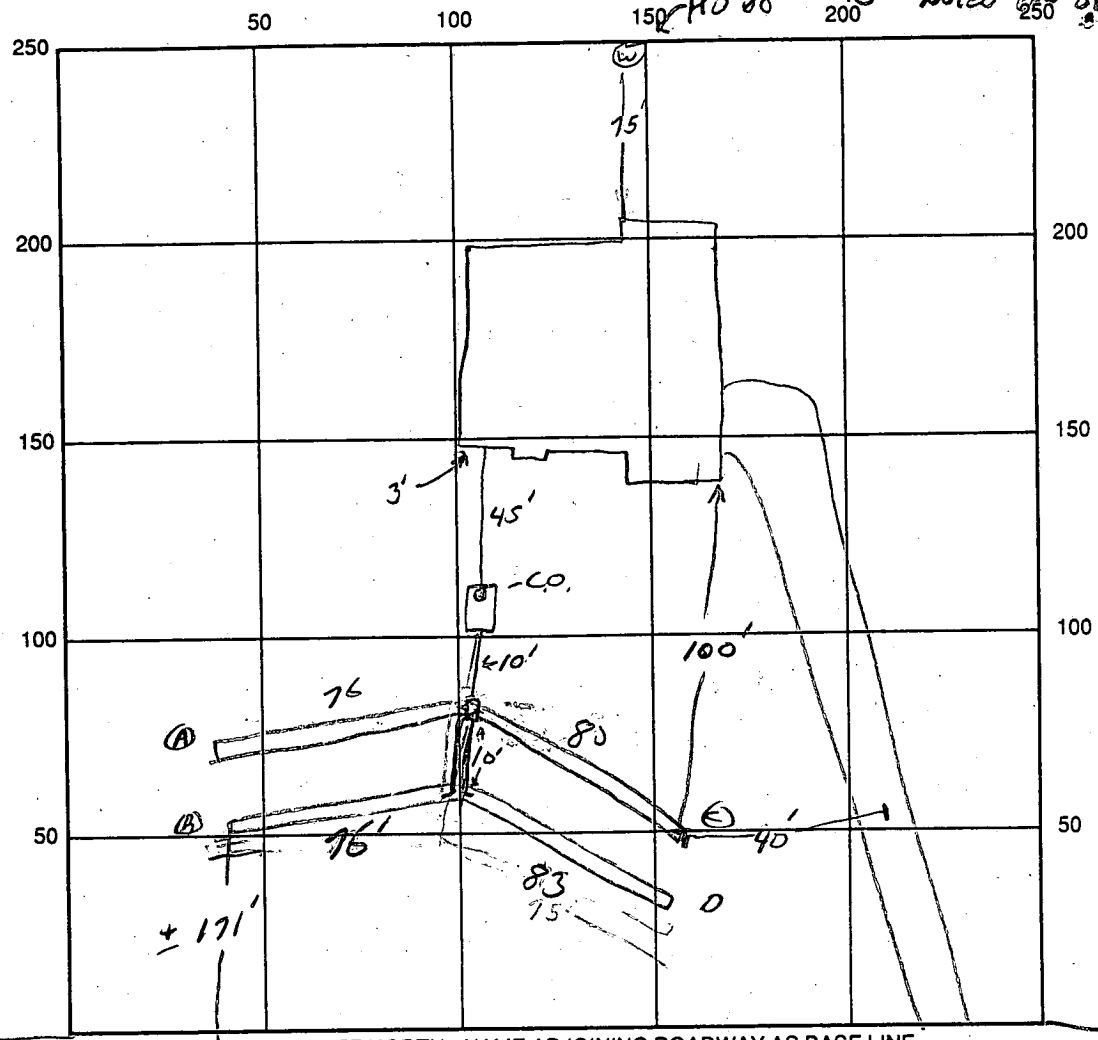


10/18/95 WPT OK
 TWO PIECE CAP REQD
 NOTED BY STICKER

HO 88 0895
 200



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 BRITTE BRANCH WAY

SEPTIC TANK LEVEL OK CLEANOUTS 1 ON TRAIL
 DISTRIBUTION BOX LEVEL OK
 DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH +315 FT. A=76 C=80 } 163
 B=76 D=83 } 152 } 315 } 315 } 995 } 1
 NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 945 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT. HO 88 0985

