

03-289672

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

APPROVED
1114187 RIT
P. 38/189

A 24673

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

108272370

461-9933

INDEXED

ELLICOTT CITY

DISTRICT 3rd

DATE 12/2/84

T & R Plumbing & Heating, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 11974 Scaggsville Road, Fulton, Maryland 20759 PHONE 725-2392

SUBDIVISION Berndell Estates ROAD 940 River Road LOT 39

PROPERTY OWNER ~~Miko Fisher/William Adams~~ Mark Case

ADDRESS

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

GARBAGE GRINDER? YES ☐ NO ☒

BLDG. PERMIT SIGNED

AND RETURNED 7/25/86

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

Serial # BW101349
addition - 1 story - master bedroom

TRENCHES - 160 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4 1/2 feet below original grade. Effective area begins at 3 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Start 1st trench 174 feet from front (Ridge Road) and 15 feet from left (555 ft) side line, trenches to follow level ground (constant elevation) running approximately toward back left corner.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench before gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

(PUMP SYSTEM MAYBE REQUIRED - GRAVITY FLOW SYSTEM NOT FEASIBLE)

BLDG. PERMIT SIGNED

AND RETURNED 1-5-2000

OH/Hand

PLANS APPROVED BY ~~Summit~~ C. Williams DATE 6/11/86

COVERING WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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.

BLDG. PERMIT SIGNED

AND RETURNED 6/17/91

PERMIT VOID AFTER THREE 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.

