

12/2
2-3
12/31/99
12-1

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-327760

P 512779
56430L
A 56429 AA

DISTRICT _____

DATE 10-22-1999

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 12/3/99

INSPECTOR all

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197

SUBDIVISION Gaither Hunt LOT 61 ROAD 11078 Dorsch Farm Road

PROPERTY OWNER NV Homes

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 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Begin trenches 130 feet down the right lot line and 55 feet off that same lot line as seen when facing the lot from Dorsch Farm Road. 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 SRK 9/7/99

PLANS APPROVED BY Amy McMillen DATE 8-26-1999

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)

B00119976
8/26/99 SFA

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.

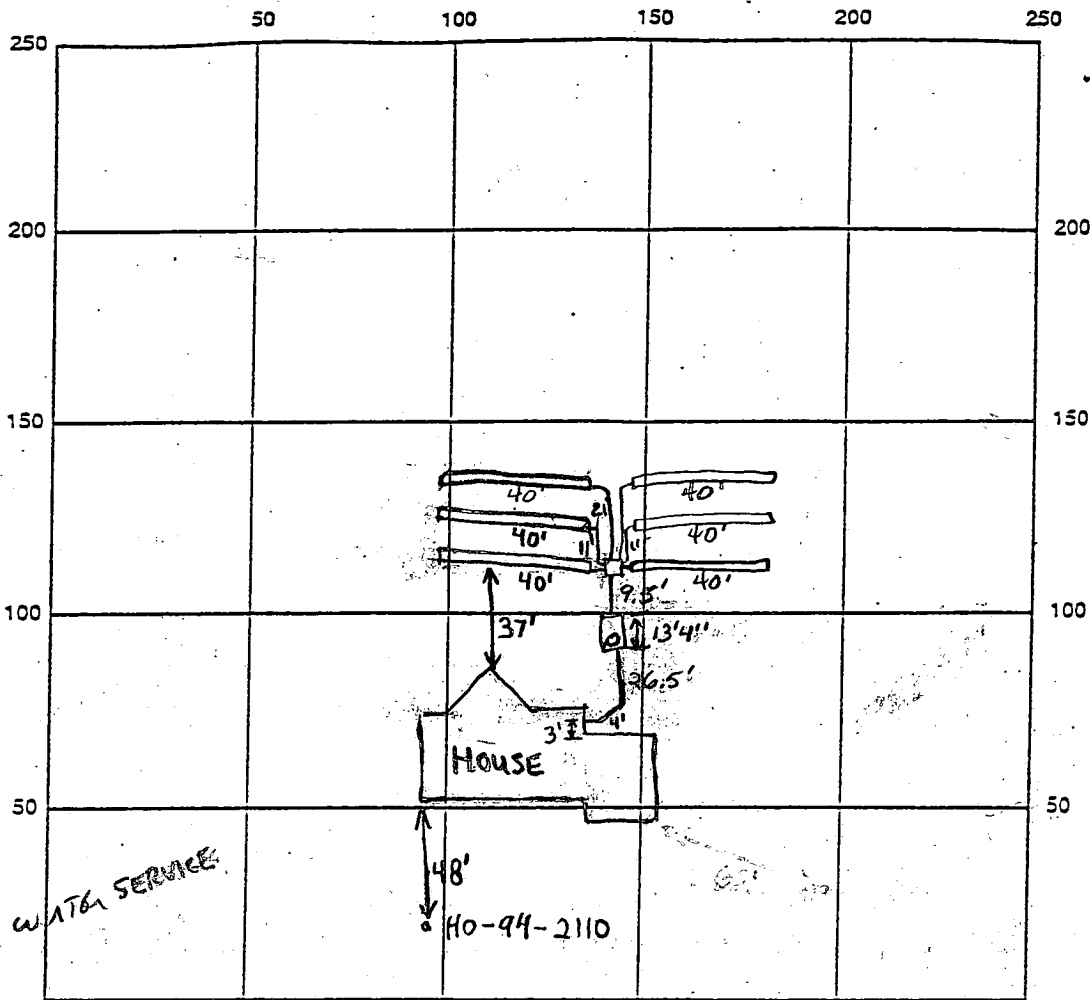
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

56430L

NOT TO SCALE



WPI OK
 42" B.G.
 BY NATIONAL WATER SERVICE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 Dorsch Farm Road

