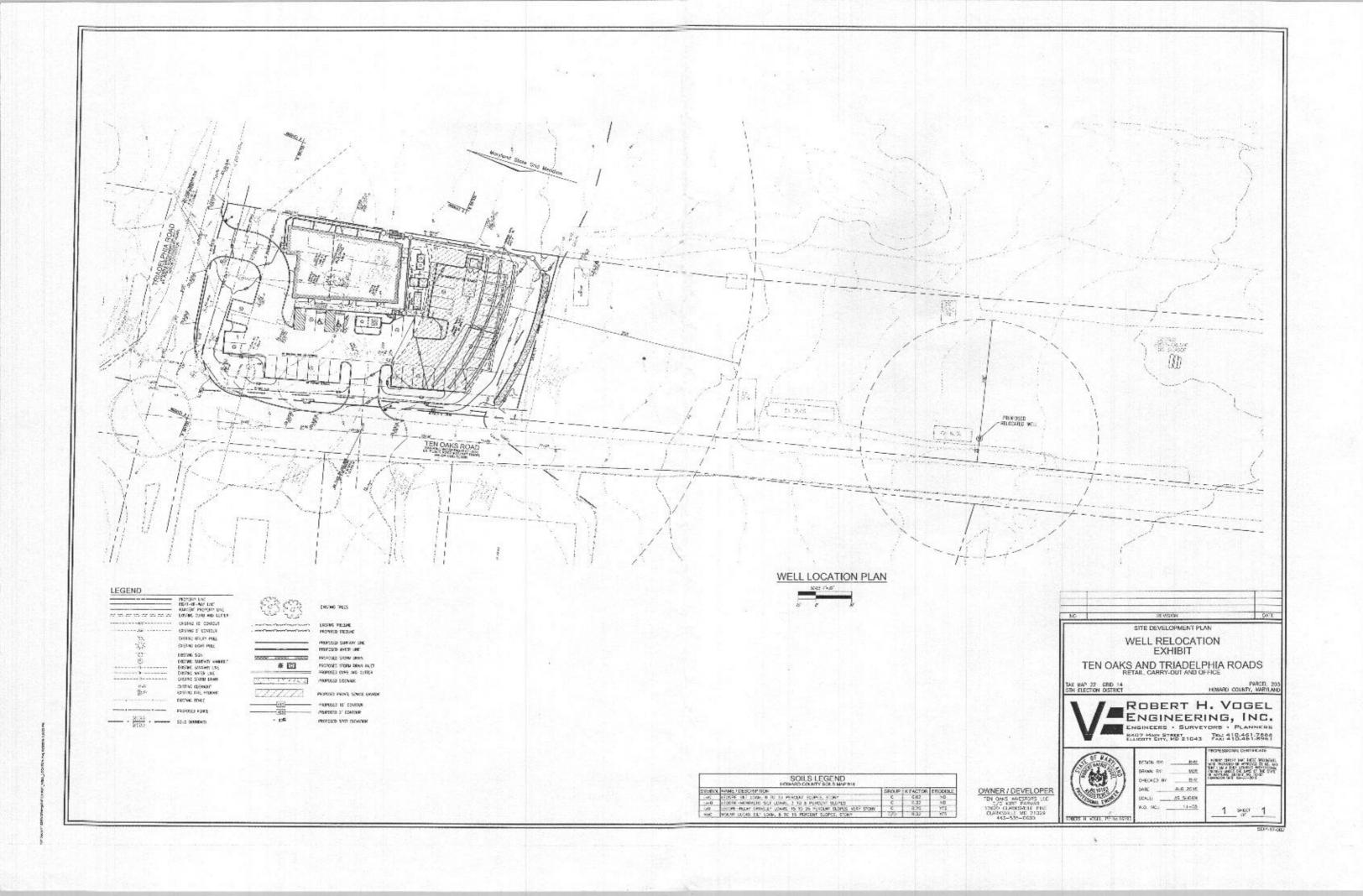
