5-19-8 slate

PERMIT

05-372658

SEWAGE DISPOSAL SYSTEM

A 41744

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

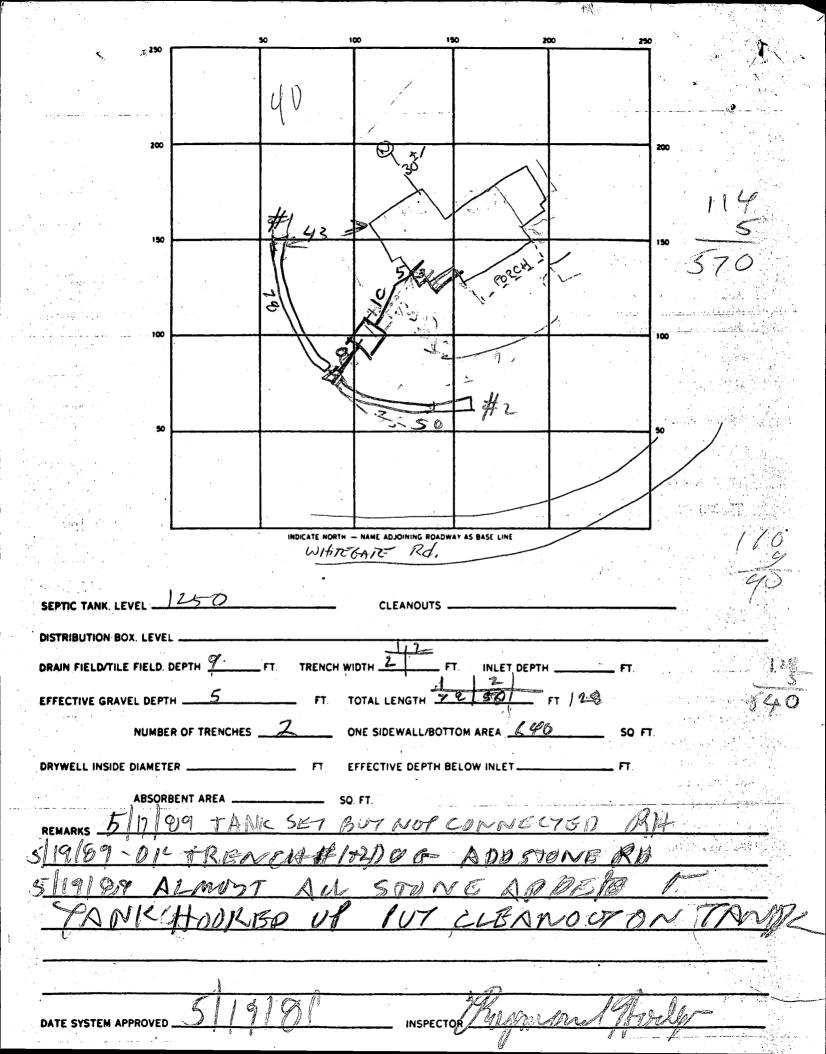
DATE 3/4/89

DATE SYSTEM APPROVED -

INSPECTOR_RH

	IS PERMITTED TO INSTALLXALTER
ADDRESS 17550 Old Frederick Road, Mt. Airy, Marylan	1d 21771PHONE 831-7257
SUBDIVISION Clarksville Ridge ROAD 6658 Wh	itegate LOT 13
PROPERTY OWNER BEHK Construction	
ADDRESS	
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND AB	SSORPTION AREA BY 22%.
GARBAGE GRINDER? YES NOX	그는 사람들이 되었다. 그 사람들이 되었다. 그 사람들이 되었다.
SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS	<u>. 4</u>
TRENCHES - 160 sq. ft. per bedroom Tranch as 1 2	
TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 original grade. Bottom maximum donth 8	teet wide. Inlet 4.0 feet below
original grade. Bottom maximum depth 8.0 area begins at 4.0 feet below original gradestribution pine	U feet below original grade. Effe
ATRICTTON DIDE	
LOCATION - Place the distribution box 105 feet up the	he left (210') lot line and 115 5.
or the same for fine as seen when factor	or the let from this
TO CICHCH TO CACCELL TOO TOOF IN TANGER	Provide (II OII 1)
and cap to grade or above on septic tank.	Provide (II OII 1)
and dup to grade of above on septic tank.	Provide 6" - 8" diameter cleanout
and cap to grade or above on septic tank. Sid Abel	Provide 6" - 8" diameter cleanout
and dup to grade of above on septic tank.	Provide 6" - 8" diameter cleanout ・ のK/(ん)
PLANS APPROVED BY	Provide 6" - 8" diameter cleanout OK/(W) DATE 9/29/88
PLANS APPROVED BY Sid Abel COVER NO WORK UNTIL INSPECTED AND APPROVED JEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE	Provide 6" - 8" diameter cleanout OK/(L) DATE
Sid Abel COVER NO WORK UNTIL INSPECTED AND APPROVED BEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SHOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM	Provide 6" - 8" diameter cleanout OK/(W) DATE 9/29/88 SUCCESSFUL OPERATION OF ANY SYSTEM M HOUSE TO DRAIN FIELDS
Sid Abel COVER NO WORK UNTIL INSPECTED AND APPROVED DIETHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SHOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM THE ALL PARTS OF SEPTIC SYSTEMS II.E. TANK DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM	Provide 6" - 8" diameter cleanout OK/(L) DATE
