

WP 5/84 P.M.
8/22/84

Approved 8/14/84
Staged

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 34214

A 33183

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

INDEX

03-308987

ELLICOTT CITY

DISTRICT 3rd

DATE 8/13/84

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, MD 21737 PHONE 988-9270

SUBDIVISION Sunset Valley ROAD 995 Sunset Valley Drive LOT 3, Section 2

PROPERTY OWNER Samuel Gwin

4324 Dresden Street

ADDRESS Kensington, MD 20795

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 225 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4½ feet below original grade. Bottom maximum depth 11 feet below original grade. Effective area begins at 4½ feet below original grade with 6½ feet of stone below distribution pipe. LOCATION: Start the trench at the perc hole (1) (2) which is located 120 feet from the back lot line and 180 feet from the left side of the lot as seen when facing the lot from the Right-of-Way. Run the trench toward the right side of the lot as seen when facing the lot from the Right-of-Way. NOTE: No Trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench before and after stone is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

8/10/84 OK to use one 90 ft. long trench 2' wide, 11' deep 6½' stone F.S.

PLANS APPROVED BY Raymond Hodges/Frank Skinner DATE 10/3/83

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

BODG. PERMIT SIGNED
AND RETURNED 4/2/89

Serial # 36832
pouch

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A-33183

10/3/83
1:30 pm

APPLICATION

RETEST

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

*SPECS REVISED
AFTER RETEST*

A 33183

P _____

DISTRICT 3rd

DATE 9/30/83

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.

PROPERTY OWNER Sam Gwin

ADDRESS 4324 Dresden St PHONE 530-6620
Kensington Md

PROPERTY LOCATION:

SUBDIVISION Sunset Valley, Sec. 2 LOT NO. 3

ROAD AND DESCRIPTION 995 Sunset Valley Drive
Sykesville

SIZE OF LOT 3 1/2 Acre TYPE BLDG. Single Family
(NUMBER OF BEDROOMS)

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. /s/ Samuel C. Gwin
(SIGNATURE OF APPLICANT)

APPROVED BY Frank Skennin FOR trenches DATE 10/3/83

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

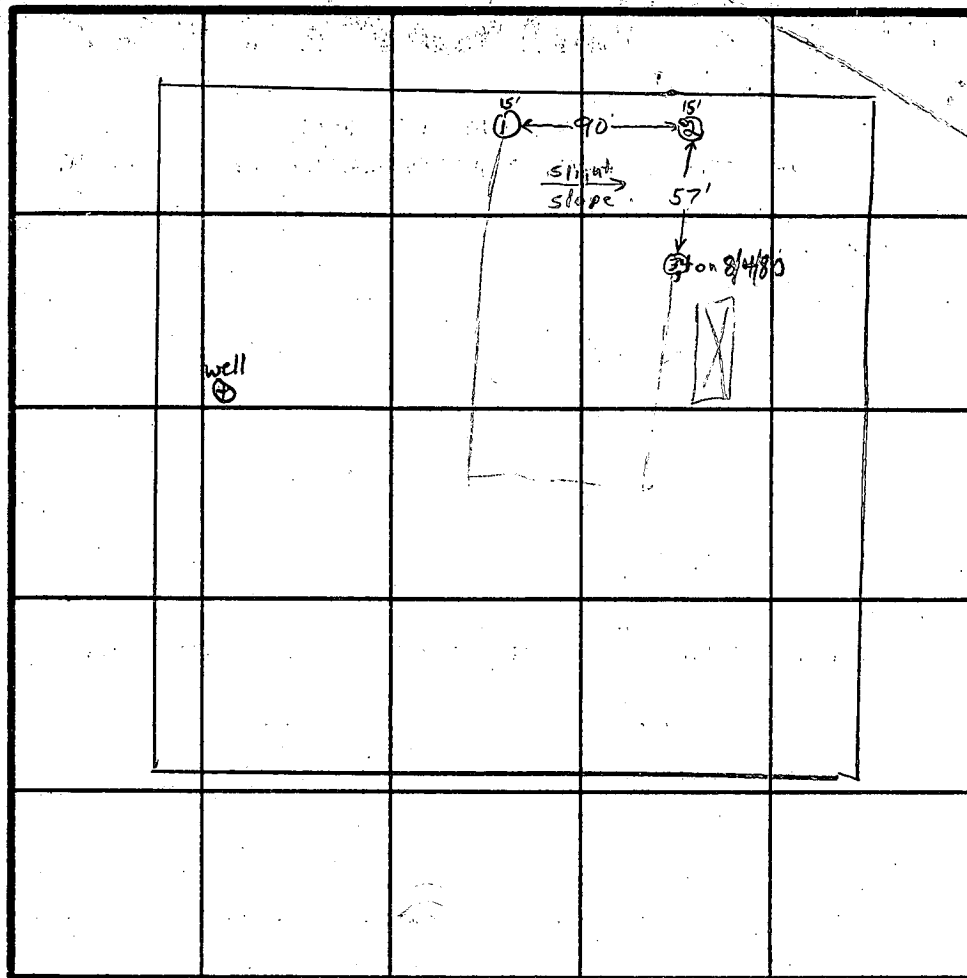
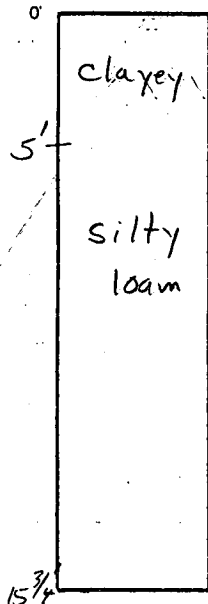
REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 10/4/83
Seawall 55769 SPD.

