

10/11/85
ASAP

APPROVED
10/11/85
RH

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 34020
A 30314

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

63-308708
INDEXED

ELLICOTT CITY

DISTRICT 3rd

DATE 9/22/85

Bud Arnold Septic Tank Service

IS PERMITTED TO INSTALL X ALTER

ADDRESS Jacobs Road, Mt. Airy, MD 21771

PHONE 795-7873

SUBDIVISION Wynfield

ROAD 2611 Wynfield Road

LOT 14, Section 1

PROPERTY OWNER Joseph & Susan Duff

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 3 feet below original grade. 7 feet of stone below distribution pipe. LOCATION: Start first trench 270 feet from the front lot line and 70 feet from the left lot line. Run trench(s) along contour toward right side of property. 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(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and dcap to grade or above on septic tank.

PLANS APPROVED BY C. Williams

DATE 9/20/85

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: 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.

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.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

30314

PRELIMINARY

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

A 30314

P _____

DISTRICT 3rd.

DATE 10/31/79

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 Land Associates JOSEPH & Susan Duff

ADDRESS 3450 Ft. Meade Rd., No. 206, Laurel, Md. 20810 PHONE Tom Munz or Ted Snovell - 265-6543

PROPERTY LOCATION:

SUBDIVISION WYNFIELD Hoffman property LOT NO. 52

ROAD AND DESCRIPTION Route 144 2611 Weynfield Rd.

SIZE OF LOT 3 acres plus TYPE BLDG. 3 or 4 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.

SIGNATURE OF APPLICANT /s/ Ted Snovell for Land Associates

APPROVED BY R.H. & D.W.M. FOR DRYWELL DATE 12/27/79

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING OK 11/6/79 RH

B.P. 65893
BLDG. PERMIT 7-15-88
AND RETURNED

Copy given to Jim D.

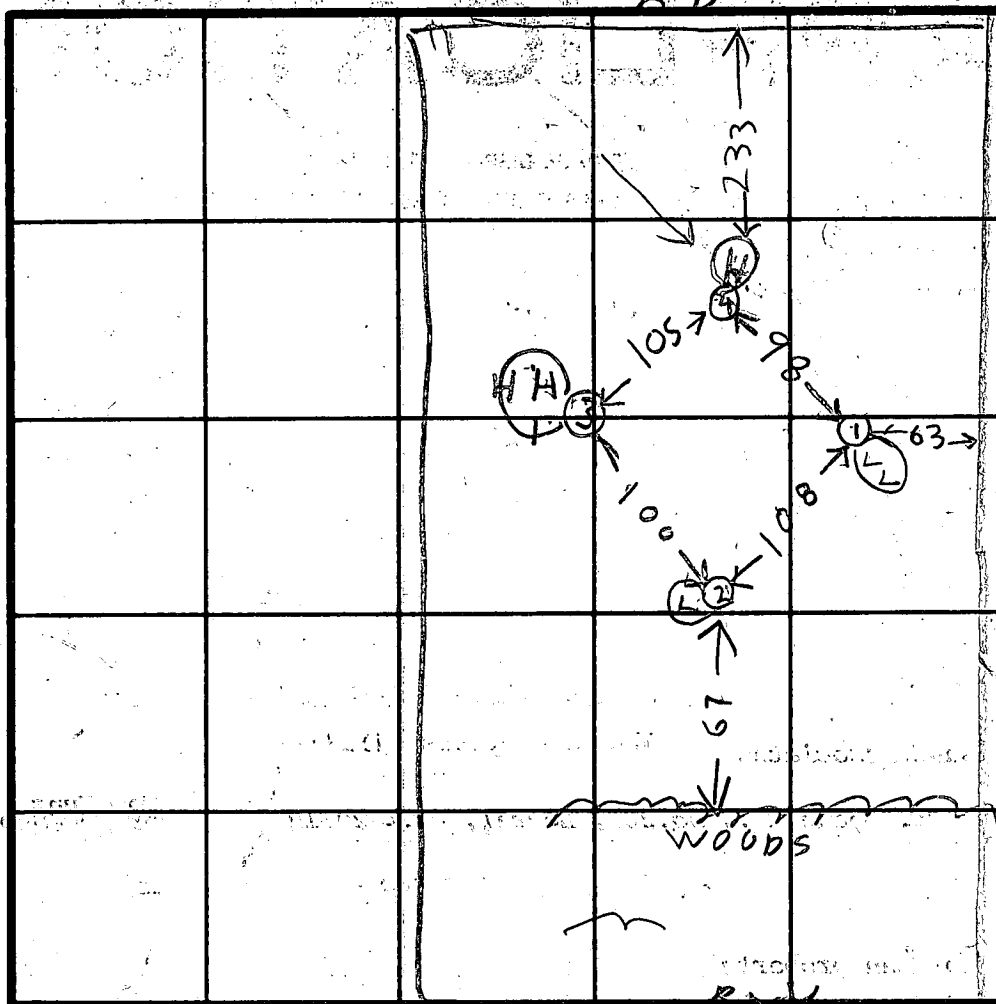
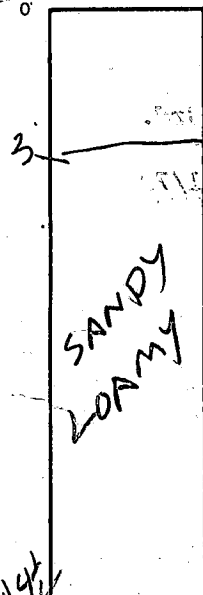
will be

