

12-18-89
1:00pm ✓

1axID-05-410258

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 45416

A 39802

DISTRICT 5th

DATE 1/11/90

12/18/89

DATE SYSTEM APPROVED

INSPECTOR M. R. F. K.

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Stanton Property ROAD 4350 Ten Oaks Road LOT 2

PROPERTY OWNER John & Kathleen Manos

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below
548 original grade. Bottom maximum depth 9 feet below original grade. Effective
area begins at 3 feet below original grade. 6 feet of stone below
distribution pipe.

LOCATION - Place the distribution box 100 feet from the left side of the lot and 100 feet
from the front lot line as seen when facing the lot from Ten Oaks Road. Run
the trenches along level ground toward the front lot line.

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

PLANS APPROVED BY Ray Hodges DATE 3/10/89

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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

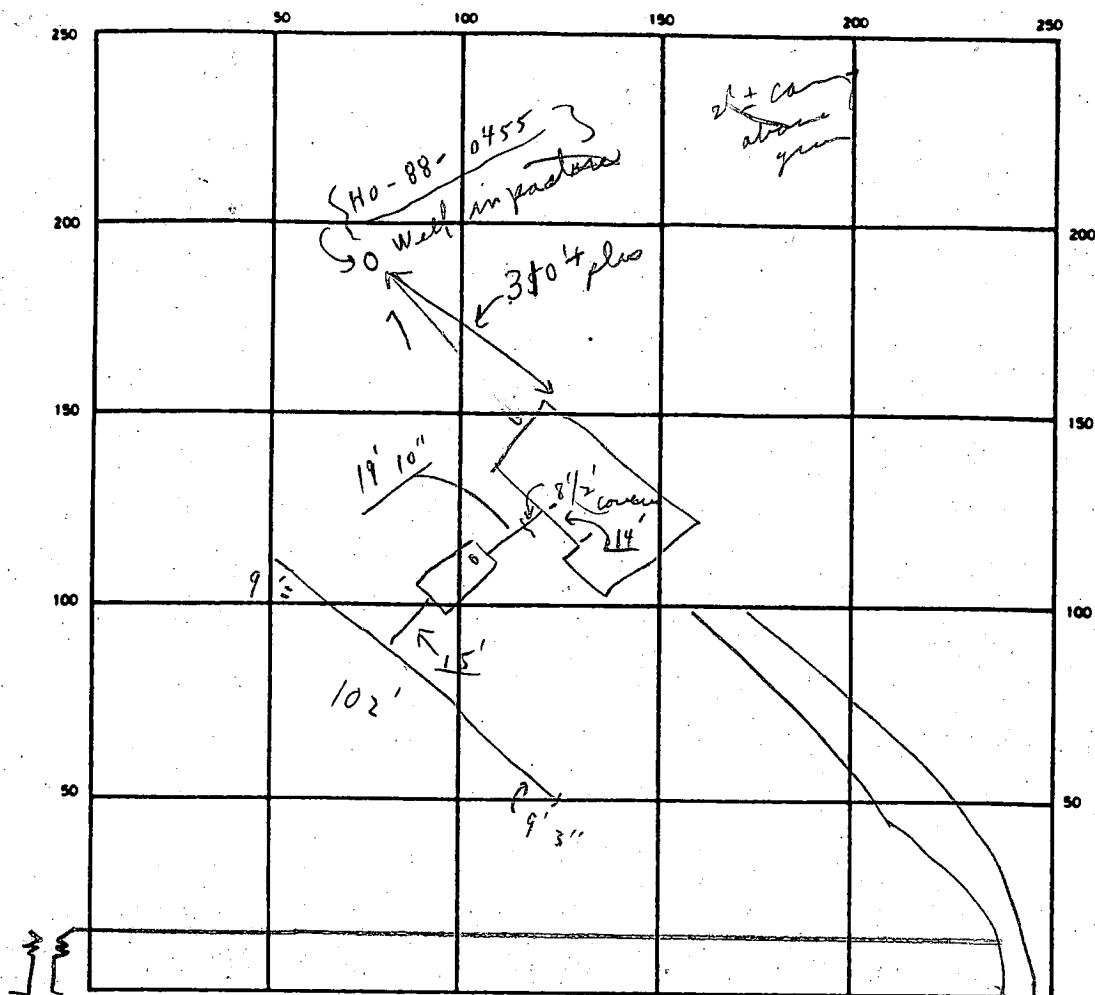
PERMIT VOID AFTER TWO YEARS

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 PVC 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 SYSTEMS.