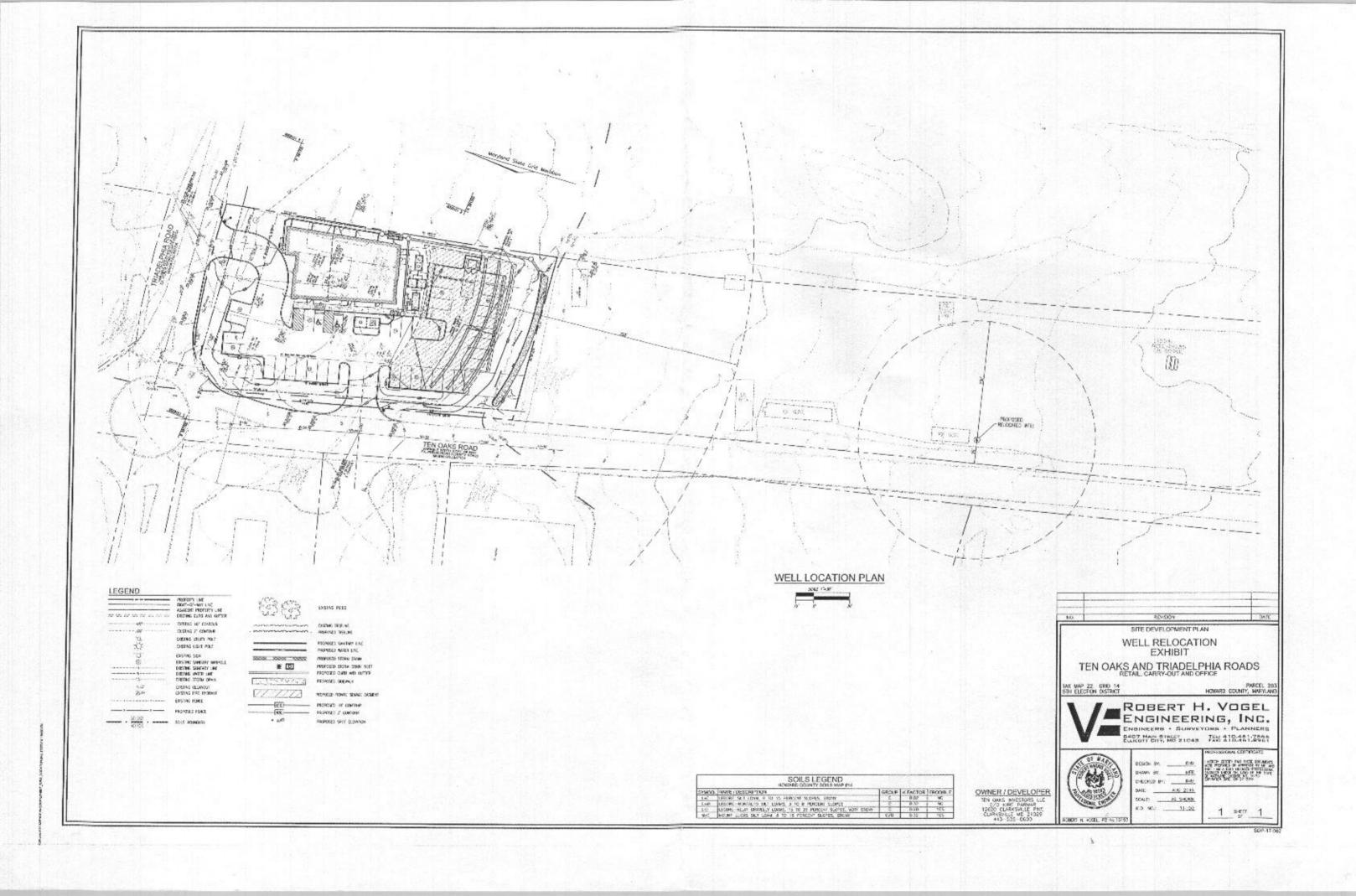


