4/18/83 around noon, please - is

approved 4/18/83 Stayer

PERMIT

P 32646

A Repair

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

05-344743
INDEX

ELLICOTT CITY
DISTRICT 5th
DATE 4/11/83

Jack Fyock IS PERMITTED TO INSTALL ____ ALTER X

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

SUBDIVISION Beaufort Park ROAD 8504 Reservoir Road LOT 2, Block B

PROPERTY OWNER Mr. Frank Kline

ADDRESS 8504 Reservoir Road, Fulton, Maryland 20759

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

GARBAGE GRINDER? YES ____ NO ____

SEPTIC TANK CAPACITY ____ GALLONS NUMBER OF BEDROOMS ____

REPAIR - Call for an appointment when ground is opened up and Sanitarian will reoommend the repair system.

90 ft trench 1 3½ ft deep with 6 ft of stone.
Note: septic tank deep - pipe coming out at 7½ ft below grade.

PLANS APPROVED BY Palmer F. Wine DATE 4/4/83

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.

BLDG. PERMIT SIGNED AND RETURNED 3/31/86
Lucia #69258
greenhouseaddition

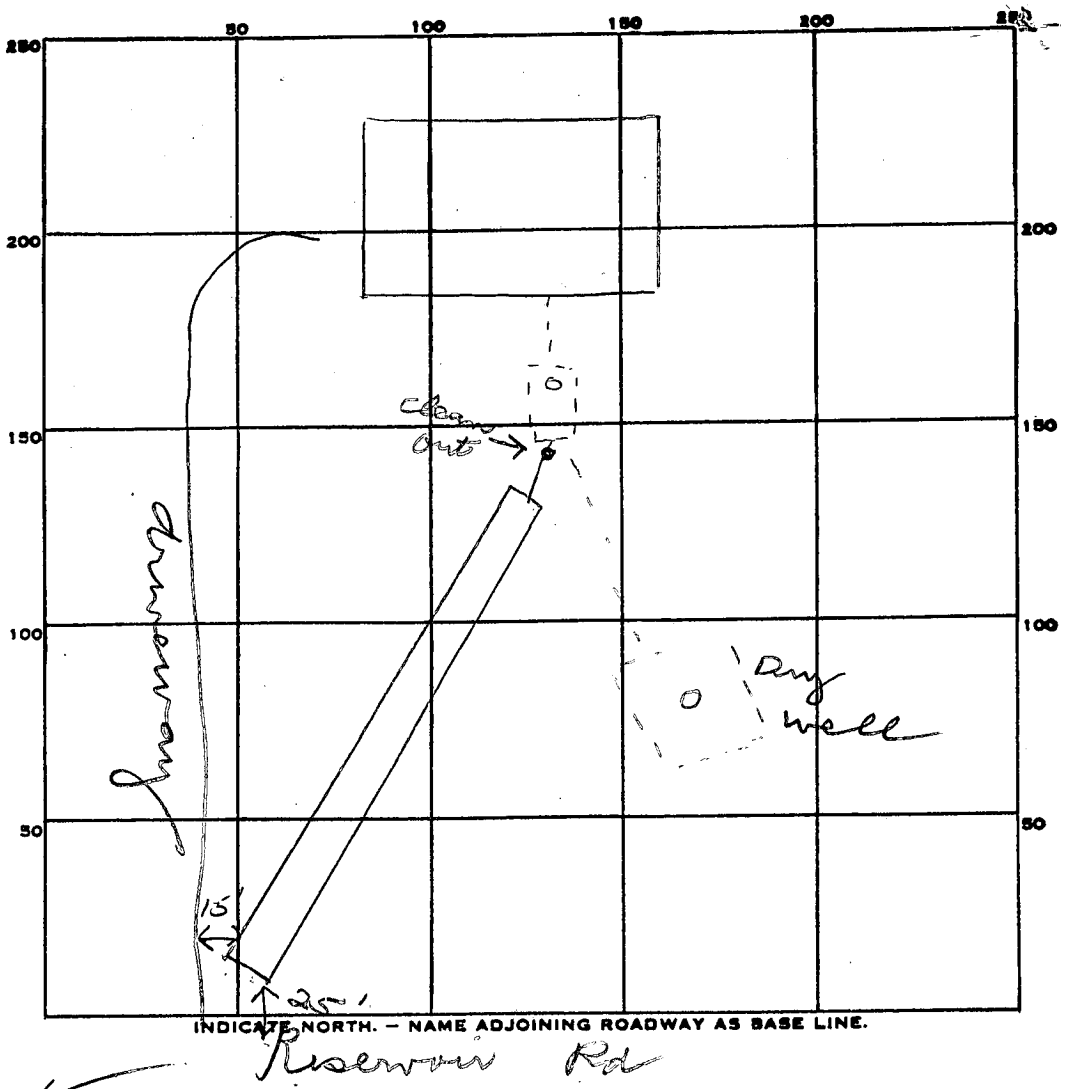
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

P 32646

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

***CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ✓

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 13½ FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 90 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 540

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 540 SQ. FT.

REMARKS 4/18/83 OK to add alone in trench. JS

4/18/83 OK to cover all work. JS

DATE SYSTEM APPROVED 4/18/83 INSPECTOR S Lanyon

8/26/74 Reading

PERMIT

SEWAGE DISPOSAL SYSTEM

P 19827

A 09276

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

8/27/74

DISTRICT 5

DATE 4-18-74

Cumberland IS PERMITTED TO INSTALL X ALTER

ADDRESS 701 Midland Road Silver Spring, Md. PHONE 384-1770

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Beaufort Park ROAD ~~Reservoir~~ Reservoir Road LOT 2, Blk. B, Plat 1

PROPERTY OWNER ~~Walter T. Brown~~ Frank Kline

ADDRESS 7515 Citadel Drive, College Park, Md. 474-0229

SPECIFICATIONS 5 - Bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1500 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Drywell - 100 sq. ft. absorbent sidewall area per bedroom.
Locate Drywell 50 ft. from front lot line and 35 ft. from left side line as lot is seen when facing it from Reservoir Road.
Maximum depth permitted for DryWell is 12ft. below original grade.

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

7/26/74 - Inlet depth 3½ ft. W.A. M.

PLANS APPROVED BY R.D. Fletcher /DWM DATE 1-8-65 Visual hole 8-3-73.

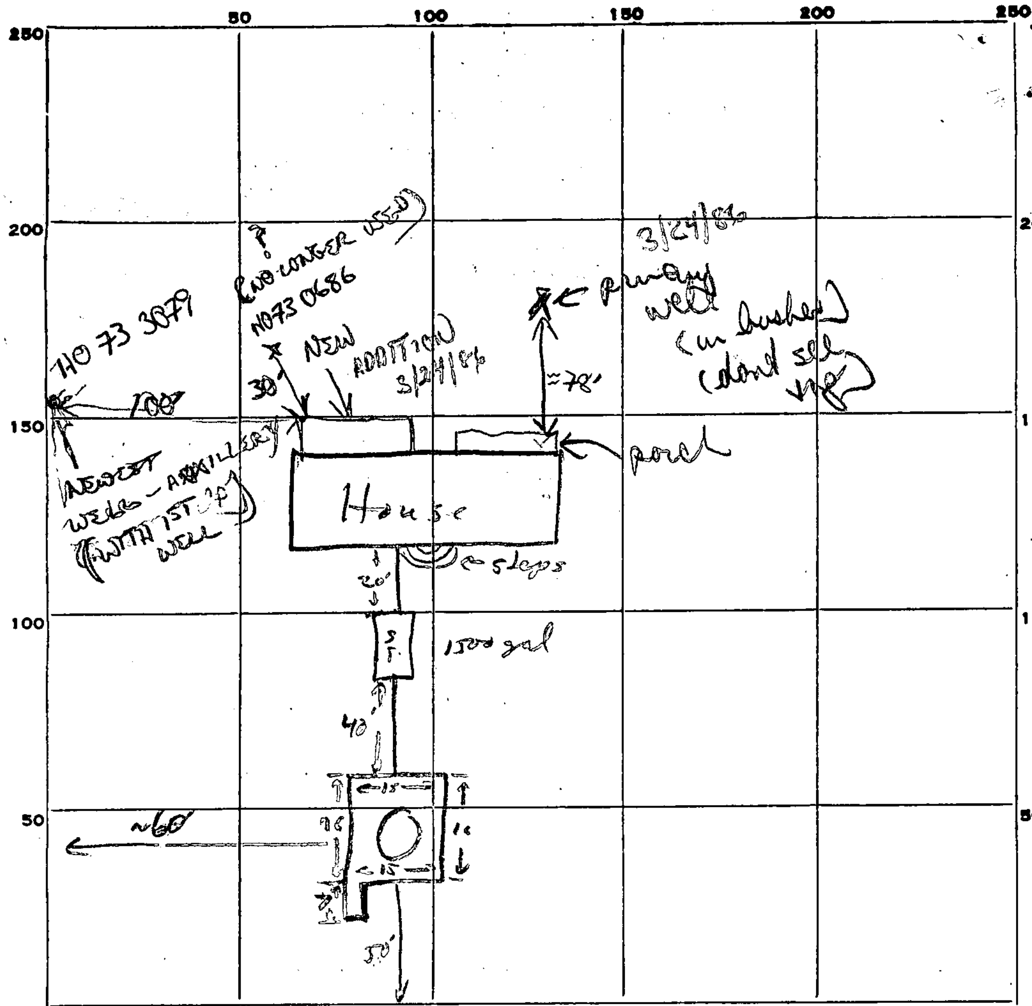
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

P 28685 - 4/20/81 apparently no need for repair of system in Aug of 1978 T.S.

