Approved 10/24/86
Stayer

...EPTIC SYSTEM MUST BE INSTALLED BEFORE BUILDING PERMIT CAN BE ISSUED.

PERMIT

P 33404

A 29473

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEXED
04-341783

ELLICOTT CITY
DISTRICT 4th

DATE 12/19/83

Foremost Industries IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 2375 Buchanan Trail West, Greencastle, Pa. 17225 PHONE 829-0886 (Mr. Rosensteel)

SUBDIVISION Poplar Springs ROAD 912 Watersville Road LOT 3

PROPERTY OWNER Foremost Industries, Inc.

ADDRESS same as above

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

~~DRY WELL OR DRY WELL AND TRENCH - 150 sq. ft. per bedroom absorbent sidewall area.~~ Inlet ~~4½ ft. below original grade. Bottom maximum depth 10½ ft. below original grade.~~ Effective area begins at 4½ ft. below original grade. If trenches only used need 187 sq. ft. per bedroom, one sidewall area. Trench to be 2 ft. wide. Inlet and maximum depth same as on dry well. 6 feet of stone below distribution pipe. Place the ~~dry well or~~ trench between perc holes #1 and #4. Perc hole #1 is located 20 ft. from the lot line which is 190 ft. long and runs N77°07' 25" W and 10 ft. from the lot line which is 80 ft. long and runs N12°52' 35"E. Perc hole #4 is located 120 ft. from the lot line which is 190 ft. long and runs N77°07' 25"W and 160 ft. from the lot line which is 98.7 ft. long and runs S32°00' 00"N.

PLANS APPROVED BY Raymond Hodges DATE 10/19/83

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

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

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

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

PERMIT VOID AFTER THREE YEARS.