THIS IS NOT A PERMIT

① ②

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Sunset Valley Drive

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/3/83	1	14 1/2'	Clayey to ~5-6'		Silty loam below		
	1A	6'	2:12	2:30	2:30		
	2	15 3/4'	Clayey to ~5'		Silty loam below		
	2A	6 1/2'	2:29	2:31	2:30	2:35	5 min
	1B	7'	2:40	2:45	2:45	2:57	12 min

REMARKS: House is to be slightly lower than perc. area

TYPE OF SOIL: Silty loam below top 5-6' clayey soil

TESTED BY: F.S.

ALSO PRESENT: Sam Gwin, Sam Eckert & Co.

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

A 29164

P _____

DISTRICT 3RD

DATE 10/12/78

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.

PROPERTY OWNER VIRGINIA M. GARRATT

ADDRESS FORSYTHE ROAD SYKESVILLE, MD. 21784 PHONE 301-442-2262

PROPERTY LOCATION:

SUBDIVISION SUNSET VALLEY LOT NO. See following pages
146 New # 3
See 2 11/14/80

ROAD AND DESCRIPTION SUNSHINE WAY

SIZE OF LOT 3.0 AC. ± TYPE BLDG. SINGLE FAMILY RESIDENCE

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.

SIGNATURE OF APPLICANT Bruce D. Barton

APPROVED BY Raymond Hodges FOR Trench DATE 2/17/83

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

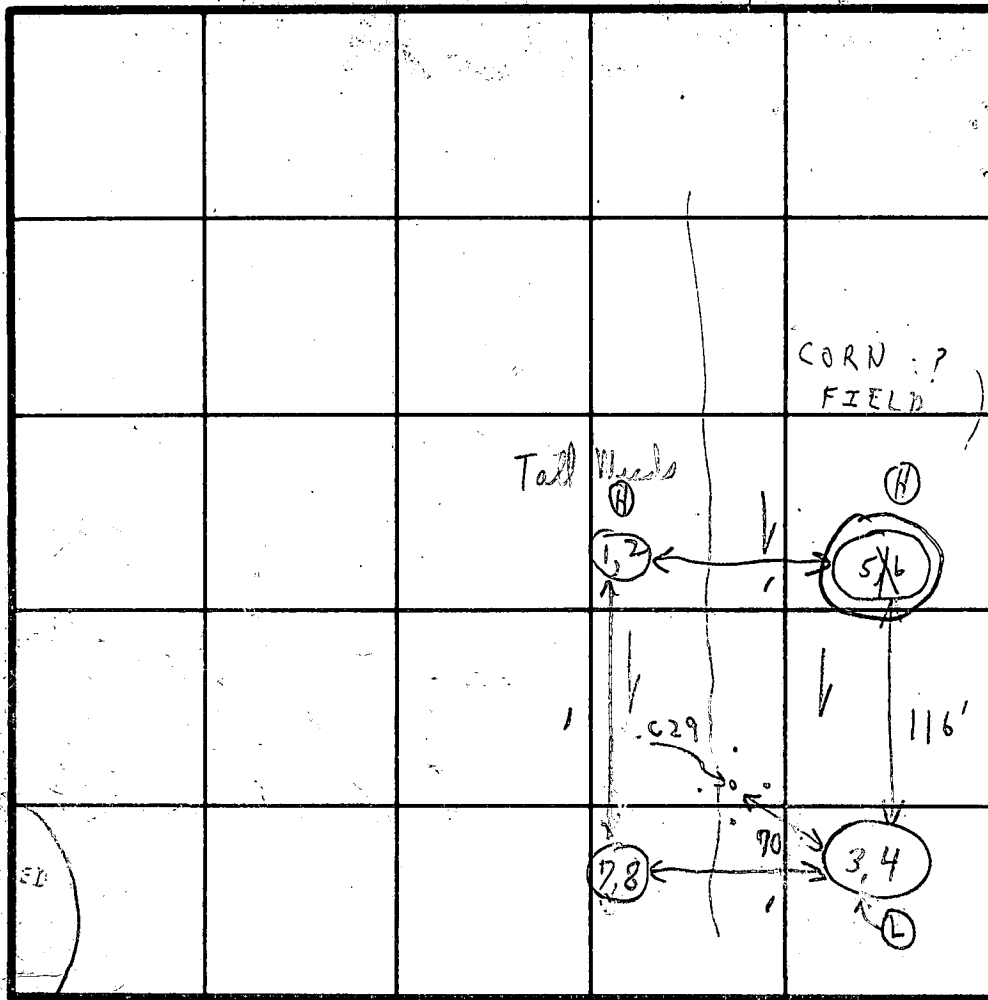
THIS IS NOT A PERMIT

16 p. 1

{ PER PLAT
CROVO HAS }

SOIL PROFILE

BELOW
