HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXX992XX 313-2640

Tax IO - 05414776

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

43090

5th

Jack Fyock Septic Service		IS PERMI	TTED TO INSTALL X	_ALTER
ADDRESS			PHONE 988-9270	
SUBDIVISIONBrierly	LОТ16	ROAD	18 Russell Zepp D	rive
PROPERTY OWNER	Garol Shap	<u> </u>	= Carol Shap	
ADDRESS				
SEPTIC TANK CAPACITY 1250 GALL	.ONS		Addition.	Dock
NUMBER OF BEDROOMS 4		•	BUDG. PERMIT SIGN	(ED
180 SQUARE FEET PER BEDROOM	1		AND REJURNED /	1-30-95
LINEAR FEET OF TRENCH REQUIRED $\frac{24}{4}$	40		237000 77	02115
TRENCHES - Trench to be 3 feed depth 6 feet below	et wide. Inlet 4 w original grade. 2 feet of stone be	Effective area	begins at 4 feet	m maximum below
LOCATION - Starting from the	right front lot of the line and 95 feet irections. MAINT	corner, place the coff this same	distribution box	enches on
NOTES - No trench to exce	ed 100 feet in len bove on septic tar	igth. Provide 6"	- 8" diameter ci	eanout and
cap to grade of a	bove on septic tan	IR. Of 11.6 3/191	/	
			-	
PLANS APROVED BY Mar	k Rifkin		DATE6	/17/94
COVER NO WORK UNTIL INSPECTED AND APPROV	/ED			•
NEITHER THE HOWARD COUNTY COUNCIL NOR TI	HE HEALTH DEPARTMENT IS RI	ESPONSIBLE FOR THE SUCC	ESSFUL OPERATION OF ANY S	SYSTEM
NOTE: CLEANOUT REQUIRED EVERY 70 FEET (ACCEPTABLE.	OF SEWER LINE AND/OR AT	90° SWEEPS IN LINES FRO	M HOUSE TO DRAIN FIELDS	, 90° ELBOWS NO
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. T. AUTHORIZED)	ANK, DISTRIBUTION BOX TRE	NCHES) TO BE 100 FEET F	ROM WELL (UNLESS OTHER)	WISE SPECIFICALL
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR	RINSPECTION BEFORE AND AF	TER PLACING GRAVEL IN TR	ENCH(ES)	