SEPTIC TANK LEVEL 1500 gal - top seamed CLEANOUTS 1-6" tank

DISTRIBUTION BOX LEVEL OK baffle 15 in

TILE
 DRAIN FIELD/TILE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

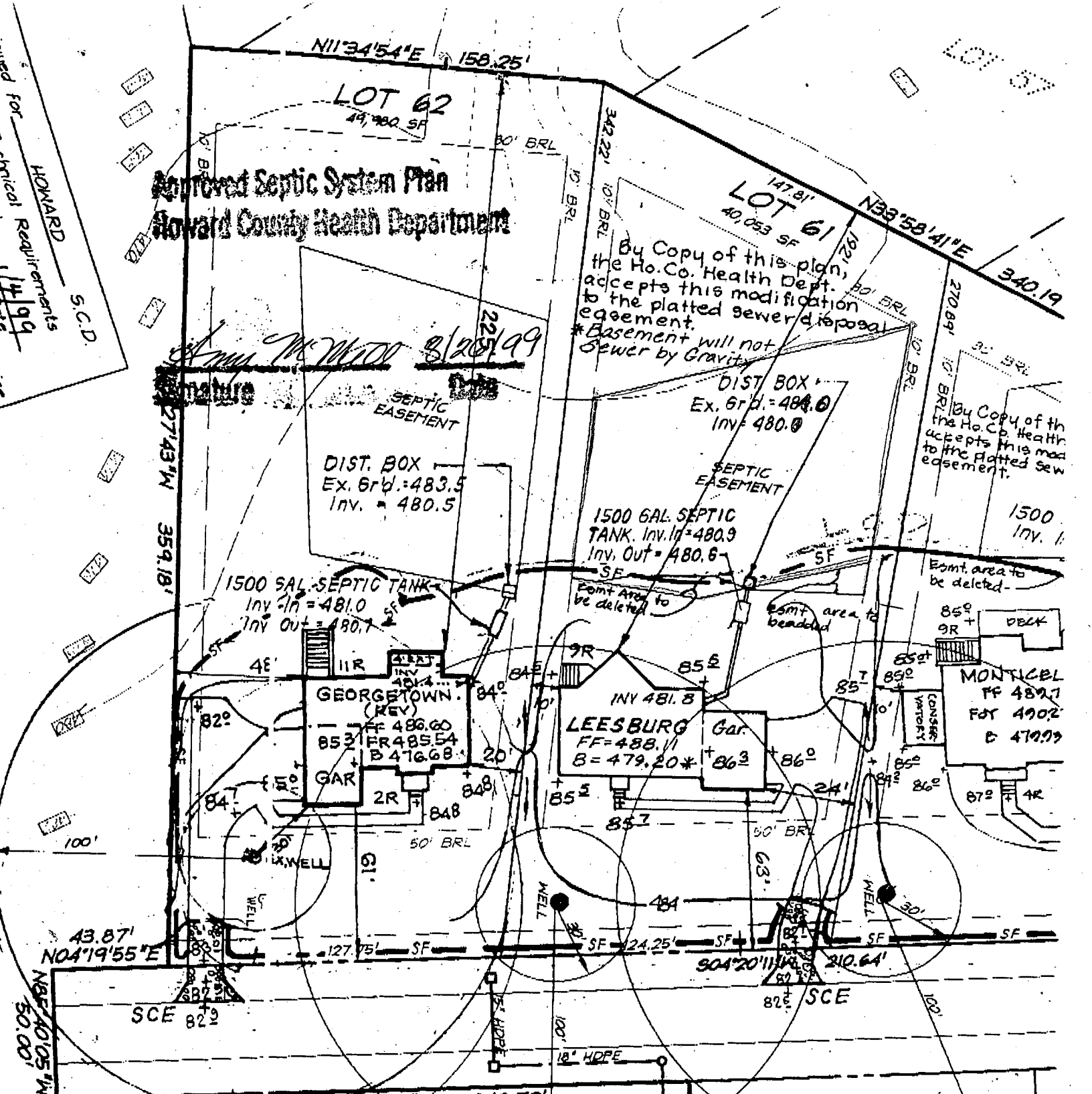
NUMBER OF TRENCHES 6 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL
 DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 12/2/99 First two trenches started. House connection made. O.K. to cover to distribution box (BB) 12/3/99 OK to cover all work final JL

