

7-11-97
10 AM
10/16/97
C.O. 1pm
11/12/97
10:00 PM
10/14/97
9:30

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

313-2640

INDEXED

P 58561

A 48842

DISTRICT 3rd

DATE 7-10-97

DATE SYSTEM APPROVED 11/13/97

INSPECTOR Ann

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 558 Obrecht Road Sykesville, MD 21784 PHONE 795-5674

SUBDIVISION Quarterfield LOT 26 ROAD 3741 Running Springs Road

PROPERTY OWNER Andrew Sonin

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

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

LOCATION - Starting at the front right property corner (at the Cul-de-Sac), place the distribution box 22.5 feet up the right property line and 50 feet off the right property line. Install trenches on contour toward rear lot line.

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

OK KM 4/10/97

7/11/97 Specs revised ALM

PLANS APPROVED BY Ronald J. Pinkley/Mark Rifkin REVISED DATE 03/26/97

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

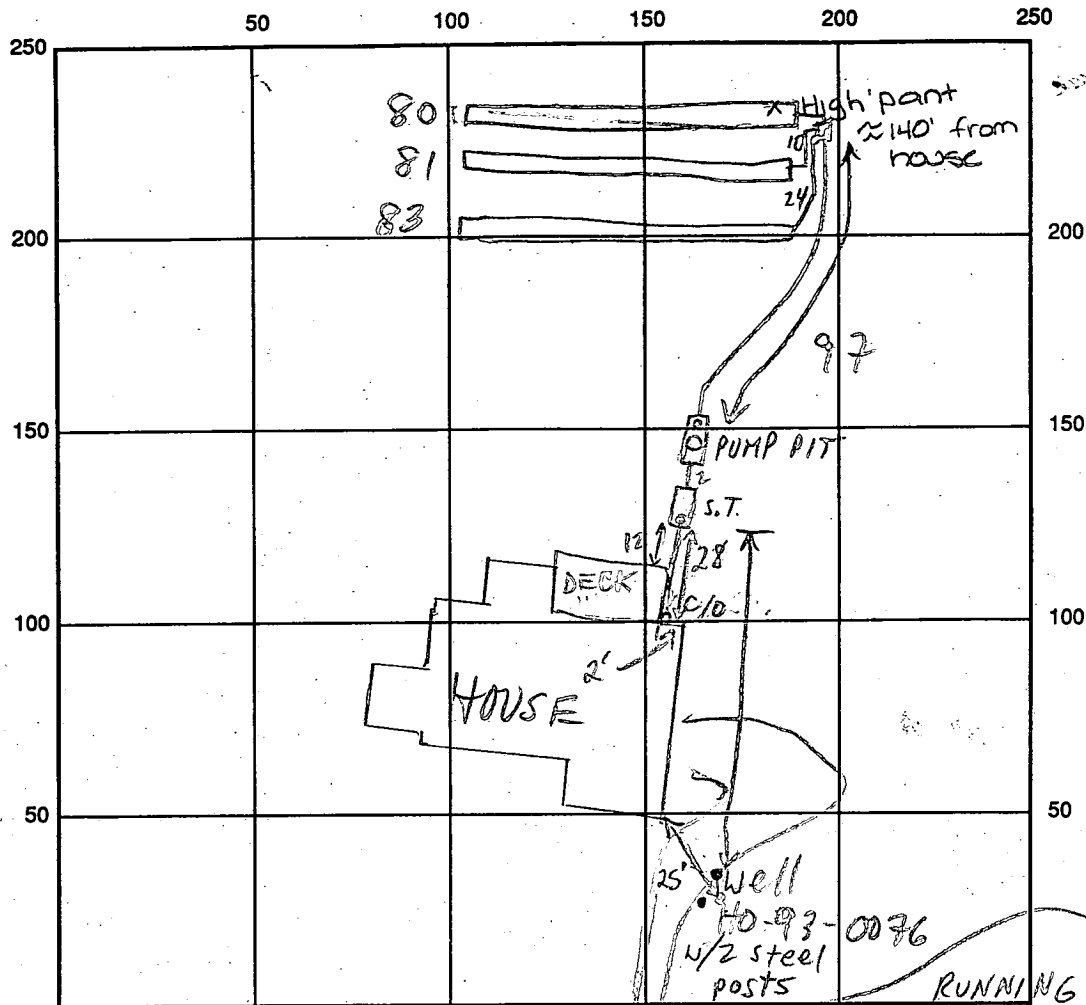
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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**



SEPTIC TANK LEVEL 2-1250 GAL TANKS

CLEANOUTS 8" ON S.T.