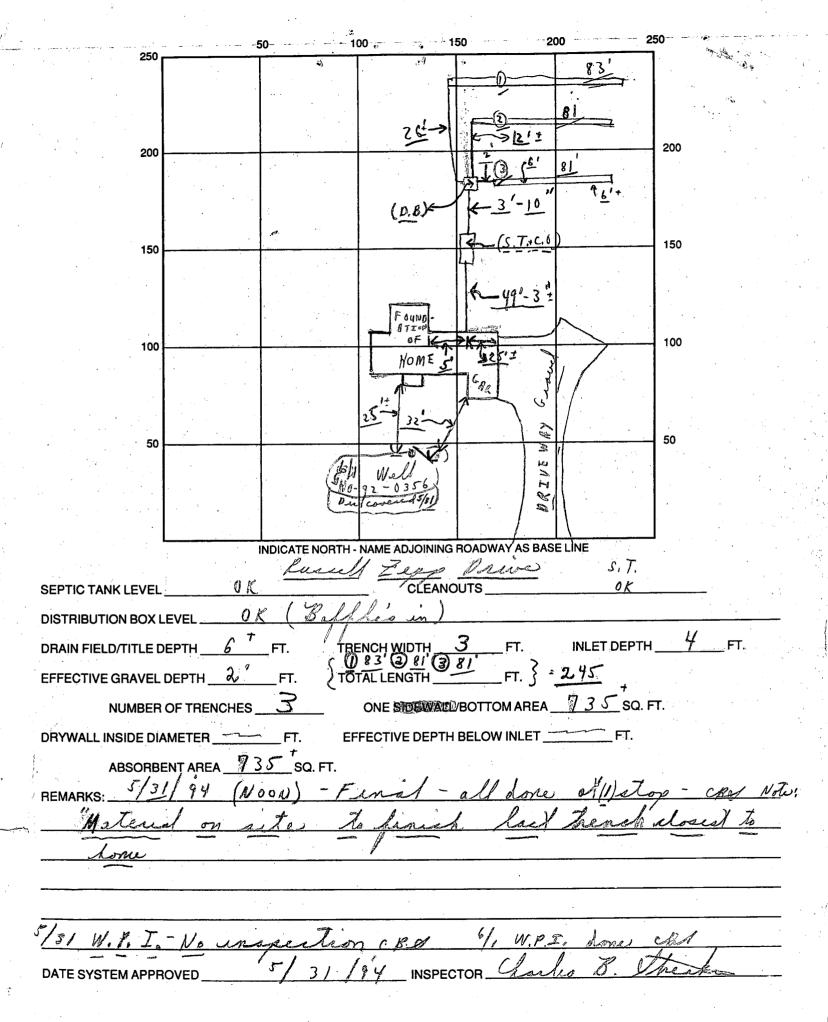
PERMIT VOID AFTER TWO YEARS

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: 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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES



APPLICATION

PERCOLATION TESTING

A 43090

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043

DATE 9-20-88

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.
PROPE	ERTY OWNER KYSSELL ZEPP CARO Shap + Eric SANTMYER
٠	ADDRESS 13790 HIGHLAND RD PHONE \$541-2797
PPOSI	DECTIVE BLYER HENRY L. BLEVINS
rkosi	ADDRESS 3600 WATERSVILLE RD PHONE 795-2337
	MT.AIRY, MD 21771
	VISION ZEPP SUBDIVISION LOT NO. 1966 On prelim
SUBDI	
ROAD	AND DESCRIPTION HIGHLAND ROAD HOWARD CO
2	21P: 21029 (13818 KussEll ZEPP ROAD)
	MAP 34 PARCEL # 7
	OF LOT 3.05 AC = TYPE BLDG SINGLE FAMILY
SIZE C	SF LOT
	en e
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
	a/20
WITH	ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.
	(SIGNATURE OF APPLICANT)
APPRO	OVED BY DATE
REJEC	TED BY DATE
HOLD	PENDING FURTHER TESTS DATE
REASC	ONS FOR REJECTION OR HOLDING
	BLOG. PERMI MOTE COLL
	AND RETURNED 3/3/49
	Seual # 53475-SFD

THIS IS NOT A PERMIT

SOIL PROFILE

O

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

<u> </u>	1	N. C.	PRE-WET TEST - 1° DROP				
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
3 A/B	(QS	10	3=10	3:13	-3-13	3:17	4
1	61	13	clay >	6 4k	-5 10	2 - Fra	95
		e e i i e contratación.			e e e e e e e e e e e e e e e e e e e	and the second second	
				1.11			- : <u> </u>
	,						
				,			

REMARKS		_
TYPE OF SOIL		
TESTED BY	ALSO PRESENT	_

APPLICATION

PERCOLATION TESTING

43090

DISTRICT

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.	
0000	KVSSELL ZEPP	
FRUP	ADDRESS 13790 HIGHLAND RB PHONE 8541-2797	
PROS	ECTIVE BUYER HENRY L. BLEVINS	
	ADDRESS 3600 WATERSVILLE RD PHONE 795-2337	<u> </u>
PROPE	RTY LOCATION:	
SUBDI	ISION ZEPP SUBDIVISION LOTNO 19	
3000 1	NO DESCRIPTION HIGHLAND ROAD HOWARD CO	
ROAD	ND DESCRIPTION 1-17 STILL TO THE STILL THE STI	
_	1P: 01029	
TAV 1	AP PARCEL # 7	
SIZE C	3.05 ACT	·Y
	(SINGLE FAMILY DWELLING OR COMMERCE	
THE	YSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND	THE
	TOTAL INSTRUCED GROWN THIS ATTECHNICATION IS ACCEPTABLE ONLY UNTIL PUBLIC PACILITIES BECOME AVAILABLE. I PULLY UNDERSTAND) I HE
FEE (ONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO CO	MPLY
WITH	ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT	
	(SIGNATURE OF APPLICANT)	
A 9880	ED BY FOR DATE	
AFFRO	DATE	
REJEC	ED 8Y DATE	
HOLD	ENDING FURTHER TESTSDATE	
	*	
REASC	S FOR REJECTION OR HOLDING	