REMARKS: 10/18/95 WELL TAG # 15 DIFFERENT THAN
PERMIT TAG # HO-88 0903. (RIDGEWOOD LOT 30, ROYDEN ST.)
11/3/95 R MAYNE REPORTS TAGS SWITCHED TO CORRECT
LOCATIONS MR

DATE SYSTEM APPROVED 10/18/95 INSPECTOR [Signature]

12/20/83
9:30 AM
Cancelled

APPLICATION

Prel.

2/2/84
1:30 P.M.

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33406
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th

DATE December 19, 1983

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 Lawrence Blumberg
ADDRESS 2909 Old Court Road, Baltimore, Maryland PHONE 653-0690
21208

PROPERTY LOCATION:
SUBDIVISION Lisbon Estates LOT NO. NEW 910

ROAD AND DESCRIPTION _____

S.F.D 4 Brooms
BLDG. PERMIT SIGNED
AND RETURNED 9-5-95
Serial # 61400

SIZE OF LOT 3 acre TYPE BLDG. 3 or 4 Bedrooms
(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.

Larry J. Duff (AGENT)
(SIGNATURE OF APPLICANT)

THE RIEMER GROUP, INC.
8659 BALTO. NATIONAL PI
ELLICOTT CITY, MD. 21043
461-2690

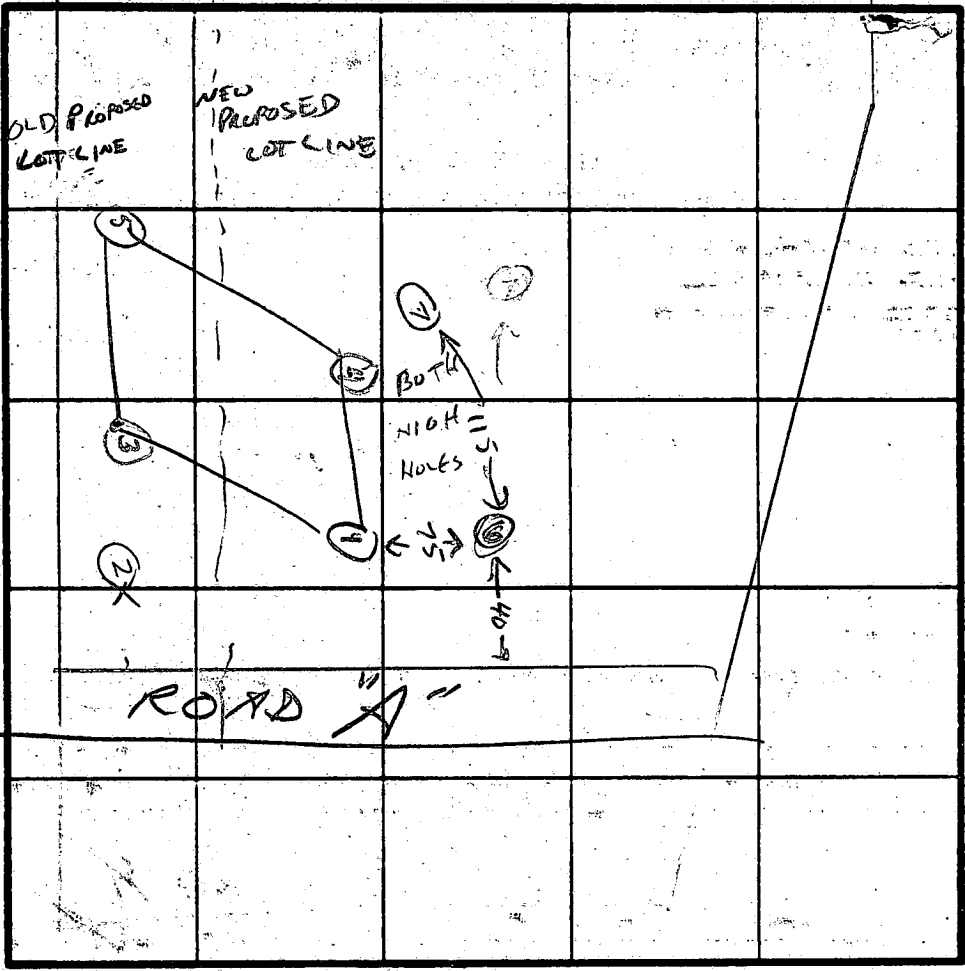
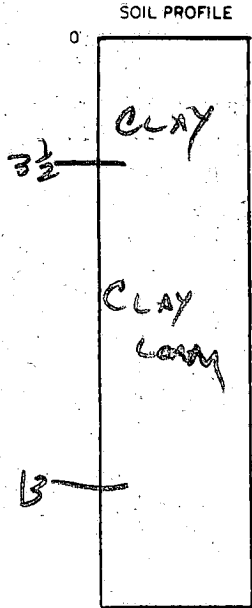
APPROVED BY Sid Abel FOR TRENCH DATE 2-14-85

