

11/30/99
am c.o.
12/1/99
NOON

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-330230

P 513130

A 50830-M

DISTRICT _____

DATE 11/18/1999

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 12/1/99

INSPECTOR SA

INDEXED

Van Sant Plumbing & Heating IS PERMITTED TO INSTALL ALTER

ADDRESS 3 N. Main Street, Mt. Airy, MD 21771 PHONE 301-829-0444

SUBDIVISION Brantwood LOT 16 ROAD 11524 Stardust Lane

PROPERTY OWNER ~~NV Homes~~ DAVE BRENNAN

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 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Begin trenches 125 feet up the right lot line and 85 feet off that same lot line as seen when facing the lot from Stardust Lane. Run trenches on contour 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. OK/MR

PLANS APPROVED BY Amy McMillen DATE 6-24-1999

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)

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.

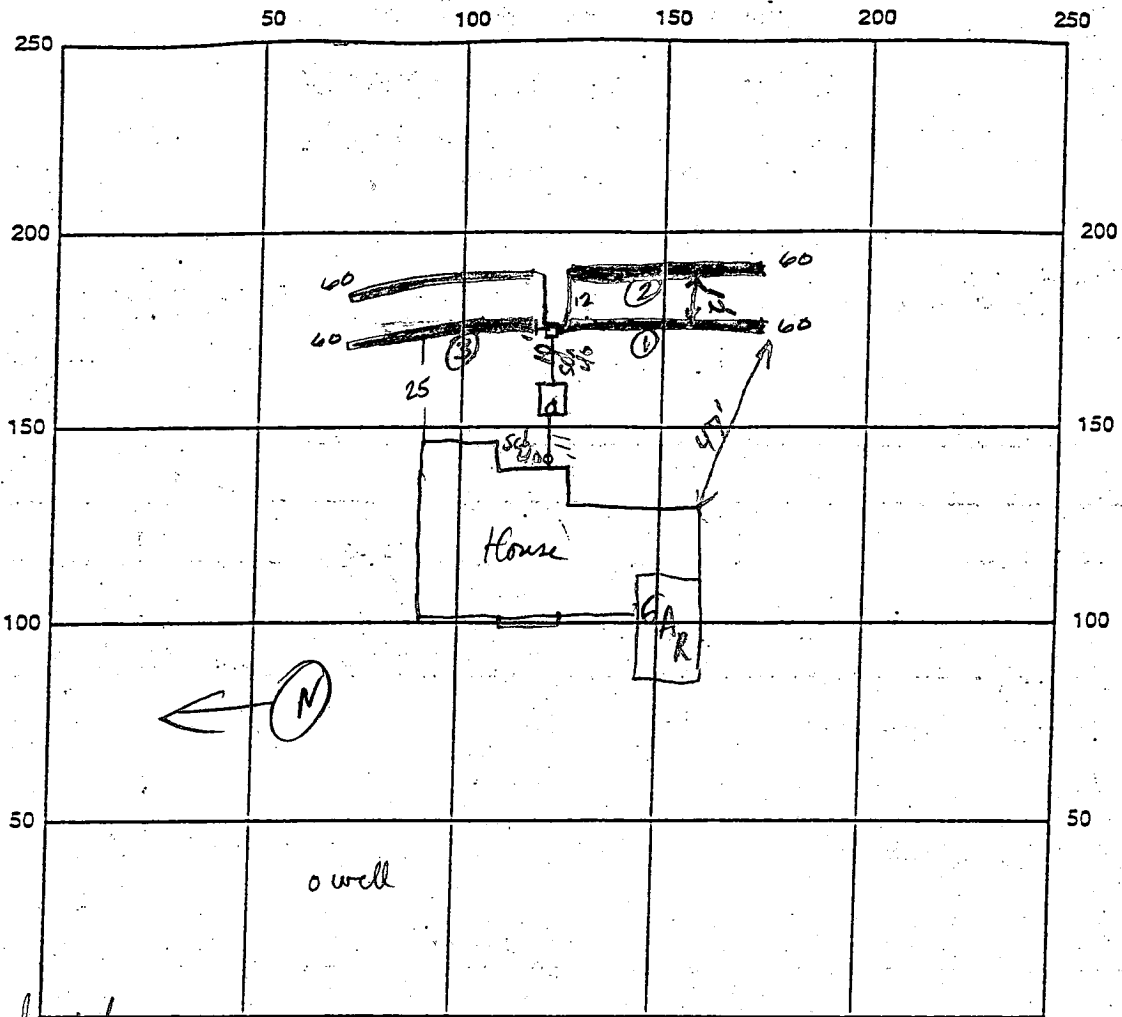
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

800118680
6/24/99 SFD
FILED PERMITS
AND RETURNED 8/22/2000
800125942 DECK AND
SCREENED PORCH

A 50830M



Standard line INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 gal Mid Sump CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 5' (5' @ start of 3+4) TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 60/60/60/ FT. 60 = 240

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER - FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA - SQ. FT.