Sid Abel COVER NO WORK UNTIL INSPECTED AND APPROVED BETTHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SHOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM NOTE: IF DEEP TRENCHIES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL	Provide 6" - 8" diameter cleanout DATE 9/29/88 SUCCESSFUL OPERATION OF ANY SYSTEM M HOUSE TO DRAIN FIELDS M WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED) IN TRENCHIES)
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Sid Abel COVER NO WORK UNTIL INSPECTED AND APPROVED BEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SHOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOTE: ALL PARTS OF SEPTIC SYSTEMS II.E TANK. DISTRIBUTION BOX TRENCHESI TO BE 100 FEET FROM HOTE: IF DEEP TRENCHIESI ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL HOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 10 HOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS	Provide 6" - 8" diameter cleanout DATE 9/29/88 SUCCESSFUL OPERATION OF ANY SYSTEM. M HOUSE TO DRAIN FIELDS WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED) IN TRENCHIES) DO FEET IN LENGTH.

INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT



APPLICATION*

PERCOLATION TESTING

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DISTRICT .	5	
	Ma 13/98	S)

41744

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

TO: THE COUNTY HEALTH					,		
I, HEREBY, APPLY FO	R THE NECESSARY TEST IN	•	JCT (OR RECONSTRUC	T) A SEWAGE DISPOS	SAL SYSTEM.	CONTRCT	Or near
PROPERTY OWNER	mind Winfi	2 ID		2 6	F3 / 01	2 Joan Cash	PERSON
ADDRESS	O 2331	R ock	wille ME) Xab.	NE	7302900	
ROSPECTIVE BUYER	,	 	ì				
ADDRESS				PHON	Œ		
ROPERTY LOCATION:							
UBDIVISION Clark	suille Rid	<u>z</u>		LOT NO.			
OAD AND DESCRIPTION	White gate	PJ	Clar	Ksalle.	2102	9	
_	right past		•				
	-PARCEL # 171	•	· .				
	TANCEL V			705 0.00		•	
				TYPE BLDG		Y DWELLING OR COM	MERCIAL)
HE SYSTEM INSTALLED I	UNDER THIS APPLICATIO	N IS ACCEPTABLE	ONLY UNTIL PUBL	IC FACILITIES BEC	OME AVAILABLE	E. I FULLY UNDERST	AND THE
EE CONNECTED WITH TH	HE FILING OF THIS PERC	TEST APPLICATIO	N IS NON-REFUND	ABLE UNDER ANY	CIRCUMSTANCE	S. I ALSO AGREE TO	COMPLY
VITH ALL M.O.S.H.A. REQ	DUIREMENTS IN TESTING	THIS LOT	from Coch	iran (a	roget) for	PO Box 23	1n field 31
•		(•	·	•		M. M. Dass
PROVED BY			_ FOR		DATE		
JECTED BY			_ FOR		DATE		
LD PENDING FURTHER TES	rs				DATE		
ASONS FOR REJECTION OR	HOLDING 5-31-8	8 Puc.	SATIS FACTOR	2 - 1Holes	to 161. Co	etifical a	THE
	Time of BH					•	-

THIS IS NOT A PERMIT

HD-216

Soil PROFILE

RED BR
S. HCLAY
LM
10-150/6
FRAJS

TAN
L4-BROWN
SIH SAND
COAM
HISHLY
MICACOUS
15-200/6
C. Fx.

