

8/21/84
12:10 p.m.
final 4:00 p.m.

Approved 8/21/84
Stager

PERMIT

P 34244

A 29658

SEWAGE DISPOSAL

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY
DISTRICT 3rd

INDEX

03-308243

DATE 8/20/84

Arnold Septic Tank Service IS PERMITTED TO INSTALL X ALTER

ADDRESS Jacobs Road, Mt. Airy, Maryland 21771 PHONE 795-7873

SUBDIVISION Slack Estates ROAD 2045 St. James Road LOT 7

PROPERTY OWNER Robert L. Bennett, Inc. McDonald

ADDRESS 890 River Road
Sykesville, Maryland 21784

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 - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 feet below original grade with 6 feet of stone below distribution pipe. LOCATION: Start the trench 160 feet from the front lot line and 100 feet from the left side line, as seen when facing the lot from St. James Road. Continue to dig the trench on level ground running towards the left front side of the lot. For a 4 bedroom house, 106 linear feet of trench (One trench is O.K.). NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Frank Skinner DATE 8/20/84

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.

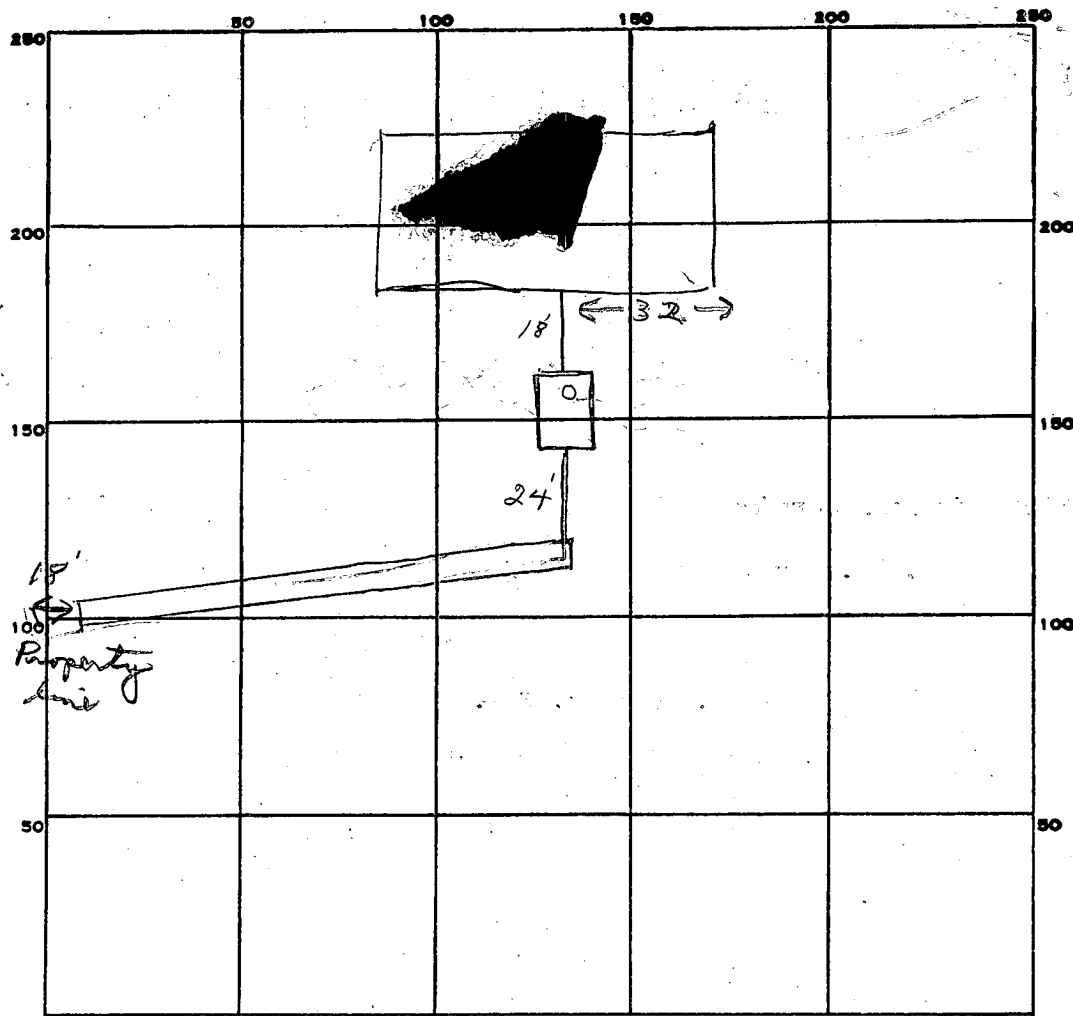
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 29658



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

ST. James Rd.

