10-25-93 TP A 38358 10/26/93 ASAP

04-346548

PERMIT

P 49697

SEWAGE DISPOSAL SYSTEM

A 38358

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th

DATE 10/22/93 ~~08/25/93~~

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXX-XXXX~~ 313-2640

INDEXED

DATE SYSTEM APPROVED 10/26/93

INSPECTOR M. Rifkin

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER ____

580 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Glenwood Springs LOT 11 ROAD 2829 ~~Saddlewood~~ Saddlebred Court

PROPERTY OWNER ~~Mark Rauchard~~ Adele Metter

ADDRESS ____

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 350

TRENCHES - Trench to be 2 feet wide. Inlet 5 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 5 feet below original grade. 3 feet of stone below distribution pipe.

LOCATION - Place the first trench 25 feet off the rear (651.02') lot line and 90 feet off the left lot line as seen when facing the lot from Saddlebred Court. Run trenches on contour toward the front of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/MR 7/22/93

PLANS APROVED BY Sid Abel DATE 5/13/88

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

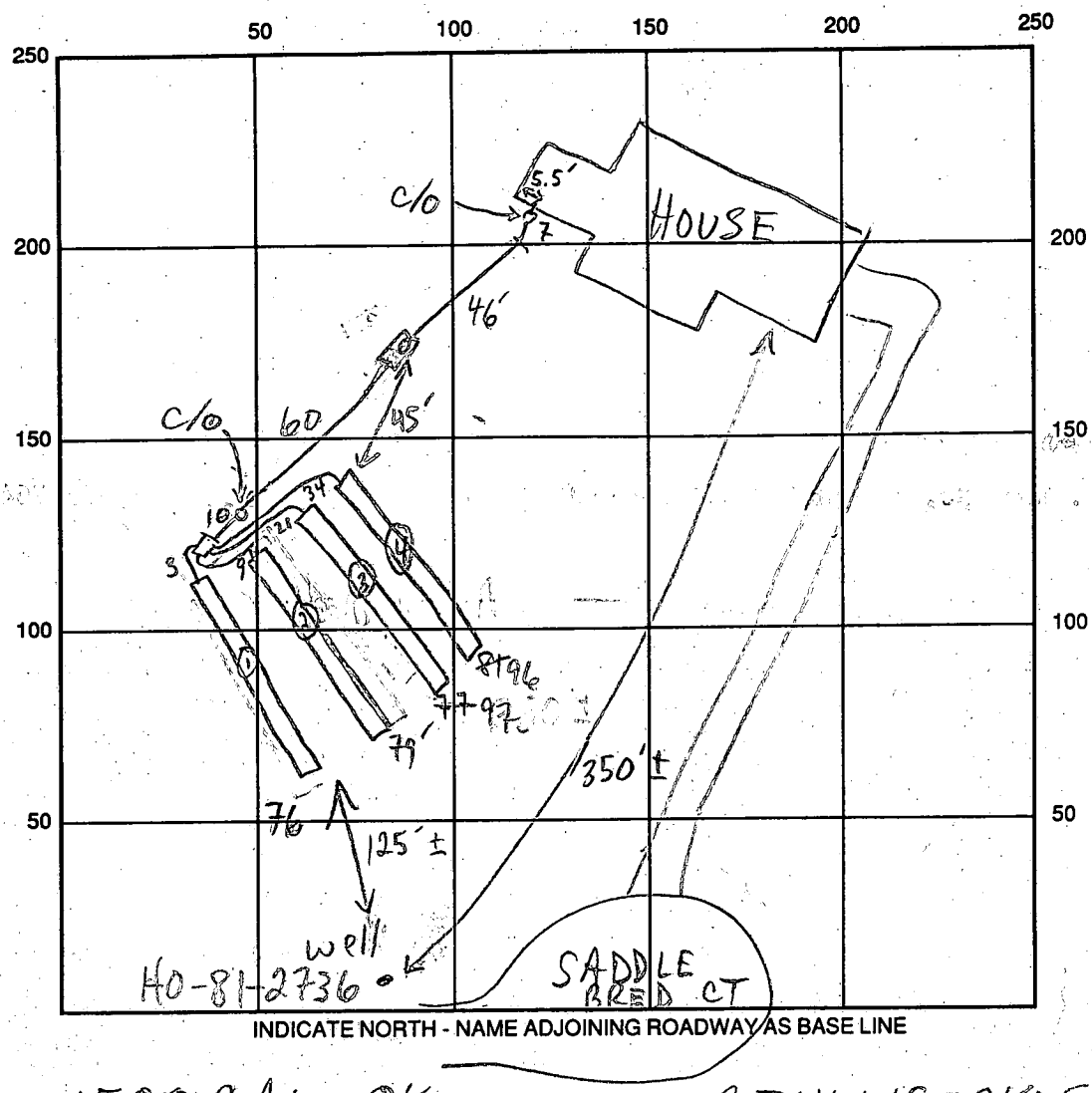
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 38358