CLAY
SEE
EACH
HOLE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
1' 5' CLAY 5' - 13 1/2' LOAM	8/4/80	1	5' 1/2'	3:00	3:08	3:08	3:16	8m
1' - 4' CLAY 4 1/2' 13' LOAM		2 (H)	13 1/2'	2:32	2:34	2:34	2:38	4m
1' - 4' CLAY 4 1/2' 13' LOAM		3	4' 1/2'	1:47	1:55	1:55	2:13	18m
1' - 4 1/2' CLAYISH 4 1/2' - 13' 3" LOAM		4 (L)	13' 1/2'	1:43	1:58	1:58	2:26	28m
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		X 5 A	4 1/2'	2:17	2:17	2:17	2:26	9m
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		X 6	13' 3"	2:13	2:17	2:17	2:26	9m
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		7	5' 1/2'	3:13	3:23	3:23	3:5	8 3/4"
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		8	13' 1/2'	3:10	3:14	3:14	3:22	8m
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		X 5B	5' 1/2'	2:55	3:07	3:07	3:33	8 3/4"
1' - 4' CLAY 4 1/2' - 13' 3" LOAM		8 V	14'	Soil similar				

REMARKS

8/4/80 TESTS IN OPEN FIELD, NO L P FOR MORE TESTS

TYPE OF SOIL

TESTED BY

C. B. ✓ + (J. S. @ 2:45)

ALSO PRESENT

ON 8/5/80 OR LATER

MR. CROVO

+ 2 OTHER

MEN

PREL

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

A 29164

P _____

DISTRICT

DATE

3 RD.

10/12/78

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.

PROPERTY OWNER

VIRGINIA M. GARRATT

ADDRESS

FORSYTHE ROAD SYKESVILLE MD.