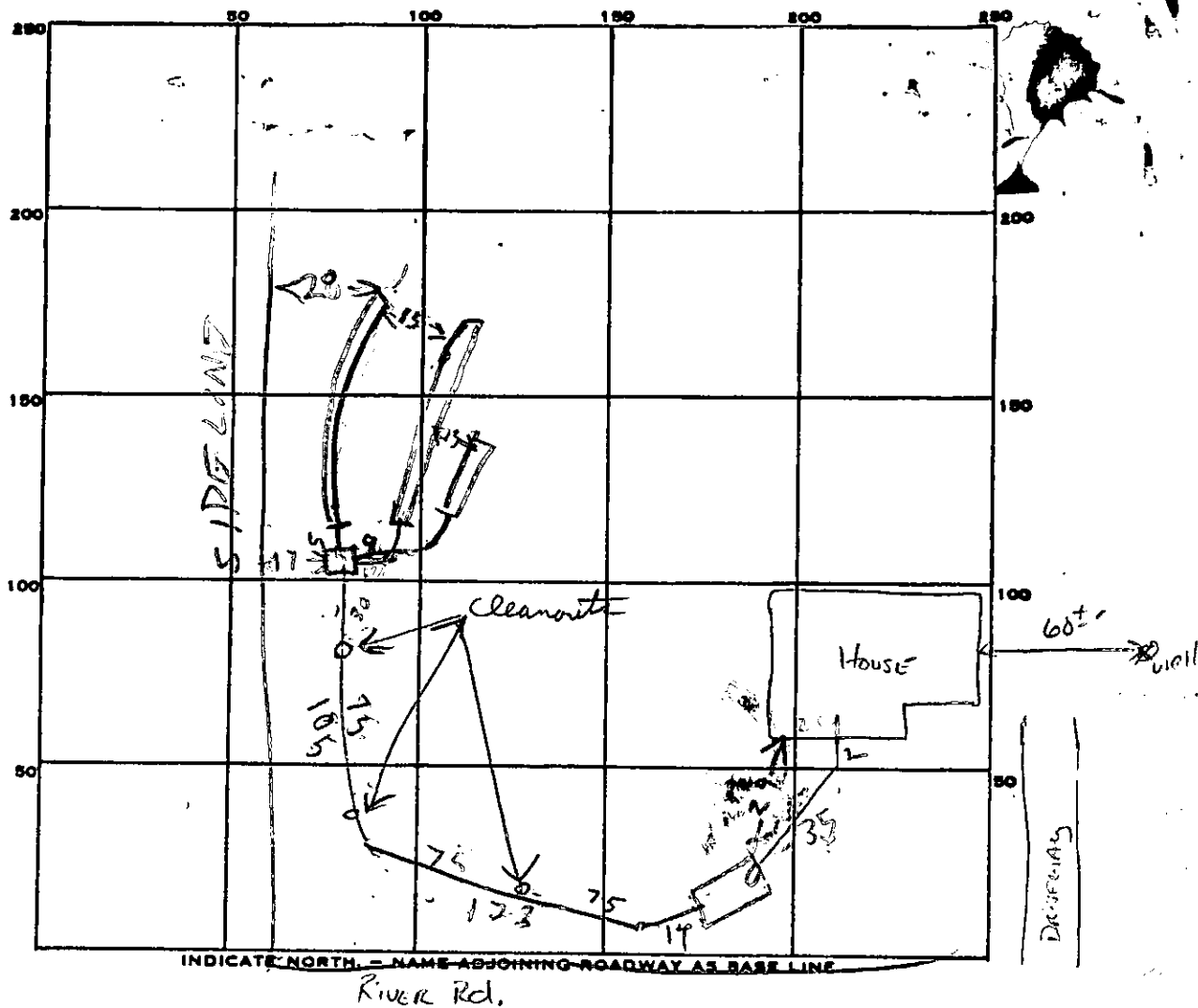
Serial # 38475
Garage

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 24673



PERMIT CARD _____

SEPTIC TANK, LEVEL OK

CLEANOUTS 57

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 3 5 5 FT. TRENCH WIDTH 3 3 3 FT.

GRAVEL DEPTH 1 1/2 7 IN. TOTAL LENGTH 100 100 23 FT.

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 669 TOTAL

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/13/87 PUMP NOT NEEDED. COVER TRENCHES
INSTALL 3 CLEANOUTS BETWEEN TANK & BOX
CONNECT SHORT TRENCH DIRECTLY TO BOX
11/13/87 - BOX CONNECTED DIRECTLY TO TRENCH #3
CLEANOUTS INSTALLED

DATE SYSTEM APPROVED 11/13/87

INSPECTOR Raymond Rudge

APPLICATION

24673

SEWAGE DISPOSAL TESTING

P. _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 11/3/76

*System first Septic Tank - 3 - 1000 gal
4 bdr - 1250*

*File Field. 120 sq ft bottom area per bedroom
installed at depth of 33 ft below orig grade*

*Begin first trench at point 174 ft from
front lot line and 15 ft from left side as seen when
facing lot from River Rd. Trenches to follow
contour of ground & second trench to*

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 L.A.M., Inc.

William Amass

Mrs. Lillian Podell

Any questions call
Browne Associates

ADDRESS 4615 Old Court Rd. Pikesville Md.

PHONE _____

PROPERTY LOCATION:

SUBDIVISION Berndell Estates 940 River Road

LOT NO. 39

ROAD AND DESCRIPTION River Rd. & Rt. 32

SIZE OF LOT -5- 6.533 Acres

TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

Single Fmly Dwelling

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT Mrs. Lillian Podell

APPROVED BY J. Stanger

FOR Frank Fielder

DATE 8/11/78

(KIND OF SYSTEM)

REJECTED BY _____

FOR _____

DATE _____

(KIND OF SYSTEM)

