7/18/94 PM 7/14/94 11:30 ✓ 7:14 P.C.O. CBO

Most contractor

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 30148 [redacted]

A REPAIR

#327683

DISTRICT 4th

DATE 7/14/94

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
[redacted] 313-2640

DATE SYSTEM APPROVED 7/18/94

INSPECTOR AUM

W. Sisk {Woodburn Septics Tanks Service} IS PERMITTED TO INSTALL ____ ALTER X

ADDRESS _____ PHONE _____

SUBDIVISION _____ LOT 1 ROAD 1052 Ridge Road

PROPERTY OWNER Michael Schaefer

ADDRESS 1052 Ridge Road
Mt. Airy, Maryland 21771

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED (New added 100')

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.
Call for inspection when ground is opened so sanitarian can recommend repair. 07/05/94

CONTRACTOR REPORTS LINE BLOCKAGE FOUND & CORRECTED, EXISTING TRENCH IN GOOD CONDITION, APPLICANT DECIDED TO INSTALL ADDITIONAL TRENCH ANYWAY (CW)

(1) T trench 100'+ long; 2' wide; 9'+ deep; with 4' (5' of stone) 500'+ lin. ft. effective area plus old trench

PLANS APROVED BY [C.B.O. for C.W.] ← Unfield (A.M.) DATE 7/17/94 CBO

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.

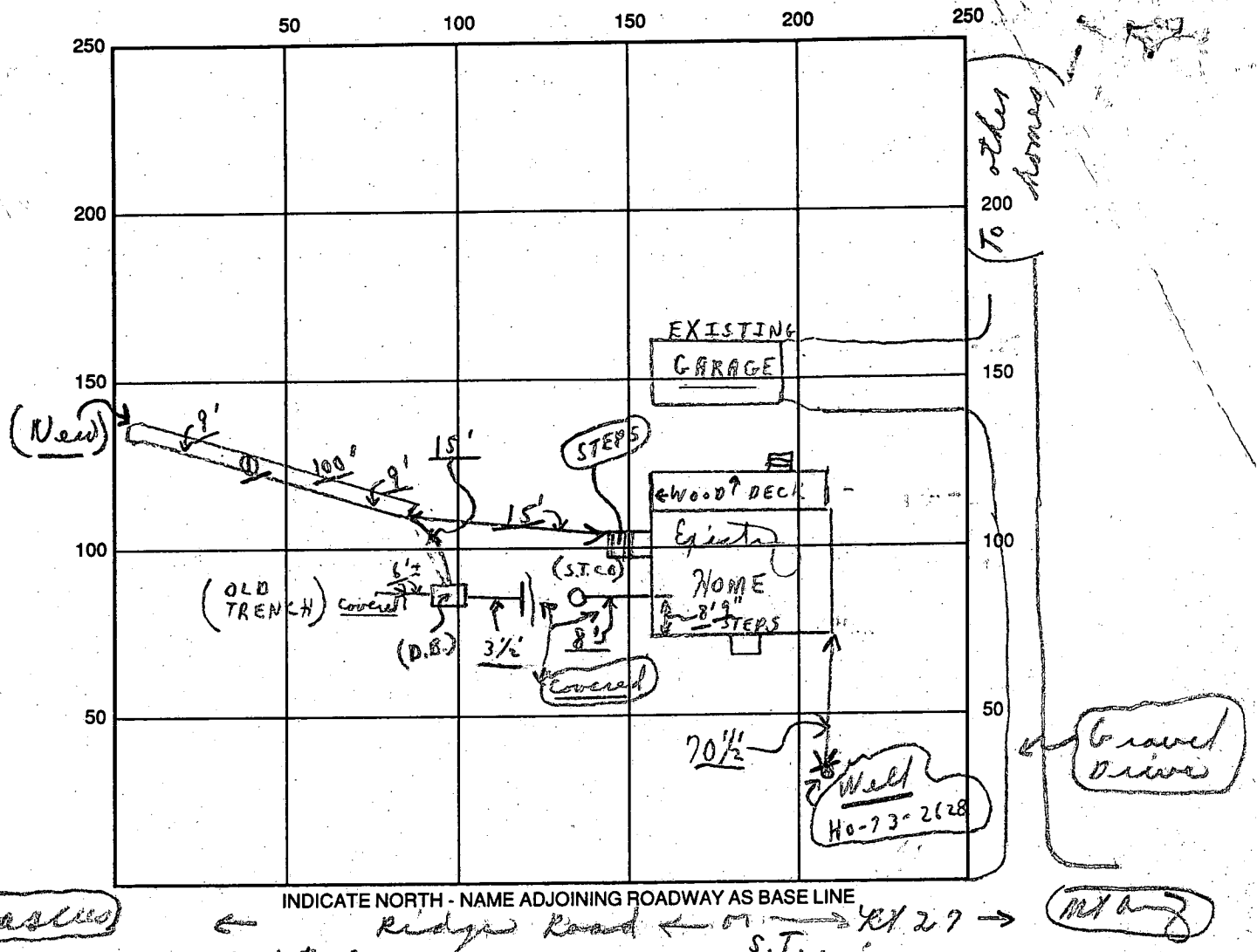
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

