

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511339

A 50368-0

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

DISTRICT

DATE

DATE SYSTEM APPROVED

INSPECTOR

INDEXED

Walter W. King Plumbing & Heating Contractors, Inc., IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 5305 King's Court, Frederick, Maryland 21703-6981 PHONE 301-654-0501

SUBDIVISION Riggs Property LOT 20 ROAD 1949 Sycamore Spring Court

PROPERTY OWNER Ryan Homes Helen & Richard Judd

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 171.82' and 822.56' lot lines, begin trenches 15 feet down the 822.56 lot line and 15 feet off that same lot line. Run trenches on contour in both directions.

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

OK KM 12-14-98

PLANS APPROVED BY Amy McMillen DATE 12-08-98

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

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

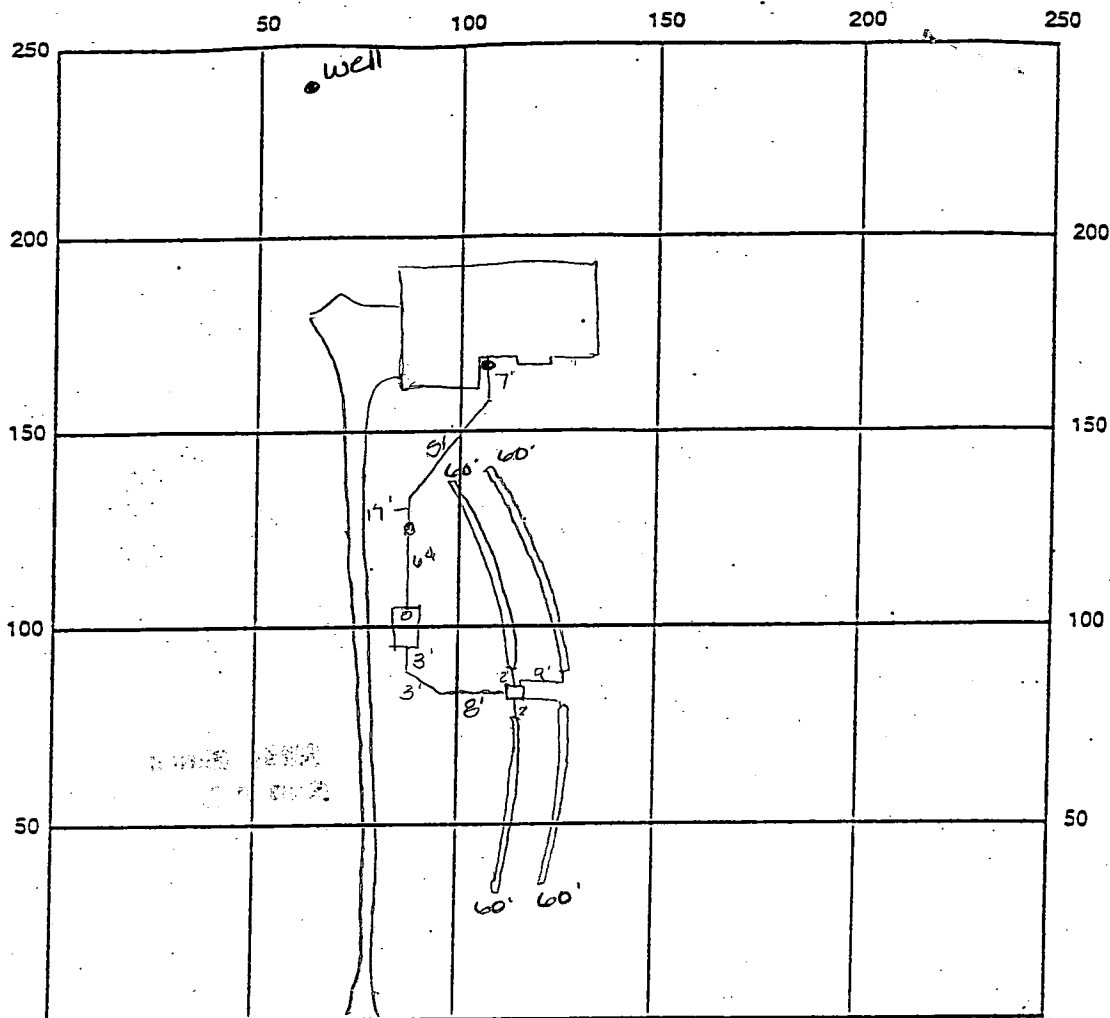
BLDG. PERMIT SIGNED

AND RETURNED

Serial # B10 1172 80

Janey

50368-0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE Sycamore Spring

SEPTIC TANK LEVEL OK CLEANOUTS OK - @ base, in line ST to hscd on ST

DISTRIBUTION BOX LEVEL OK baffle is in

DRAIN FIELD/TITLE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 240 FT.

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

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 2/25/99 OK to cover all work

DATE SYSTEM APPROVED

2/25/99

INSPECTOR

Amy McMill

# APPLICATION

PERCOLATION TESTING

A 50368-0

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
PO BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE 461-9933

DISTRICT

4th

DATE

9/30/94

P

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

Amelia Riggs, c/o SDC Group, Inc. RYAN HOMES  
8480 Baltimore - National Pk

ADDRESS

PO BOX 417, Ellicott City, MD 21041 PHONE (410) 465-6105

PROSPECTIVE BUYER

ADDRESS

1949 SYCAMORE SPRING COURT

PHONE

PROPERTY LOCATION:

SUBDIVISION

Riggs Property

LOT NO.

Grd. 1 20

ROAD AND DESCRIPTION

Located @ SW Corner of the intersection of  
Roxbury Mill (Rte. 97) & Frederick Rd (Rte 144)

TAX MAP

0814

PARCEL #

96

SIZE OF LOT

55000 ± S.F.

TYPE BLDG

BLDG. PERMIT SIGNED

AND RETURNED

12-8-98

Single Family Dwelling  
(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)

James B. Morley, III V. Pos

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

# THIS IS NOT A PERMIT

COUNTY #

## SOIL PROFILE

0' 581  
brn  
orange  
cl Salm

4' pink  
Sasilm  
25%  
rock  
frags  
OK

9' yellow  
orange  
Salm

11'

