3/23/00 Anytime (Septic Co.) 3/31/00 C.O. 3/31/00 PM 6/1/00 3:00 PM Insp

3/31/00 Needs pump check house cons DO

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-422191

P 513317

A 49861-C

DISTRICT

DATE 3/14/2000

DATE SYSTEM APPROVED 6/1/00

INSPECTOR S.R.K.

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

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

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Springdale LOT 12 ROAD 13501 Silent Lake Drive

PROPERTY OWNER Dale Thompson Builders

ADDRESS

TOP SEAMED TANK REQUIRED

SEPTIC TANK CAPACITY 1250 GALLONS ✓

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240 ✓

PUMPED SEPTIC SYSTEM PROPOSED

INSTALL: 1-1250 Gallon Top Seamed Pump Chamber

NOTES:
- Septic pump detail to be provided by installer prior to issuance of septic permit.
- Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 2½ feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 2½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - From the right rear lot corner, place the distribution box 170 feet down the right (310.00') lot line and 15 feet off that same lot line as seen when facing the lot from Silent Lake Drive. Run trenches on contour towards the left rear lot corner.

NOTES - MAINTAIN A MINIMUM OF 100 FEET FROM WELL TO ALL PARTS OF THE SEPTIC SYSTEM. ***MAINTAIN AT LEAST 10 FEET OF SEPERATION BETWEEN WELL LINE AND ANY PART OF THE SEPTIC SYSTEM OR SEPTIC EASEMENT.*** No trench to exceed 100 feet in length. Provide 6" – 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APROVED BY Kim Maiste/Amy McMillen OK 11/9/99 - SRK DATE 10-25-1999

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

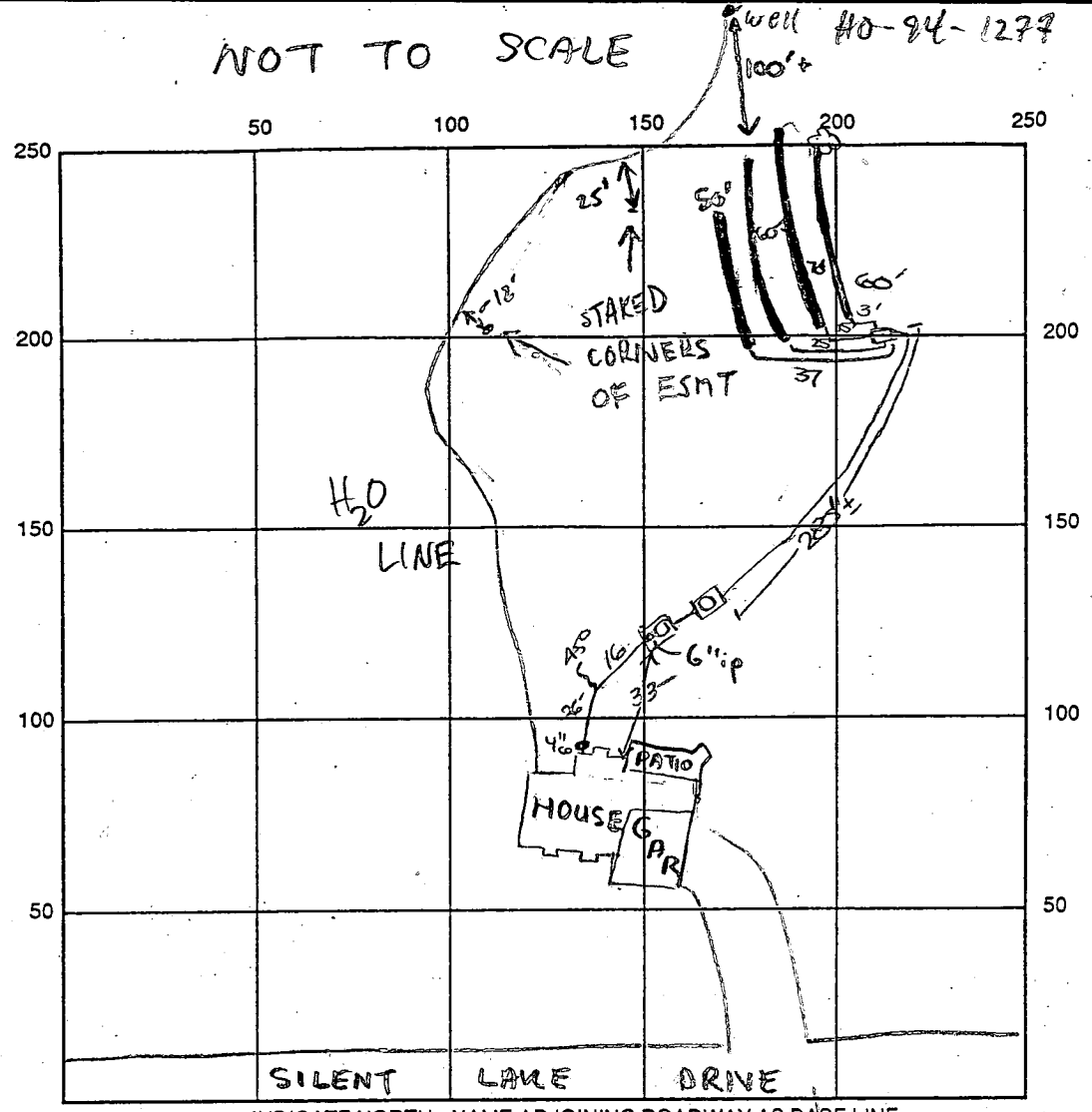
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 49861-C

