4/29/98
2:00
4/30/98
CO/ok

Need to [illegible] water line near septic area
Needs House Connection

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-422094

P 510109

A 49860-E

DISTRICT 5th

DATE 4-23-98

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
XXXXXXXXX 410-313-2640

DATE SYSTEM APPROVED 10/1/98

INSPECTOR [illegible]

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER ____

ADDRESS 550 Obrecht Rd, Sykesville, MD 21784 PHONE 410-795-5674

SUBDIVISION Springdale LOT 2 ROAD 13708 Springdale Drive

PROPERTY OWNER Alexander S. Thomas

ADDRESS ____

SEPTIC TANK CAPACITY 1250 GALLONS **TOP SEAMED TANK**

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 from the left rear lot corner, place the distribution box 100 feet down the left lot line and 55 feet off this same lot line. Run trenches on contour in both directions. **MAINTAIN 100 FEET FROM TWO (2) NEARBY WELLS TO ALL PARTS OF THE SEPTIC SYSTEM.**

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok [illegible] 4/22/98

PLANS APROVED BY Mark Rifkin REVISED DATE 04/17/98

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

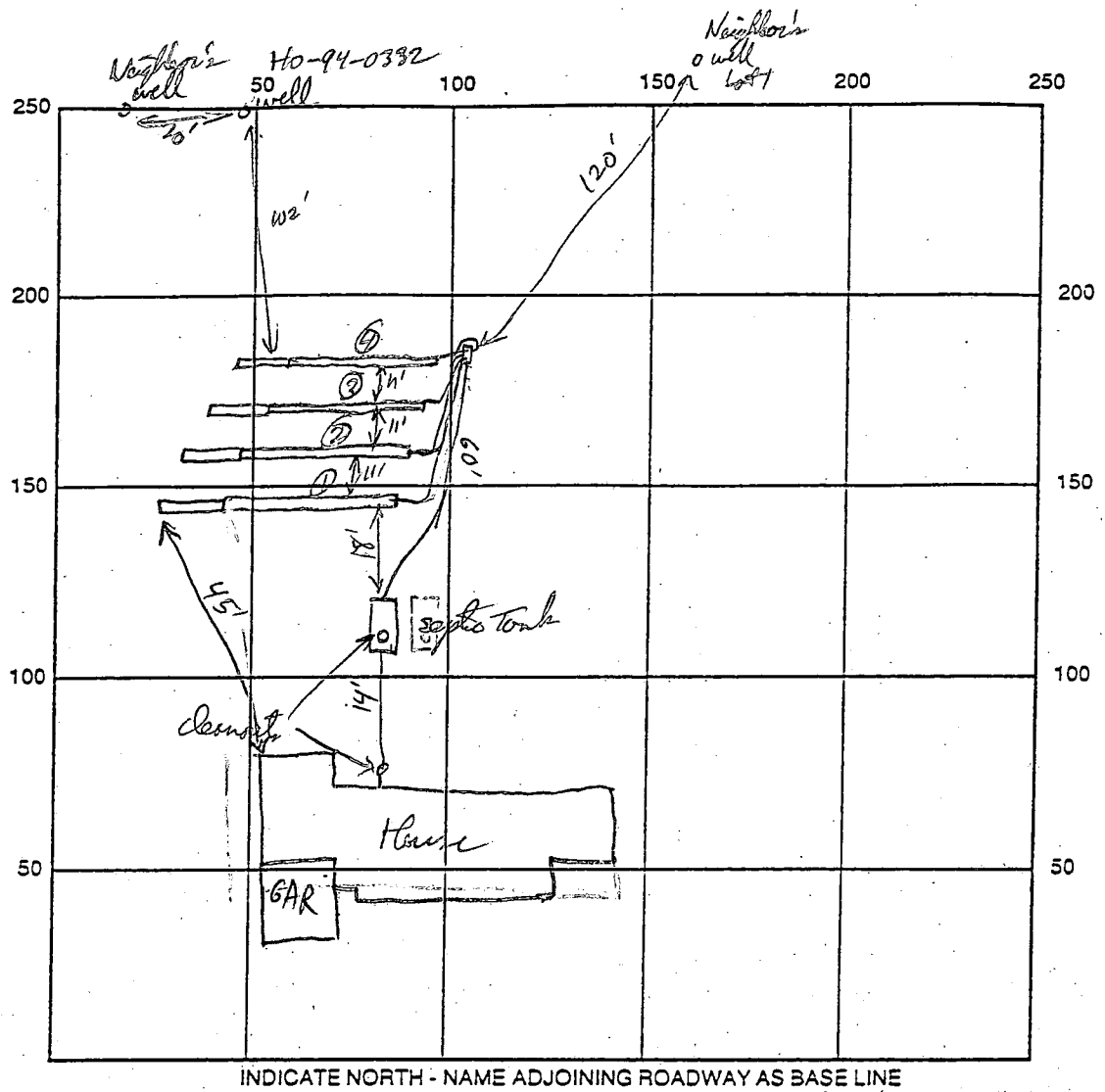
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

A 49860E

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 gal Top Second tank down CLEANOUTS at House

DISTRIBUTION BOX LEVEL used auto levelers OK RP

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 1: 60 / 2: 60 / 3: 60 / 4: 60 FT. = 240 LF.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: System OK to cover - Needs final House connection RP 4/30/98

Since Septic Trenches are within 10ft of property line; water line will need to be located wherever within 10ft of Septic System to repair Septic area. RP 4/30/98 (Septic Contractor so Notified in field.