DATE SYSTEM APPROVED 12/3/99 INSPECTOR A. M. Miller



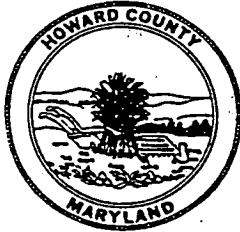
Total linear feet of trench required 240 feet

Width of trench (as) 3.0 feet

Depth of trench (as) 6.0 feet

Depth of stone required below distribution pipe 2.0 feet

Post-It® Fax Note	7671	Date	8-17-99	# of pages	1
To	PAT ORLA				
Co./Dept.	JOEY E.				
Phone #	CFS				
Fax #	GATHER HUNT				



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

December 20, 1999

Rene Rykebusch
National Water Servicing Company
7249 Mink Hollow Rd.
Highland, Md 20777

Re: Well Line Connections Gaither Hunt Subdivision
Well HO-94-2089, lot 39 - 11012 Bittersweet Ct.
Well HO-94-2091, lot 41 - 11013 Bittersweet Ct.
→ Well HO-94-2110, lot 61 - 11078 Dorsch Farm Rd.

Dear Mr. Rykebusch,

Inspection was recently requested by your employees for the well line - pitless adapter - well pump installation on the above referenced properties.

Part of the criteria for approval is that the work be performed by an appropriately licensed individual (well driller, plumber, or pump installer), and that approved materials be used. Enclosed please find a copy of the form that we request be filled out on all installations for documentation of the above. Please → complete and return the form for these and all future installations. ←

Our concern is that your staff member performing the work in these three instances did not indicate that he possessed qualifying credentials. If that is the case, then it will be necessary to secure the services of a qualified individual to certify the work before approval can be granted to allow the supply to be placed in service.

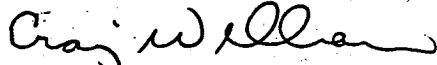
A copy of this correspondence is being sent to the Howard County Inspections Office and to the Maryland Well Drillers Board in case there are any related issues involving jurisdiction of those agencies.

-continued-

Rykebusch p2.

If you have any questions regarding this matter, please contact me to schedule a conference so we can go over it in further detail. Should such a discussion be requested, it is suggested that the builder be included since he is responsible for arranging the well connection.

Yours truly,



Craig Williams, Sanitarian

cc: Tom Doughney - Howard County Plumbing Inspections
Eric Dougherty - Maryland Board of Well Drillers
Pat Inman - NV Hmes

FILE - Lot 39 #
61

HOWARD COUNTY HEALTH DEPARTMENT
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Ellicott City, MD 21043

~~410-313-2648~~ 410-313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
 Receipt # _____ Date _____
 Name of Installer NATIONAL WATER SERVICE Telephone: 301-928-3748
 License Number #17521
 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
 Name of Property Owner NV HOWES Telephone 410-991-3148
 Subdivision Quinton Manor Lot # 61 Well Tag # 16-91-410
 Site Address 11078 DOZENS FARM RD

Pump Motor Pitless Adapter
 1. Type
 a. Deep well Jet _____
 b. Shallow well Jet _____
 c. Submersible
 2. Make JACUZZI
 3. Model 1-54521 8-52
 4. Capacity 5 GPM
 5. Pump exceeds well capacity Yes No _____
 6. If Yes, is low pressure cutoff switch installed? Yes _____ No
 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards Other _____

Tank Piping Well data
 1. Capacity 24 gal.
 2. Pressure relief valve? Yes
 1. Type Polyethylene
 2. Size 1 1/2"
 3. NSF and/or BOCA Code approved Yes
 4. Depth of supply line 350'
 1. Depth 350' ft.
 2. Yield 4 GPM
 3. Static water level 25 ft.
 4. Will water supply be disinfected by installer? Yes

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.
 WPT
 OK CW SRU
 Signature of Applicant: _____
 Date: 1-20-00

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

APPLICATION

PERCOLATION TESTING

A 56429

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

DISTRICT _____

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DATE 3-27-96

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 J Thomas Scrivener

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Reuwer Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 80 29 61 ✓

ROAD AND DESCRIPTION _____

~~PERMIT SIGNED~~
~~AND RETURNED 8-26-99~~
Permit # 119976
SFD - 4Bum

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1 + Acres TYPE BLDG. _____
(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.