A 09276

11/1/74 - 7.0 fee to be charged for well this time. DWM



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

← Reservoir Rd →

PERMIT CARD ____________

SEPTIC TANK, LEVEL ✓ CLEANOUTS ✓ ✓

~~DISTRIBUTION BOX, LEVEL~~ ____________

Trench
~~TILE FIELD~~, DEPTH 11 FT. ~~TRENCH WIDTH~~ ______ FT.

~~GRAVEL DEPTH~~ ______ IN. ~~TOTAL LENGTH~~ ______ FT.

NUMBER OF TRENCHES 1 TOTAL sidewall ~~BOTTOM~~ AREA ______

SEEPAGE PITS, Perimeter ~~INSIDE DIAMETER~~ 62 FT. DEPTH BELOW INLET 6½ FT.

ABSORBENT AREA 373 ft² SQ. FT.

6.5
62
13.0
36
323

REMARKS 8/26/74 add 5 ft trench off of corner.
trench added while I waited; recall for (1) stone in trench,
(2) cleanout plugs to be installed, (3) cover DW & sewer pipes
(4) manhole to grade on S.T. R.M.
note: invert into D.W. is @ 5½ ft
8/27/74 Stone Added to Ditch, Items (2)(3)(4) not done Talked to Stephen Elmer
10/9/74 - (2)(3)(4) ARE FINISHED R.H.

DATE SYSTEM APPROVED 10/9/74 INSPECTOR Raymond [signature]

8/3/72 - Visual / Ok Dirg
Lole

APPLICATION

SEWAGE DISPOSAL TESTING

A 09276

P

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY ELLICOTT CITY

DISTRICT 5

DATE 10/26/64

1000 gal for 3 bedrooms
Septic Tank ~~1,000~~ 1200 gal for 4 bedrooms
1500 ~~1,500~~ " " 5 "
Drywell - 100 sq ft. absorbent sidewall area per bedroom - ~~[illegible]~~
Locate drywell 50 ft. from front lot line and 35 ft. from left side line as lot is seen when facing it from Reservoir Rd.
Maximum depth permitted for DW. is 12' below orig. grade

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Anne K. Gray & Susie Kondrup

ADDRESS 5132 Loughboro Rd. Washington, D. C. PHONE 363-5335

PROPERTY LOCATION:

SUBDIVISION Beaufort Park LOT NO. 2, Blk. B.

ROAD AND DESCRIPTION Reservoir Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. test per bedroom (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Gray & Kondrup

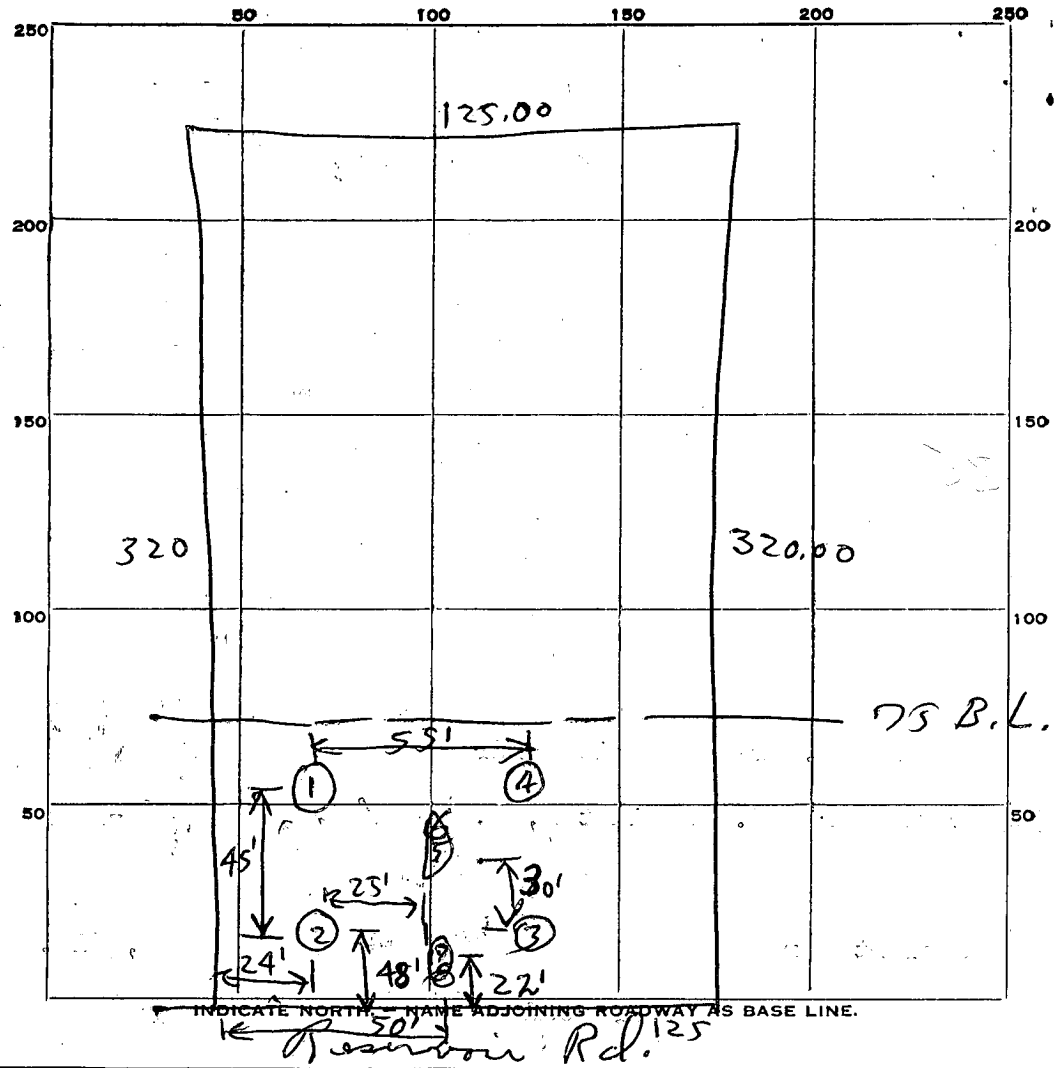
APPROVED BY R.D. Pletcher FOR Drywell (KIND OF SYSTEM) DATE 1/8/65

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



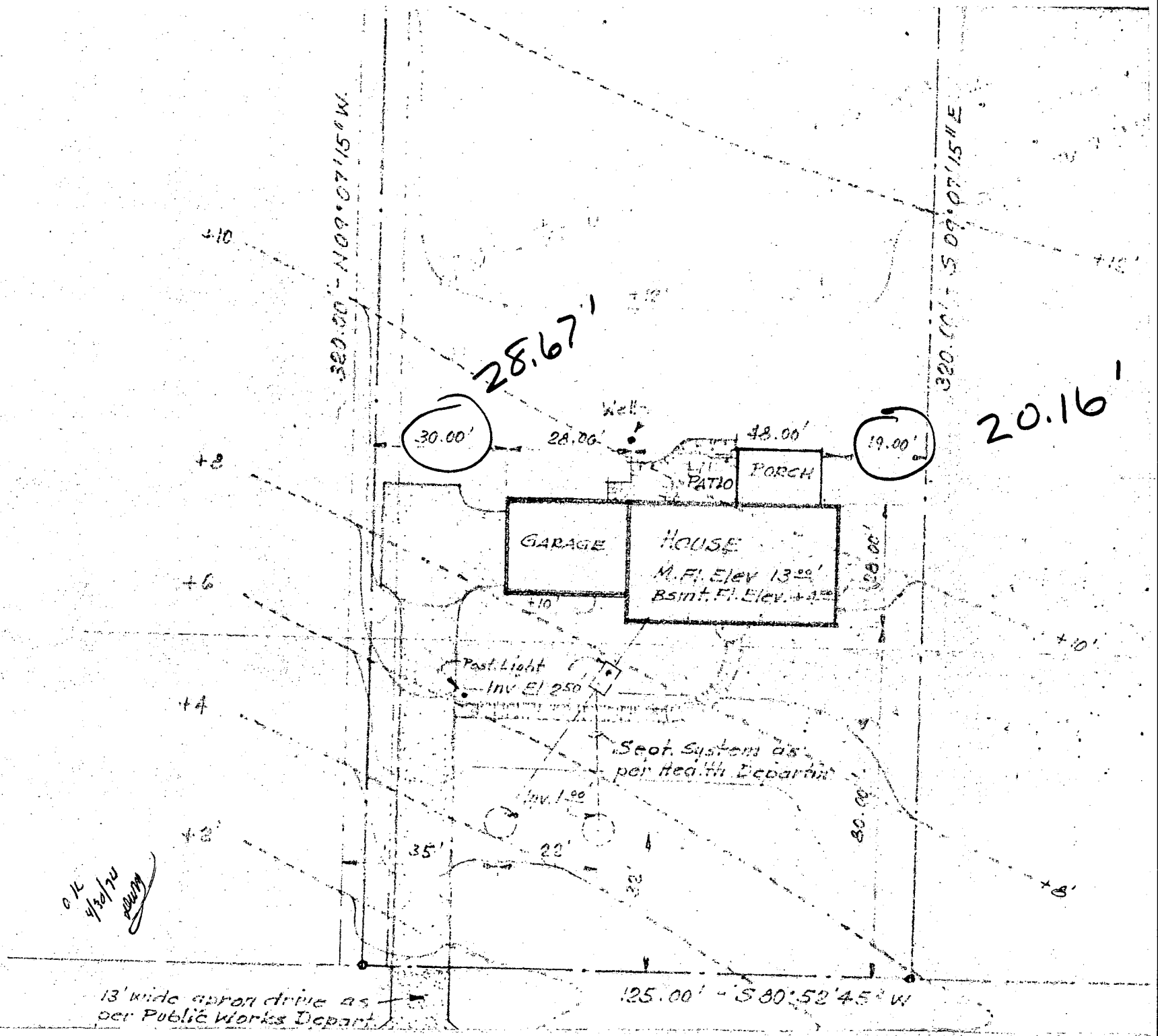
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
10/29/64	1	3½ ft.	1020	1023	1023	1028	5 min.
	2	3½ ft.	1023	1037	1037	Overtime on 2nd inch	
	3	3½ ft.	1025	Overtime on 1st inch			
	4	3½ ft.	1027	Overtime on 1st inch			
	5	~~6~~ 10 ft.	1058	1100	1100	1103	3 min.
	6	5 ft.	1100	1101	1101	1103	2 min.
	7	5 ft.	1114	1116	1116	1122	6 min.
	8	9 ft.	1115	1119	1119	1129	10 min.

