

6/29/00  
Septic Co. 3-4 PM

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513631

A510510124

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

03-331172

INDEXED

DISTRICT \_\_\_\_\_

DATE 6/13/2000

DATE SYSTEM APPROVED 6/29/00

INSPECTOR S.R.K.

SK Backhoe & Septic Service IS PERMITTED TO INSTALL ☒ X ALTER \_\_\_\_\_

ADDRESS 1220 FSK Highway, Keymar, MD 21757 PHONE 410-775-0562

Christian Family Outreach  
SUBDIVISION Center LOT 2 ROAD 1463 Sykesville Road

PROPERTY OWNER Michael Pfau

ADDRESS \_\_\_\_\_

TOP SEAMED TANK REQUIRED

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 1/2 feet below original grade. Bottom maximum depth 5 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting from the left rear lot corner (85.57'/260.00' intersection) place the distribution box 85 feet down the 260.00' line and 60 feet off that same lot line. Run trenches on contour towards the 260.00' lot line *Dr 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.

PLANS APPROVED BY Steve Kreeg/Ronald J. Pinkley/Mark Rifkin *OK 12/22 SRK* DATE 12-09-1999

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)

*B00125485  
Deck 7/21/00*

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

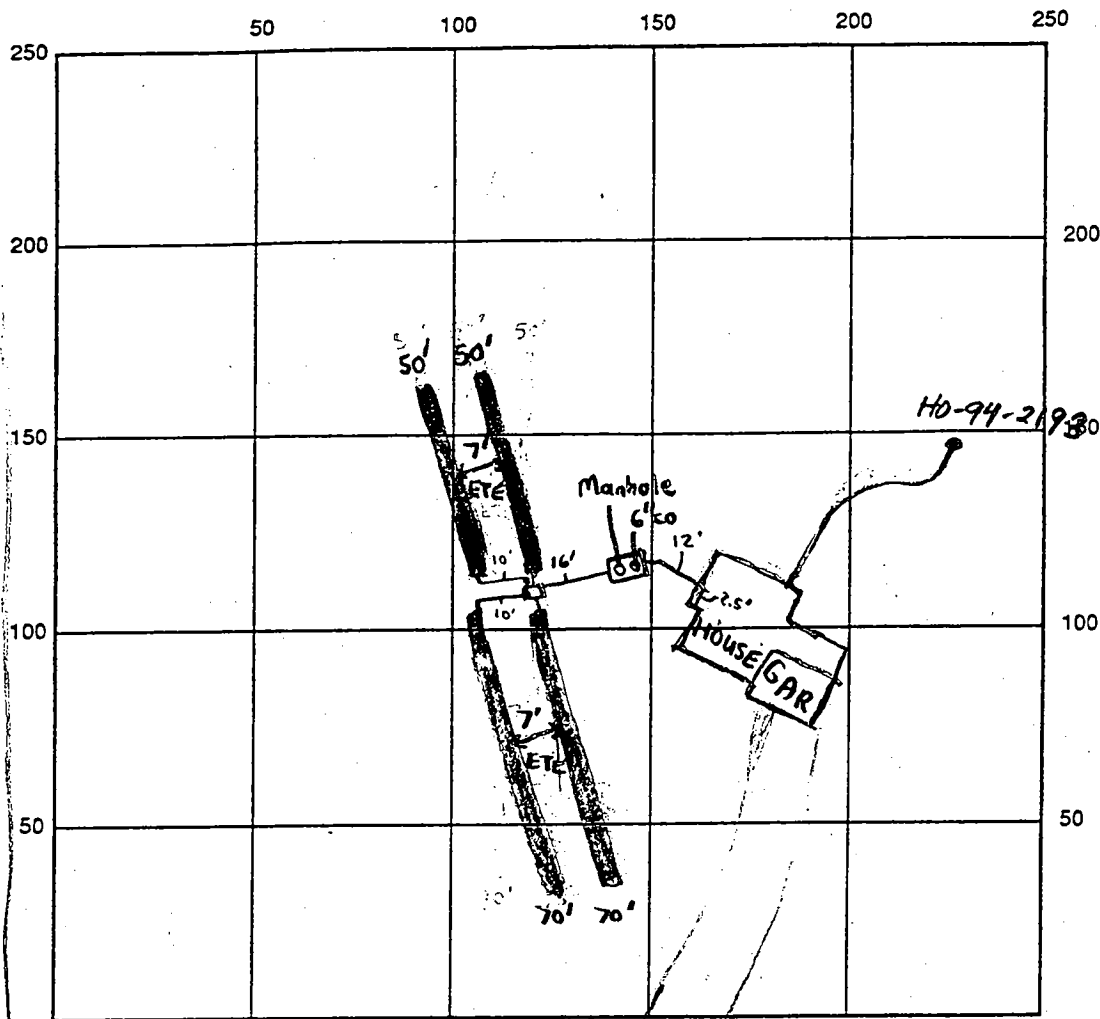
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 510124

RT  
32



SEPTIC TANK LEVEL 1250 gallon topscam CLEANOUTS 6" and Manhole on Septic Tank  
DISTRIBUTION BOX LEVEL ✓ Baffle is in  
DRAIN FIELD/TITLE DEPTH 5½ FT. TRENCH WIDTH 3 FT. INLET DEPTH 3½ FT.  
EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.  
NUMBER OF TRENCHES 4 ONE SIDEWALL BOTTOM AREA 720 SQ. FT.  
DRYWALL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.  
ABSORBENT AREA N/A SQ. FT.