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

MH AND 8" ON PUMP PIT

DRAIN FIELD/TITLE DEPTH 5 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 3 @ 80 FT.

NUMBER OF TRENCHES 3

~~ONE SIDEWALL~~ BOTTOM AREA 3 @ 240 SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS: 7-10-97 Site insp by installers request. Actual topography on lot is completely opposite from BP plan & preliminary. There is a hill, not a swale to the SBA - informed installer that a pumped system to the high portion of SBA necessary (ALM)

8-14-97. Spoke w/ Dale Thompson to remind him of problem (ALM) 9-30-97 Reminder call to Dale Thompson ALM

10/14/97 VERIFIED LAYOUT w/ FOGLE'S, UNEXPECTED DECK UNDER CONST, BUT DECK ON BP

APPLIC: CONTINUE (MR) 10/16/97 OK TO COVER, CALL FOR PUMP INSP (MR)

11/13/97 Alarm 1 pump OK ALM

DATE SYSTEM APPROVED 11/13/97

INSPECTOR A McMill

10/21/97 P.A. 6.0' below grade, has 2 piece cap, Check casing to be sure 8" are left above final grading, pump not yet installed (RM)

APPLICATION

PERCOLATION TESTING

A 482518 ⁴²

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 1/7/93

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Joseph M. Zoller, III Andrew Sonin
11696 Carroll Mill Road
ADDRESS Ellicott City, Maryland 21043 PHONE _____

AGENT OR PROSPECTIVE BUYER SDC Group, Inc.
ADDRESS P.O. Box 417, Ellicott City, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 20 26

ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road
intersection. (3741 Running Spring Road)

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 4 Bm
(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. SDC Group Inc
By: [Signature] VP
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING PERC OK - HOLD FOR PLAT MR 7/26/93

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

A48836

COUNTY #

Lot 20

SOIL PROFILE

0'

3'

15'

(64)

8 1/2'

6'

6 1/2'

3 1/4'

14 1/2'