PHONE

301-442-2262

21784

New #3 11/14/80 PERM

PROPERTY LOCATION:

SUBDIVISION

SUNSET VALLEY

LOT NO.

16

Pg. 1

REACCOMPLISHED

ROAD AND DESCRIPTION

R

SIZE OF LOT

3.0 AC. ±

TYPE BLDG.

SINGLE FAMILY
RESIDENCE

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.

SIGNATURE OF APPLICANT

/s/ BRUCE D. BURTON

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

REMARKS 8/4/80 TESTS IN OPEN FIELD; HOLD FOR MORE TESTS
ON 8/5/80 OR LATER
 TYPE OF SOIL OWNER - BRIEFLY
 TESTED BY C. B. S. + [J. S. @ 2:45] MR. CROVO
+ 2 OTHERS

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE _____

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.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION SUNSET VALLEY LOT NO. # 16 Pg. 2

ROAD AND DESCRIPTION _____

SIZE OF LOT 3 acres ± TYPE BLDG. _____

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.

SIGNATURE OF APPLICANT _____

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SUNSET VALLEY

#16 Pg. 2
New # 3

SOIL PROFILE

SEE
EACH
HOLE
BELOW



147
3
102
104
45

{ See page 1 for hole location }

FIELD SHEET

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

SOIL PROFILE	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
1' - 6" CLAYISH	8/5/80	9	6'	1:26	1:31	1:31	1:43	12m
6" - 14" LAM		10	14'-2"	1:26	1:31	1:31	1:43	12m
2" LAM Y		7B	6'	1:30	1:40	1:40	2:01	21m
1' - 5" clayish		11	14'	Visual similar to others				
6" - 14" Lam								45

REMARKS "HOT" RECOMMEND SHALLOW TRENCHES C.B.A.

TYPE OF SOIL

TESTED BY C.B.A.

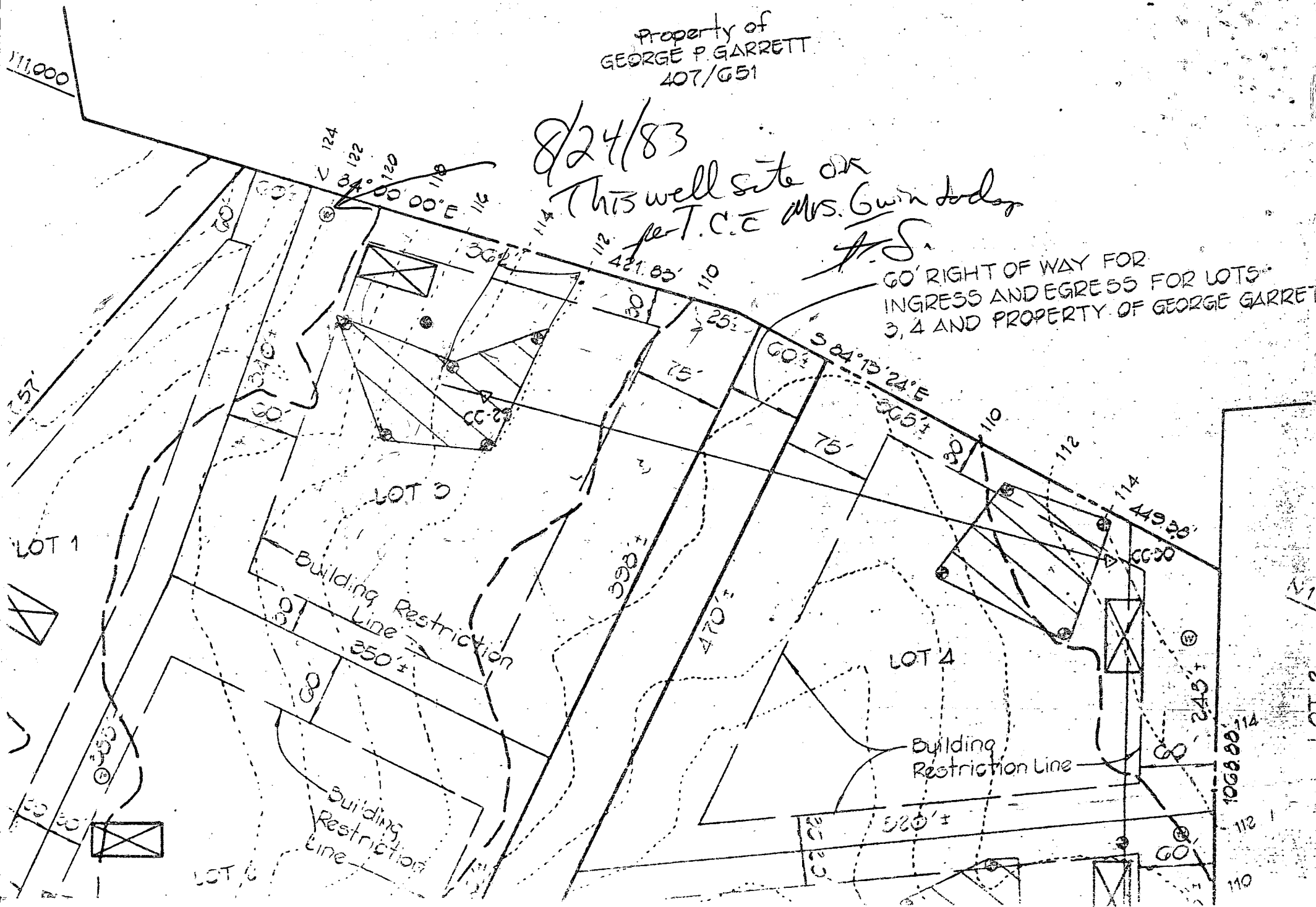
ALSO PRESENT { MR. CROVO & OWNER 8/5/80 }