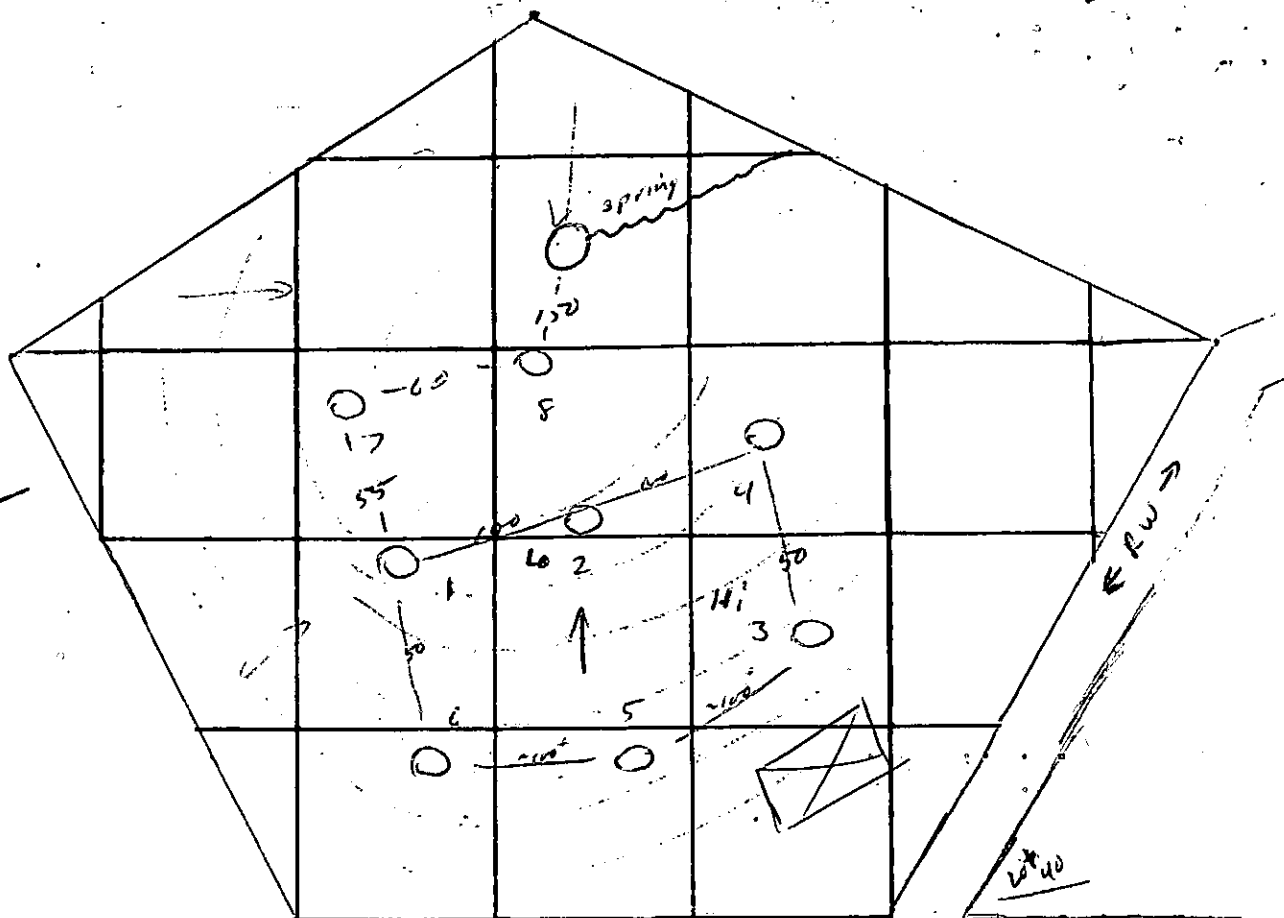
HOLD PENDING FURTHER TESTS _____

DATE _____

REASONS FOR REJECTION OR HOLDING _____

B.P. # 71833

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

← River Rd →

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/17/66	1	3					
	1A	12 1/2					
	2	3					
	2A	10 1/2	1 08	1 33	1 33	1 41	230
	3	4					
	3A	10 1/2	1 10	1 20	1 20	1 46	26
	4	10 1/2					
	5	11 1/2					
	6	11 1/2					
	7	6		rock			
	8	6		hard			