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS CW DATE 2-14-84

REASONS FOR REJECTION OR HOLDING NEED PLOT PLAN W/ CERTIFIED LOCATIONS, CW

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	
2-2-84	6	3 5	2:06	2:17	2:17	2:32	15 MIN
		13	DRY				
2-2-84	7	5 12	2:08	2:16	2:16	2:28	12 MIN
			COMBINE WITH TESTS OF		8-25-82 - CW		

REMARKS NEW AREA ADDED TO ALLOW ADJUSTMENTS TO PROPOSED LOT LINES
CERTIFIED LAYOUT NEEDED SANJ. CW

TYPE OF SOIL CLAY LOAM

TESTED BY C. Wilbur

ALSO PRESENT DRIENOFF, SCARIS

EH-12-1079

Phel

APPLICATION

A 32091

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 7-16-82

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 Lawrence Blumberg/Charles Snouffer

ADDRESS 2909 Old Court Road, Baltimore 21209 PHONE 574-9300

PROPERTY LOCATION:

SUBDIVISION BLUMBERG Lots 1 through 15 LOT NO. NEW 9 11

ROAD AND DESCRIPTION East of S.R. 94, .5 miles south of Rt. 144 intersection with S.R. 94

SIZE OF LOT 3.19 Acres TYPE BLDG. (S.F. Detached) 4 BR
(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 Piemer-Tracy & Assoc. by Arthur E. Mueggler
(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

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	
12/14/88	8V	11.5'	BOTTOM HANDS - Clay to 3.5'		20-30% Frags		
	9V	12'	Clay to 3' - yell. Br. Silt loam		10-15% Frags		

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

EHP 12 1079

APPLICATION

A 32091

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P O BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 992-2330

DISTRICT _____

DATE 7-16-82

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 Lawrence Blumberg/Charles Snouffer
ADDRESS 2909 Old Court Road, Baltimore 21209 PHONE 574-9300

PROPERTY LOCATION:

SUBDIVISION BLUMBERG Lots 1 through 15 LOT NO. 11

ROAD AND DESCRIPTION East of S.R. 94, .5 miles south of Rt. 144 intersection
with S.R. 94

SIZE OF LOT 3.19 Acres TYPE BLDG. (S.F. Detached) 4 BR
(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.