10/1/98 House connection made OK

DATE SYSTEM APPROVED 10/1/98 INSPECTOR [signature]

WPF 6/25/98

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-A Ellicott Mills Drive
Ellicott City, MD 21043
461-8033

6.25.98 P01
needs 2 piece of P.A. 4.0' below grade casing 10" above grade line sleeved out of house (PM)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ____

Receipt # ____
Date ____

Name of Installer Willoughby Plumbing Telephone 410-781-7051

License Number 6992
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓

Name of Property Owner Alexander Thomas Telephone ____
Subdivision Springfield Estates Lot # 2 Well Tag # MO-94-03332
Site Address 13700 Springdale Drive Clark

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Jacuzzi
3. Model # ____
4. Capacity 17 GPM
5. Pump exceeds well capacity Yes ____ No ✓
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ____
7. What methods are used to protect the pump and electrical wiring from vibration? Torque arresters ✓ Cable guards ✓ Other TAPE

Motor
1. Horsepower ½
2. RPM ____
3. Voltage
   a. 110 ____
   b. 220 ✓

Pitless Adapter
1. Make HARVARD
2. Model # ____
3. Depth 4'-0"

Tank
1. Capacity 40 gal
2. Pressure relief valve? Yes

Piping
1. Type CRESTLINE
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line 4'

Well data
1. Depth 70 ft.
2. Yield 15 GPM
3. Static water level 23 ft.
4. Will water supply be disinfected by installer? ____

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).

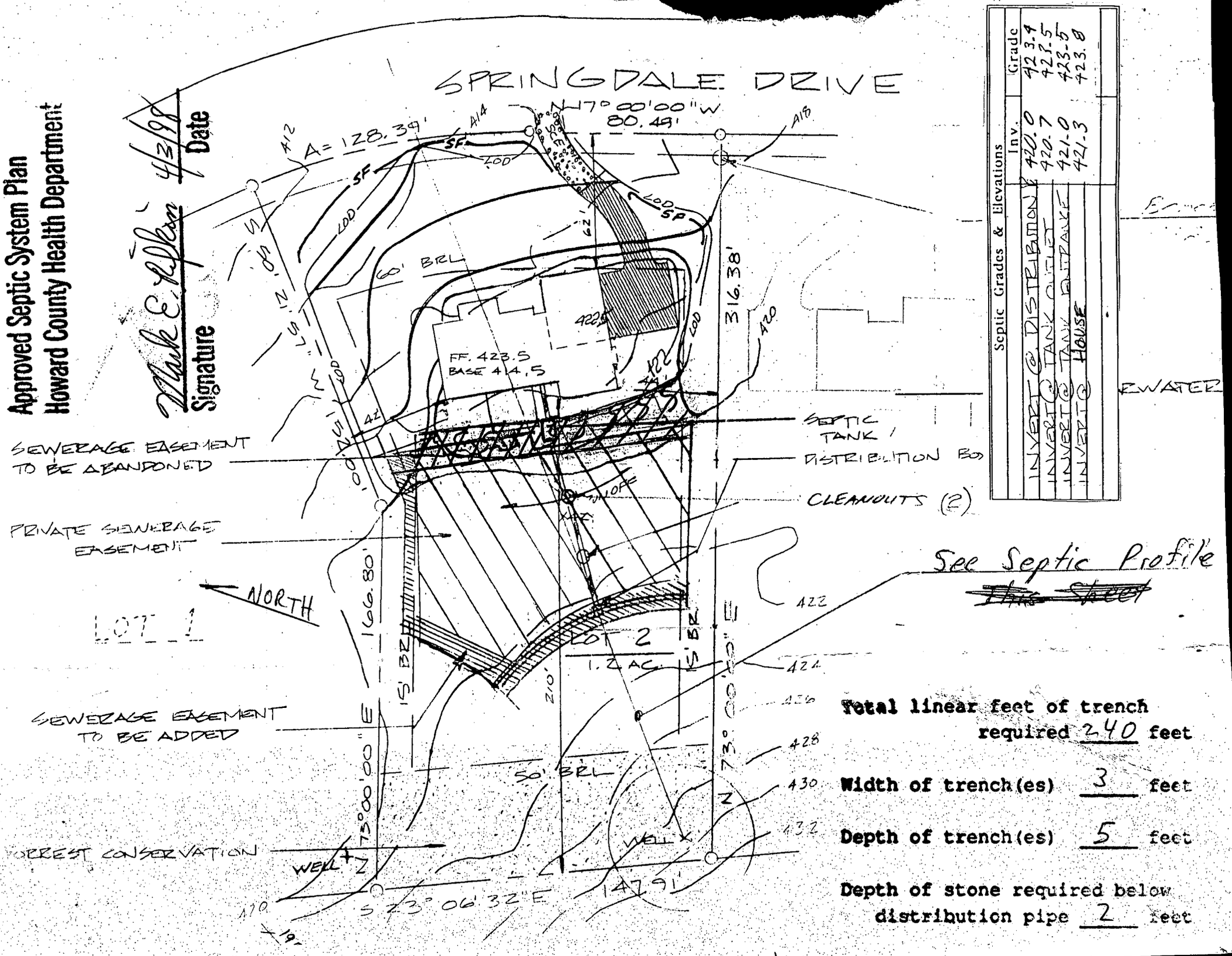
All information given above is true to the best of my knowledge.