REMARKS _____

TYPE OF SOIL _____

TESTED BY M ALSO PRESENT: _____

conveyed
70 38

lot 39
1.533

Ⓢ

15

S 21.34

Private water &
Private sewer

11-22-78

Howard County Health Officer

1000 Old Courthouse
Hicksville, N.Y.



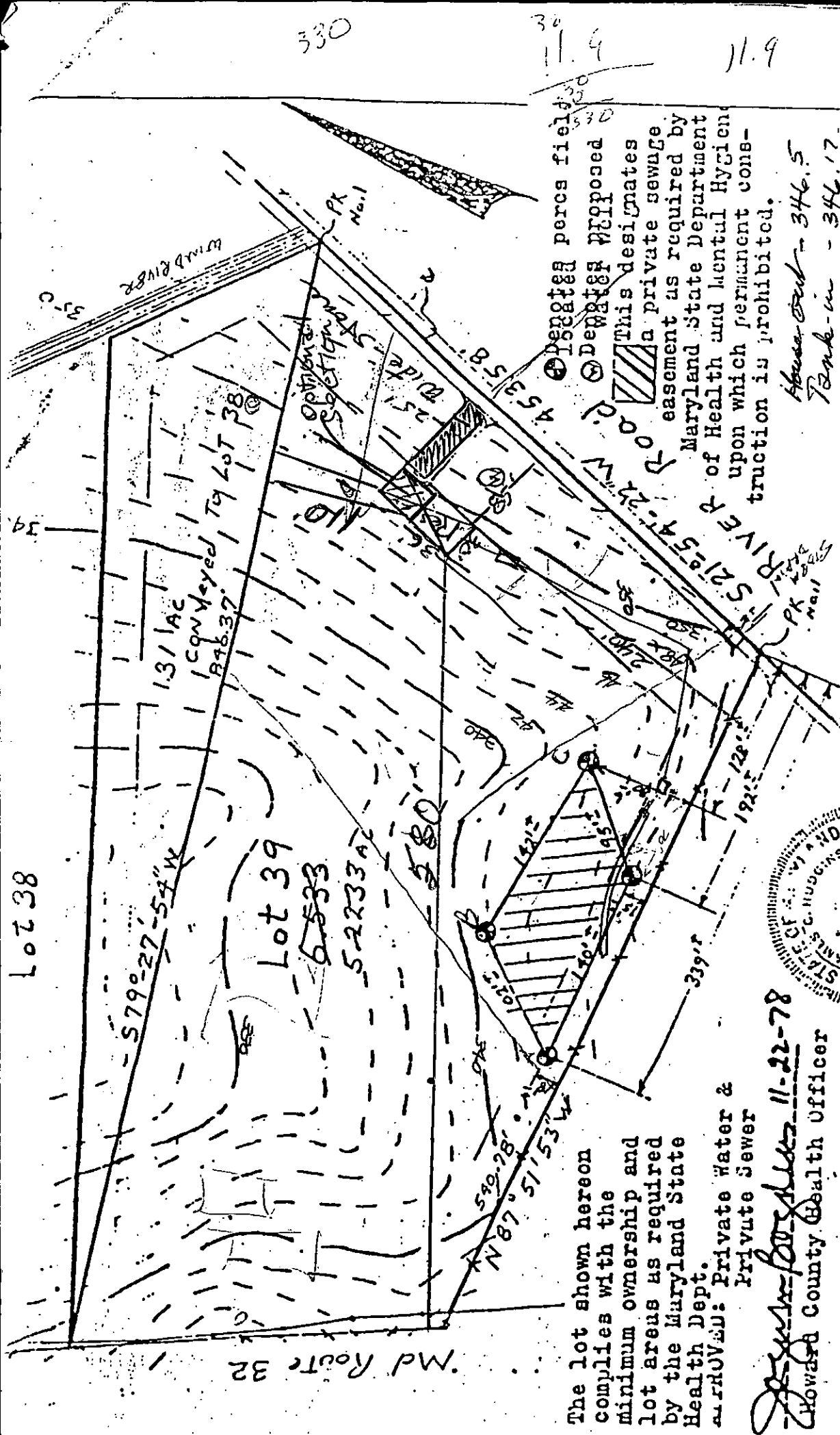
MAP OF PROPERTY

OF
L.A.M. Incorporated
3rd Election District
Howard County, Md

PLS 296

Scale 1"=100' Date 11-22-78

Lot 38

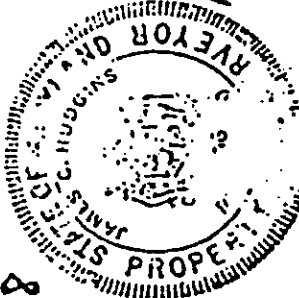


The lot shown hereon complies with the minimum ownership and lot areas as required by the Maryland State Health Dept.

APPROVED: Private Water & Private Sewer

[Signature] 11-22-78
Howard County Health Officer

Owner: U.A.M. Inc.
4615 Old Court Rd.
Pikesville, Md.



Bl. # 71833

House - out - 346.5
Tank - in - 346.17
Tank - out - 345.92
Back - in - 343.27
" - out - 343.25
Tanks in - 343.25

3rd Election District
Howard County, Md.
Scale 1" = 100' D.L. 2-10-72

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

11 18 9 19 AM '85

DIVISION OF
ENVIRONMENTAL
HEALTH

C1 5222

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER A-4673

DATE Received

8						13
---	--	--	--	--	--	----

DATE WELL COMPLETED

15	3	7	1	6	8	6	20
----	---	---	---	---	---	---	----

Depth of Well

22	7	8				26
----	---	---	--	--	--	----

(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

28	29	30	31	32	33	34	35	36	37
40-81-1596									

OWNER

STREET OR RFD

last name

first name

TOWN

SUBDIVISION

SECTION 1

LOT 39

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	
Dirt	0	1	
Soft Brown Mica & Clay	1	8	
Soft, Hard, Brown & Blue Sandstone	8	35	X
Hard Blue Sandstone	35	37	
Hard Brown Sandstone	37	38	X
Hard Blue Sandstone	38	45	
Hard Brown Sandstone	45	46	X
Hard Black Granite	46	63	
Hard Brown Sandstone & Gravel	63	73	X
Hard Brown & Blue Sandstone	73	78	