REMARKS: Septic Tank Set, Home Conversion OK 11/30/99 P.P. Cleanout on S.T. OK to cover
1st & 2nd Trench OK to cover, 3rd Trench OK to gravel fill (calling good nice for soil). Call for Final trench
insp tomorrow. 11/30/99 P.P. 12/1/99 OK to cover all work final A

DATE SYSTEM APPROVED 12/1/99 INSPECTOR A. M. Muel

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
 Replacement

Receipt # _____
 Date _____

Name of Installer Van About Abby Hally

Telephone 301-829-0444

License Number 1467
 Certified Well Pump Installer _____ Well Driller _____

Registered Plumber

Name of Property Owner WV Homes
 Subdivision Grantwood Lot # 16
 Site Address 1150s Star Dust Lane

Telephone 301-858-0522
 Well Tag # _____

- Pump**
- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
 - Make Goulds
 - Model # 7G205422
 - Capacity _____ 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 1/2
 - RPM _____
 - Voltage _____
 - 110 _____
 - 220

- Pitless Adapter**
- Make Amphol
 - Model # 310X
 - Depth 48"

- Tank**
- Capacity V-100
 - Pressure relief valve? Yes

- Piping**
- Type PE
 - Size 1"
 - NSF and/or BOCA Code approved
 - Depth of supply line 48"

- Well data**
- Depth 250 ft.
 - Yield 10 GPM
 - Static water level _____ ft.
 - Will water supply be disinfected by installer? _____

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: [Signature]

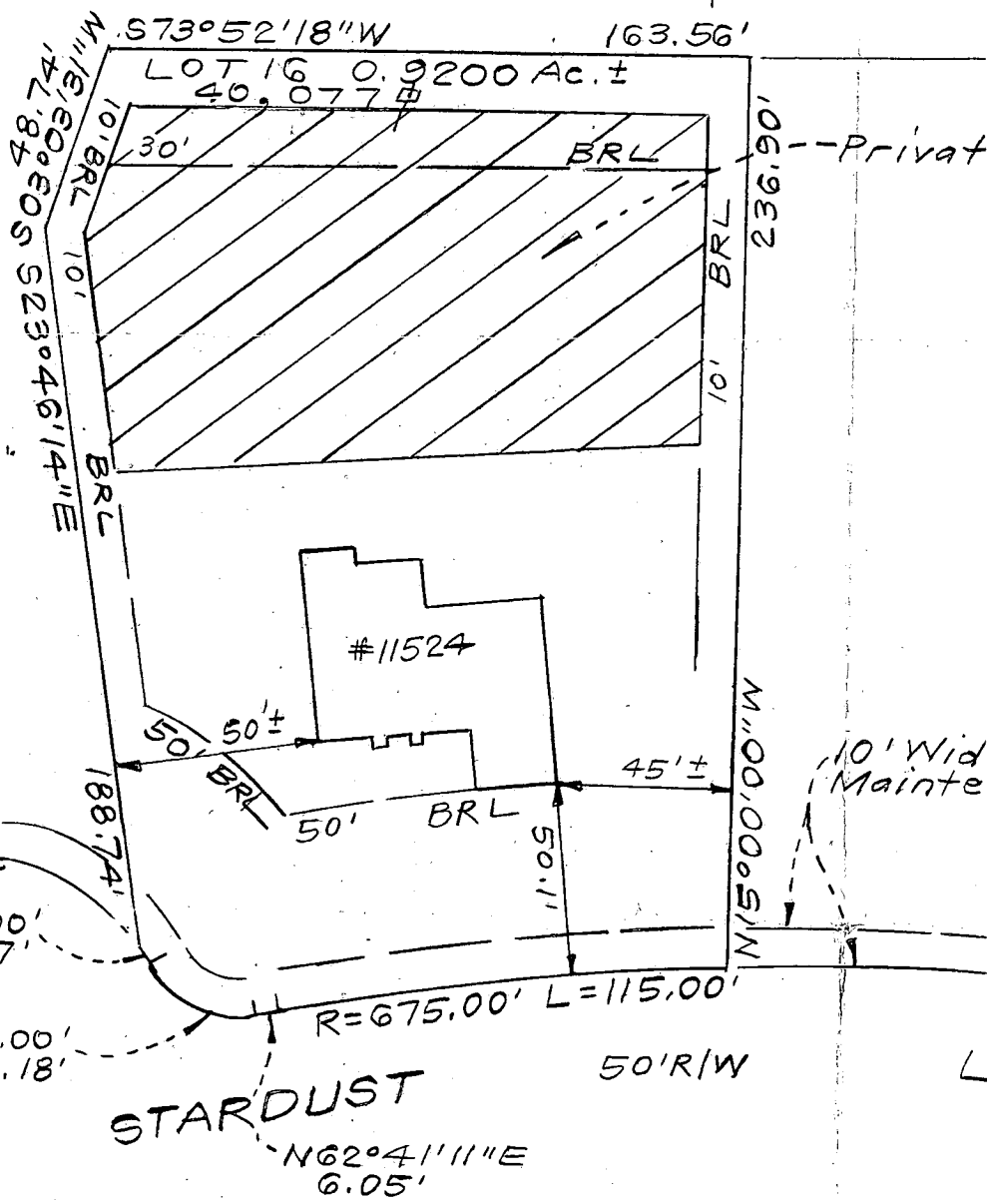
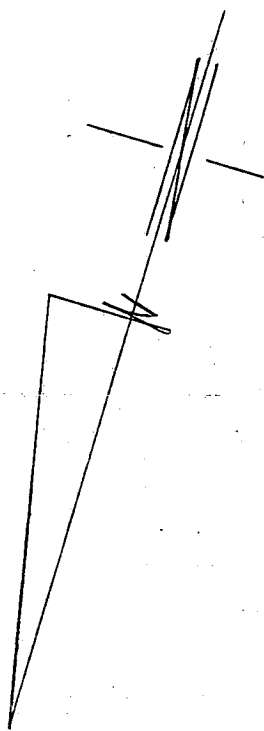
Date: 8/31/99