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1250 gal t.s.i.p. 1250 gal. t.s.s.t. CLEANOUTS one at house, one on s.t. manhole on s.t. & on pp

DISTRIBUTION BOX LEVEL OK Monitoring pipe attached

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2.5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

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: 3/23/00 Needs house connection. OK to cover from 2' off house to septic tank. DKS

3/27/00 OK to cover first two trenches and continue. SRK

3/31/00 OK to cover all septic work. Needs house conn. DKS

5/31/00 - House connection confirmed, pump not operational call for reinspection - SRK 6/1/00 - pump & alarm operational - SRK

DATE SYSTEM APPROVED 6/1/00 INSPECTOR Steven R. King

4/7/2000 AM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
[illegible]

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ______

Receipt # ______
Date ______

Name of Installer Willoughby Plumb.   Telephone 410-981-7051

License Number #6992
Certified Well Pump Installer ___ Well Driller ___ Registered Plumber ✓

Name of Property Owner Dale Thompson   Telephone 410-995-6736
Subdivision [illegible] Lot # 12   Well Tag # [illegible]
Site Address 13301 Silent Lake
Clarksville, MD

Pump
1. Type
   a. Deep well jet ______
   b. Shallow well jet ______
   c. Submersible ✓
2. Make JACUZZI
3. Model # ______
4. Capacity ______ 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 vibrations? Torque arrestors ✓ Cable guards ✓ Other ✓

Motor
1. Horsepower 3/4 HP
2. RPM ______
3. Voltage ______
   a. 110 ✓
   b. 220 ✓

Pitless Adapter
1. Make HARVARD
2. Model # ______
3. Depth [illegible]

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 Ft

Well data
1. Depth [illegible] ft.
2. Yield [illegible] GPM
3. Static water level ______ ft.
4. Will water supply be disinfected by installer? NO

4/7/00 OK TO COVER
2-PC MCAP + CONDUIT OK
P.A. 5' B.G.
(MR)