R 5148



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL Existing CLEANOUTS Existing S.T.

DISTRIBUTION BOX LEVEL OK (New) (Baffles in)

DRAIN FIELD/TITLE DEPTH 9 ± average (New) FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. ← (TO BE) TOTAL LENGTH (1) 100 plus old one FT. (500 + old trench system SQ. FT.)

NUMBER OF TRENCHES (1) New (1) Old ONE SIDEWALL/~~BOTTOM~~ AREA 500 + old SQ. FT.

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

ABSORBENT AREA 500 + SQ. FT. + (old system trench)

REMARKS: (PARTIAL) 7/14/94 (R.M.) OK TO STONE NEW TRENCH-ETC.; HOLD FOR A CALL; CBB 7/18/94 OK to cover all NEW work final ACK

DATE SYSTEM APPROVED 7/18/94 INSPECTOR Amy McMellon

SYSTEM TO BE INSTALLED
FIRST BEFORE BUILDING PERMIT
CAN BE SIGNED.

Patuxent Sewer Woodlake

27697

P 27697

A 24115

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

3/22/78 parks

ELLICOTT CITY

DISTRICT 4th

DATE 3/22/78

INDEX

Herman Sirk IS PERMITTED TO INSTALL & ALTER

ADDRESS _____ PHONE _____

SUBDIVISION _____ ROAD _____ LOT 1

PROPERTY OWNER Michael Schaeffer

ADDRESS 1052 Ridge Road (route 27)

SPECIFICATIONS ~~3~~ bedrooms 1000/1250

SEPTIC TANK CAPACITY _____ GALLONS

map 1

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

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

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

BLDG. PERMIT SIGNED AND RETURNED 4/3/78

Serial No. 34839

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

TRENCH: 2 ft. wide - 9 ft. wide - 100 ft. long with 5 ft. of gravel under pipe. Start trench 75 ft. from front lot line and 150 ft. from left side line as seen from Rt. 27. Trench to run with contour of ground.

