PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A	511465	/

DATE SYSTEM APPROVED

HOWARD COUNTY HEALTH DEPARTMENT	•
BUREAU OF ENVIRONMENTAL HEALTH	ENDEXE
461-9933	ENULAL

INSPECTOR 1818
JACK FYOCK SEPTIC SERVICE P.O. BOK 89, GLENELG, MD 21737 ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197
ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197
SUBDIVISION Holly House Farm LOT 1 ROAD 12011 Triadelphia Road
PROPERTY OWNER Matthew & Robin Turner
ADDRESS
SEPTIC TANK CAPACITY 1000 GALLONS
NUMBER OF BEDROOMS 3
210 SQUARE FEET PER BEDROOM
LINEAR FEET OF TRENCH REQUIRED
TRENCHES - Trench to be 3 feet wide. Inlet 4.0 feet below original grade. Bottom maximum
depth 6 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION - Beginning from the intersection of the 240.47' and 199.27' lot lines, begin trenches 150 feet down the 199.27' lot line and 90 feet off that same lot line.
Run trenches on contour. NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and
cap to grade or above on septic tank. 11/19/99 OF AUC
PLANS APROVED BY Amy McMillen DATE 10-28-1999
COVER NO MORE UNTIL MERCATED AND ADDROVED

OVER 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)

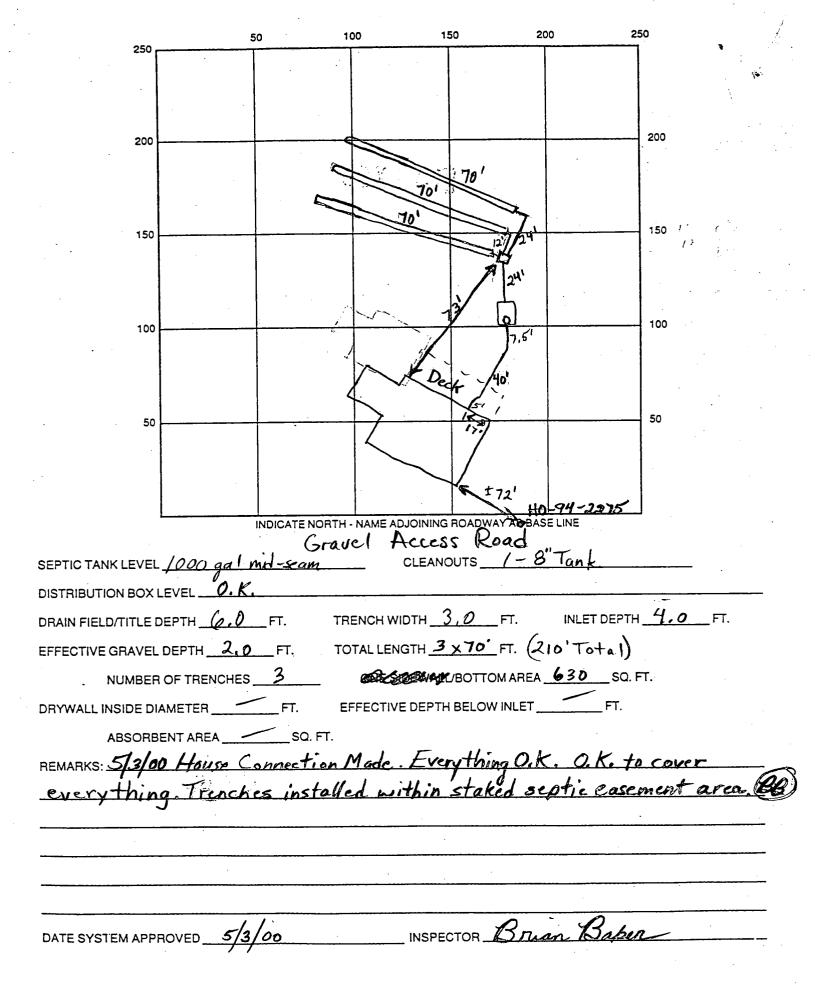
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