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

TEN OAKS ROAD

SEPTIC TANK. LEVEL OK CLEANOUTS S.T. OK

DISTRIBUTION BOX. LEVEL No

DRAIN FIELD/TILE FIELD. DEPTH 9 ^{avg} FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 102 FT.

$\frac{90}{6/540}$

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA SQ. FT.

DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS 12/18/89 0 Partial - ok to 'continue' plumbing inside wall. a basin
ent. in. ② M.R. to check on pipes length in trench closest
to Ten Oaks Road and longest part of trench from pipe
off septic Tank CBA / Jane Nadeau
12/18/89 TRENCH CONTAINS 74" PIPE + NO D.B.; OK TO COVER
MR

DATE SYSTEM APPROVED 12/18/89 INSPECTOR M. Rittin

APPLICATION

PERCOLATION TESTING

A 39802

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

7/31/87
NO TEST OF EXISTING
LOT NECESSARY
Info upto DATE
SABE

P _____

DISTRICT 5TH

DATE 7/31/87

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 & KATHLEEN MANOS

ADDRESS 4340 TEN OAKS ROAD - DAYTON, 21036 PHONE 596-9709

PROSPECTIVE BUYER UNKNOWN

ADDRESS SAME AS ABOVE PHONE _____

PROPERTY LOCATION:

SUBDIVISION SAME AS ABOVE LOT NO. 2nd NEW LOT

ROAD AND DESCRIPTION 4350 TEN OAKS Rd. Behind existing Address

TAX MAP _____ PARCEL # _____

SIZE OF LOT To be determined TYPE BLDG SFD
(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 _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 8/5/87 Perc Satisfactory - hold for Paj. Sabe

BUDG. PERMIT SIGNED

AND RETURNED 8/24/88

Smith # 285-78
SFD - 3 Bedroom

THIS IS NOT A PERMIT

⑤.

SOIL PROFILE

	AP	Hx
6"	Yellow Br Silty clay loam 10-15% frags	
3"	Yellow red Silt loam Highly micaceous 15-20% frags more yellow Brown at bottom	

13+

House & well site (W) well site OK S. K. Al 8/5/87

SITE
OK
S. 100
8/5/87

Y RNC 3 MAIN

160 Φ 1 BA
Inlet 3
Bottom 9

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

TEN OAKS Rd.

[illegible]

REMARKS

TYPE OF SOIL

TESTED BY

Glenelg-Cheser

S. Abel

Kric, mads

ALSO PRESENT

04K4000 00158
0015 1-5
0247 00.6637
0015

REVISED WELL -
SITE PLAN OK
WELL STAKE OK

319189 R1+

£883,500

157,000

582-47'16"5

2075

~~TOP SECRET~~

575.26
652.22

LOT 2
4.353 AC.

Site well

House

Area

-0.4.6.2

1890 47' 16" 4

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 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. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840.

— TOTAL AREA TABULATION —

| | |
|--|---|
| NUMBER OF BUILDABLE LOTS TO BE RECORDED | 2 |
| NUMBER OF OPEN SPACE LOTS TO BE RECORDED | 0 |
| NUMBER OF LOTS TO BE RECORDED | 2 |

| | | | | |
|--|----------------------|--|---|--|
| C1 | 2255 | SEQUENCE NO.
(DENV 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. |
| 1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS) | | COUNTY
NUMBER A3 9 802 | | |
| DATE Received | DATE WELL COMPLETED | Depth of Well | PERMIT NO. | |
| 8 9 10 11 12 13 | 14 15 16 17 18 19 20 | 21 22 23 24 25 26
(TO NEAREST FOOT) | FROM "PERMIT TO DRILL WELL" | |
| OWNER | | 27 28 29 30 31 32 33 34 35 36 37 | | |

| | | | | |
|------------------|-----------|---------------|------------|-----|
| OWNER | last name | first name | TOWN | LOT |
| MANOS | JOHN | | DAYTON MD. | 2 |
| STREET OR RFD | | SUBDIVISION | | |
| 4340 TEN OAKS RD | | STANTON PROP. | | |
| SECTION | | LOT | | |
| | | 2 | | |