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 34 NO. OF POUNDS 3196

GALLONS OF WATER 204

DEPTH OF GROUT SEAL (to nearest foot)

from 46 ft. to 54 ft. (enter 0 if from surface)

casing
types
insert
appropriate
code
below

CASING RECORD

STEEL ☒ ST CONCRETE ☐ CO
PLASTIC ☐ PL OTHER ☐ OT

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

S T 6 4 1

EACH CASING

OTHER CASING (if used)

diameter inch depth (feet) from to

screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

STEEL ☒ ST BRASS ☐ BR OPEN HOLE ☐ HO
BRONZE ☐ PL PLASTIC ☐ OT OTHER ☐ OT

C2

DEPTH (nearest ft.)

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min. to nearest gal.)

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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
(CIRCLE) (YES or 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)LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)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
WELLI 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. 206

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

HEALTH

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

JUL 17 10 23 AM '86

DIVISION OF
ENVIRONMENTAL
HEALTH

C-1	9316	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.	
1	2	3	4	5	COUNTY NUMBER	A24673
ST/CO-USE ONLY DATE Received 11-30-98		DATE WELL COMPLETED MM DD YY 11 17 98		Depth of Well 22 105 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1961

OWNER	Case Mark				
STREET OR RFD	last name 940 River Road		first name	TOWN	Sykesville
SUBDIVISION	Berndell Est		SECTION	LOT 39	

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
Dirt	0 1	
Soft Br. Schist	1 7	
Clay & Br. Schist	7 16	X
Soft Br. Sandstone	16 17	X
Soft Br. Sandstone	17 40	
Br. & Blue Sandstone	40 51	
Fracture	51 52	
Br. & Blue Sandstone	52 60	
Hard Blue Sandstone	60 74	
Br. Sandstone	74 75	
Hard Blue Sandstone	75 82	
Br. Sandstone	82 84	
Hard Blue Sandstone	84 105	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT CM	BENTONITE CLAY BC
NO. OF BAGS 38	NO. OF POUNDS 3572
GALLONS OF WATER 228	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 41 ft.	
(enter 0 if from surface)	
Casing types insert appropriate code below	
Casing RECORD	
STEEL ST CONCRETE CO	
PLASTIC PL OTHER OT	
MAIN CASING TYPE	
Nominal diameter top (main) casing (nearest inch)	
Total depth of main casing (nearest foot)	
S T 6 43	
OTHER CASING (if used)	
diameter depth (feet)	
inch from to	
SCREEN RECORD	
screen type or open hole	
STEEL ST BRASS BR OPEN HO	
BRONZE PL HOLE OT	
PLASTIC OT OTHER	

C 3	
PUMPING TEST	
HOURS PUMPED (nearest hour) 3	
PUMPING RATE (gal. per min.) 15	
METHOD USED TO MEASURE PUMPING RATE submersible	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING: 15 ft.	
WHEN PUMPING: 25 ft.	
TYPE OF PUMP USED (for test)	
A air P piston T turbine	
C centrifugal R rotary O other (describe below)	
J jet S submersible	

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED yes Y no 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 28.04.04 "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.
DRILLER'S LIC. NO. MWD 256
Dana Kyker Jr. II
DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. JWD 334
John Kyker III
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2	
DEPTH (nearest ft.)	
H O 43 105	
E A C H S C 3 R E E N	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56 60	
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 O	
70 72 74 75 76	
TELESCOPE CASING LOG INDICATOR OTHER DATA	

PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES OR 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 (nearest foot) 2	
LOCATION OF WELL ON LOT	
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	
Well River Road	

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

1998 NO 30 AM 10:41

Date 11/17/98

Review OK KM 11/30/98

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-1961
Location of property (road) 940 River Rd
Subdivision Burdell Est. Lot 39 Block Plat Sec.
Well Driller Dana Kyker Owner Case, Mark