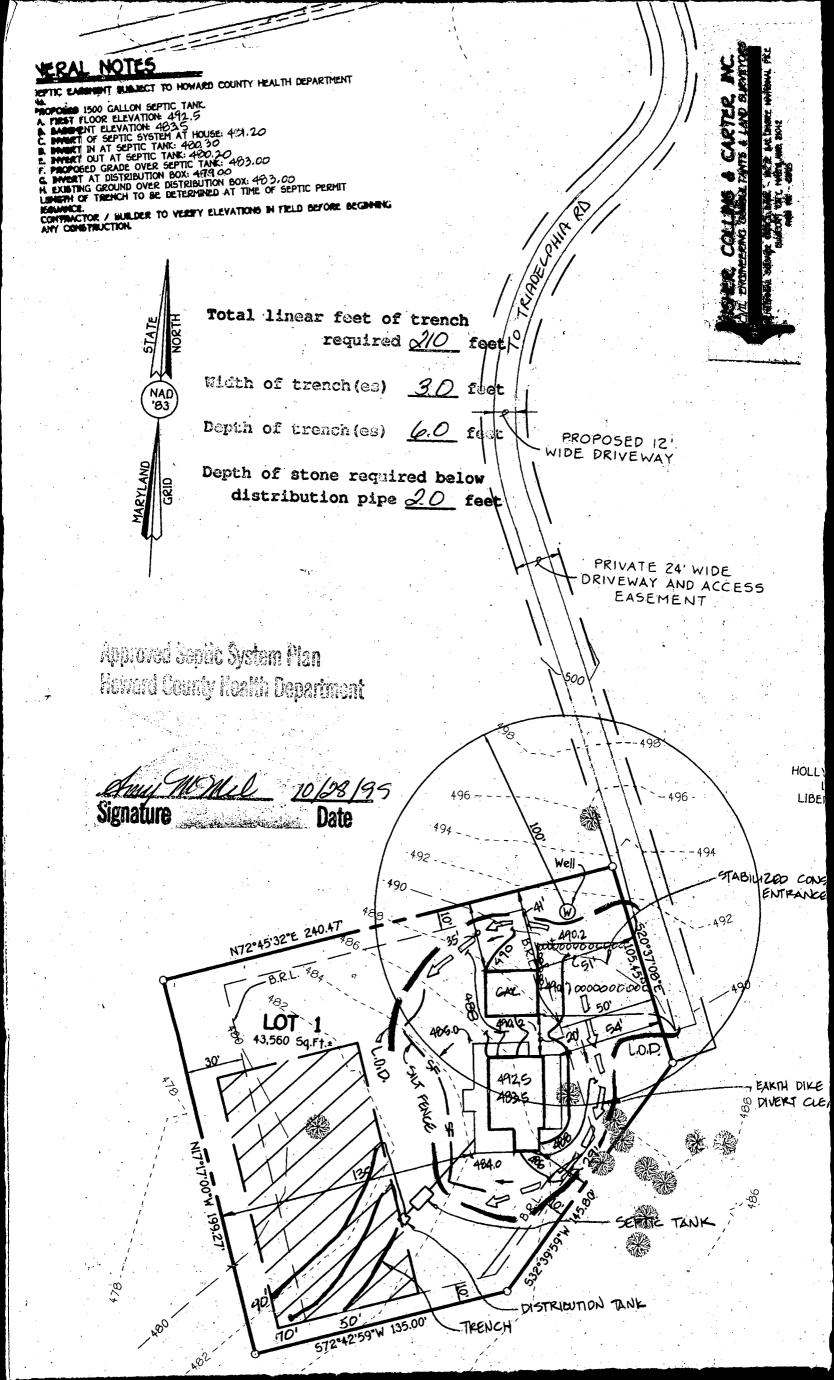
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

