAY

BROWN
CLAY
LOAM
& ROCKS
ROCK
BOTTOM

⑤
RED
CLAY
LOAM

⑥
RED
CLAY
LOAM

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

ROUTE 144

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/27/84	1V	5	LOOKS	UNSATISFACTORY			
	2V?	1 1/2	LOOKS	SLOW			
	3V	9	LOOKS	UNSATISFACTORY			
	4V	7 1/2	LOOKS	UNSATISFACTORY			
	5V	9	LOOKS	UNSATISFACTORY			
	6V	9	LOOKS	UNSATISFACTORY			
	CH	2	COVERED	HOLE			

REMARKS TWO MORE HOLES DUG BUT COVERED BECAUSE APPEARED TO BE POOR SOIL

TYPE OF SOIL
TESTED BY R HODGES
D. MINK
- HARRY J. FLOCK, SKIP
MARIE WALKER
ALSO PRESENT

EH-12-108

COORDINATE TABLE		
NO.	NORTH	EAST
1	537403.43	806831.82
2	537423.35	806847.70
3	537958.38	807274.20
4	538456.68	807948.28
5	537567.51	808024.75
6	537113.79	807860.51
7	537097.79	807854.72
8	537392.75	807144.55
9	537420.72	806965.74
10	537437.66	806964.33
11	537408.45	807151.07
12	537196.17	807662.18

NOTE: COORDINATES AND BEARINGS ON THIS PLAT ARE REFERRED TO THE SYSTEM OF COORDINATES ESTABLISHED BY HOWARD COUNTY TRAVERSE STATIONS AS FOLLOWS:
 #3535001-R N536467.338 E809324.777
 #3535002-R N537964.082 E804977.064