Reimer-Tracy & Assoc. by Arthur E. Muegg
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

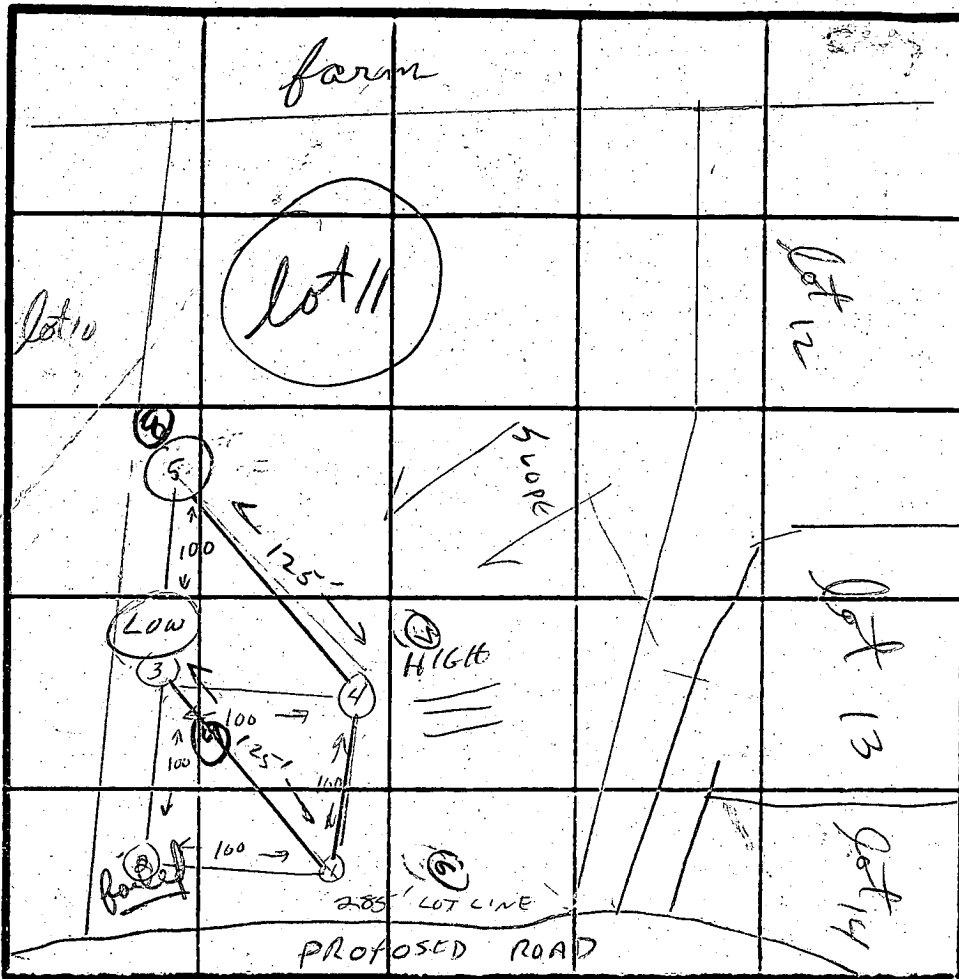
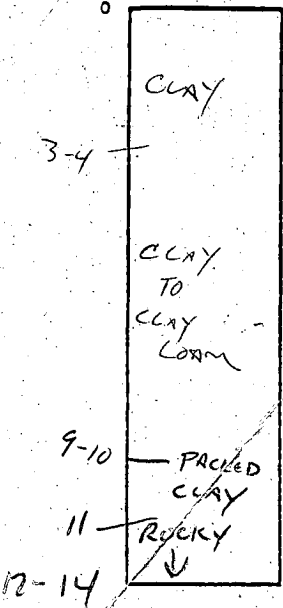
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