576

reddish  
brown  
clm

2' lgt brn/  
red  
cl Salm

4' reddish  
orange  
S. Salm

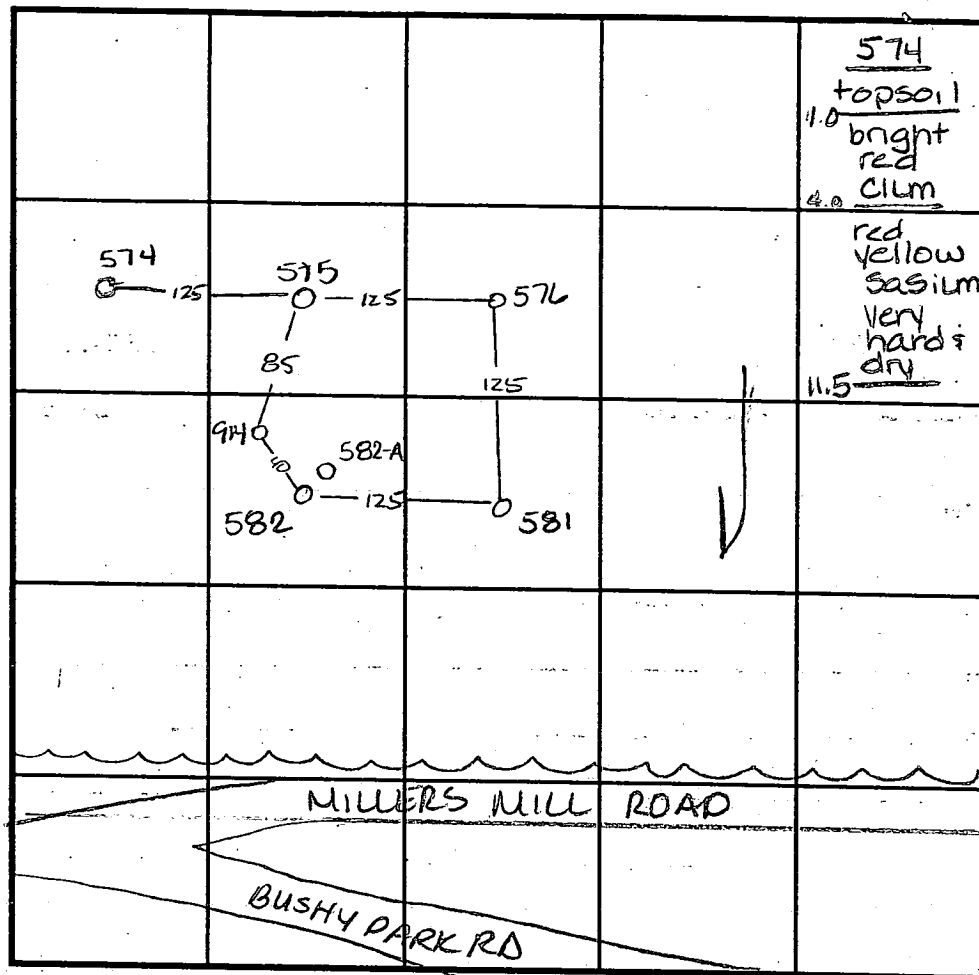
11'

575

lgt red  
cl Salm

4' lgt  
red  
Salm  
gravelly  
very  
friable  
5-10%  
saprolite

12'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

## SOIL PROFILE

0' 974  
red  
brn  
clm

4' reddish  
brn  
micaceous  
Silm  
some  
sand  
5%  
2-3 inch  
dia  
stones  
OK

11.5'

582-A

tan  
clm

3' reddish  
tan  
Sasilm

8' lgt orange  
tan powder  
Salm 5% frags

11.5'

| DATE     | TEST NO. | DEPTH           | PRE-WET            |                    | TEST - 1" DROP     |                    | TIME      |
|----------|----------|-----------------|--------------------|--------------------|--------------------|--------------------|-----------|
|          |          |                 | START              | STOP               | START              | STOP               |           |
| 11-17-94 | 582      | Refusal at 8.5' |                    |                    |                    |                    | F         |
|          | 581      | 4.5 VII         | 8:28 <sup>30</sup> | 8:29 <sup>30</sup> | 8:29 <sup>30</sup> | 8:31 <sup>30</sup> | 2min      |
|          | 575      | 4.5 VII         | 7:40 <sup>15</sup> | 7:40 <sup>45</sup> | 7:40 <sup>45</sup> | 7:46 <sup>30</sup> | 5 1/4 min |
|          | 576      | 4.5 VII         | 6:21 <sup>30</sup> | 6:22 <sup>30</sup> | 6:22 <sup>30</sup> | 6:28 <sup>30</sup> | 6min      |
|          | 914      | Visual to 11.5  |                    |                    | see profile -      |                    | OK        |
|          | 582-A    | Visual to 12.0  |                    |                    | see profile -      |                    | OK        |
|          | 574      | 4.5 VII.0       | 7:07 <sup>15</sup> | 7:08               | 7:08               | 7:10               | 3min      |
|          |          |                 |                    |                    |                    |                    |           |
|          |          |                 |                    |                    |                    |                    |           |
|          |          |                 |                    |                    |                    |                    |           |

REMARKS

TYPE OF SOIL

TESTED BY

Amy Miller

ALSO PRESENT

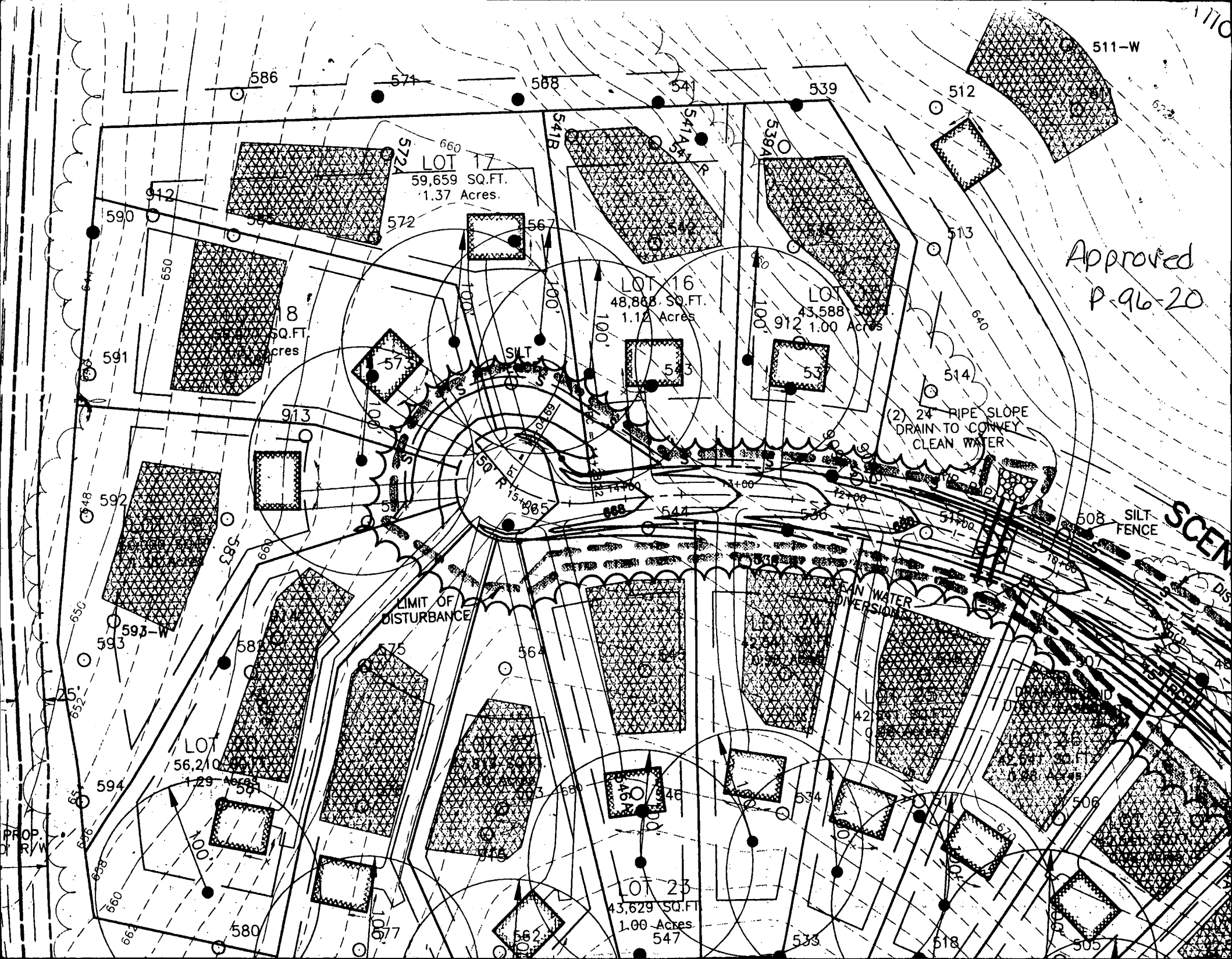
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM



REVISED  
Date: 6-7-99

Comments: 300/17289

1949 Sycamore  
Spring Lt  
more garage

SYCAMORE  
SPRING  
COURT

1. THE LOT
2. AS REQ
3. UNLESS
4. TOPSOIL
5. EXACT

TOPSOIL STA

Topsoil so logged from the  
as set forth in these spec  
given soil type can be as  
published by USDA-SCS

II. Topsoil Specifications - So

- I. Topsoil shall be a loam  
Other soils may be  
by the appropriate  
contrasting textured  
log. coarse fragm  
in diameter.
- II. Topsoil must be free  
grass, nubsedge, poi
- III. Where the subsoil is ell  
shall be spread of it  
to the placement of  
and worked into the  
following procedures.  
20.0 Vegetative Stabi

6/15/99  
Revised garage  
location  
OK  
(Signature)

FOR THE  
SECTION

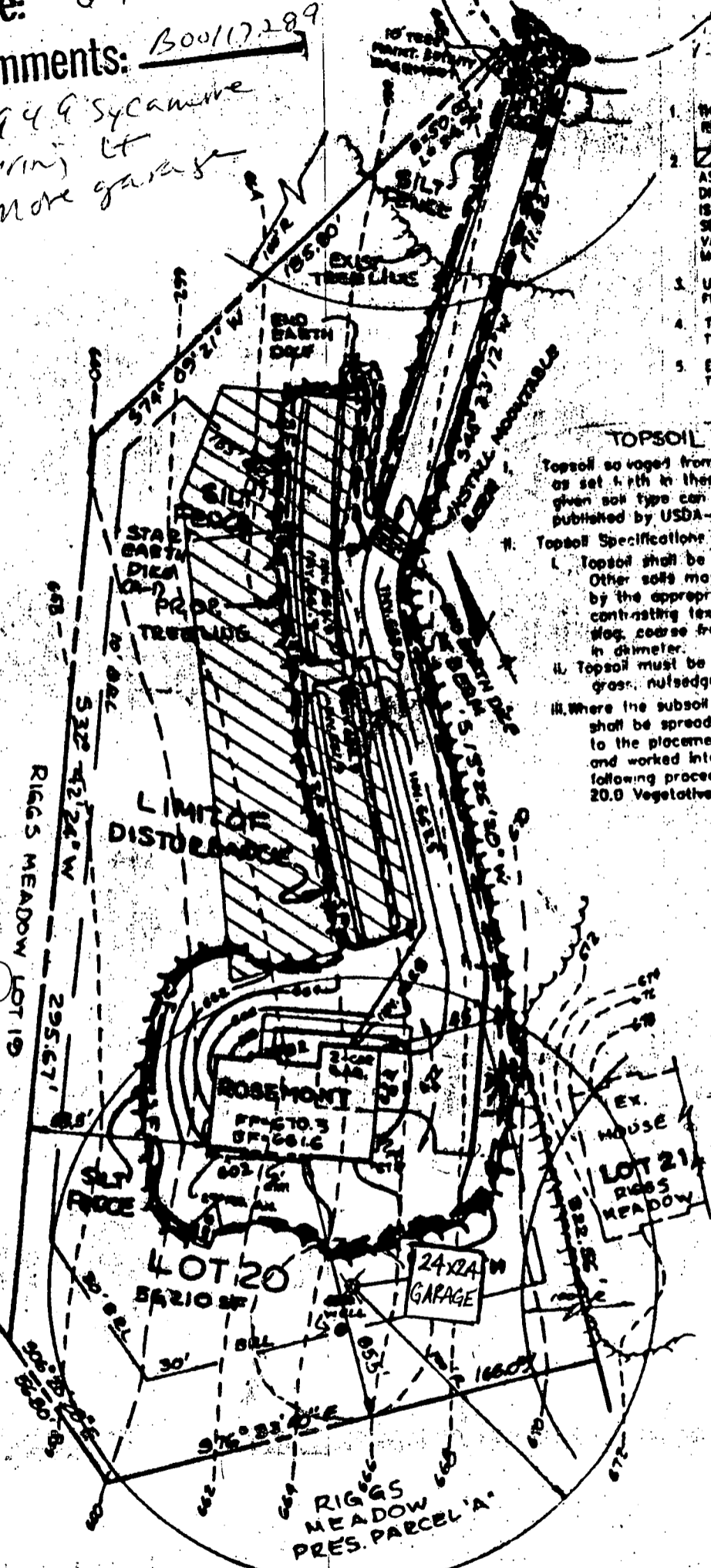
DAYS  
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HOURS

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PLAN  
SCALE: 1"=50'

DETAIL 24 - STABILIZED CONSTRUCTION ENTRANCE



Howard County Health Department

To: AMY

RIGGS LOT 20

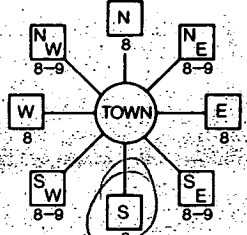

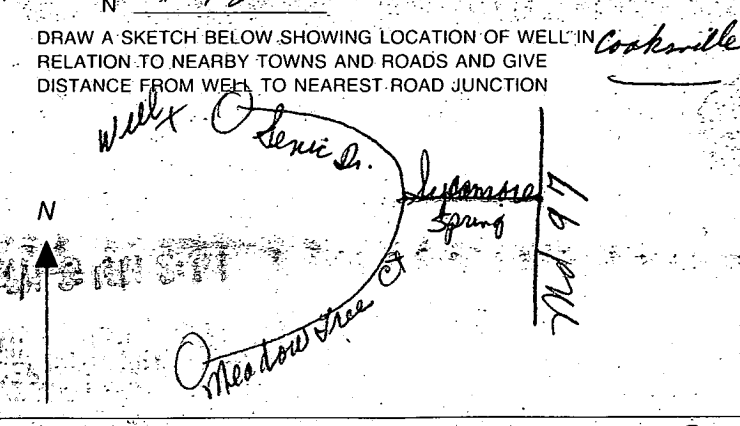
DRILLER (J MAYNE) RELUCTANT  
TO CLOSE FIRST WELL -  
THINKS CAVITY THAT HELD  
QUANTITY OF WATER MAY BE  
CRITICAL SOURCE FOR NEW WELL.