Signature of Applicant: Chris Willoughby Rep

Date: 6/25/98

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

PP-218



Approved Septic System Plan
Howard County Health Department

Mark E. Hilbert 4/3/98
Signature Date

APPLICATION

PERCOLATION TESTING

A 49860 E

P _____

DISTRICT _____

DATE _____

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

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 Alexander S. Thomas

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. Lot B 2 on perc cert

ROAD AND DESCRIPTION (13708 Springdale Estates)

BLDG. PERMIT SIGNED AND RETURNED 4-3-95
Serial # 9501015-9

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. SFD - Modular
(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 PERC OK, HOLD FOR PLAT MR 8/17/94

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

HD-216 (3/92)

49860E
COUNTY #

Lot 3

SOIL PROFILE

0'

(A)

org yel si cl lm

ton gray brn si sa lm <5% frags

14½

(D)

FILL

2½

silt topsoil

3½

dk-brn lt gray fin org si sa mica lm <5% frags

14

(B)

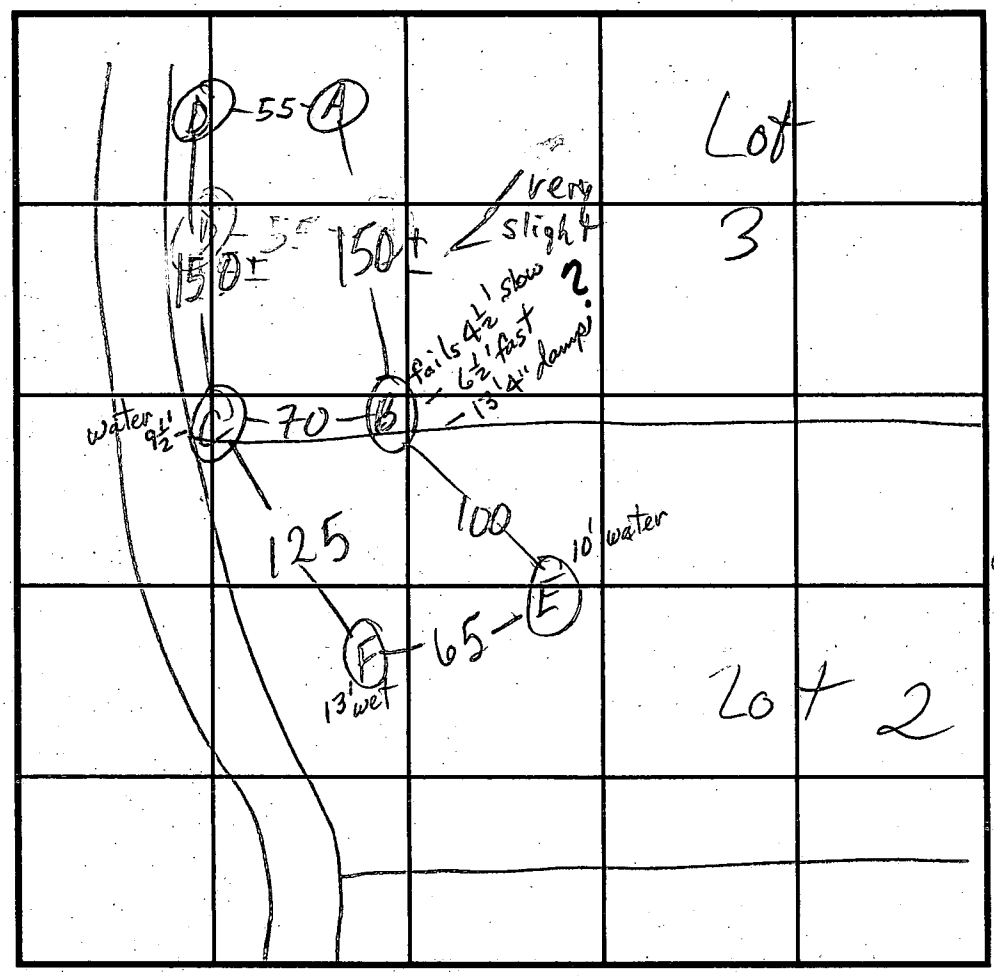
red br sicl & cl lm

45

tan mica sa lm 10% frags

soil DAMP

13'4"