LOT 11 OK

184

SOIL PROFILE



↑ to route 94

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
8-24 82	1 S M	3 8 1/2	2:37	FAILED	CLAY		X
(MOVED 9, 3 FT)	S V	4 13 1/2	3:00	3:21	CLAY w/ SOME CLAY-LOAM TURNINGS	2:52 3:14 3:21 3:51	22 MIN 30 MIN
8-25 82	2 S M	3 1/2 8 1/2	10:33	10:54	FAILED	FAILED	failed
	V		RILAY W/ SOME CLAY LOAM				
8-25 82	3 S M	4 9	10:34	10:39	10:45	11:05	20 MIN
	V		MOSTLY CLAY LOAM		TURNING TO DROPPED CLAY 150 FT ROCK AFTER 10 FT		11 MIN
8-24 82	4 S M	3 1/2 8 1/2	2:54	3:05	3:05	3:27	22 MIN
	V		2:54	3:02:30	3:02:30	3:16:30	14 MIN
	V		CLAY TO 3 FT THEN CLAY-LOAM				
8-25 82	5 S M	3 1/2 9	11:38	11:44	11:44	11:55	10 MIN
	M V	8 12	11:38	11:59	12:10	12:32	20 MIN
	V		CLAY TO 2 1/2 THEN CLAY LOAM THEN PACKED CLAY AT 9 1/2 FT				

LOW
HIGH

(Holes 6 & 7 TESTED FEB 2, 1984 SEE OTHER SHEET)

REMARKS NOT MUCH DIFFERENCE IN ELEVATION IN HOLES 1+2+3
TYPE OF SOIL CLAY W/ SOME LOAM
TESTED BY C. Williams

ALSO PRESENT
VIBBO VANDERKALK
LARRY DREHOFF

ROAD

BUILDING

RESTRICTION LINE

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

LOT # 9
3.20 AC.

LOT # 8
3.03 AC.