I SAID OK TO KEEP,  
BUT SHOULD FILL W/ GRAVEL  
TO PREVENT COLLAPSE.

From: C. Will

Date: 5/11/99

HD-170

|  |                                |  |   |
|--|--------------------------------|--|---|
| B 1<br>1 2 3 4 5 6<br><b>7463</b>  | SEQUENCE NO.<br>(MDE USE ONLY) | STATE OF MARYLAND<br><b>PERMIT TO DRILL WELL</b><br>please print or type   | STATE PERMIT NUMBER<br><b>H0 - 94 - 2244</b><br><small>fill in this form completely</small> |
| Date Received (APA)<br><b>050599</b><br>8 MM DD YY 13<br><b>SDC</b><br>15 Last Name Owner First Name 34<br><b>P.O. Box 147</b><br>36 Street or RFD 55<br><b>Ellicott City Md. 21041</b><br>57 Town 70 State 72 Zip 76  |                                | B 3 LOCATION OF WELL<br>8 COUNTY <b>Howard</b> 21<br><b>Riggs Property</b><br>23 SUBDIVISION 42<br>SECTION <b>44</b> LOT <b>20</b><br><b>Cooksville</b><br>52 NEAREST TOWN 71<br>MILES FROM TOWN (enter 0 if in town): <b>1</b> M 73 76 77 78  |   |
| DRILLER INFORMATION<br><b>Joseph L. Mayne</b> M S D 021<br>Driller Name 76 License No. 81<br><b>Joseph L. Mayne Well Drilling</b><br>Firm Name<br><b>5512 Ridge Rd. Mt. Airy 2111</b><br>Address<br><b>Joseph L. Mayne 5/4/99</b><br>Signature Date  |                                | B 4<br>1 2<br>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)<br><br>11 NEAR WHAT ROAD 30<br><b>Scenic Dr.</b><br>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)<br><br>34 400 37<br>DISTANCE FROM ROAD <b>FT</b><br>ENTER FT OR MI 38 39<br>TAX MAP: BLK: PARCEL: |   |
| B 2 WELL INFORMATION<br>1 2<br>APPROX. PUMPING RATE (GAL. PER MIN.)<br><b>5</b><br>8 12<br>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)<br><b>500</b><br>14 20   |                                | NOT TO BE FILLED IN BY DRILLER<br>HEALTH DEPARTMENT APPROVAL<br><b>Howard County</b> <b>A503680</b><br>COUNTY NAME COUNTY NO.<br>STATE SIGNATURE INSERT S<br>DATE ISSUED <b>050599</b> <b>A M Melle</b> <b>5/5/00</b><br>43 MM DD YY 48 CO SIGNATURE EXP. DATE<br>NORTH GRID <b>542</b> 000 EAST GRID <b>792</b> 000<br>50 55 57 63  |   |
| USE FOR WATER (CIRCLE APPROPRIATE BOX)<br><input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION<br><input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)<br>22 <input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING<br><input type="radio"/> PUBLIC WATER SUPPLY WELL<br><input type="radio"/> TEST, OBSERVATION, MONITORING<br><input type="radio"/> GEO-THERMAL   |                                | SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X<br>SOURCES OF DRILLING WATER<br>1. <b>Well</b><br>2.<br>3.<br>WRITE THE BOX NUMBER FROM THE MAP HERE<br>E <b>792</b><br>N <b>542</b><br>000<br>000  |   |
| APPROXIMATE DEPTH OF WELL <b>300</b> FEET<br>24 28<br>APPROXIMATE DIAMETER OF WELL <b>6</b> INCH<br>NEAREST INCH   |                                | METHOD OF DRILLING (circle one)<br>BORED (or Augered) JETTED Jetted & DRIVEN<br>30 <b>AIR-ROTARY</b> AIR-PERCussion ROTARY (Hydraulic Rotary)<br>37 <b>CABLE</b> REVerse-ROTary DRIVE-POINT<br>other   |   |
| REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)<br><input type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL<br><input checked="" type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED<br>39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS<br><input type="radio"/> THIS WELL WILL DEEPEAN AN EXISTING WELL<br>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52 |                                | DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION<br>  |   |
| Not to be filled in by driller (MDE OR COUNTY USE ONLY)  |                                |  |   |
| APPROP. PERMIT NUMBER 54 63<br>PERMIT No. <b>H0 - 94 - 2244</b><br>70 71 72 73 74 75 76 77 78 79   |                                |  |   |
| SPECIAL CONDITIONS<br><small>NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>   |                                |  |   |

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION  
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 5/13/99 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 94 - 7138

\* PERMIT NUMBER OF REPLACEMENT WELL

HO - 94 - 2244

\* PERSON ABANDONING WELL: Joseph L. Mayne

WELL DRILLERS LICENSE NUMBER: 024

\* OWNER'S NAME: SDC

CIRCLE: MWD/MSD/MGD

\* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: Cooksville

TAX MAP BLOCK PARCEL

SUBDIVISION: Regis Prop.

SECTION: LOT: 20

NEAREST ROAD: Seneca Dr.

MARYLAND GRID COORDINATES

E 792

BOX NUMBER

N 542

|     |  |
|-----|--|
| +   |  |
| 000 |  |
| 000 |  |

SHOW WELL LOCATION  
BY X WITHIN BOX

\* TYPE OF WELL BEING ABANDONED:

- ☒ DRILLED ☐ JETTED
- ☐ BORED/AUGURED ☐ HAND DUG
- ☐ OTHER (specify) \_\_\_\_\_

\* USE CODE:

- ☒ DOMESTIC ☐ MUNICIPAL/PUBLIC
- ☐ IRRIGATION ☐ INDUSTRIAL
- ☐ TEST/OBSERVATION

\* TYPE OF CASING:

- ☒ STEEL ☐ PLASTIC
- ☐ CONCRETE ☐ OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 6 5/8 INCHES IN DIAMETER

\* DEPTH OF WELL: 480 FEET DEEP

\* WAS ANY CASING REMOVED? ☒ YES ☐ NO

if yes, length removed, in feet: 2 ft.

\* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

| MATERIAL      | FEET |      |
|---------------|------|------|
|               | FROM | TO   |
| Cement        | 0    | 30   |
| Washed gravel | 30   | 480' |

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

DENV 828

JULY 1993

2) COUNTY ENVIRONMENTAL AGENCY

MWD/MSD/MGD

CIRCLE ONE

5/14/99

DATE

1693

SEQUENCE NO.  
(MDE USE ONLY)

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

COUNTY  
NUMBER

ST/CO. USE ONLY  
DATE RECEIVED  
MM DD YY  
8 13

DATE WELL COMPLETED  
MM DD YY  
4 29 99

Depth of Well  
22 480 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM PERMIT TO DRILL WELL  
76 94 1138  
28 29 30 31 32 33 34 35 36 37

OWNER  
last name first name  
S. D. C. S. D. C.

STREET OR RFD  
SUBDIVISION  
Ridge Drop

TOWN  
Cockeysville

SECTION  
LOT 20

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  
185 480

check if water bearing

Drilled existing well - Gray mica Rock

GROUTING RECORD  
WELL HAS BEEN GROUTED (Circle Appropriate Box)  
TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT CM BENTONITE CLAY BC  
NO. OF BAGS 9 NO. OF POUNDS 846  
GALLONS OF WATER 54  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 27 ft.  
(enter 0 if from surface)

CASING RECORD  
casing types insert appropriate code below  
STEEL ST CONCRETE CO  
PLASTIC PL OTHER OT  
MAIN CASING TYPE  
St 6 30  
Nominal diameter top (main) casing (nearest inch)  
Total depth of main casing (nearest foot)

OTHER CASING (if used)  
diameter inch depth (feet) from to

SCREEN RECORD  
screen type or open hole  
STEEL ST BRASS BR BRONZE PL PLASTIC PL OTHER OT  
insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS: 1

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 LIC. NO. M5D024  
DRILLER'S SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)  
LIC. NO. D

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

DEPTH (nearest ft.)  
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

SLOT SIZE 1 2 3  
DIAMETER OF SCREEN (NEAREST INCH)  
from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

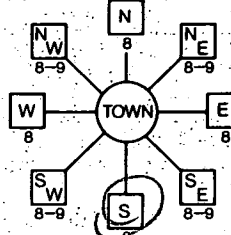
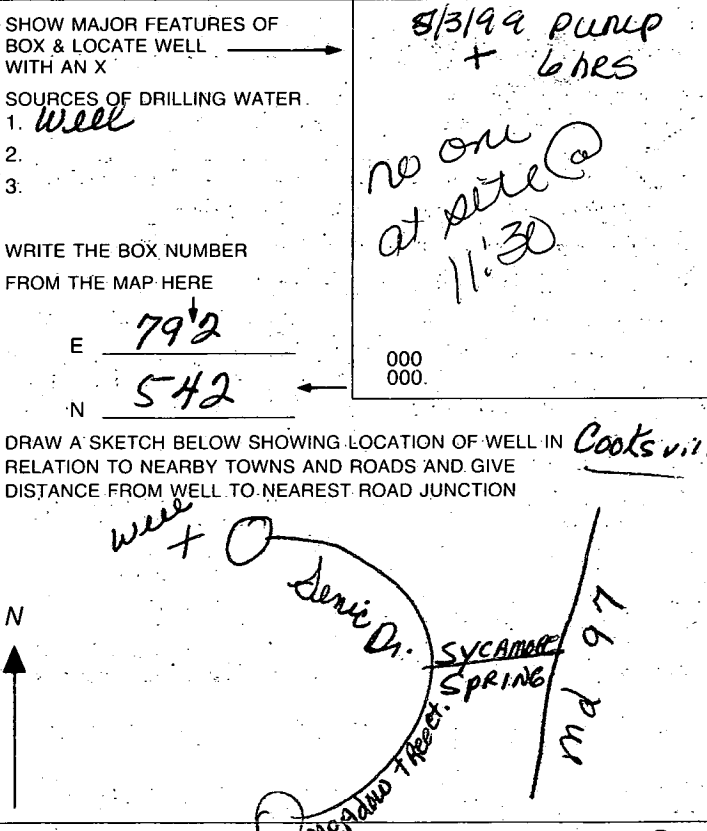
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST  
HOURS PUMPED (nearest hour) 3  
PUMPING RATE (gal. per min.) 1/2  
METHOD USED TO MEASURE PUMPING RATE bucket  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING 53 ft.  
WHEN PUMPING 368 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 INSTALLED PUMP 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) 31 35  
PUMP HORSE POWER 37 41  
PUMP COLUMN LENGTH (nearest ft.) 43 47  
CASING HEIGHT (circle appropriate box and enter casing height)  
+ above LAND SURFACE (nearest foot)  
- below