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 GAL - OK CLEANOUTS 2 INLINE - OK; S.T. - OK

DISTRIBUTION BOX LEVEL OK BAFFLE IN

DRAIN FIELD/TITLE DEPTH 1: 8 | 2: 8 | 3: 8 | 4: 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 1: 5 | 2: 5 | 3: 5 | 4: 5 FT.

EFFECTIVE GRAVEL DEPTH 1: 3 | 2: 3 | 3: 3 | 4: 3 FT. TOTAL LENGTH ① 76 ② 79 ③ 97 ④ 96 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA ① 228 ② 237 ③ 291 ④ 288 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 1044 SQ. FT.

REMARKS: 10/25/93 #1 CONFIRMED STARTING LOC. W/INSTALLER. OK TO CONTINUE MR 10/25/93 #2 OK TO CONTINUE MR
10/26/93 #1 OK TO CONTINUE MR
10/26/93 #2 OK TO COVER MR

10/27/93 WPI OK to cover pitless adaptor 4' below grade Arm

DATE SYSTEM APPROVED 10/26/93 INSPECTOR M. Rifkin

APPLICATION

A 38358

PERCOLATION TESTING

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE _____

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 Grant Source Corp. Mark Rauchard

ADDRESS _____ PHONE 301-846-9459

PROSPECTIVE BUYER Don Carter

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Hales Prop - Glenwood Springs LOT NO. 11 Parcel on 4/29/87

ROAD AND DESCRIPTION Hobbs Rd. 2829 Saddlebred Ct.

TAX MAP _____ PARCEL # _____

BLDG. PERMIT SIGNED AND RETURNED 5/26/93
Permit #48677 - SFD

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY SID Abel FOR Deep Trenches DATE 5-13-88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-3-87 Perc Unsatisfactory; WATER IN best TEST AREA
2-4-87 Perc. SATISFACTORY; Hold FOR Subdivision PLAT showing new LOT LINES. S. Abel