THIS IS NOT A PERMIT

2

4

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/6/79	1D	14	1018	1020	1020	1024	4
	1S	4	1021	1024	1024	1028	4
	2S	4	1029	1030	1030	1033	3
	2D	14	1036	1038	1038	1158	20
	3D	14 1/2	1045	1150	1150	1212	22
	3S	4 1/2	1150	1200	1200	1210	10
11/6/79	4V	14 1/2	SEE SOIL PROFILE				

inlet
4'

16 MIN. 6
AVG.
FOR HIGH
HOLE

11 MIN. AVG.
OVERALL

11 min
6/63 3-9
1740/BR 116

REMARKS

TYPE OF SOIL

TESTED BY

BH & RD

ALSO PRESENT

JIM

63 ft

27

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

Box 479

Ellicott City Md. 21043

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL
DRILLER:

My well driller is not to install the pump for my water well, and I
hereby certify that it will be my responsibility to have a Pump Permit
taken out by a registered master plumber or certified pump installer.
It will be my responsibility to notify the Health Department before
and during the installation so that inspections can be made by their
representative. (Pursuant to Chapter XVII, of the Plumbing Code of
Howard County.)

Joseph J. Duff
(Name)

3001 Georgetown Rd
Balto Md 21230
(Address)

255-5200 (W)
644-6383 (H)

H0-81-0736
(OEP Well Permit Number)

9/24/84
(Date)

144

LAND DEDICATED TO PUBLIC USE FOR THE
PURPOSE OF A PUBLIC ROAD BY PLAT NO. 487C

VEHICULAR INGRESS
EGRESS RESTRICTED

LDG. RESTRICTION LINE

BLDG. RESTRICTION LINE

3.0945 AC.1

LOT NO. 10

Joseph W. Rieff

WILLIAMS, S. & LONGINE, H. 1980
262: 587

BIRMINGHAM
 DEPT. OF
 VIDEO AND
 FILM
 DESIGN
 SITE
 VOICE
 SEWING
 OFFICE
 VARIOUS
 PRIVATE
 OF A
 NOT

THE
 MINI
 DECK
 OF THE
 PLAN

THERE
 A 20

SUBJECT PT
COMPROISE

RECORDED
AMONG THE
MAYPLANE



CHALLENGER CREEK ASSOCIATES, A MARYLAND LIMITED PARTNERSHIP, OWNERS
OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THE FIRST
NATIONAL BANK OF MARYLAND, TRUSTEE, DEED OF TRUST TO SECURE
MORTGAGE SAVINGS AND LOAN ASSOCIATION