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1250 gal CLEANOUTS ST
✓

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 106 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 636

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

ABSORBENT AREA 636 SQ. FT.

REMARKS 8/21/84 OK to add stone in trench JS
8/21/84 OK to cover all work JS

DATE SYSTEM APPROVED 8/21/84 INSPECTOR Stager

APPLICATION

29658

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESP.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330*Specs on Separate Sheet*DISTRICT 3rd.DATE 9/22/80TO: 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 ~~Slack Property~~ Robert L. Bennett Inc
ADDRESS 890 River Road Mr. Young, Security Develop-
Sykesville Md PHONE ment - 465-4244
21784 442-1270

PROPERTY LOCATION:

SUBDIVISION Slack Estates LOT NO. 7ROAD AND DESCRIPTION Route 99 2045 St. James RoadSIZE OF LOT 3 acres m/l TYPE BLDG. 4B.R. per B.P. 58142
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 _____

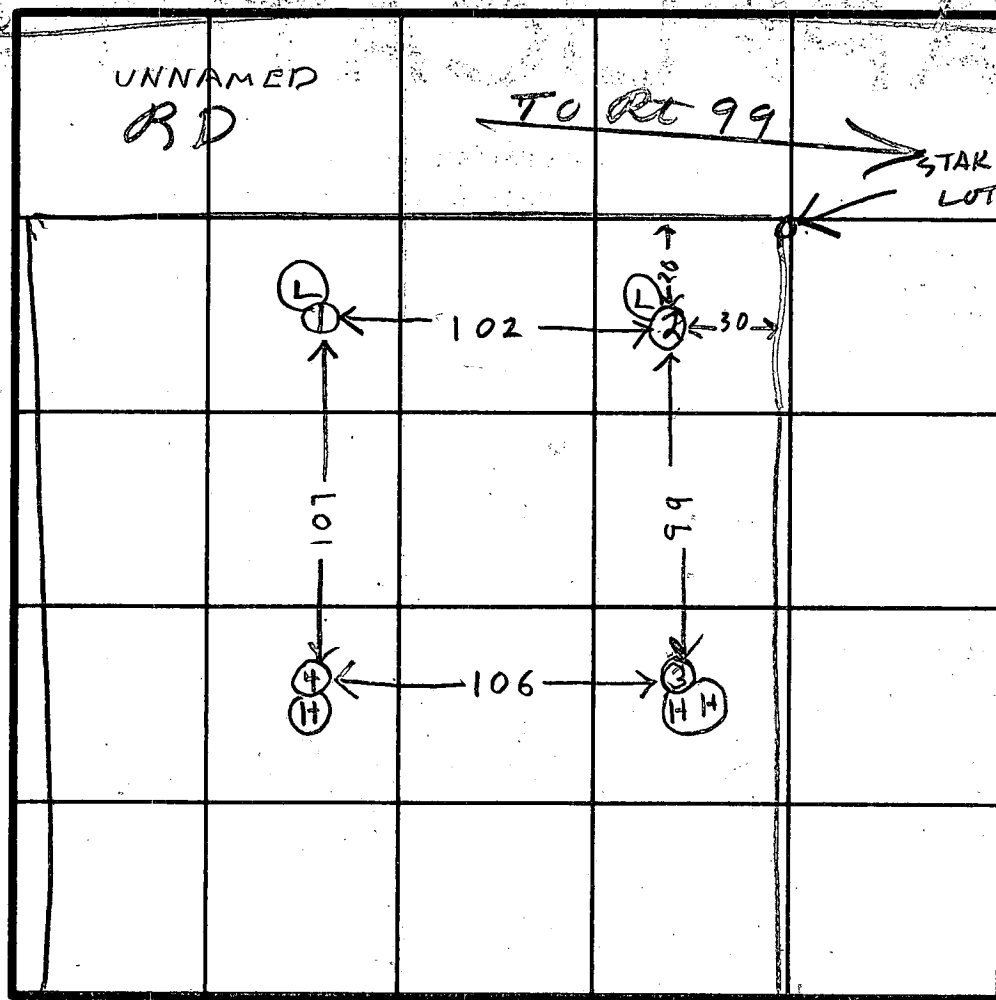
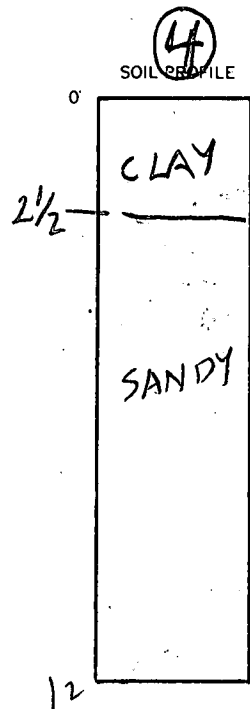
APPROVED BY Raymond Hodges FOR Dry Well DATE 12/18/80