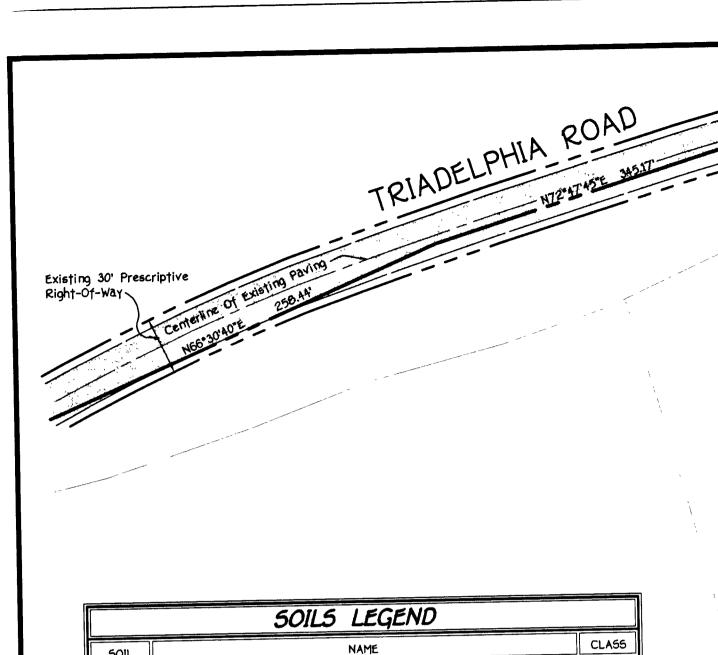
PERMIT VOID AFTER TWO YEARS

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



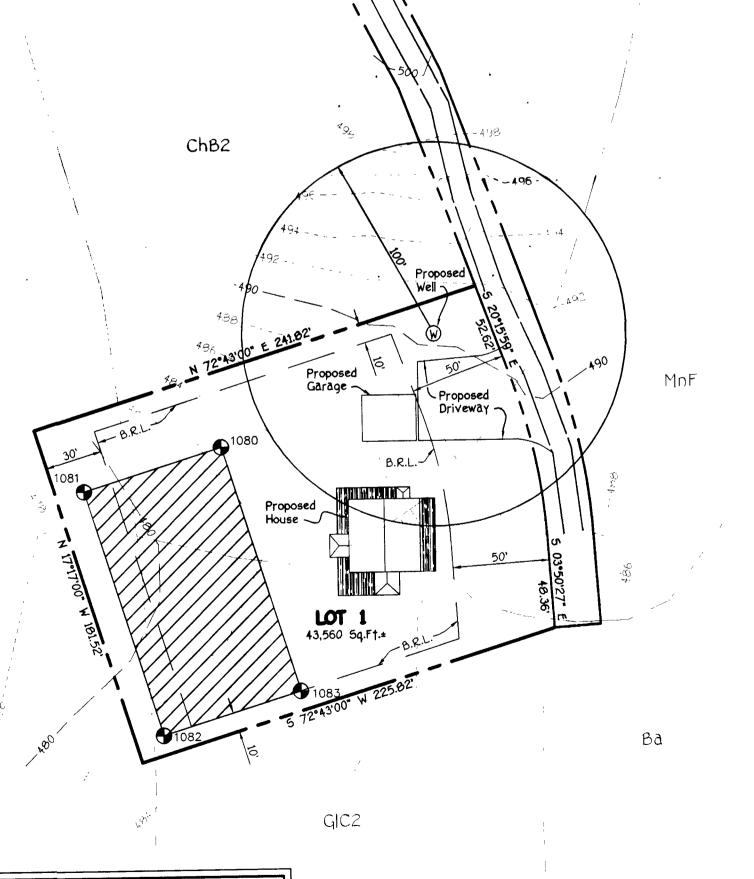




SOILS LEGEND					
SOIL NAME CLASS					
Baile silt loam	Q				
	В				
	В				
	В				
	В				

NOTES:

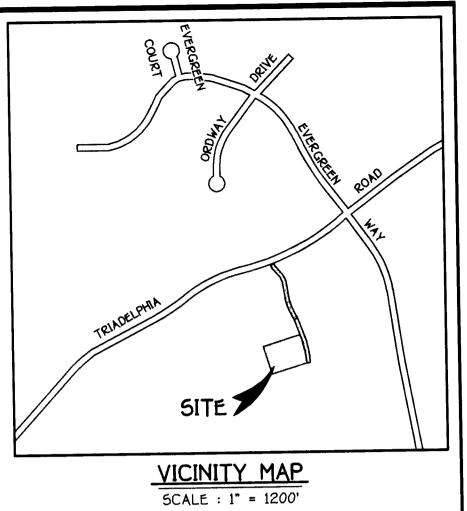
- * Hydric soils and/or contains hydric inclusions
- ** May contain hydric inclusions
- t Generally only within 100-year floodplain areas



Private 24' Wide
Driveway And Access

Existing 10' — Dirt Driveway

Easement



GENERAL NOTES:

- 1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
- 2. THE LOT SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
- 3. ALL WELLS AND SEPTIC SYSTEM WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN.
- 4. W DENOTES PROPOSED WELL LOCATION.
- 5. TOPOGRAPHY BASED ON FIELD SURVEY PERFORMED BY FISHER, COLLINS AND CARTER, INC. DURING MARCH, 1999.
- 6. OWNER & DEVELOPER:

MR. AND MRS. TURNER 3552 FOLLY QUARTER ROAD ELLICOTT CITY, MARYLAND 21042

7. DENOTES FIELD SURVEY LOCATION OF EXCAVATED PERCOLATION TEST SITES OBSERVED BY HOWARD COUNTY HEALTH DEPARTMENT.

CgC2

PERCOLATION CERTIFICATION

BECK PROPERTY

(HOLLY HOUSE FARM)

TAX MAP *23
THIRD ELECT

ZONED: RC-DEO

THIRD ELECTION DISTRICT SCALE: 1"=50'

PARCEL 3 HOWARD COUNTY, MARYLAND DATE: MAY 25, 1999

FISHER, COLLINS & CARTER, INC.

CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

(CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMOPE NATIONAL PIKE

ELLICOTT CITY, MARYLAND 21042

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.