PLANS APPROVED BY Robert V. Torre DATE 5/30/73

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

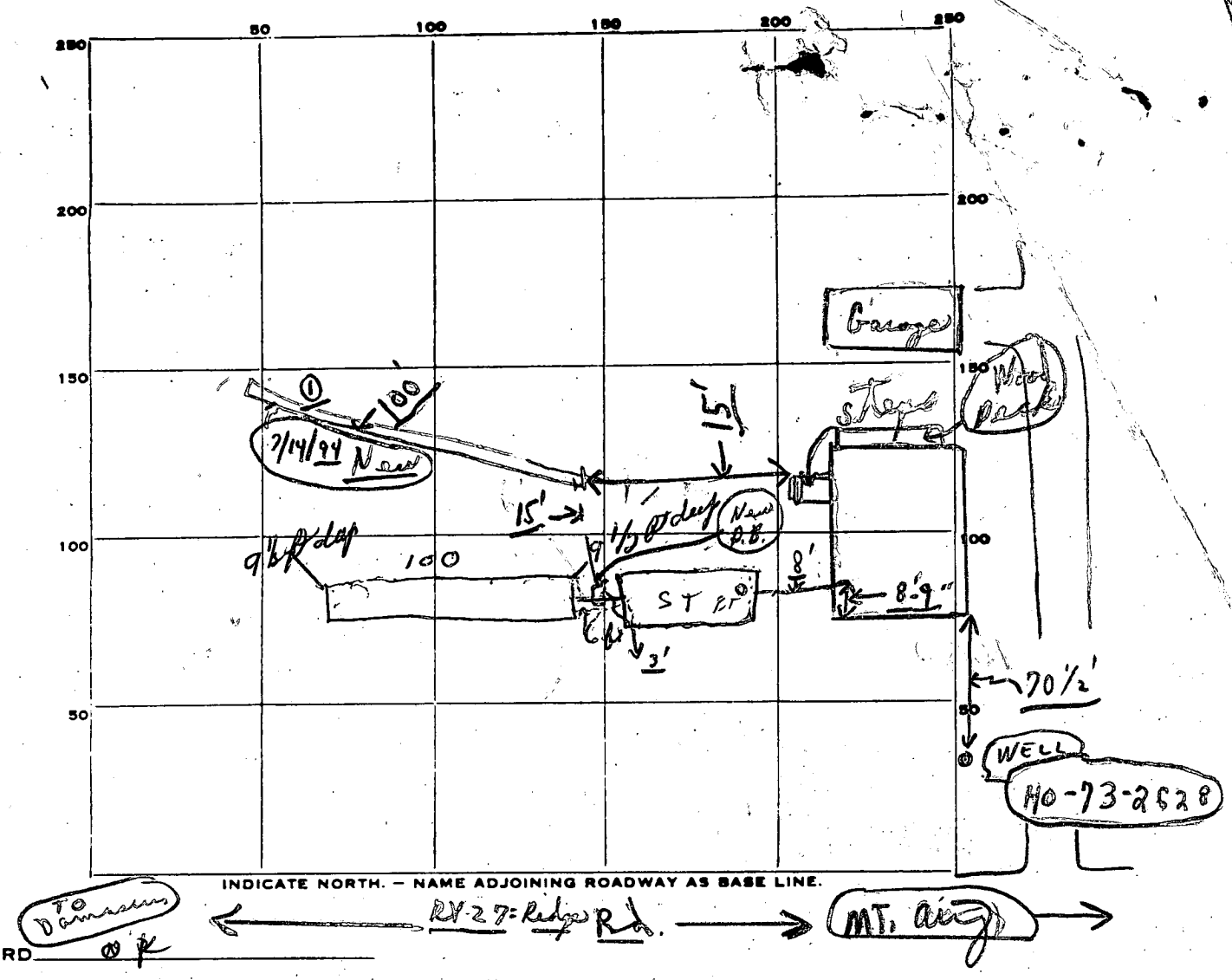
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

HD - 23

A 24115



PERMIT CARD OK

SEPTIC TANK, LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9½ FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 60 IN. TOTAL LENGTH 100 FT.

NUMBER OF TRENCHES TOTAL BOTTOM AREA

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

ABSORBENT AREA SQ. FT.

REMARKS 3-22-78. OK to Gravel in Trench.

3-23-78 - OK to cover trench & septic tank back to cleanout - to call for final insp when house sewer is complete Glenn

3-27-79. house unoccupied - could not tell if house connection made due to snow & mud. - recheck - 30 days. W

DATE SYSTEM APPROVED INSPECTOR

Schafer

PRELIMINARY

APPLICATION

A 24115

P

10/13/76 9:30 A.M.