SOIL AUGER FINDING 1st 3½ ft. clayish—

TESTED BY RDF 10/29/64

REMARKS

ALSO PRESENT LOT NO. 2B


320.20' - N 09°07'15" W.
320.11' - S 09°07'15" E
28.67'
20.16'
30.00'
28.00'
48.00'
19.00'
Well
PORCH
PATIO
GARAGE
HOUSE
M. Fl. Elev 13.00'
Bsmt. Fl. Elev. +4.00'
38.00'
Post Light
Inv El 250
Sept. System as
per Health Depart
Inv 1.00
80.00'
35'
22'
22'
+10
+8
+6
+4
+2
+10
+8
13' wide apron drive as
per Public Works Depart
125.00' - S 80°52'45" W
O.K.
4/30/74

DNR-131 (7-77) EMERGENCY NO. (If any) –

B 1 7488 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ACL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER: HO-73-3737
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY): 10-15-80

OWNER: KLINE FRANK (COL 15 LAST NAME / FIRST NAME COL. 34)
STREET OR RFD: 8504 RESERVOIR RD. (COL 36 / COL. 55)
POST OFFICE: FULTON, MD. 20759 (COL 57 / COL. 76)

8-13

B 1 CONTINUED (1 2 3 (SEQ. NO.) 6)

DRILLER INFORMATION

DATE: 11/10/80
LICENSE NUMBER: 040 (77 80)
GEORGE F. EASTERDAY (FIRST NAME / DRILLER / LAST NAME)
SIGNATURE: George F. Easterday

B 2 (1 2 3 (SEQ. NO.) 6)

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 (8 12)
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500 (14 20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

(D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
(F) FARMING, AGRICULTURE, IRRIGATION
(I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
22
(M) MUNICIPAL WATER SUPPLY
(P) PRIVATE WATER COMPANY
} MUST HAVE STATE HEALTH DEPT. APPROVAL
(T) TEST

APPROXIMATE DEPTH OF WELL: 120 (24 28) FEET
APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN
30-37 (AIR-ROTARY) AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT
OTHER (DESCRIBE)

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
39
(S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
(D) THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)
(41 52)

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

APPROPRIATION PERMIT NUMBER (G A P) (54 63)
ENGINEER REVIEW DISTRICT NO. (65)
FORCE WRITE INITIALS IN BOX (67 68)
CONDITIONS A E N S G W Q C L U (70 71 72 73 74 75 76 77 78 79)

B 4 CONTINUED (1 2 3 (SEQ. NO.) 6)

HEALTH DEPARTMENT APPROVAL

41 (S) STATE HEALTH (CIRCLE BOX)
HOWARD (COUNTY NAME / COUNTY NO.)
DATE MO. DAY YR.: 11 17 80 (43 48)
Frank Skinner (APPROVED BY)

B 3 (1 2 3 (SEQ. NO.) 6)

LOCATION OF WELL

COUNTY: HOWARD (8 / (DO NOT ABBREVIATE COUNTY NAME) / 21)
SUBDIVISION (23 42)
SECTION (44 46) LOT (48 50)
NEAREST TOWN: Fulton (52 71)
MILES FROM TOWN (ENTER 0 IF IN TOWN): 3 (73 / 76 77 78) (M I)

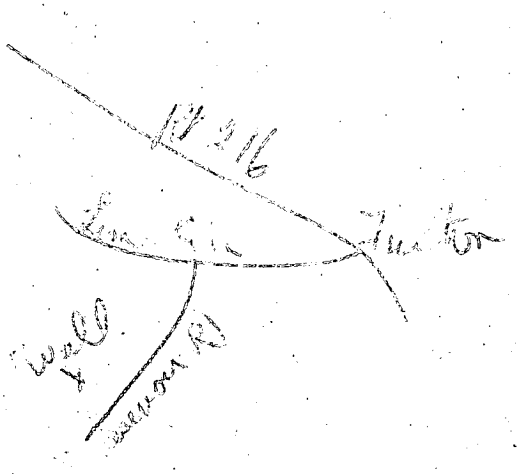
B 4 (1 2 3 (SEQ. NO.) 6)

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

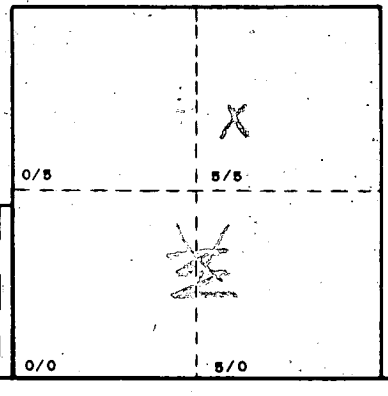
(N) NORTH (E) EAST (NE) NORTHEAST (SE) SOUTHEAST
(S) SOUTH (W) WEST (NW) NORTHWEST (SW) SOUTHWEST
8 8 8 9 8 9

NEAR WHAT ROAD: RESERVOIR RD. (11 / NORTH SOUTH EAST WEST / 30)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): N S E (W) (32 32 32 32)
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 200 (34 / 37) (F T) (M I) (38 39)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER: E 9 (16) N 4 (7) (0)



NORTH COORDINATE: 4 7 5 0 0 0 (50 51 52 53 54 55)
EAST COORDINATE: 0 8 1 5 0 0 0 (57 58 59 60 61 62 63)
ELEVATION AT WELL HEAD (FEET) (65 66 67 68)

B 5 (1 2 3 (SEQ. NO.) 6)
SPECIAL CONDITIONS 8-63 (WRA USE ONLY) (8 / 63)

HEALTH

EMERGENCY

11/12/80 10:00 1st

FILE Emergency Well Permit DATE REPORTED November 7, 1980

PROPERTY OWNER Janet Kline

P.O. ADDRESS 8504 Reservoir Road, Fulton, Md. 20759 TELEPHONE 498-0041

DIRECTIONS TO PROPERTY

INFORMANT Mrs. Kline states that well is going dry. She is getting under ½ gallon a minute. Easterday's were there this afternoon. Please verify.

CONDITION FOUND 11/10/80 Visited site spoke to Mrs. Kline, 2 existing drilled wells in back yard. Met w/ Easterday's crew on site O.K'd acceptable area for new well in back yard, no septic systems or proposed systems within ~100 ft of proposed well. New well permit # is HO-73-3737. Well permit application to follow F. S.

ACTION TAKEN

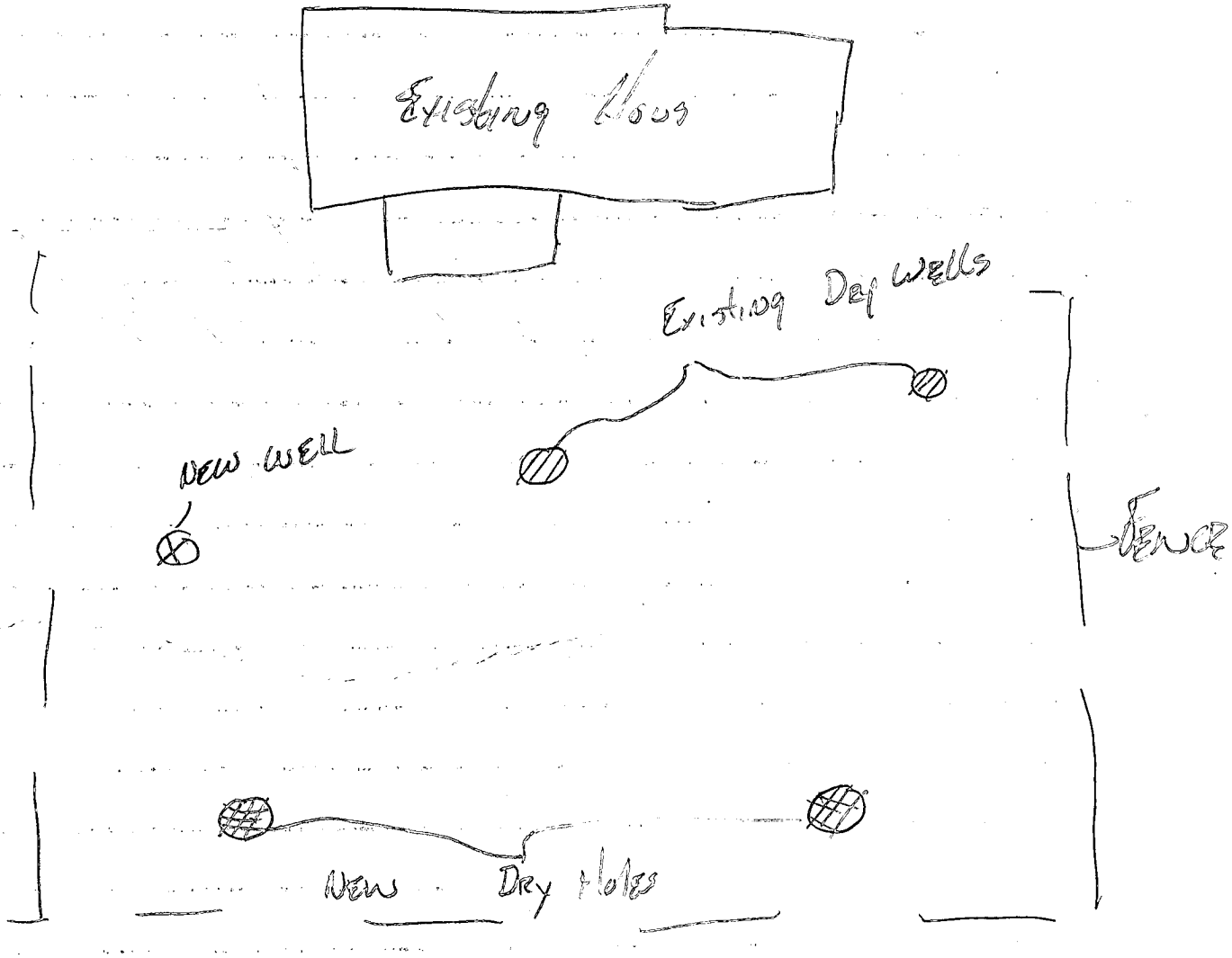
FINAL DISPOSITION

21' casing C.W.D 1½ above grd.