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Sive to	
5,000	
COCN BLOW 1107	
705	·
INDICATE-NORTH - NAME ADJOINING ROADWAY AS BASE LINE. WATEGATE Rd.	

		THE BAY					
DATE	TEST NO.	DEPTH	1	-WET	1	1" DROP	
			START	STOP	START	STOP	TIME
5/31/88	15	5-	12:03	12:04	12:04	12:06	ZMIN
31/88	IM	9-	12,03	12:07	17:07	12:12	JUIN
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	2v	13	UNIFORM	suil be	low 4.0°		
	37	4,5 13,5	12:00	12:01	12:01 below 4.	12:04	BMIN
	るv	13,5	UNIFORM	Soil	below 4.	6-	
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REMARKS	
TYPE OF SOIL Chester LOAM	
TESTED BY 5 Mel	J, COCRUM ALSO PRESENT SKIP

Clarksulle Ridge

Lot 13 Nearest Well 125' to Property Line White Jei

· previous pere holes

DES161)

pare field 75 x 125 low got nand.

Low habe 80° of left line, 20° off nand.

Low all tales to fed above pattern on

Constant.

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HOWARE	COUNTY		. / .		LICOTT CI	
	3 bedroom	-750gs	Cople Tan		ISTRICT	T. A. A.
dr.	Done well 11 ft	X dia.	by 10 H. Se	ex below	_DATE_9/	21/65
to	a Sulet lowted	38 1	In the h	ont fre	secty	: • •
les	re and 153 ft.	of the	litt side of	rogerty-	line	
a	seen when for	ligthe &	St from 17.	Ahitigal	E road	
		0			Solet	
TO: THE COUNTY F		•				
<i>j</i>	PLY FOR THE NECESSAF	OV TECTE IN C	APPER TO CONST	PHOT IND DE	CONSTRUCT	A CEW
DISPOSAL SYSTEM.	PLY FOR THE NECESSAR	CI TESTS IN C	PRDER TO CONST	ROCI TOR RE	CONSTRUCT	A SEW
J.	Raymond Winfield	REA	HK Const	Car		
PROPERTY OWNER	Raymond Winiteld	<u> </u>	TA CONST.	<u>~~</u>		······································
ADDRESS	Laurel Pines Apt.	, Laurel, 1	Id.	_PHONE7	25-7069	· .
DECREETY LOCATIO	NAI .	K. K. K.	1 100 100			
PROPERTY LOCATIO	/N:					ur.
SUBDIVISION	Clarksville Rid	ge		_LOT NO	3	·····
DOAD AND DESCRIE	PTION 6658 Whitegat	Fo Rd	والمراجعة الماسيين المهرعمة	e Blance de la Company	ing the second s	All the second
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NOAD AND DESCRIP						
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OCCUPANTPERSON TO CONST	RUCT SYSTEM			PHONE	7	
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OCCUPANT PERSON TO CONSTI	RUCT SYSTEM		ТҮР	PHONE	NUMBER OF BEOR	OOMS
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OCCUPANT PERSON TO CONSTI ADDRESS SIZE OF LOT IF NOT SINGLE RES	acre	FOR 7	TYP AND STEM	PHONE		OOMS
OCCUPANT PERSON TO CONSTI ADDRESS SIZE OF LOT 1 IF NOT SINGLE RES SIGNATURE OF APP	acre		lagge Ong No	PHONE		OOMS
OCCUPANT PERSON TO CONSTI ADDRESS SIZE OF LOT 1 IF NOT SINGLE RES SIGNATURE OF APP APPROVED BY REJECTED BY	acre sidence describe	FOR	CASA NO. (KIND OF SYSTEM)	PHONE E BLDG. DATE DATE		COMS
OCCUPANT PERSON TO CONSTI ADDRESS SIZE OF LOT IF NOT SINGLE RES SIGNATURE OF APPROVED BY	acre sidence describe	FOR	(KIND OF SYSTEM)	PHONE E BLDG. DATE DATE	9-28-6	OOMS
OCCUPANT PERSON TO CONSTITUTE ADDRESS SIZE OF LOT 1 IF NOT SINGLE RES SIGNATURE OF APP APPROVED BY REJECTED BY HOLD PENDING FUE	acre sidence describe	FOR	(KIND OF SYSTEM) ON THE STREET OF SYSTEM)	PHONE E BLDG. DATE DATE	9-28-6	OOMS
OCCUPANT PERSON TO CONSTITUTE ADDRESS SIZE OF LOT	acre SIDENCE DESCRIBE PLICANT CONTINUE RITHER TESTS	FOR	(KIND OF SYSTEM) ON THE STREET OF SYSTEM)	PHONE E BLDG. DATE DATE	9-28-61	COMS

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	7	INDI	CATE NORTH - NA	ME ADJOINING RO	DADWAY AS BASE	PII4E.	