| | | |
|---|---------|------------------------------|
| 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 | Check
if water
bearing |
| | FROM TO | |
| OD 0 17 | | |
| Slates | 17 46 | |
| #1 DH 500 | | |
| #2 DH 450 | | |
| #3 DH 460 | | |
| All DH sealed
with cement | | |

| | |
|---|----------------|
| GROUTING RECORD | |
| WELL HAS BEEN GROUTED
(Circle Appropriate Box) | |
| TYPE OF GROUTING MATERIAL | |
| CEMENT | BENTONITE CLAY |
| CM | BC |
| NO. OF BAGS | NO. OF POUNDS |
| 12 | 1200 |
| GALLONS OF WATER | |
| 75 | |
| DEPTH OF GROUT SEAL (to nearest foot) | |
| from | ft. to |
| 0 | 60 |
| (enter 0 if from surface) | |

| | |
|---|----------------|
| CASING RECORD | |
| casing types
insert
appropriate
code below | |
| ST | CO |
| STEEL | CONCRETE |
| PL | OT |
| PLASTIC | OTHER |
| MAIN Casing | |
| Nominal diameter | Total depth |
| top (main) casing | of main casing |
| (nearest inch) | (nearest foot) |
| 5 1/2 | 61 |
| 60 | 61 |
| OTHER CASING (if used) | |
| diameter | depth (feet) |
| inch | from to |
| | |

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

| | |
|---------------------|----|
| C2 | |
| DEPTH (nearest ft.) | |
| 1 | 2 |
| HD | 60 |
| 8 | 9 |
| 11 | 15 |
| 17 | 21 |
| 23 | 24 |
| 26 | 30 |
| 32 | 36 |
| 38 | 39 |
| 41 | 45 |
| 47 | 51 |
| SLOT SIZE 1 2 3 | |
| DIAMETER OF SCREEN | |
| (NEAREST INCH) | |
| 56 60 | |
| from to | |
| 68 | |

| | |
|---|--|
| GRAVEL PACK | |
| 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 | 72 | 74 75 76 |
| TELESCOPE
CASING | LOG
INDICATOR | OTHER DATA |

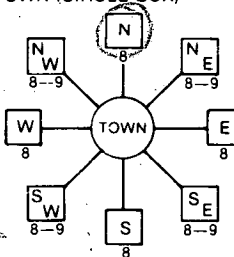

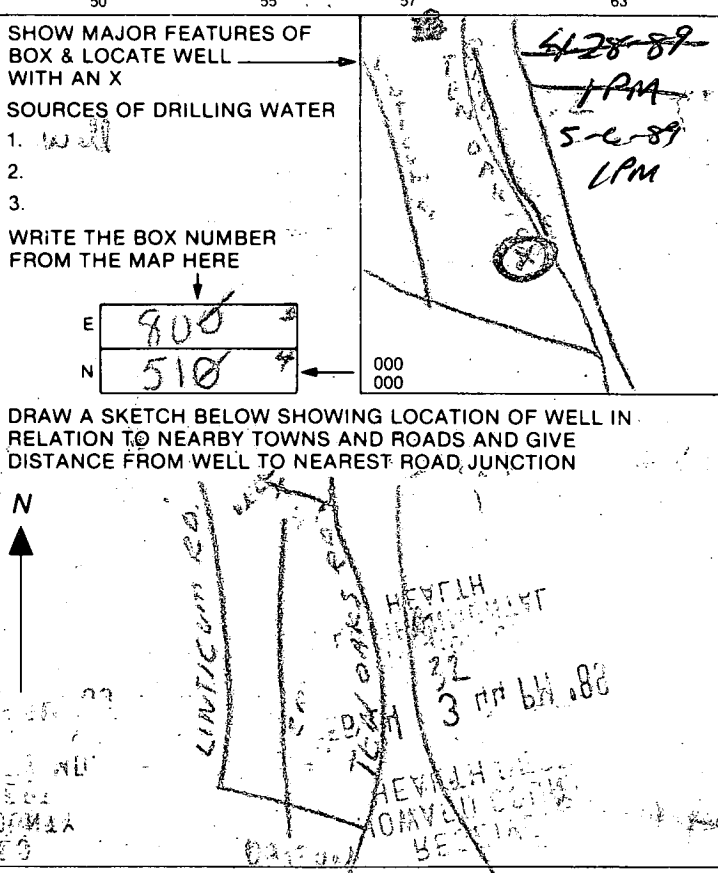
| | | |
|--|-------------|------------------------|
| C3 | | |
| PUMPING TEST | | |
| HOURS PUMPED (nearest hour) | | |
| 6 | | |
| PUMPING RATE (gal. per min. to nearest gal.) | | |
| 2 | | |
| METHOD USED TO
MEASURE PUMPING RATE | | |
| Pump Test | | |
| WATER LEVEL (distance from land surface) | | |
| BEFORE PUMPING | | |
| 30 | | |
| WHEN PUMPING | | |
| 115 | | |
| TYPE OF PUMP USED (for test) | | |
| A | P | T |
| air | piston | turbine |
| C | R | O |
| centrifugal | rotary | other (describe below) |
| J | S | |
| jet | submersible | |