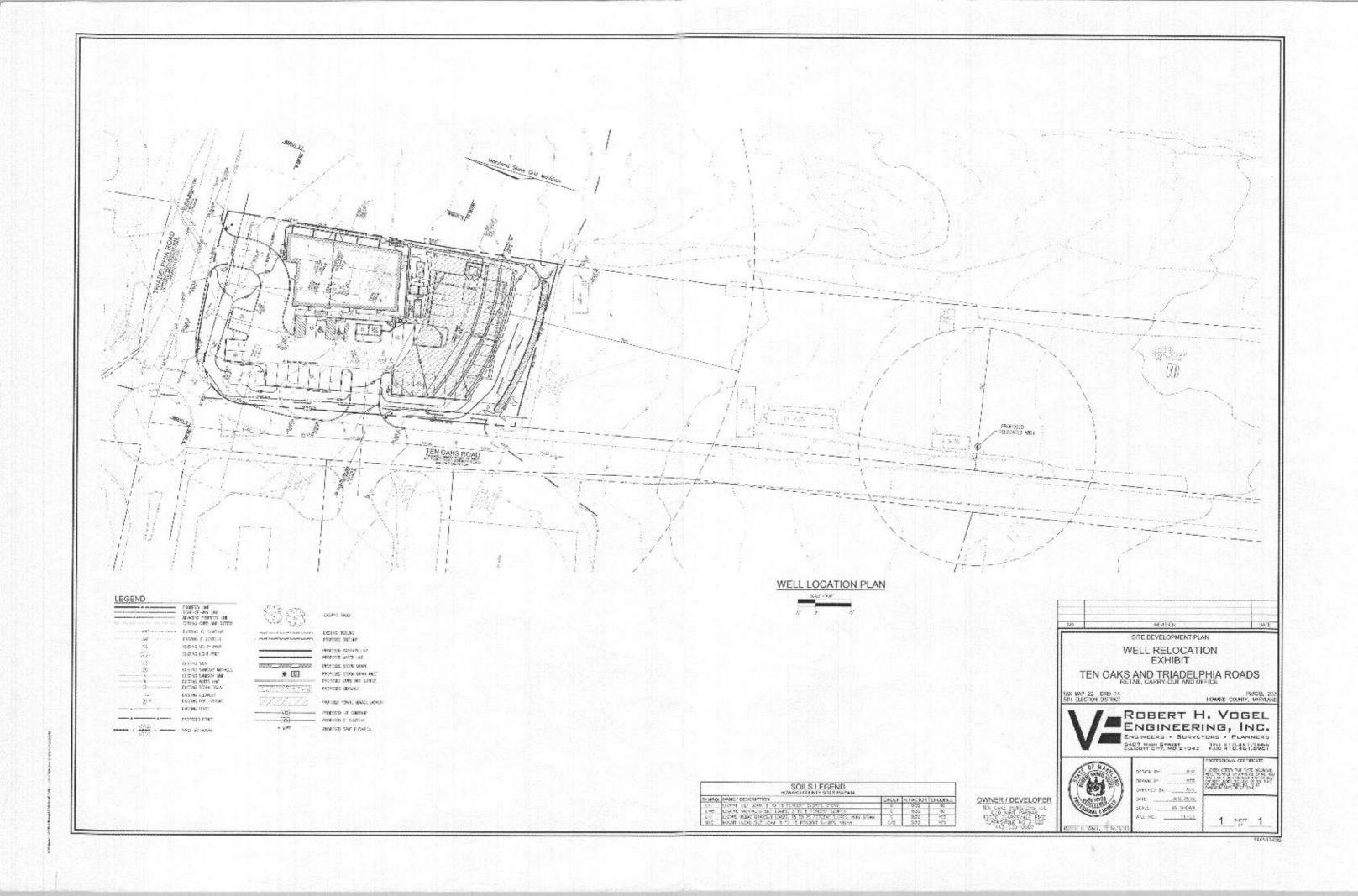
B 1 37526 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER
(MIDE USE OINLY)		MARTLAND ERMIT TO DRILL WELL	110 17 2200
1 2 3 6		se type	HO - 17 - 0290
	001102		fill in this form completely
Date Received (PA)	13262	B 3 Howard	LOCATION OF WELLCC#
8 MM DD YY			J
KIRIT	ARMAR	8 COUNTY	21
15 Last Name Owner	First Name 34	OO CURDINICION	
12620 CLARKSVILLE PIKE		23 SUBDIVISION	42
Street or RFD CLARKSVILLE MD 21029	55	SECTION 44 46	LOT 48 50
<b>\</b>	70 71 70	Dayton	
57 Town 70 State	72 Zip 76	52 NEAREST TOWN	71
DRILLER INFORMATION George F. Easterday	W 040		
Driller's Name	M D 76 License No. 81	B 4	
L. Franklin Easterday, Inc.		SOURCES OF DRILLING WATER	4105 Ten Oaks Road
Firm Name		1. wells	11 STREET ADDRESS 30
9265 Brown Church Rd., Mt.	AIN, I	2.	ON WHICH SIDE OF ROAD NORTH
Address	91,000	3.	(CIRCLE APPROPRIATE BOX)
Dlarge F. Chrtenly			20
Signature	Date		DISTANCE FROM ROAD
B 2 WELL INFORMATION APPROX. PUMPING RATE	10		ENTER FT OR MI 38 39
(GAL. PER MIN.)	8 500 12		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14	100 1		TAX MAP: 22 BLK: 14 PARCEL 163
USE FOR WATER (CIRCLE A	1	NOT TO	BE FILLED IN BY DRILLER
D DOMESTIC POTABLE SUPPLY & RESID		HEALTH	H DEPARTMENT APPROVAL
IRRIGATION	11	RI.	
F FARMING (LIVESTOCK WATERING & AC	GRICULTURAL	LAHOWAYCA DUNTY NAME	COUNTY NO.
INDUSTRIAL COMMEDCIAL DEWATER	RING	STATE	INCEPT 6
P PUBLIC WATER SUPPLY WELL		SIGNATURE	INSERT S 41