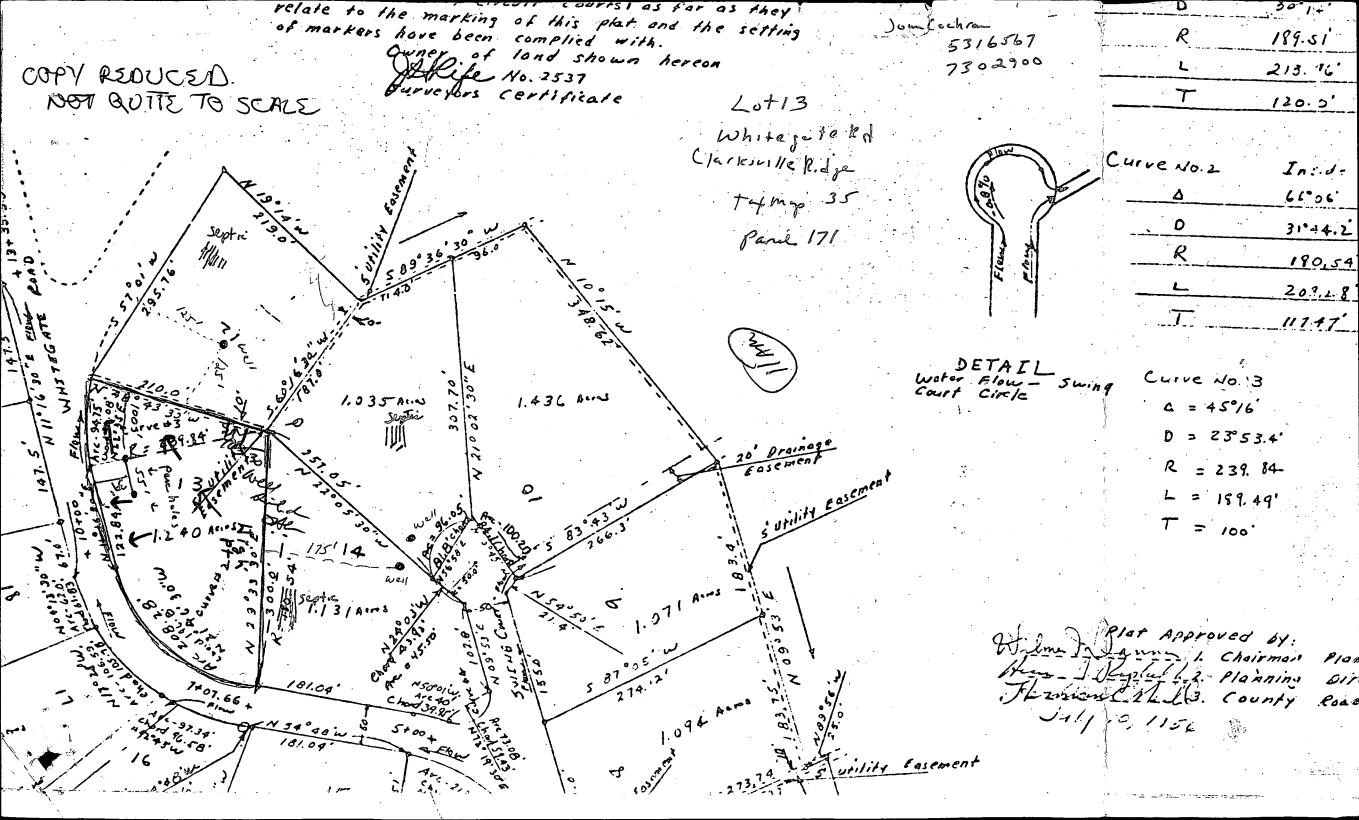
	W/s	lite 9A	TE	Ronge	d ,			
DATE	TEST NO.	DEPTH		-WET		" DROP STOP	TIME	
8-65	1\ Same	9"	2:28	2:3/	2:31	2:35	4 2	_
	2/P.t.	ر کی	2:29	2:3/	2:31	2:33	2 /2	_
	3 Same	9'	2:37	2:39	2:39	2:41	23	_
	4) PM	42	2:38	2:39	2:39	2:40	1 m	
	\$ 100 B 100							
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gights Dayed