SOIL PROFILE

0'

(C)

org brn

2-3

red br sa mica lm

9½

WATER

12

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/7/84	A S	4	12:13 12:27	12:17 12:28	STORM 12:28	THAW IN 12:31	HOLE 3
	A V	14½	see	profile			
	D S	4½	12:18	12:20	12:20	12:25	5 EST
	D V	14	see	profile			
	C S	4	1:04	1:08	1:08	1:15	3
	C M	10½	1:04	1:08	1:08	1:11	3
	C V	12	H_2O @ 9½				
	B S	4½	12:50	1:00	3/4"		
	B M	6½	12:51			12:53	FAST
	B M	6½	12:55	12:56	12:56	12:58	2
	B V	13'4"		damp			
	B S2	5	1:22	1:27	1:27	1:40	13

REMARKS HOLES PER PLAN

TYPE OF SOIL

TESTED BY M. Rifkin ALSO PRESENT Allen, Demmitt

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5½ TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT/BEDROOM 180

APPLICATION

PERCOLATION TESTING

A _____

P _____

DISTRICT _____

DATE _____

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

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. 2

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

HD-216 (3/92)

COUNTY #

SOIL PROFILE

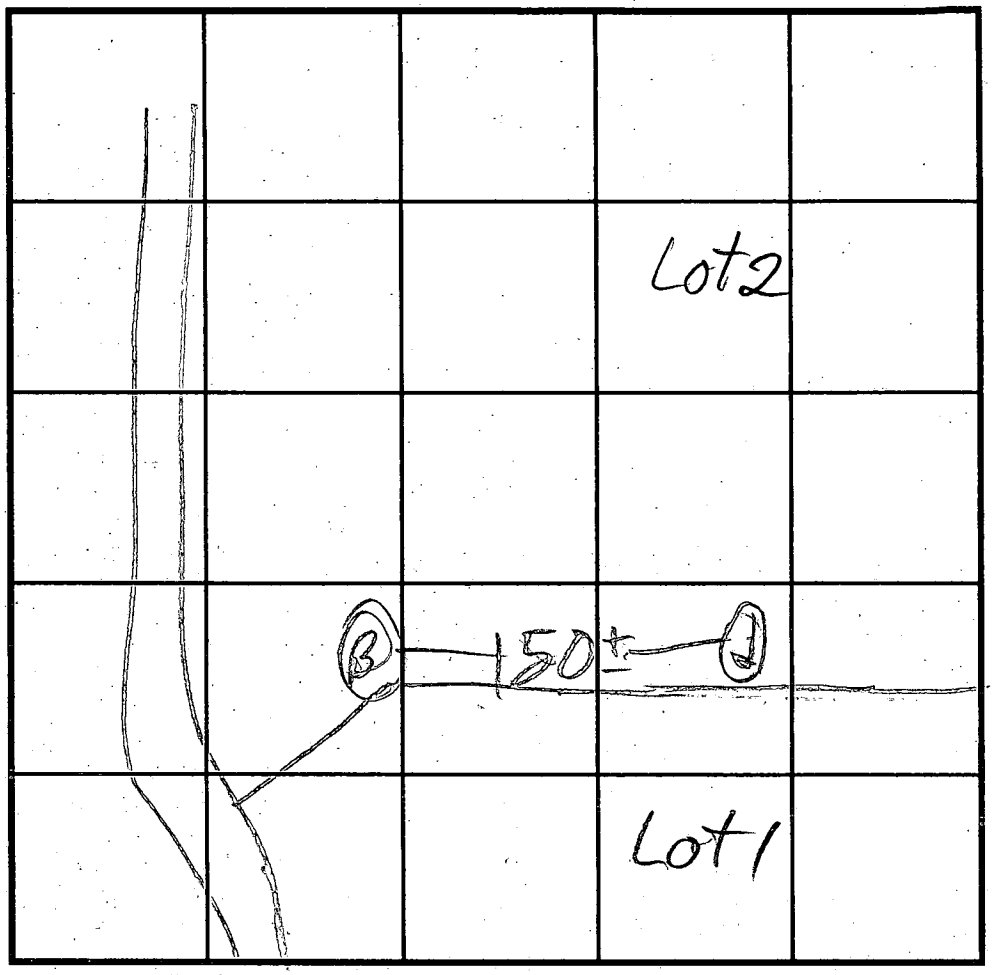
0'

brn red sac lm

3

fine tan sa lm 10% frags

12½



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/2/94	J S	33"	4:08	4:09	4:09	4:11	2
	J V	12½					