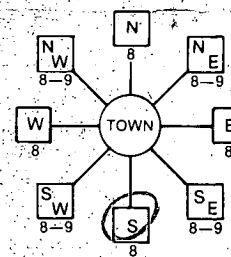
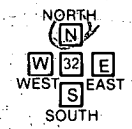
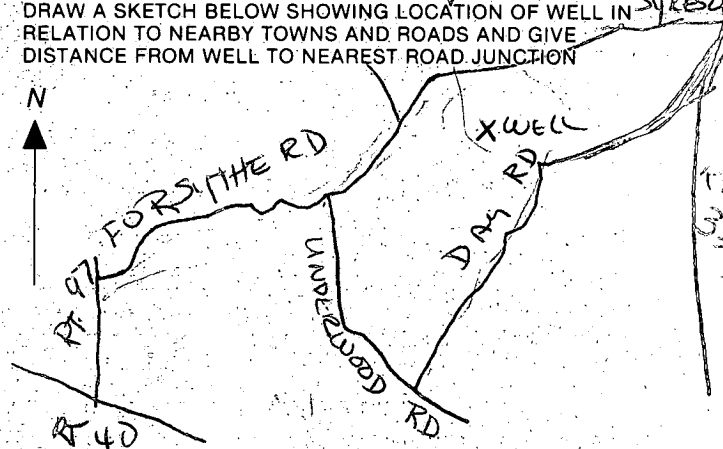
Property of
GEORGE P. GARRETT
407/G51