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: 465-5000, EXT. 356

DISTRICT 4th

DATE 10/4/76

well & Septic to be installed first

{ Use R. Tour specs }

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 ~~Raymond E. Greenfield~~ Michael Schafer 729 Watersville Rd. Mt. Airy, Md. 831-7228

ADDRESS ~~22625 Wildcat Road, Germantown, Md.~~ PHONE ~~Dial 8-428-0287~~

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1

ROAD AND DESCRIPTION Ridge Road (Route 27) - next to Lou & Joe's Tavern

SIZE OF LOT (?) TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

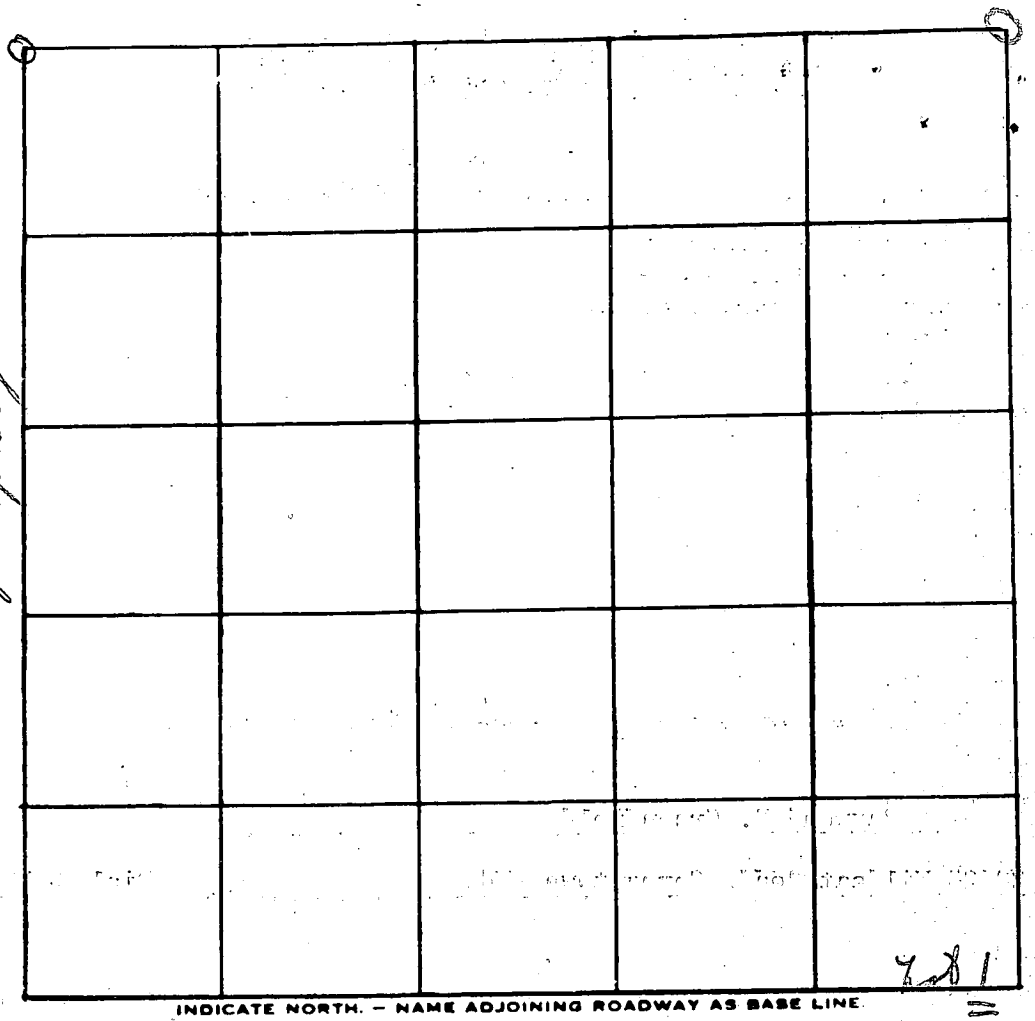
APPROVED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