REMARKS: 6/29/00-on TO COVER ALL WORK (SRW)

DATE SYSTEM APPROVED 6/29/00 INSPECTOR Steven R. Kueg

Total linear feet of trench  
required 240 feet

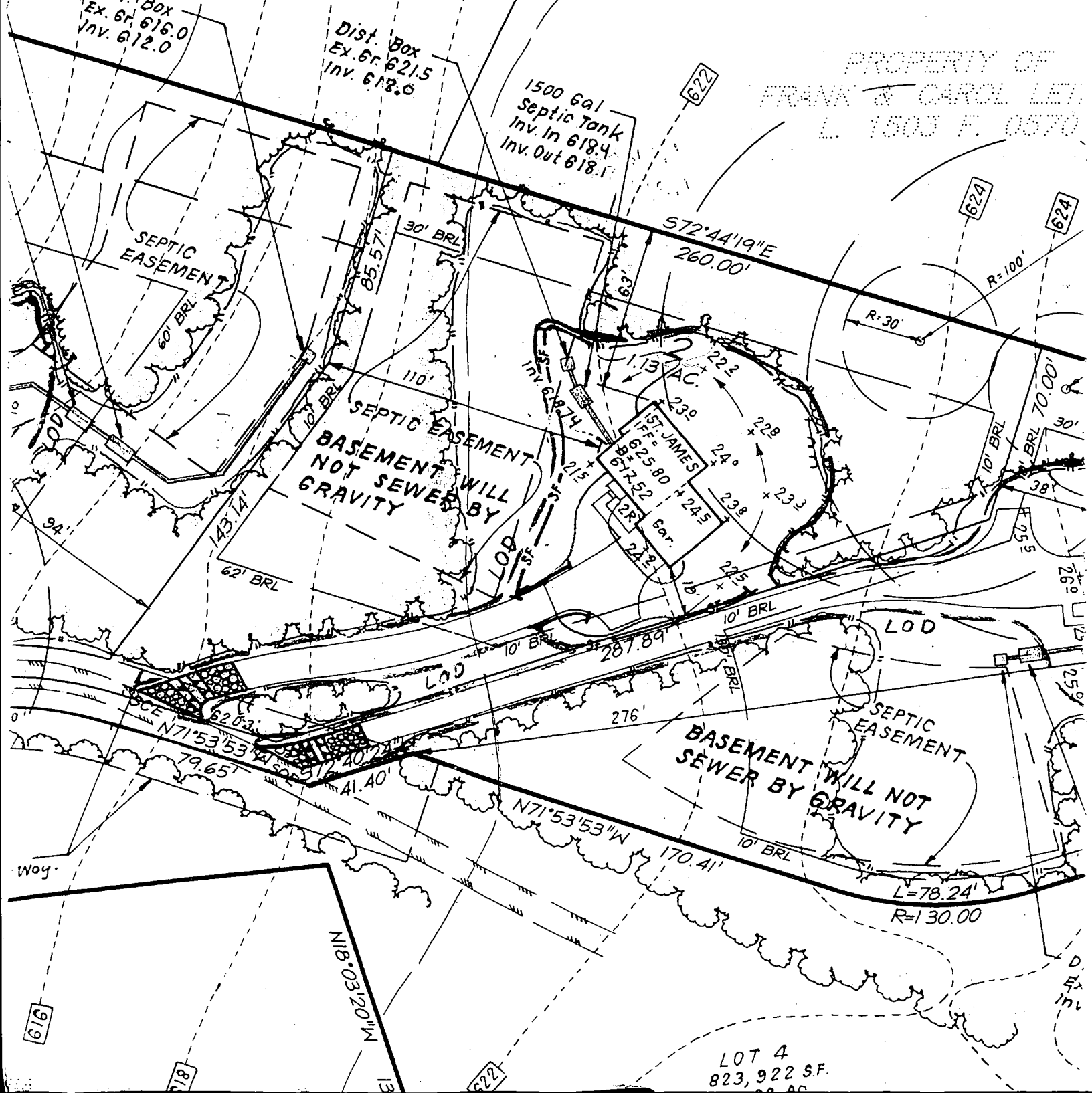
Approved Septic System Plan  
Howard County Health Department