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 9/24/80 Perc test Hold for Certified Plat R/H
12/17/80 FS send OK for Hc To sign 12/1/80 Certified
Hold Plat has been signed R/H BLDG. PERMIT SIGNED
AND RETURNED 3/28/84
Serial #58142 SFRD.**THIS IS NOT A PERMIT**

Lot 7



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/24/80	1 S	5	200	206	206	217	11
	1 D	13	200	202	202	206	4
	2 D	13 1/2	209	212	212	216	4
	2 S	3 1/2	212	225	225	250	25
	3 D	12 1/2	221	222	222	228	6
	3 S	3 1/2	221	222	222	224	2
9/24/80	4 V	12	SEE SOIL PROFILE				

Artime

9 min

max

Depth

3 1/2 ft

REMARKS

TYPE OF SOIL

TESTED BY

B. HODGES

ALSO PRESENT

SCILISSOR BACK HOE

APPLICATION

29658

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

DISTRICT 3rd.DATE 9/22/80

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 Slack Property

ADDRESS _____

Mr. Young, Security Develop-
ment - 465-4244

PROPERTY LOCATION:

SUBDIVISION _____

LOT NO. 7ROAD AND DESCRIPTION Route 99SIZE OF LOT 3 acres m/lTYPE 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 _____

APPROVED BY _____ FOR _____ DATE _____

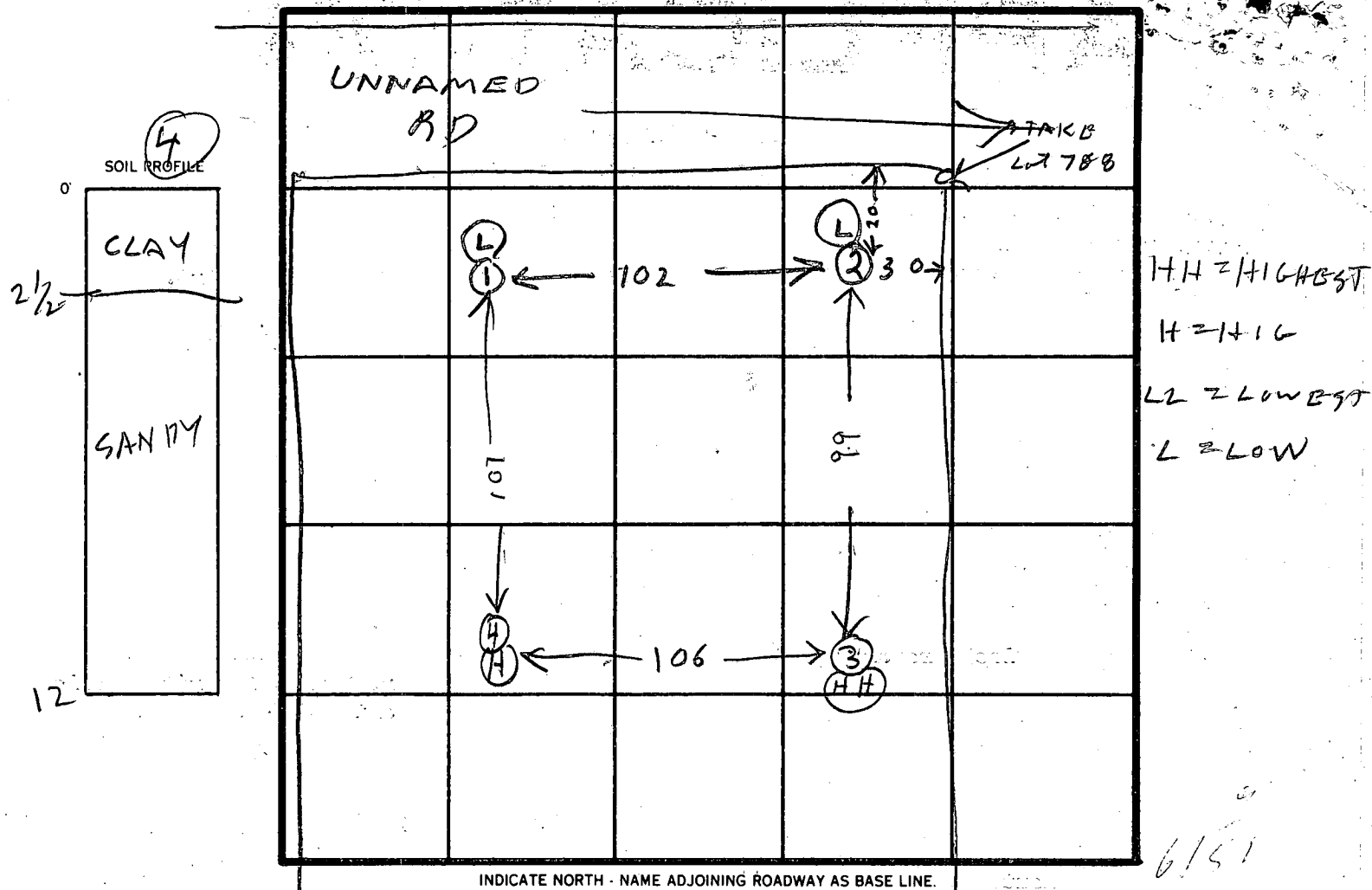
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING

9/24/80 Per State Hold for Caltrans Plot R/H

THIS IS NOT A PERMIT



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 29658

P _____

DISTRICT 3rd

DATE 4/3/79

*Unbuildable
change in lot lines
from original perc*

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 Slack Property

ADDRESS _____ PHONE Mr. Young, Security Develop-
ment - 465-4244

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. (#8 see #7 perc sheet)

ROAD AND DESCRIPTION Route 99

SIZE OF LOT 3 acres m/1 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/ Stewart Young for Security Development

APPROVED BY _____ FOR _____ DATE _____

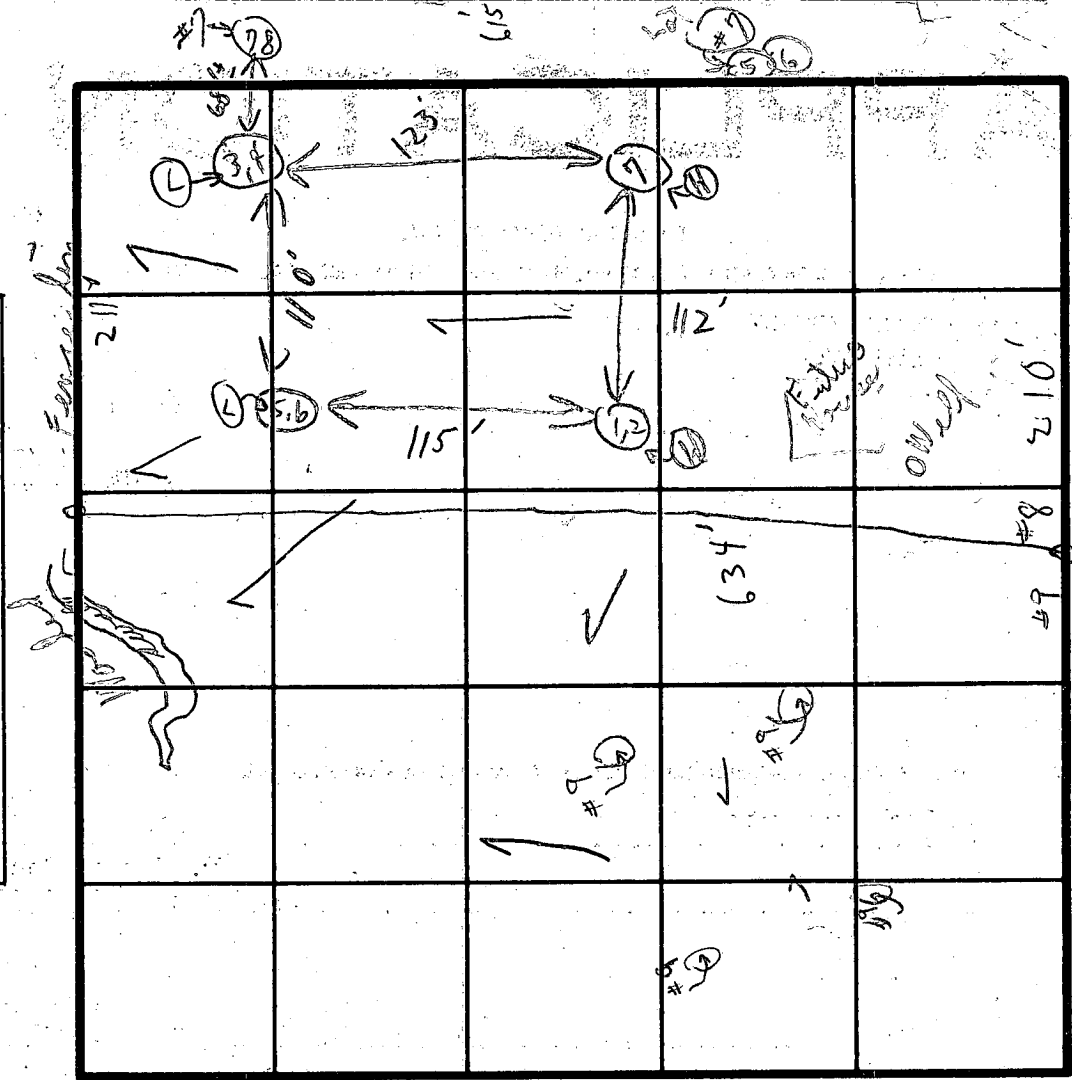
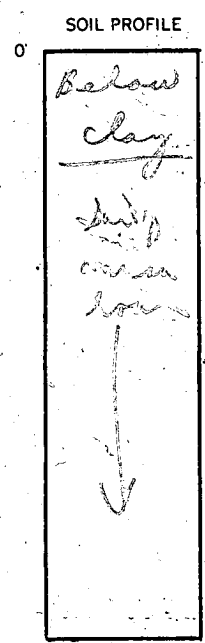
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING (#8 Unbuildable)
{ per plat }