19' OPEN HOLE

6 bags CEMENT

OK ~~SK~~ 11/12/80



311 SEQUENCE NO. (WRA USE ONLY)

(TO BE PUNCHED ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER

ved only) 8-13

DATE WELL COMPLETED 11/12/80 (15–20)

Depth of Well 300 (TO NEAREST FOOT) (22–26)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-3737 (28–37)

OWNER Kline (last name) Frank (first name)

STREET OR RFD 8504 Reservoir Rd. TOWN Fulton

SUBDIVISION CO EMERGENCY SECTION LOT

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
topsoil	0	2	
brown shale	2	10	
brown schist	10	38	✓
mica	38	60	
mica and quartz	60	93	
mica	93	300	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes [Y] no [N] (44)

TYPE OF GROUTING MATERIAL

CEMENT [CM] (45–46) BENTONITE CLAY [BC] (45–46)

NO. OF BAGS 3½ NO. OF POUNDS 3400

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. (48 TOP) to 19 ft. (54 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	Nominal diameter top(main)casing (nearest inch)	Total depth of main casing (nearest foot)
ST (60–61)	6 (62–64)	21 (66–70)

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 (seq. no.) (1–6)

EACH SCREEN	DEPTH (nearest ft.)		
1	HO (8–9)	19 (11–15)	300 (17–21)
2	(23–24)	(26–30)	(32–36)
3	(38–39)	(41–45)	(47–51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH) (56–60)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX [F] (68)

C 3 (seq no) (1–6)

PUMPING TEST
HOURS PUMPED (nearest hour) 2 (8–9)

PUMPING RATE (gal. per min. to nearest gal.) 1 (11–15)

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30 (17–20)

WHEN PUMPING 300 (22–25)

TYPE OF PUMP USED (for test)

[A] air (29) [P] piston (27) [T] turbine (27)

[C] centrifugal (27) [R] rotary (27) [O] other (describe below) (27)

[J] jet (27) [S] submersible (27)

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O) (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31–35)

PUMP HORSE POWER (37–41)

PUMP COLUMN LENGTH (nearest ft) (43–47)

CASING HEIGHT (circle appropriate box and enter casing height)

[+] above [−] below LAND SURFACE 2 (nearest foot) (49–51)

CIRCLE APPROPRIATE BOX
[A] A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

[E] ELECTRIC LOG OBTAINED

[P] TEST WELL CONVERTED TO PRODUCTION WELL

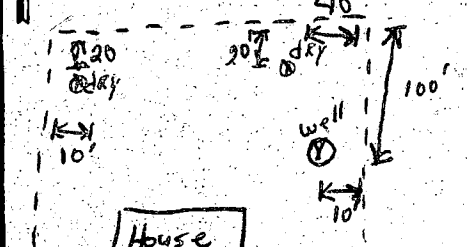
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS IDENT. NO. 40

Denise R. Castleberry
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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)



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

T (70) TELESCOPE CASING

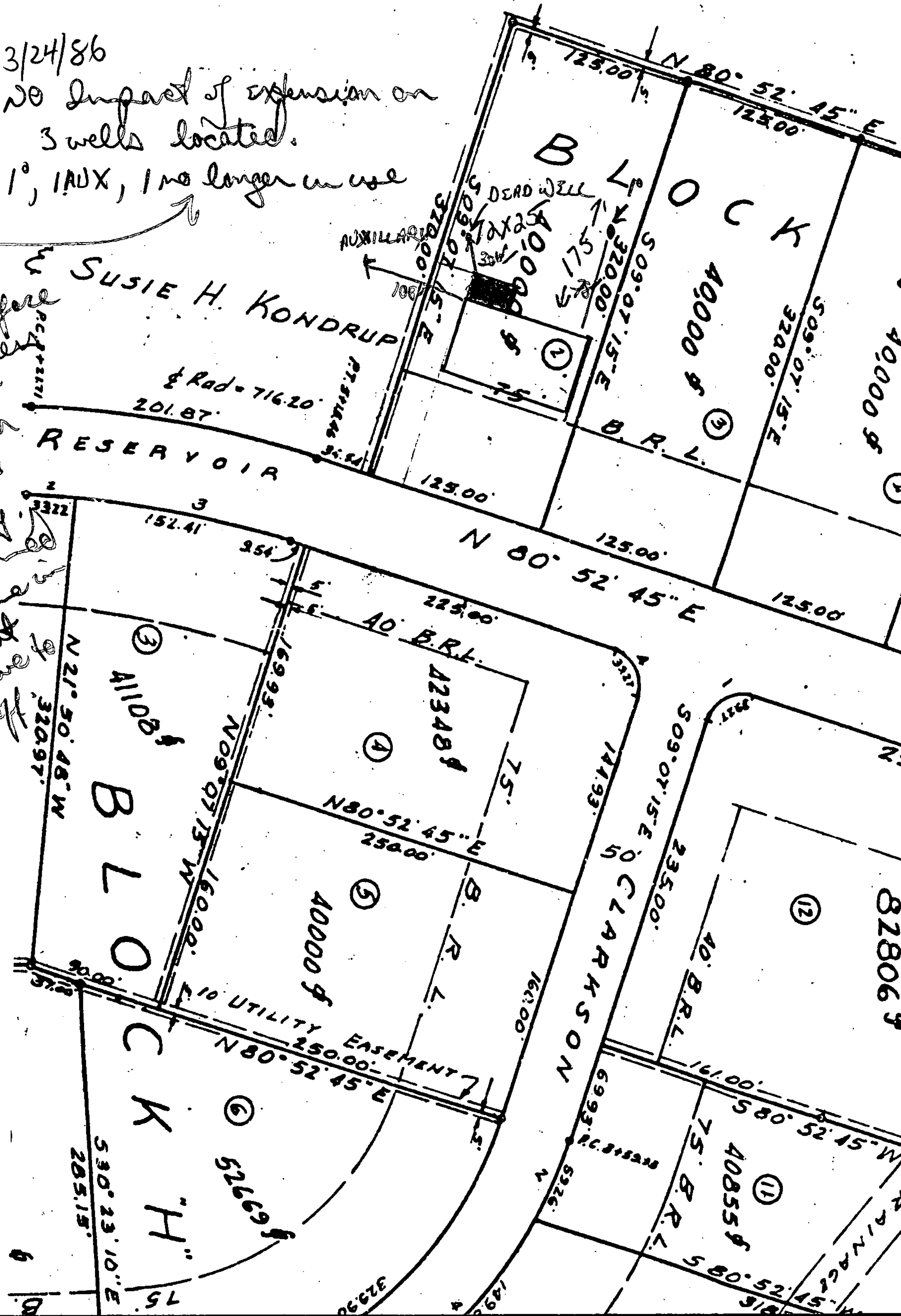
(E.R.O.S.) (72) LOG INDICATOR

W Q (74 75 76) OTHER DATA

HEALTH

3/24/86
NO Impact of extension on 3 wells located.
1°, 1 AUX, 1 no longer in use

was "dead" before present owners moved in
Does not appear to be unsound structurally.
Owner was informed that at some time in the future that well may have to be capped off.



8/25/78
1:30p.m.

FILE Emergency Well DATE REPORTED 8/21/78

PROPERTY OWNER Mrs. Walter Brown

P.O. ADDRESS 8504 Reservoir Rd. TELEPHONE 497-1780

DIRECTIONS TO PROPERTY Fulton, Md.

INFORMANT please verify that well has run dry.
Easterday to call for emergency number.