HEREBY ADOPT THIS PLAN OF SUBDIVISION, & IN CONSIDERATION OF THE
APPROVAL OF THIS FINAL PLAN BY THE OFFICE OF PLANNING & ZONING, ESTABLISH
THE MINIMUM BUILDING RESTRICTION LINES, & GRANT UNTO HOWARD COUNTY, MD.
ITS SUCCESSORS & ASSIGNS, (1) THE RIGHT TO EXERCISE ALL RIGHTS

B 1 **2919** SEQUENCE NO. (OEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

10/24/84
Date Received **10/24/84 - 9:30 AM**

092484 OWNER INFORMATION

0UEE **J.** **JOSEPH**
15 Last Name Owner First Name 34

300162060TOWN RD.
36 Street or RFD 55

BALTIMORE **MD. 21230**
57 Town 70 State 72 Zip 76

STATE OF MARYLAND
PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-0736
fill in this form completely

DRILLER INFORMATION

Joseph L. Wayne
Driller's Name **238**
77 License No. 80

Joseph L. Wayne
Firm Name

5512 Ridge Rd. Mt. Airy Md.
Address

Joseph L. Wayne 9/24/84
Signature Date

B 2 **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 **300** FEETAPPROXIMATE DIAMETER OF WELL **6** 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 DEEPEINED 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 DEEPEIN AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) **41** **52**

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER **GAP**FORCE **FS** WRITE INITIALS IN BOX PERMIT No. **HO-81-0736**

SPECIAL CONDITIONS

B 3 **LOCATION OF WELL**

HOWARD **WYFIELD**
8 COUNTY 21

SECTION 1 **LOT 14**
44 46 48 50

WESTFRIENDSHIP
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **3.6** **MI**
73 76 77 78

B 4 **DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

WYFIELD Rd.
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

75 **37**
DISTANCE FROM ROAD

ENTER FT or MI **FT**
38 39

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD **A 30314**
COUNTY NAME COUNTY NO.

OEP SIGNATURE **Frank Shinn** STATE HEALTH INSERT S **41**

DATE ISSUED **092884** **3/28/85**
43 48 CO SIGNATURE EXP. DATE

NORTH GRID **533000** EAST GRID **0815000**
50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. **WELL**

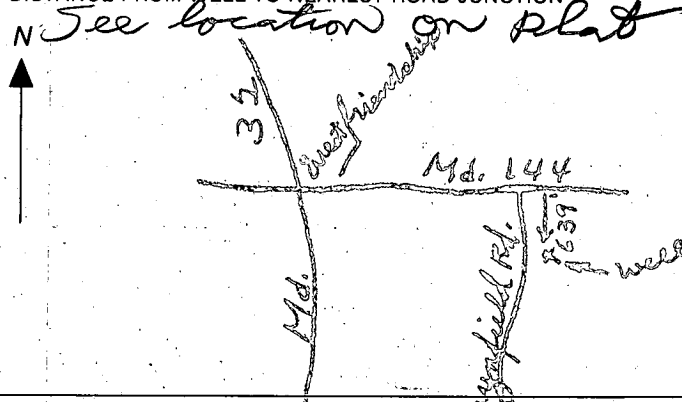
2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

910 **6**
530 **3**

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



Page 1 of 1
Date October 10, 1984

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0734
Location of property (road) Wynfield Road
Subdivision Wynfield Lot 14 Block Plat Sec. 1
Well Driller Joseph Mayne Owner Joseph J. Duff.

Depth of well _____
Distance of measuring point (M.P.) above ground _____
Static water level (S.W.L.) below M.P. _____

Time pump started _____ Pumping rate _____
Total time _____ to reach pumping water level _____ ft. below M.P.

[illegible]

Review H9776

Review H9776

October 24, 1984

October 24, 1984

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0736
Location of property (road) Wynfield Road
Subdivision Wynfield Lot 14 Block Plat Sec. 1
Well Driller Joseph Mavne Owner Joseph J. Duff

Depth of well 325'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 37'

High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 9 GPM
Total time 45 min to reach pumping water level 219 ft. below M.P.