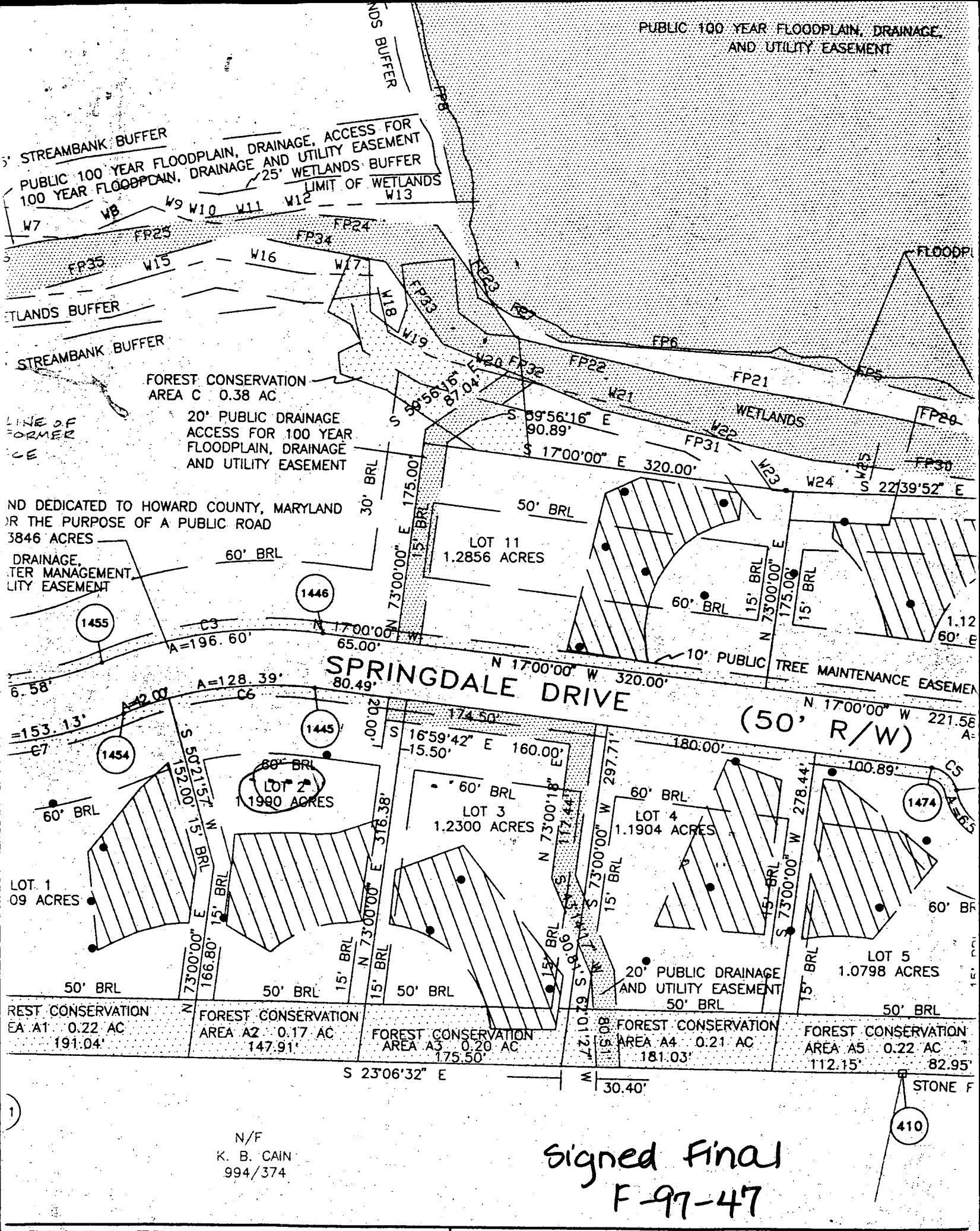
REMARKS

TYPE OF SOIL

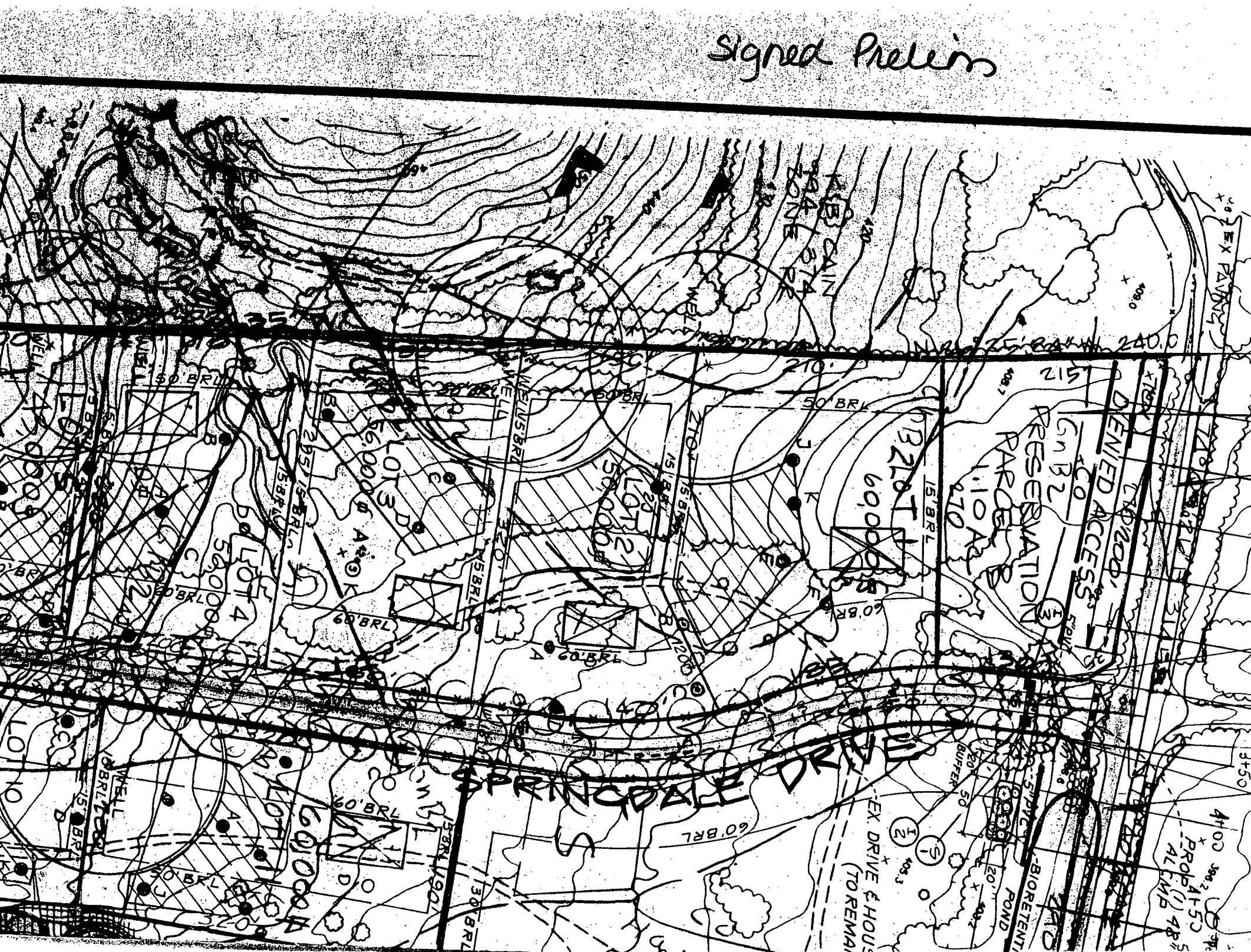
TESTED BY M. Rifkin ALSO PRESENT R.D., J. Allen

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM


PUBLIC 100 YEAR FLOODPLAIN, DRAINAGE, AND UTILITY EASEMENT
STREAMBANK BUFFER
PUBLIC 100 YEAR FLOODPLAIN, DRAINAGE, ACCESS FOR 100 YEAR FLOODPLAIN, DRAINAGE AND UTILITY EASEMENT
25' WETLANDS BUFFER
LIMIT OF WETLANDS
W7 W8 W9 W10 W11 W12 W13
FP25 FP24 FP34 FP35
W15 W16 W17 W18 W19 W20 W21 W22 W23 W24
FP33 FP23 FP32 FP22 FP21 FP6 FP5 FP31 FP30
WETLANDS BUFFER
STREAMBANK BUFFER
FOREST CONSERVATION AREA C 0.38 AC
20' PUBLIC DRAINAGE ACCESS FOR 100 YEAR FLOODPLAIN, DRAINAGE AND UTILITY EASEMENT
S 59°56'16" E 87.04'
S 89°56'16" E 90.89'
S 17°00'00" E 320.00'
S 22°39'52" E
WETLANDS
ND DEDICATED TO HOWARD COUNTY, MARYLAND
R THE PURPOSE OF A PUBLIC ROAD
3846 ACRES
DRAINAGE, TER MANAGEMENT, LITY EASEMENT
30' BRL
50' BRL
60' BRL
15' BRL
175.00'