Depth of well 105 feet

Distance of measuring point (M.P.) above ground 2 feet

Static water level (S.W.L.) below M.P. 15 feet

I. High rate pumping -- reservoir drawdown

Time pump started 12:15

Pumping rate 15 gpm

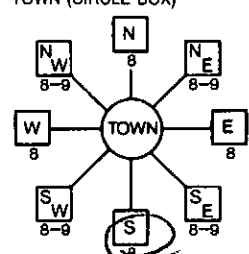
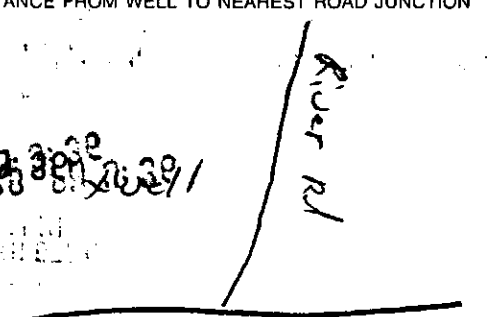
Total time 3 hrs to reach pumping water level 25 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

1998 NO 30 AM 10:41

B 1	1595	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>HO-94-1961</u> <small>fill in this form completely</small>
<small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small> Date Received (APA) <u>10 28 98</u> <small>8 MM DD YY 13</small>				
OWNER INFORMATION			LOCATION OF WELL	
Last Name <u>CASE</u> Owner <u>MARK</u> First Name <u>MARK</u> Street or RFD <u>940 River Rd</u> Town <u>Sykesville</u> State <u>MD</u> Zip <u>21784</u>			COUNTY <u>Howard</u> SUBDIVISION <u>Belndell Estates</u> SECTION <u>44</u> LOT <u>39</u> NEAREST TOWN <u>Sykesville</u> MILES FROM TOWN (enter 0 if in town) <u>2</u> M I	
DRILLER INFORMATION			DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
Driller's Name <u>DANA KYLE J. T. M. D. 256</u> License No. <u>81</u> Firm Name <u>WESTMINSTER ROTARY WELL DRILLING</u> Address <u>P.O. Box 861 Westminister, Md. 21157</u> Signature <u>Dana Kyle J. T. M.</u> Date <u>10-23-98</u>				
NEAR WHAT ROAD <u>River Rd</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input checked="" type="checkbox"/> DISTANCE FROM ROAD <u>200</u> FT ENTER FT OR MI <u>FT</u> TAX MAP: _____ BLK: _____ PARCEL: _____				
WELL INFORMATION			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
APPROX. PUMPING RATE (GAL. PER MIN.) <u>10</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>1000</u>			COUNTY NAME <u>Howard Co</u> COUNTY NO. <u>A24673</u> STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <u>11-10-98</u> CO SIGNATURE <u>A. M. Miller</u> EXP. DATE <u>11-10-99</u> NORTH GRID <u>540000</u> EAST GRID <u>810000</u>	
USE FOR WATER (CIRCLE APPROPRIATE BOX)			SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>CITY</u> 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE E <u>810</u> N <u>540</u> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input checked="" type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <u>Pond</u> <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL <u>125</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST 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)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <u>41</u>				
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER <u>54</u> GAP <u>63</u> FORCE <u>AM</u> WRITE INITIALS IN BOX PERMIT No. <u>HO-94-1961</u> SPECIAL CONDITIONS <u>410-489-5344</u> <u>RT 32</u>				