Width of trench(es) 3 feet

Depth of trench(es) 5 1/2 feet

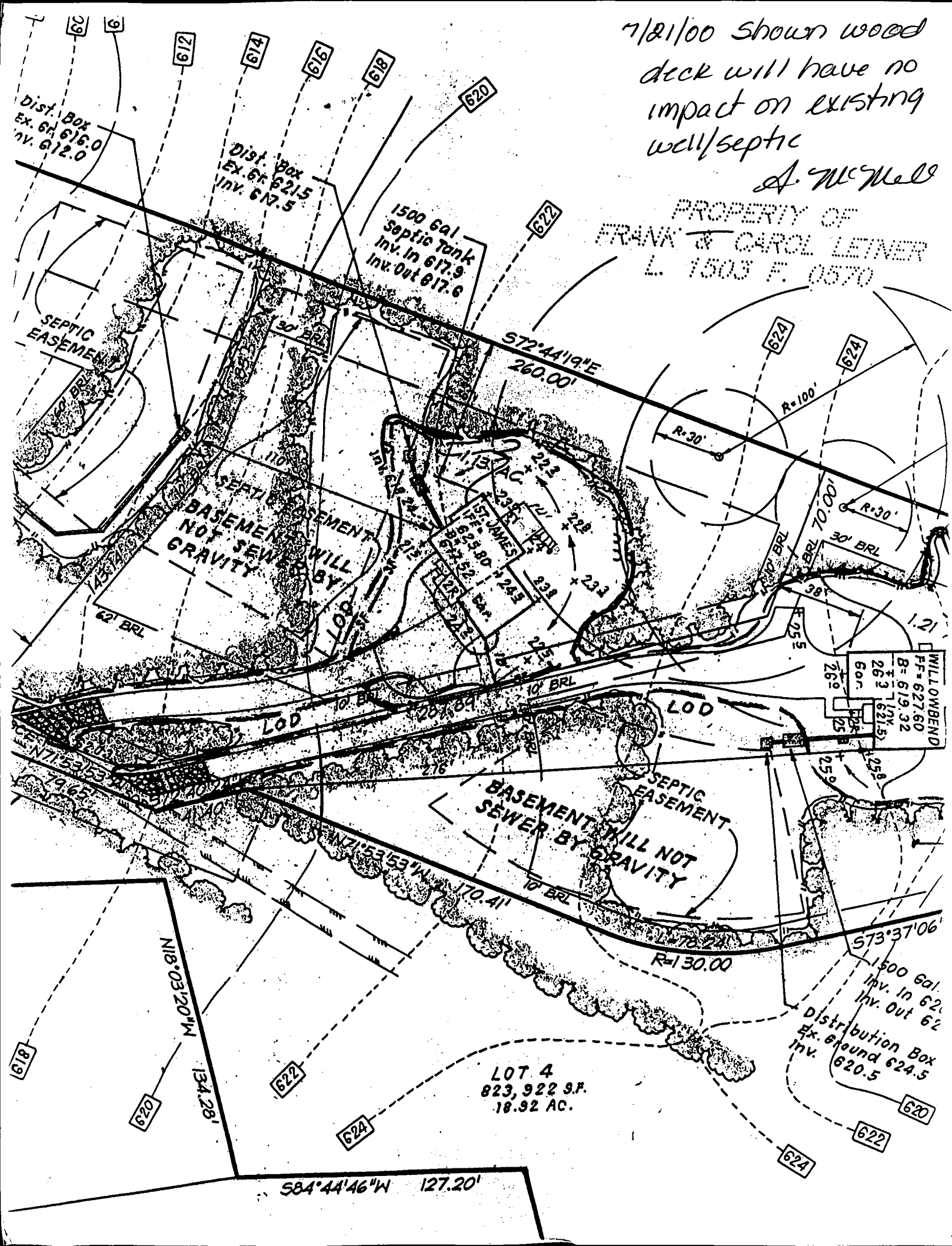
Depth of stone required below  
distribution pipe 2 feet

Signature Steven R. King 12/9/99  
Date



A. McMill

PROPERTY OF  
FRANK & CAROL LEINER  
L. 1503 F. 0570



HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-W 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 S.K. Plumbing & Heating Inc

Telephone 410-775-0822

License Number 12285

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

Name of Property Owner Trinity Homes

Telephone 410-313-8722

Subdivision Christine Family Lot # 2

Well Tag # 10-74-2193

Site Address 1463 Sykesville Rd

## Pump

1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible ☒
2. Make Jacuzzi
3. Model # \_\_\_\_\_
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 Secure

## Motor

1. Horsepower 1/2
2. RPM \_\_\_\_\_
3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 ☒

## Pitless Adapter

1. Make Union
2. Model # 1
3. Depth 42"

## Tank

1. Capacity Well-x-tank 203
2. Pressure relief valve? ☒

## Piping

1. Type P.E.
2. Size 1"
3. NSF and/or BQCA Code approved ☒
4. Depth of supply line 42"

## Well data

1. Depth 185 ft.
2. Yield 8 GPM
3. Static water level 22 ft.
4. 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.

6/27/00 - WPI on Signature of Applicant: [Signature]  
(SRU) Date: 8-3-00

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 5/6/24

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

*Large Expansion to  
Existing Restaurant/Catering  
Establishment*

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

*Test June 2 Perc @ 10:00*

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Michael PFAU ~~Robert Nixon~~ ~~(Nixon's Farm)~~ Christian Family Outreach

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ Center

AGENT OR PROSPECTIVE BUYER TSA GROUP, Inc.

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION: ST

SUBDIVISION \_\_\_\_\_ LOT NO. Holes for lots 1&2

ROAD AND DESCRIPTION MD RT 32, APPROX 3 mi SOUTH OF

I-70 (1463 Sykesville Road)

TAX MAP 15 PARCEL # 90

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_

**MODEL PERMIT SIGNED  
AND RETURNED 12-7-22  
Serial # B10121326  
SFD - 4 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.