N 73°00'00" E
LOT 11
1.2856 ACRES
1446
1455
C3
A=196.60'
N 17°00'00" W
65.00'
SPRINGDALE DRIVE
(50' R/W)
N 17°00'00" W 320.00'
10' PUBLIC TREE MAINTENANCE EASEMEN
N 17°00'00" W 221.58'
A=128.39'
C6
80.49'
A=42.00'
=153.13'
C7
1454
1445
20.00'
174.50'
S 16°59'42" E 160.00'
15.50'
180.00'
100.89'
C5
1474
LOT 2
1.1990 ACRES
LOT 3
1.2300 ACRES
LOT 4
1.1904 ACRES
LOT 5
1.0798 ACRES
LOT 1
09 ACRES
S 50°21'57" W 152.00'
N 73°00'00" E 316.38'
S 73°00'00" W 297.71'
N 73°00'18" E 117.44'
S 73°00'00" W 278.44'
N 73°00'00" E 166.80'
S 73°00'00" W 90.81'
S 67°01'27" W 80.91'
20' PUBLIC DRAINAGE AND UTILITY EASEMENT
FOREST CONSERVATION AREA A1 0.22 AC 191.04'
FOREST CONSERVATION AREA A2 0.17 AC 147.91'
FOREST CONSERVATION AREA A3 0.20 AC 175.50'
FOREST CONSERVATION AREA A4 0.21 AC 181.03'
FOREST CONSERVATION AREA A5 0.22 AC 112.15'
82.95'
S 23°06'32" E
30.40'
STONE F
410
N/F
K. B. CAIN
994/374
Signed Final
F-97-47
CERTIFICATE
SURVEYOR'S CERTIFICATE