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

[illegible]

C1

2963

SEQUENCE NO.
(OEP USE ONLY)

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 30314

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

102484

22 325 26

FROM "PERMIT TO DRILL WELL"

8 13

15 20

(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER

last name

first name

TOWN

SUBDIVISION

SECTION

LOT

DUFF

JOSEPH

WYNFIELD RD

WEST FRIENDSHIP

WYNFIELD

I

14

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

Brown Shale

0

22

Gray mica rock

22

325

1 - 320'

2 - 325'

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from

ft. to

ft.

TOP

52

54

BOTTOM

58

(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

ST

CO

STEEL

CONCRETE

PL

OT

PLASTIC

OTHER

MAIN

Nominal diameter

Total depth

CASING top (main) casing of main casing

TYPE (nearest inch) (nearest foot)

ST

6

26

60

61

63

64

66

70

OTHER CASING (if used)

diameter

depth (feet)

inch

from

to

EACH CASING

SCREEN RECORD

screen type
or open hole

insert
appropriate
code
below

ST

BR

HO

STEEL

BRASS

OPEN

BRONZE

HOLE

PL

OT

PLASTIC

OTHER

C2

DEPTH (nearest ft.)

1

8

9

11

15

17

21

23

24

26

30

32

36

38

39

41

45

47

51

SLOT SIZE 1 2 3

DIAMETER

(NEAREST INCH)

OF SCREEN

56

60

68

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.)

WQ

70

72

74

75

76

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)
BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

A

P

T

air

piston

turbine

C

R

O

centrifugal

rotary

other
(describe
below)

J

S

jet

submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

(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)

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 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.

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

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)

Wynfield Rd.

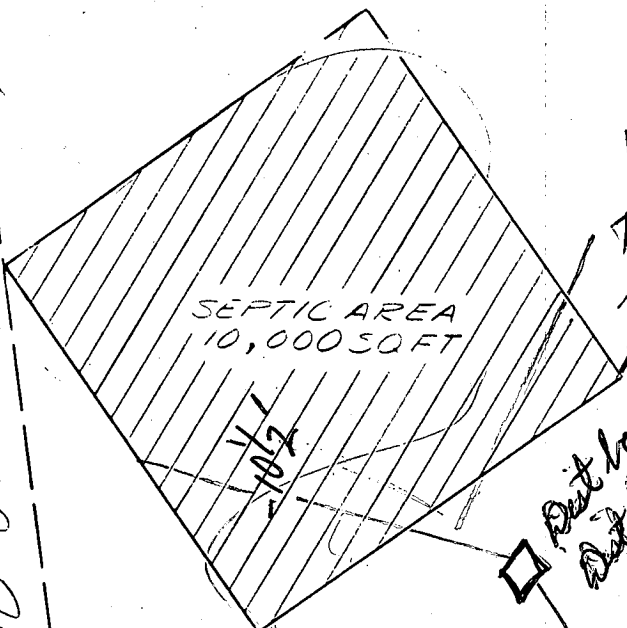
well 1 1/2 gals/min

Dry well no 2

Dry well no 1

HEALTH

20 FT DRAINAGE AND UTILITY EASEMENT



Numbers are minus numbers

Trench to run on level ground

in area of highest test holes
High hole per per. papers

Septic elev's ok. area

Pit box in 10'5"
Pit box out 10'6"