org brn
sa c/l mtan sa
lm
10-15%
Fraggsbrn org
sa c/l

CAVING IN

HEAVY
GRAY
ORG
MOTTLES

si l m

WATER

brn sa

cl lm

tan

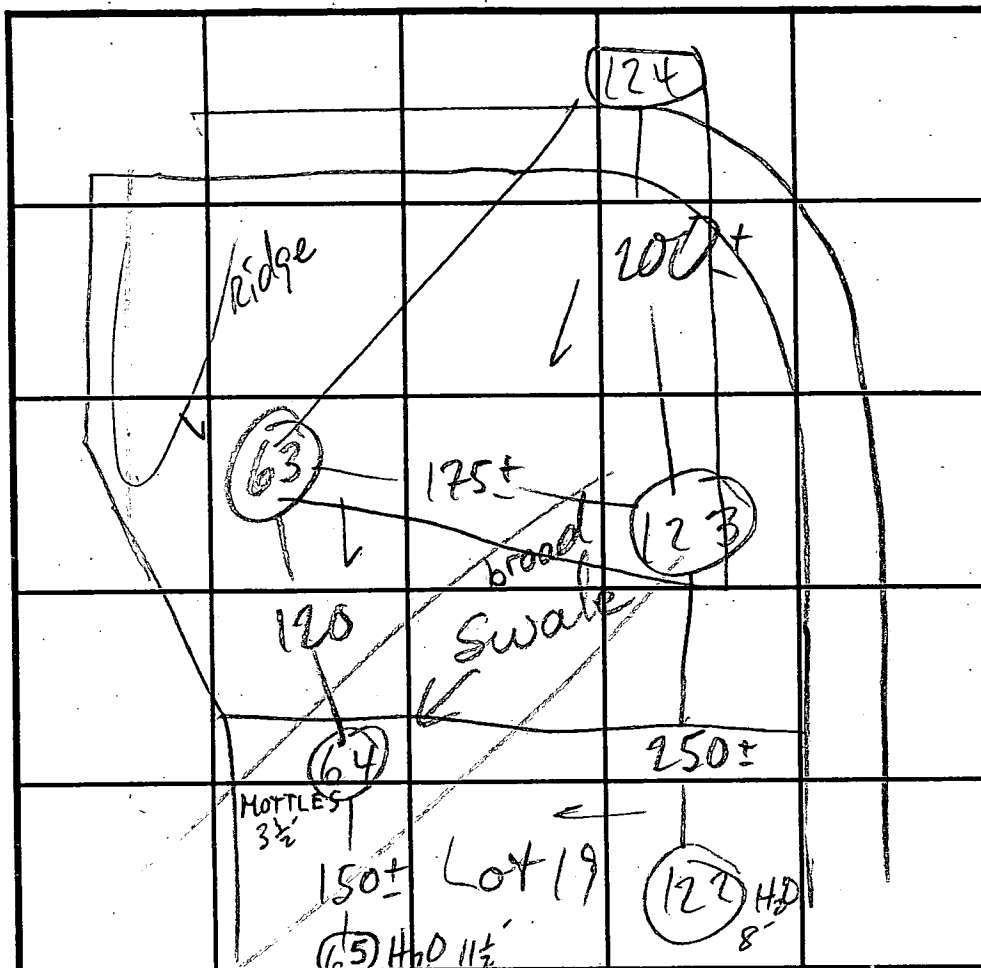
gray

sa lm

15-20%

saprolite

Fraggs



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/5/93	63 S	5	3:45:00			3:45:45	FAST
			3:46:00	3:46:30	3:46:30	3:47:45	1 min 15 sec
	63 M	9	3:46:00	3:50:00	3:50	3:57	7
	63 V	13	see profile				
	64 V	6 1/2	MOTTLES @ 3 1/2'			FAIL	
2/11/93	123 S	5	1:51:45	A LITTLE SLOW		EST 20 min	
	123 M	10	1:52:30	1:53:00	1:53:00	1:53:45	45 sec
	123 M	10	1:54:15	1:55:30	1:55:30	1:57:00	1 1/2 min
	123 V	14 1/2	see profile				
	123 S	6	2:05:15	2:08:15	2:08 15	2:13	5
	122 V	12	WATER @ 8'			FAIL	
	124 S	4	1:36:00	1:37:00	1:39:00	1:45:00	6 min
	124 M	8 1/2	1:36:15	1:36:15	1:37:00	1:38:45	1 3/4 min
	124 V	12	see profile				

REMARKS USE (63) - (123) - (124)

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

180

APPLICATION

PERCOLATION TESTING

A A48842
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Joseph M. Zoller, III
11696 Carroll Mill Road
ADDRESS Ellicott City, Maryland 21043 PHONE _____

AGENT OR PROSPECTIVE BUYER SDC Group, Inc.
P.O. Box 417, Ellicott City, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 26

ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road
intersection.

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family
(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. By: SDC Group Inc. Ash R. [Signature] VP
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