T TEST, OBSERVATION, MONITORING		1 48	Sul- Cll: 5/17/19
O OPEN LOOP GEOTHERMAL		43 MM YY 48	CO SIGNATURE EXP. DATE
C CLOSED LOOP GEOTHERMAL		Don't play 18	DOY:
300	)		ED LOCATION OF WELL ON LOT ICTURES SUCH AS BUILDINGS, SEPTIC SYSTEM,
APPROXIMATE DEPTH OF WELL 24	J FEET		MARKS AND INDICATE NOT LESS THAN TWO
APPROXIMATE DIAMETER OF WELL	6 NEAREST	7 24 20 8 18	MEASUREMENTS TO WELL
	- INCIT	101	<b>H</b>
METHOD OF DRILLING	G (circle one)	einell his let	DAYTON \20
BORED (or Augered) JETTED	Jetted & DRIVEN	11/1	32
AIR-ROTary AIR-PERcussion	ROTARY (Hydraulic Rotary)	1	-11
CABLE REVerse-ROTary	DRive-POINT	1	Trindelphia Roll
other		1	
REPLACEMENT OR DEEP			130,
(CIRCLE APPROPRIATION )  HIS WELL WILL NOT REPLACE AN EXIS			1
THIS WELL WILL BEDLACE A WELL THAT			18
ABANDONED AND SEALED			Kent well
39 S THIS WELL WILL REPLACE A WELL THA			3
FOR POLICY ON STANDBY WELLS	TING ACTIONITY		1 2
D THIS WELL WILL DEEPEN AN EXISTING			1 /
PERMIT NUMBER OF WELL TO BE REPLACED (IF AVAILABLE) 41	OR DEEPENED 52	N	E .
			1/18
Not to be filled in by driller (MDE OR	COUNTY USE ONLY)	TOIL	ol oh
APPROP, PERMIT NUMBER	G	11/4/06	elphia. Mil Rd 13K5
	The Thirt Course		
PERMIT No. HO 70 71	$\frac{-17}{72}$ $\frac{-0290}{72}$ $\frac{73}{74}$ $\frac{74}{75}$ $\frac{76}{76}$ $\frac{77}{78}$ $\frac{79}{79}$		
	12 /3 /4 /5 /6 /7 78 79		
SPECIAL CONDITIONS  NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED	- Exicting well	must be sealer	<b>d</b> . <b>⊗</b>