THIS IS NOT A PERMIT

Feb 28
Text per
— strike



Unnamed Road

211 → C

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/18/79	1	3 1/2'	12:37	12:38	12:38	12:40	2 min
	(M) 2	12'	12:37	12:40	12:40	12:45	5 min
	3	3'	10:45	10:46	10:46	10:47	1 min
	(L) 4	13 1/2'	10:45	10:47	10:47 ^{ant}	10:48	1 1/2 min
	5	3'	10:53	10:54	10:54	10:56	1 1/2 min
	(L) 6	12 1/2'	10:52	10:54	10:54	10:59	5 min
	(R) 7	4-4 1/2' 11 1/2'	V	wash	sample	by min	in

Orig. Times
B. men

loam

REMARKS Tests in open field

TYPE OF SOIL: CLAY

TESTED BY C. D. S. ALSO PRESENT J. P. Mc...

ALSO PRESENT P. H. Chandler

TAX MAP 9 , ^{PART OF} PARCEL 24

THE LOT SHOWN HEREON

COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
HOWARD COUNTY HEALTH DEPT.

Joelyn Byrd
COUNTY HEALTH OFFICER

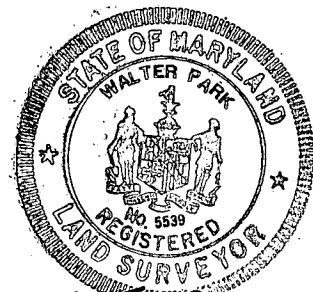
12-18-80
DATE

* DESIGNATES FIELD-LOCATED PERC HOLES


572- DESIGNATES CONTOURS FROM FIELD-RUN TOPOGRAPHY

FIELD LOCATED PERC HOLES

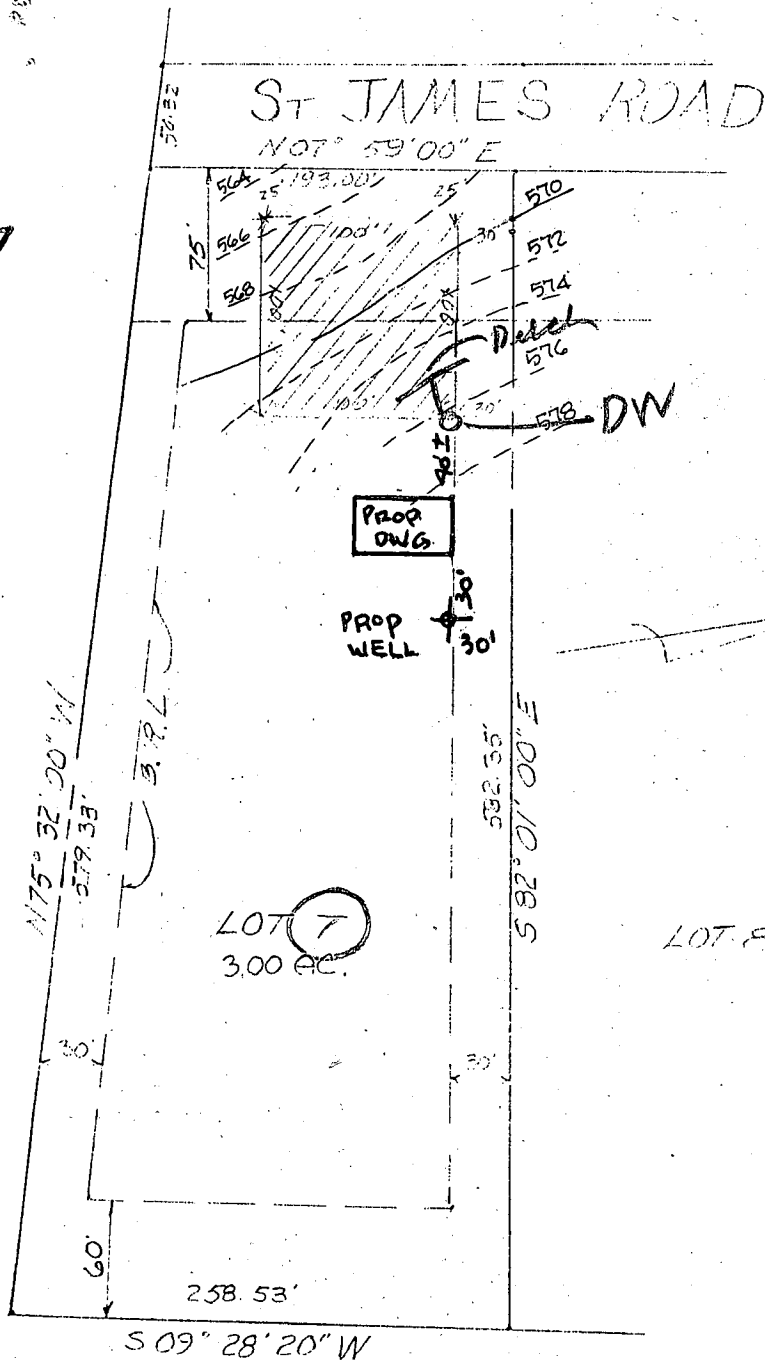
LOT 7 SLACK ESTATES
3rd ELECTION DISTRICT
HOWARD COUNTY MARYLAND
SCALE: 1"=100' 25 SEPT. '80