6/1/99

COUNTY HEALTH OFFICER

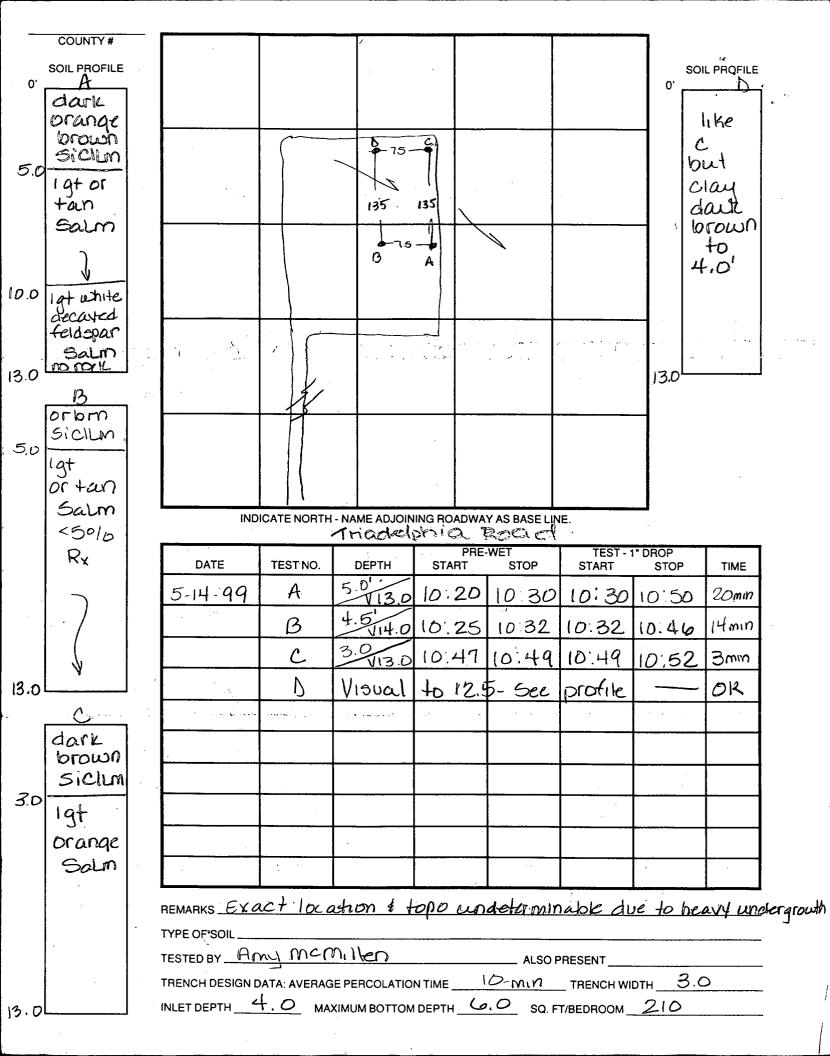
DATE

5114agoo

APPLICATION

	PERCO	LATION TE	ESTING		· ·	A 5 11465
	en e		ورون را این امل درون در	A		P
	HOWARD COUNTY HEALTH DEPARTMENT	and the same	a		DIOTRIOT	
	BUREAU OF ENVIRONMENTAL HEALTH	•	•		DISTRICT_	- 1 /
	3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 313-2640				DATE	3/18/99
то:	THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND					
	I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION	ON FOR PERMIT	TO CONSTRU	JCT (OR RECONS	STRUCT) A SEWAGE	DISPOSAL SYSTEM.
PRO	PERTYOWNER HOLLY HOUSE FAIM LLC	Rob	IN Bet	MA TH	EN TURN	IEL
	ADDRESS 3500 Folly Quarter		MICOTH ONE		410	-531-5455
AGE	NT OR PROSPECTIVE BUYER ROBIN and M	atthen		rner		<u> </u>
	ADDRESS 3552 Folly Quarter Rol E	Mizett Cu	mo PHONE	21042	410 531	-4852
PRO	PERTY LOCATION:		U			
SUBI	DIVISION		LOT NO			
	Terdelphia Rd, su	at Powat	Everge	een wa	y Estate,	Longinged
HOAI OO JJJJ	Self in Maryland 21042 TRIAN	elphin (Poad	OTOG. PE	RMIT SIGNATION	100
TAX	MAP <u>03</u> PARCEL# <u>286576-03</u>	·		AND RE	IRNED 10-2 # Bro/Z	0899
SIZE	OF LOT LACRE	TYPE	BLDG	Single	3 Bed	Twelling
THE	CVOTEM INICIALLED LINDED THE ADDITION IS ADDITION.	5 ON V 1 N T II		(SINGLE FAM		COMMERCIAL)
INC	SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE	E ONLY UNTIL	PUBLIC FAC	ITULES RECOME	E AVAILABLE. I FL	ILLY UNDERSTAND THE
FEE	CONNECTED WITH THE FILING OF THIS PERC TEST APPLIC		, (E UNDER AN	Y CIRCUMSTANCES	S. I ALSO AGREE TO
СОМ	PLY WITH ALL M.O.S.H.A. REQUIREMENTS INTESTING THIS LO	т	len	G. / Cen	OF APPLICANT)	
	•			•	•	
APP	POVED BY	_ FOR	· 		DATE	
DISA	PPROVED BY	FOR			DATE	
HOLI	D PENDING FURTHER TESTS	·	· · · · · · · · · · · · · · · · · · ·	<u></u>		
REAS	SONS FOR REJECTION OR HOLDING			-		
PER	COLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #			<u>.</u>	DATE	
SITE	DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #				DATE	