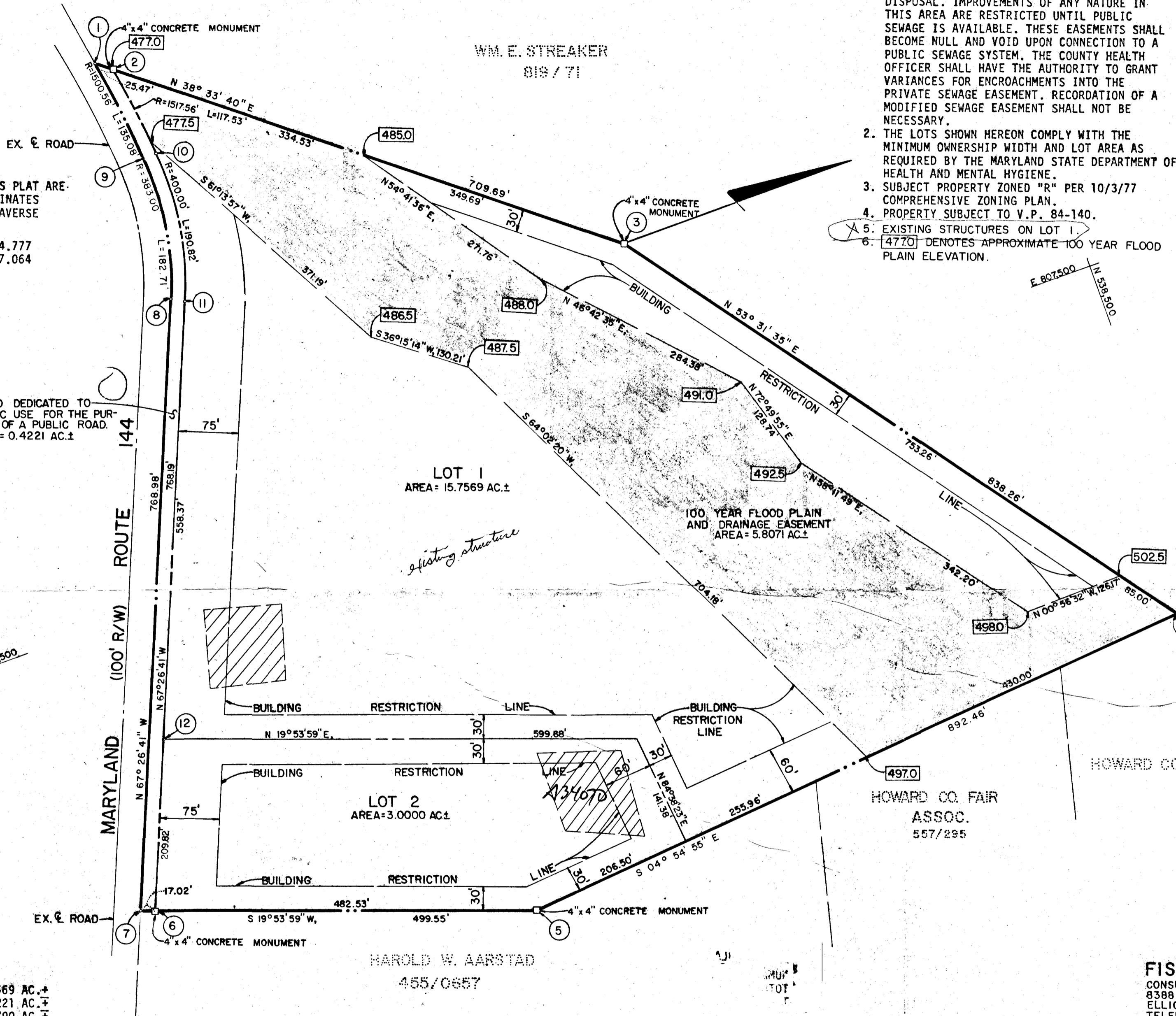
OWNER & DEVELOPER

CORNELIUS F. SYBERT, JR.
 SUITE L
 9025 CHEVROLET DRIVE
 ELLICOTT CITY, MD. 21043

AREA TABULATIONS:

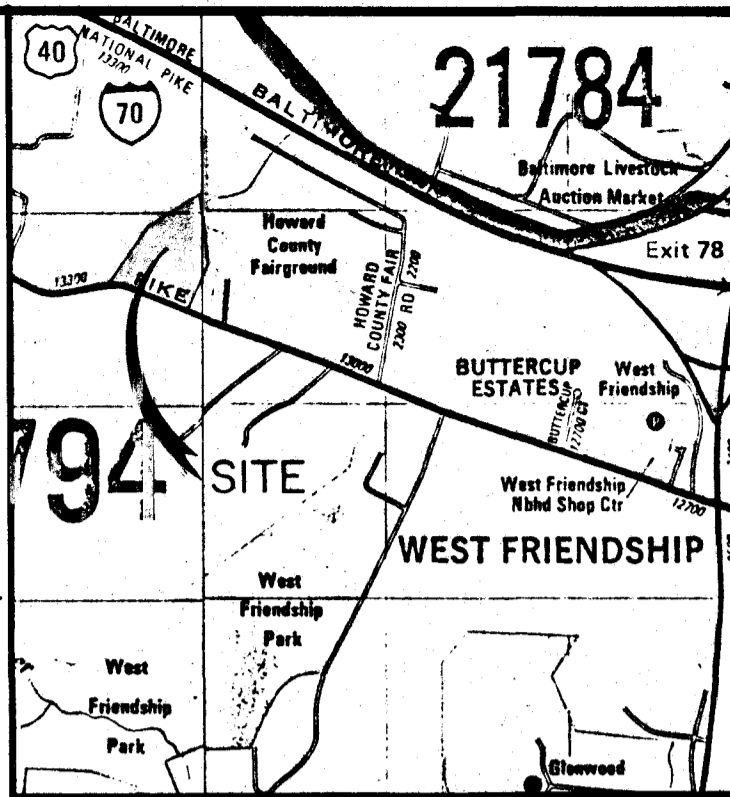
NUMBER OF LOTS TO BE RECORDED - 2
 TOTAL AREA OF LOTS - 18.7569 AC.±
 TOTAL AREA OF ROAD DEDICATION - 0.4221 AC.±
 TOTAL AREA OF SUBDIVISION - 19.1790 AC.±

LAND DEDICATED TO PUBLIC USE FOR THE PURPOSE OF A PUBLIC ROAD. AREA = 0.4221 AC.±



NOTES:

- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.
- SUBJECT PROPERTY ZONED "R" PER 10/3/77 COMPREHENSIVE ZONING PLAN.
- PROPERTY SUBJECT TO V.P. 84-140.
- EXISTING STRUCTURES ON LOT 1
- [4770] DENOTES APPROXIMATE 100 YEAR FLOOD PLAIN ELEVATION.



VICINITY MAP

SCALE: 1" = 2000'

RECEIVED

NOV 23 1984

DIVISION OF LAND DEVELOPMENT
 OF HOWARD COUNTY

FISHER, COLLINS & CARTER, INC.