LOCATION OF WELL ON LOT  
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

|   |                                |   |   |
|---|--------------------------------|---|---|
| B 1<br>1 2 3 4 5 6<br><b>7465</b>   | SEQUENCE NO.<br>(MDE USE ONLY) | STATE OF MARYLAND<br>PERMIT TO DRILL WELL<br>please print or type   | STATE PERMIT NUMBER<br><b>HO - 94 - 1138</b><br><small>70 fill in this form completely 79</small> |
| Date Received (ARA)<br><b>042899</b><br><small>8 MM DD YY 13</small><br><b>SDC</b><br><small>15 Last Name Owner First Name 34</small><br><b>P.O. Box 147</b><br><small>36 Street or RFD 55</small><br><b>Elliott City Md. 21041</b><br><small>57 Town 70 State 72 Zip 76</small>  |                                | B 3<br>LOCATION OF WELL<br><b>Howard</b><br><small>8 COUNTY 21</small><br><b>Riggs Property</b><br><small>23 SUBDIVISION 42</small><br><b>20</b><br><small>SECTION 44 46 LOT 48 50</small><br><b>Cooksville</b><br><small>52 NEAREST TOWN 71</small><br>MILES FROM TOWN (enter 0 if in town) <b>1</b><br><small>73 76 77 78</small>   |   |
| DRILLER INFORMATION<br><b>Joseph L. Mayne M.S.D. 024</b><br><small>Driller's Name 76 License No. 81</small><br><b>Joseph L. Mayne Well Drilling</b><br><small>Firm Name</small><br><b>5512 Ridge Rd. Mt. Airy 21711</b><br><small>Address</small><br><b>Joseph L. Mayne 4/28/99</b><br><small>Signature Date</small>  |                                | B 4<br>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)<br><br>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)<br><b>Scenic Dr.</b><br><small>11 NEAR WHAT ROAD 30</small><br>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)<br><small>34 400 37</small><br>DISTANCE FROM ROAD <b>4</b><br><small>ENTER FT. OR MI 38 39</small><br>TAX MAP: _____ BLK: _____ PARCEL: _____ |   |
| B 2<br>WELL INFORMATION<br><small>1 2</small><br>APPROX. PUMPING RATE (GAL. PER MIN.) <b>500</b><br><small>8 12</small><br>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>5</b><br><small>14 20</small>  |                                | NOT TO BE FILLED IN BY DRILLER<br>HEALTH DEPARTMENT APPROVAL<br><b>Howard County</b><br><small>COUNTY NAME</small><br><b>13</b><br><small>COUNTY NO.</small><br>STATE SIGNATURE _____ INSERT S →<br><small>DATE ISSUED 042899 A McMullen 042800</small><br><small>43 MM DD YY 48 CO SIGNATURE EXP. DATE</small><br>NORTH GRID <b>542 000</b> EAST GRID <b>792 000</b><br><small>50 55 57 63</small>   |   |
| USE FOR WATER (CIRCLE APPROPRIATE BOX)<br><input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION<br><input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)<br><input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING<br><input type="radio"/> PUBLIC WATER SUPPLY WELL<br><input type="radio"/> TEST, OBSERVATION, MONITORING<br><input type="radio"/> GEO-THERMAL   |                                | SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X<br>SOURCES OF DRILLING WATER<br>1. <b>well</b><br>2.<br>3.<br>WRITE THE BOX NUMBER FROM THE MAP HERE<br>E <b>792</b><br>N <b>542</b><br>DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION<br>                          |   |
| APPROXIMATE DEPTH OF WELL <b>420</b> FEET<br><small>24 28</small><br>APPROXIMATE DIAMETER OF WELL <b>6</b> INCH<br><small>NEAREST INCH</small>  |                                | METHOD OF DRILLING (circle one)<br>BORED (or Augered) JETTED Jetted & DRIVEN<br>30 <input checked="" type="radio"/> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)<br>37 <input type="radio"/> CABLE <input type="radio"/> REVERSE-ROTARY <input type="radio"/> DRIVE-POINT<br>other _____   |   |
| REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)<br><input type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL<br><input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED<br>39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS<br><input checked="" type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL<br>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <b>HO - 94 - 1138</b><br><small>41 52</small> |                                | Not to be filled in by driller (MDE OR COUNTY USE ONLY)<br>APPROP. PERMIT NUMBER <b>HO - 94 - 1138</b><br><small>54 63</small><br>PERMIT No. <b>HO - 94 - 1138</b><br><small>70 71 72 73 74 75 76 77 78 79</small>  |   |
| SPECIAL CONDITIONS<br>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -  |                                |   |   |

C1-6041

SEQUENCE NO.  
(MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.

COUNTY  
NUMBER13

ST/CO USE ONLY  
DATE Received  
7-15-97

DATE WELL COMPLETED  
7 8 97

Depth of Well  
22 185 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
HO-94-1138

OWNER SDC

STREET OR RFD last name scenic Drive first name TOWN Cooksville

SUBDIVISION Riggs Property SECTION LOT 20

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

Brown Shale 0 26

Gray Mic Rock 26 185 ✓

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 9 NO. OF POUNDS 846

GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot)  
from 0 TOP 52 ft. to 27 BOTTOM 58 ft.  
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEEL ST CONCRETE CO PLASTIC PL OTHER OT

MAIN CASING TYPE ST 6 30

Nominal diameter top (main) casing (nearest inch)! 60 61 63 64 66 70

Total depth of main casing (nearest foot) 60 61 63 64 66 70

OTHER CASING (if used)  
diameter depth (feet)  
inch from to

SCREEN RECORD

screen type or open hole

insert appropriate code below

STEEL ST BRASS BR BRONZE PL PLASTIC PL OTHER OT

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 20

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 48 ft.

WHEN PUMPING 54 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine

C centrifugal R rotary O other (describe below)

J jet S submersible

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes Y no N

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 MSD024

DRILLERS SIGNATURE

LIC. NO. 1 M D

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

DEPTH (nearest ft.)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)  
56 60  
from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

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) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above LAND SURFACE

- below 2 (nearest foot)

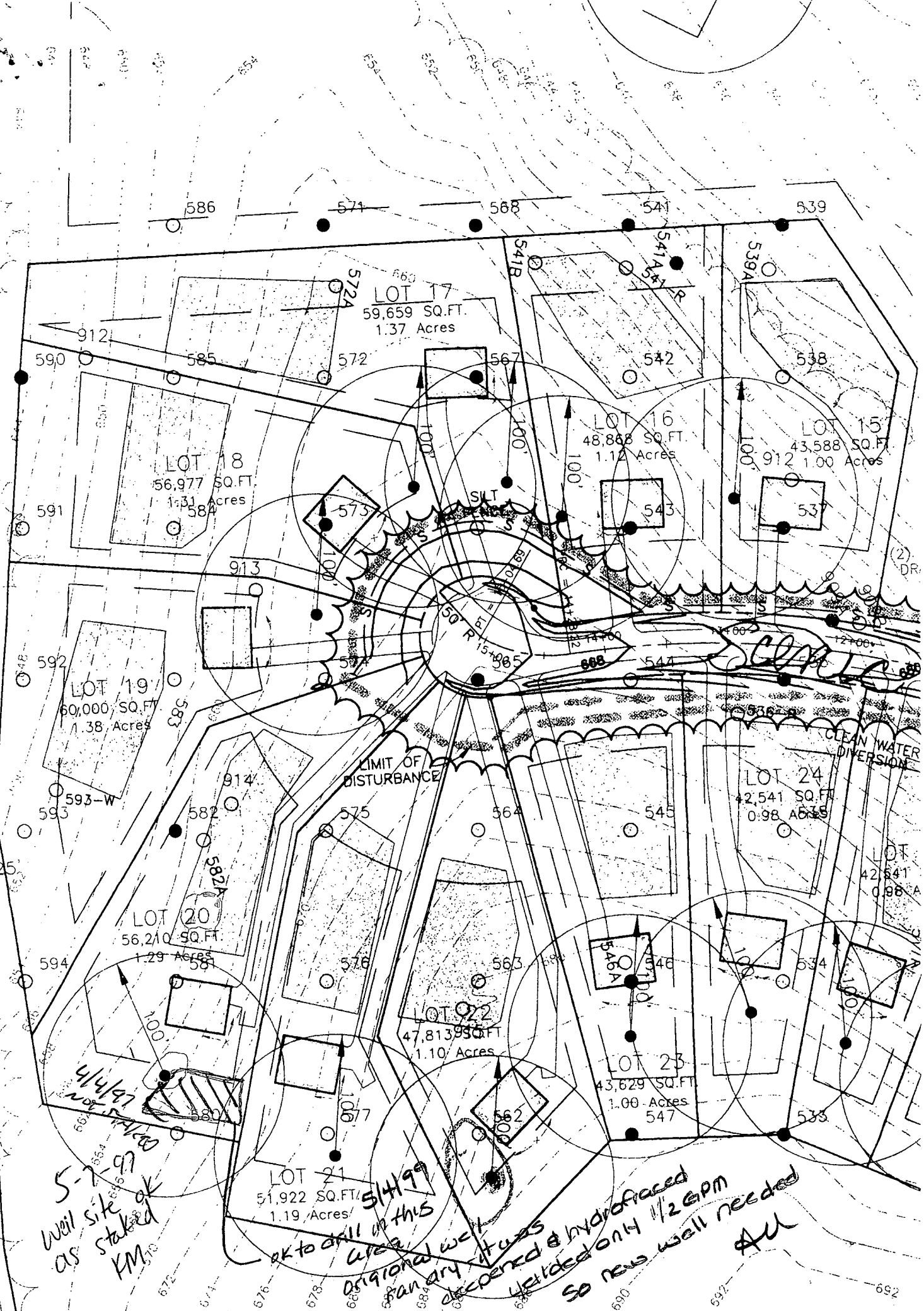
LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