Donald R. Reuwer Jr
(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

56429

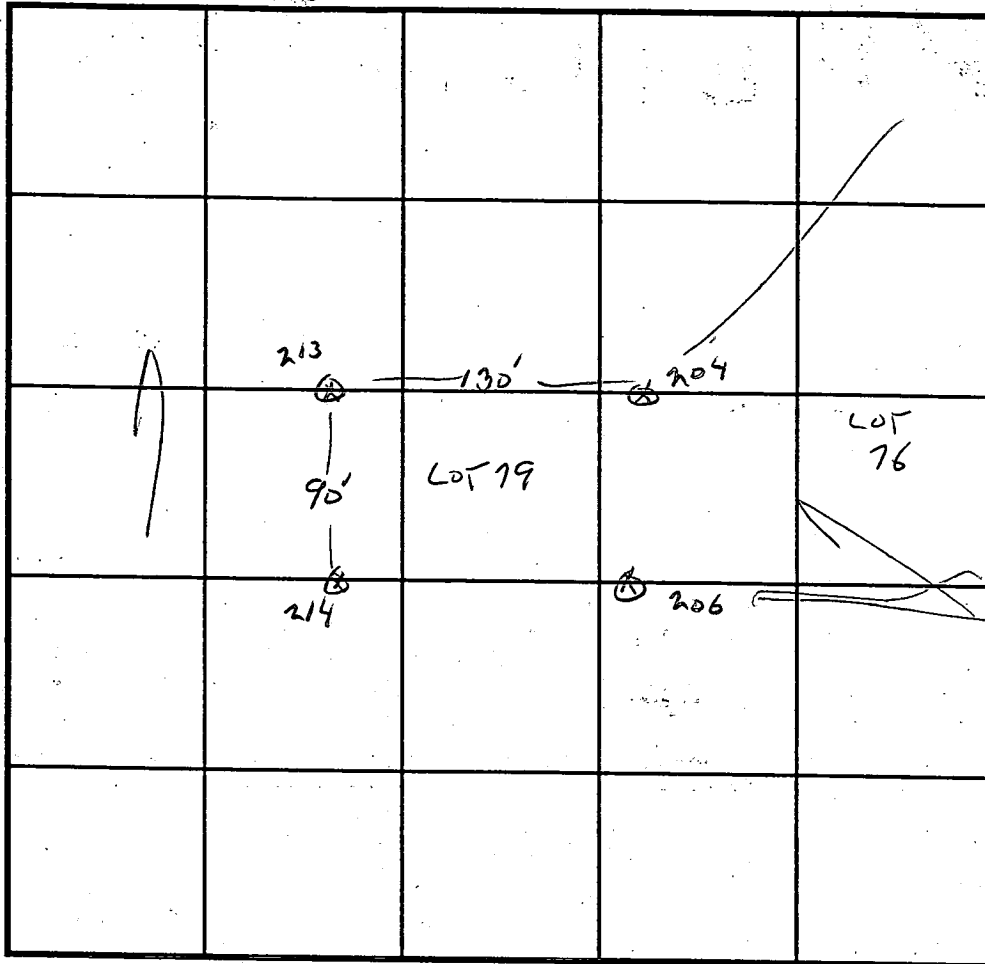
COUNTY #

SOIL PROFILE

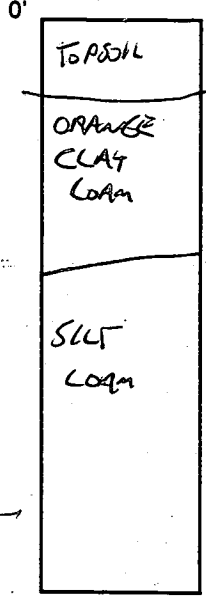
0' [Empty vertical box for soil profile]

[Empty vertical box for soil profile]

[Empty vertical box for soil profile]



AVERAGE PROFILE SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-27-96	213	4' 6"					6 MW
	214	4' 6"					9 MW
	204	5'					2 MW
	206	4'					2 MW

