9/26/90

03-312011

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 46502

A 39505

DISTRICT 3rd

DATE 10/22/90

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE SYSTEM APPROVED 10/5/90

INSPECTOR RH

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER ____

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Rover Meadows LOT 3 ROAD 13880 Rover Mill Road

PROPERTY OWNER Connolley Construction

ADDRESS ____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

250 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED ____

TRENCHES - 250 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 155 feet down the left (564.54') lot line and 65 feet off the same lot line as seen when facing the lot from Rover Mill Road. Run trenches on contour toward the right and left lot lines.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/MC

INSTALL SYSTEM HIGHER IF POSSIBLE

PLANS APROVED BY Sid Abel cm DATE 10/03/88

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

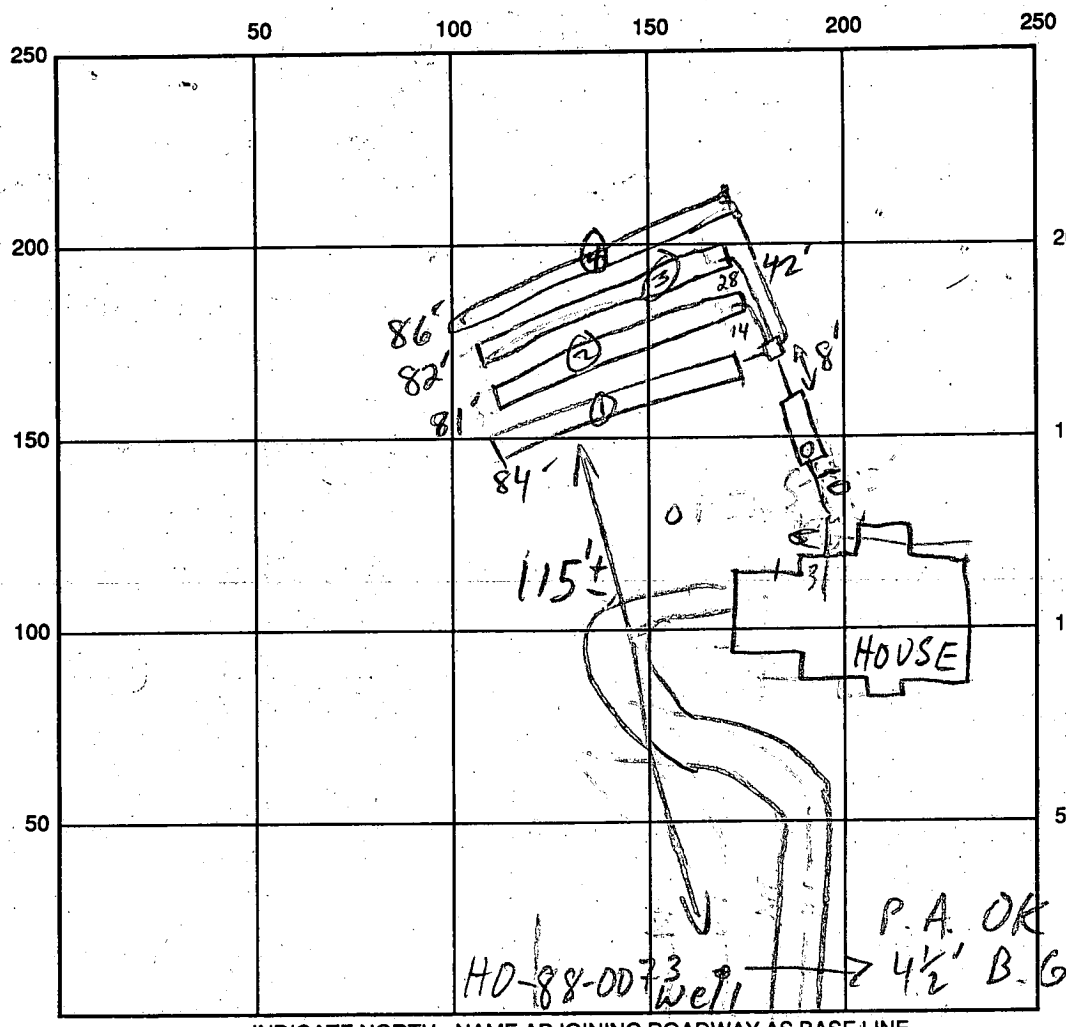
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

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 39505



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

ROVER MILL RD

SEPTIC TANK LEVEL 1250 GAL-OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH ①84 ②81 ③82 ④86 FT.