Emergency Well # → HO-78-E7

CONDITION FOUND 08-21-78 No water ran out after 5-6 gallons RDB
TO FF For emergency well DJon 8/22/78

829-1640

ACTION TAKEN WELL DRILLED - 8/25/78 EASTERDAY
24' CASING
2' ABOVE GROUND
22' OPEN HOLE
6 - BAGS CEMENT
OK JS 8/25/78

FINAL DISPOSITION

DNR-131 (7-77) EMERGENCY NO. (If any) –

B 1 · 4437 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER: HO-78-2961
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)

OWNER: Rosen [illegible] — COL 15 LAST NAME — FIRST NAME — COL. 34
STREET OR RFD: Reservoir Rd. — COL 36 — COL. 55
POST OFFICE: Fulton Md. — COL 57 — COL. 76

6-13

B 1 CONTINUED (SEQ. NO.) 6

DRILLER INFORMATION

DATE: 8/28/78 — LICENSE NUMBER: 90 (77–80)
W. F. Easterday
FIRST NAME — DRILLER — LAST NAME
SIGNATURE: W. F. Easterday

B 2 (SEQ. NO.) 6

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 (8–12)
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 600 (14–20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

(D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
(F) FARMING, AGRICULTURE, IRRIGATION
(I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
22
(M) MUNICIPAL WATER SUPPLY
(P) PRIVATE WATER COMPANY
} MUST HAVE STATE HEALTH DEPT. APPROVAL
(T) TEST

APPROXIMATE DEPTH OF WELL: 150 FEET (24–28)
APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

	BORED (OR AUGERED)	JETTED	DRIVEN
30-37	(AIR-ROTARY)	AIR-PERCUSSION	ROTARY (HYDRAULIC ROTARY)
	CABLE	REVERSE-ROTARY	DRIVE-POINT

OTHER (DESCRIBE)

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
39
(S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
(D) THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)
(41–52)

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

APPROPRIATION PERMIT NUMBER (G A P) (54–63) — ENGINEER REVIEW DISTRICT NO. (65)
FORCE (67–68) — WRITE INITIALS IN BOX — CONDITIONS (A E N S G W Q C L U) (70–79)

B 4 CONTINUED (SEQ. NO.) 6

HEALTH DEPARTMENT APPROVAL

41 (S) STATE HEALTH (CIRCLE BOX) — Howard — COUNTY NAME — 1128784 — COUNTY NO.
DATE (MO. DAY YR.): 09 07 78 (43–48) — APPROVED BY: Palmer F. Wine

B 3 (SEQ. NO.) 6

LOCATION OF WELL

COUNTY: Howard (8–21) (DO NOT ABBREVIATE COUNTY NAME)
SUBDIVISION (23–42)
SECTION (44–46) — LOT (48–50)
NEAREST TOWN: Fulton (52–71)
MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 (79) — M I (76 77 78)

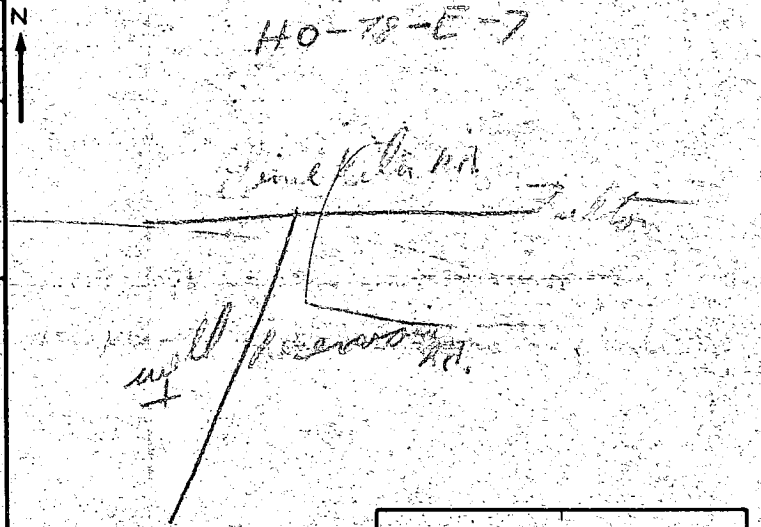
B 4 (SEQ. NO.) 6

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

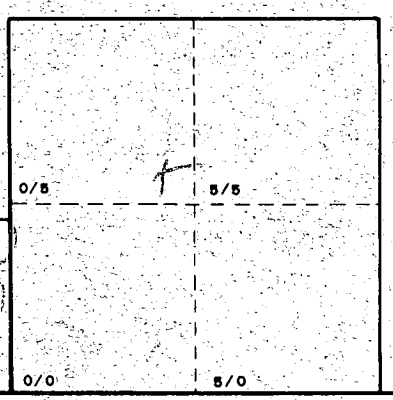
(N) NORTH (E) EAST (NE) NORTHEAST (SE) SOUTHEAST
(S) SOUTH (W) WEST (NW) NORTHWEST (SW) SOUTHWEST
8 8 8 9 8 9

NEAR WHAT ROAD: Reservoir Rd. (11–30)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): (N) (S) (E) (W) (32)
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 150 (34–37) (F T) (M I) (38 39)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER: E 810 (50–53) N 430 (54–57)



NORTH COORDINATE: 0 3 5 [illegible] (50–55)
EAST COORDINATE: 0 4 [illegible] (57–63)
ELEVATION AT WELL HEAD (FEET): (65–68)

B 5 (SEQ. NO.) 6

SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

HEALTH

DNR-214 (7-77)

C 1 1745 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WI IN 30 DAYS AFTER WELL COMPLET
FILL IN THIS FORM COMPLETELY
COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 8-13 (15 20)
DATE WELL COMPLETED 8/25/78 (15 20)
DEPTH OF WELL 300 (TO NEAREST FOOT.) (22 26)
PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-2967 (28 29 30 31 32 33 34 35 36 37)
DRILLERS IDENTIFICATION NO. 40

OWNER BROWN WALTER (LAST NAME / FIRST NAME)
STREET OR RFD RESERVOIR RD. POST OFFICE FULTON MD.

WELL DESCRIPTION

WELL LOG
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
topsoil	0	2	
shaley	2	10	
MICA	10	34	
sandstone	34	35	—
MICA	35	60	
sandstone	60	65	
MICA	65	80	
sandstone	80	82	
MICA	82	160	
QUARTZ	160	164	
MICA	164	300	

GROUTING RECORD
WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [Y] (44) NO [N] (44)
TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [C M] (45 46) BENTONITE CLAY [B C] (45 46)
NO. OF BAGS 10 NO. OF POUNDS 600
GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
FROM 0 (48 52) FT. TO 22 (54 58) FT.
(ENTER 0 IF FROM SURFACE)

CASING RECORD
CASING TYPES — INSERT APPROPRIATE CODE BELOW
STEEL [S T] CONCRETE [C O] PLASTIC [P L] OTHER [O T]

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
S T (60 61)	6 (63 64)	24 (66 70)

OTHER CASING (IF USED)
EACH CASING

	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD
SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW
STEEL [S T] BRASS OR BRONZE [B R] OPEN HOLE [H O] PLASTIC [P L] OTHER [O T]

C 2 (1 2 3 (SEQ. NO.) 6)

EACH SCREEN

	DEPTH (NEAREST WHOLE FOOT.) FROM	TO
1 H O (8 9)	22 (11 15)	300 (17 21)
2 (23 24)	(26 30)	(32 36)
3 (38 39)	(41 45)	(47 51)

SLOT SIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)
FROM ____ TO ____
GRAVEL PACK ____ ____
IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX (68) [F]

CIRCLE APPROPRIATE BOXES
[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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME
(PLEASE PRINT) GEORGE F. EASTMAN
SIGNATURE George F. Eastman

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) TELESCOPE CASING
(E.R.O.S.) (72) LOG INDICATOR
W Q (74 75 76) OTHER DATA AVAILABLE

C 3 (1 2 3 (SEQ. NO.) 6)

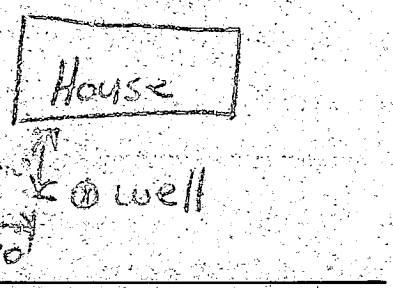
PUMPING TEST
HOURS PUMPED (TO NEAREST HOUR) 2 (8 9)
PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1 (11 15)
METHOD USED TO MEASURE PUMPING RATE BUCKET
WATER LEVEL: (DISTANCE FROM LAND SURFACE)
BEFORE PUMPING 40 (17 20) (NEAREST FOOT)
WHEN PUMPING 300 (22 25) (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
[A] AIR (27) [P] PISTON (27) [T] TURBINE (27)
[C] CENTRIFUGAL (27) [R] ROTARY (27) [O] OTHER (DESCRIBE BELOW) (27)
[J] JET (27) [S] SUBMERSIBLE (27)

PUMP INSTALLED
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O) (29)
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]
CAPACITY:
GALLONS PER MINUTE (TO NEAREST GALLON) (31 35)
PUMP HORSE POWER (37 41)
PUMP COLUMN LENGTH (NEAREST FOOT) (43 47)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
[+] ABOVE / [−] BELOW LAND SURFACE 2 (49) (50 51) (NEAREST FOOT)

LOCATION OF WELL ON LOT
N — SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



HEALTH HO-78-E-8

DNR-131 (7-77) EMERGENCY NO. (If any) –

B 1 1928 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER HO-79-
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) 10/11/77 1:30 p.m.

OWNER Lawson F. Walker (COL 15 LAST NAME / FIRST NAME COL. 34)
STREET OR RFD Lawsons Rd (COL 36 / COL. 55)
POST OFFICE Ilchester Md. 21810 (COL 57 / COL. 76)

8-13

B 1 CONTINUED (SEQ. NO.)

DRILLER INFORMATION

DATE Sept 10, 1977 LICENSE NUMBER 238 (77 / 80)
Joseph F. Mayne (FIRST NAME / DRILLER / LAST NAME)
SIGNATURE Joseph F. Mayne

B 2 (SEQ. NO.)

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 (8 / 12)
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 750 (14 / 20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

(D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
(F) FARMING, AGRICULTURE, IRRIGATION
(I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
22
(M) MUNICIPAL WATER SUPPLY
(P) PRIVATE WATER COMPANY
} MUST HAVE STATE HEALTH DEPT. APPROVAL
(T) TEST

APPROXIMATE DEPTH OF WELL 200 FEET (24 / 28)
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN
30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT
OTHER (DESCRIBE)

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
39
(S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
(D) THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)
(41 / 52)

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

APPROPRIATION PERMIT NUMBER G A P (54 / 63) ENGINEER REVIEW DISTRICT NO. (65)
FORCE (67 / 68) WRITE INITIALS IN BOX
CONDITIONS A E N S G W Q C L U (70 / 71 / 72 / 73 / 74 / 75 / 76 / 77 / 78 / 79)

B 4 CONTINUED (SEQ. NO.)