*[Signature]*  
(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

P3C D

org  
sac/m

3

org  
red/yel

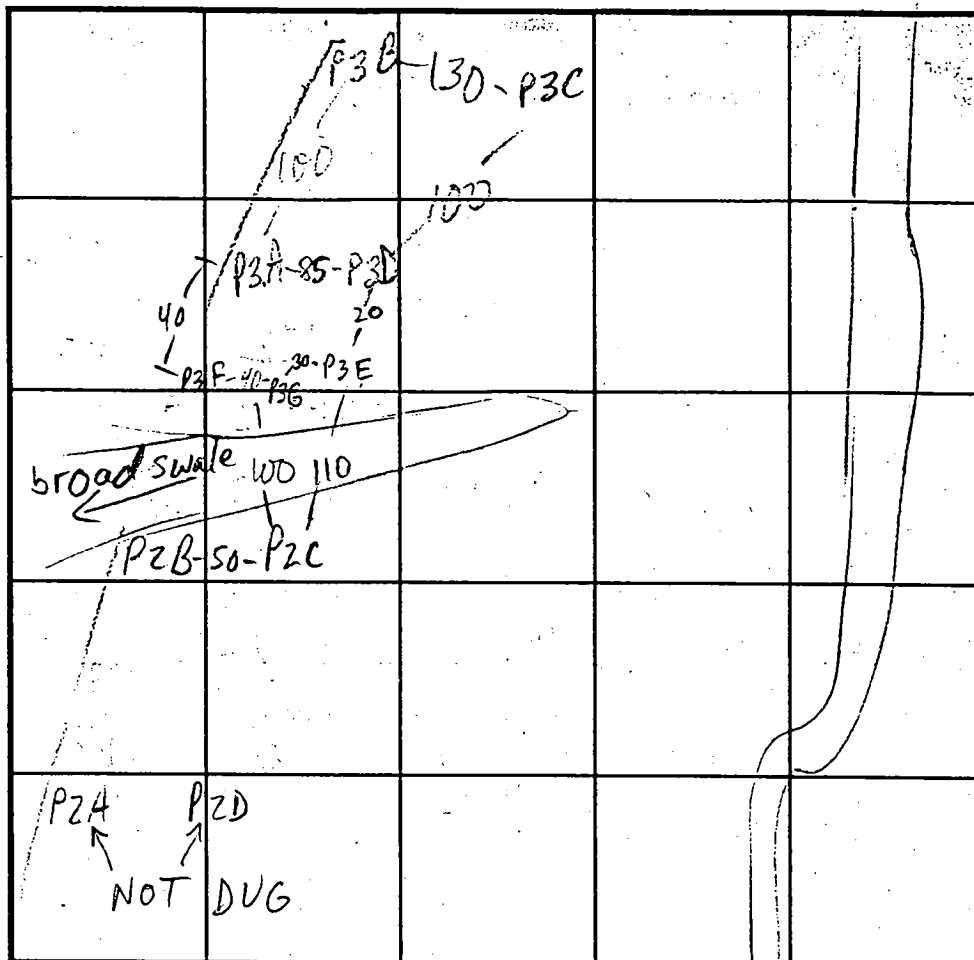
si sa/m

10-15%

saprolite

frags

P3E



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RT. 82

SOIL PROFILE

P2B

red

H<sub>2</sub>O

red

cl

P2C

019E

s/c

m

NOT DUG

CLAY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/2/95							
	P3-A S	4	3:24	3:26	3:26	3:28	2
	P3-A V	13					
	P3-D S	4	3:27	3:29	3:29	3:33	4
	P3-D V	11'9"					
	P3-C S	3 1/2	3:36	3:37	3:37	3:39	2
	P3-C V	13					
	P3-B S	4	3:38	3:39	3:39	3:41	2
	P3-B V	12'9"					

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

# APPLICATION

PERCOLATION TESTING

A 5/10/24

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 2

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ 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. \_\_\_\_\_  
(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

0' 3I  
red  
brn  
yel cl lm  
3 red brn  
sa lm  
15% frags  
6 rocky  
rocky  
40% lg  
frags  
92 red brn  
sa lm  
15% frags