①252 ②243 ③246 ④258

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA SQ. FT.

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

ABSORBENT AREA 1008 SQ. FT.

REMARKS: 9/27/90 OK TO COVER ALL EXCEPT HOUSE CONN - NO HOUSE CONN MR

10/5/90 HOUSE HOOK UP OK BJ

STICKER PUT ON TANK CLEANOUT

DATE SYSTEM APPROVED 10/5/90 INSPECTOR Raymond Hodges

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 39505

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd

DATE April 20, 1987

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 John A. Boedder Connolly Const. Mgt. Dve. 799-5288

ADDRESS Rover Mill Road PHONE 465-7777

PROPERTY LOCATION:

SUBDIVISION ~~McCormick Property~~ Rover Meadows LOT NO. 3

ROAD AND DESCRIPTION On the East side of Rover Mill Road, at the intersection of Old Rover Road 13880 Rover Mill Rd.

SIZE OF LOT 3 Acre Minimum TYPE BLDG. 3-4 (NUMBER OF 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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Dennis M. Rush (SIGNATURE OF APPLICANT)

APPROVED BY Sidney Abel FOR Standard Trench DATE 10-3-88

REJECTED BY _____ FOR _____ DATE _____

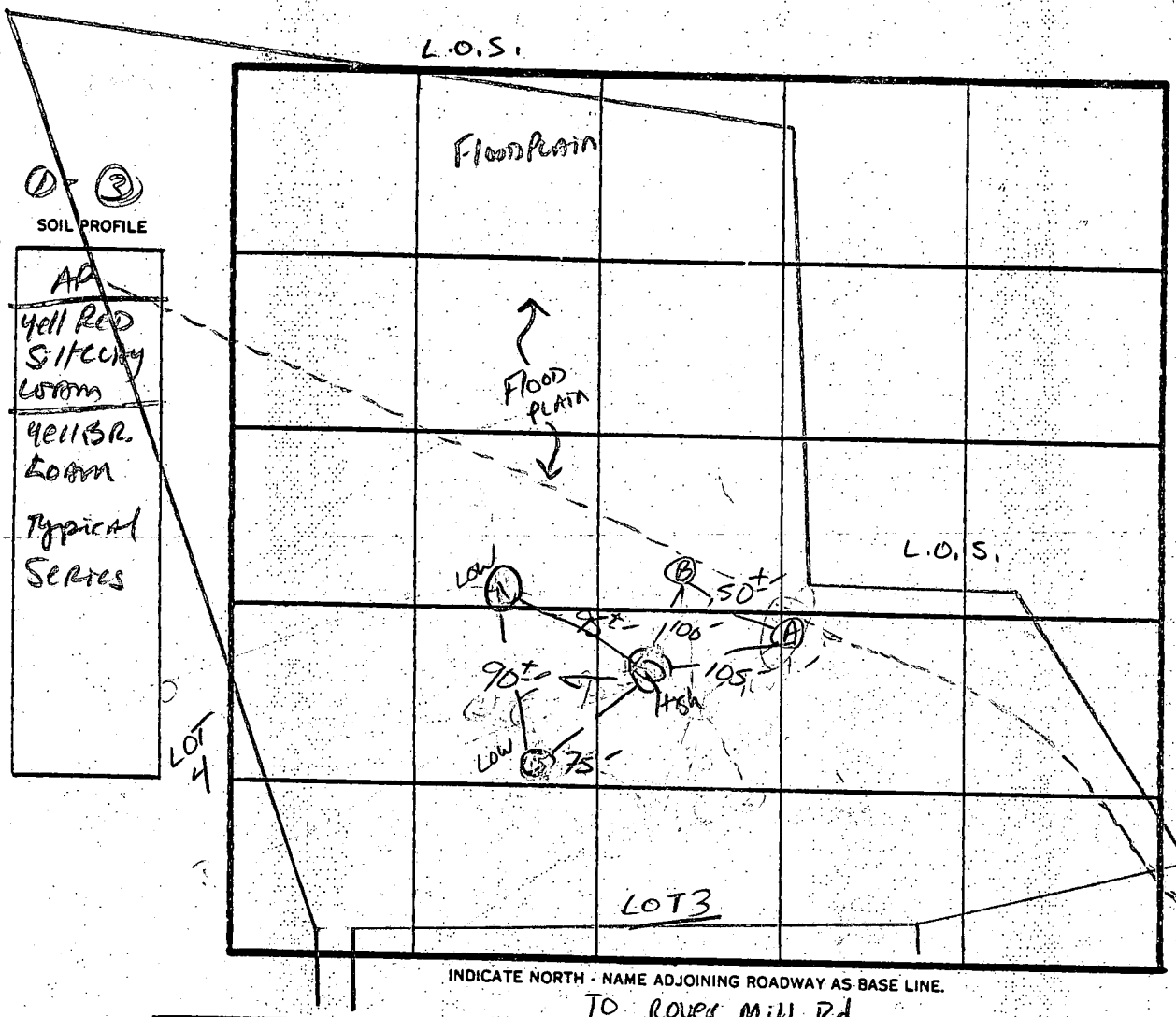
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 5-22-87 Insufficient Perc Area To be combined w/ Lot 4 & divided to establish area if possible held for Thorough review. SAA
6-29-87 No adjustment in Perc Area permitted downslope. SA