SOIL AUGER FINDING Good soil after top 4FT. (Red misa soil

TESTED BY

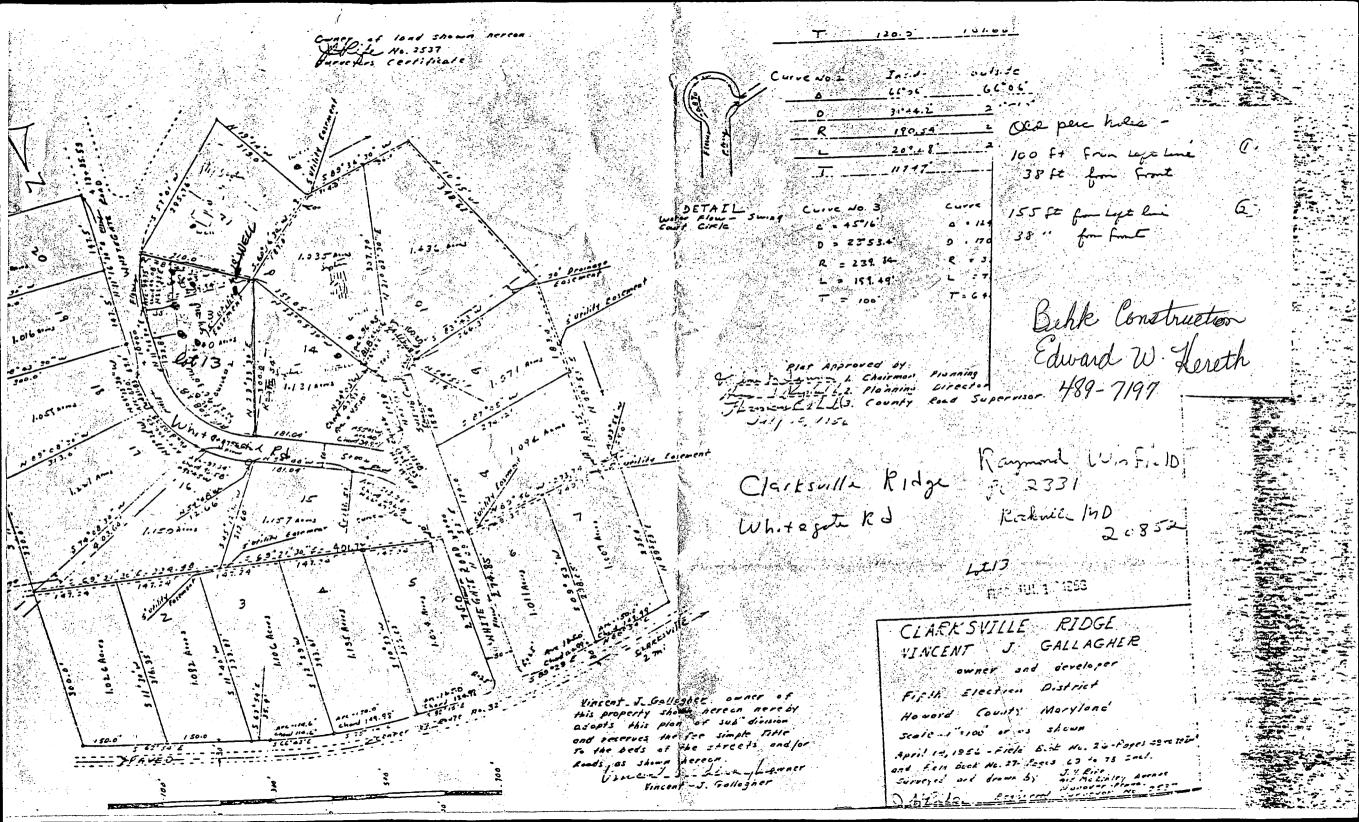
REMARKS



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

ot # _/3	Regis Telep Well Tag Pit 1 2 3.	e <u>4-15-</u> ephone <u>379-</u> tered Plumber hone <u>489-7</u> # <u>HO-88-</u> less Adapter Make <u>Marvar</u> Model # Depth <u>48"</u>
ot # _/3	Regis Telep Well Tag Pit 1 2 3.	tered Plumber hone 489-71 # 140-88- less Adapter Make 44000
ot # _/3	Telep _ Well Tag Pit 1. 2. 3.	hone 489-71 # <u>HO-88-</u> less Adapter Make <u>Varuar</u>
ot # _/3	Telep _ Well Tag Pit 1. 2. 3.	hone 489-71 # <u>HO-88-</u> less Adapter Make <u>Varuar</u>
orsepower NM ltage 110 220	Pit 1. 2. 3.	less Adapter Make <u>Vavar</u>
orsepower NM ltage 110 220	Pit 1. 2. 3.	less Adapter Make <u>Vavar</u>
orsepower NM ltage 110 220	Pit 1. 2. 3.	less Adapter Make <u>Vavar</u>
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rsepower M ltage 110 220	1. 2. 3.	Make <u>Varvar</u>
Nd ltage 110 220 No		Make <u>Varvar</u> Model # Depth <u>48"</u>
110 220 No		Model # Depth <u>48"</u>
110 220 No		Depth <u>48"</u>
220 ' No		1
No		i ·
No	•	
No		
No		
ch installe	d? Yes	No
e pump and o	elecfical	wiring irom
capie g	uarus	Other
ıg	Wel	l data
pe	1.	Depthft
ze	2.	Yield GPM
SF and/or BO	CA 3.	Static water
de approved		level ft
pth of supp	ly 4.	Will water sup
		be disinfected
		installer?
	zeF and/or BO de approved pth of supp ne ility to no	pe 1. ze 2. F and/or BOCA 3. de approved pth of supply 4. ne