G

FILL

1-2 brn sa  
cl lm  
4 15% frags

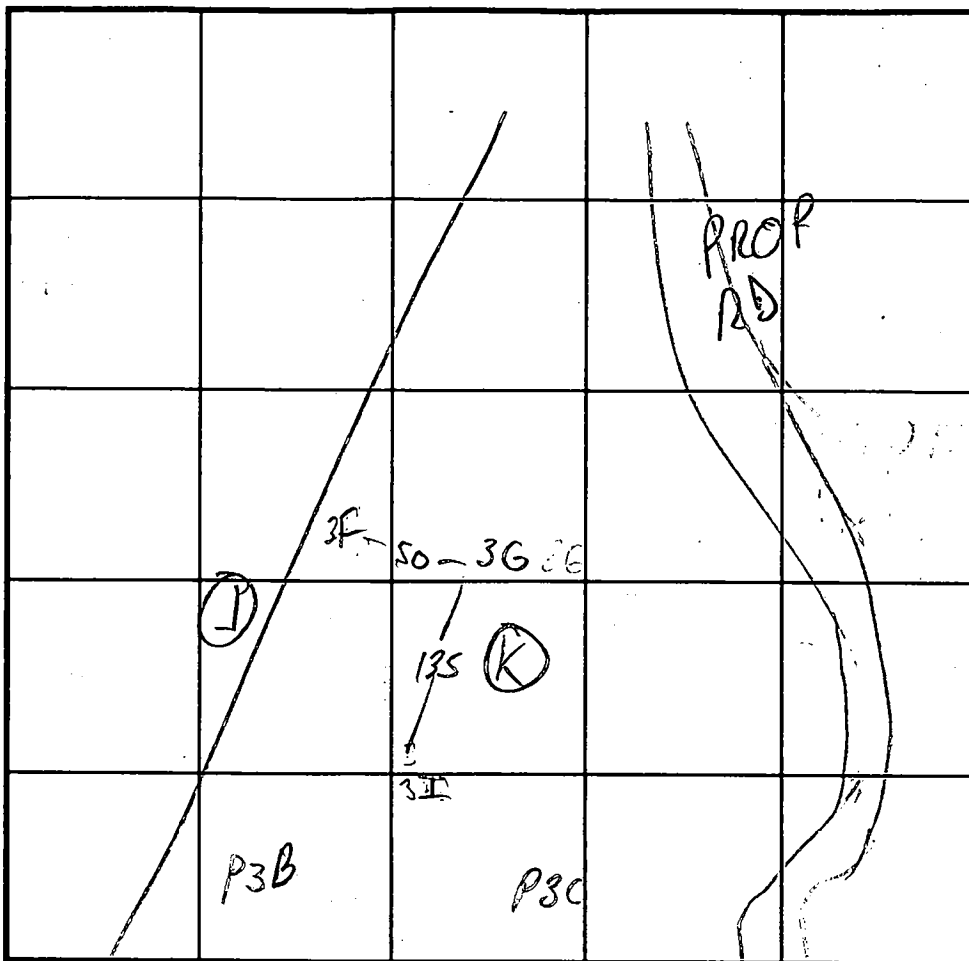
tan  
sa lm  
40%  
shale  
frags

WATER

3F

red  
brn  
cl lm  
10% frags

3-4 tan  
sa lm  
40%  
shale  
frags  
HARD



SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RT. 82

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/9/98	3I	3 1/2	1:31	1:35	1:35	1:41	6
	3I	12 1/2					
	3GS	4'3"	1:45	1:59	1/2"	FAIL	
	3GV	11'9"	H <sub>2</sub> O	@ 11'9"			
	3FS		NOT	TESTED			
	3FV	9 1/2	HARD	BOT			
	3J	3 1/2 / 11'9"	4:18	4:21	4:21	4:25	4
	3K	3 / 11 1/2	4:31	4:42	4:47	5:07?	EST 20 min

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

# APPLICATION

PERCOLATION TESTING

A 510124

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT \_\_\_\_\_

DATE 5-4-98

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 CHRISTIAN FAMILY OUTREACH CENTER

ADDRESS 1475 SYLVILLE RD., SYLVILLE, MD 20874 PHONE \_\_\_\_\_

F. J. GIBBEN  
AGENT OR PROSPECTIVE BUYER TSA GROUP, INC.

ADDRESS 8480 BALD. NAT. PCE, ELLICOTT CITY, MD 21043 PHONE 410-465-6105

PROPERTY LOCATION: ABOUT - STEVE SHIPPE (NOT TSA) 410-472-2993

SUBDIVISION 1475 SYLVILLE RD (RTE 32) LOT NO. 2182

ROAD AND DESCRIPTION EAST SIDE ROUTE 32 APPROX. 3/4 MI NORTH OF OLD FREDERICK RD

TAX MAP 9 PARCEL # 41

SIZE OF LOT 1.3 AC ± TYPE BLDG. SFD

(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNLESS 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.