BLDG. PERMIT SIGNED AND RETURNED 10-3-88 BP21665 Sab

THIS IS NOT A PERMIT

BLDG. PERMIT SIGNED AND RETURNED 10/10/88
Serial #50249 - Deck



① - ②

SOIL PROFILE

0"
12"

AP
Yell Red Silty Clay Loam
Yell BR. Loam
Typical Series

X PERC B MIN
250 ₵/BR
MAX INLET 3'
BOTTOM MAX 4.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

TO Rover Mill Rd.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/22/87	1 S V1	3' WATER AT 9.5'	10:03	10:07	10:07	10:15	8 MIN
	2 S M	4'	10:09	10:55 ⇒ NO MOVEMENT			
		8'	10:09	10:33	10:33	11:08	1 INCH
	2 V	WATER 11.5 Ft Uniform below 4-4.5'+					
	3 S V	3' WATER 9'6" Ft	10:57	10:59	10:59	11:01	3 MIN
5/22/87	A	WATER AT 5' 2" MOTTLES AT 4'2" NO FRAGIPAN					
	B	WATER AT 8.5' MOTTLES AT FRAGIPAN 4.5' w/MOTTLES					

→ Both Soil

REMARKS Inches Diff Than Plat

TYPE OF SOIL Chester - Bonle

S. Abel

Dennis R., Neil, Rocky

EH-12-1079

EMERGENCY/TEMP NO. IF ANY

B 1 — 1313 — 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

STATE PERMIT NUMBER: HO-88-0372
fill in this form completely

Date Received (APA): 07/21/88

OWNER INFORMATION

Last Name: BAUER — First Name: ABE — Owner
Street or RFD: 3565 ELLICOTT MILLS DR.
Town: ELLICOTT CITY — State: MD — Zip: 21043

DRILLER INFORMATION

Driller's Name: Joseph L. Mayne — License No. 80: 238
Firm Name: Joseph L. Mayne Well Drilling
Address: 3317 Niles Rd. Mt. Airy 21771
Signature: Joseph L. Mayne — Date: 7/20/88

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)
- [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 — 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
- [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 DEEPENDED (IF AVAILABLE)

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

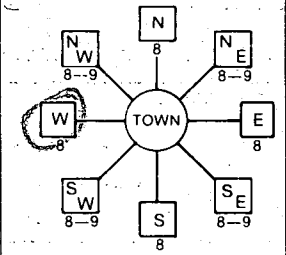
APPROP. PERMIT NUMBER: GAP
FORCE: [ ] WRITE INITIALS IN BOX — PERMIT No. HO-88-0372

B 3 — LOCATION OF WELL

8 COUNTY: HOWARD
23 SUBDIVISION: Gold Key Manor
SECTION: — LOT: 3
52 NEAREST TOWN: West Friendship
MILES FROM TOWN (enter 0 if in town): 2.6 M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: River Mill Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD: 520
ENTER FT or MI: F

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD — COUNTY NO.: A 39505
STATE SIGNATURE: _____ INSERT S
DATE ISSUED: 07/29/88 — CO SIGNATURE: E Nixon — EXP. DATE: 01/29/89
NORTH GRID: 53800 — EAST GRID: 05010000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