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 461-9933

LOT 19 16 on prelion A43090

yelhorn

X= 6 180 BBR Inlet 4

Bottom C

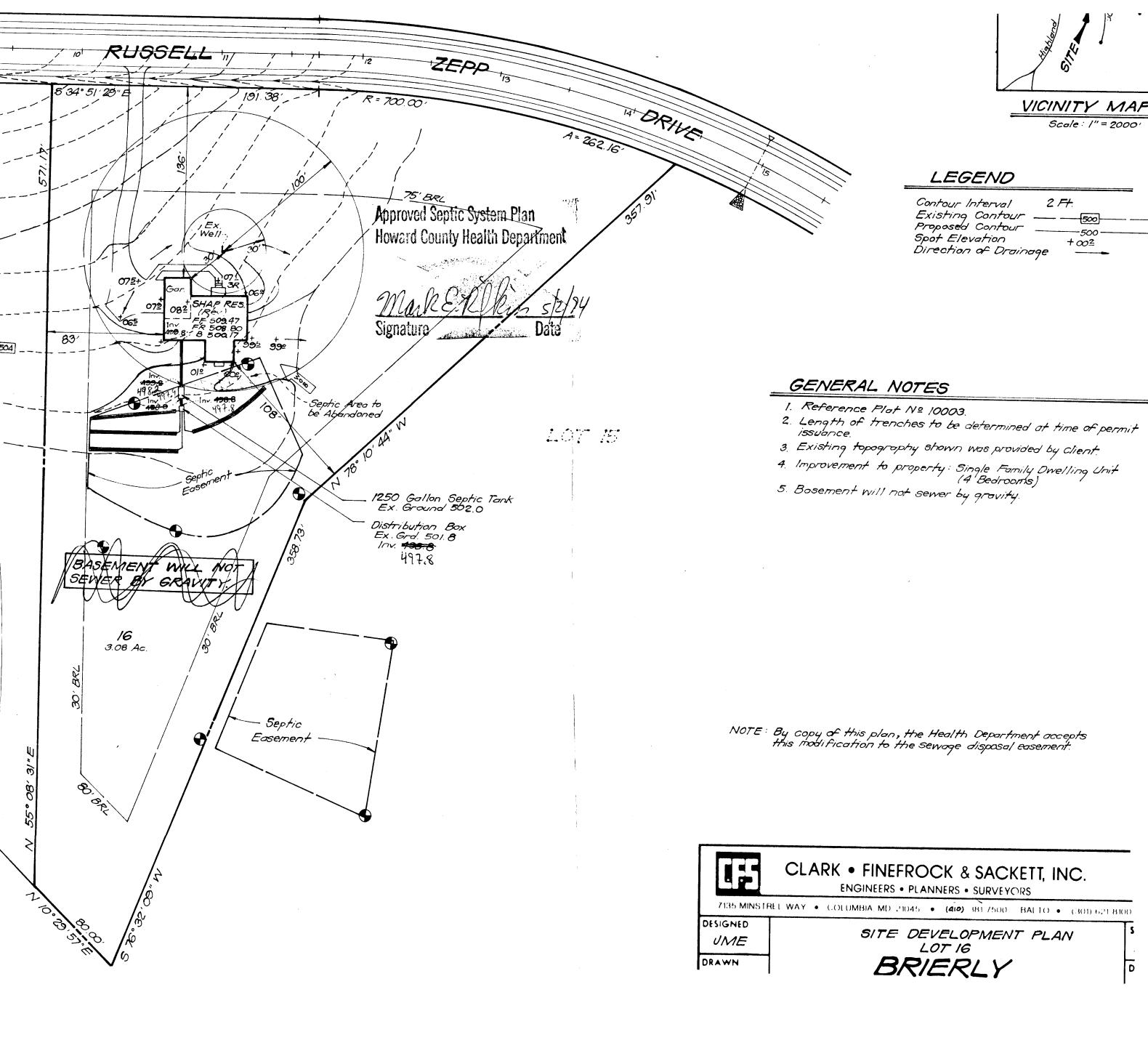
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