8/24/83

✓ 21105
This well site OK
per T.C.E Mrs. Guinn today
2-5

GO' RIGHT OF WAY FOR
INGRESS AND EGRESS FOR LOTS
3, 4 AND PROPERTY OF GEORGE GARRE



B 1	5087 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. <small>(OEP USE ONLY)</small>	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER HO-81-0246 <small>fill in this form completely</small>
Date Received 9/15/83, 9:30 062785			LOCATION OF WELL	
OWNER INFORMATION SWIN SAMUEL <small>15 Last Name 21 Owner 34 First Name</small> 4324 DRESDEN STREET <small>36 Street or RFD 55</small> KEESINGTON MD 20795 <small>57 Town 70 State 72 Zip 76</small>			HOWARD <small>8 COUNTY 21</small> SUNSET VALLEY <small>23 SUBDIVISION 42</small> SECTION 2 LOT 3 <small>44 46 48 50</small> SYKESVILLE <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) MI <small>73 76 77 78</small>	
DRILLER INFORMATION GEORGE F. EASTERDAY <small>Driller's Name 77 License No. 80</small> G.F. EASTERDAY, INC. <small>Firm Name</small> 615 Brown Church Rd. Mt. Airy, MD 21771 <small>Address</small> George F. Easterday 6/24/83 <small>Signature Date</small>			DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 <small>8 12</small> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 <small>14 20</small>			995 Sunset Valley Dr. <small>11 NEAR WHAT ROAD 30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 650 <small>34 37</small> ENTER FT or MI FT <small>38 39</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD <small>COUNTY NAME</small> OEP SIGNATURE Frank Shinn 2/24/83 <small>DATE ISSUED</small> 082483 <small>43 48 CO SIGNATURE EXP. DATE</small> NORTH GRID 550000 EAST GRID 0805000 <small>50 55 57 63</small>	
APPROXIMATE DEPTH OF WELL 200 FEET <small>24 28</small>			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 <div style="border: 1px solid black; padding: 5px; display: inline-block;"> E 800 5 N 550 0 </div>	
APPROXIMATE DIAMETER OF WELL 6 INCH <small>NEAREST INCH</small>			Location OK 37' - casing 2' - above gr 33' - open 12' - cement Full dry hole - 2 lap 9/15/83 JS	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTary <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> DRive-POINT <input type="checkbox"/> other <input type="checkbox"/>			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 DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52				
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER GAP <small>54 63</small> FORCE FS WRITE INITIALS IN BOX HO-81-0246 <small>67 68 70 71 72 73 74 75 76 77 78 79</small>				
SPECIAL CONDITIONS				

C14415

SEQUENCE NO.
(OEP 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.

COUNTY
NUMBERA 29164

DATE Received

DATE WELL COMPLETED0911683

Depth of Well224326
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-81-0246

OWNERGwinlast nameSamuelfirst name

STREET OR RFDSunset Valley Drive

TOWNSykesville

SUBDIVISIONSunset ValleySECTION2LOT3

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
Topsoil	0 2	
Br. slate	2 33	✓
Blk slate	33 40	
Gravel Bed	40 43	✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS12NO. OF POUNDS1200

GALLONS OF WATER65

DEPTH OF GROUT SEAL (to nearest foot)
from0ft. to33ft.

CASING RECORD

types insert appropriate code below

STEELCONCRETE
PLASTICOTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

37637

OTHER CASING (if used)

diameter inch

depth (feet) from to

SCREEN RECORD

screen type or open hole

insert appropriate code below

STEELBRASSOPEN HOLE
PLASTICOTHER

DEPTH (nearest ft.)

403543

EACH SCREEN

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

5660

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min. to nearest gal.)10

METHOD USED TO MEASURE PUMPING RATEBucket

WATER LEVEL (distance from land surface)
BEFORE PUMPING26
WHEN PUMPING27

TYPE OF PUMP USED (for test)
AairPpistonTturbine
CcentrifugalRrotaryOother (describe below)
JjetSsubmersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YESNO

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 (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)

well → 45' →

15'

L. lot line

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 10.17.13 "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. 40

DRILLERS SIGNATURE

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

1140-710-A

FIELD DATA SHEET

Well Permit No. HO - 81-0246

Location of property (road) Sunset Valley Dr

Subdivision Sunset Valley Lot 3 Block Plat Sec. 2

Well Driller George F. Eastday Owner Samuel Gwin

Depth of well 40' 40'

Distance of measuring point (M.P.) above ground 18"

Static water level (S.W.L.) below M.P. 26'

I. High rate pumping -- reservoir drawdown

Time pump started 8:25

Pumping rate 10 G.P.M

Total time 8:40 to reach pumping water level 22' ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes p32