CONSULTING ENGINEERS & LAND SURVEYORS
 8388 COURT AVENUE
 ELLICOTT CITY, MARYLAND 21043
 TELEPHONE NUMBER (301) 461-2855

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.
 S16ND 1-2585
 HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING
 S16ND PLAT 15 WITH A33983
 DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS, AND PUBLIC ROADS.
 HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS
 DIRECTOR DATE

OWNER'S CERTIFICATE:

I, CORNELIUS F. SYBERT, JR., PERSONAL REPRESENTATIVE OF THE ESTATE OF CHARLES O. AMOSS AND EDNA AMOSS, HIS WIFE, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES, IN AND UNDER ALL ROADS AND STREET RIGHT-OF-WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE BEDS OF THE STREETS AND/OR ROADS, THE FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; AND (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR SPECIFIC PURPOSE OF THEIR CONSTRUCTION, REPAIR AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERECTED ON OR OVER THE SAID EASEMENTS AND RIGHT-OF-WAYS.
 WITNESS MY/OUR HANDS THIS 20th DAY OF NOVEMBER, 1984.

Cornelius F. Sybert, Jr.
 CORNELIUS F. SYBERT, JR. - PERSONAL REPRESENTATIVE

Charles J. Carter
 WITNESS

SURVEYOR'S CERTIFICATE:

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A SUBDIVISION OF ALL OF THE LANDS CONVEYED BY CLARA C. KLASCHUS TO CHARLES O. AMOSS AND EDNA AMOSS, HIS WIFE, BY DEED DATED JUNE 1, 1931 AND RECORDED IN THE AFORESAID LAND RECORDS IN LIBER 141 AT FOLIO 591, AND THAT ALL MONUMENTS ARE IN PLACE, PRIOR TO THE ACCEPTANCE OF THE STREETS IN THE SUBDIVISION BY HOWARD COUNTY AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

RONALD B. CARTER L.S. NO. 10704
 11-21-1984
 DATE

PROPERTY OF
 CHARLES O. AMOSS

LOT 1 & LOT 2

3RD ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

TAX MAP 15 PARCEL 106

SCALE: 1" = 100' NOV. 20, 1984

1/24/85 orig sent to Dri
 app. sent plng 12-20-84

F-85-76

B 1 **7044** SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 PERMIT TO DRILL WELL

OEP PERMIT NUMBER
HO-81-1023
 fill in this form completely

please print or type

Date Received **7/5/85** *9:30 gvd*
 OWNER INFORMATION
JOSEPH CORNELIUS
 Last Name Owner First Name
1025 CHEVROLET DR
 Street or RFD
ELICOTT CITY MARYLAND
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
AMOSS EST SUBDIVISION
 SECTION **44** LOT **2**
WEST FRIENDSHIP NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **1** MI

DRILLER INFORMATION
L. DANIEL EASTERDAY License No. **HI**
L. FRANKLIN EASTERDAY, Inc. Firm Name
9265 Brown Church Rd. Mt Airy, MD 21777 Address
L. Daniel Easterday Signature Date **5-3-85**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
13250 FREDERICK Rd NEAR WHAT ROAD
 DISTANCE FROM ROAD **500** FT
 ENTER FT or MI **FT**

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 COUNTY NAME **A34070** COUNTY NO.
 OEP SIGNATURE **Craw** STATE HEALTH INSERT S
 DATE ISSUED **052085** CO SIGNATURE **11/20/85** EXP. DATE
 NORTH GRID **538000** EAST GRID **0808000**

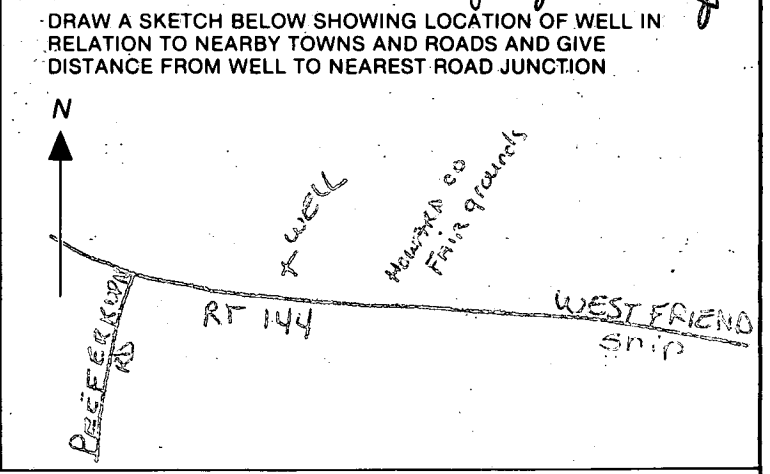
APPROXIMATE DEPTH OF WELL **200** FEET

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 _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 2. **62 - casing**
 3. **50' - open**
12 - bags cement
 WRITE THE BOX NUMBER FROM THE MAP HERE
800
530
No present at time of print