REMARKS LOT 79, SEE 80, 76 FOR DETAIL

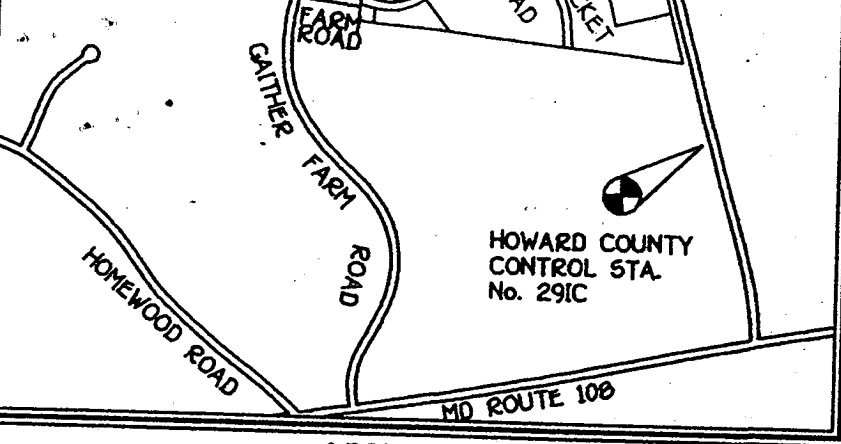
TYPE OF SOIL NEW LOT 61

TESTED BY G. SAVAGE ALSO PRESENT MIKE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

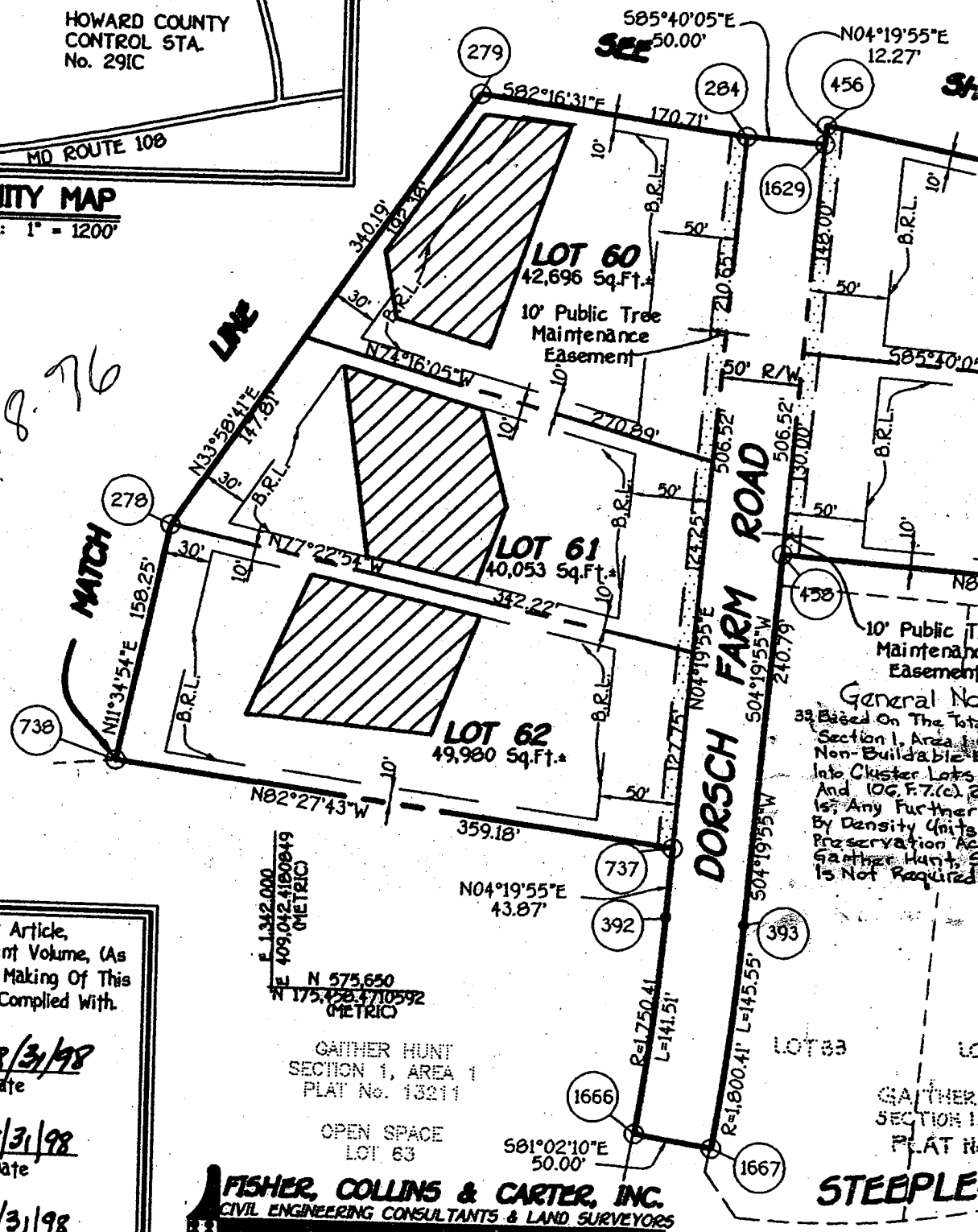
433-431	25.00'	21.03'	48°11'21"	11.18'
602-617	192.31'	146.40'	43°37'02"	76.95'
617-615	1335.39'	289.01'	12°24'01"	145.07'
615-606	385.36'	165.75'	24°38'38"	84.18'