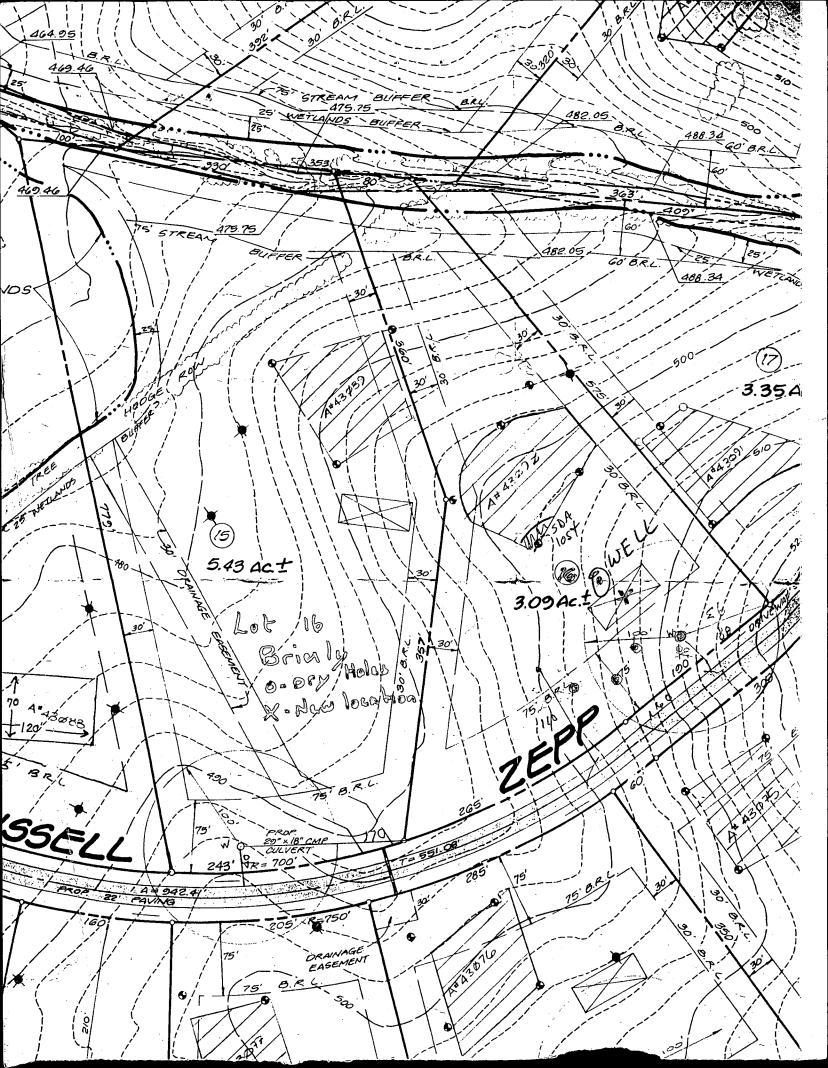
	7507.10	050711	PRE-	WET	TEST -	1" DROP		
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3 9/89	1 A	5/3	11:33	11:37	n: 37	》:"	3 10	
1	IV	11/2	see	Prof	ile			
	2 M	y 5	12.21	12:27	LT MON	12:38	11	
	2V	1/5	clay to	ta 10-12	-90-fraces a	h.+ gran	sang 1 guar	zbel.
•	35	54	11:50	11:51	11:51	11:53	2.	
•	3V	13	clay fo	ybe	iges.s.	, ·	9	T0295
	45	45	11:55	11:57	11:57	12:01	F	
	YK	No	clay to	35 to	s.s. loan	1452	frag	5
	(BM	5	12:47	0 10	NOTM	DVE	گ در د	
	5V	/3	some anar	ti. Fina	5 1090 C	Tour to	52-6	(