8/10/88 12:30

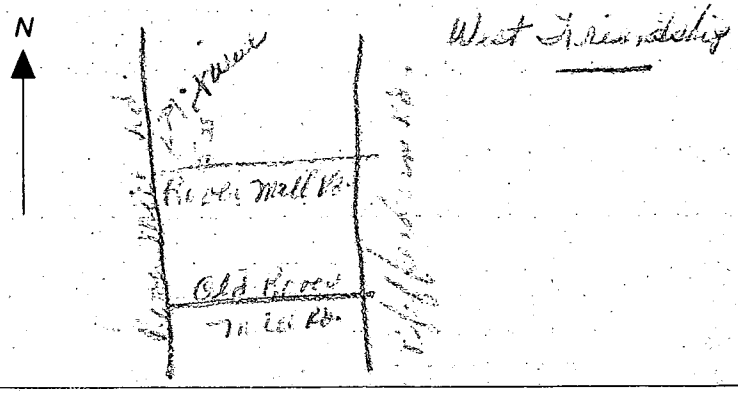
SOURCES OF DRILLING WATER
1. Well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8000
N 5380 3

000
000

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 9609 SEQUENCE NO. (DENV USE ONLY)
(THIS NUMBER 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 39505

DATE Received

DATE WELL COMPLETED 08/10/88

Depth of Well 230 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" AC-88-CC73

OWNER Boeldt Assoc.

STREET OR RFD Rock Mill Rd. TOWN West Friendship

SUBDIVISION Rock Meadows SECTION LOT 3

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	0	62	w
Gray Rock	62	230	w

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 25 NO. OF POUNDS 2350
GALLONS OF WATER 150
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 30 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: ST
Nominal diameter top (main) casing (nearest inch): 6
Total depth of main casing (nearest foot): 68

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

EACH SCREEN	DEPTH (nearest ft.)	
1	80	16 / 218
2		
3		

SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN ____ (NEAREST INCH)

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

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 15
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 25
WHEN PUMPING 29

TYPE OF PUMP USED (for test)
A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

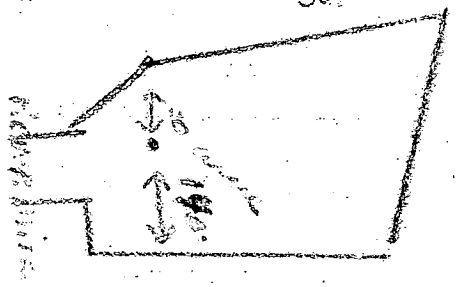
PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
CAPACITY: GALLONS PER MINUTE (to nearest gallon)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.) 40
CASING HEIGHT (circle appropriate box and enter casing height)
+ above / − below LAND SURFACE (nearest foot) 1

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. 258
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)



OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) WQ
TELESCOPE CASING
LOG INDICATOR
OTHER DATA

COUNTY

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 # 46486
Date 10/15/90

Name of Installer W.W.King Plbg. & Htg. Contr., Inc. Telephone 301-662-6990

License Number 2217
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber X

Name of Property Owner Connolley Construction Telephone 301-799-5988
Subdivision Rover Meadows Lot # 3 Well Tag # HO -88 -0073
Site Address 13880 Rover Mill Rd.

- -

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible X
2. Make Goulds
3. Model # 7EH07422
4. Capacity 7 GPM
5. Pump exceeds well capacity Yes ____ No X
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 X Other ____

Motor
1. Horsepower 3/4
2. RPM 3500
3. Voltage ____
   a. 110 ____
   b. 220 X

Pitless Adapter
1. Make Martinson
2. Model # BP-10K
3. Depth 42" min
   60" max

Tank
1. Capacity 42
2. Pressure relief valve? yes

Piping
1. Type plastic 160#
2. Size 1"
3. NSF and/or BOCA Code approved X
4. Depth of supply line 42" min
   60" max

Well data
1. Depth 230 ft.
2. Yield 15 GPM
3. Static water level ____ ft.
4. Will water supply be disinfected by installer? yes

OK 9/27/90 SEE SEPTIC 1~SP SHEET.

- -

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).