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

1998 OCT 28 PM 3:36

William E. Doyle

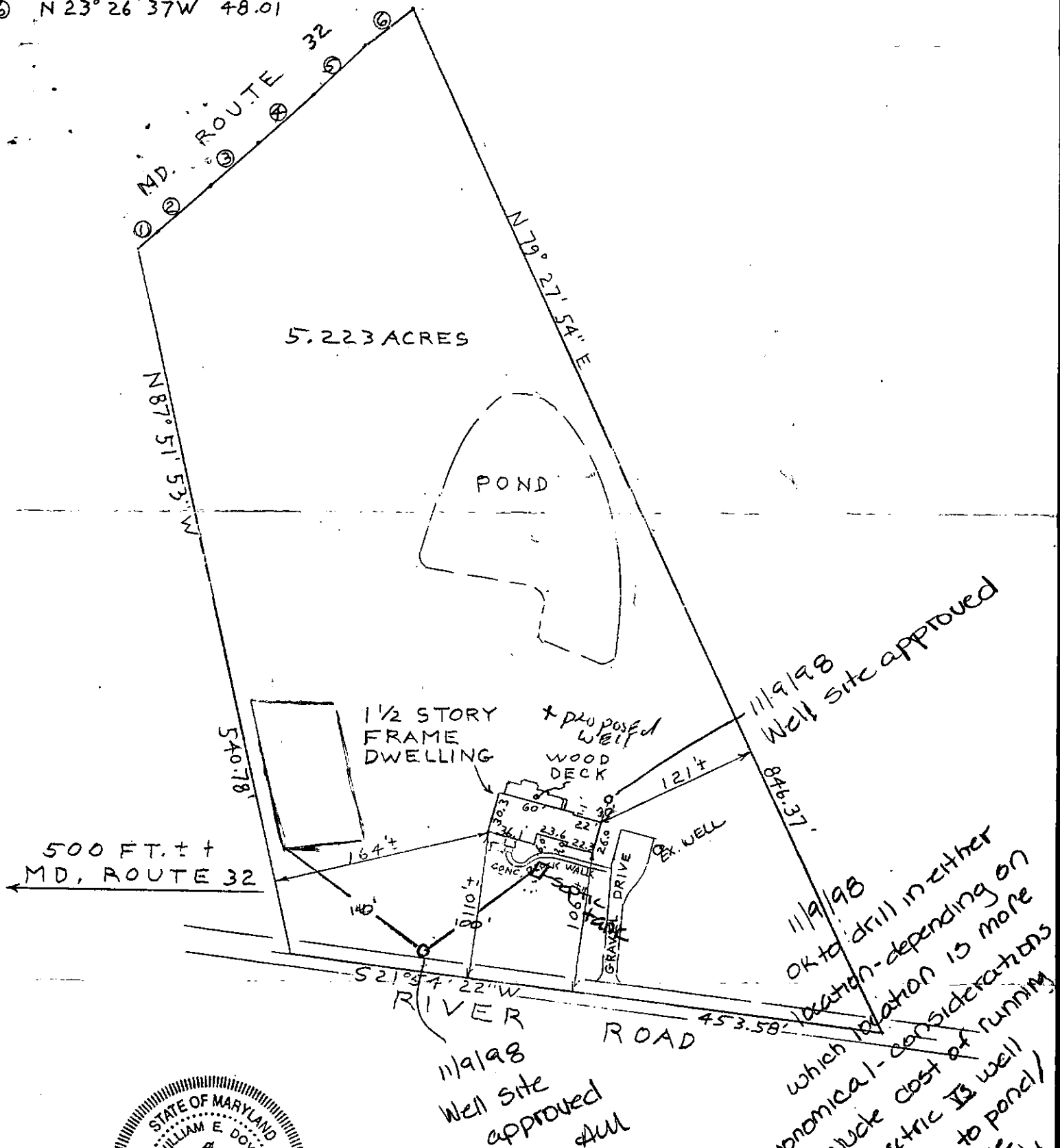
LAND SURVEYOR 8440

5312 EMERALD DRIVE SYKESVILLE, MARYLAND 21784 PHONE (301) 795-2210

LOCATION SURVEY

940 RIVER ROAD
LIBER 1930, FOLIO 051
ELECTION DISTRICT 3
HOWARD COUNTY MD.

- ① N 25° 45' 13" W 20.03
- ② N 26° 44' 05" W 51.16
- ③ N 27° 57' 39" W 50.25
- ④ N 27° 44' 33" W 52.24
- ⑤ N 26° 33' 58" W 53.15
- ⑥ N 23° 26' 37" W 48.01



THIS IS TO CERTIFY THAT WE HAVE MADE A LOCATION SURVEY OF THE IMPROVEMENTS, AND THAT THEY ARE LOCATED ON THE LOT AS SHOWN HEREON.

Signed This 7th day SEPTEMBER 19 91

William E. Doyle

SCALE 100 ft. = 1 inch

File No. 880-1

NOTE: This plat cannot be used to establish property lines or corners.