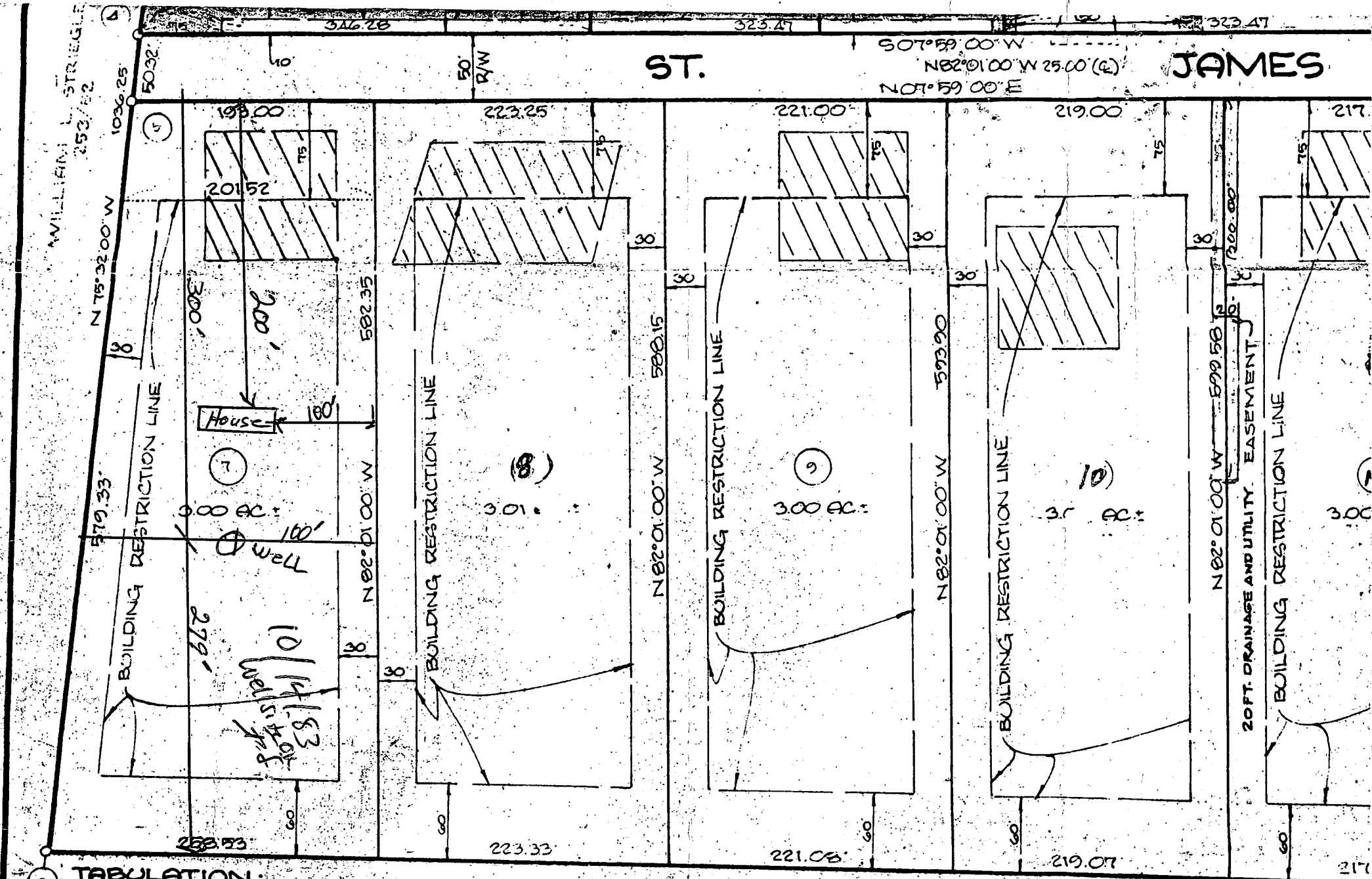
Walter Park

NOTE:  THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 sq' AS REQUIRED BY THE MD. STATE HEALTH & MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE & SERVICING ANY RESIDENTIAL STRUCTURE LOCATED ON THIS BUILDING SITE. THIS EASEMENT SHALL BECOME NULL & VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.

HUDKINS ASSOCIATES, INC.
231 JOSEPH SQUARE
COLUMBIA, MARYLAND 21044



Lot # 7
St James Rd
Shack Estate



TABULATION: (1) TOTAL NO. LOTS TO BE RECORDED: 15 (2) TOTAL AREA OF LOTS: 43.08 AC.	(3) TOTAL AREA ROADWAY TO BE RECORDED: 2.271 AC. (4) TOTAL AREA ROAD DEDICATION: 1.500 AC.	(5) TOTAL AREA SUBDIVISION TO BE RECORDED: 48.821 AC.