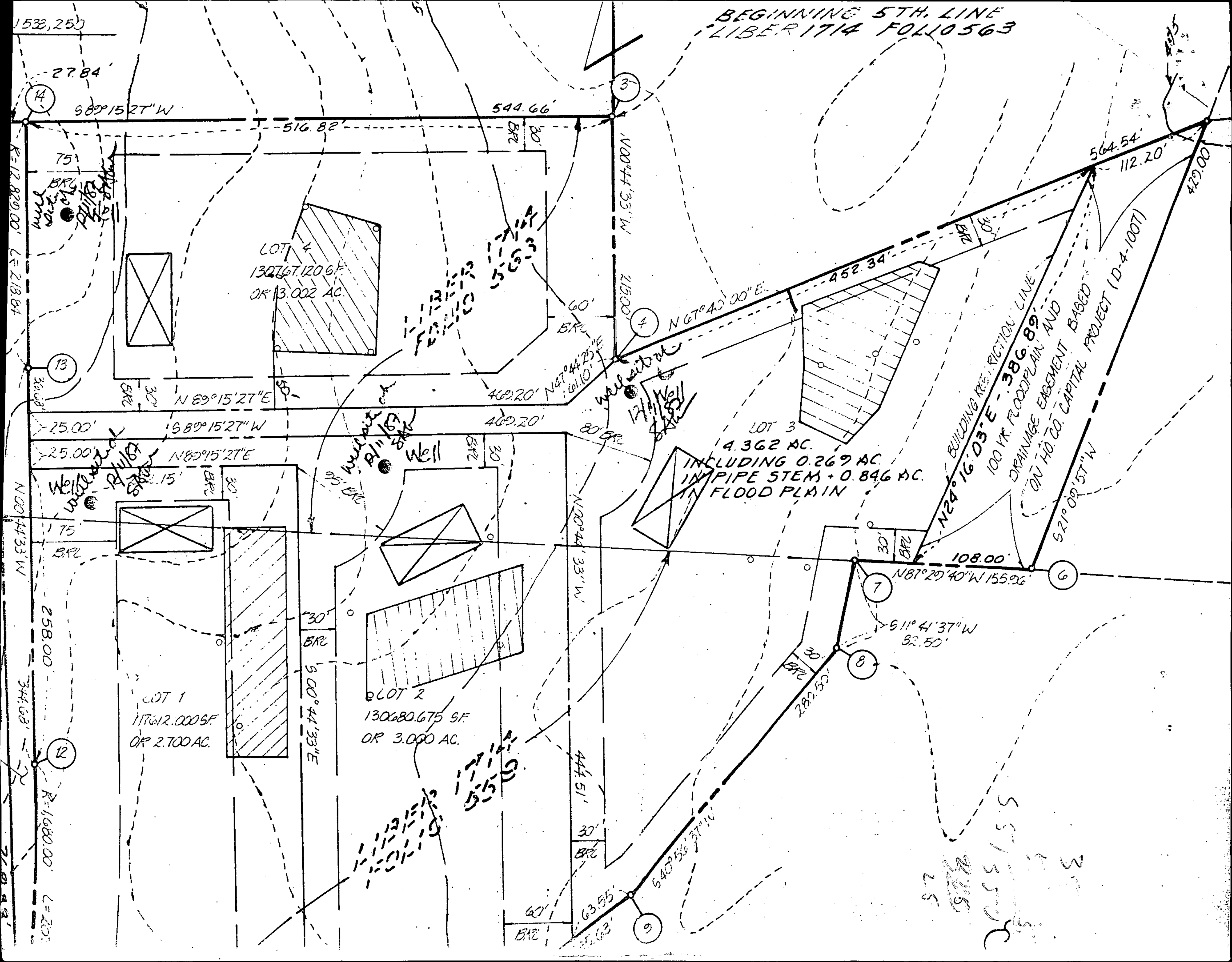
All information given above is true to the best of my knowledge.