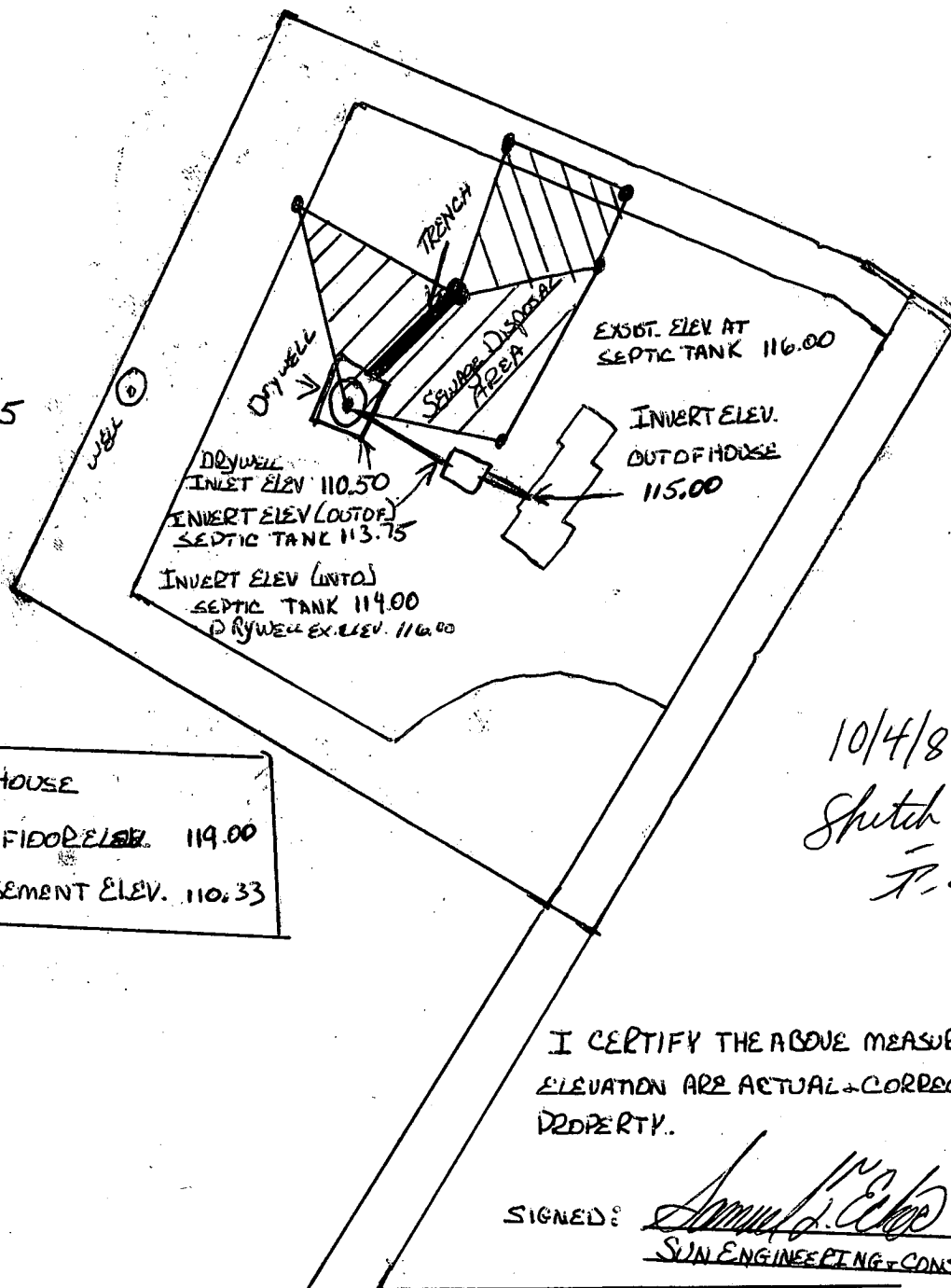
[illegible]



SUN ENGINEERING & CONSTRUCTION INC.

P.O. Box 37
Woodbine, Maryland 21797
875-2775

WATERWELL
EXIST. ELEV. 120.25



SUNSET VALLEY DRIVE

FILE INQUIRY FORM

Property Address: 995 Sunset Valley Dr

Re: 1 BR Add'n

S.T. add'l capacity and verification by
gravel observation that ex. s.s. not failing

MR 3/12/04