REPERC 2/84

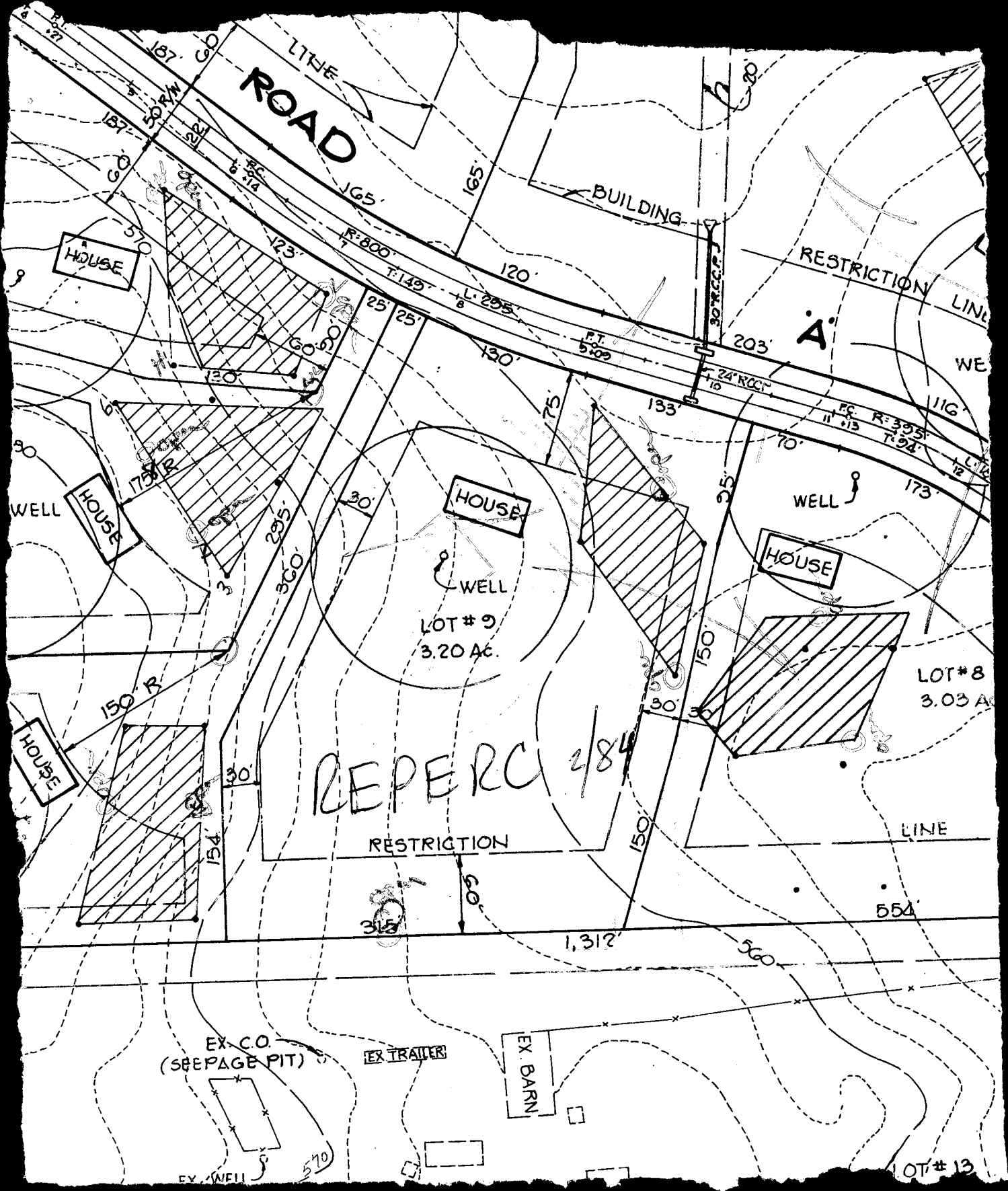
RESTRICTION LINE

EX. CO.
(SEEPAGE PIT)

EX. TRAILER

EX. BARN

LOT # 13



C1 1031 SEQUENCE NO. (DENV USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER A-32091

ST/CO USE ONLY DATE Received 052289 DATE WELL COMPLETED 110989 Depth of Well 22 245 26 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" H-88-0903

OWNER FOAL Contractors last name first name TOWN Lishow
 STREET OR RFD R. Hill Road SUBDIVISION Lishow Estates SECTION LOT 10

WELL LOG
 Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown Shale	2	70	✓
Brown Slate	70	75	
Blue Slate	75	100	
Brown Slate	100	105	✓
Blue Slate	105	245	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
 TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 70 NO. OF POUNDS 2000
 GALLONS OF WATER 120
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 50 ft.

CASING RECORD
 casing types insert appropriate code below
 MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 L Total depth of main casing (nearest foot) 80
 OTHER CASING (if used) diameter inch from to

SCREEN RECORD
 screen type or open hole insert appropriate code below
 SCREEN TYPE HO
 DEPTH (nearest ft.) 1 40 2 75 3 245
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) from to

C3
 PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min. to nearest gal.) 5
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 17 WHEN PUMPING 25
 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: 29
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (nearest ft.) 43 47
 CASING HEIGHT (circle appropriate box and enter casing height) above below LAND SURFACE (nearest foot) 50-51

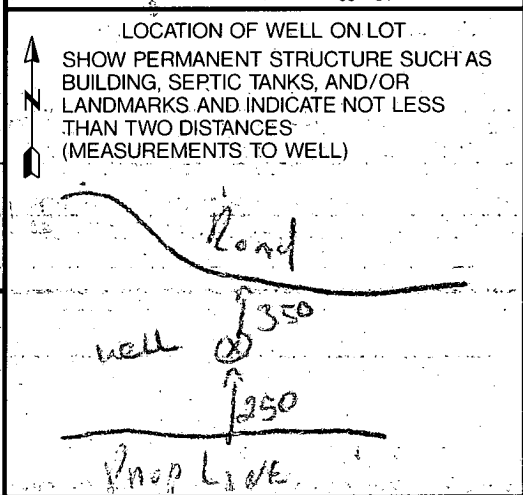
CIRCLE APPROPRIATE LETTER
 A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED.
 E ELECTRIC LOG OBTAINED
 P TEST WELL CONVERTED TO PRODUCTION WELL

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. 273
 DRILLERS SIGNATURE Nath. Mayne
 (MUST MATCH SIGNATURE ON APPLICATION)

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

C2
 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.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA



VERIF

TAG 6

TAG # ON WELL

HO 88 08 95

B 1 **5679** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-88-0903
 fill in this form completely