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

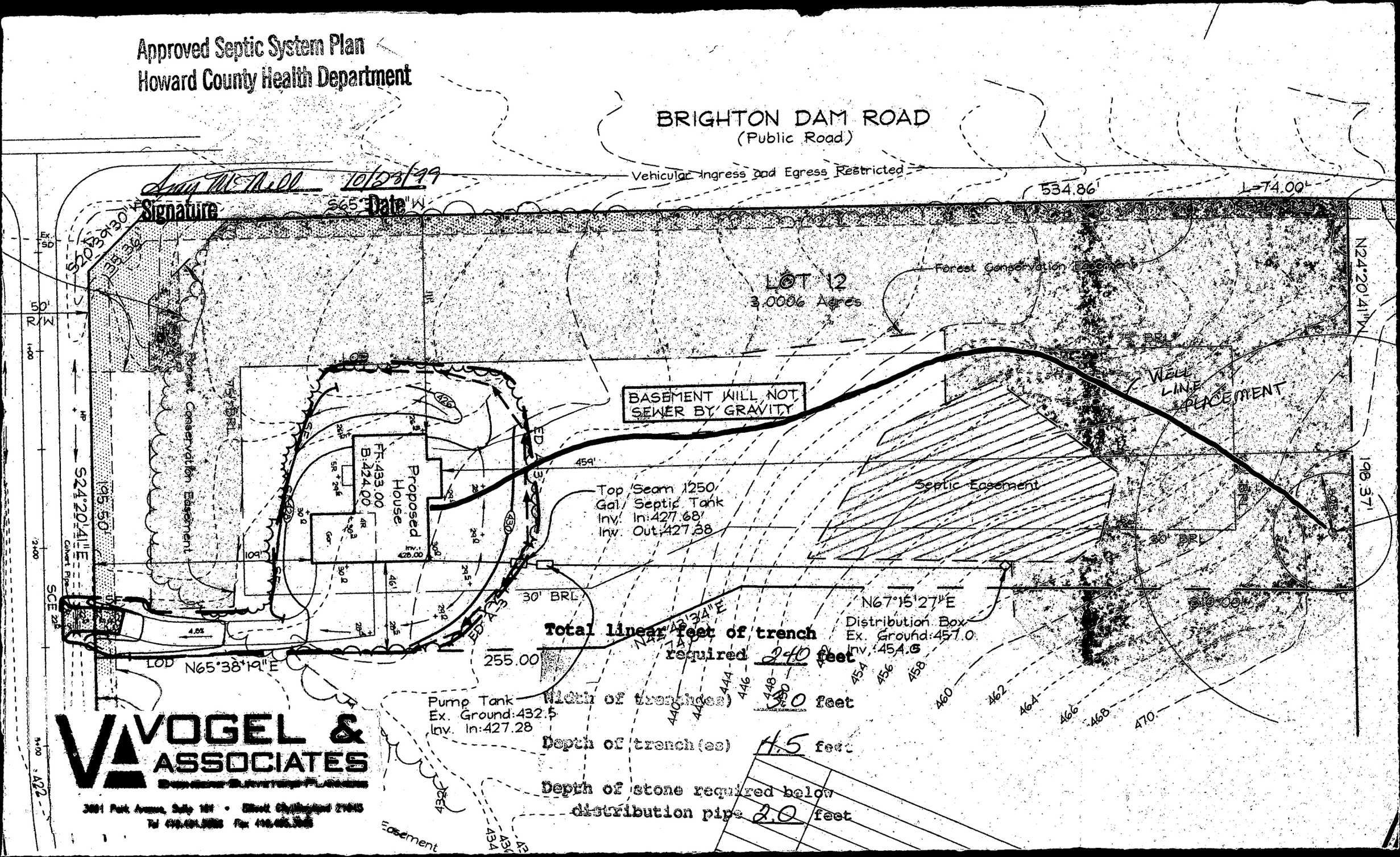
Date: 4-6-00

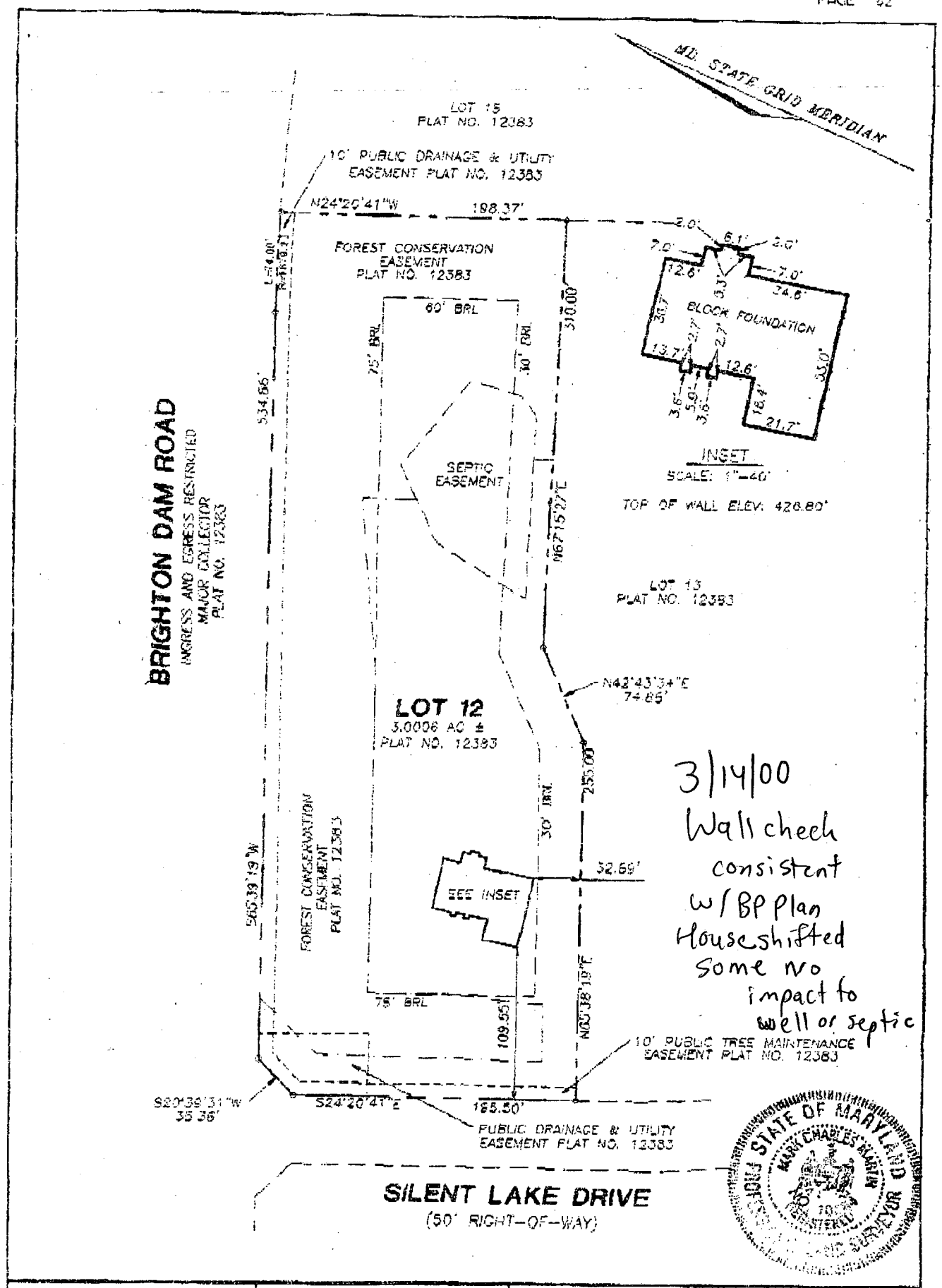
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

WQ-813

P01

Approved Septic System Plan
Howard County Health Department





3/14/00
Wall check consistent w/ BP plan
House shifted some no impact to well or septic

RECORD REFERENCES	WALL CHECK	VOGEL & ASSOCIATES, INC.

APPLICATION

PERCOLATION TESTING

A 49861C

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 Dale Thompson Builders

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. B 12 on perc cert

ROAD AND DESCRIPTION (13501 Silent Lake Drive)

[illegible] PERMIT SIGNED
AND RETURNED 10-25-99
Serial # B01209459

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. SFD - 4 Bdrm
(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)

49861 C
COUNTY #

Lot 13

SOIL PROFILE
0' (A) (B) (D)