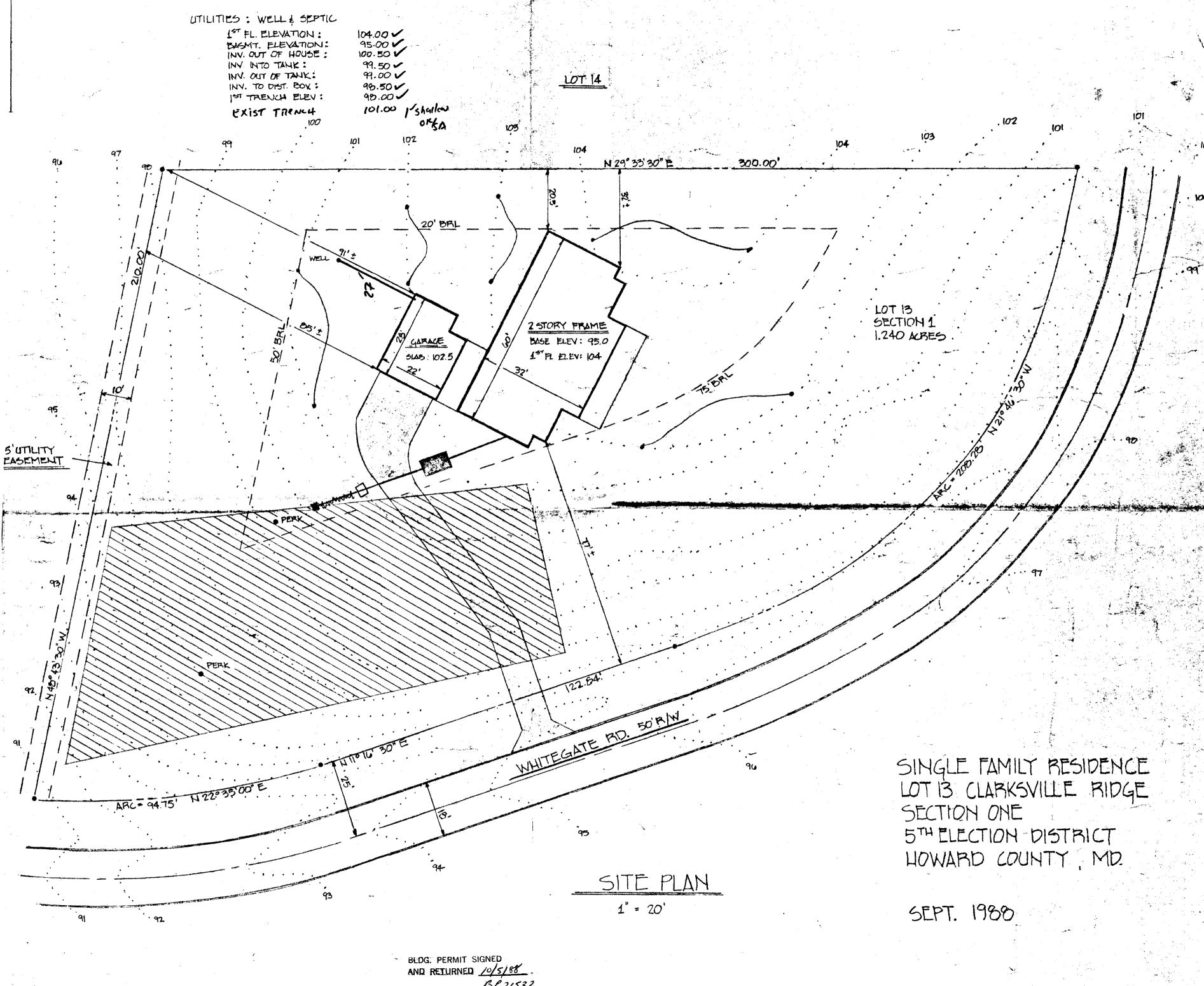
	·	EMERGENCITTEME NO. IF ANT		
R	1 1266 SEQUENCE NO.	STATE OF I	MARVIAND	STATE PERMIT NUMBER
٥	(DP USE ONLY)	PERMIT TO		DALKE INDER
-1	THIS NUMBER IS TO BE PUNCHED	please pri		fill in this form completely 79
	IN COLS. 3-6 ON ALL CARDS)	picaco pii		the state of the s
	Date Received (APA)	, •	B 3	LOCATION OF WELL
	OWNER INFORM	IATION	1 2 (1) (2) (1) (1)	
-	Brull Base Le Wa		8 COUNTY	21 •
1.	15 Last Name Owner	First Name 34	CHARKEV	1440 11/1/10/10
•	INTOUSHAFFERS	Mikkley	23 SUBDIVISION	42
	36 Street or RFD	55	SECTION L	LOT 23
	m + 4/kv	n 0 3 1 2 2 1	44 40	
_	57 Town 7	70 State 72 Zip 76	52 NEAREST TOWN	
	DRILLER INFORMATI	ON	MU EC EDOM TOWN (as Official town Z K MI
,	Joseph K. Marson	238	MILES FROM TOWN (ent	er U.Ir In town)
	Driller's Name	77 License No. 80	B 4	- · · · · · · · · · · · · · · · · · · ·
	Firm Name	KL DEILLING	DIRECTION OF WELL FROM	11 NEAR WHAT ROAD 30
	5512 Ridge Rd. Int. 1	Firm. Tard. 21771	TOWN (CIRCLE BOX)	NORTH
	Address	0	N	N
	Signature P. Mary	7/25/88 Date	N 8 N E 8 -9	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) (CIRCLE APPROPRIATE BOX)
В	2 WELL INFORMATION	N		WEST S EAST SOUTH
Ŧ	<u> </u>		(TOWN)E	South
	APPROX. PUMPING RATE (GAL. PER MIN.)	8 12		34 / 9 0 37
l	AVERAGE DAILY QUANTITY NEEDED		SW S 8=9	DISTANCE FROM ROAD
l	(GAL. PER DAY)	20	8-9 S 8-9	ENTER FT or MI
	USE FOR WATER (CIRCLE APPR	ROPRIATE BOX)	8	NOT TO BE FILLED IN BY DRILLER
l				HEALTH DEPARTMENT APPROVAL
	HOME (SINGLE OR DOUBLE HOUSE)		Howas D	a 41744
	IRRIGATION)	Adhicolional	COUNTY NAME	COUNTY NO.
	INDUSTRIAL, COMMERCIAL, STATE		STATE	INSERT S