VICINITY MAP
SCALE: 1" = 1200'

SHEETS	
SHEET 2	TOTAL
23	28
1	1
1	1
0	0
25	30
0 AC.	28.874 AC.
AC.	1.493 AC.
AC.	6.970 AC.
AC.	0.000 AC.
3 AC.	37.337 AC.
AC.	3.267 AC.
4 AC.	40.604 AC.

F-98-76



General Note
Based On The Total Area of Section 1, Area 1, Non-Buildable Area Into Cluster Lots, And 106 F.7.(c) 2 Is Any Further By Density Units Preservation Act Gather Hunt, B Is Not Required.

Requirements B 3-10B, The Real Property Article, Code of Maryland, 1988 Replacement Volume, (As Amended) As Far As They Relate To The Making Of This Plat. The Setting Of Markers Have Been Complied With.

Philip Carroll
Philip Carroll (Surveyor) 8/31/98
Date

Camilla Carroll
Camilla Carroll (Owner) 8/31/98
Date

Philip Carroll
Philip Carroll (Owner) 8/31/98
Date

and Family Corporation (Owner)
Philip Carroll, Vice President

F. 1,342,000 METRIC
E. 409,042.4160849 METRIC
N 575,650
E 175,428.4710592 METRIC

GATHER HUNT SECTION 1, AREA 1 PLAT No. 13211

OPEN SPACE LOT 63

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461 - 2955
30560 Sec 1 Area 2 Rec Plat Sheet 1.dwg

Camilla Carroll
4400 Manor Lane
Ellicott City, Maryland 21042

Carroll
c/o
8808 Ce
Col

OWNER'S CERTIFICATE

and Family Corporation, By Philip Carroll, Vice-President, And Camilla Carroll, Owners Of The Property Shown And Hereon, Hereby Adopt This Plan Of Subdivision, And In Consideration Of The Approval Of This Final Plat By The Board Of Planning And Zoning, Establish The Minimum Building Restriction Lines And Grant Unto Howard County, Its Successors And Assigns; (1) The Right To Lay, Construct And Maintain Sewers, Drains, Water Pipes And Other Utilities And Services In And Under All Roads And

I Hereby Certify That This Subdivision Camilla Carroll Aforeaid

C1 9894

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A56429

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2110

OWNER Russell Dev. LLC STREET OR RFD Dorsch Farm Rd TOWN ELICOTT CITY SUBDIVISION Gaither Hunt SECTION II LOT 61

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, FEET (FROM, TO), check if water bearing. Includes entries for Hard Brown Sandstone, Hard Gray Granite, Hard Tan Sandstone, and Hard Gray Granite.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 10 NO. OF POUNDS 910

CASING RECORD

MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch!) 06 Total depth of main casing (nearest foot) 38

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

SCREEN RECORD screen type or open hole (ST, BR, HO, PL, OT)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. M 40355 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. JW 341 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.)