(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

0' ALL P3A-P3D

or ge  
sa cl  
lm

3

or ge brn  
red/yel  
si sa lm  
10-15%  
saprolite  
Frag11'9"  
-13

P3E

or ge  
tan brn  
si cl  
20% mica  
saprolite1 1/2  
-2

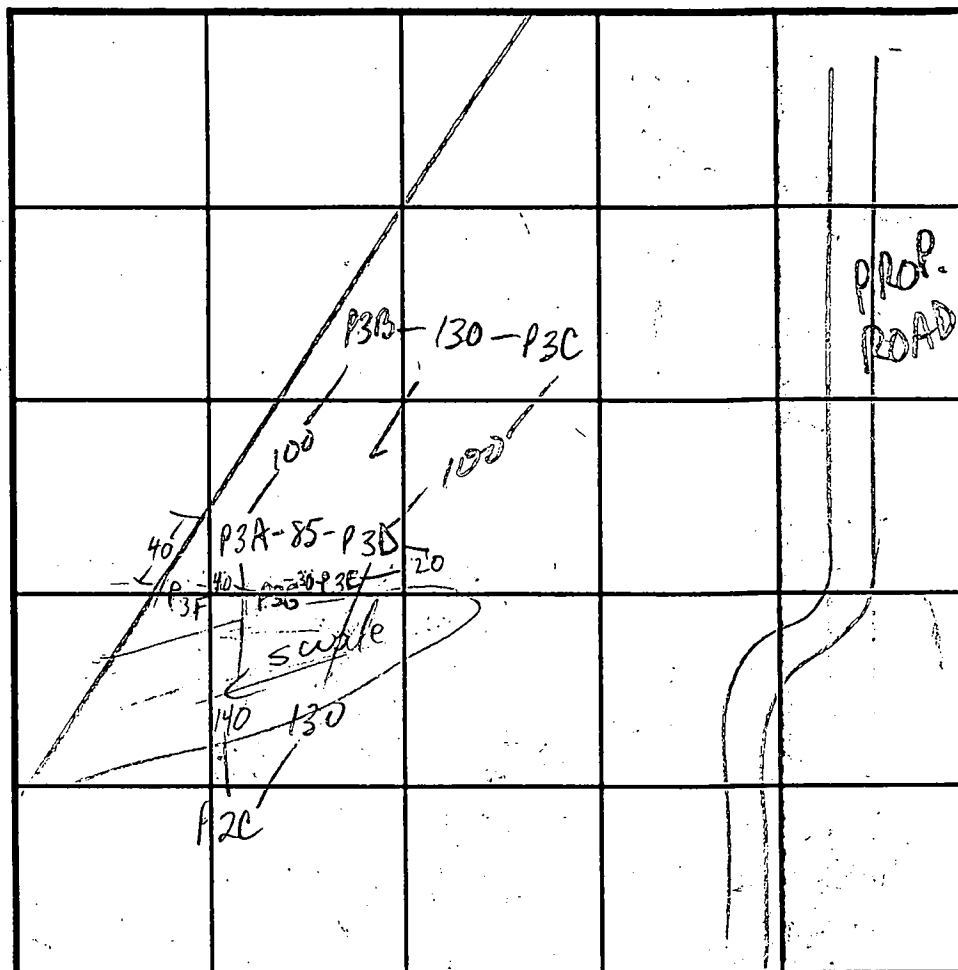
P3F/G

or ge  
brn  
si sa lm  
10% frags

3

## SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASELINE RT. 32

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/2/98	P3A s/v	4' / 13	3:24	3:26	3:26	3:28	2
	P3D s/v	4' / 11'9"	3:27	3:29	3:29	3:33	4
	P3C s/v	2' / 13	3:36	3:37	3:37	3:39	2
	P3B s/v	4' / 12'2"	3:38	3:39	3:39	3:41	2
6/9/98	P3E s						
	P3E v	12	H <sub>2</sub> O @	12'			
	P3F s	2 1/3	11:58	11:00	11:16	11:38	22
	P3F v	12	SLIGHT	MOTTLES @	BOT		
	P3G s	4'3"	11:23	11:25	11:25	11:27	2
	P3G v	13	H <sub>2</sub> O @	?			

## REMARKS

TYPE OF SOIL

TESTED BY

M. Ripkin

ALSO PRESENT

Flock Crew  
Rep from TSA S. Shipp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

3

TRENCH WIDTH

3

INLET DEPTH

3 1/2

MAXIMUM BOTTOM DEPTH

5 1/2

SQ. FT./BEDROOM

180

L622/F0022

DANIAL & JOYCE CHRISTIANSON  
L3543/F0140

Signed  
Perc Cert

MARYLAND

ROUTE

32

G1C3

G1C3

G1B2

S70°01'41"W  
150.00'  
N19°58'19"W  
150.00'

S72°44'19"E

N70°01'41"E  
139.62'

OPEN SPACE LOT  
(TO BE DEDICATED TO THE  
HOMEOWNER'S ASSOCIATION)

65 dBA NOISE LINE

LOT 1  
47,053 S.F.  
1.08 AC.

LOT 2  
48,617 S.F.  
1.07 AC.

LOT 3  
51,199 S.F.  
1.18 AC.

PROP. HOUSE

PROP. HOUSE

PROP. HOUSE

USE-IN-COMMON  
ACCESS EASEMENT

PROPERTY OF  
WILLIAM & CYNTHIA  
BRAUNSCHWEIGER  
L2865/F0568

PROPERTY OF  
GEORGE & PATRICIA  
MOLESWORTH  
L156/F0413

G1B2

N77°33'04"E  
199.08'

N122°46'N  
133.53'

S84°44'46"W  
127.20'

S83°46'40"W

N18°03'20"W  
134.28'

EV. STONE  
PARKING AREA

APPROX.  
LOCATION  
EX. WELL

APPROX.  
LOCATION  
EX. C.O.