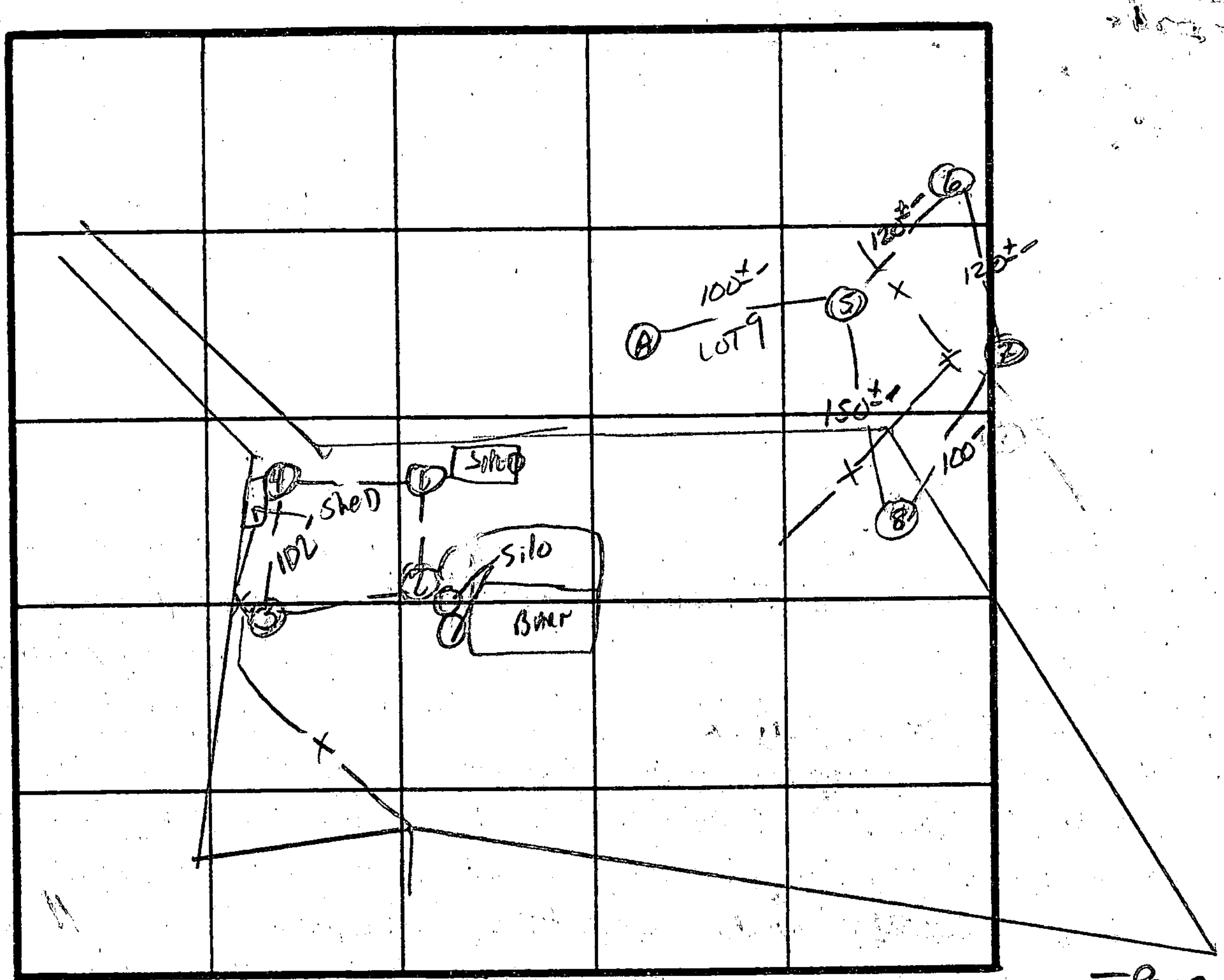
BLDG. PERMIT SIGNED AND RETURNED 5/1/89
B 26393

THIS IS NOT A PERMIT

SAC

⑤⑥⑦⑧
SOIL PROFILE

0'
Ap
14" Yellow Red Silt loam 8-10% Cuts <10% Frags.
45" Yellow Br silt loam 10-15% Frags
12'



INDICATE NORTH · NAME ADJOINING ROADWAY AS BASE LINE.
Hobbs Rd.

X Perc 15 min
220$/BR
In. 5'
Bot. 8'