Scenic Dr.

EMERGENCY/TEMP NO. IF ANY

|  |  |   |   |
|--|--|---|---|
| <p><b>B 1</b></p> <p style="font-size: 24pt; font-weight: bold;">7457</p> <p>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</p>  | <p>SEQUENCE NO.<br/>(MDE USE ONLY)</p> | <p><b>STATE OF MARYLAND</b></p> <p><b>PERMIT TO DRILL WELL</b></p> <p>please print or type</p>  | <p>STATE PERMIT NUMBER</p> <p style="font-size: 24pt; font-weight: bold;">H0-94-1138</p> <p><small>70 fill in this form completely 79</small></p> |
| <p>Date Received (APA)</p> <p style="font-size: 24pt; font-weight: bold;">033197</p> <p><b>OWNER INFORMATION</b></p> <p>15 Last Name <u>SOC</u> 34 Owner First Name <u>HO BOX 417</u> 55</p> <p>57 Town <u>ELH'COFF</u> 70 State 72 <u>CI7YMU81C41</u> 76 Zip <u>70</u></p>  |  | <p><b>B 3</b></p> <p><b>LOCATION OF WELL</b></p> <p>8 COUNTY <u>HOWARD</u> 21</p> <p>23 SUBDIVISION <u>RIGGS PROPERTY</u> 42</p> <p>SECTION <u>44</u> 46 LOT <u>20</u> 48 50</p> <p>52 NEAREST TOWN <u>COOKSVILLE</u> 71</p> <p>MILES FROM TOWN (enter 0 if in town) <u>1</u> 73 76 77 78 <u>M I</u></p>  |   |
| <p><b>DRILLER INFORMATION</b></p> <p>CIRCLE: (MSD/MGD/MWD) <u>024</u></p> <p>Driller's Name <u>Joseph R. Mayne</u> 77 License No. 80 <u>024</u></p> <p>Firm Name <u>Joseph R. Mayne Well Drilling</u></p> <p>Address <u>5512 Ridge Rd. Mt. Airy Md. 21771</u></p> <p>Signature <u>Joseph R. Mayne</u> 3/31/97 Date</p>   |  | <p><b>B 4</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</p> </div> <div style="width: 45%;"> <p>11 NEAR WHAT ROAD <u>Scenic Dr.</u> 30</p> <p>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</p> <p>34 <u>400</u> 37 <u>FT</u></p> <p>DISTANCE FROM ROAD ENTER FT OR MI <u>FT</u> 38 39</p> <p>TAX MAP: _____ BLK: _____ PARCEL: _____</p> </div> </div> |   |
| <p><b>B 2</b></p> <p><b>WELL INFORMATION</b></p> <p>APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 12</p> <p>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20</p> <p><b>USE FOR WATER</b> (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="radio"/> FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION)</p> <p><input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</p> <p><input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p> |  | <p>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</p> <p><u>Howard</u> 13</p> <p>COUNTY NAME COUNTY NO.</p> <p>STATE SIGNATURE _____ INSERT S <input type="checkbox"/></p> <p>DATE ISSUED <u>050997</u> <u>Kimberly Maisto</u> 5/9/98 41</p> <p>43 NORTH GRID <u>542000</u> 55 48 CO SIGNATURE _____ 57 EAST GRID <u>0792000</u> 63</p>  |   |
| <p>APPROXIMATE DEPTH OF WELL <u>260</u> 24 28 FEET</p> <p>APPROXIMATE DIAMETER OF WELL <u>6</u> NEAREST INCH</p> <p><b>METHOD OF DRILLING</b> (circle one)</p> <p><input checked="" type="radio"/> BORED (or Augered) <input type="radio"/> JETTED <input type="radio"/> Jetted &amp; DRIVEN</p> <p><input checked="" type="radio"/> AIR-ROTARY <input type="radio"/> AIR-PERCussion <input type="radio"/> ROTARY (Hydraulic Rotary)</p> <p><input type="radio"/> CABLE <input type="radio"/> REVERSE-ROTARY <input type="radio"/> DRIVE-POINT</p> <p>other _____</p>  |  | <p>SHOW MAJOR FEATURES OF BOX &amp; LOCATE WELL WITH AN X</p> <p>SOURCES OF DRILLING WATER</p> <p>1. <u>Well</u></p> <p>2. _____</p> <p>3. _____</p> <p>WRITE THE BOX NUMBER FROM THE MAP HERE</p> <p>E <u>7902</u></p> <p>N <u>53042</u> 000 000</p>   |   |
| <p><b>REPLACEMENT OR DEEPEMED WELLS</b> (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p>39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS</p> <p><input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52</p>  |  | <p>DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <u>Cooksville</u></p>  |   |
| <p><b>Not to be filled in by driller (MDE OR COUNTY USE ONLY)</b></p> <p>APPROX. PERMIT NUMBER: _____ 54 63</p> <p>FORCE <input checked="" type="checkbox"/> WRITE INITIALS IN BOX PERMIT No. <u>H0-94-1138</u> 70 71 72 73 74 75 76 77 78 79</p>  |  |   |   |
| <p><b>SPECIAL CONDITIONS</b></p> <p>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</p>   |  |   |   |



4/4/97  
5-7-97  
Well site ok  
as staked  
KM

5/4/99  
OK to drill in this  
area  
original well  
is an dry pit was  
deepened & hydrofraced  
yielded only 1/2 GPM  
so new well needed  
AU

FROM AUGUST 15  
1 ACRE OF ANNUAL RYE  
1 AUGUST 14, SEED  
1000 SQ FT) FOR  
RECT SITE BY  
MULCH AND SEED AS

90 LBS/1000 SQ FT)  
SEEDING, ANCHOR  
ANCHORING TOOL OR  
FIED ASPHALT ON  
LIONS PER ACRE

CATIONS FOR SOIL  
DS NOT COVERED.