REJECTED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

~~REASONS FOR REJECTION OR~~ HOLDING for certified holes

THIS IS NOT A PERMIT



PT 27

Soil Profile	DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
0'	1/76	1		:	:	:	:	
		2		:	:	:	:	
↕		3		:	:	:	:	
		4		:	:	:	:	
↕		5		:	:	:	:	
		6		:	:	:	:	

Note: 15 more tests of 1973

REMARKS Open field (See old tests)

TYPE OF SOIL

TESTED BY C. B. D ALSO PRESENT: Dick + Tom

APPLICATION

A EX 18381

P

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT Septic Tank - 3 bedroom 1250 gal DISTRICT 4th

ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043 Dry well - 400 sq. ft. DATE 4/27/73

TELEPHONE: 465-5000, EXT. 356

absorbant sidewall area to begin below the first 4 ft of non-perm soil. Max. depth permitted for dry well is 11 ft Locate dry well 175 ft from front lot line and 570 ft. from left side lot line as seen from Rt. 27.

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 Raymond E. Greenfield

ADDRESS 22625 Wildcat Road, Germantown, Md. PHONE 428-0287

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel L

ROAD AND DESCRIPTION Route 27

SIZE OF LOT 6 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

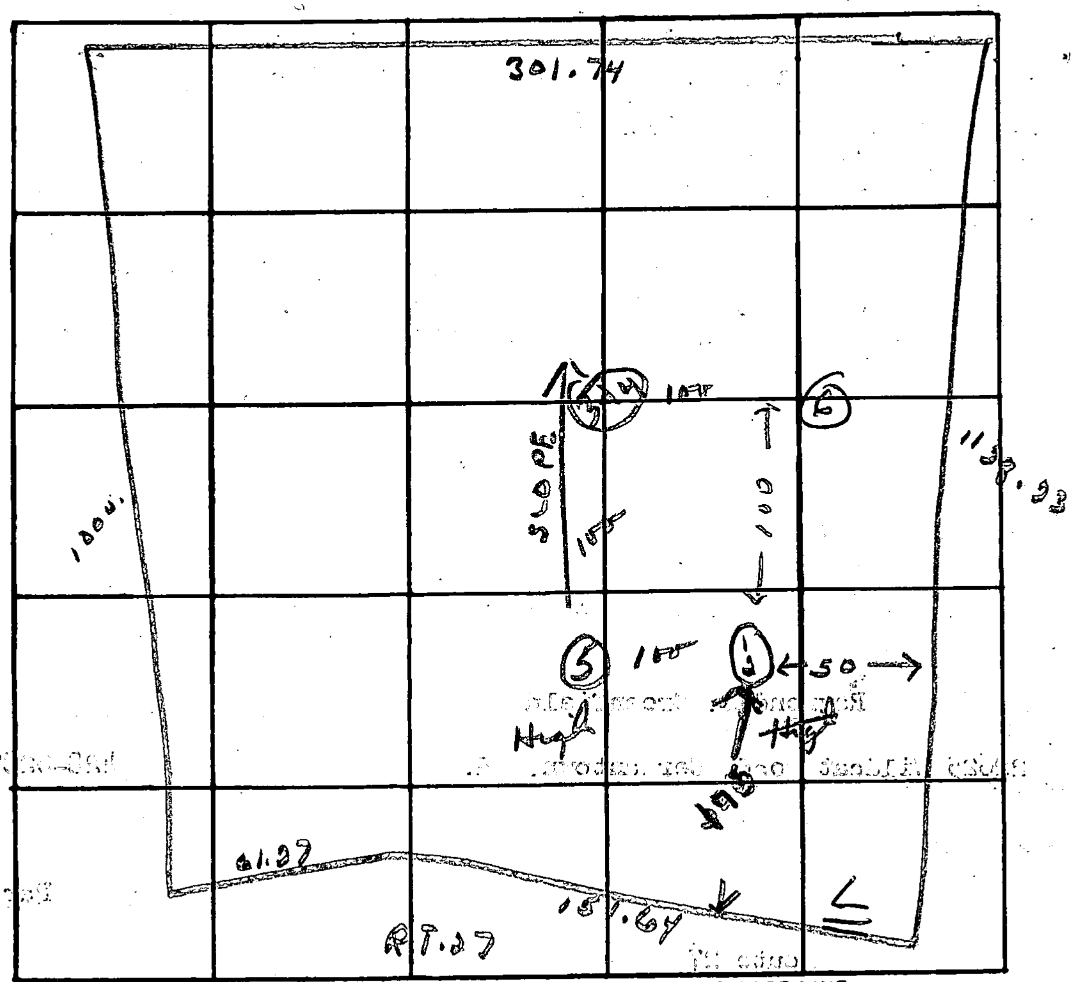
APPROVED BY Robert V Fine FOR Dry Well (KIND OF SYSTEM) DATE 5/30/73