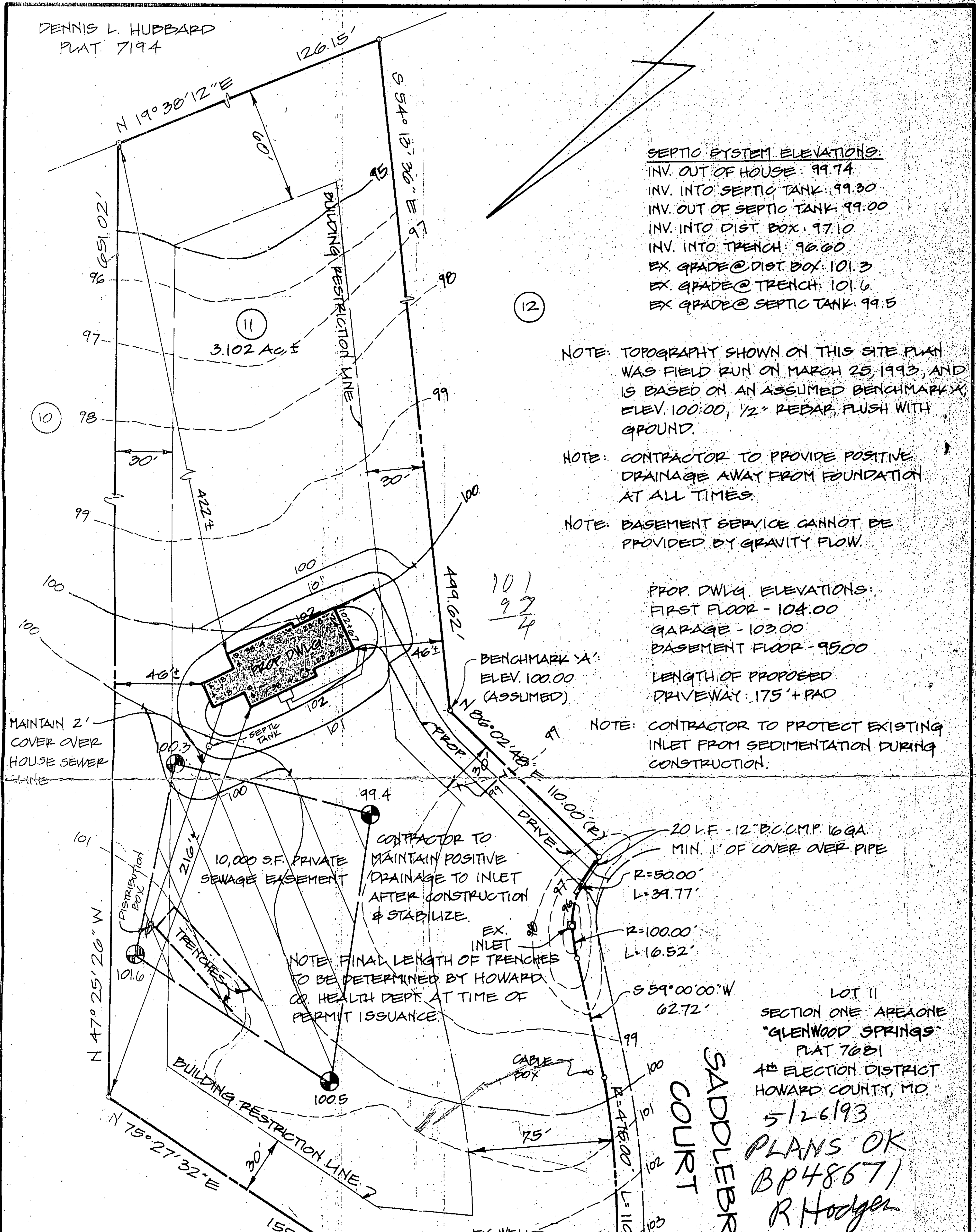
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
2/3/87	1	WATER AT 9 Ft		NO MOTTLES			
	2	WATER AT 4.5 Ft		NO MOTTLES			
	3	WATER AT 6' 9"		NO MOTTLES			
	4	WATER AT 10 Ft		NO MOTTLES			
2/4/87	5 S V	5' 12.5'	12:51 uniform soil below 4.5'	1:06	1:06	1:31	25 min
	7 S M	5' 8'	12:56 12:07	1:00 1:09	1:00 1:09	1:09 1:14	9 min 5 min
	7 V	12.5' uniform soil below 4.5'					
	6 S V	4.5 12	1:14 uniform soil below 4.5'	1:20	1:20	1:40	20 min
	8 V	12' uniform soil below 4.5'					

REMARKS Holes Diff than Plat Combine 11 & 12 No Area Remaining to Test

TYPE OF SOIL

TESTED BY S. Abel ALSO PRESENT C. Cissil, Phil M.

EH-12-1079



SEPTIC SYSTEM ELEVATIONS:
INV. OUT OF HOUSE: 99.74
INV. INTO SEPTIC TANK: 99.30
INV. OUT OF SEPTIC TANK: 99.00
INV. INTO DIST. BOX: 97.10
INV. INTO TRENCH: 96.60
EX. GRADE @ DIST. BOX: 101.3
EX. GRADE @ TRENCH: 101.6
EX. GRADE @ SEPTIC TANK: 99.5

NOTE: TOPOGRAPHY SHOWN ON THIS SITE PLAN WAS FIELD RUN ON MARCH 25, 1993, AND IS BASED ON AN ASSUMED BENCHMARK 'A', ELEV. 100.00, 1/2" REBAR FLUSH WITH GROUND.

NOTE: CONTRACTOR TO PROVIDE POSITIVE DRAINAGE AWAY FROM FOUNDATION AT ALL TIMES.

NOTE: BASEMENT SERVICE CANNOT BE PROVIDED BY GRAVITY FLOW.