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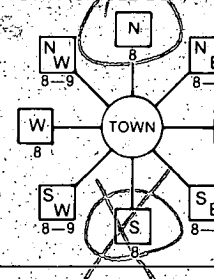
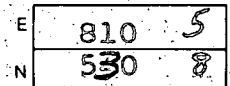
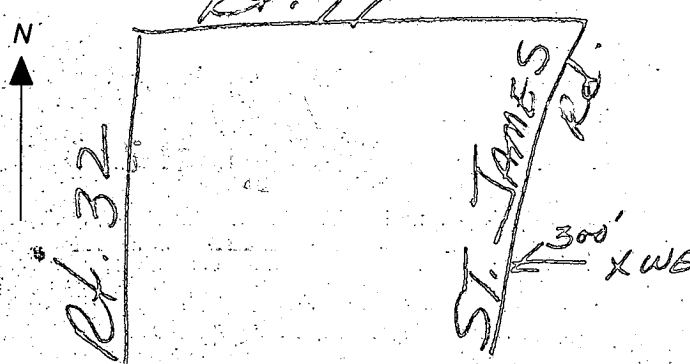
APPROVED: FOR PRIVATE WATER & PRIVATE SEWERAGE SYSTEMS: HOWARD COUNTY HEALTH DEPARTMENT.

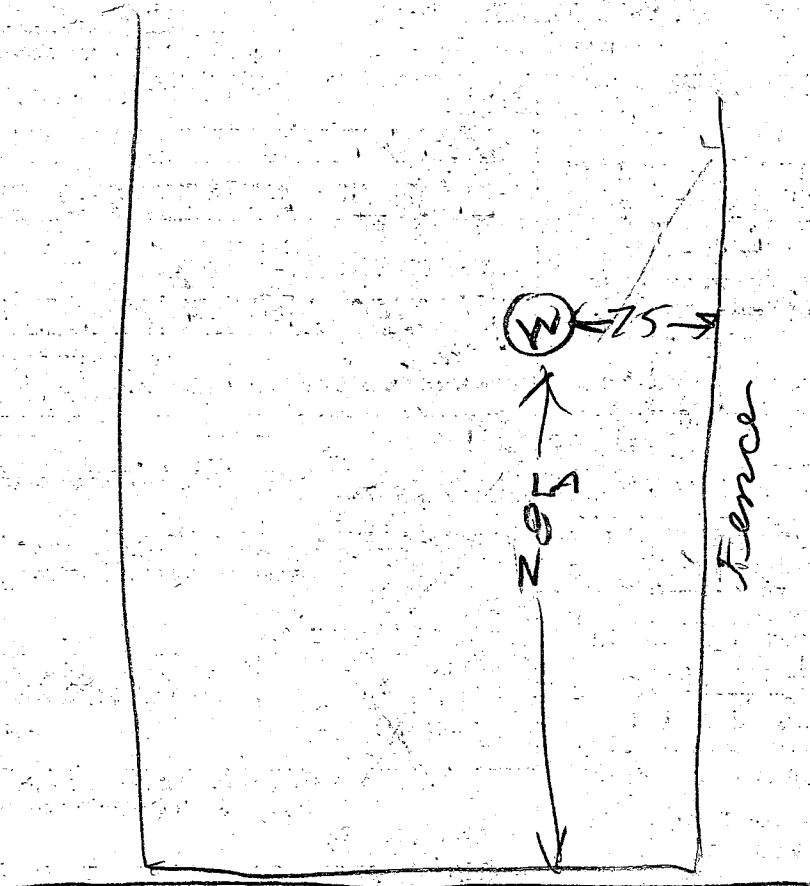
John H. Boyd, M.D. Asst. P.H. 11-5-80

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT, THAT IT IS A SUBDIVISION OF PART OF THE LAND WHICH, BY DEED DATED MARCH 5, 1970 & RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY IN LIBER 527, VOL 10, P. 214, WAS SAID TO BE