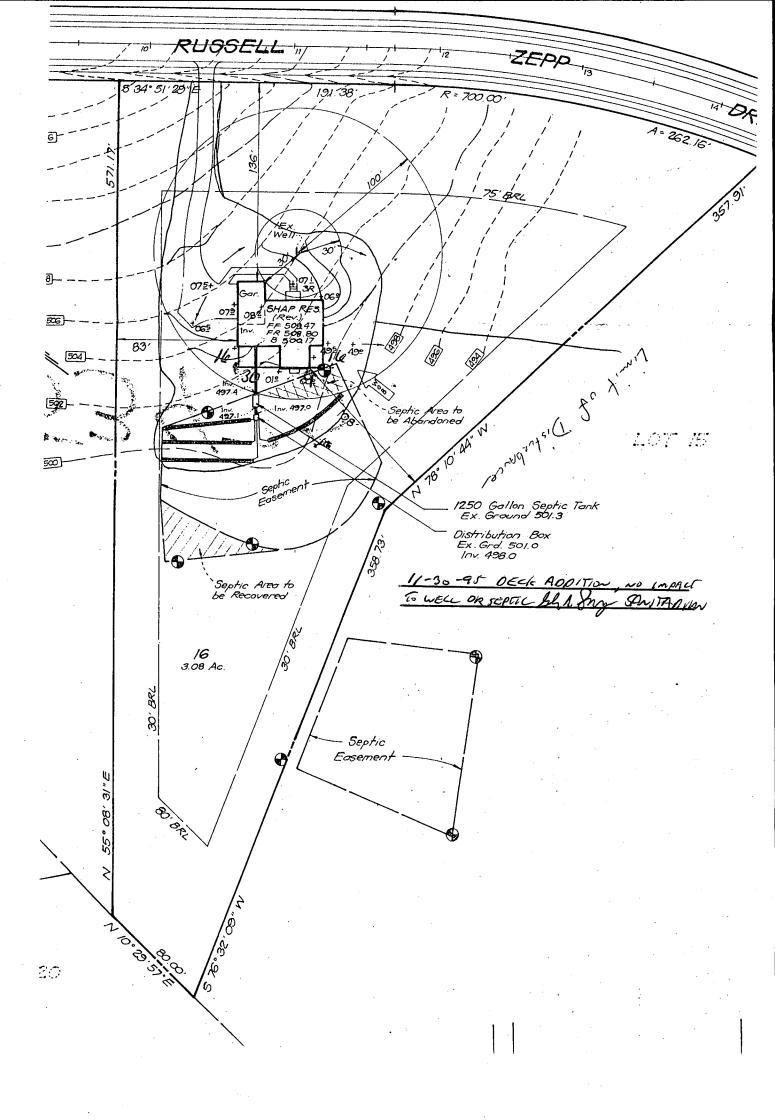
cont d

ON REXT HOLES (DO) 3 + 4 DUG PER PLAT USED-GO+6

SO PRESENT







C 1 6825 SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON A&L CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER A-43090
ST/CO USE ONLY DATE Received DATE WELL COMPLETE	Depth of Well	PERMIT NO. FROM "PERMIT TO DRILL WELL"
0 3 2 4 9 3 15 20	22 3 0 0 26 (TO NEAREST FOOT)	4 7 5 HO - 42 - 10 95 28 29 30 31 32 33 34 35 36 37
OWNER <u>last name</u>	ASCACIONES Fold 70 A Tirst name	
STREET OR RFD RS ROSE ROSE ROSE ROSE ROSE ROSE ROSE R	Sell Zoap A- Tirst name TOWN C	LOT 16
WELL LOG Not required for driven wells	GROUTING RECORD yes no WELL: HAS BEEN GROUTED	C 3
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL Y 44 44	PUMPING TEST
THICKNESS AND IF WATER BEARING DESCRIPTION (Use FEET Check if water	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sneets if needed) FROM: 10 bearing	NO. OF BAGS NO. OF POUNDS GALLONS OF WATER	PUMPING RATE (gal. per min. 11 15 15
Overburden 0 15 Brown Shale 15 45	DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE MEASURE PUMPING RATE
Gray Rock 45 300	from 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	WATER LEVEL (distance from land surface) BEFORE PUMPING
(backfilled)	casing CASING RECORD	WHEN PUMPING
8ell 31 300' Dry (backfilled)	insert STEL CONCRETE	TYPE OF PUMP USED (for test)
Well #2 300' Dry (backfilled) Well #3 300' Dry (backfilled)	code below PL OT	A air P piston T turbine
	MAIN Nominal diameter Total depth	C centrifugal R rotary O other (describe
	CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	27 27 below)
		J jet S submersible
	60 61 63 64 66 70 E OTHER CASING (if used)	
	diameter depth (feet)	PUMP INSTALLED
	A S	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO)
	N G	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
	screen type SCREEN RECORD or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)
	appropriate STEEL BRASS OPEN BRONZE HOLE	IN BOX - SEE ABOVE: 101 A 29 CAPACITY:
	below PLASTIC OTHER	GALLONS PER MINUTE (to nearest gallon)
	C2	PUMP HORSE POWER 37 41 PUMP GOLUMN LENGTH
	DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box
	E 1	+ above and enter casing height)
	H 2	LAND SURFACE (nearest
CIRCLE APPROPRIATE LETTER	C 23 24 26 30 32 36 R g 3	49 50 51
WHEN THIS WELL WAS COMPLETED	R 38 39 41 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION	SLOT SIZE 123(NEAREST	BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES.
P WELL THEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	OF SCREEN 1 1 1 INCH) from to	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE-	GRAVEL PACK	110
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	FLOWING WELL INSERT F IN BOX 68	NIA
DRILLERS IDENT: NO (OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
DRILLERS SIGNATURE	T (E.R.O.S.) W Q	
(MUST MATCH SIGNATURE ON APPLICATION)	70 72 74 75 76	
SITE SUPERVISOR (sign. of driller or journeyman- responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	
and the state of t	COUNTY	