THIS IS NOT A PERMIT



Howard County Department of Planning and Zoning Division of Land Development

WAIVER PETITION APPLICATION

Date Submitted/Ac	cepted		DPZ File Nu	mber
. Site Description	on			
Subdivision Na	ame/Property Ide	entification: $\underline{}^{1}$	Holly House Farm, Lot 1	
l a sakan akan	South s	ide of Triade	lphia Road, \pm 400' west of	Intersection of
Location of pro	(Road nam	ne and nearest public	road intersection) Evergreen Way	and Triadelphia Road Permitted Child's Lot)
Agricultu	ral		(Proposed Use)	reimitted child's Lot)
(Existing Use)		•	, ,	m1 / 1
23		1	Part of Parcel #3	Third
(Tax Map)	(Grid	J/Block No.)	(Parcel No.)	(Election District)
RC-DEO			1.000 Acre +	
(Zoning District)			(Total Area)	
Department of of modification In the area be Land Developed.	Planning and Zorns to the minimure elow, the petition coment Regulation	ning, in conjunction m requirements of er shall enumera ns for which a w	I County Subdivision and Land Don with the Subdivision Review Constituted within the Regulations. In the specific numerical section regiver is being requested and properties information is appropriate.	ommittee, may grant waivers o(s) from the Subdivision and
Section F	Reference No.	Summary of	of Regulation	
1. 16.119	(f) (3)	For minor	subdivisions approval of	access of use-in-common
2.			onto major collector roadw	ay that meets adequate
2				·
3				
4	_a			
5.				
			9-9-9-9 Approved	-No comment

-1-

DLD/WP

3/97

III. Justification

All waiver requests must be fully justified by the petitioner. Justification must be specific to the subject property. The justification provided by the petitioner should include all factors which rationalize or substantiate the request in accordance with the following criteria:

- a. Summarize any extraordinary hardships or practical difficulties which may result from strict compliance with the Regulations.
- b. Verify that the intent of the Regulations will be served to a greater extent through the implementation of the alternative proposal.
- c. Substantiate that approval of the waiver will not be detrimental to the public interests.

d.	l. Confirm that approval of the waiver will not nullify the intent of the Regulations.				
	SEE ATTACHED NARRATIVE				

IV. Plan Exhibit

A. Number of Copies Required

The waiver petition application must be accompanied by copies of a detailed plot plan, subdivision plat or site development plan (14 sets of the completed waiver form and plan exhibit if the subject property adjoins a County road; 18 sets for properties adjoining a State road). In instances where the waiver request concerns an approval extension, only 2 sets of plans are required along with 14 or 18 copies of the application form. Plans must be folded to a size no larger than 7-1/2" x 12".

B. Plan Requirement Checklist

The detailed waiver petition exhibit, plot plan, subdivision plan or site development plan must indicate the following required information relevant to the waiver request to ensure acceptance of the waiver petition application for processing.

	ormation Provid		on Not Provided,
Legend: Inf			
			on Attached
II <u>na</u> no	t Applicable		

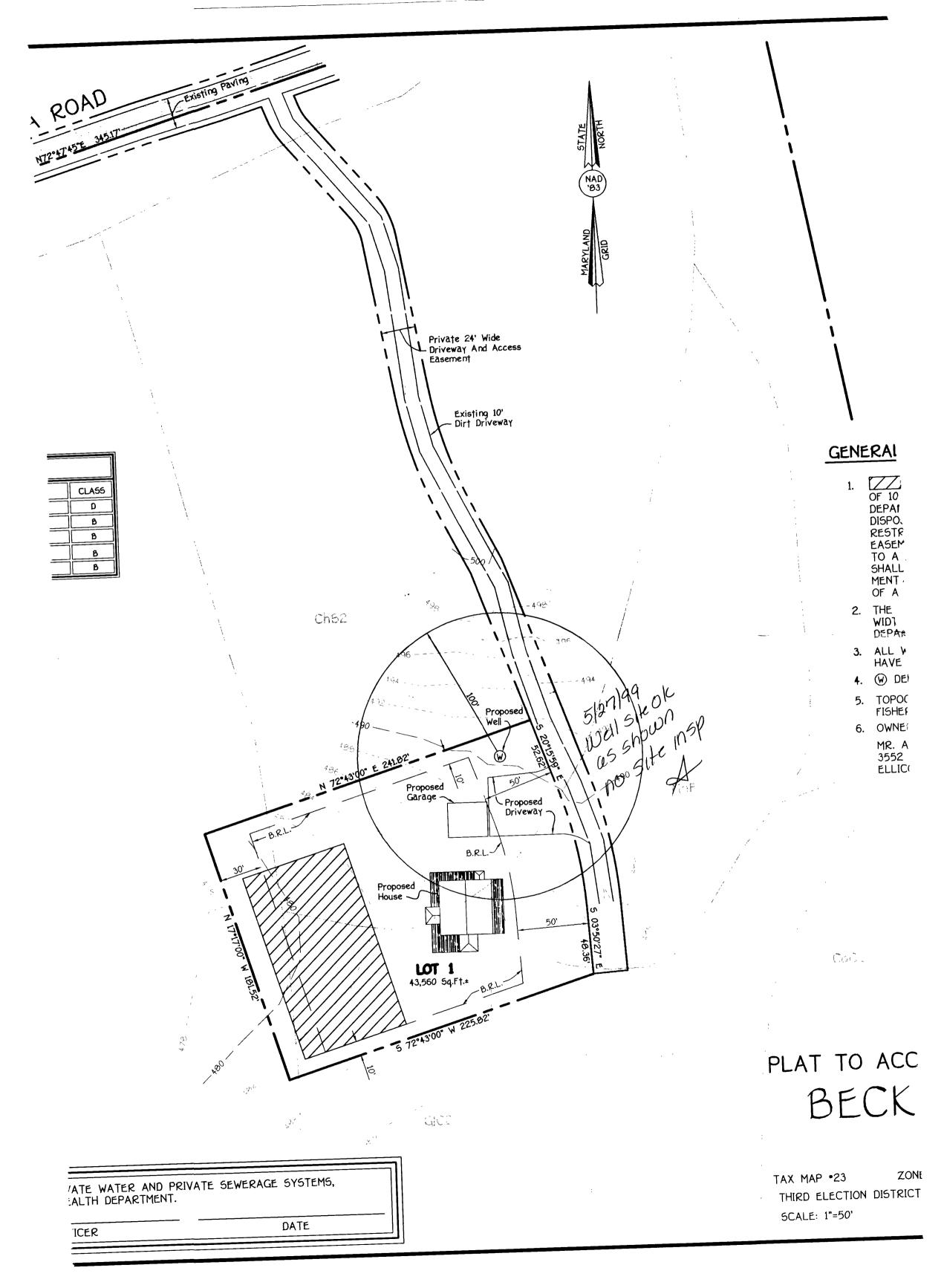
HOWARD COUNTY HEALTH DEPARTMENT Bureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043