272-3-4-1

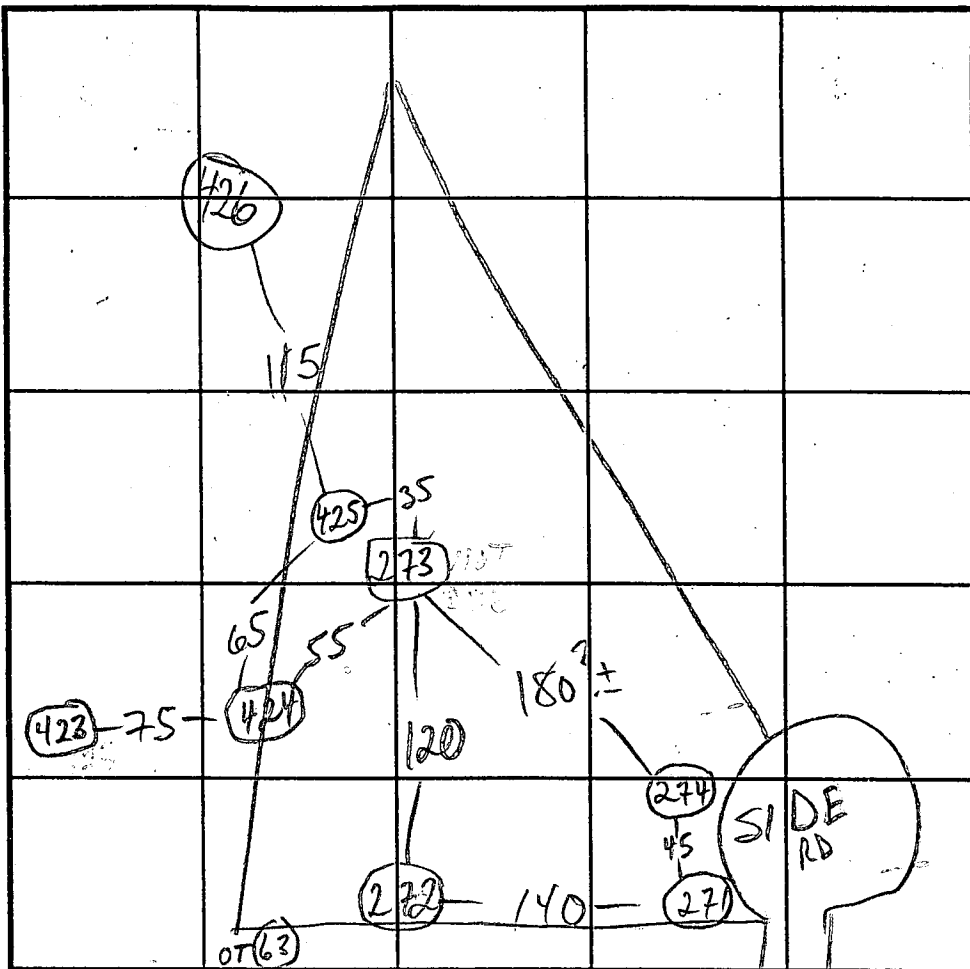
brn
sac

3-4 15% frags

tan
beige
whitesa lm
decomposingsa-stone
10% frags

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/4/94	274	4 1/2	12:24:20	12:25:20	12:25:20	12:27:20	2 min
8/3/94	274	12 1/2	NO HARD BOT - SIM to profile				
8/3/94	273	NOT TESTED					
8/4/94	273	UNMEASURED BUT OK (SEE 423)					
8/4/94	272	4' 10"	8:39	8:45	NO MOVEMENT		
	272	10' 3"	8:47:40	8:49:40	8:48:40	8:50:30	50 sec
	271	4	sim to	profile	HARD BOT		
	271	11	sim to	profile	HARD BOT		

REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT Hatfield crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

APPLICATION

PERCOLATION TESTING

A 48842

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 26 (COMMON)

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

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 _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' 424 425 273

tan org
sac lm
3 fine
tan
sa lm
10%
frags
↓

1 1/2 426

3 tan
sac lm 10%
frags

tan
sa lm

7 10-20% frags

tan
sa lm
1 1/2 <10%
frags

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

/ DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/3/94	423 S	5	2:40:30	2:40:55	2:40:55	2:41:30	35 sec
			2:41:45	2:42:40	2:42:40	2:43:40	1 min
	423 V	12	mica strata 3-4'				
8/3/94	424 S	4	1:07:00	1:07:45	1:07:45	1:09:20	1 1/2
	424 V	11 1/2	OK see profile				
	425 S	4 1/2	1:09:30	1:12:30	1:12:30	1:16:00	3 +
	425 V	11 1/2	OK see profile				
	426 S	4 1/2	1:15:20	1:21	1:21	1:37	16
	426 V	11 1/2	OK see profile				

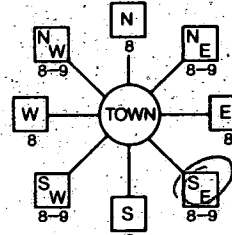
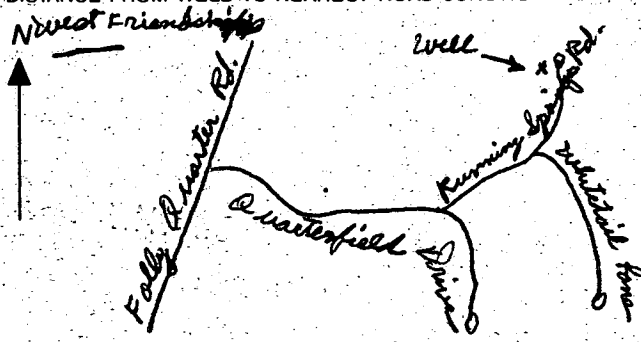
REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin ALSO PRESENT Hatfield crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM

B 1 1904 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-93-0076 fill in this form completely
OWNER INFORMATION Date Received (APA) 100695 SOC GROUP 15 Last Name Owner First Name 34 PO BOX 417 36 Street or RFD 65 ELLICOTT CITY MD 21041 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL HOWARD 8 COUNTY 21 QUARTERFIELD 23 SUBDIVISION 42 SECTION 44 LOT 26 44 46 48 50 WEST FRIENDSHIP 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 4 MI 73 76 77 78	
DRILLER INFORMATION CIRCLE: MSD/MGD/MWD Joseph L. Mayne Driller's Name 77 License No. 80 Joseph L. Mayne Well Drilling Firm Name 5512 Ridge Rd. Mt. Airy, Md. 21771 Address Joseph L. Mayne 10/6/95 Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH ☒ WEST ☐ EAST ☐ SOUTH ☐ DISTANCE FROM ROAD 25 34 37 ENTER FT OR MI FT 38 39 TAX MAP: 23 BLK: 15 PARCEL: 101	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 300 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME COUNTY NO. STATE SIGNATURE Mark E. Luffkin 10/26/96 DATE ISSUED INSERT S EXP. DATE NORTH GRID 524000 EAST GRID 0825000 50' 55' 57' 63'	
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ 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 82X5 N 52X2 000 000	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28		APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH	
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 _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ 41 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ 54 63 FORCE M2 WRITE INITIALS IN BOX HO-93-0076 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS: NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

C1	2866	SEQUENCE NO. (MDE 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.	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				COUNTY NUMBER	A 488 1/4 42	
ST/CO USE ONLY DATE Received		DATE WELL COMPLETED		Depth of Well		PERMIT NO. FROM "PERMIT TO DRILL WELL"
8 13		110695		22 185 26 (TO NEAREST FOOT)		40-93-0076 28 29 30 31 32 33 34 35 36 37

OWNER	SDC Group				
STREET OR RFD	Running Springs Rd				
SUBDIVISION	QUARTERFIELD	SECTION	2	TOWN	W. Friendship
			LOT	26	

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 TO	check if water bearing
Sand Stone	0 28	
Gray mica Rock	28 185	✓

GROUTING RECORD		
WELL HAS BEEN GROUTED (Circle Appropriate Box)		
TYPE OF GROUTING MATERIAL (Circle one)		
CEMENT CM	BENTONITE CLAY BC	
NO. OF BAGS 8	NO. OF POUNDS 752	
GALLONS OF WATER 48		
DEPTH OF GROUT SEAL (to nearest foot)		
from 0 ft. to 29 ft.		
TOP 52 BOTTOM 58		
(enter 0 if from surface)		
CASING RECORD		
casing types insert appropriate code below		
ST STEEL	CO CONCRETE	
PL PLASTIC	OT OTHER	
MAIN CASING TYPE		
S 7	6 3 2	
60 61	63 64 66 70	
OTHER CASING (if used)		
diameter inch depth (feet) from to		
EACH CASING		
SCREEN RECORD		
screen type or open hole insert appropriate code below		
ST STEEL	BR BRASS	HO OPEN HOLE
PL PLASTIC	PL BRONZE	OT OTHER