clean out

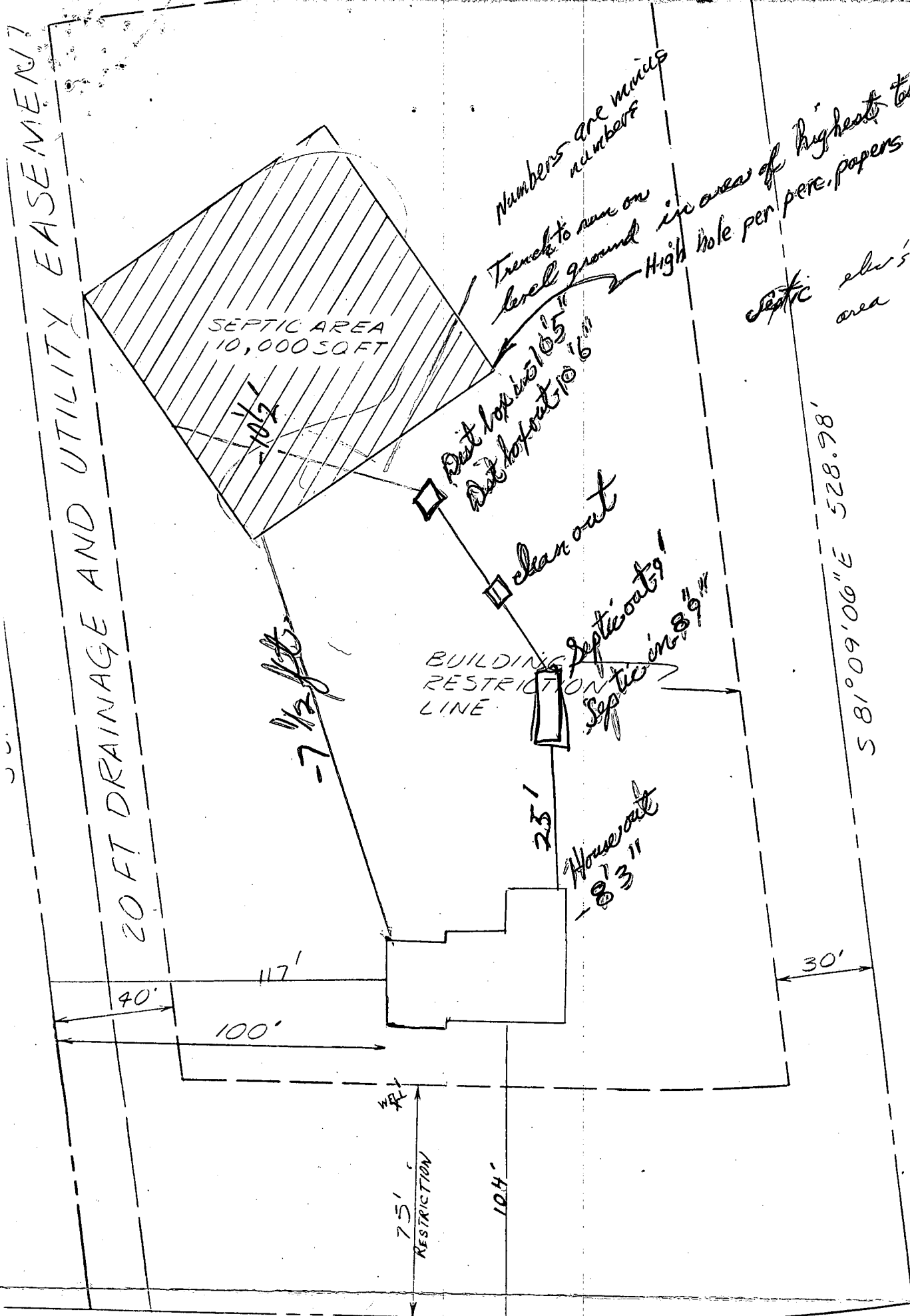
BUILDING RESTRICTION LINE

Septic out 9'
Septic in 8'9"

House out 8'3"

58°09'06"E 528.98'

will do 7.5.



R=1225.00' L=263.76'

WYNFIELD ROAD

Joseph Duff

Lot #14

644-6383

7/12/85 J.D.

C100868

SEQUENCE NO.
(OEP USE ONLY)

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
NUMBERA-30314

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

020386

323

10-81-1331

OWNER

STREET OR RFD

SUBDIVISION

last name

first name

TOWN

WYNFIELD

WYNFIELD Rd.

JOSEPH

WEST FRIENDSHIP

WELL LOG

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

Brown Shale

0

46

Hay Mica Rock

46

325

GROUTING RECORD

WELL HAS BEEN GROUTED

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

CM

BC

11

1034

66

45

CASING RECORD

MAIN CASING TYPE

Nominal diameter

Total depth

OTHER CASING (if used)

ST

CO

PL

OT

6

51

SCREEN RECORD

screen type or open hole

DEPTH (nearest ft.)