FAX: 313-2648 PHONE: 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

ا ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ		
New Installation		Receipt #
Replacement		Date 3/15/00
Name of Installer 257.	L. FEEZER Co. FRC.	
License Number 212-2		
Certified Well Pump Instal		Registered Plumber
Nume of Property Owner Non	THWEST LOG HOWES	Telephone 410-848-5726
Subcavision ISER PROP Site Address 1201 TRIDE	Consey Lot 8	Well Tag 8 Ho - 94 - 2275
Elicot	7 (1-7 21042	
Punp	Motor	B(+) non (day)
1. Type	1. Horsepower /	Pitless Adapter
a. Deep well jet	2. REN 3455	A. Rodel & PTEOD
b. Shallow well 'st	_ 3. Voltage	. Septh 42"
b. Shallow well ist c. Submersible	a. 110	ii. Depth
↑ N = 1	b. 220	•
3. Hodel 8		
3. Hodel 8 4. Capacity GP 5. Pump exceeds well capaci		40
5. Pump exceeds well capaci	ty Yes No	?
6. If Yes, is low pressure	cutoff switch installed?	Yes No
7. What methods are used to	protect the pump and elec	ctrical wiring from
vibrations? Torque arr	estors Cable guard	is commendation
CHTTIVE AND	Piping 700 PSr Down 1. Type	Folaux à
Tank WX-205	Piping and PSI Down	Well data _ /
1. Capacity 36 FPSF	1. Type Wet	1. Depth 300 ft.
2. Pressure relief	2. Size	2. Yield 7 GPM
valve? 155	3. NSF and/or BOCA	3. Static water
	Code approved 🚣	
	4. Depth of supply	level 31 ft. 4. Will water supply
	line	be disinfected by
		installer? [ES.
understand that it is my	responsibility to notify	the Howard County Health
Department when the installa	ition is ready for inspect	ion (otherwise this permit
is null and void).		
all information given above	is true to the best of my	knewledge.
usp not performed	/h	
Never called in? 5185	nature of Applicant: 2	and Comment
,	Date:	3/115/200
	Date:	-4114000