MAD 5 D 9

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

1998 OCT 28 PM 3:36

LAND SURVEYOR 8440

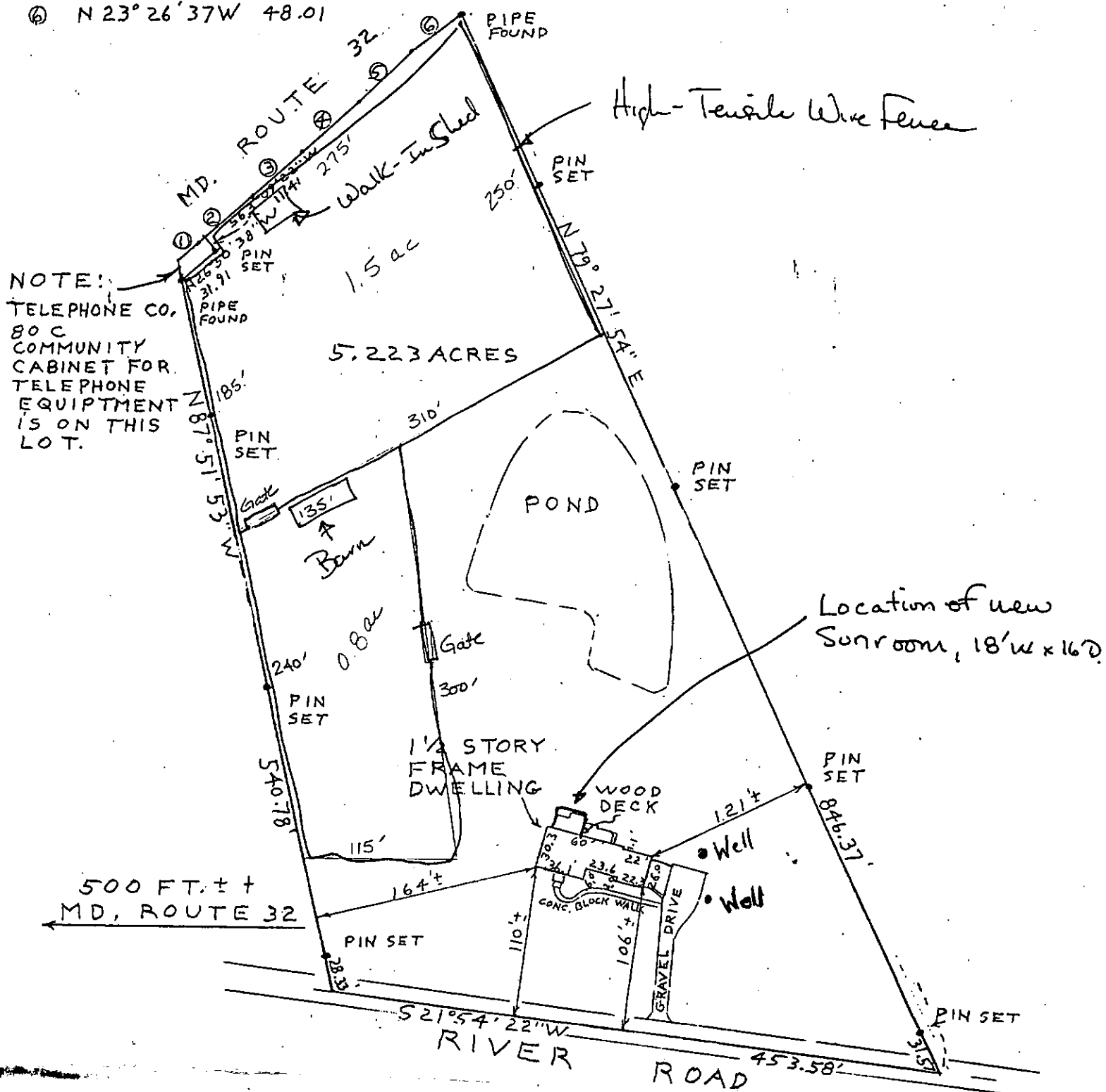
5312 EMERALD DRIVE

SYKESVILLE, MARYLAND 21784

PHONE (301) 795-2210

940 RIVER ROAD
LIBER 1930, FOLIO 051
ELECTION DISTRICT 3
HOWARD COUNTY MD.
LOT # 39

- | | | |
|---|-----------------|-------|
| ① | N 25° 45' 13" W | 20.03 |
| ② | N 26° 44' 05" W | 51.16 |
| ③ | N 27° 57' 39" W | 50.25 |
| ④ | N 27° 44' 33" W | 52.24 |
| ⑤ | N 26° 33' 58" W | 53.15 |
| ⑥ | N 23° 26' 37" W | 48.01 |



THIS IS TO CERTIFY THAT WE HAVE MADE A LOCATION SURVEY OF THE IMPROVEMENTS, AND THAT THEY ARE LOCATED ON THE LOT AS SHOWN HEREON.

Signed This 28th day SEPTEMBER 1991

William E. Doyle

SCALE 100 ft. = 1 inch

File No. 880-1

NOTE: This plat cannot be used to establish property lines or corners.

MAD 5 0 0