Date Received (APA) **052389**
 OWNER INFORMATION
 15 Last Name **POKRSY** Owner
 First Name **MILO**
 Street or RFD **MT. AIRY**
 Town **MT. AIRY** State **MD** Zip **21771**

DRILLER INFORMATION
 Driller's Name **Joseph L. Wayne** License No. **238**
 Firm Name **Joseph L. Wayne Well Drilling**
 Address **5512 Ridge Rd. Mt. Airy, Md. 21771**
 Signature **Joseph L. Wayne** Date **5/22/89**

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)

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 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)
 APPROP. PERMIT NUMBER **GAP**
 FORCE **CW** WRITE INITIALS IN BOX PERMIT No. **HO-88-0903**

SPECIAL CONDITIONS

LOCATION OF WELL
 8 COUNTY **HOWARD**
 23 SUBDIVISION **LISKON**
 SECTION **44** LOT **10**
 52 NEAREST TOWN **LISKON**
 MILES FROM TOWN (enter 0 if in town) **1** MI

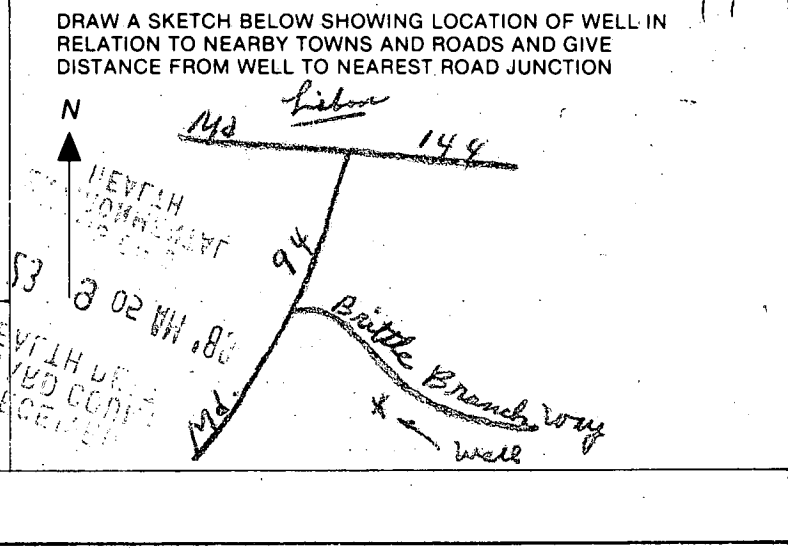
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 NEAR WHAT ROAD **Brittle Branch way**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH WEST EAST SOUTH
 DISTANCE FROM ROAD **350** FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME **HOWARD** COUNTY NO. **A 32091**
 STATE SIGNATURE _____ DATE ISSUED **071789**
 CO SIGNATURE **Craig Williams** EXP. DATE **1/1/90**
 NORTH GRID **543000** EAST GRID **0777000**