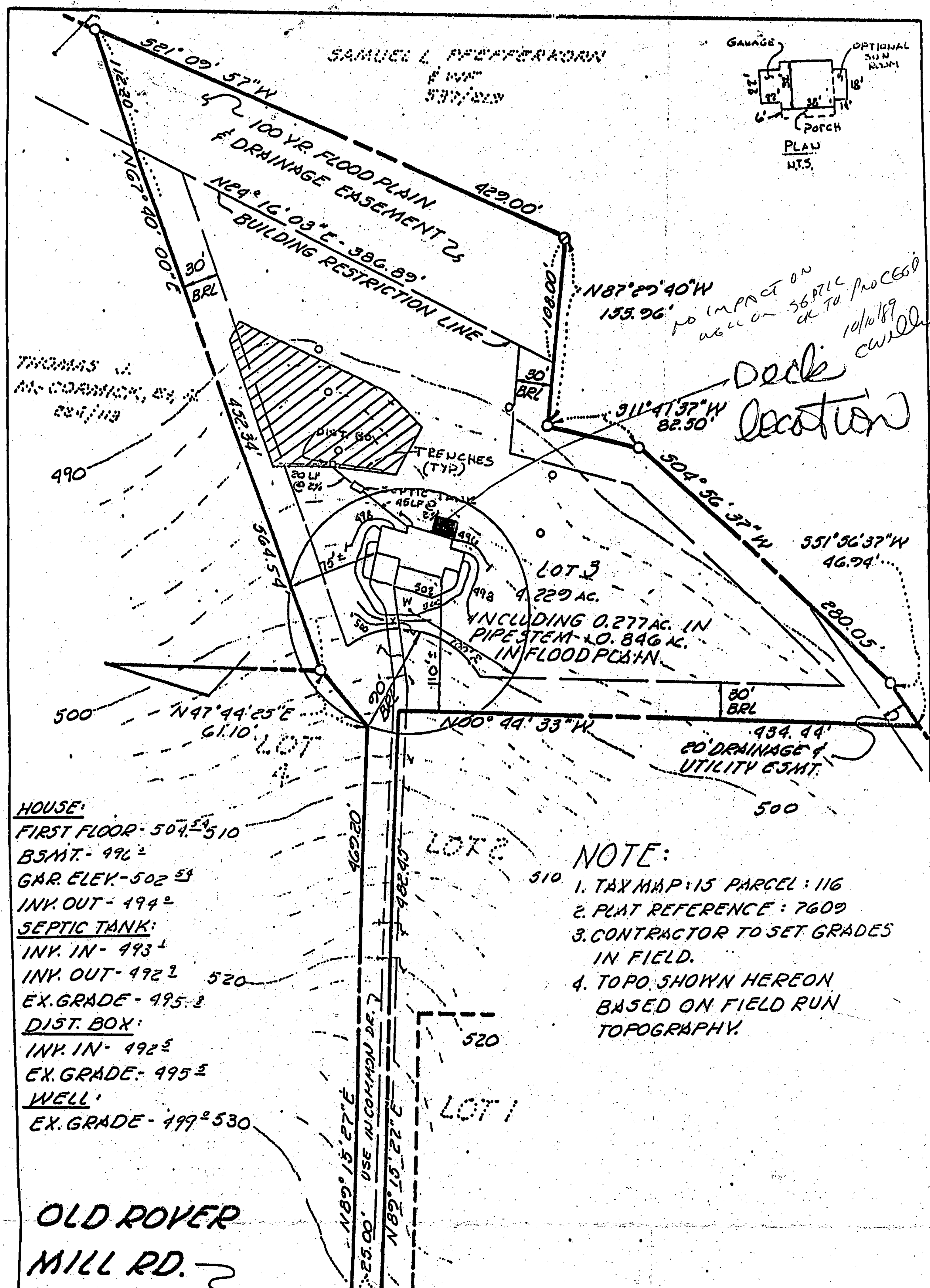
Signature of Applicant: Walter W King

Date: Oct. 3, 1990

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

HD-215


BEGINNING 5TH. LINE
LIBER 1714 FOLIO 563
S 89°15'27"W
544.66'
516.82'
LOT 4
130767.120 S.F.
OR 3.002 AC.
LIBER 1714 FOLIO 563
N 67°40'00"E
452.34'
564.54
112.20'
429.00
N 89°15'27"E
469.20'
S 89°15'27"W
469.20'
N 47°44'25"E
61.10'
LOT 3
4.362 AC.
INCLUDING 0.269 AC.
IN PIPE STEM + 0.846 AC.
IN FLOOD PLAIN
BUILDING RESTRICTION LINE
N 24°16'03"E - 386.89'
100 YR. FLOODPLAIN AND
DRAINAGE EASEMENT BASED
ON HO. CO. CAPITAL PROJECT (D-4-1007)
S 21°09'57"W
108.00'
N 87°29'40"W 155.96'
S 11°41'37"W
52.50'
280.50'
S 40°56'37"W
63.55'
444.51'
S 00°44'33"E
N 00°44'33"W
LOT 1
117612.000 S.F.
OR 2.700 AC.
LOT 2
130680.675 S.F.
OR 3.000 AC.
258.00
R=1680.00
Well
BRL
25.00'
75'
30'
60'
80' BRL
95' BRL
27.84'
1533,250