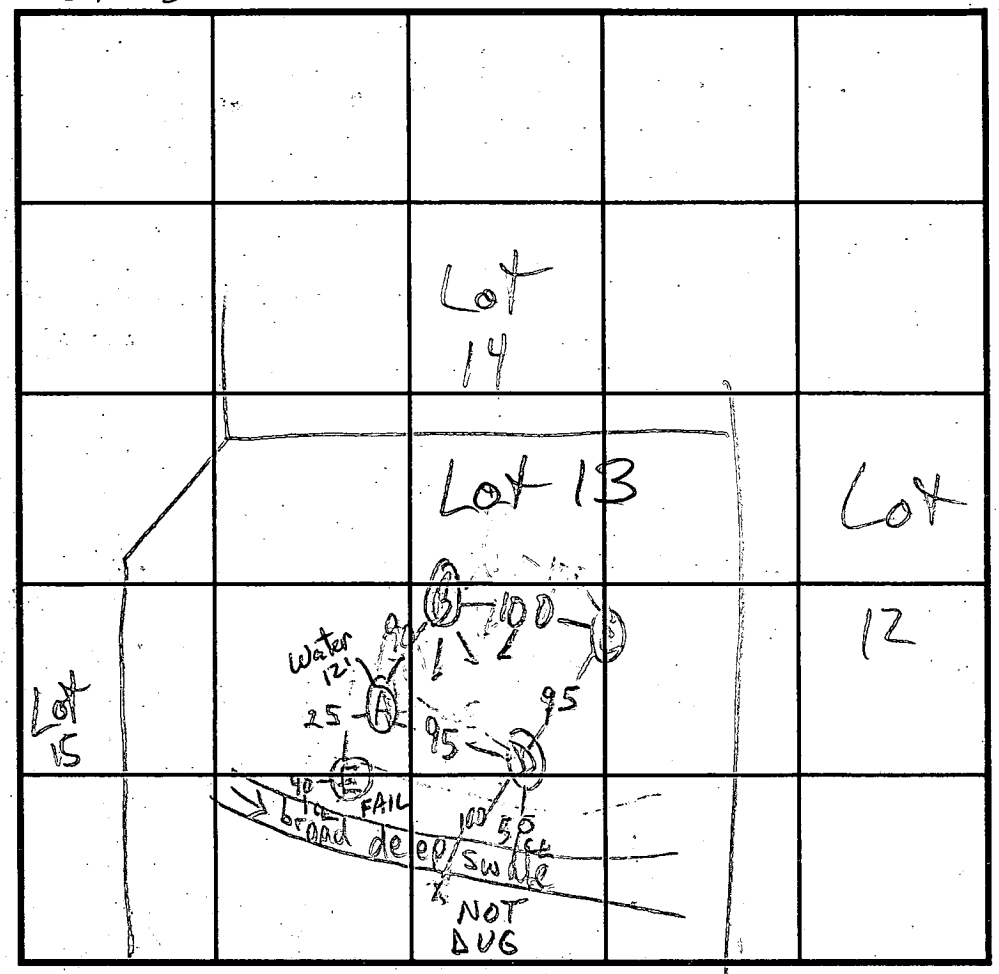
brn
sicl
lm
2½

brn
tan pink
fine
sa lm
10-15% flagstone
saprolite
11-12

(C)
pink
brn
sa cl lm
1-2-3

pink
sa mica
lm
5-10% large
blocky frags
5-10% mica
saprolite
13

SOIL PROFILE
0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BRIGHTON DAM RD

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/8/94	B S	3½	12:01	12:02	12:02	12:04	2
	B M	6½	12:01			12:02	FAST
	B V	11	12:02	12:03	12:03	12:04	1
	C S	3'9"	12:16	12:18	12:18	12:22	4
	C V	13					
	A S	4	12:08	12:10	12:10	12:17	7
	A V	12	H_2O	@ 12'			
	D S	3½	12:30	12:32	12:32	12:35	3
	D V	12					
	E V	11-12'	H_2O	@ 10	½-11'±	NOT SEEN-	
					FAIL	BACKFILLED	