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

12/1/99
 WPI 4.0' below
 2 piece cap
 3/8 PVC conduit
 1.5' above casing
A

PRESERVATION
PARCEL "B"

PRESERVATION
PARCEL



11/15/99
Shown house location is consistent with the approved building permit plan

A McMullo

R=50.00'
L=5.27'

R=25.00'
L=32.18'

R=675.00' L=115.00'

STARDUST

N62°41'11\"/>

50'R/W

1"=50'

LOCATION DRAWING
11524 STARDUST LANE
LOT 16
BRANTWOOD



CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS

NOTES:

Total linear feet of trench
required 240 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.0 feet

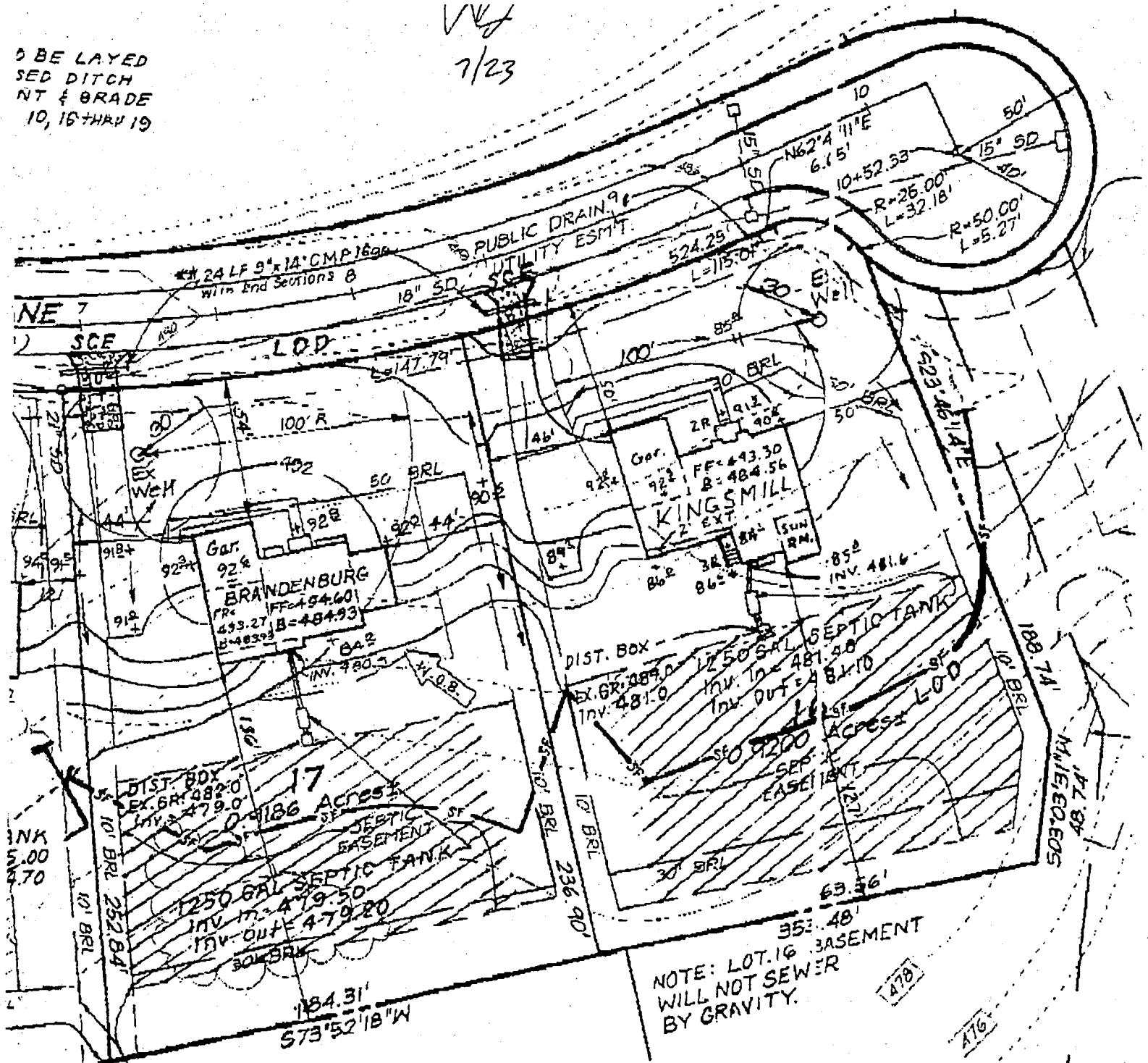
Depth of stone required below
distribution pipe 2.0 feet

Approved Septic System Plan
Howard County Health Department

Amy McMill 9/22/99
Signature Date

TO BE LAYED
SED DITCH
NT & GRADE
10, 15 THRU 19

VWJ
7/23



NOTE: LOT. 16 BASEMENT
WILL NOT SEWER
BY GRAVITY.