TITLE: GRADING STUDY	boender associates inc. consulting engineers land surveyors land planners
PROJECT: ROVER MEADOWS - LOT 3	
LOCATION: 3RD ELECTION DISTRICT HOWARD CO., MD.	COURTHOUSE SQUARE 3565 ELLICOTT MILLS DRIVE ELLICOTT CITY, MD. 21043 (301) 465-7777

SCALE:	DESIGNED BY:	DRAWN BY:	CHECKED BY:	DATE:
1" = 100'	L.E.B.	D. WELSH		8-4-88

FIELD BOOK:	PAGE NO.:	JOB NO.:	DRAWING NO.:
		87221	1 OF 1

EMERGENCY/TEMP NO. IF ANY

B 1 | 9365 | SEQUENCE NO. (OEP 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

OEP PERMIT NUMBER: HO-81-2477
fill in this form completely

Date Received: 10/19/87

OWNER INFORMATION
Roemper Associates
Last Name / Owner / First Name
3565 Fallcatt Mill Rd
Street or RFD
Fallcatt City MD 21157
Town / State / Zip

DRILLER INFORMATION
David L. Troyer — License No: 238
Driller's Name
David L. Troyer Well Drilling
Firm Name
5512 Ridge Rd Mt. Airy, Md. 21771
Address
David L. Troyer 10/8/87
Signature / Date

LOCATION OF WELL
B 3
Howard — COUNTY
Rowe Meadows — SUBDIVISION
SECTION — LOT 3
West Friendship — NEAREST TOWN
MILES FROM TOWN (enter 0 if in town): 2 1/2 MI

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N, NW 8–9, NE 8–9, W 8, E 8, SW 8–9, S 8, SE 8–9, TOWN
Rowe Mill Road — NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH, WEST, EAST, SOUTH
DISTANCE FROM ROAD: 1500
ENTER FT or MI: FT

RETURNED
CANCELLED

WELL INFORMATION
B 2
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)
- 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)

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
HOWARD — COUNTY NAME
6/14/88
A39505 — COUNTY NO.
OEP SIGNATURE
STATE HEALTH INSERT S
DATE ISSUED: 12/16/87
B Wilson — CO-SIGNATURE
EXP. DATE: 06/16/88
NORTH GRID: 53700
EAST GRID: 08100

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

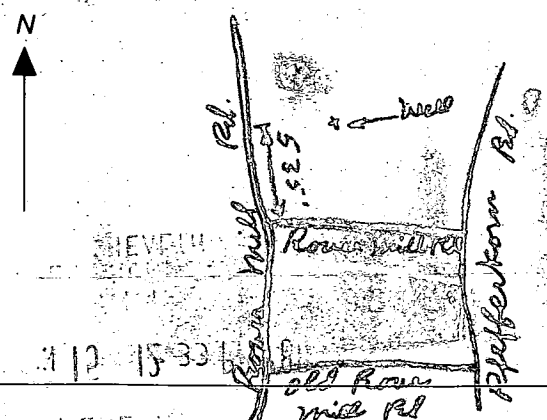
METHOD OF DRILLING (circle one)
BORED (or Augered) — JETTED — Jetted & DRIVEN
AIR-ROTary — AIR-PERcussion — ROTARY (Hydraulic Rotary)
CABLE — REVerse-ROTary — DRive-POINT
other

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
E 8001
N 5303
000
000

REPLACEMENT OR DEEPENED WELLS
(CIRCLE APPROPRIATE BOX)
- N — THIS WELL WILL NOT REPLACE AN EXISTING WELL
- 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 DEEPENDED (IF AVAILABLE)

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)
APPROP. PERMIT NUMBER: GAP
FORCE ACCT. — WRITE INITIALS IN BOX — PERMIT No. HO-81-2477

SPECIAL CONDITIONS

DRILLER