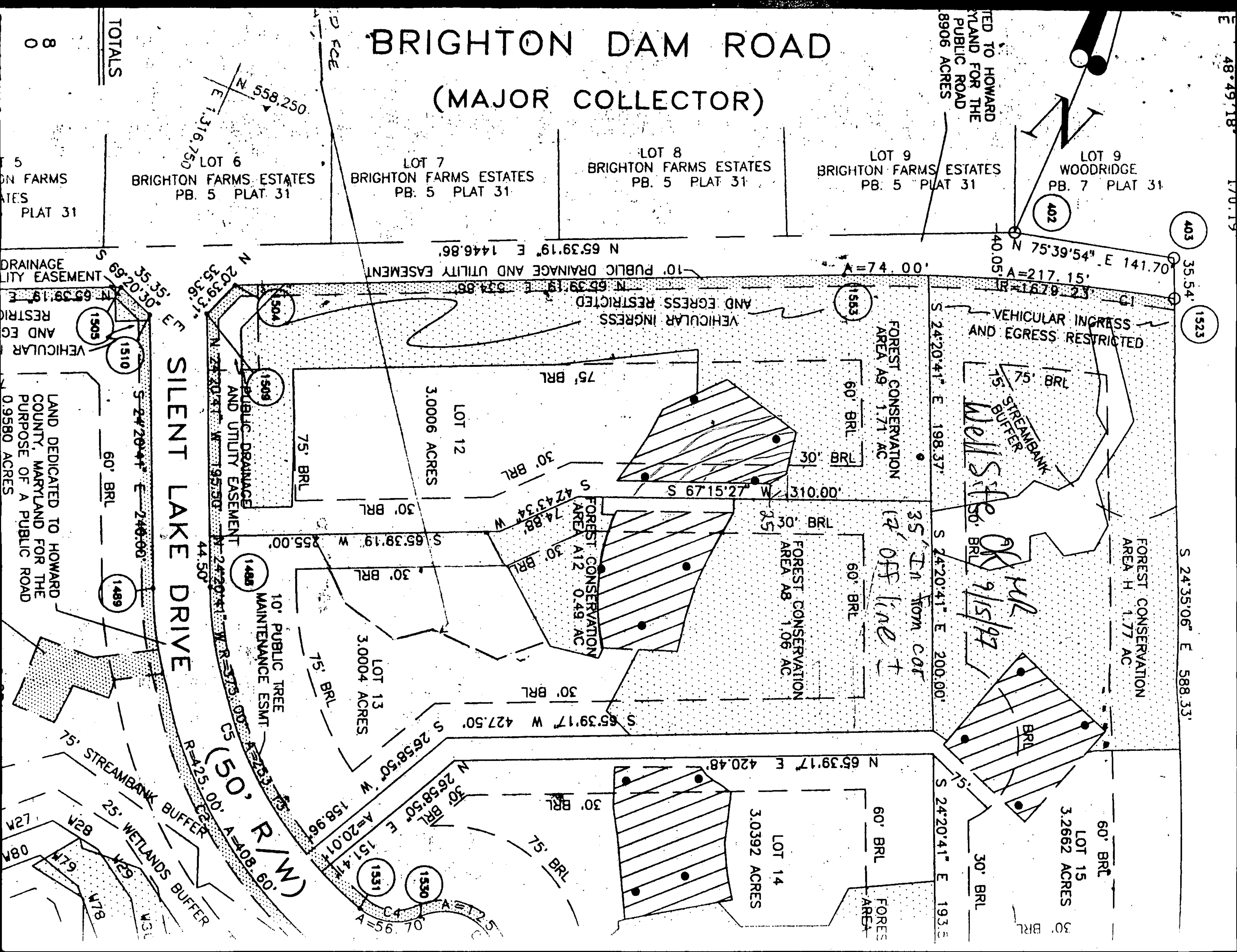
REMARKS (D) (E) & (X) PER ORIG. PLAT; OTHERS NOT PER PLAN

TYPE OF SOIL

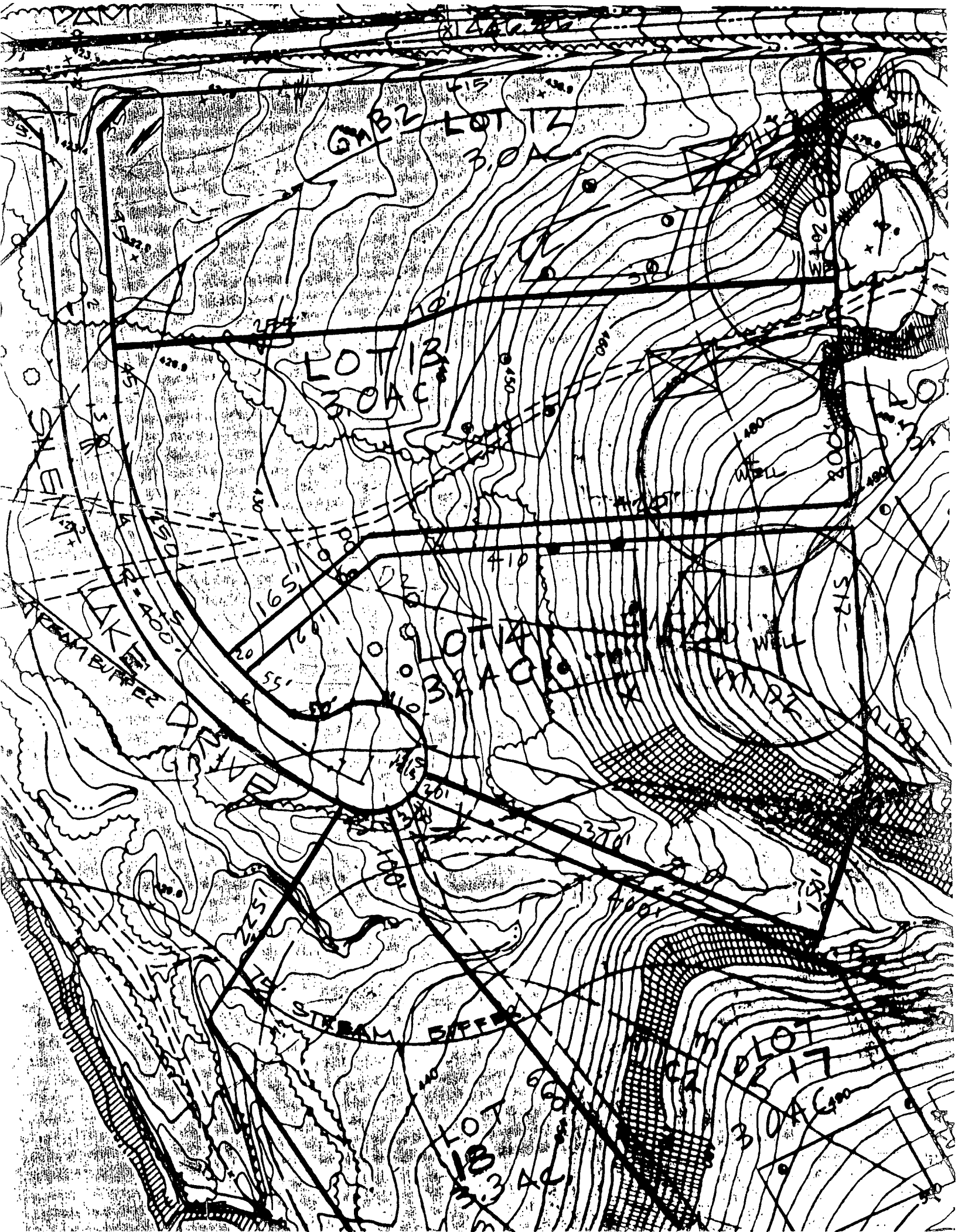
TESTED BY M. Rifkin ALSO PRESENT Allen, Demmitt