EACH CASING

ST

BR

HO

PL

OT

50

323

CIRCLE APPROPRIATE LETTER

A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED.

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELL

DRILLERS IDENT. NO.

DRILLERS SIGNATURE

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

238

Joseph L. Mays

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

WQ

OTHER DATA

68

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

6

44

bucket

42

174

A

P

T

C

R

O

J

S

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

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)

CAPACITY:

GALLONS PER MINUTE

PUMP HORSE POWER

PUMP COLUMN LENGTH

CASING HEIGHT (circle appropriate box
and enter casing height)

LAND SURFACE

YES

NO

29

31

37

43

49

49

50

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)

Maple Rd.

150'

100'

HEALTH

Page 1 of 1
Date 2/3/86

Review OK'd (B) 2/21/86

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1331

Location of property (road) _____

Subdivision Wynfield Lot 14 Block _____ Plat _____ Sec. _____

Well Driller Joseph Mayne Owner Joseph Duff

Depth of well 325'

Distance of measuring point (M.P.) above ground 1

Static water level (S.W.L.) below M.P. 42

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 15
Total time 30 min to reach pumping water level 171 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill \$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:45	114	5 sec.		12
9:00	171	5		12
9:15	171	15		4
9:30	168	15		4
9:45	170	13		4 1/2
10:00	171	14		4 1/4
10:15	171	14		4 1/4
10:30	171	14		4 1/4
10:45	171	14		4 1/4
11:00	171	14		4 1/4
11:15	171	14		4 1/4
11:30	171	14		4 1/4
11:45	162	15		4
12:00	170	13		4 1/2
12:15	173	14		4 1/4
12:30	174	14		4 1/4
12:45	174	14		4 1/4
1:00	174	14		4 1/4
1:15	173	14		4 1/4
1:30	173	14		4 1/4
1:45	173	14		4 1/4
2:00	173	14		4 1/4
2:15	173	14		4 1/4
2:30	173	14		4 1/4

B 1 4557	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-1331 <small>fill in this form completely</small>
Date Received 073086		LOCATION OF WELL	
OWNER INFORMATION 15 Last Name: DUFF Owner: J. First Name: JOSEPH Street or RFD: WYNFIELD RD. Town: WESTFRIENDSHIP MD. Zip: 2176		8 COUNTY: HOWARD 23 SUBDIVISION: WYNFIELD SECTION: 1 LOT: 14 52 NEAREST TOWN: WESTFRIENDSHIP MILES FROM TOWN (enter 0 if in town): 3/4 MI	
DRILLER INFORMATION Driller's Name: Joseph L. Mayne Firm Name: Joseph L. Mayne Well Drilling Address: 5512 RIDGE RD. MT. AIRY 2176 Signature: Joseph L. Mayne Date: 1/30/86		WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.): 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <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 HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME: Howard COUNTY NO.: 19-30314 OEP SIGNATURE: [Signature] STATE HEALTH INSERT S: 07-30-86 DATE ISSUED: 013086 CO SIGNATURE: [Signature] EXP. DATE: 07-30-86 NORTH GRID: 533000 EAST GRID: 0816000	
APPROXIMATE DEPTH OF WELL: 300 FEET APPROXIMATE DIAMETER OF WELL: 6 INCH		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: <div style="border: 1px solid black; padding: 5px; display: inline-block;"> E 810 6 N 530 3 </div>	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jettied & DRIVEN <input type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCUSsion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT <input type="checkbox"/> 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 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 checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE): 40-81-1331		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER: G A P FORCE: SA WRITE INITIALS IN BOX: SA PERMIT No.: 40-81-1331	
SPECIAL CONDITIONS			

2/3/86

H₂O sample taken 12pm CH9616

51 ft casing

45 ft open hole

11 bags cement

grouting completed prior to
arrival

location as per field sitting

(10)