Signed Prelim



APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

B0011059

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
13708 SPRINGDALE DRIVE
CLARKSVILLE, MD 21029

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO SDP #

DESCRIPTION OF WORK AUTHORIZED
UNFINISHED BASEMENT
4 BRS
3½ BATHS
1 FP
NO DECK
2-CAR GARAGE ATTACHED
SINGLE FAMILY DWELLING

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
2	60	—	—	14	—	—

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
SPRINGDALE ESTATES	R-20	34	5	6051.0

OWNER NAME AND ADDRESS — PHONE NO.
ALEXANDER S. THOMAS (410) 992-5744
9409 N. PENFIELD RD
COLUMBIA, MD 21045

OCCUPANT'S NAME AND ADDRESS — PHONE NO.
SAME AS ABOVE

ARCHITECT OR ENGINEER'S NAME AND ADDRESS — PHONE NO.
DALE THOMPSON BUILDERS (410) 995-6736
10005 OLD COLUMBIA RD.
COLUMBIA MD 21046

CONTRACTOR'S NAME AND ADDRESS — PHONE NO.
SAME AS ABOVE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
✓	✓	✗	✓	OIL	✓

EXISTING USE	PROPOSED USE
UNIMPROVED LOT	SINGLE FAMILY DWELLING

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
$350,000	91A941	

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE

ARCHITECT — TITLE

2/26/98 — DATE

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK _____ (CORNER LOT ONLY) _____ SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING ✓		
SHA ✗		
SEDIMENT/GRADING ✗		
BUILDING OFFICIAL ✗		
WATER & SEWER		
HEALTH DEPT. ✓	4/3/98	Mark E. Keffler
FIRE PROTECTION		
STORM WATER MGM. ✗		

APPROVED — DATE

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591 1190

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 27, 1998

MEMORANDUM

TO: Mr. Alexander S. Thomas
9409 N. Penfield Road
Columbia, MD 21045

FROM: Donna K. Soe, R.S.
Water and Sewerage Program

RE: **BP#** B00110159
13708 Springdale Drive

This office has recently received the above referenced building permit application. However, we are unable to approve the application at this time for the following reason(s):

_____ No water supply has been established to serve the proposed dwelling. (Please submit a copy of the well completion report for review, along with a revised site plan showing **actual** well location.)

_____ No septic elevations have been provided on the site plan submitted.

_____ Incorrect septic specifications utilized in proposed septic system design. (See enclosure)

_____ No invert elevation(s) provided for: _____

_____

_____ Proposed house to _____ less than _____ feet.

_____ Existing well to _____ less than _____ feet.

_____ Sewage easement location/configuration incorrect. (See enclosure)

__X__ Other: proposed modification to septic easement not acceptable due to location of existing well on Lot #1.

If you have any questions or concerns, please contact Donna K. Soe at (410) 313-2640.

Enclosure
cc: file / Dale Thompson Builders

C 1 **3526** — 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 A49860E

ST/CO USE ONLY
DATE Received 03/23/95

DATE WELL COMPLETED 03/10/95

Depth of Well 70 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-0332

OWNER Demmitt (last name) Richard (first name)
STREET OR RFD Springdale Drive TOWN Clarksville
SUBDIVISION Springdale 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 FROM	FEET TO	Check if water bearing
SAND & GRAVEL MIXED	0	62	✓
GRAY MICA ROCK	62	70	✓

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

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.