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 3 TRENCH WIDTH 3

INLET DEPTH 2½ MAXIMUM BOTTOM DEPTH 4½ SQ. FT/BEDROOM 180



BRIGHTON DAM ROAD
(MAJOR COLLECTOR)
TOTALS
LOT 6
BRIGHTON FARMS ESTATES
PB. 5 PLAT 31
LOT 7
BRIGHTON FARMS ESTATES
PB. 5 PLAT 31
LOT 8
BRIGHTON FARMS ESTATES
PB. 5 PLAT 31
LOT 9
BRIGHTON FARMS ESTATES
PB. 5 PLAT 31
LOT 9
WOODRIDGE
PB. 7 PLAT 31
N 558,250
E 1,316,750
N 65°39'19" E 1446.86'
10' PUBLIC DRAINAGE AND UTILITY EASEMENT
N 75°39'54" E 141.70'
A=74.00'
A=217.15'
R=1679.23'
VEHICULAR INGRESS AND EGRESS RESTRICTED
DRAINAGE
LITY EASEMENT
S 69°20'30" E 35.35'
N 20°39'31" E 35.36'
SILENT LAKE DRIVE
(50' R/W)
LOT 12
3.0006 ACRES
75' BRL
30' BRL
60' BRL
S 67°15'27" W 310.00'
FOREST CONSERVATION AREA A9 1.71 AC
S 24°20'41" E 198.37'
75' STREAMBANK BUFFER
FOREST CONSERVATION AREA A12 0.49 AC
S 42°43'34" W 74.88'
S 65°39'19" W 355.00'
PUBLIC DRAINAGE AND UTILITY EASEMENT
10' PUBLIC TREE MAINTENANCE ESMT
LOT 13
3.0004 ACRES
FOREST CONSERVATION AREA A8 1.06 AC
S 24°20'41" E 200.00'
FOREST CONSERVATION AREA H 1.77 AC
S 24°35'06" E 588.33'
S 65°39'17" W 427.50'
S 26°58'50" W 158.96'
N 26°58'50" E 151.41'
N 65°39'17" E 420.48'
LOT 14
3.0392 ACRES
LOT 15
3.2662 ACRES
S 24°20'41" E
LAND DEDICATED TO HOWARD COUNTY, MARYLAND FOR THE PURPOSE OF A PUBLIC ROAD 0.9580 ACRES
S 24°20'41" E 240.00'
N 24°20'41" W 195.50'
44.50'
R=375.00' A=253.75'
R=425.00' A=408.60'
A=20.01
A=56.70
75' STREAMBANK BUFFER
25' WETLANDS BUFFER
1504
1505
1510
1509
1553
1523
402
403
1489
1488
1531
1530
W27
W28
W29
W78
W79
W80
Well Site OK
35' In from car
(2' off line) +
9/15/97


LOT 12
3.0 AC
LOT 13
3.0 AC
LOT 18
3.0 AC
LOT 14
3.0 AC
LOT 17
3.04 AC
LOT 18
3.3 AC
WELL
WELL
STREAM BUFFER
STREAM BUFFER
LAKE DRIVE
R=400'
165'
150'
410'
400'

STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 | 30.19 | SEQUENCE NO. (MDE USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-1277
fill in this form completely