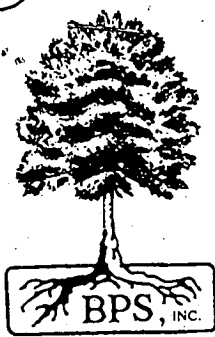
170
176
174

**BUILDING
PERMIT
SERVICES
INC.**

2602 Parallel Path • Abingdon, Maryland 21009

(410) 515-1717 • FAX (410) 515-2213

CR 6120
50.00
CR 25530



The Roots for Development

September 1, 1999

RECEIVED

SEP 13 1999

LICENSES & PERMITS
DIVISION

Howard County
Inspections & Permits
3430 Court House Dr.
Ellicott City, Md. 21043

Attn: Avis Corbin

Re: Amendment
Permit# B000118680
11524 Stardust Ln. Lot# 16

Dear Avis,

Please amend the above referenced permit to include a **3 car garage**. I have attached site plans and a copy of the worksheets showing this option along with a rear sunroom.
Thank you.

Sincerely,

Patricia A. Orla
Agent for NVHomes

cc: Juli Berardeli
File

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/15/95

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 Feaga Family NV HOMES

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing, Inc. C/O Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City 21042 PHONE 313-8808

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 18201816

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd
11524 Stardust Lane

TAX MAP 16+23 PARCEL # 34+63

~~BLDG. PERMIT SIGNED~~
~~AND RETURNED 6-24-95~~
Serial # B101868

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD - 4BDM
(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.
Mark A Reil
(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 _____

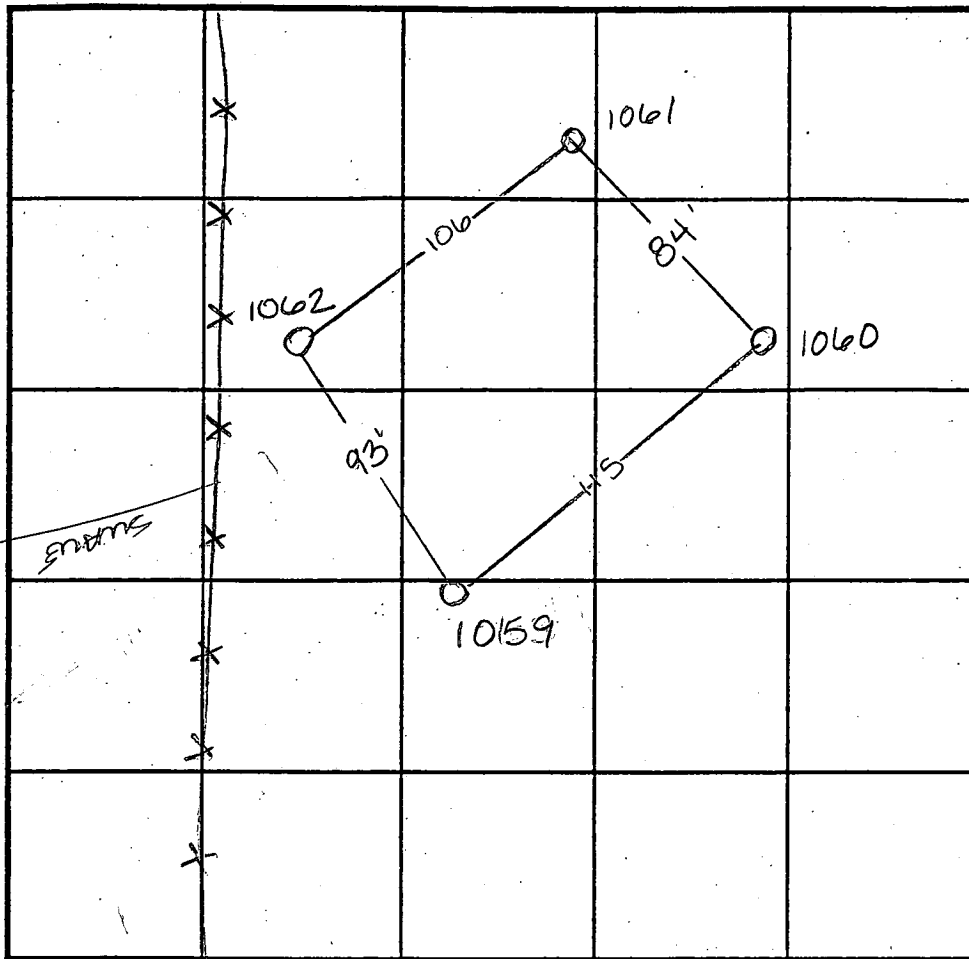
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

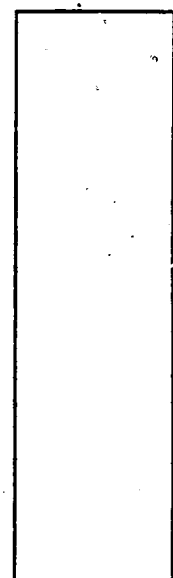
COUNTY #

SOIL PROFILE
1062

no distinct clay layer pink to lgt tan silim very micaceous



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

1059 1061

layered decayed shale pink w/ tan clm

greyish tan silim very micaceous

100% decayed saprotic

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-18-95	1062	3' / VII	2:43	2:44	2:44	2:46	2min
	1059	3.5' / VII	2:41	2:42	2:42	2:43 ³⁰	1 1/2 min
	1061	Visual to 11'	See profile		—		OK
	1060	3' / VII.5	2:40	2:45	2:45	2:47	2min