Table with columns: E A C H S R E E N, 1 2 3, 4 5 6, 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 4. METHOD USED TO MEASURE PUMPING RATE WATCH & BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 25' WHEN PUMPING 115'

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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) LAND SURFACE (- below) 2 (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



B 1 **5154** SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER **HO-94-2110** fill in this form completely

Date Received (APA) **01 26 99** OWNER INFORMATION
8 MM DD YY 13
Russell Development LLC
15 Last Name Owner First Name 34
8808 Centre Park Dr. Suite 209,
36 Street or RFD 55
Columbia MD 21045
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
Howard
8 COUNTY 21
Gaither Hunt
23 SUBDIVISION 42
SECTION **1** LOT **601**
44 46 48 50
Ellicott City
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) **4** M I
73 76 77 78

DRILLER INFORMATION
MICHAEL BARLOW MW D355
Driller's Name 76 License No. 81
MICHAEL BARLOW Well Drilling Svc Inc
Firm Name
912 FAUN CT Joppa MD 21085
Address
[Signature] **1-22-99**
Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
1 2
NORTH SOUTH WEST EAST
NW NE SW SE
8-9 8-9 8-9 8-9
TOWN
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
Dorset Farm Rd
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH WEST EAST SOUTH
34 **25** 37 DISTANCE FROM ROAD FT
ENTER FT. OR MI 38 39
TAX MAP: _____ BLK: _____ PARCEL _____

B 2 WELL INFORMATION
APPROX. PUMPING RATE **5**
1 2 (GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED **500**
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 INDUSTRIAL, COMMERCIAL, DEWATERING
 PUBLIC WATER SUPPLY WELL
 TEST, OBSERVATION, MONITORING
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co A56429AA
COUNTY NAME COUNTY NO.
STATE SIGNATURE _____ INSERT S. →
DATE ISSUED **021199** **A M McMillon** **021100**
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID **515000** EAST GRID **830000**
50 55 63

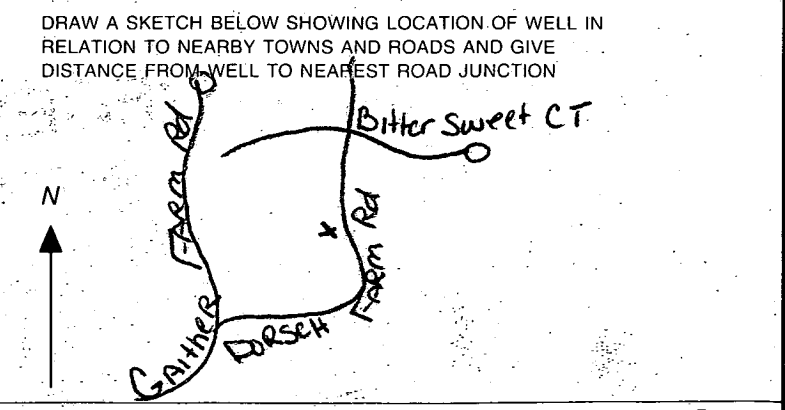
APPROXIMATE DEPTH OF WELL **200** FEET
24 28
APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