IF GEL HEREIN PLAT REST

B 1 7559 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-0298 <small>fill in this form completely</small>
Date Received 9:00 AM 11/2/83 100483 OWNER INFORMATION BENNETT ROY INC. 15 Last Name 34 1526 S WESTERN BLVD. 36 Street or RFD 55 BALTIMORE MD 21227 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL HOWARD 8 COUNTY 21 SLACK ESTATES 23 SUBDIVISION 42 SECTION 44 46 LOT 7 50 WEST FRIENDSHIP 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 73 76 77 78	
DRILLER INFORMATION Ronald L. Kyker 296 Driller's Name 77 License No. 80 Westminster Rotary Well Drilling, Inc. Firm Name Box #861, Westminster, Md, 21157 Address Ronald L. Kyker 11/2/83 Signature Date		B 4 St. James 11 NEAR WHAT ROAD 30 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH W 32 E WEST SOUTH 34 300 37 DISTANCE FROM ROAD ENTER FT or MI E7 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED 550 14 20 (GAL. PER DAY)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A29658 COUNTY NAME COUNTY NO. OEP SIGNATURE Frank Shinn 4/14/84 DATE ISSUED 41 01483 43 CO SIGNATURE EXP. DATE NORTH GRID 538000 50 55 EAST GRID 0815000 57 63	
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)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. City 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE 	
APPROXIMATE DEPTH OF WELL 400 24 28 FEET APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> 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 <input type="checkbox"/> THIS WELL WILL DEEPEMED 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 (OEP USE ONLY)			
APPROX. PERMIT NUMBER 40-81-0298 54 63 FORCE FS WRITE INITIALS IN BOX PERMIT NO. 40-81-0298 67 68 70 71 72 73 74 76 77 78 79			
SPECIAL CONDITIONS			



ST JAMES DR

25
50
750

714
25
570
222
2850

RECEIVED

11/2/83

OCT 3 1983

ENVIRONMENTAL HEALTH
CARROLL CO. HEALTH DEPT.

- ① 42 FT CASING OF GROUND
- ② 37 FT OPEN HOLE
- ③ LOCATION OK
- ④ 18 BAGS
- ⑤ WELL OK

2 FT

OK

B. Hodges

C1 0823	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.
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS		COUNTY NUMBER A29658	PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-81-0298
DATE Received 110283	DATE WELL COMPLETED 110283	Depth of Well 22 205 26 (TO NEAREST FOOT)	

OWNER Bennett Roy Inc.	last name	first name	TOWN West Friendship
STREET OR RD. St. James Road			
SUBDIVISION Slack Estates	SECTION	LOT 7	

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 3	
Soft Brown Mica	3 37	
Soft Brown Mica	37 38	X
Hard Blue "	38 49	
Brown Mica	49 50	X
Blue Mica	50 61	
Brown Mica	61 62	X
Blue Mica	62 205	

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 18	NO. OF POUNDS 1692
GALLONS OF WATER 108	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 4 1 ft.	
(enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below		
ST	CO	
STEEL	CONCRETE	
PL	OT	
PLASTIC	OTHER	
MAIN CASING TYPE		
ST	6	4 3
60 61	63 64	65 66 67 68 69 70
Nominal diameter top (main) casing (nearest inch)		Total depth of main casing (nearest foot)

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

SCREEN RECORD		
screen type or open hole insert appropriate code below		
ST	BR	HO
STEEL	BRASS	OPEN HOLE
PL	OT	
PLASTIC	OTHER	

C2				
DEPTH (nearest ft.)				
4 3	2 0 5			
8 9 11 15 17 21				
23	26	30	32	36
23 24 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				
SLOT SIZE 1 2 3				
DIAMETER OF SCREEN (NEAREST INCH)				
from to				

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. 296
DRILLERS SIGNATURE Ronald L. Kyker
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

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

C3		
PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	9 2	
METHOD USED TO MEASURE PUMPING RATE Submersible		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	4 0	
WHEN PUMPING	7 4	
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	
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: 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	31
PUMP HORSE POWER	37
PUMP COLUMN LENGTH (nearest ft.)	43
CASING HEIGHT (circle appropriate box and enter casing height)	+ above
LAND SURFACE	2 (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)	
St. James	