HEALTH DEPARTMENT APPROVAL

41 (S) STATE HEALTH (CIRCLE BOX) Howard COUNTY NAME M26864 COUNTY NO.
DATE MO. 09 DAY 13 YR. 77 (43 / 48)
APPROVED BY Donald W. Monaghan, Sanitarian

B 5 (SEQ. NO.)

SPECIAL CONDITIONS 8-63 (WRA USE ONLY) (8 / 63)

HEALTH

B 3 (SEQ. NO.)

LOCATION OF WELL

COUNTY Howard (8 / 21) (DO NOT ABBREVIATE COUNTY NAME)
SUBDIVISION (23 / 42)
SECTION – (44 / 46) LOT – (48 / 50)
NEAREST TOWN Savage (52 / 71)
MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 9/10 (73 / 76) (M / I) 78

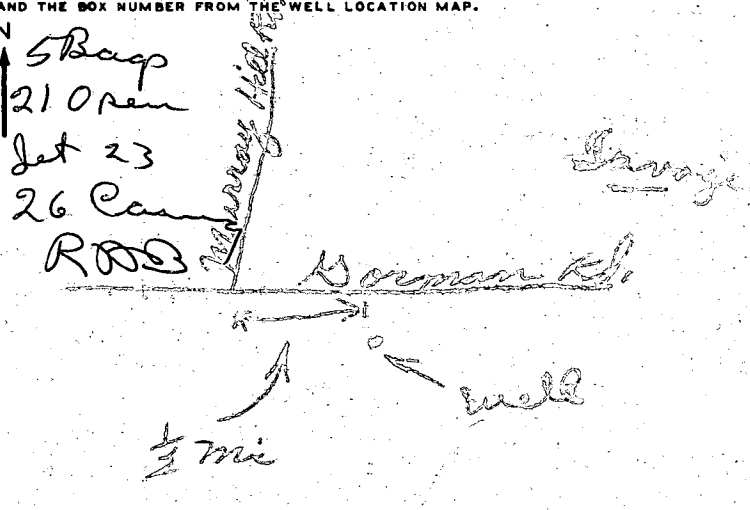
B 4 (SEQ. NO.)

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

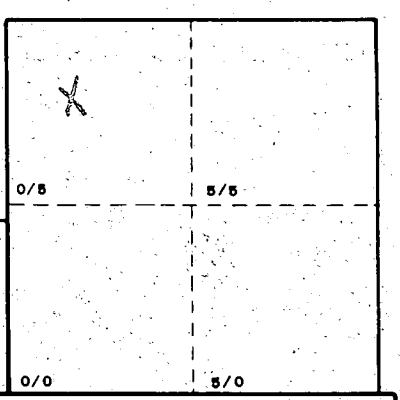
(N) NORTH (E) EAST (NE) NORTHEAST (SE) SOUTHEAST
(S) SOUTH (W) WEST (NW) NORTHWEST (SW) SOUTHWEST
8 8 8 9 8 9

NEAR WHAT ROAD Gorman Road (11 / 30)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH (N) 32 SOUTH (S) 32 EAST (E) 32 WEST (W) 32
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 406 (34 / 37) (F / T) (M / I) 38 39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER E 950 N 470



NORTH COORDINATE 17 (50 / 55)
EAST COORDINATE (57 / 63)
ELEVATION AT WELL HEAD (FEET) (65 / 68)

DNR-214 (7-77)

C 1 1679 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLET
FILL IN THIS FORM COMPLETELY
COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 8-13
DATE WELL COMPLETED Nov 14 1977 (15–20)
DEPTH OF WELL 305 (22 (TO NEAREST FOOT) 26)
PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-2320 (28 29 30 31 32 33 34 35 36 37)
DRILLERS IDENTIFICATION NO. 234

OWNER Lemons (LAST NAME) T. William (FIRST NAME)
STREET OR RFD Loveton Rd. POST OFFICE Parkton Md.

WELL DESCRIPTION

WELL LOG
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Weathered clay	0	23	
White clay	23	305	

GROUTING RECORD
WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES (Y) (44) NO (N) (44)
TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT (C M) (45 46) BENTONITE CLAY (B C) (45 46)
NO. OF BAGS 3 NO. OF POUNDS 470
GALLONS OF WATER 250
DEPTH OF GROUT SEAL (TO NEAREST FOOT)
FROM 0 (48 52) FT. TO 103 (54 58) FT.
(ENTER 0 IF FROM SURFACE)

CASING RECORD
CASING TYPES — INSERT APPROPRIATE CODE BELOW
STEEL (S T) CONCRETE (C O) PLASTIC (P L) OTHER (O T)

MAIN CASING TYPE (60 61)	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) (63 64)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) (66 70)
S T	6	26

OTHER CASING (IF USED) — EACH CASING

	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD
SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW
STEEL (S T) BRASS OR BRONZE (B R) OPEN HOLE (H O) PLASTIC (P L) OTHER (O T)

C 2 (1 2 3 (SEQ. NO.) 6)

DEPTH (NEAREST WHOLE FOOT) — EACH SCREEN

		FROM (11 15)	TO (17 21)
1	16 (8 9)	275	305
2			
3			

	(23 24)	26 30	32 36
3		41 45	47 51

SLOT SIZE 1. ____ 2. ____ 3. ____
DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)
FROM ____ TO ____
GRAVEL PACK ____ ____
IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX (68 F)

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) TELESCOPE CASING
(E.R.O.S.) (72) LOG INDICATOR
W Q (74 75 76) OTHER DATA AVAILABLE

CIRCLE APPROPRIATE BOXES
(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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME (PLEASE PRINT) Joseph Wagner
SIGNATURE Joseph Wagner

C 3 (1 2 3 (SEQ. NO.) 6)

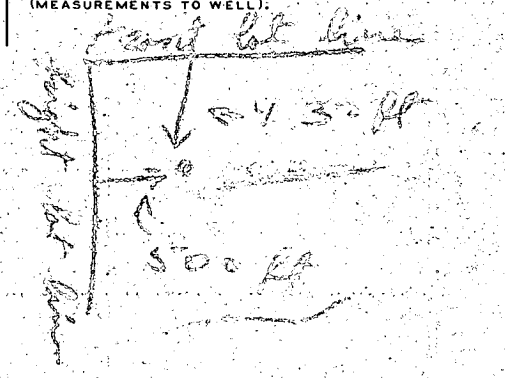
PUMPING TEST
HOURS PUMPED (TO NEAREST HOUR) 2 (8 9)
PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1 (11 15)
METHOD USED TO MEASURE PUMPING RATE Est
WATER LEVEL: (DISTANCE FROM LAND SURFACE)
BEFORE PUMPING 15 (17 20) (NEAREST FOOT)
WHEN PUMPING 5 (22 25) (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
(A) AIR (27) (P) PISTON (27) (T) TURBINE (27)
(C) CENTRIFUGAL (27) (R) ROTARY (27) (O) OTHER (DESCRIBE BELOW) (27)
(J) JET (27) (S) SUBMERSIBLE (27)

PUMP INSTALLED
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O) (29)
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES (Y) NO (N)
CAPACITY:
GALLONS PER MINUTE (TO NEAREST GALLON) (31 35)
PUMP HORSE POWER (37 41)
PUMP COLUMN LENGTH (NEAREST FOOT) (43 47)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
(+) ABOVE (−) BELOW (49) LAND SURFACE: 2 (50 51) (NEAREST FOOT)

LOCATION OF WELL ON LOT
N
SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



HEALTH

WR-131 (7/73) EMERGENCY NO. (If any) –

B 1 5305 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
11-73-0686
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
8-13

OWNER Brown Walter
COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD 7515 Eastern Ave.
COL 36 COL. 55

POST OFFICE College Park Md.
COL 57 COL. 76

B 1 CONTINUED (SEQ. NO.)

DRILLER INFORMATION

DATE Oct 26 1973 LICENSE NUMBER 201
77 80

John A. Orfanos
FIRST NAME DRILLER LAST NAME

SIGNATURE John A. Orfanos

B 2 (SEQ. NO.)

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5
8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

(D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
(F) FARMING, AGRICULTURE, IRRIGATION
(I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
22
(M) MUNICIPAL WATER SUPPLY
(P) PRIVATE WATER COMPANY
} MUST HAVE STATE HEALTH DEPT. APPROVAL
(T) TEST

APPROXIMATE DEPTH OF WELL 150 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN
30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE)

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
39
(S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
(D) THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)
41 52

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

APPROPRIATION PERMIT NUMBER G A P
54 63

ENGINEER REVIEW DISTRICT NO. 65

FORCE WRITE INITIALS IN BOX
67 68

CONDITIONS A E N S G W Q C L U
70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED (SEQ. NO.)

HEALTH DEPARTMENT APPROVAL

41 (S) STATE HEALTH (CIRCLE BOX)

MONTGOMERY COUNTY NAME 2402 COUNTY NO.

DATE MO. 05 DAY 01 YR. 74
43 48

APPROVED BY [signature] for

B 3 (SEQ. NO.)

LOCATION OF WELL

COUNTY Montgomery
8 (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION Rural Dale
23 42

SECTION B LOT 2
44 46 48 50

NEAREST TOWN Fulton
52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) .2
73 (M) (I) 76 77 78

B 4 (SEQ. NO.)