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



SEQUENCE NO. A	STATE OF MARYLAND 9 27 THIS REPORT MUST BE SUBMITTED WITHIN WELL COMPLETION REPORT OF 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 1 HIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 QN-ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE WELL COMPLETION REPORT OR COUNTY NUMBER A 5 11465
ST/CO USE ONLY DATE WELL COMPL	FROM "PERMIT TO DRILL WELL
13 13 99 13 13	22 <u>500</u> 26 <u>HO 9 4 - 2275</u> 28 29 30 31 32 33 34 35 36
OWNER TURNER ROBIN STREET OR RFD Isst name Trion	Jelphia Rd First name TOWN Ellico H CIty
SUBDIVISION . TUDENCY PROP	SECTION LOT /
WELL LOG Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box) Output Output
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING DESCRIPTION (LISE C. FEET Check	TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY B C HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed) FROM TO bearing	NO. OF BAGS 45 27 NO. OF POUNDS 25760 PUMPING RATE (gal. per min.)
TOP SOIL 2 15	GALLONS OF WATER METHOD USED TO MEASURE PUMPING RATE Builties
Shaley Cay 15 73	from 6 tt. to 7/1 tt. TOP 52 tt. to 54 BOTTOM 58 WATER LEVEL (distance from land surface)
Sand Silt	casing CASING RECORD BEFORE PUMPING 17 20 ft.
Mica 73 90	types insert appropriate STEEL CONCRETE WHEN PUMPING 27 7 ft.
Sand Stone 90 95 V	code below PLASTIC OTHER TYPE OF PUMP USED (for test)
Mica & Flight 95 400	MAIN Nominal diameter Total depth CASING top (main) casing of main casing
Mixeda	TYPE (nearest inch)! (nearest foot) C centrifugal R rotary O (describelow)
Mica 400410	60 61 63 64 66 70 J jet Submersible
Microsoftent 110 120	diameter depth (feet) inch from to PUMP INSTALLED
MINED 41050B	DRILLER WILL INSTALL PUMP YES (NO (CIRCLE) (YES or NO)
Mica	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
	screen type or open hole or open hole ST BR HO TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29
	insert STEEL BRASS OPEN CAPACITY: BRONZE HOLE GALLONS PER MINUTE
	below PLASTIC OTHER RUMP HORSE POWER
NUMBER OF UNSUCCESSFUL WELLS:	C 2 DEPTH (nearest ft.) PUMP COLUMN LENGTH (nearest ft.)
yes AD	E 1 ASING HEIGHT. (circle appropriate box
CIRCLE APPROPRIATE LETTER	A and enter casing height) A C 2 H 2 23 24 26 30 32 36 49 49 Above LAND SURFACE
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	c 3 below (nearet foot)
P TEST WELL CONVERTED TO PRODUCTION WELL	R R 38 39 41 45 47 51 49 50 51 E SLOT SIZE 1 2 3 LOCATION OF WELL ON LOT
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	SHOW PERMANENT STRUCTURE SUCH AS DIAMETER (NEAREST BUILDING, SEPTIC TANKS, AND /OR SOF SCREEN INCH) LANDMARKS AND INDICATE NOT LESS
CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE	56 60. THAN TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIC NO 1 MWD 0 40	GRAVEUPACK IF WELL DRILLED:
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	WAS FLOWING WELL INSERT F IN BOX 68 68 20 20
LIC. NO.1 M WO 501	(NOT,TO,BE FILLED IN,BY DRILLER) T (E.B.O.S.) W Q
Mole R. holla	70
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG 74 75 76 CASING INDICATOR OTHER DATA RIGGE Phia RD
	COUNTY