EX. POOL

607.87  
P2H

602.49  
P2-B

604.84  
P2-C

607.23  
P2G

609.02  
P2I

613.86

616.73

619.08  
P3-C

615.64

618.82

612.01  
P3G

614.59  
P3-D

621.66  
P3B

622.21  
P3I

623.44  
P3J

623.15  
P3F

624.64  
P3G

624.68  
4PR

625.54  
4B

623.65  
4A

625.40  
4PL

616.85  
P4A

619.9  
P4B

EX. WELL

PROP. WELL

PROP. WELL

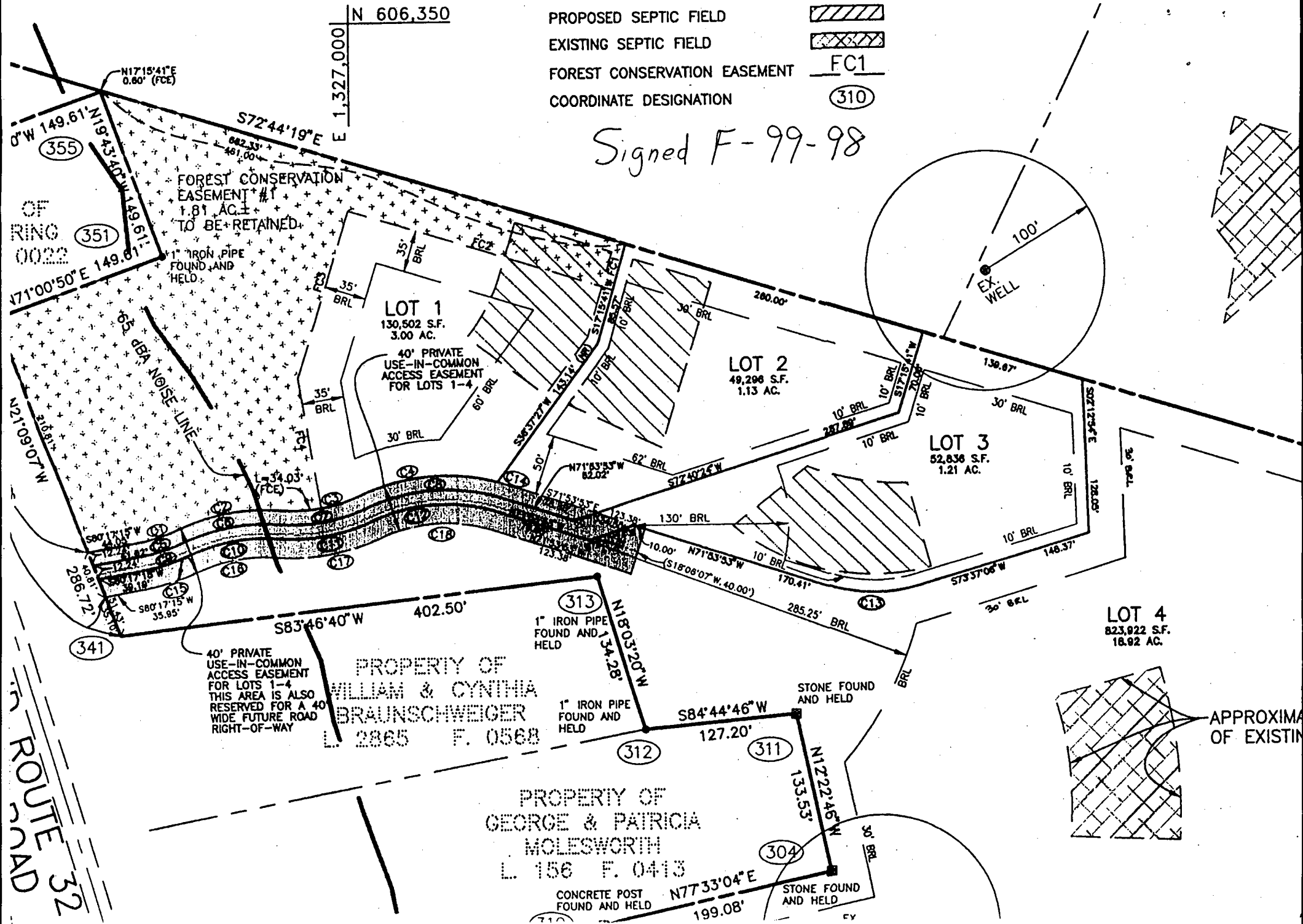
APPROX.  
LOCATION  
EX. WELL

DANIEL & JOYCE CHRISTIANSON  
L. 3543 F. 0140

LEGEND  
LIMIT OF WETLAND  
EXISTING WELL  
PROPOSED SEPTIC FIELD  
EXISTING SEPTIC FIELD  
FOREST CONSERVATION EASEMENT  
COORDINATE DESIGNATION

W12  
FC1  
(310)

Signed F-99-98



C 1	9697	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.	
1 2 3	6				COUNTY NUMBER	W 511416 B
ST/CO USE ONLY DATE Received MM DD YY		DATE WELL COMPLETED MM DD YY		Depth of Well 22 185 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 94 2193
8 13		15 20				28 29 30 31 32 33 34 35 36 37

OWNER	P. Fau Michael	
STREET OR RFD	MD Route 32	
SUBDIVISION	Christian Family Retreat Ctr	TOWN W. Friendship
SECTION		LOT 2

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 FROM TO	check if water bearing
Top Soil	0 2	
Sandy	2 30	✓
SAND STONE	30 35	
MICKA	35 70	
SAND STONE	70 75	✓
MICKA	75 185	

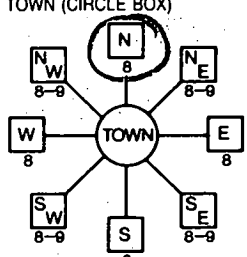
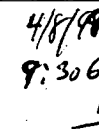
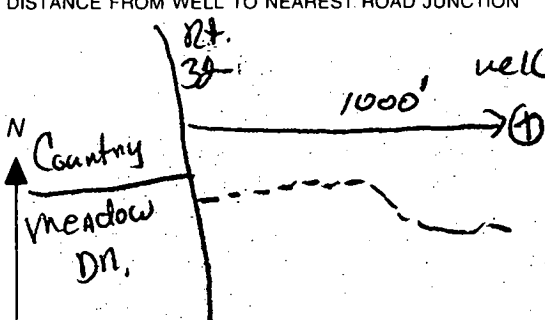
GROUTING RECORD	
yes no WELL HAS BEEN GROUTED (Circle Appropriate Box) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> CM BENTONITE CLAY <input type="checkbox"/> BC	
NO. OF BAGS 45 46 8 NO. OF POUNDS 45 46 800	
GALLONS OF WATER 54	
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30 ft. (enter 0 if from surface)	
CASING RECORD	
casing types insert appropriate code below	ST STEEL CO CONCRETE PL PLASTIC OT OTHER
MAIN CASING TYPE PL	Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 40
OTHER CASING (if used) diameter depth (feet) inch from to	