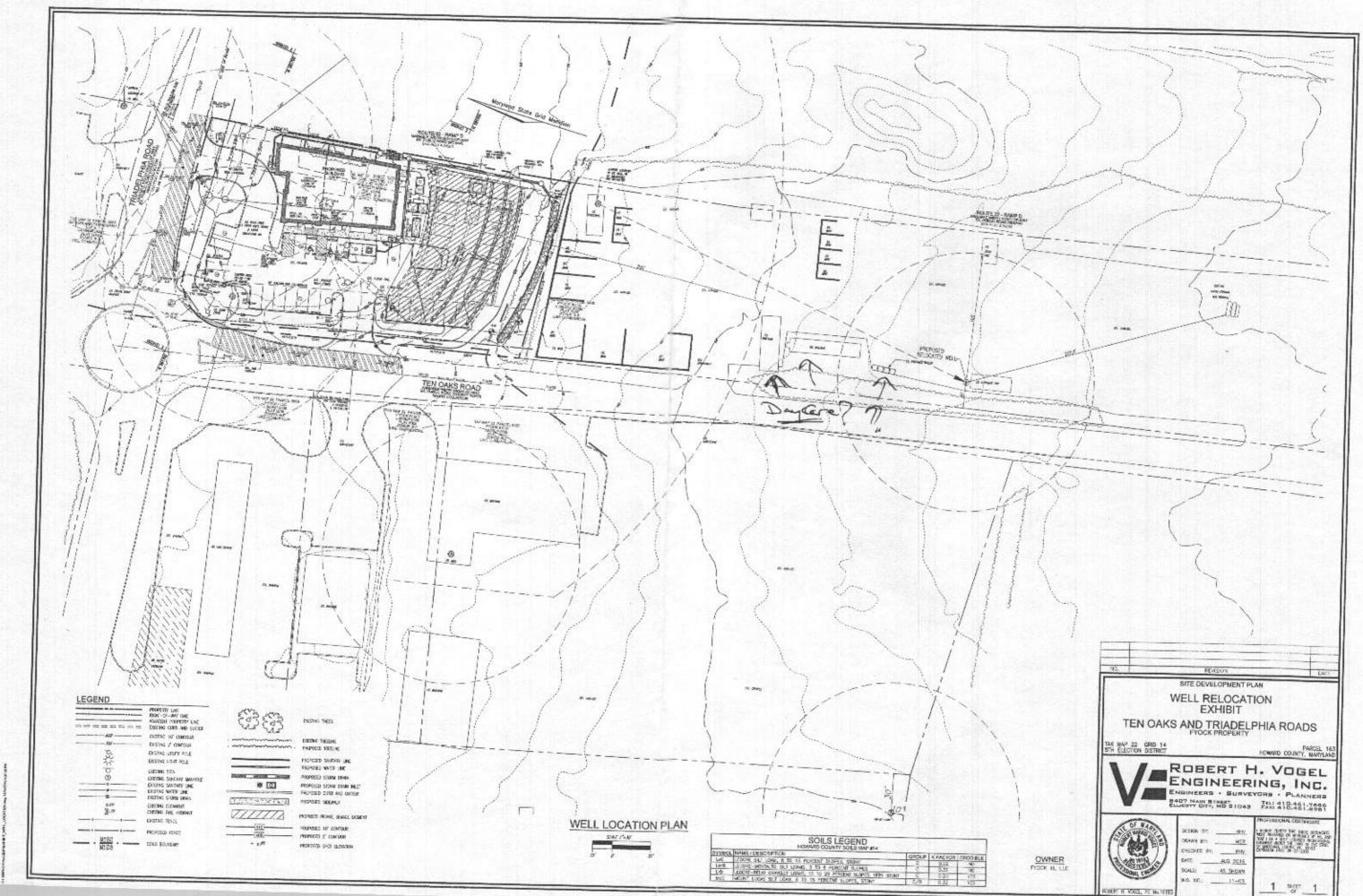
# FILE INQUIRY NOTES

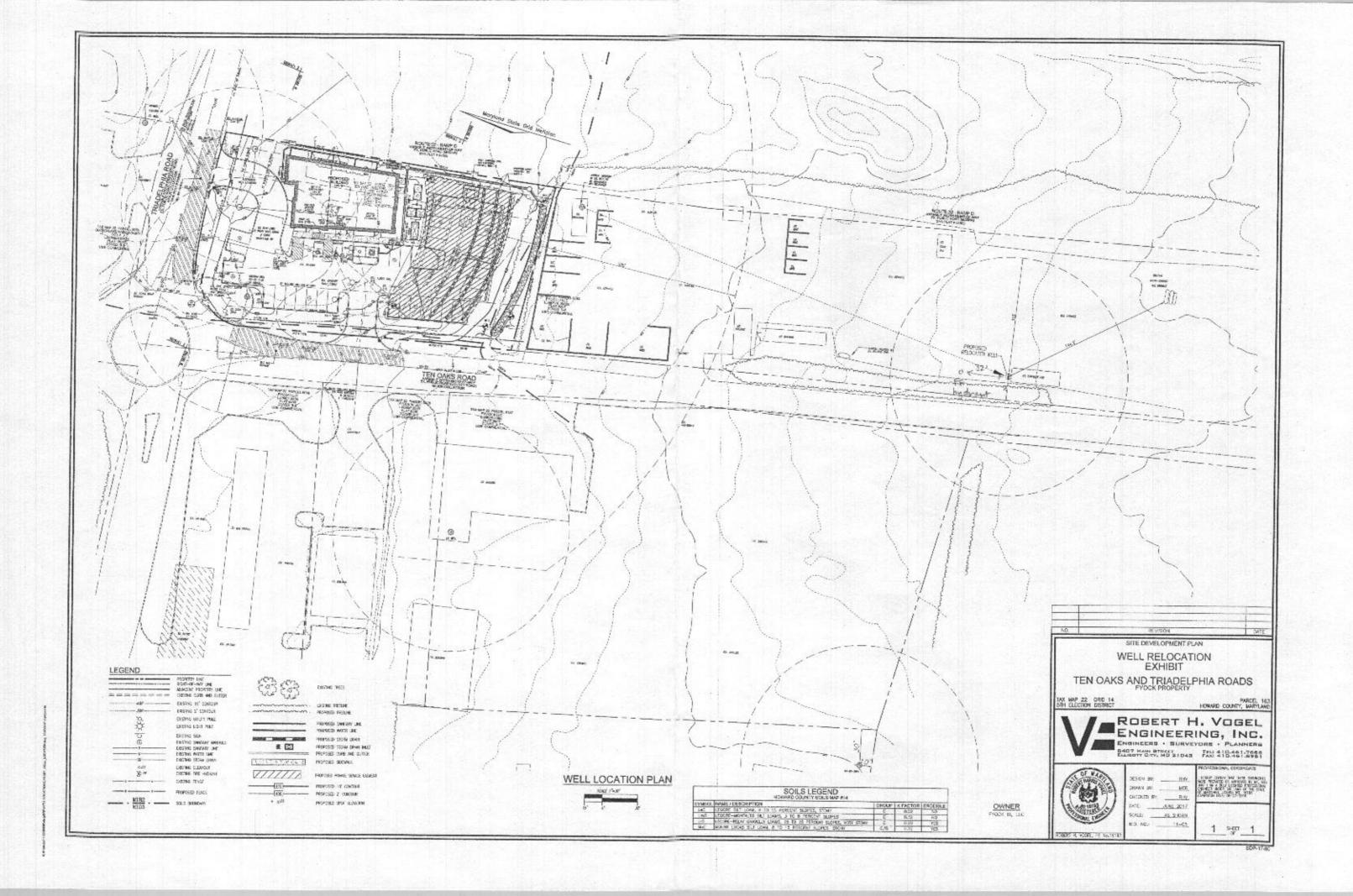
DATE	RESULTS OF REVIEW FOR FILE
1/26/22	Spoke to Easterday said that applicant could not more forward with the well because he was not the property owner.
	Easterday Stated that nothing was drilled by them at this
	property Re
•	
	Mike Eisner - 410-537-3771

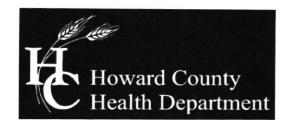












#### Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., Health Officer

### TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:
GIENER PLOED (FYOCK)  Subdivision/Property Name  TM 22/P163  TED ONES Road Name  Road Name
The well site has been staked by
☐ The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.



#### Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep

Dr. Maura J. Rossman, M.D., Health Officer

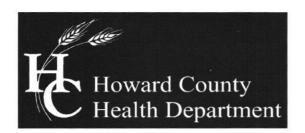
### TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

Well Site Location:
Grenzia Prozo (Frank)  Subdivision/Property Name  To Ones Poso  Road Name
The well site has been staked by (professional land surveyor or company employing professional land surveyors) on (date) and does not require a site inspection.
☐ The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

## FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE	
4/30/18	On site to verify well stake Stake knocked over -	need size
	restaked + protected from buses. (SC)	
		t
		,



#### Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Maura J. Rossman, M.D., Health Officer