REJECTED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/30/73	1	11 ft	11^{58}	12^{02}	12^{02}	12^{10}	8 min
	2	4 ft	11^{59}	12^{08}	12^{08}	12^{29}	21 min
	3	4 ft	12^{21}	2^{24}	12^{24}	12^{28}	4 min
	4	11 ft	Caving in –	afraid to send man			
			down – Rock shale – Poured water				
			Perc. Same soil as 4 ft – 20 gal				
	5	10 ft	Fine soil	dumped —			1 min
	6	10½	Poorest hole	clay for 4-5 ft.			

REMARKS R. Tene

TYPE OF SOIL

Plat of Survey
PARCEL L
Being a part of Greenfield Property
Howard County, Maryland
Scale: 1"- 200'

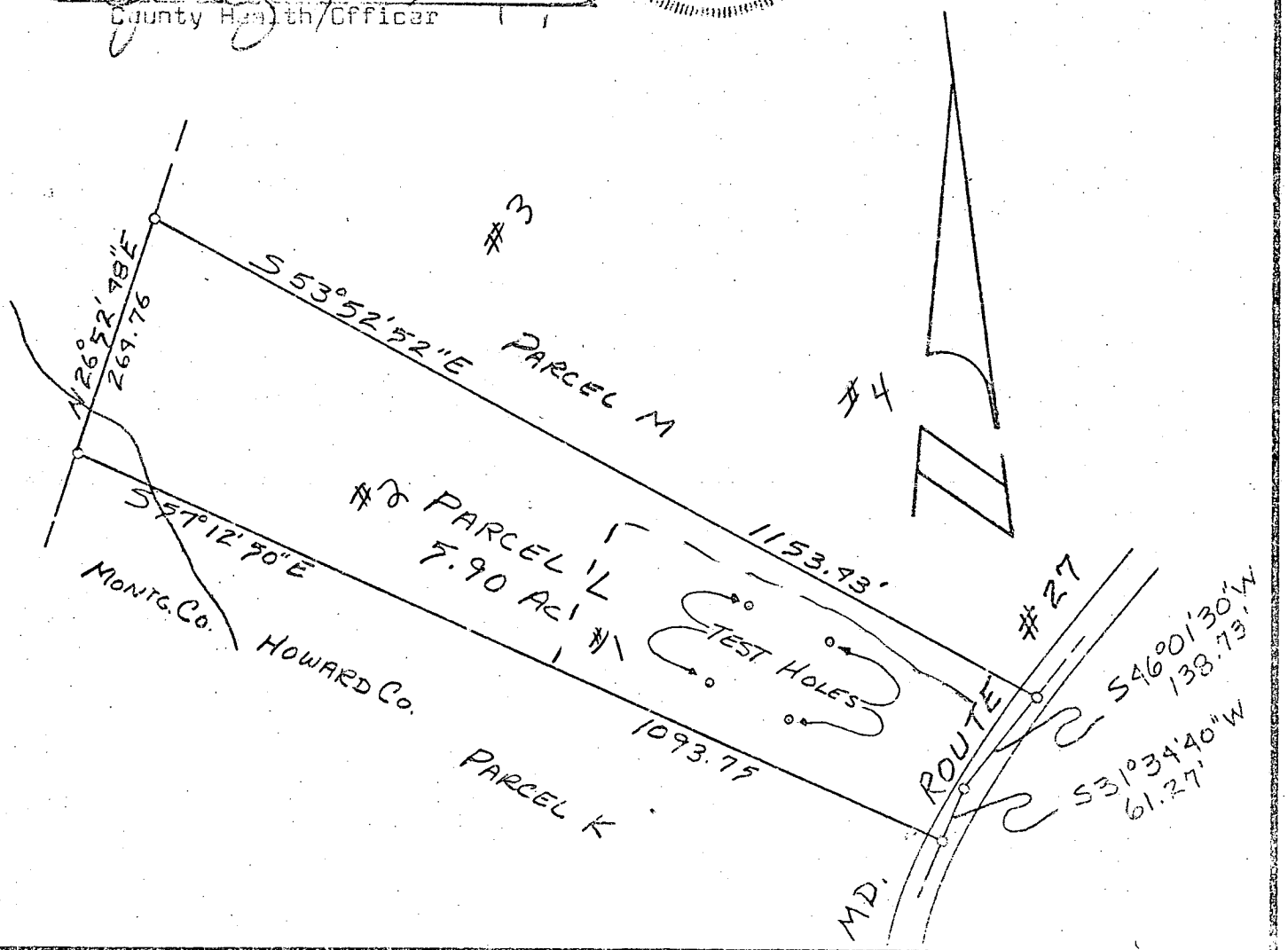
I hereby certify that the plan shown hereon is correct and that iron pipes have been placed wher shown. This lot complies with minimum ownership, width and lot area as required by the Maryland State Department of Health Regulations.