### RATION

OF SOIL BY RAKING,  
IF NOT PREVIOUSLY

IONS, USE ON OF

MATIC LIMESTONE (92  
0-10-10 FERTILIZER  
ROW OR DISC INTO  
SEEDING, APPLY 400  
DER (8 LBS/1000 SQ

LOWMATIC LIMESTONE  
CRE 10-10-10  
EDING, HARROW OR

30 AND AUGUST 1  
4 LBS/1000 SQ FT)  
ER ACRE (OS  
PERIOD OF OCTOBER  
(1) 2 TONS PER ACRE  
AS POSSIBLE IN THE  
1 LBS PER ACRE  
5 PER ACRE OF WELL

3 90 LBS/1000 SQ FT)  
SEEDING, ANCHOR  
ANCHORING TOOL OR  
FIED ASPHALT ON  
GALLONS PER ACRE

NEEDED REPAIRS.

### NOTES

TO THE HOWARD COUNTY  
ENT CONTROL DIVISION PRIOR

TO BE INSTALLED ACCORDING  
E IN CONFORMANCE WITH THE  
FOR SOIL EROSION AND SEDIMENTATION

STANCE, PERMANENT OR  
WITHIN: A) 7 CALENDAR DAYS  
IES, Dikes, PERIMETER SLOPE  
AS TO ALL OTHER DISTURBE

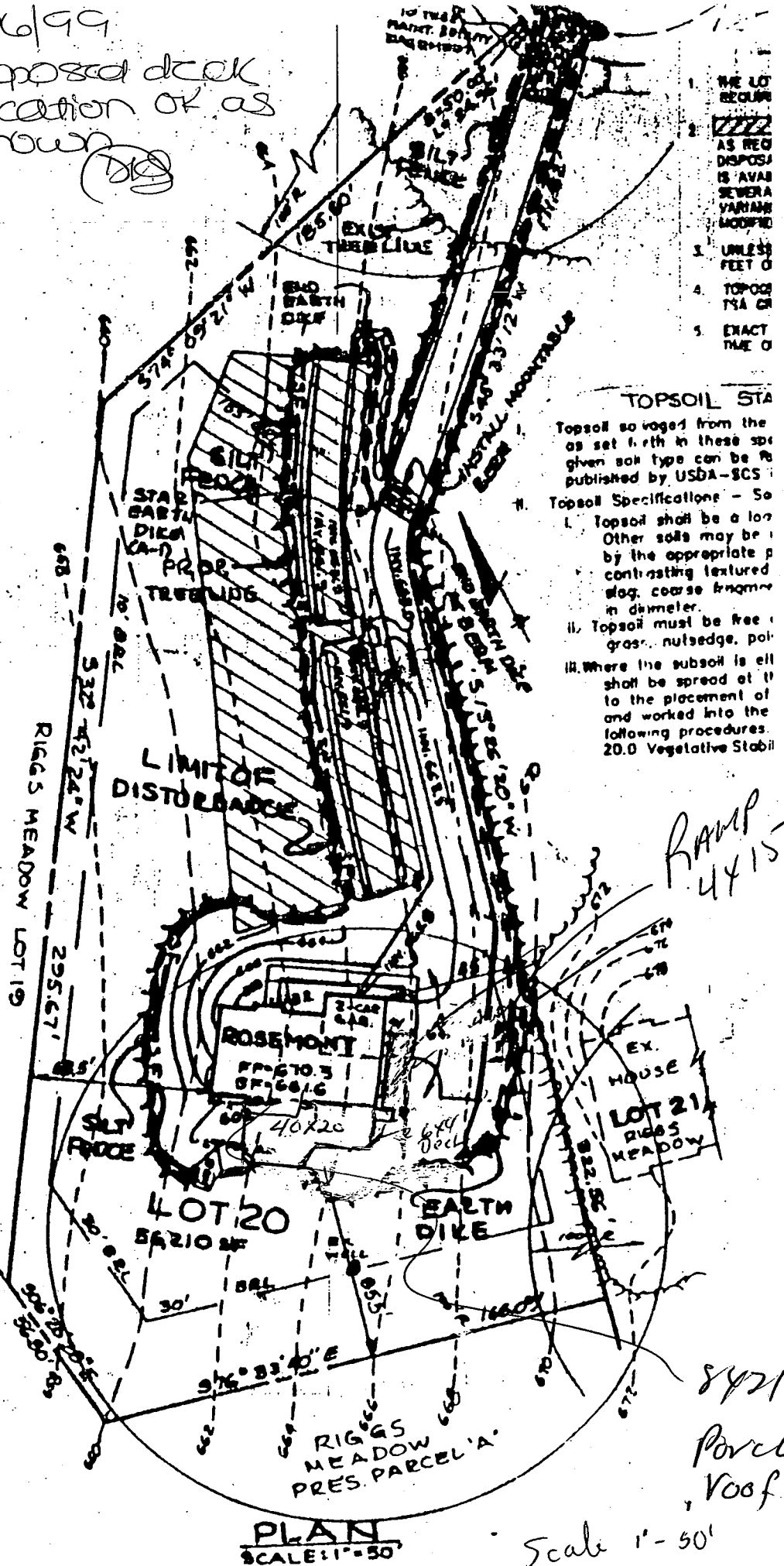
ICED AND WARNING SIGNS POST  
OL 1, CHAPTER 12, OF THE  
RE.

THE TIME PERIOD SPECIFIED  
STANDARDS AND SPECIFICATION  
PERMANENT SEEDINGS (SEC. 51)  
ND MULCHING (SEC. 52).  
IN ONLY BE DONE WHEN  
R PROPER GERMINATION AND

AIN IN PLACE AND ARE TO BE  
SSION FOR THEIR REMOVAL HAS  
ENT CONTROL INSPECTOR.

|      |        |
|------|--------|
| 1.29 | ACRES  |
| 0.48 | ACRES  |
| 0.14 | ACRES  |
| 0.34 | ACRES  |
| 280  | CU YDS |
| 280  |        |

8/26/99  
Proposed deck  
location of as  
shown



1. THE LOT
2. AS REQ
3. IS AVAS
4. SEVERA
5. VARIAN
6. MODIFD
7. UNLESS
8. FEET O
9. TOPOG
10. TSA CH
11. EXACT
12. TIME O

### TOPSOIL STA

Topsoil salvaged from the  
as set forth in these spe  
given soil type can be re  
published by USDA-SCS

1. Topsoil shall be a loess  
Other soils may be  
by the appropriate p  
contrasting textured  
slag, coarse knom  
in diameter.
2. Topsoil must be free  
grass, nutsedge, pol
3. Where the subsoil is ell  
shall be spread at 11  
to the placement of  
and worked into the  
following procedures.  
20.0 Vegetative Stabli

RAMP  
4415

8421  
Porch  
Roof

Scale 1"=50'