C 3	
PUMPING TEST	
HOURS PUMPED (nearest hour)	3
PUMPING RATE (gal. per min.)	8.5
METHOD USED TO MEASURE PUMPING RATE	Bucket
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	21 ft.
WHEN PUMPING	70 ft.
TYPE OF PUMP USED (for test)	
<input checked="" type="checkbox"/> A air	<input type="checkbox"/> P piston
<input type="checkbox"/> C centrifugal	<input type="checkbox"/> R rotary
<input type="checkbox"/> J jet	<input checked="" type="checkbox"/> S submersible

NUMBER OF UNSUCCESSFUL WELLS:	0
WELL HYDROFRACTURED	yes no <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
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 LIC. NO. 1	M S D 116
DRILLERS SIGNATURE	(MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 1	M S D 117
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

SCREEN RECORD	
screen type or open hole	ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER
DEPTH (nearest ft.)	
1 HO 38 185	
2	
3	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
from to	
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
70	72
TELESCOPE CASING	LOG INDICATOR
OTHER DATA	

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)	
<input checked="" type="checkbox"/> + above	LAND SURFACE
<input type="checkbox"/> - below	2 (nearest foot)
LOCATION OF WELL ON LOT	
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	
ROAD 100' well 15' 1/4	

B 1 1 2 3 6 <b>4706</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>H0 - 94 - 2193</b> <small>fill in this form completely</small>
Date Received (APA) <b>2/16/99</b> 8 MM DD YY 13 <b>OFau Michael</b> 15 Last Name Owner First Name 34 <b>622 Deven Dr.</b> 36 Street or RFD 55 <b>Columbia MD 21044</b> 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL 8 COUNTY <b>Howard</b> 21 <b>Christian Family Retreat Center</b> 23 SUBDIVISION 42 SECTION <b>—</b> 44 46 LOT <b>2</b> 48 50 <b>West Friendship</b> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <b>2</b> 73 M 76 77 78	
DRILLER INFORMATION <b>Ralph MAYNE</b> <b>MS D116</b> Driller's Name 76 License No. 81 <b>Ralph MAYNE well Drilling</b> Firm Name <b>9120 Brown Church Rd Mt Airy</b> Address <b>Ralph Mayne</b> <b>2-10-99</b> Signature Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <b>MD Rt. 32</b> 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 <b>1000</b> 37 DISTANCE FROM ROAD <b>1000</b> ENTER FT OR MI 38 39 TAX MAP: <b>9</b> BLK: <b>—</b> PARCEL <b>41</b>	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE <b>5</b> (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED <b>500</b> (GAL. PER DAY) 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <b>Howard</b> <b>W511416 B</b> COUNTY NAME COUNTY NO. STATE SIGNATURE <b>—</b> INSERT S <b>—</b> DATE ISSUED <b>3/18/99</b> <b>Rand R. R. R.</b> <b>3/18/00</b> 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <b>547000</b> EAST GRID <b>0814 000</b> 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="radio"/> PUBLIC WATER SUPPLY WELL <input type="radio"/> TEST, OBSERVATION, MONITORING <input type="radio"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>well</b> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <b>81414</b> N <b>54747</b> 000 000	
APPROXIMATE DEPTH OF WELL <b>150</b> FEET 24 28 APPROXIMATE DIAMETER OF WELL <b>6"</b> NEAREST INCH		4/8/99 9:30 Grant No. Insp. 	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 <input checked="" type="radio"/> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 31 <input type="radio"/> CABLE REVERSE-ROTARY DRIVE-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 <b>—</b> 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 54 <b>—</b> 63 PERMIT No. <b>H0 - 94 - 2193</b> 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

DEARING  
L 622 F. 0022

PROPERTY OF  
DANIAL & JOYCE CHRISTIANSON  
L 3543 F. 0140

MARYLAND

ROUTE

32

G1C3

G1C3

G1B2

G1C2

G1B2

PROPERTY OF  
GEORGE & PATRICIA MCLEWORTH  
L 156 F. 0413

PROPERTY OF  
WILLIAM & CYNTHIA  
BRAUNSCHEWEIGER  
L 2865 F. 0568

N24°43'33"W 120.17'  
S71°00'50"W 149.61'  
N19°43'40"W 149.61'

273.93'  
N17°15'41"E 0.60'  
FOREST CONSERVATION  
EASEMENT #4  
1.9 AC.±  
TO BE RETAINED  
20" LANDSCAPE  
EDGE

OPEN SPACE LOT 5  
(TO BE DEDICATED TO THE  
HOMEOWNER'S ASSOCIATION)  
90,952 SF (2.09 AC.)

LOT 1  
47,085 SF  
1.08 AC.

LOT 2  
16,645 SF  
1.07 AC.

LOT 3  
51,223 S.F.  
1.18 AC.

LOT 4  
820,651 S.F.  
18.84 AC.

EXISTING  
TREE LINE

85' DBA  
NOISE LINE

USE-IN-COMMON  
ACCESS EASEMENT

20' LANDSCAPE  
EDGE

20' L  
EDGE

EX. STONE  
PARKING AREA

APPROX.  
LOCATION  
EX. C.O.

APPROX. LOCATION  
EX. SEPTIC FIELD

Christian Family Retreat Center

well to be drilled 3/1/99

well to be drilled 3/1/99

598

002

G24

G17