	22 OTHER (REQUIRES APPROPRIATION		SIGNATURE DATE ISSUED	INSERTS 41
	PUBLIC OR PRIVATE WATER COMPA P APPROPRIATION PERMIT AND STATE		080388	2/3/89
	APPROVAL)		NORTH STATE	D SIGNATURE EXP. DATE
ļ	T TEST, OBSERVATION, MONITORING	(MAY REQUIRE	NORTH 7 7 3 0 0	0 EAST 0 8 2 5 0 0 0
⊢	APPROPRIATION PERMIT)		50	55 5/ 63
	APPROXIMATE DEPTH OF WELL		SHOW MAJOR FEATUR BOX & LOCATE WELL _	ES OF 8/9/88 LATE MM
L	APPROXIMATE DEPTH OF WELL	FEET 28	WITH AN X	
l		. NEAREST	SOURCES OF DRILLING	S WATER
	APPROXIMATE DIAMETER OF WELL 6	INCH	1. NOEL S	
	METHOD OF DRILLING	(circle one)	2. 3.	
l	BORED (or Augered) JETTED	Jetted & DRIVEN		rn.
	20	ROTARY (Hydraulic Rotary)	WRITE THE BOX NUMB FROM THE MAP HERE	er e
	CABLE REVerse-ROTary	DRive-POINT	t in the terms of	X.
	OABLE NEVOISE HOTELY	<u> </u>	E 820	5
ŀ	other	<u></u>	1 6 6 6	₹ _ 000
	REPLACEMENT OR DEEPEN	ED WELLS	1990	000
	(CIRCLE APPROPRIATE I			OW SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVE
	THIS WELL WILL NOT REPLACE AN	EXISTING WELL	DISTANCE FROM WELL	TOWNS AND HOADS AND GIVE TO NEAREST ROAD JUNCTION
	THIS WELL WILL REPLACE A WELL		N Clarkemile	
1	ABANDONED AND SEALED		N Clarke	123
İ	39 S THIS WELL WILL REPLACE A WELL AS A STANDBY	THAT WILL BE USED		-/d
	D THIS WELL WILL DEEPEN AN EXIST	ING WELL		
	PERMIT NUMBER OF WELL TO BE REPLA	•		
	(IF AVAILABLE) 41	ACED ON BEEN ENDED		* / P
L			wing con	an (19
l	Not to be filled in by driller (OEP	USE ONLY)	Day	13
ı	APPROP. PERMIT NUMBER	GAP		$I_{\widetilde{\mathcal{A}}}$
	54	63		
1	FORCE WRITE PERMIT NO. K U -	88-0074	0.0	123
_	67 68 IN BOX 70 71 72	73 74 75 76 77 78 79	web	(/5"
	SPECIAL CONDITIONS	aecon?	6~ , ,	
1	EDHARAIS. 37	6-8174 77	6-5704	