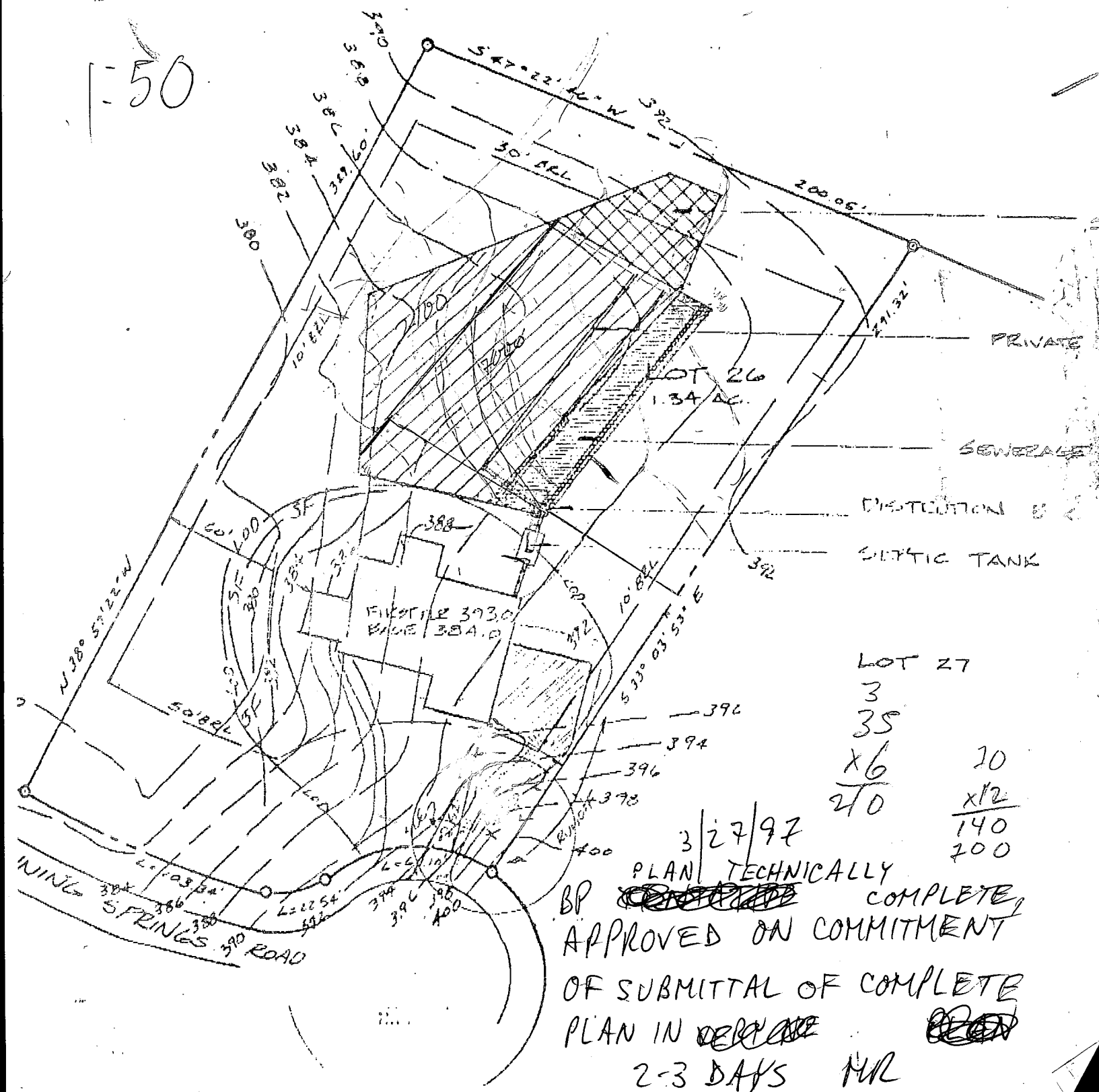
PUMPING TEST		
HOURS PUMPED (nearest hour) 3		
PUMPING RATE (gal. per min.) 15		
METHOD USED TO MEASURE PUMPING RATE Bucket		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING 47 ft.		
WHEN PUMPING 50 ft.		
TYPE OF PUMP USED (for test)		
A air	P piston	T turbine
C centrifugal	R rotary	O other (describe below)
J jet	S submersible	