				
B 1 8502 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERM	MIT NUMBER
(DP USE ONLY)	/ ·	ERMIT TO DRILL WELL	IIIAI IGI2	
1 2 3 (THIS NUMBER IS TO BE PUNCHED	· •	4	<u> </u>	1-100112
IN COLS. 3-6 ON ALL CARDS)	🦻 "please pr	int or type	in this fo	rm completely ⁷⁹
Date Received (APA)	4	B 3	10017011 05 115	. D 115/25
<u> हिंदोना गर्गन</u>	1704	1 2	LOCATION OF WEL	IK 95003
OWNER INFORM	ATION			3/31/92
		HOMACIA		40.00
1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	8 COUNTY	<u>21</u>	
15 Last Name Owner	First Name 34	130 180111		
1 113243 Westmen	TH LANG	23 SUBDIVISION		42
36 Street or RFD	å 55	SECTION	LOT	
1 (1) a (V S) 1 1 1 1 () T	W 21029	44 46	48 50	
57 Town 70	State 72 Zip 76	CL/ 4 C \ths \r	\	
		52 NEAREST TOWN		71
DRILLER INFORMATION		MILES FROM TOWN (ente		MI
Sandy B. cochran	1 2 0	MILES FROM TOWN (ente	73	76 77 78
Driller's Name	77 License No. 80	B 4		
G. Edgar Harr Sosn' C	orp.	1 2	KUSSEII ZO	epo Drive
Firm Name 12047 Falls Road Coc		DIRECTION OF WELL FROM	11 NEAR WH	
	keysville 21030	TOWN (CIRCLE BOX)		i incomi
Address	5/18/92	N N		NORTH N
Dany of work som	N-minth)g	NW B NE	ON WHICH SIDE OF	ROAD
Signature	Date	8-9	(CIRCLE APPROPRIA	WEST EAST
B 2 WELL INFORMATION	•			SOUTH
1 2 APPROX. PUMPING RATE (GAL. PER MIN.)	 	(TOWN) E		
AFFROX. FOWEING HATE (GAL. FER WIIN.)	<u></u>	** /	34 7 C	27
AVERAGE DAILY QUANTITY NEEDED 1	12		DISTANCE	FROM ROAD
(GAL PER DAY)		SW		
14	20	8-9 S 8-9	EN	TER FT or MI
USE FOR WATER (CIRCLE APPRO	OPRIATE BOX)	- °	NOT TO BE EN L'ED IN D	38 39
			NOT TO BE FILLED IN BY HEALTH DEPARTMENT A	
D HOME (SINGLE OR DOUBLE HOUSEHO	OLD UNIT ONLY)		HEALTH DEFAINTMENT A	IFFROVAL .
F FARMING (LIVESTOCK WATERING & AG	RICULTURAL	Howard		H43090
L IRRIGATION)		COUNTY NAME		COUNTY NO.
INDUSTRIAL, COMMERCIAL, STATE AND		STATE	•	
22 L OTHER (REQUIRES APPROPRIATION PE	•	SIGNATURE		INSERT S
PUBLIC OR PRIVATE WATER COMPANY	(REQUIRES	DATE ISSUED	Mark C AND	2 -1-105