1060

lgt tan silim micaceous

orange tan silim micaceous

100% decayed shale

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Mark Reich

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

11

4'

11

2'

115

24/3

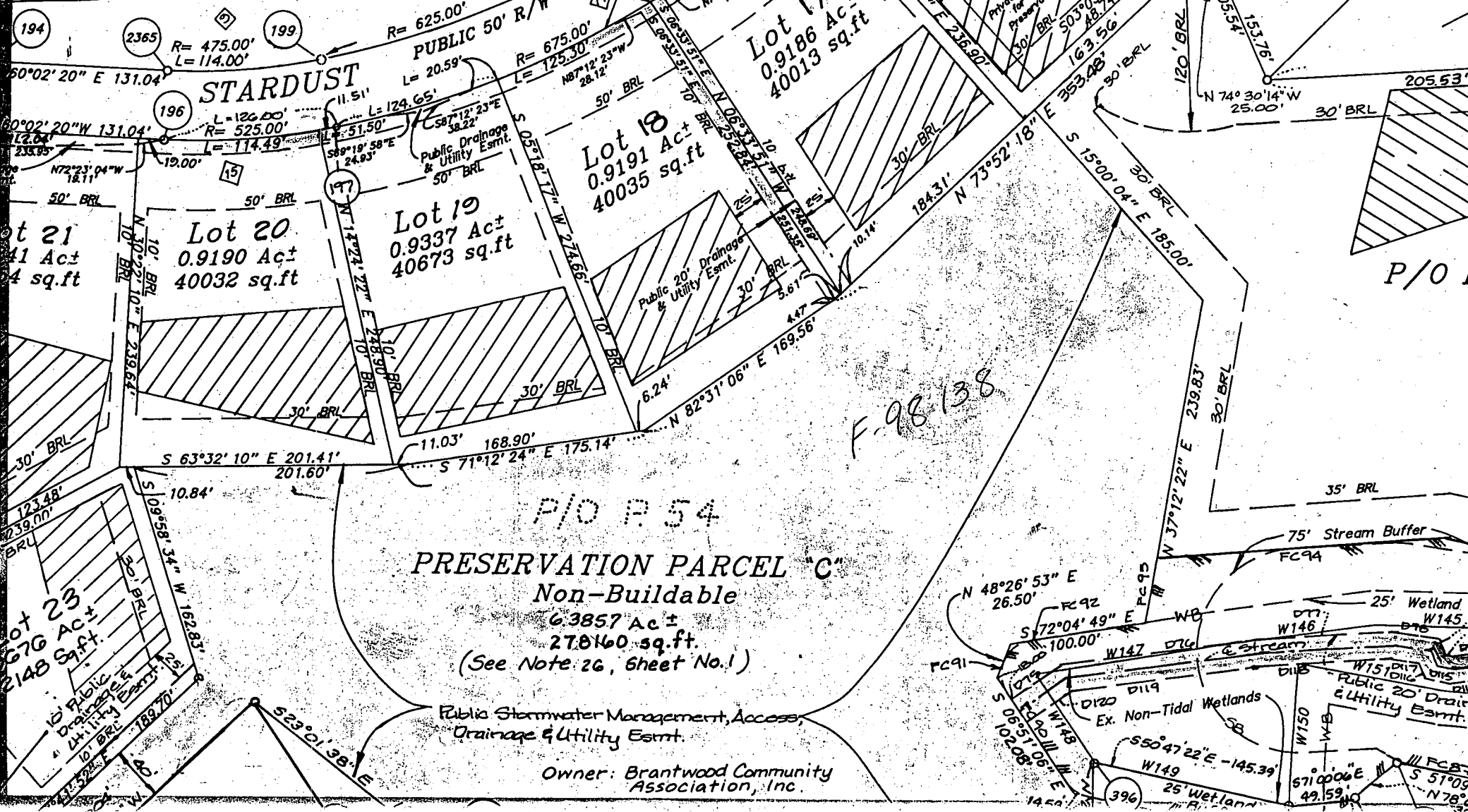
Recorded: 9, 1/01
 ts: 8
 on Parcels: P/O
 on Parcels: 1
 on Parcels: 0
 recorded: 30.2475 Ac±
 ts: 7.4687 Ac±
 on Parcels: 16.3931 Ac±
 on Parcels: 6.3857 Ac±
 on Parcels: 0 Ac±
 ay to be recorded: 1.8277 Ac±
 h to be recorded: 32.0752 Ac±

Parcels "A", "B", "C",
 and all conveyances
 the easements here
 the deed(s) convey
 deliver deeds and
 for the easements
 of easement and de
 Land Records of Ho
 in accordance with
 and Zoning and Dep

SEE SHEET 3

MATCHLINE

MATCHLINE



P/O P 54
PRESERVATION PARCEL "C"
 Non-Buildable
 6.3857 Ac±
 270,160 sq.ft.
 (See Note 26, Sheet No. 1)

Public Stormwater Management, Access,
 Drainage & Utility Esmt.
 Owner: Brantwood Community
 Association, Inc.

