

C 1	7868	SEQUENCE NO. (MDE 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 <u>P 46126</u>		
ST/CO USE ONLY DATE RECEIVED		DATE WELL COMPLETED <u>1/22/96</u>		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>H0-94-0961</u>		

OWNER <u>DIXON</u>	STREET OR RFD <u>691 ROUTE 32</u>	TOWN <u>SYKESVILLE</u>
SUBDIVISION <u>TAX MAP 4 PARCEL 21/26</u>	SECTION <u>4</u>	LOT <u>10</u>

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	
Brown Shale	2 10	
Brown Rock	10 45	
Blue Rock	45 70	
Brown Rock	70 72	✓
Blue Rock	72 100	
Flint	100 102	✓
Blue Rock	102 125	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
yes	no
<input checked="" type="checkbox"/>	<input type="checkbox"/>
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT <input checked="" type="checkbox"/>	BENTONITE CLAY <input type="checkbox"/>
NO. OF BAGS <u>12</u>	NO. OF POUNDS <u>1128</u>
GALLONS OF WATER <u>72</u>	
DEPTH OF GROUT SEAL (to nearest foot)	
from <u>0</u> ft.	to <u>45</u> ft.

CASING RECORD	
casing types insert appropriate code below	
STEEL <input type="checkbox"/>	CONCRETE <input type="checkbox"/>
PLASTIC <input type="checkbox"/>	OTHER <input type="checkbox"/>
MAIN CASING TYPE	
Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
<u>PC</u>	<u>49</u>

OTHER CASING (if used)	
diameter inch	depth (feet) from to
<u> </u>	<u> </u>

SCREEN RECORD	
screen type or open hole insert appropriate code below	
STEEL <input type="checkbox"/>	BRASS BRONZE <input type="checkbox"/>
PLASTIC <input type="checkbox"/>	OPEN HOLE <input type="checkbox"/>
OTHER <input type="checkbox"/>	

NUMBER OF UNSUCCESSFUL WELLS: <u> </u>
WELL HYDROFRACTURED <input checked="" type="checkbox"/>

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.

TYPE: MWD/MSD/MGD
DRILLERS LIC. NO. <u>081</u>

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. <u> </u>

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

C 2	
DEPTH (nearest ft.)	
<u>45</u>	<u>125</u>
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
<u> </u>	<u> </u>

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68
<input type="checkbox"/>

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)				
T (E.R.O.S.)				
W Q				
70 <input type="checkbox"/>	72 <input type="checkbox"/>	74 <input type="checkbox"/>	75 <input type="checkbox"/>	76 <input type="checkbox"/>
TELESCOPE CASING	LOG INDICATOR	OTHER DATA		

C 3		
PUMPING TEST		
HOURS PUMPED (nearest hour)	<u>3</u>	
PUMPING RATE (gal. per min.)	<u>8</u>	
METHOD USED TO MEASURE PUMPING RATE <u>Bucket</u>		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	<u>17</u> ft.	
WHEN PUMPING	<u>125</u> ft.	
TYPE OF PUMP USED (for test)		
<input checked="" type="checkbox"/> air	<input type="checkbox"/> piston	<input type="checkbox"/> turbine
<input type="checkbox"/> centrifugal	<input type="checkbox"/> rotary	<input type="checkbox"/> other (describe below)
<input type="checkbox"/> jet	<input type="checkbox"/> submersible	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (CIRCLE) (YES OR NO)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
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)	<u> </u>
PUMP HORSE POWER	<u> </u>
PUMP COLUMN LENGTH (nearest ft.)	<u> </u>
CASING HEIGHT (circle appropriate box and enter casing height)	<u> </u>
LAND SURFACE (nearest foot)	<u>3</u>

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)		
<u>well 35'</u>	<u>10'</u>	House