PROP. DWLG. ELEVATIONS:
FIRST FLOOR - 104.00
GARAGE - 103.00
BASEMENT FLOOR - 95.00

LENGTH OF PROPOSED DRIVEWAY: 175' + PAD

NOTE: CONTRACTOR TO PROTECT EXISTING INLET FROM SEDIMENTATION DURING CONSTRUCTION.

LOT 11
SECTION ONE AREA ONE
"GLENWOOD SPRINGS"
PLAT 7681
4th ELECTION DISTRICT
HOWARD COUNTY, MD.

5/26/93
PLANS OK
BP48671
R Hodges

I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

SIGNED: Anthony J. Vitti

STATE OF MARYLAND
ANTHONY JOSEPH VITTI
10901
REGISTERED
PROFESSIONAL LAND SURVEYOR
5/12/93

SITE PLAN: #2829 SADDLEBRED COURT

VITTI & ASSOCIATES, INC.
ENGINEERING & SURVEYING
1717 YORK ROAD SUITE 102 LUTHERVILLE, MD 21093
(410) 252-5212

job no.: 93-11	
scale: 1" = 50'	
date: 4/7/93 rev. 5/12/93	
drawn: J.D.F.	
checked: AJV	

EMERGENCY/TEMP NO. IF ANY

B 1 5608 SEQUENCE NO. (DP USE ONLY)

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

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

5/26/88 Grant OK

STATE PERMIT NUMBER: HO-81-2736

fill in this form completely

Date Received (APA): 042788 — 5-27-88 Grant 9:30

OWNER INFORMATION

Last Name / Owner / First Name: CARMAN ASSOCIATES

Street or RFD: P.O. BOX 122

Town / State / Zip: ELLICOTT CITY MD 21043

DRILLER INFORMATION

Driller's Name: Joseph L. Mayne — License No. 938

Firm Name: Joseph L. Mayne Well Drilling

Address: 5512 Rikke Rd. Mt. Airy 21771

Signature: Joseph L. Mayne — Date: 4/26/88

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)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) — circled
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN

(AIR-ROTary) — circled — AIR-PERcussion — ROTARY (Hydraulic Rotary)

CABLE — REVerse-ROTary — DRive-POINT

other

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL — circled
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE):

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

APPROP. PERMIT NUMBER: G A P

FORCE: SA (WRITE INITIALS IN BOX) — PERMIT No. HO-81-2736

B 3 LOCATION OF WELL

COUNTY: HOWARD

SUBDIVISION: GLENWOOD SPRINGS

SECTION: — LOT: 11

NEAREST TOWN: GLENWOOD

MILES FROM TOWN (enter 0 if in town): ½ MI

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

N, NE, (E) — circled, SE, S, SW, W, NW

NEAR WHAT ROAD: SADDLEBRED CT.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): (E) — circled

DISTANCE FROM ROAD: 30 — ENTER FT or MI: FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: Howard — COUNTY NO.: A-38358

STATE SIGNATURE — INSERT S

DATE ISSUED: 051388 — CO SIGNATURE: [signature] — EXP. DATE: 11-12-88

NORTH GRID: 531000 — EAST GRID: 0795000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

5/27/88 on two location per staked 74' casing (1") 10 bags cement 40' open — Well — No sample previously taken

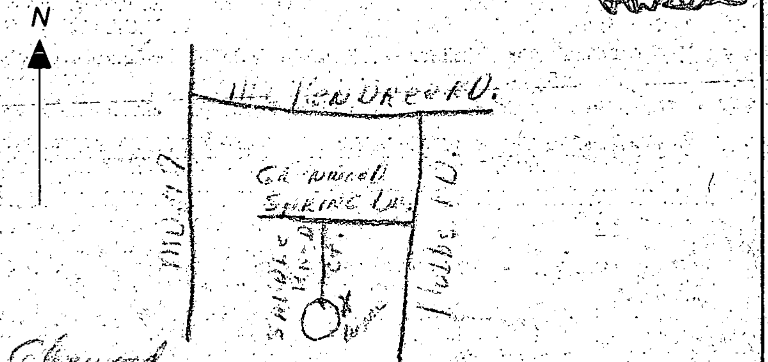
SOURCES OF DRILLING WATER

1. Well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 795
N 531

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



SPECIAL CONDITIONS

COUNTY

C 1 [redacted] 522 SEQUENCE NO. (DENV USE ONLY)
1 2 3 ... 6
(THIS [redacted]BER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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-38358