Elwood L. Renn
R.P.L.S. Md. #3383
July 5, 1973

RENN SURVEYS
DAMASCUS, MD
PH. 948-8822

STATE OF MARYLAND
ELWOOD LEROY RENN
No. 3383
REGISTERED
LAND SURVEYOR

Approved
For private water and private sewer
County Health Officer 7/12/73



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

B	1	6336	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-73-2628

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY): 3/28/78 1:30 p.m.
8-13

OWNER: SCHAEFER (COL 15 LAST NAME) MICHAEL (FIRST NAME) COL. 34

STREET OR RFD: 729 WATERSVILLE RD. (COL 36 – COL. 55)

POST OFFICE: MT. AIRY, MD. 21771 (COL 57 – COL. 76)

B	1	CONTINUED

1 2 3 (SEQ. NO.) 6

DRILLER INFORMATION

DATE: 2/23/78 LICENSE NUMBER: 277 (77–80)

ALTON R. KEYSER
FIRST NAME DRILLER LAST NAME

SIGNATURE: Alton R. Keyser

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)

22
- (D) 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: 200 FEET (24–28)

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

30-37

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

OTHER (DESCRIBE) ______

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

39
- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL — circled
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- D THIS WELL WILL DEEPEN AN EXISTING WELL

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

B	3	

1 2 3 (SEQ. NO.) 6

LOCATION OF WELL

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

SUBDIVISION: BURDETTE HILL (23–42)

SECTION: ______ (44–46) LOT: 1 (48–50)

NEAREST TOWN: RIDGEVILLE (52–71)

MILES FROM TOWN (ENTER O IF IN TOWN): 3 (73–76) MI (77 78)