Date Received (APA): 04/29/96

OWNER INFORMATION

THOMPSON | DALE
Last Name | Owner | First Name

6008 COLUMBIA RD
Street or RFD

COLUMBIA | MD | 21046
Town | State | Zip

DRILLER INFORMATION

CIRCLE: MSD/MGD/MWD

Joseph L. Wayne
Driller's Name

77 License No. 80: 24

Joseph L. Wayne Well Drilling
Firm Name

5512 Ridge Rd. Mt. Airy, Md. 21771
Address

Joseph L. Wayne 4/22/96
Signature | Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (H) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 289 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) | JETTED | Jetted & DRIVEN
(AIR-ROTary) | AIR-PERcussion | ROTARY (Hydraulic Rotary)
CABLE | REVerse-ROTary | DRive-POINT
other

REPLACEMENT OR DEEPENED WELLS
(CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: MR (WRITE INITIALS IN BOX) PERMIT No. HO-94-1277

LOCATION OF WELL

B 3

HOWARD
COUNTY

SPRINGDALE ESTATES
SUBDIVISION

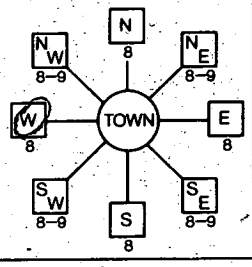
SECTION | LOT 12

CLARKSVILLE
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town): 4 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Silent Lake Drive
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) | WEST (W) | (E) EAST | S SOUTH

DISTANCE FROM ROAD: 525

ENTER FT OR MI: FT

TAX MAP: 34 BLK: 14 PARCEL 423

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard | A49861C
COUNTY NAME | COUNTY NO.

STATE SIGNATURE | INSERT S

DATE ISSUED: 09/16/97 Mark E. Rifkin 9/16/98
CO SIGNATURE | EXP. DATE

NORTH GRID: 497000
EAST GRID: 0805000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

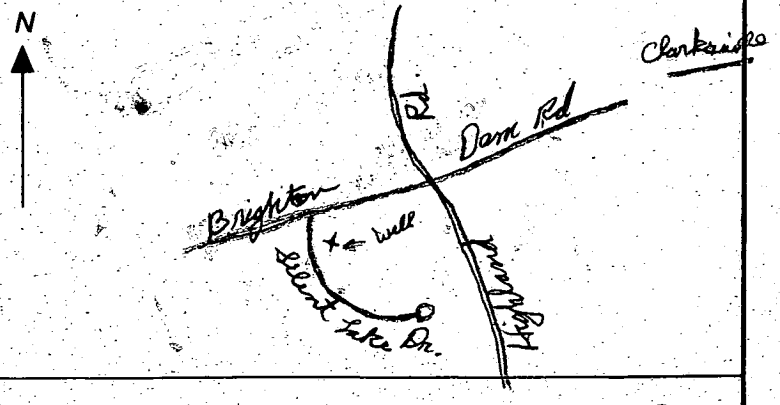
SOURCES OF DRILLING WATER
1. WELL
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 80X5
N 49X7

4/6/97 9:30 GROUT OK
63' CASING NOT OBS'D
59' OPEN
21 BAGS
2' CASING A.G.
LOC OK 4/6/97
000 000 TAG OK MR

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

C 1 | 9587 — SEQUENCE NO. (MDE 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 A49861C

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED: 11 06 97

Depth of Well: 360 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-1277

OWNER Thompson (last name) Dale (first name)
STREET OR RFD Silent Lake Dr TOWN Clarksville
SUBDIVISION SPRINGDALE SECTION LOT 12

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	0	56	
gray granite	56	360	v

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. 024
Joseph L. Mayne
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO.

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 (Circle one)
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 59 ft.
TOP BOTTOM (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	63

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.)	
1	HO	60	360
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

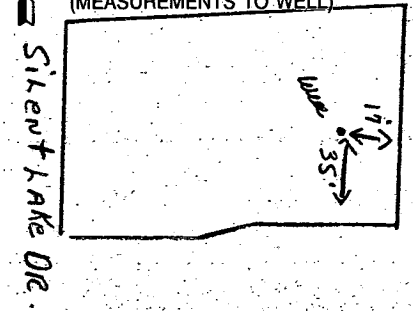
C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 6
PUMPING RATE (gal. per min.) 2.4
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 33 ft.
WHEN PUMPING 274 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

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (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 LAND SURFACE
[−] below
03 (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)



COUNTY