P APPROPRIATION PERMIT AND STATE H	EALTH DEPARTMENT	1 10611194	MUUK E. Kefy	cm 12/1/1/12
APPROVAL)			SIGNATURE	EXP/DATE/
TEST, OBSERVATION, MONITORING (MA	Y REQUIRE	NORTH 5 0 1 0 0	O BAST O 8 O	1 000
APPROPRIATION PERMIT)		50	55 57 .	63
		SHOW MAJOR FEATURE	S OF	
APPROXIMATE DEPTH OF WELL 200	FEET	BOX & LOCATE WELL		1 (
	28	WITH AN X		
· (SOURCES OF DRILLING	WATER	
APPROXIMATE DIAMETER OF WELL	NEAREST INCH	1.		
	117077	2.		1. 1
METHOD OF DRILLING (ci	rcle one)			
BORED (or Augered) JETTED	Jetted & DRIVEN	3.		
20		WRITE THE BOX NUMBER	ER January	
37 AIR-ROTary AIR-PERcussion	<u>R®TARY</u> (Hydraulic¶Rotary)	FROM THE MAP HERE		- 13 7 · · · · ·
<u>CABLE</u> <u>REV</u> erse <u>-ROT</u> ary	<u>DR</u> ive- <u>POINT</u>	<u> </u>		/
			2	
other		ا ا		
		N 50₩	000	
REPLACEMENT OR DEEPENE		2000 1 2005 200 250 20		
(CIRCLE APPROPRIATE BOX	C)	ł .	W SHOWING LOCATION (
N THIS WELL WILL NOT REPLACE AN EX	USTING WELL	DISTANCE FROM WELL	TOWNS AND ROADS AND	
THIS WELL WILL REPLACE A WELL TH		DIGITATOR THOM WELL	TO NEATLEST HOAD SON	311014
ABANDONED AND SEALED	IAI WILL BL	N	8	
20 ET THIS WELL WILL DEDLACE A WELL TI	AAT WILL BE USED		26	
S AS A STANDBY	IAT WILL BE COLD	1 T	Kussell	
D THIS WELL WILL DEEPEN AN EXISTING	3 WELL		P	/J
			51	160
PERMIT NUMBER OF WELL TO BE REPLAC (IF AVAILABLE) 41	ED OR DEEPENDED		⇒ /	117
(II OVAILABLE) 41	52		=	
Al-1 - L - CHI - L - CHI - L - CHI -	105 011140		21	
Not to be filled in by driller (OEP L	JOE UNLY)	Salar Sa	4	
APPROP. PERMIT NUMBER G	AP	Base Market	. 63	and the second s
ATTIOL LENVIT NOWIDER	المللاتاتا	RETURNED WE AND THE STATE OF TH	2 9 kg	The same of the sa
WRITE -4	00	00 8		0
FORCE M WRITE PERMIT No. H ()-	42-0095	Question Addition	1 DAM	, Rool
67 68 IN BOX 70 71 72	73 74 75 76 77 78 79	DEVINATION	Mary Delice	1 1-0.0
SPECIAL CONDITIONS		10.13.19.112.1.	IIA Y	
SI EGINE OCHDITIONS				£₹,