B	4	

1 2 3 (SEQ. NO.) 6

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

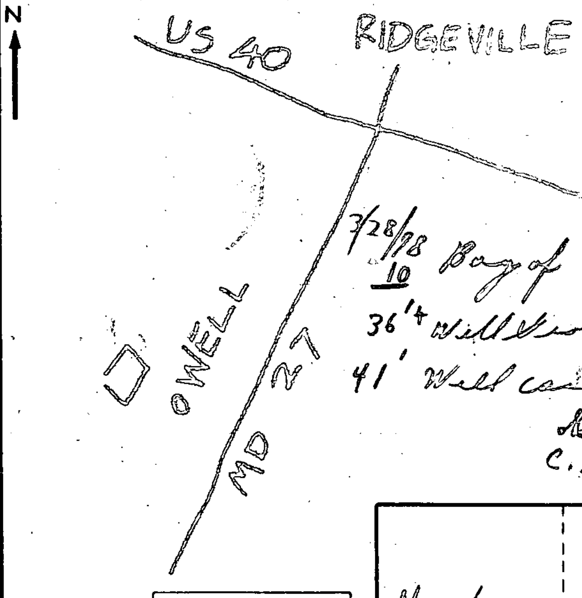
N NORTH	E EAST	NE NORTHEAST	SE SOUTHEAST
S SOUTH	W WEST	NW NORTHWEST	(SW) SOUTHWEST — circled

NEAR WHAT ROAD: RT. 27 (11–30)

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

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 75 (34–37) FT / MI (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.



3/28/78 10 Bag of cement P.W.D
36' Well head
41' Well casing P.W.D
C.B.S

BOX NUMBER: E 740 N 540

NORTH COORDINATE (50–55)

EAST COORDINATE (57–63)

ELEVATION AT WELL HEAD (FEET) (65–68)

X
No house
Yes - septic in downhill from well
No house plans

0/5 5/5 0/0 5/0

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

1 2 3 (SEQ. NO.) 6

HEALTH DEPARTMENT APPROVAL

41 S STATE HEALTH (CIRCLE BOX) — Howard (COUNTY NAME) W27614 (COUNTY NO.)

DATE: MO. DAY YR. (43–48)

APPROVED BY: ______, Sanitarian

B	5	

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

HEALTH 2' Casing out of ground

DNR-214 (7-77)

C 1 4089 — 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)

DATE WELL COMPLETED: 3-29-78 (15–20)

DEPTH OF WELL: 310 (TO NEAREST FOOT) (22–26)

PERMIT NO. FROM "PERMIT TO DRILL WELL": H-73-2628 (28–37)

DRILLERS IDENTIFICATION NO.

OWNER: Scarlar, Michael
LAST NAME / FIRST NAME

STREET OR RFD: 729 Watersville Rd. POST OFFICE: Mt. Airy, Md. 21771

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
BROWN SHALE	0	30	
GREY SHALE	30	310	W

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 10 NO. OF POUNDS 940

GALLONS OF WATER 600

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 (48–52) FT. TO 40 (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)	41 (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)

DEPTH (NEAREST WHOLE FOOT)

EACH SCREEN		FROM	TO
1	H O (8–9)	270 (11–15)	310 (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)

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) R. Ray Reuscher

SIGNATURE

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

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

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

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 4 (8–9)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 3 (11–15)

METHOD USED TO MEASURE PUMPING RATE: Rotary

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 40 (17–20) (NEAREST FOOT)

WHEN PUMPING 305 (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)

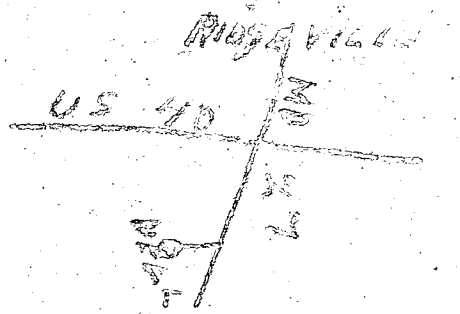
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

(+) ABOVE / (−) BELOW — LAND SURFACE — 1 (NEAREST FOOT) (49–51)

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