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

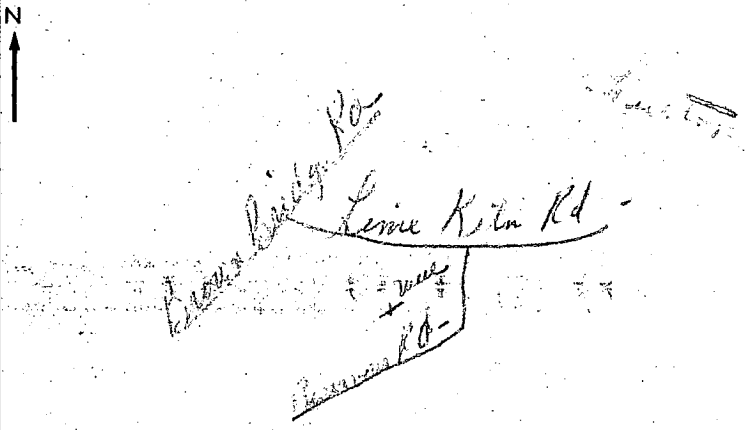
(N) NORTH (E) EAST (NE) NORTHEAST (SE) SOUTHEAST
(S) SOUTH (W) WEST (NW) NORTHWEST (SW) SOUTHWEST
8 8 8 9 8 9

NEAR WHAT ROAD Lime Kiln Rd.
11

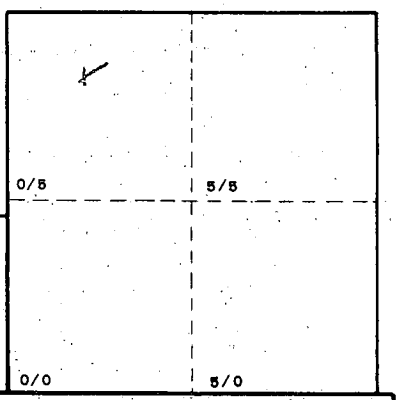
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH (N) 32 SOUTH (S) 32 EAST (E) 32 WEST (W) 32

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 125 (FT) (MI)
34 37 38 39

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER E 510 N 870



NORTH COORDINATE 50 51 52 53 54 55

EAST COORDINATE 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 65 66 67 68

B 5 (SEQ. NO.)

SPECIAL CONDITIONS 8-63 WATER RESOURCES DIRECTOR (WRA USE ONLY)
8 63

HEALTH

DNR 214 9/71

C 1 3041 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 8-13 15 20

DATE WELL COMPLETED May 14, 1974

DEPTH OF WELL 305 (TO NEAREST FOOT) 22 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" MO-73-0686 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 208

OWNER Brown (LAST NAME) Walter (FIRST NAME)

STREET OR RFD 7515 Catadel Ln. POST OFFICE College Park Md.

WELL DESCRIPTION

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Sandy Shale	0	20	
Mica Rock	20	305	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [Y] NO [N] 44

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [C M] 45 46 BENTONITE CLAY [B C] 45 46

NO. OF BAGS 6 NO. OF POUNDS 564

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 20 FT. (ENTER 0 IF FROM SURFACE) 48 52 54 58

CASING RECORD

CASING TYPES — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [C O] CONCRETE [P L] PLASTIC [O T] OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
S T (60 61)	6 (63 64)	22 (66 70)

OTHER CASING (IF USED)

EACH CASING

	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [B R] BRASS OR BRONZE [H O] OPEN HOLE [P L] PLASTIC [O T] OTHER

C 2 (1 2 3 (SEQ. NO.) 6)

EACH SCREEN

	DEPTH (NEAREST WHOLE FOOT) FROM	TO
1 (8 9)	20 (11 15)	305 (17 21)
2 (23 24)	(26 30)	(32 36)
3 (38 39)	(41 45)	(47 51)

SLOT SIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN 6 (56 60) (NEAREST INCH)

GRAVEL PACK FROM ____ TO ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 [F]

CIRCLE APPROPRIATE BOXES

[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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME (PLEASE PRINT) John Greene

SIGNATURE John Greene

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

TELESCOPE CASING [T] 70 — LOG INDICATOR (E.R.O.S.) [ ] 72 — OTHER DATA AVAILABLE [W Q] 74 75 76

C 3 (1 2 3 (SEQ. NO.) 6)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3 (8 9)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1 (11 15)

METHOD USED TO MEASURE PUMPING RATE Air

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 60 (17 20) (NEAREST FOOT)

WHEN PUMPING 5 (22 25) (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

[A] AIR 27 — [P] PISTON 27 — [T] TURBINE 27

[C] CENTRIFUGAL 27 — [R] ROTARY 27 — [O] OTHER (DESCRIBE BELOW) 27

[J] JET 27 — [S] SUBMERSIBLE 27

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) (31 35)

PUMP HORSE POWER (37 41)

PUMP COLUMN LENGTH (NEAREST FOOT) (43 47)

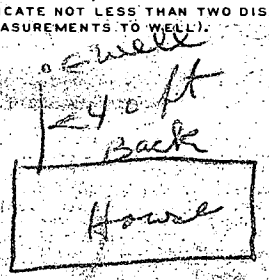
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

[+] ABOVE / [−] BELOW LAND SURFACE 2 (NEAREST FOOT) (49 50 51)

LOCATION OF WELL ON LOT

N ↑

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



HEALTH

DRILLER: OBTAIN HEALTH DEPT. APPROVAL AND RETURN ALL PARTS OF THIS FORM INTACT TO THE WATER RESOURCES ADMINISTRATION.

EMERGENCY NO. (If any) –

B 1 5305 (SEQ. NO.) — PERMIT NO. (WRA USE ONLY)	**STATE OF MARYLAND** WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 **APPLICATION FOR PERMIT TO DRILL WELL**	WRA PERMIT NUMBER — FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY): 5/1/74 042974

OWNER: Brown (LAST NAME, COL 18) — Walter (FIRST NAME, COL. 34)

STREET OR RFD: 7515 Cecil(?) Dr. (COL 36 – COL. 56)

POST OFFICE: College Park Md. (COL 57 – COL. 76)

DRILLER INFORMATION

B 1 CONTINUED (SEQ. NO.)

DATE: Ap. 26, 1974 — LICENSE NUMBER: 201 (77–80)

John A. GREENE (FIRST NAME — DRILLER — LAST NAME)

DRILLER'S SIGNATURE: John A. Greene

WELL INFORMATION

B 2 (SEQ. NO.)

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 (8–12)

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500 (13–20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (H) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) — circled
- F FARMING, AGRICULTURE, IRRIGATION
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT
- M MUNICIPAL WATER SUPPLY / P PRIVATE WATER COMPANY — MUST HAVE STATE HEALTH DEPT. APPROVAL
- T TEST

APPROXIMATE DEPTH OF WELL: 150 FEET (24–27)

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD): BORED (OR AUGERED) — JETTED — DRIVEN — (PERCUSSION / CABLE TOOL — circled) — AIR-PERCUSSION — ROTARY (HYDRAULIC ROTARY) — HAND — REVERSE-ROTARY — DUG — OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL
- THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) (41–52)

LOCATION OF WELL

B 3 (SEQ. NO.)

COUNTY: Howard (DO NOT ABBREVIATE COUNTY NAME) (8–21)

SUBDIVISION: Beaufort Park (22–43)

SECTION: B — LOT: 2

NEAREST TOWN: Fulton

MILES FROM TOWN (ENTER 0 IF IN TOWN): 2

B 4 (SEQ. NO.)

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX): N NORTH — E EAST — NE NORTHEAST — SE SOUTHEAST — S SOUTH — W WEST — NW NORTHWEST — (SW SOUTHWEST — circled)

NEAR WHAT ROAD: Brown Rd.

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

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 125

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN IN SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

N ↑

well depth - 305'
open hole 20'
Casing 22'
grout-6 Bags

Brown Bridge Rd — Lime Kiln Rd — Brown Rd.

OK HJZ 5-14-74

BOX NUMBER: 810 / 870

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

LOCATION NUMBER — ENGINEER REVIEW DISTRICT NO.

WRITE INITIALS IN BOX — CONDITIONS: A E N S G W O C L U

NORTH COORDINATE — EAST COORDINATE — ELEVATION AT WELL HEAD (FEET)

HEALTH DEPARTMENT APPROVAL

B CONTINUED (SEQ. NO.)

HOWARD (COUNTY NAME) — 3401 (COUNTY NO.)

STATE HEALTH (CIRCLE ONE)