| | |
|--|--|
| PUMP INSTALLED | |
| DRILLER WILL INSTALL PUMP YES NO | |
| (CIRCLE) (YES or 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) | |
| 31 35 | |
| PUMP HORSE POWER | |
| 37 41 | |
| PUMP COLUMN LENGTH
(nearest ft.) | |
| 43 47 | |
| CASING HEIGHT (circle appropriate box
and enter casing height) | |
| + above | |
| - below | |
| LAND SURFACE | |
| 11 (nearest foot) | |
| 50 51 | |

| | |
|---|--|
| 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) | |
| | |

| | |
|--|--|
| 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. 194 | |
| Austin Horne | |
| DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION) | |
| Austin Horne | |
| SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee) | |

COUNTY

| | | | |
|---|-------------------------------|--|--|
| B 1
1121
<small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small> | SEQUENCE NO.
(DP USE ONLY) | STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type | STATE PERMIT NUMBER
HQ-88-9455
<small>fill in this form completely</small> |
| Date Received (APA)
02/24/89
OWNER INFORMATION
MANOS JOHN C.
<small>15 Last Name 21 Owner 34 First Name</small>
9340 TEN OAKS RD.
<small>36 Street or RFD 55</small>
DAYTON
<small>57 Town 70 State 72 Zip 76</small> | | B 3
LOCATION OF WELL R-43662
40.00
2/24/89
HOWARD
<small>8 COUNTY 21</small>
STANTON PROA
<small>23 SUBDIVISION 42</small>
SECTION 44 46 LOT 2 48 50
FREDERICK DAYTON
<small>52 NEAREST TOWN 71</small>
MILES FROM TOWN (enter 0 if in town) 3 5 MI
<small>73 76 77 78</small> | |
| DRILLER INFORMATION
AUSTIN GARVER
<small>Driller's Name 77 License No. 80</small>
KEYSER-GARVER WELL DRILLING
<small>Firm Name</small>
9125-B BETHEL RD. FREDERICK MD.
<small>Address</small>
Austin Garver 2-22-89
<small>Signature Date</small> | | B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

EN OAKS RD.
<small>11 NEAR WHAT ROAD 30</small>
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD
34 0 37
ENTER FT or MI FT
<small>38 39</small> | |
| B 2
WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 7
<small>8 12</small>
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 460
<small>14 20</small> | | NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
HOWARD PA39802
<small>COUNTY NAME COUNTY NO.</small>
STATE SIGNATURE _____ INSERT S
DATE ISSUED 09/10/89 Raymond Hodge 9/10/89
<small>43 48 CO SIGNATURE EXP. DATE</small>
NORTH GRID 519000 EAST GRID 0803000
<small>50 55 57 63</small> | |
| 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. well
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800
N 510
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
 | |
| APPROXIMATE DEPTH OF WELL 400 FEET
<small>24 28</small>
APPROXIMATE DIAMETER OF WELL 6 INCH
<small>NEAREST INCH</small> | | METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
37 CABLE REVERSE-ROTARY 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
39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
<input type="checkbox"/> THIS WELL WILL DEEPMEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52 | | Not to be filled in by driller (OEP USE ONLY) FEB 89
APPROP. PERMIT NUMBER _____ GAP _____
<small>54 63</small>
FORCE 100 WRITE INITIALS IN BOX PERMIT NO. _____
<small>67 68 70 71 72 73 74 75 76 77 78 79</small>
SPECIAL CONDITIONS | |