DATE Received [ ] (8–13)

DATE WELL COMPLETED 052488 (15–20)

Depth of Well 245 (22–26) (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-2736 (28–37)

OWNER Carman Associates
last name first name

STREET OR RFD Saddlebred Ct TOWN Glenwood

SUBDIVISION Glenwood Springs SECTION ______ LOT 11

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	FEET TO	Check if water bearing
Sand Stone	0	68	
Gray Mixed Rock	68	245	✓

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. 238

Joseph L. Mayne
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) yes (Y) no N (44)

TYPE OF GROUTING MATERIAL
CEMENT (CM) (45–46) BENTONITE CLAY BC (45–46)

NO. OF BAGS 10 NO. OF POUNDS 940
GALLONS OF WATER 60
DEPTH OF GROUT SEAL (to nearest foot)
from 0 (48 TOP 52) ft. to 40 (54 BOTTOM 58) ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

ST STEEL CO CONCRETE
PL PLASTIC OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
St (60–61)	6 (63–64)	94 (66–70)

EACH CASING — OTHER CASING (if used)

	diameter inch	depth (feet) from	to

SCREEN RECORD

screen type or open hole insert appropriate code below

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

C 2 (1 2)

EACH SCREEN

	type	DEPTH (nearest ft.) from	to
1	HO (8–9)	93 (11–15)	245 (17–21)
2	(23–24)	(26–30)	(32–36)
3	(38–39)	(41–45)	(47–51)

SLOT SIZE 1____ 2____ 3____

DIAMETER OF SCREEN [ ] (56–60) (NEAREST INCH)

GRAVEL PACK from ______ to ______

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 [ ] TELESCOPE CASING 72 [ ] LOG INDICATOR 74 75 76 [ ] OTHER DATA

C 3 (1 2)

PUMPING TEST

HOURS PUMPED (nearest hour) 3 (8–9)
PUMPING RATE (gal. per min. to nearest gal.) 12 (11–15)
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 25 (17–20)
WHEN PUMPING 28 (22–25)

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 (CIRCLE) (YES or NO) 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) [ ] (31–35)
PUMP HORSE POWER [ ] (37–41)
PUMP COLUMN LENGTH (nearest ft.) [ ] (43–47)
CASING HEIGHT (circle appropriate box and enter casing height)
(+) above LAND SURFACE 1 (50–51) (nearest foot)
− below (49)

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)

N

COUNTY

Page 1 of
Date 5/24/88

Review OK 2/8/89
RP

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2736
Location of property (road) SADDLEBRED CT
Subdivision GLENWOOD SPRINGS Lot 11 Block ____ Plat ____ Sec. ____
Well Driller J. MAYNE Owner CARMAN ASSOC.

Depth of well 245'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 25'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 15 gpm.
Total time 15MIN to reach pumping water level 28 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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:15	28	4		15
8:30	28	5		12
8:45	28	5		12
9:00	28	5		12
9:15	28	5		12
9:30	28	5		12
9:45	28	5		12
10:00	28	5		12
10:15	28	5		12
10:30	28	5		12
10:45	28	5		12
11:00	28	5		12
11:15	28	5		12

HD-224

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement ____

Receipt # -0-
Date 8/25/93

Name of Installer Wm. H. Smith Jr. Telephone 418-879-7641

License Number PI 58
Certified Well Pump Installer X Well Driller ____ Registered Plumber ____

Name of Property Owner Mary Rouchard Telephone ____
Subdivision Glenwood II Acres Lot # 11 Well Tag # HO-81-2736
Site Address 2829 Ladbrook Road

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ____
2. Make ____
3. Model # ____
4. Capacity ____ GPM
5. Pump exceeds well capacity Yes ____ No ____
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ____ Cable guards ____ Other ____

Motor
1. Horsepower ____
2. RPM ____
3. Voltage ____
   a. 110 ____
   b. 220 ____

Pitless Adapter
1. Make ____
2. Model # ____
3. Depth ____

Tank
1. Capacity ____
2. Pressure relief valve? ____

Piping
1. Type ____
2. Size ____
3. NSF and/or BOCA Code approved ____
4. Depth of supply line ____

Well data
1. Depth 245' ft.
2. Yield 12 GPM
3. Static water level 28' ft.
4. Will water supply be disinfected by installer? ____

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: William H. Smith Jr.

Date: 8-25-93

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215