DATE: MO. 5 DAY 1 YR. 74

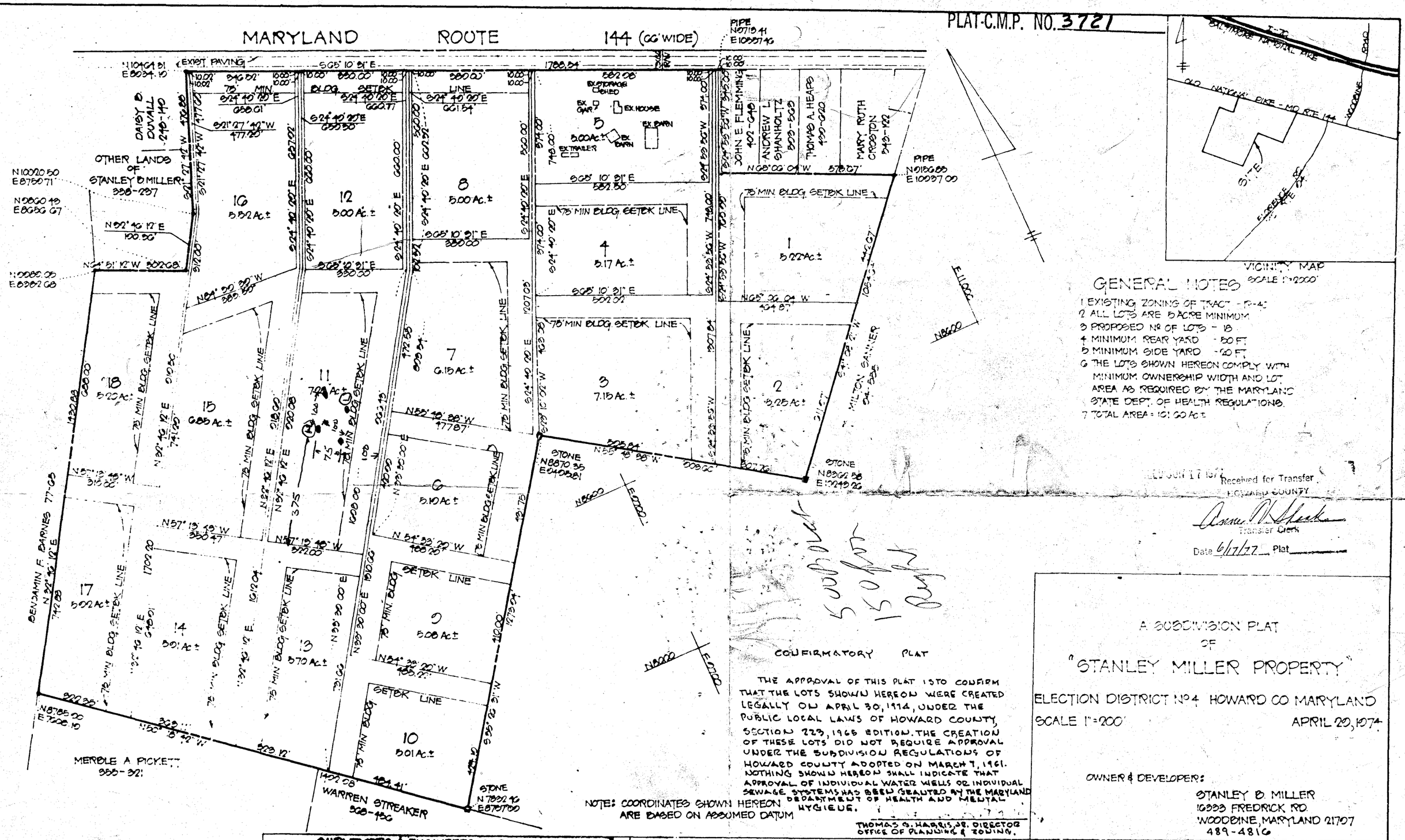
APPROVED BY: [signature] for Elmer R. [illegible]

SPECIAL CONDITIONS

Allen Mitchell
442-2920

PLAT-C.M.P. NO. 3721

MARYLAND ROUTE 144 (66' WIDE)



GENERAL NOTES

1 EXISTING ZONING OF TRACT - RR-4C
2 ALL LOTS ARE 5 ACRE MINIMUM
3 PROPOSED Nº OF LOTS - 18
4 MINIMUM REAR YARD - 50 FT.
5 MINIMUM SIDE YARD - 20 FT.
6 THE LOTS SHOWN HEREON COMPLY WITH MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPT. OF HEALTH REGULATIONS.
7 TOTAL AREA = 101.00 Ac±

Received for Transfer
HOWARD COUNTY
Anne M. Sheeks
Transfer Clerk
Date 6/17/77 Plat

NOTE: COORDINATES SHOWN HEREON ARE BASED ON ASSUMED DATUM

CONFIRMATORY PLAT

THE APPROVAL OF THIS PLAT IS TO CONFIRM THAT THE LOTS SHOWN HEREON WERE CREATED LEGALLY ON APRIL 30, 1974, UNDER THE PUBLIC LOCAL LAWS OF HOWARD COUNTY, SECTION 223, 1968 EDITION. THE CREATION OF THESE LOTS DID NOT REQUIRE APPROVAL UNDER THE SUBDIVISION REGULATIONS OF HOWARD COUNTY ADOPTED ON MARCH 7, 1961. NOTHING SHOWN HEREON SHALL INDICATE THAT APPROVAL OF INDIVIDUAL WATER WELLS OR INDIVIDUAL SEWAGE SYSTEMS HAS BEEN GRANTED BY THE MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

THOMAS G. HARRIS, JR. DIRECTOR
OFFICE OF PLANNING & ZONING.

A SUBDIVISION PLAT
OF
"STANLEY MILLER PROPERTY"
ELECTION DISTRICT Nº 4 HOWARD CO MARYLAND
SCALE 1"=200' APRIL 29, 1974

OWNER & DEVELOPER:
STANLEY B. MILLER
10333 FREDRICK RD.
WOODBINE, MARYLAND 21797
489-4816

SURVEYOR'S & ENGINEER'S CERTIFICATE

I Malcolm E. Hudkins, hereby certify that the plan shown hereon is correct, that it is a subdivision of part of the land which by deed dated August 25, 1959 and recorded among the land records of Howard County, Maryland in Liber 383 folio 237 was granted and conveyed by Henry [illegible] and Myrtle [illegible] his wife, to Stanley B. Miller and Doris [illegible] his wife, and that stones and/or monuments marked are in place as shown.
I further certify that the requirements of Section 3 Article 3.108 of the annotated code of Maryland (as amended) as far as they relate to the making of this plat have been complied with.

Malcolm E. Hudkins 6/9/77

OWNERS CERTIFICATE

I, we Stanley B. Miller owners of the property shown and described hereon, adopt this plan of subdivision and reserve the fee simple title to the beds of the streets and/or roads shown hereon and in consideration of the approval of this plat by this office of planning and zoning we for ourselves, our heirs, or assigns, do hereby give and grant unto Howard County Maryland the right and option to acquire for the consideration of one Dollar the fee simple title to the bed of the streets and/or roads shown hereon and including the land dedicated hereon for the widening of Maryland Route #144 within the period of three years from the date of recording of this plat among the land records of Howard County.
Witness our hands and seal this [illegible] day of

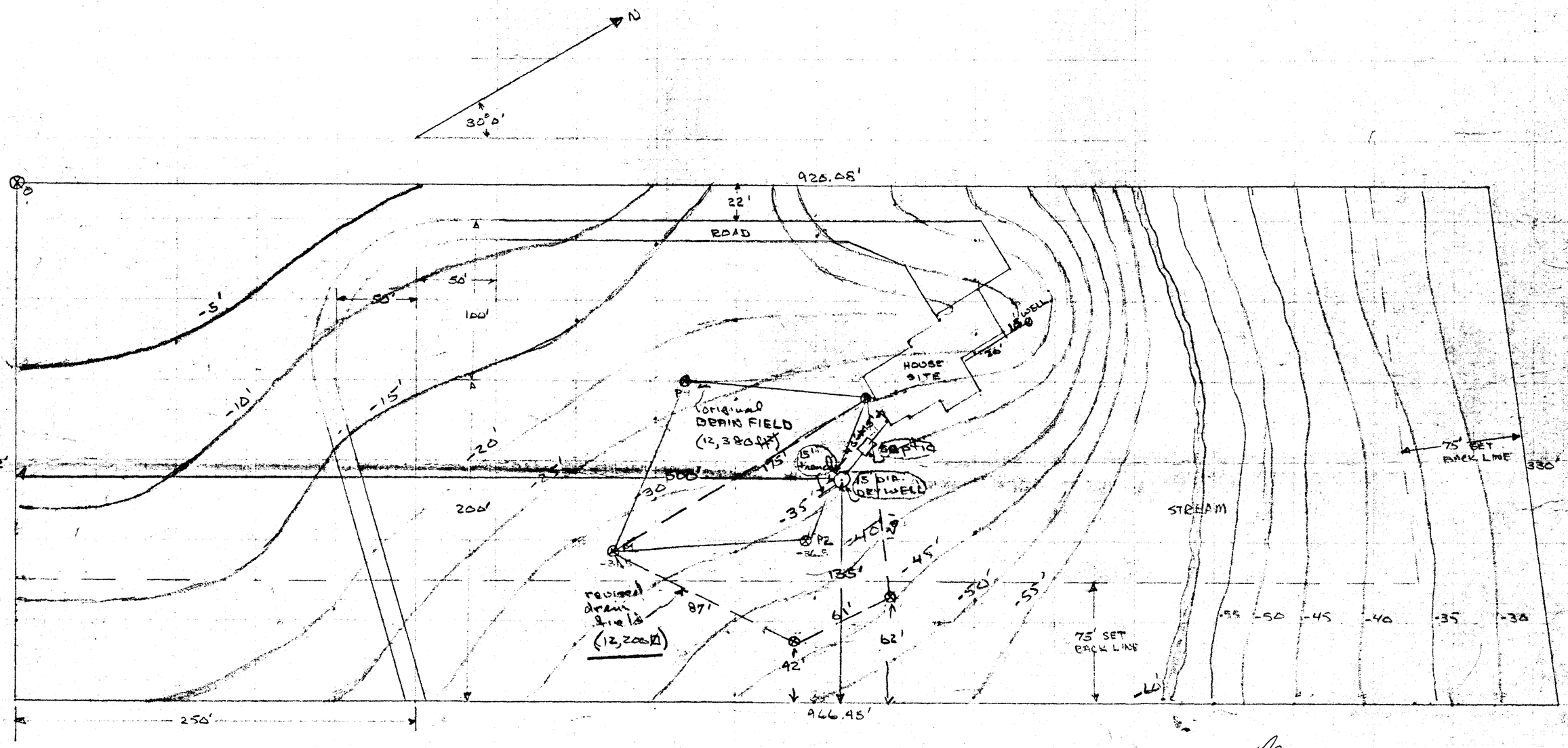
Stanley B. Miller 6-13-77

STATE OF MARYLAND
MALCOLM E. HUDKINS
REGISTERED
LAND SURVEYOR

PREPARED BY:
HUDKINS ASSOCIATES INC.
CIVIL ENGINEERS-LAND SURVEYORS
SUITE 231 - JOSEPH SQUARE
COLUMBIA, MARYLAND 21044

TOPOGRAPHICAL / SITE PLAN

scale: 1" = 50'



5/3/83

Sketch of Sheet 1 of 2

MAP : 7
PARCEL: 0467
LIBER: 0775
FOLIO : 344
LOT 11 - STANLEY MILLER PROPERTY
SCALE : 1" = 50'
DATE 1/30/83