COUNTY

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C 1 9606 SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
THIS BEAS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 41744
DATE Received DATE WELL COMPLETE B 13 DATE WELL COMPLETE 15 20	Depth of Weil 22 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL"
	The Critical first name	
SUBDIVISION CLAIRSUM RIDGE	TOWN _{	1 1. 1. 1 5 M 28 2 11 8 5 60 .
WELL LOG	GROUTING RECORD	LOI /3
Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL	C 3
THICKNESS AND IF WATER BEARING	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed) FROM TO Check if water bearing	NO. OF BAGS NO. OF POUNDS	PUMPING RATE (gal. per min. 5 5 5 1
SHAD Stepe 0 35	GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE
2 mg 53 Au	from 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	WATER LEVEL (distance from land surface) BEFORE PUMPING
Grand Mills 35 26 v	casing CASING RECORD	WHEN PUMPING
Gray Mich 33 des v	insert STEEL CONCRETE	TYPE OF PUMP USED (for test)
	code PL OT PLASTIC OTHER	A air P piston T turbine
	MAIN Nominal diameter Total depth . CASING top (main) casing of main casing	C centrifugal R rotary Other (describe 27 below)
	TYPE (nearest inch) (nearest foot)	J jet S submersible
	60 61 63 64 66 70 E OTHER CASING (if used)	
	diameter depth (feet) H inch from to	PUMP INSTALLED
	C A S S S S S S S S S S S S S S S S S S	DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES OF NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	screen type <u>SCREEN RECORD</u>	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
	or open hole ST BR HO insert appropriate STEEL BRASS OPEN	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX -SEE ABOVE:
	code below PLASTIC OTHER	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
	C 2	PUMP HORSE POWER 37 41 PUMP COLUMN/LENGTH
	DEPTH (nearest ft)	(nearest ft.) CASING HEIGHT (circle appropriate box
	R 8 9 11 15 17 21 H ₂ S	and enter casing height) LAND SURFACE (nearest
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED	C 23 24 26 30 32 36 E 3 E 3 E 3 E 3 E 3 E 3 E 3 E 3 E 3	49 below below foot)
WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED	N 38 39 41 45 47 51 SLOT SIZE 1 2 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST OF SCREEN 56 60 INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
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	from to GRAVEL PACK	(MEASUREMENTS TO WELL)
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68	
DRILLERS IDENT. NO.	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) W Q	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	

COUNTY



BP21532 8H