P/O

F-98138

C1 4130

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A50830M

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-94-1928

OWNER Brantwood LLC STREET OR RFD Stardust Ln TOWN ELICOTT CITY MD SUBDIVISION Brantwood SECTION T LOT 16

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for BROWN SHALE and BLUE SLATE.

GROUTING RECORD form including fields for TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form including fields for casing types (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form including fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER).

PUMPING TEST form including fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED form including fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, PLACE, CAPACITY, GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT, LAND SURFACE.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: YES (Y) NO (N)

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...

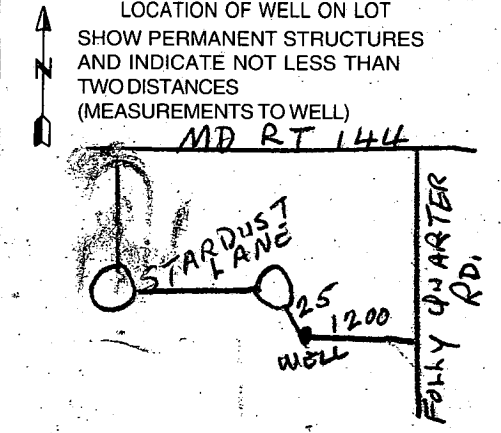
DRILLERS LIC. NO. MWD 139 Robert Clime DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. MWD 168 Rick Fogle

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

DEPTH (nearest ft.) table with columns 1-21 and 23-36. Includes SLOT SIZE and DIAMETER OF SCREEN.

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

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



B 1 **8615** SEQUENCE NO. (MDE USE ONLY)
1 2 3 4 5 6
(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-94-1928
70 fill in this form completely 79

Date Received (APA) **10 13 98**
8 MM DD YY 13
OWNER INFORMATION
Brantwood LLC
15 Last Name Owner First Name 34
8835 - P Columbia 100 Parkway
36 Street or RFD 55
Columbia, MO 21045
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
Howard
8 COUNTY 21
Feaga Property
23 SUBDIVISION 42
SECTION 44 46 LOT **16** 48 50
Pine Orchard Meadows
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) **2** M I
73 76 77 78

DRILLER INFORMATION
Hartman, David MWD 517
Driller's Name 76 License No. 81
A.C. Schultes of MO, Inc.
Firm Name
24 South River Road
Address
Edgewater, MO 21037
Signature *Sam Hartman* Date **10/16/98**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
11 **MD Rt. 144** 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **S50** 37
DISTANCE FROM ROAD ENTER FT OR MI **FT** 38 39
TAX MAP: _____ BLK: _____ PARCEL _____

B 2 WELL INFORMATION
1 2 APPROX. PUMPING RATE **10**
(GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED **800**
(GAL. PER DAY) 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co. A50830M
COUNTY NAME COUNTY NO.
STATE SIGNATURE _____ INSERT S → 41
DATE ISSUED **102698** **ATM** **102699**
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID **520 000** EAST GRID **820 000**
50 55 57 63

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

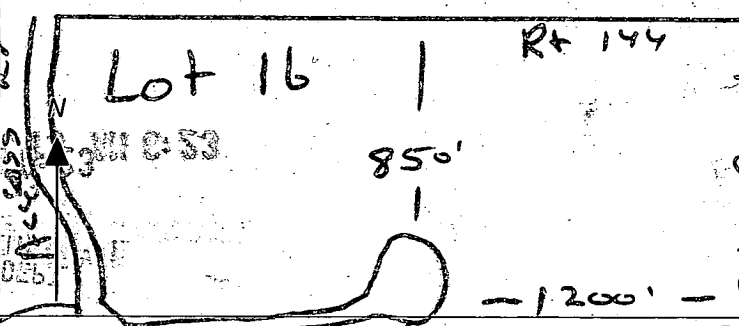
APPROXIMATE DEPTH OF WELL **200** FEET
24 28
APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. **Tanker**
2. **Growth**
3. **Growth**
WRITE THE BOX NUMBER FROM THE MAP HERE
E **820**
N **520**
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
30
37 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
39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER _____
WRITE INITIALS IN BOX PERMIT No. **HO-94-1928**
FORCE **Am** 67 68 70 71 72 73 74 75 76 77 78 79



SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

B 1 8615 SEQUENCE NO. (MDE USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

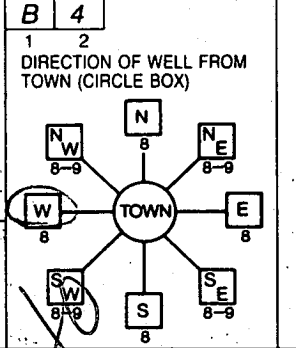
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER HO-94-1928
fill in this form completely

OWNER INFORMATION
Date Received (APA) 10/13/98
8 MM DD YY 13
Brantwood LLC
15 Last Name Owner First Name 34
8835 - P Columbia 100 Parkway
36 Street or RFD 55
Columbia, MD 21045
57 Town 70 State 72 Zip 76

LOCATION OF WELL
B 3 Howard
8 COUNTY 21
Teaga Property
23 SUBDIVISION 42
SECTION 44 46 LOT 16 48 50
Pine Orchard Meadows
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 MI
73 76 77 78