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

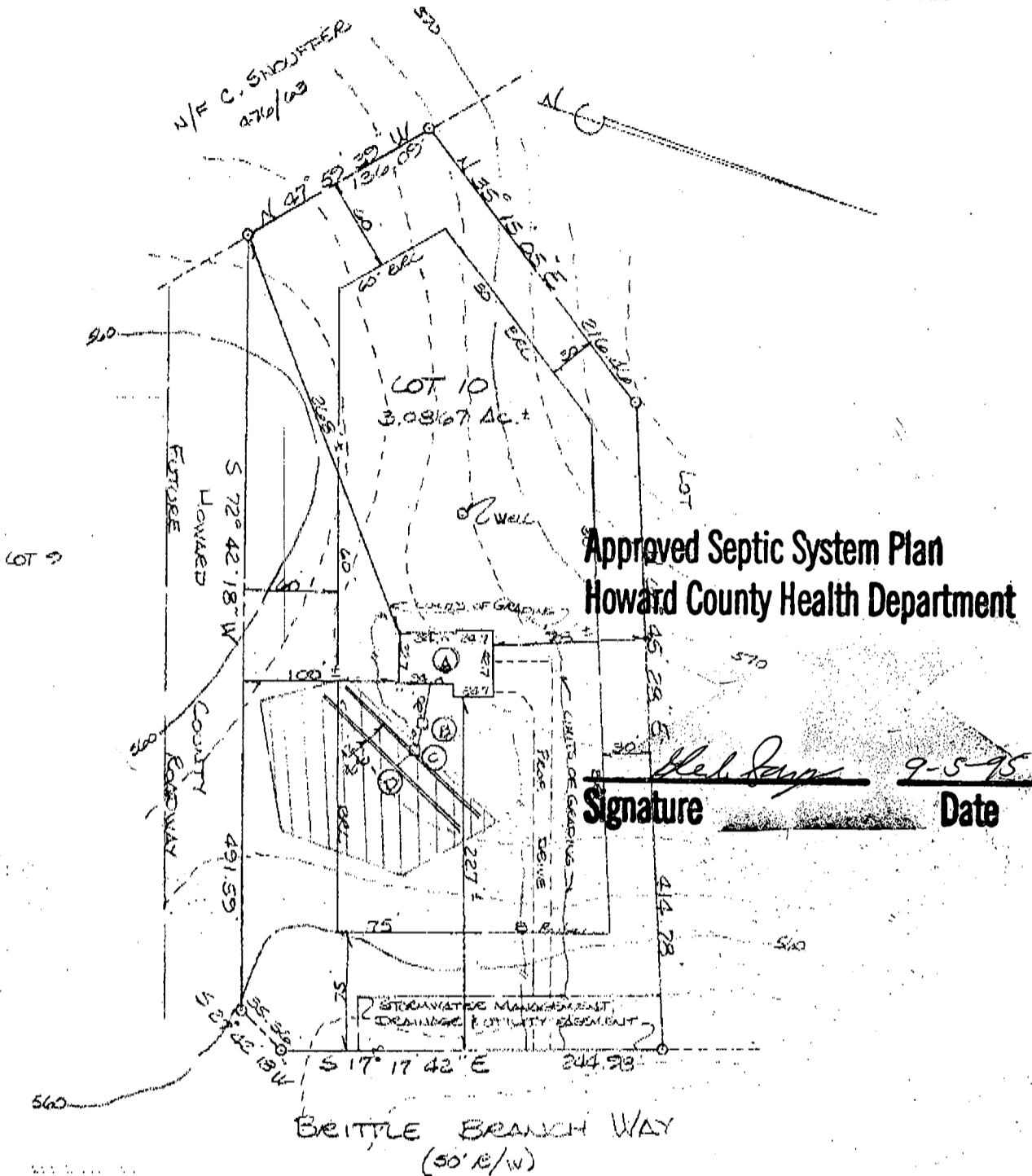


(A) = PROP. 4 BED. HOUSE
 F.F. ELEV. = 569.0
 BENT. ELEV. = 562.7
 INV. ELEV. = 561.6

(B) = PROP. SEPTIC TANK
 EX. ELEV. = 565.1
 INV. IN = 561.4
 INV. OUT = 561.1

(C) = PROP. DIST. BOX
 EX. ELEV. = 564.7
 INV. ELEV. = 561.0

(D) = PROP. TRENCHES
 JTM. ELEV. = 560.7
 2" STONE, 6" BOTTOM
 MAX. LENGTH TO BE
 DETERMINED AT TIME
 OF SEPTIC PERMIT
 REVIEW.



Approved Septic System Plan
 Howard County Health Department

Heh Jays
 Signature Date 9-5-95

PLOT PLAN
 LOT 10, SECTION 1,
 LISBON ESTATES
 SITUATED ON BRITTLE BRANCH WAY
 ELECTORAL DISTRICT N# 4
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 100' AUG. 1995



I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.

NH NASSAUX - HEMSLEY, INC.
 4140 RIDGE ROAD
 TAYLORSVILLE, MARYLAND

REFERENCE	JOB NO.
PLAT # 244B	2451 0605

410-875-0722 21157

CAD ONE, INC. 301-595-1120 090823