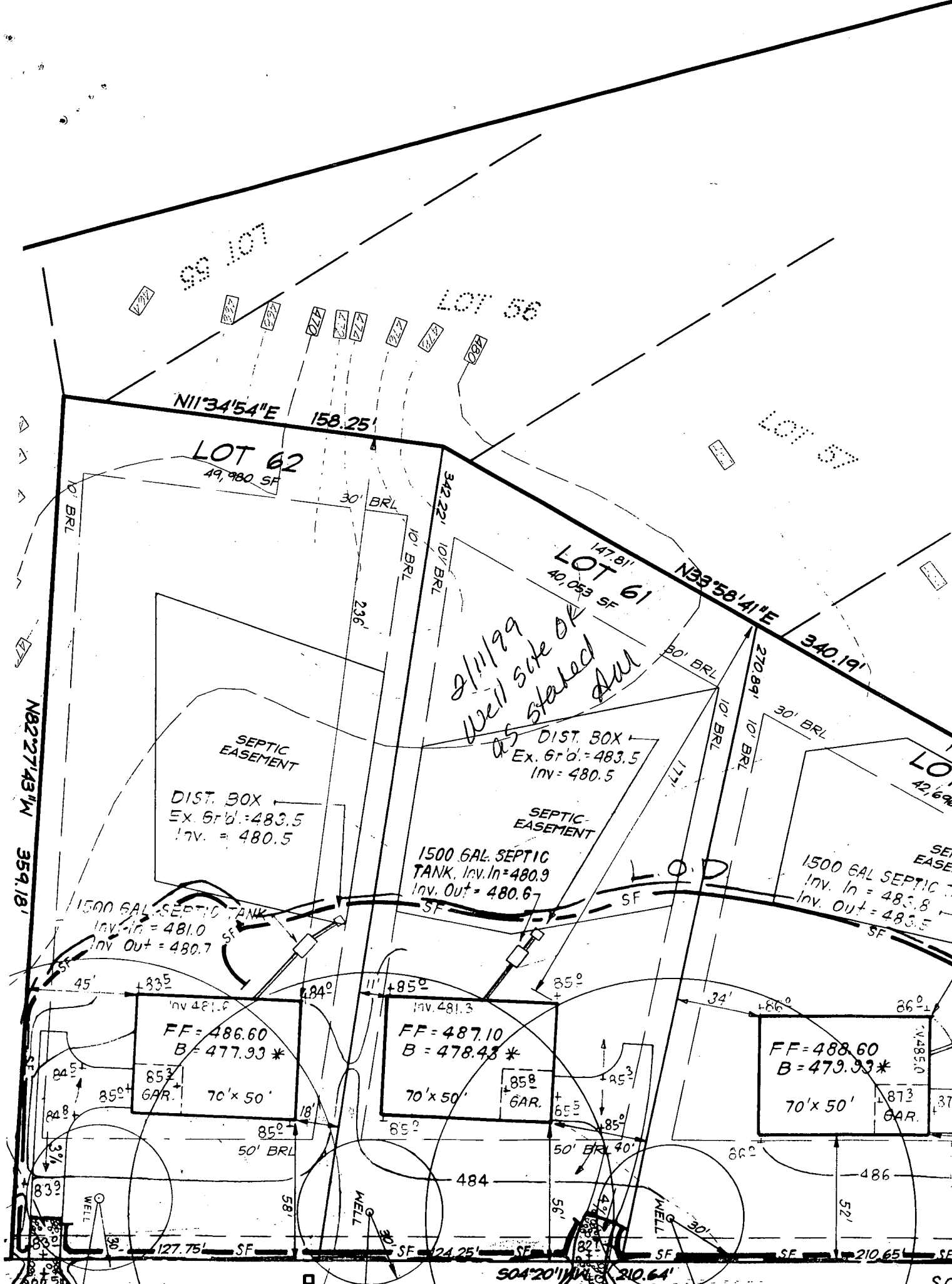
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1.
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E **830**
N **515**
000
000
Location on granted prior to insp for yield test SRK

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic, Rotary)
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 DEEPEEN 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)
APPROX. PERMIT NUMBER _____ G A P _____
54 63
PERMIT No. **HO-94-2110**
70 71 72 73 74 75 76 77 78 79





N11°34'54"E 158.25'

LOT 62
49,980 SF

LOT 56

LOT 61
40,053 SF

N83°58'41"E

340.19'

*2/11/99
Well site OK
as stated
AM*

SEPTIC EASEMENT

DIST. BOX
Ex. Gr'd. = 483.5
Inv. = 480.5

DIST. BOX
Ex. Gr'd. = 483.5
Inv. = 480.5

SEPTIC EASEMENT

1500 GAL. SEPTIC TANK
Inv. In = 480.9
Inv. Out = 480.67

1500 GAL. SEPTIC TANK
Inv. In = 483.8
Inv. Out = 483.5

1500 GAL. SEPTIC TANK
Inv. In = 481.0
Inv. Out = 480.7

FF = 486.60
B = 477.93 *
70' x 50'
GAR.

FF = 487.10
B = 478.43 *
70' x 50'
GAR.

FF = 488.60
B = 479.93 *
70' x 50'
GAR.

45'

+83.5

Inv. 481.6

84°

11'

+85.0

Inv. 481.3

85°

34'

+86.0

Inv. 485.0

86°

34'

+86.0

Inv. 485.0

86°

34'

+86.0

WELL

WELL

WELL

127.75'

SF

24.25'

SF

210.64'

SF

210.65'

SF

504'20" W

210.64'

SF

210.65'

SF

210.65'

SF

210.65'

SF

210.65'

SF

SC