DRILLER INFORMATION
Hartman David MWD 517
Driller's Name 76 License No. 81
A.C. Schalles of MD, Inc.
Firm Name
24 South River Road
Address
Crownover, MD 21037
Signature: [Signature] Date: 10/16/98



B 4
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) MD Rt 144
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST EAST
SOUTH
34 850 37
DISTANCE FROM ROAD FT
ENTER FT OR MI 38 39
TAX MAP: _____ BLK: _____ PARCEL _____

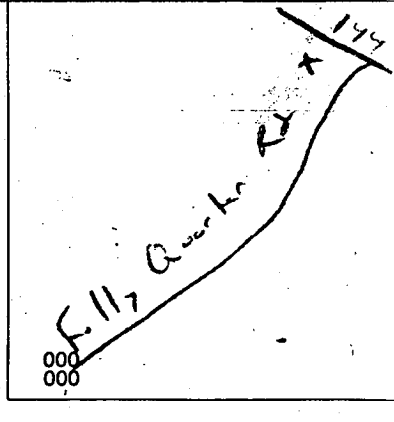
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(GAL. PER DAY) 14 20

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 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co 115083011
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S → 41
DATE ISSUED 10/26/98 1711/11/11 102699
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 520 000 EAST GRID 820 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET
24 28
APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELLS WITH AN X
SOURCES OF DRILLING WATER
1. Tanker
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 820
N 520

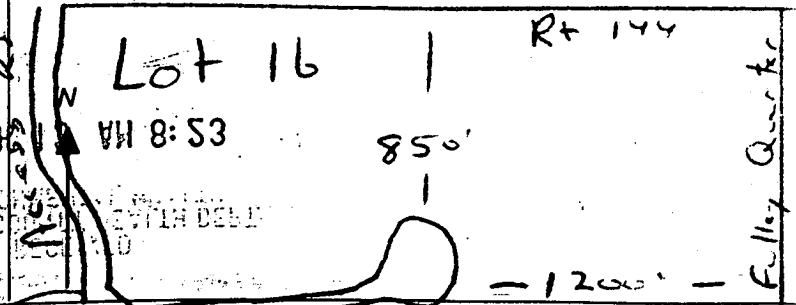


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BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
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other _____

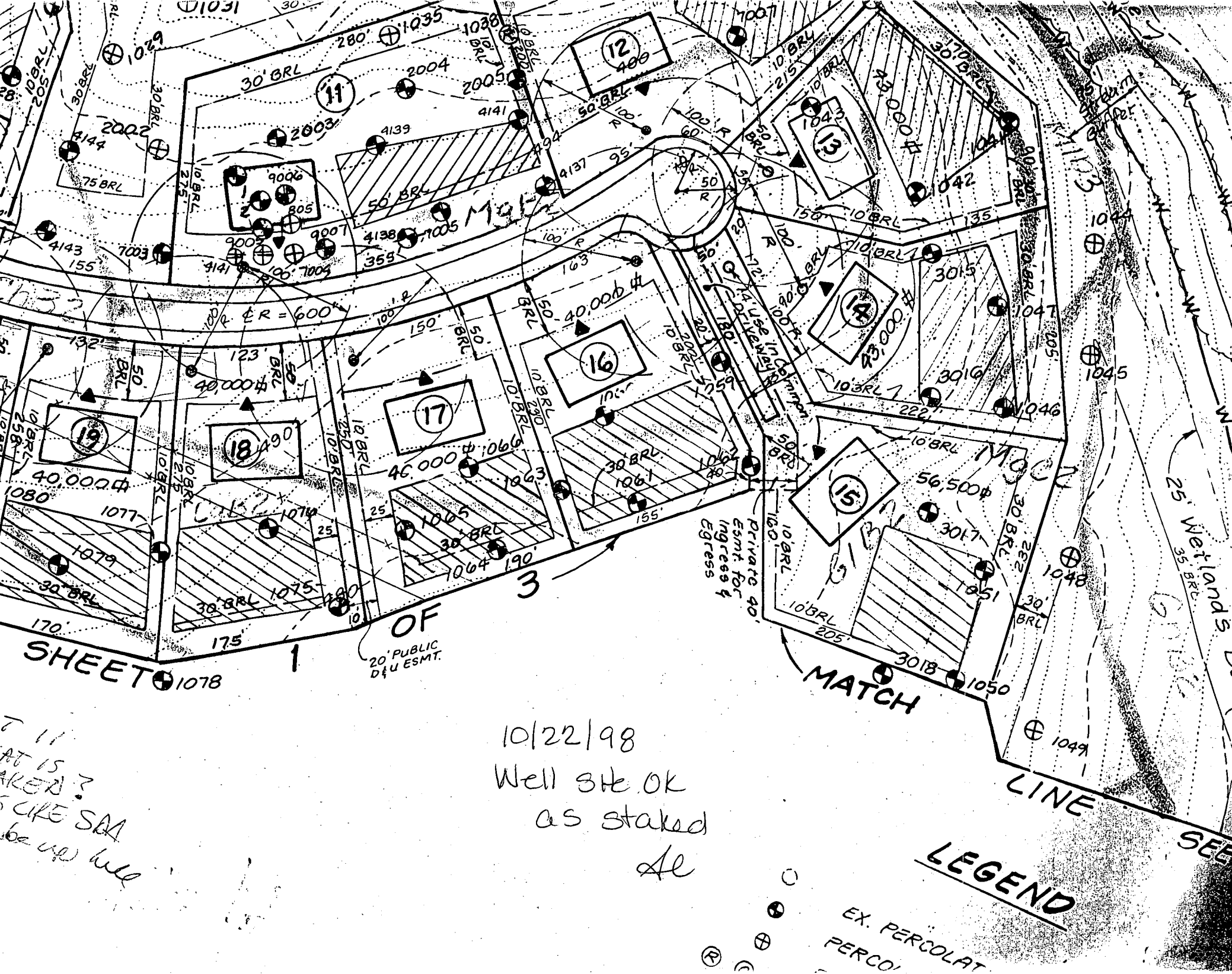
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 THIS WELL WILL DEEPEAN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