LEGEND

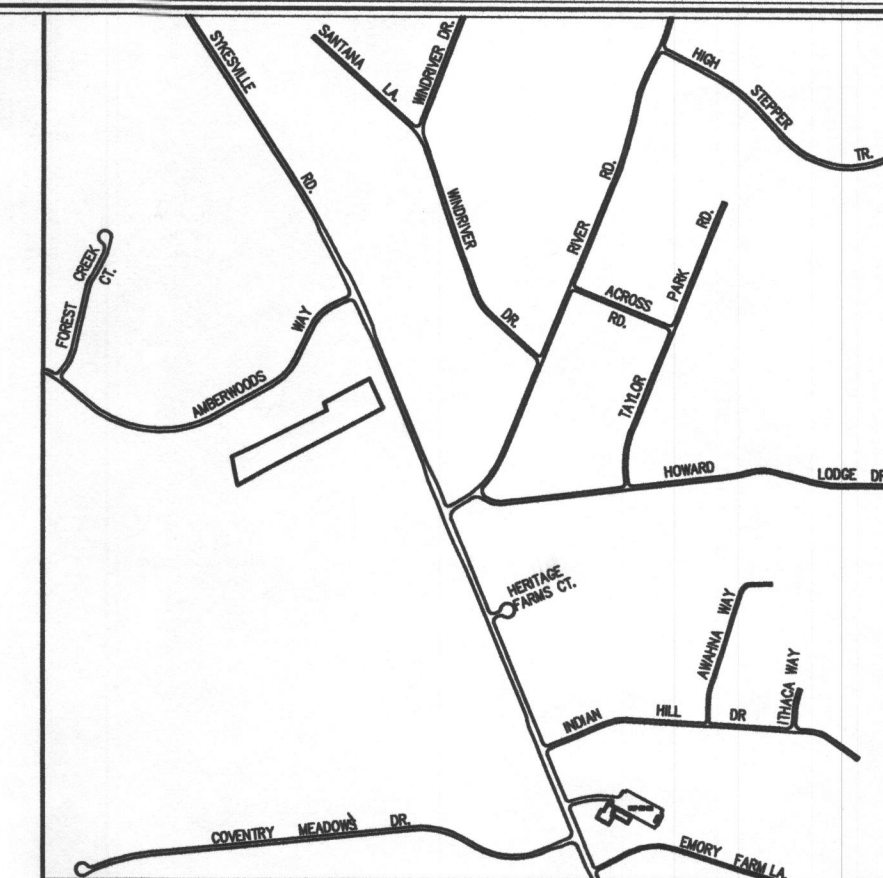
- EXISTING 2' CONTOURS
- EXISTING 10' CONTOURS
- EXISTING TREE LINE
- GLB2 MLC2 SOIL LINES AND TYPES
- ⊙ DENOTES PROPOSED WELL
- ⊗ DENOTES FAILED PERC
- DENOTES PASSED PERC
- ⊠ DENOTES PROPOSED HOUSE
- ▨ DENOTES 15%-24.9% SLOPES
- ▩ DENOTES 25% AND GREATER SLOPE
- ⊞ DENOTES 1500 Sq.Ft. ALTERNATE WELL SITE

SOILS LEGEND

SOIL	NAME	CLASS
BaA	Baile silt loam, 0 to 3 percent slopes	D
GgB	Glenelg loam, 3 to 8 percent slopes	B
GgC	Glenelg loam, 8 to 15 percent slopes	B
GmA	Glenville silt loam, 0 to 3 percent slopes	C
MaC	Manor loam, 8 to 15 percent slopes	B

NOTES:

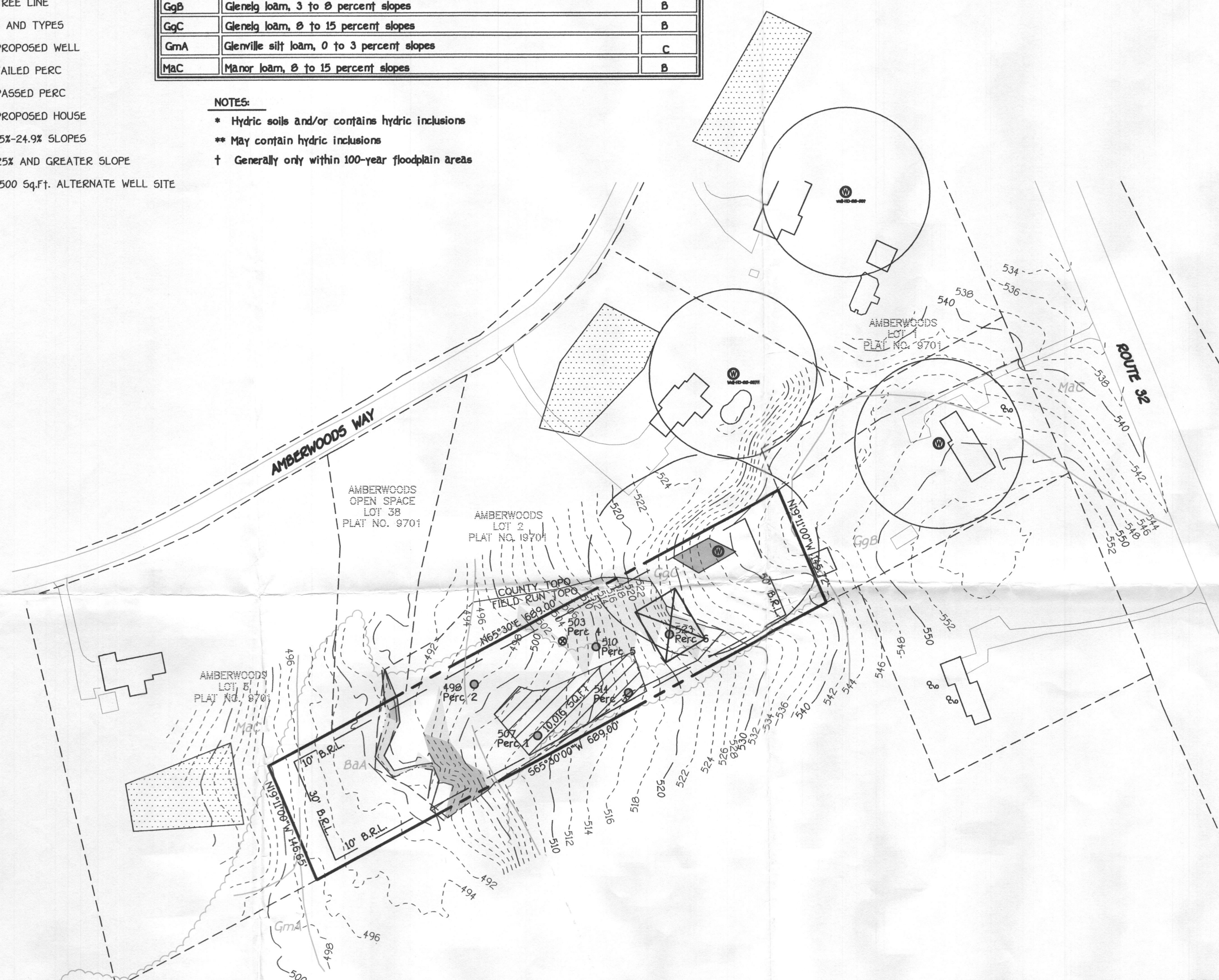
- * Hydric soils and/or contains hydric inclusions
- ** May contain hydric inclusions
- † Generally only within 100-year floodplain areas



VICINITY MAP
SCALE : 1" = 1200'

GENERAL NOTES:

- THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
- PERCOLATION TESTS CONDUCTED ON FEBRUARY 3, 1999 ARE NOT SHOWN AS THEIR EXACT LOCATIONS ARE NOT DETECTABLE. THE RESULTS OF THOSE TESTS INDICATED UNSUITABLE SOIL CONDITIONS FOR WASTEWATER DISPOSAL ON THE NORTHEAST END OF PARCEL II.
- THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
- EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM ALL REASONABLE EFFORTS.
- ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
- THE WELL SHALL BE DRILLED PRIOR TO BUILDING PERMIT APPROVAL.
- TOPOGRAPHY SHOWN IS FROM HOWARD COUNTY GIS TOPOGRAPHY AT 2' CONTOUR INTERVAL AND FIELD RUN WHERE INDICATED.
- BOUNDARY OUTLINE BASED ON AVAILABLE DEED OF RECORD WITHOUT THE BENEFIT OF A FIELD SURVEY AT THIS TIME.
- ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERC CERTIFICATION PLAN
- DEED REFERENCE LIBER 2221 FOLIO 626.



OWNER

ROSE AND DAVE EIDE ALTMAN
1140 ROUTE 32
SYKESVILLE MD, 21704

APPLICANT

RONALD CARTER, C & M PARTNERSHIP
1750 DAISY ROAD
WOODBINE, MARYLAND 21797-0414
(410) 442-1045

PERC CERTIFICATION

I certify that the locations shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.

Signature of Professional Land Surveyor
Terrell A. Fisher, Professional Land Surveyor No. 10692

2/24/09
Date

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.

Barbara for Peter Brilman
COUNTY HEALTH OFFICER

3/13/2009
DATE

PERC CERTIFICATION PLAT
1140 ROUTE 32

PARCEL II

TAX MAP *9

A529512

PARCEL: 96

3RD ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

SCALE: 1"=100'

DATE: FEBRUARY 24, 2009

FISHER, COLLINS & CARTER, INC.
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