DRILLERS IDENT. NO. 24
Joseph Mayne
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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 21 NO. OF POUNDS 1974
GALLONS OF WATER 126
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 51 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	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	66

OTHER CASING (if used) — EACH CASING

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.)	
	from	to
1	HO 64	20
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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T ____ (E.R.O.S.) ____ W Q ____
TELESCOPE CASING — LOG INDICATOR — OTHER DATA

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 33
WHEN PUMPING 33

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.)
CASING HEIGHT (circle appropriate box and enter casing height)
[+] above [−] below LAND SURFACE 2 (nearest foot)

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)

N

See Attached Location

COUNTY

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 13, 1995

MEMORANDUM

TO: Mr. Richard Demmitt
P. O. Box 228
Clarksville, Maryland 21029

FROM: Mark Rifkin, R. S. MR/cw
Water and Sewerage Program
Howard County Health Department

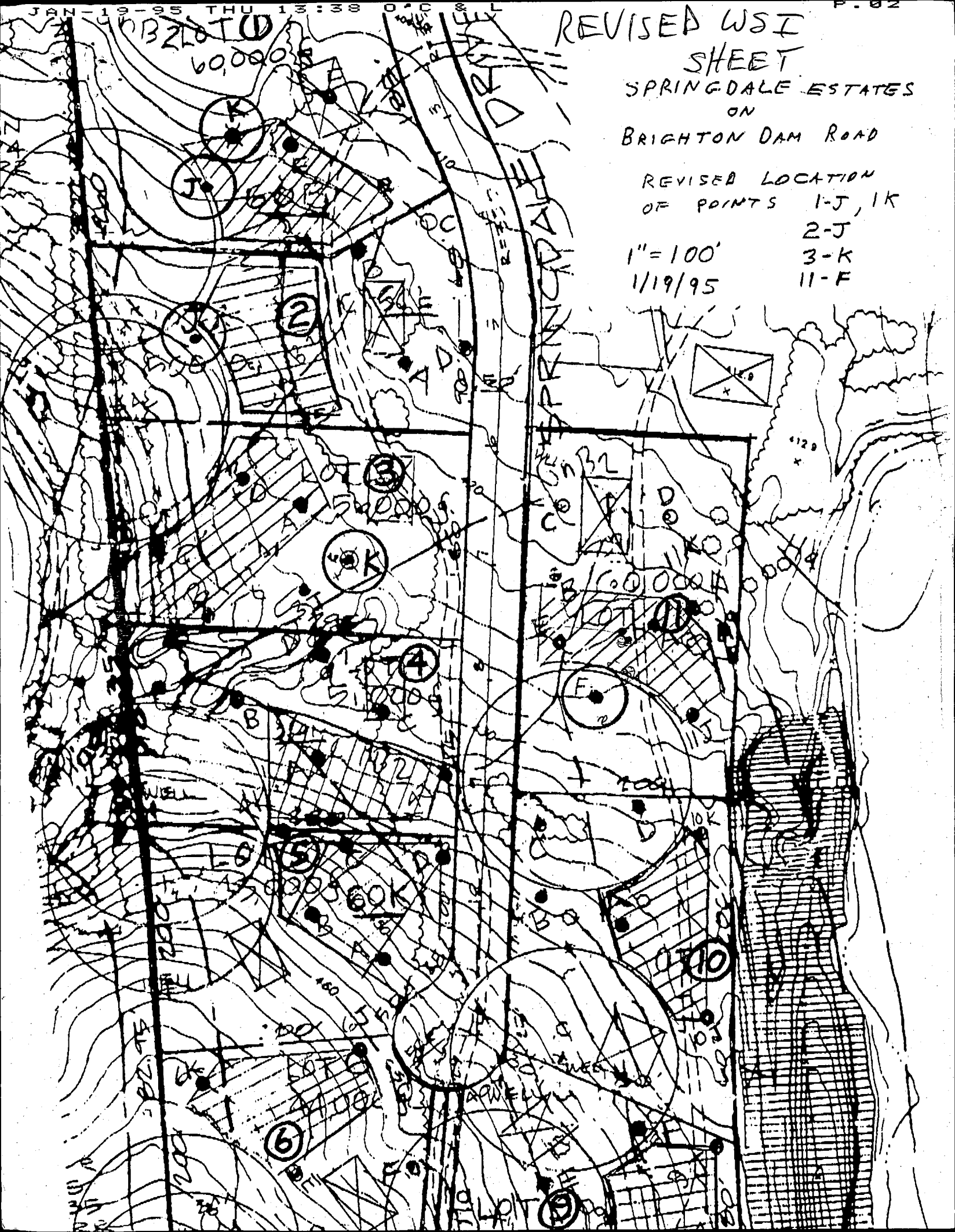
RE: Well Construction Permit
Permit Numbers: HO-94-0331 thru HO-94-0334
Springdale - Lots 1 - 3 and Lot 11
Springdale Drive

This is to confirm that the above referenced well construction permit applications were issued without a re-inspection of well stakes. Once all wells are drilled, engineer's certification of actual well locations will be required before record plat approval.

If you have any questions regarding this matter, please call me at 313-2640.

MR:jr

cc: Joseph L. Mayne
File


REVISED WSI SHEET
SPRINGDALE ESTATES
ON
BRIGHTON DAM ROAD
REVISED LOCATION OF POINTS 1-J, 1K
2-J
3-K
11-F
1" = 100'
1/19/95
BRIGHTON DAM ROAD
K
J
2
3
4
5
6
11
10
9
60K
10K
WELL