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 **CW** WRITE INITIALS IN BOX PERMIT No. **HO-81-1023**

SPECIAL CONDITIONS

C1 2291 SEQUENCE NO. (OEP USE ONLY)

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

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 34070

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED grid: 070585

DEPTH OF WELL grid: 300 (TO NEAREST FOOT)

PERMIT NO. grid: 40-81-1023

OWNER SYBENT CORNELIUS last name first name STREET OR RFD 13250 FREDERICK RD TOWN WEST FRIENDSHIP SUBDIVISION AMOSS ESTATE SECTION LOT 2

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, brown shale, brown slate, blue slate, fractal blue slate, blue slate.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle appropriate box) TYPE OF GROUTING MATERIAL CEMENT CEMENT BENTONITE CLAY NO. OF BAGS 12 NO. OF POUNDS 1200 GALLONS OF WATER 65 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 34 ft.

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

MAIN CASING Nominal diameter Total depth CASING TYPE top (main) casing (nearest inch) of main casing (nearest foot) ST 6 63

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

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

DEPTH (nearest ft.) grid: 61 300. EACH SCREEN grid: 1 HO, 2, 3

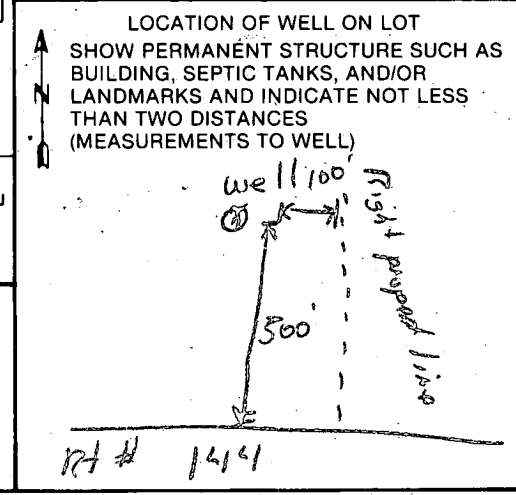
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) grid: 56 60

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 45 WHEN PUMPING 170 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) above below LAND SURFACE (nearest foot) 2



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 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. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

6000

ALL CASING 50 OPEN

Page 1 of 1
Date 7-5-85

Review OK-8/30/85 CW
Jim V

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1023
Location of property (road) ROUTE 144
Subdivision AMOSS EST Lot 2 Block Plat Sec.
Well Driller EASTDAY Owner CORNELIUS SYBERT

Depth of well 300 26PM
Distance of measuring point (M.P.) above ground 1 FT
Static water level (S.W.L.) below M.P. 45 FT

I. High rate pumping -- reservoir drawdown Pump 1 set
Time pump started 9:00 Pumping rate 86 gpm 260 FT
Total time 1-hr to reach pumping water level 190 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 5 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:00	190 FT	30 sec		2 GPM
10:15	200 FT	30 sec		2 GPM
10:30	195 FT	30 sec		2 GPM
10:45	190 FT	30 sec		2 GPM
11:00	180 FT	30 sec		2 GPM
11:15	175 FT	30 sec		2 GPM
11:30	175 FT	30 sec		2 GPM
11:45	175 FT	30 sec		2 GPM
12:00	175 FT	30 sec		2 GPM
12:15	175 FT	30 sec		2 GPM
12:30	175 FT	30 sec		2 GPM
12:45	175 FT	30 sec		2 GPM
1:00	175 FT	30 sec		2 GPM
1:15	175 FT	30 sec		2 GPM
1:30	175 FT	30 sec		2 GPM
1:45	175 FT	30 sec		2 GPM
2:00	175 FT	30 sec		2 GPM
2:15	175 FT	30 sec		2 GPM
2:30	175 FT	30 sec		2 GPM
2:45	170 FT	30 sec		2 GPM
3:00	170 FT	30 sec		2 GPM
3:15	170 FT	30 sec		2 GPM
3:30	170 FT	30 sec		2 GPM
3:45	170 FT	30 sec		2 GPM