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

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER _____ G A P
WRITE INITIALS IN BOX PERMIT No. HO-94-1928
FORCE 1111 67 68 70 71 72 73 74 75 76 77 78 79



SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -



SHEET 1078

OF 3
20' PUBLIC D&U ESMT.

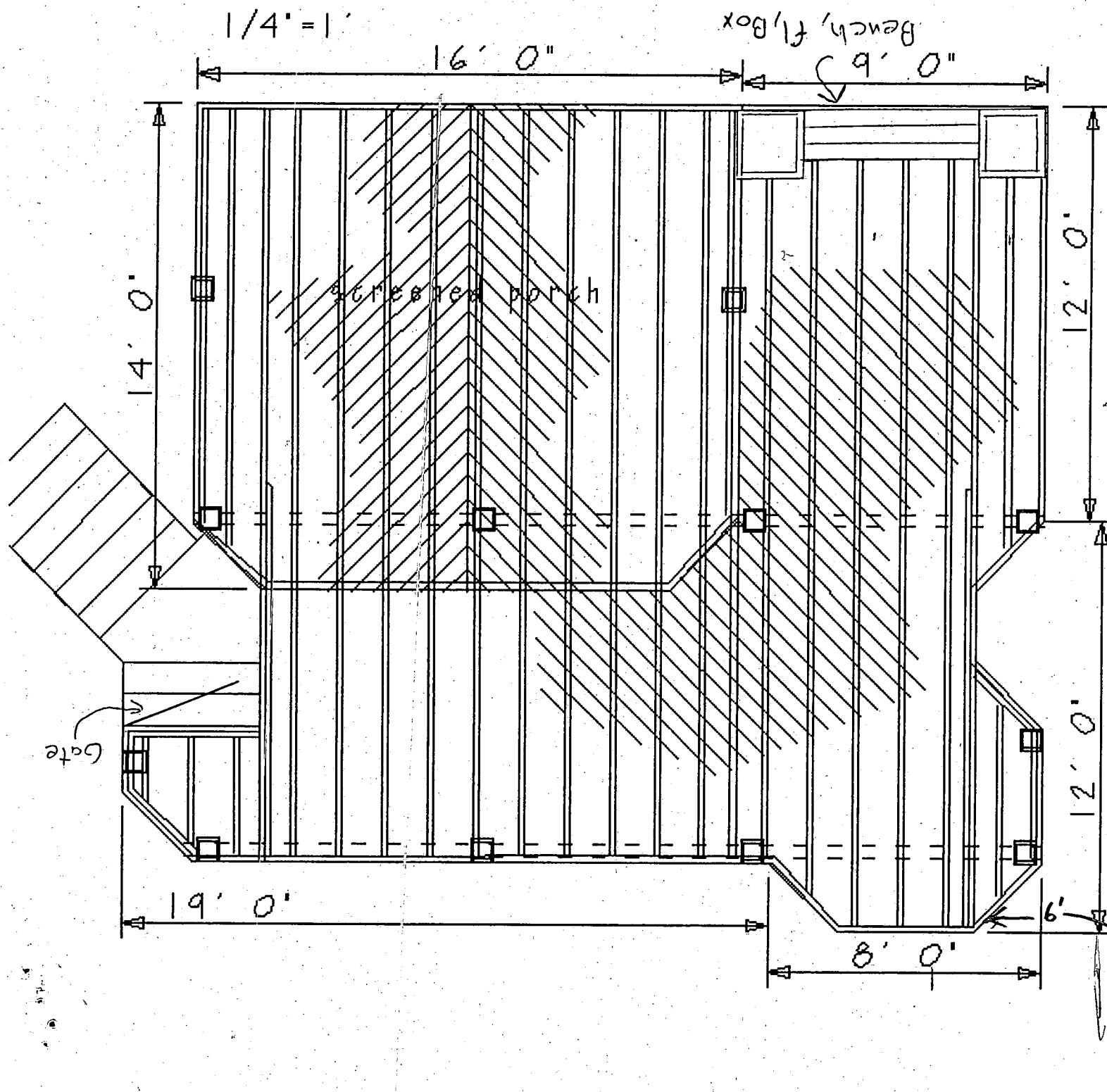
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10/22/98
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 PREFERRED"
 TO SEPTIC TANK
 ADVISORY TO CUT BACK
 CON. NO. OF
 DECK
 IF YOU
 CAN.

8/22/00

ETR (CW)

FIELD
 MONITORING

8/14/00

From "PAINTED"
 DECK

LAYART

(CW)