L _P	1	16350 SEQUENCE NO. STA	TE OF	MARYLAND		STATE PERMIT	NUMBER
Ļ	<u>'</u> ,		· 4	DRILL WELL	$\mid u$	0-94-	1275
ľ		ं हैं देख हैं। अपने किंद्र की अपने क्षेत्र की किंद्र की अपने का	ease pr	int or type _	70	fill in this form o	completely 79
7,,	D	Date Received (ARA)	j	B 3		OF WELL	1
	2	OWNER INFORMATION RN	7870	8 COUNTY			CC#
l		Turner Robin	· .	Beck Prope	irtu	. 21	
l	1:	5 Last Name Owner First Name	34	23 SUBDIVISION	i ty		42
ŀ	L	3552 Folly Quarter Rd	<u></u>	SECTION L 44 46	LOT L	1	-
l	3	Ellicott City, Md 21042	55 ;	44 46 West Friends	48 • f aire	50	
l	<u> </u> 5	t 	<u>1</u> 76	52 NEAREST TOWN	niib		71
		DRIĻLER INFORMATION	al Since	MILES FROM TOWN (ente	ur () if in town)		M II
) ·	Ē	George F. Easterdav M Vo 040	:				77 78 ,
ľ	U	briller's Name 76 License No. 8 L. Franklin Easterday, Inc.	81 ∄	B 4 1 2	₩.	iedelebie Da	
	F	irm Name	1	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11	riadelphia Rd NEAR WHAT F	
	` [<i>i</i>	9265 Brown Church Rd., MT. Airv. Md. 21771			=∵⊇QN ŊJ H	ICH SIDE ÕE BO	DAD NORTH
	A	ddress 1 feet 1	عان ا		(CIRCLE	ICH SIDE ÖF RO E APPROPRIATE	EBOX) MARIEI
	Ļ	Starce T. Casterlay 5/19/1999		W (TOWN)—E		₃₄ 500	WEST STEAST
	3	2 WELL INFORMATION 5	1			DISTANCE FRO	₩
'	,	2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12	٠ بر	Sw SE		ENTER	FT OR MI 38 39
	A	VERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY) 14 20	기 분명	8-9 S 8-9	TAX MAP: _	BLK;	PARCEL
	. (0	USE FOR WATER (CIRCLE APPROPRIATE BOX)	<u>}</u>	NOT TO	BE FILLE	D IN BY DRIL	 LER
		DOMESTIC POTABLE SUPPLY & RESIDENTIAL	1 101	HEALTH	H DEPART	MENT APPRO	VAL
		IRRIGATION		Howard	Co	H5	11465
ļ		FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION		COUNTY NAME STATE			COUNTY NO.
2	2	INDUSTRIAL, COMMERICIAL, DEWATERING		SIGNATURE		INSE	RT S
		PUBLIC WATER SUPPLY WELL	1	DATE ISSUED 1052799 A	wind		1/27/00
ľ		T, TEST, OBSERVATION, MONITORING	4	43. MM DD YY 48	. Εν	NATURE, ST 0	Z EXP. DATE
		G GEO-THERMAL	6	$\frac{\text{GRID}}{50} = \frac{3200}{50}$	<u>00</u> GF 55	RID <u>0</u> /	10000 63
			;	SHOW MAJOR FEATURES	OF .	7/10	199 X
l	Α	PPROXIMATE DEPTH OF WELL 300 FEET	4	BOX & LOCATE WELL WITH AN X		7/20/	= 1
⊩		24 28 N	EAREST	SOURCES OF DRILLING V	VATER	8.00	01004
l	Α		NCH	1. wells		a Grant	d -
		METHOD OF DRILLING (circle one)		3.		# 411-0	14-2275
	~~~	ORED (or Augered) JETTED Jetted & DRI	-				**
3	<del>, =</del>	IR-ROTary AIR-PERcussion ROTARY (Hydraulic Ro	; ′′	WRITE THE BOX NUMBER	٠ ا	Time	bur dip
ľ		ABLE: REVerse-ROTary DRive-Pi	OINT	FROM THE MAP HERE		7/20/	199618
-		REPLACEMENT OR DEEPENED WELLS		E 810	<u> </u>	000	4
	1	(CIRCLE APPROPRIATE BOX)		500		000	4
	~	THIS WELL WILL NOT REPLACE AN EXISTING WELL  THIS WELL WILL REPLACE A WELL THAT WILL BE		N <u>520</u> DRAW A SKETCH BELOW	SHOWING I	OCATION OF WEL	5. IKI
	L	ABANDONED AND SEALED		RELATION TO NEARBY TO	OWNS AND F	OADS AND GIVE	L IN
3	9	THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY CONTACT LOCAL APPROVING AUTHORITY		DISTANCE FROM WELL TO	O NEAREST	ROAD JUNCTION	MAP
	Г	FOR POLICY ON STANDBY WELLS		ARIANDSHIP >	Ko		10 G6
	_	의 THIS WELL WILL DEEPEN AN EXISTING WELL ERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED					÷ ∮ n j
		F AVAILABLE) 41	2	. N	Z	L	t.
┢		Not to be filled in by driller (MDE OR COUNTY USE ONLY)	) - 1			4	* · · · · · · · · · · · · · · · · · · ·
		PPRÓP PERMIT NUMBER GAP			ii aa	E	¥ *
1	Al	PPROP PERMIT NUMBER  54  63  65  65  65  65  65  65  65  65  65	3	1000	1:38		<b>3</b>
1	•	PERMIT No. $\frac{H0}{70}$ 70 71 72 73 74 75 76 77 7	7 <del>5</del>	or .		•	<b>∵</b>
<del> </del>	S	PECIAL CONDITIONS	5 /3 1 4				<b>⊕</b>
	NO	OTE & APPROVING AUTHORITIES SHOW! DILISE SEPARATE SHEET IE NEEDED					_

, uge	 of	
<i>Date</i>		

# 1/24/99 10:00

Review	
VEATER	
	<del></del>

## FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

TESTED	134
Dick	is
a con	<b>&gt;</b>

Well Permit No. HO - 94-2275		Car	
Location of property (road) Triodel	ohia Rd		
Subdivision/	Lot / Block	77.24	
Well Driller G Easterday	Owner Robin	Plat Sec.	_
		YWIR!	
Depth of well 500 / 9	on		
Distance of measuring point (M.P.)	above ground	مس	
Static water level (S.W.L.) below	M.P. 36 F.		
•			

I. High rate pumping -- reservoir drawdown

Time pump started 12 50 port Pumping rate 15 6 port Total time 25 mily to reach pumping water level 2/7 ft. below M.P.

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

TIME (in 15	WATER LEVEL	PUMPING RATE	recorded every 15 min	·
minute in-	below M.P.	time to fill #	FLOW METER READING	CALCULATED FLOW
tervals		gallon bucket	Pump SET	(gallons per
1115	217/29	30 5-02	380 17	minute) 2 (CM)
1130	2.7つ 度す	30 500	380 FT	Zcom
1:45	217 FT	30 5-	3 80 05	2 2010
200	2 17 101	30 5-60	38010	2 600
2 9 5	2175	30 5	3800 109	20000
230	215FT	30 5-00	38019	2 Com
545	21764	30 500	STOFT	2 600 P 100
300	21767	30 300	38067	E Con-
315	217157	SP 5 ec	3 80 0	Z GOW
330	217 FT	30 5 mc	3 Ses FT	26010
945	317 FT	30 Sec	38017	8 60 m
400	217/3	300 5-00	381 69	E Gordon
415	217 8	30 See	3 82 F	2 60,00
430	217/00	30 Sec	380 PT	2 6 PM
445	21787	30 5-4	300 FT	ZGPM
400	21755	30 Sec	380 FT	26000
515	217	30 500	380 69	Z GOM
930	2.17 /1	305-4	380 PT	2 Coppy
545	207 FT	30 500	380 67	26001
600	21365	30 Sec	38017	2 600
615	ALT FT	30 sec	3 80 mg	7 8 pm
630	AMFT	20 500	79 80 Mg	2 60 m
645	2 17 11	30 546	13 SO 187	2 000000
260	219 pm	Ber See	380 KT	2.6110
ID-224 7/5	21777	JO See	380 MT	2 6000