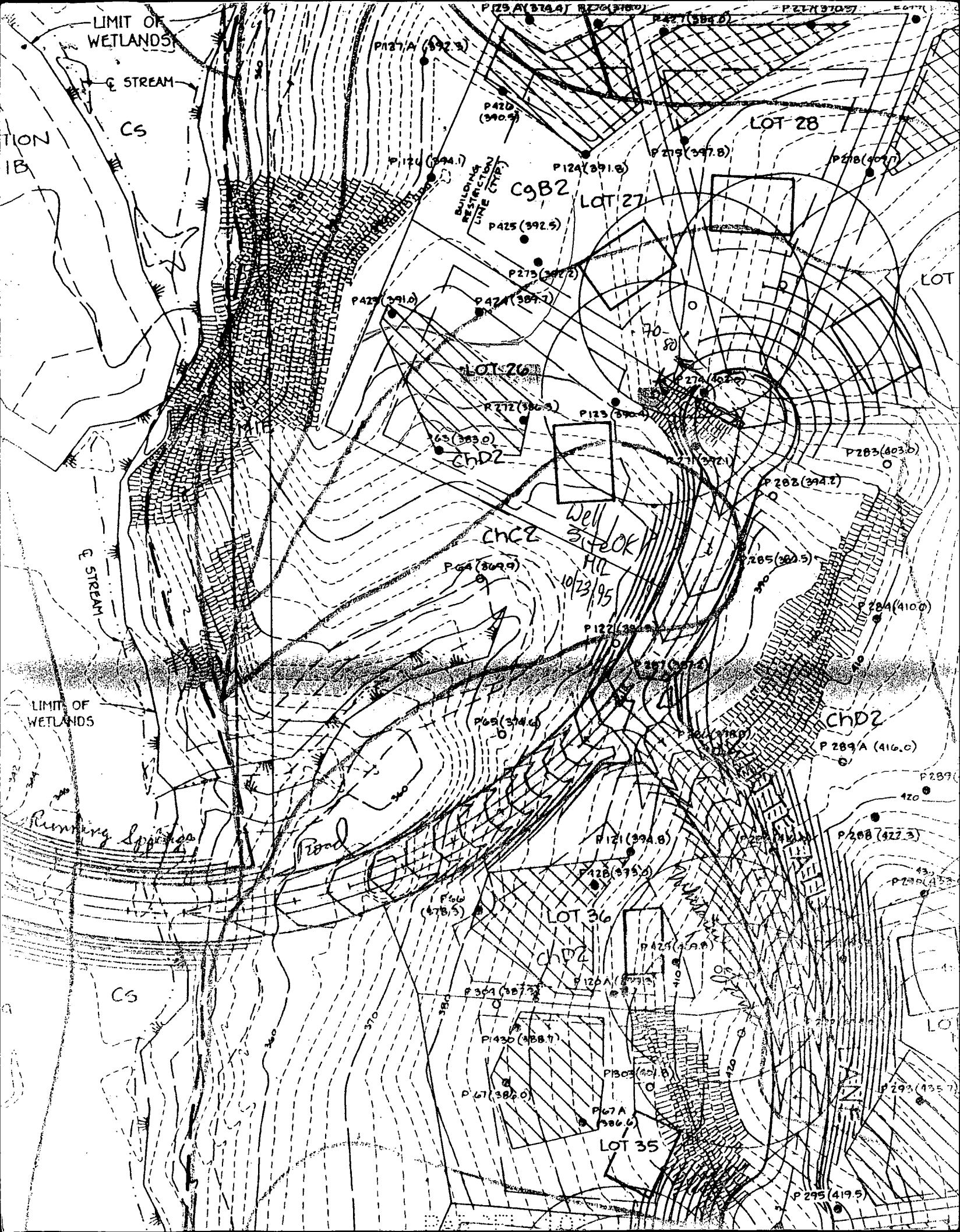
NUMBER OF UNSUCCESSFUL WELLS: 0	
WELL HYDROFRACTURED	
yes Y no N	
CIRCLE APPROPRIATE LETTER	
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	
E ELECTRIC LOG OBTAINED	
P TEST WELL CONVERTED TO PRODUCTION WELL	
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "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.	
TYPE: MWD/MSD/MGD	
DRILLERS LIC. NO. 24	
Joseph L. Mayre	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	
LIC. NO.	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

C2	
DEPTH (nearest ft.)	
H 0 30 185	
EACH CASING	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN 56 60	
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68	
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T (E.R.O.S.)	
70 72 74 75 76	
TELESCOPE CASING LOG INDICATOR OTHER DATA	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (YES OR NO) YES NO	
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED	
PLACE (A,C,J,P,R,S,T,O) IN BOX 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	
PUMP HORSE POWER	
PUMP COLUMN LENGTH (nearest ft.)	
CASING HEIGHT (circle appropriate box and enter casing height)	
+ above	
- below	
LAND SURFACE (nearest foot)	
2	
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)	
Running Springs Rd.	

[-50





PRESERVATION PARCEL 1B
QUARTERFIELD
SECTION 1

PLAT NOS. 11937-11941

LIMIT OF SECTION 2

FOREST CONSERVATION ESMT 'F'
(3.61 AC.)
TOTAL

OPEN SPACE LOT 37
357,820 S.F.
8.214 AC.
TO BE DEDICATED TO HOMEOWNERS
ASSOCIATION

FOREST CONSERVATION
EASEMENT 'G'
(3.57 AC.)
TOTAL

LOT 26
58,231 S.F.

LOT 27
53,866 S.F.

LOT 28
44,252 S.F.

LOT 29
59,035 S.F.

Copy Signed
Final