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SPECIAL CONDITIONS

c ₁ 7849	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.		
1 2 3 (THIS NUMBER IS TO BE PU IN COLS. 3-6 ON ALL CARDS		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 43090		
ST/CO USE ONLY DATE Received	ATE WELL COMPLETE		PERMIT NO. FROM "PERMIT TO DRILL WELL"		
8 13	15 1 7 9 3	22 3 0 0 26 (TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37		
OWNER	Clarksville	SCOUTERS TOWN!	besilla		
ISTREET OR RED	BRIEKLY	SCELL Zeop Dr first name TOWN	iot 16		
WELL LC Not required for d	OG.	GROUTING RECORD yes no WELL HAS BEEN GROUTED	C 3		
STATE THE KIND OF FOR PENETRATED, THEIR (WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST		
THICKNESS AND IF W. DESCRIPTION (Use	ATER BEARING FEET Check if water	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)		
additional sheets if needed)	FROM TO bearing	NO. OF BAGS $\frac{46}{8}$ NO. OF POUNDS $\frac{45}{8}$	PUMPING RATE (gal. per min. 3 15 15 15		
Overburden Brown Shale	$ \begin{array}{c c} 0 & 10 \\ 10 & 26 \end{array} $	GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE Submessible		
Gray Rock	23 300 X	from 48 TOP 52 ft. to 3 o ft. to 48 TOP 52	WATER LEVEL (distance from land surface)		
·		(enter 0 if from surface) casing CASING RECORD	BEFORE PUMPING 17 20		
,		types insert ST CO	WHEN PUMPING 22 25		
		appropriate STEEL CONCRETE CONCRETE PL OT	TYPE OF PUMP USED (for test) A air P piston T turbine		
		PLASTIC OTHER	27 27 27 other		
		MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary (describe below)		
	* * * * * * * * * * * * * * * * * * * *	(nearest inch) (nearest 100t)	jet Submersible		
		60 61 63 64 66 70 E OTHER CASING (if used)	21 21		
		diameter depth (feet) H inch from to	PUMP INSTALLED		
		C A S	DRILLER WILL INSTALL PUMP YES (NO		
)- ZG	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS		
		screen type SCREEN RECORD	EXCEPT HOME USE TYPE OF PUMP INSTALLED		
		or open hole ST BR HO insert STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:		
		code BRONZE HOLE	CAPACITY: GALLONS PER MINUTE		
, .		PLASTIC OTHER	(to nearest gallon) PUMP HORSE POWER		
			PUMP COLUMN LENGTH (nearest ft.)		
·		DEPTH (nearest ft.)	CASING HEIGHT (circle appropriate box		
		A 8 9 11 15 17 21	and enter casing height) LAND SURFACE		
		S 23 24 26 30 32 36	below (nearest foot)		
CIRCLE APPROPRI	NED AND SEALED	E 3 45 45 47 51	LOCATION OF WELL ON LOT		
E ELECTRIC LOG OBTAIN	· · · · · · · · · · · · · · · · · · ·	SLOT SIZE 1 2 3	A SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR		
P WELL CONVERT		DIAMETER (NEAREST OF SCREEN INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES		
THEREBY CERTIFY THAT THIS WELL ACCORDANCE WITH COMAR 26.04	.04 "WELL CONSTRUCTION"	from to	(MEASUREMENTS TO WELL) (2) SSC 1\ 2002 De 100		
AND IN CONFORMANCE WITH ALL ABOVE CAPTIONED PERMIT, AND THE SENTED HEREIN IS ACCURATE AND	HAT THE INFORMATION PRE-	GRAVEL PACK L IF WELL DRILLED WAS			
MY KNOWLEDGE		FLOWING WELL INSERT F IN BOX 68 68	132		
DRILLERS IDENT. NO.	a stranger	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	ě ,′		
DRILLERS SIGNATURE (MUST MATCH SIGNATURE	ON APPLICATION)	T (E.R.O.S.) W Q			
Master 1	his	70 72	.		
SITE SUPERVISOR (sign. of responsible for sitework if dif	driller or journeyman fferent from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR			
		COUNTY			