### **MEMORANDUM**

TO:

Parmar Kirit

12620 Clarksville Pike Clarksville, MD 21029

FROM:

Sarah Collins, L.E.H.S. SEC

Howard County Health Department

Well and Septic Program

DATE:

September 13, 2016

RE:

Well permit for 4105 Ten Oaks Road

The Health Department received a well permit for a replacement industrial well at 4105 Ten Oaks Road. A site plan with more information is required prior to permit release. Specifically, the following must be included on a revised site plan:

- All wells on the lot <u>including well tag numbers</u>
- All septic components on the lot
- All sewer and water connections between buildings
- All underground utilities

Feel free to contact me at 410-313-6287 or <u>SCollins@howardcountymd.gov</u> with any questions.

Cc: Robert H. Vogel Engineering, Inc.

File



3525 H Ellicott Mills Drive, Ellicott City, MD 21043 (410) 313-2640 Fax (410) 313-2648 TDD (410) 313-2323 Toll Free 1-866-313-6300 website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

### TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new

construction, please indicate one of the following:		
The well site has been staked by EASTERday ( has /	oohed	4
(professional land surveyor or company employing professional land surveyors)	AT	~
on Sept 1, 2016 (date) and does not require a site inspection	1	

☐ The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

4106 Ten Oxks Rd Commericial For Bons WASHIM

& IN parking lot