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

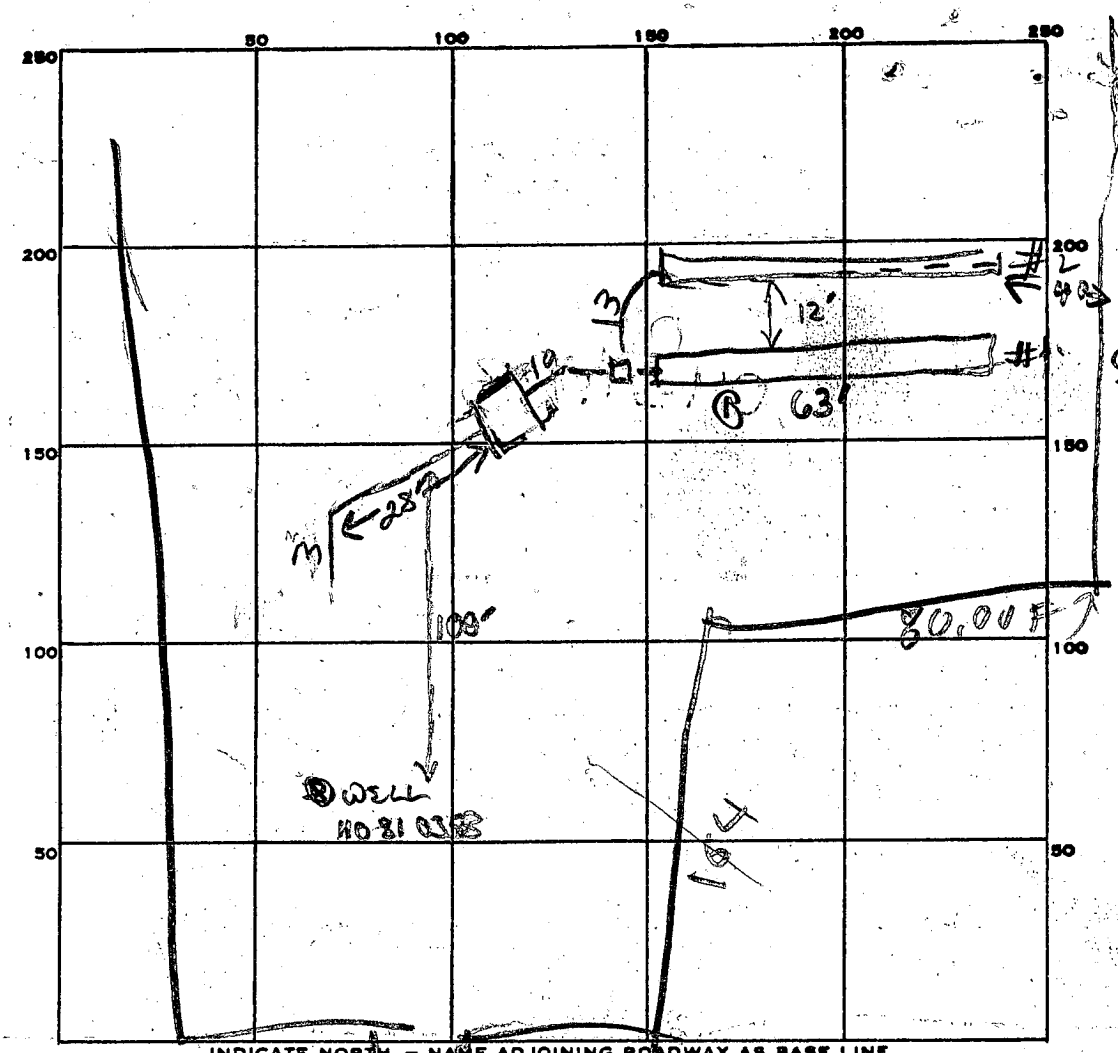
A 29473

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

154
3
462



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL OK 1250 CLEANOUTS ST OK

DISTRIBUTION BOX, LEVEL OK

TILE FIELD, DEPTH #1 10' | #2 10.5 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH #1 6" | #2 6" IN. TOTAL LENGTH #1 63+ | #2 63 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA #1 360 | #2 368 | TOTAL 736

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 10/29 OK TO stone & add pipe to trench #1 & cover
10/29 ok to start trench 2 - stone & add pipe

10/29/85 LOCATION OK STONE ADDED TO BOT TRENCHES & TANK & BOX CONNECTED. OK TO COVER
CALL WHEN HOUSE SEWER INSTALLED RH

10-24-86 House connection OK

DATE SYSTEM APPROVED 10/24-86 INSPECTOR S Taylor

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Easterday Well & Pump Telephone #: 301-831-7057
Address: 9265 Baden Church Rd
Mt Airy MD 21771

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Lester Simmons License# AW D611
***A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.**

Name of Property Owner: Johnson Schneebagen Telephone #:
Subdivision: Lot #: Well Tag # : HO-94-3494
Site Address: 9182 Waterfall Rd

Submersible Pump Data
Make: Gould
Model #: 5GS07422
Pump Capacity: 5 GPM
Well Yield: 6 GPM

Pitless Adapter
Make: Cambell
Model#: B-10K
Depth: 48" (36" min)
NSF/WSC approved:

Depth of well encountered at time of pump installation: (feet)

Well Cap and Electric Conduit
Two piece watertight cap: ✓
Screened, vented well cap: ✓
Cap secured to casing: ✓
Conduit min 18" B.G.: ✓
Conduit secured to well cap: ✓

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors, Cable guards, or other acceptable method used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing ✓

Piping to house
Type: Copper
PSI: 200 (160 psi min)
Depth of supply line: 5' (36" min)

House Connection
PVC sleeve to undisturbed soil at wall penetration: yes
Approximate length of sleeve: 5-4
Sleeve caulked and sealed properly: yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation date 10/30/02

For Health Department Use Only – Not to be completed by Installer

Date Insp. Requested: Date Insp. Approved: 10/31/02 Inspector: SO

Inspection Data:
- Pitless adapter watertight & water supply line at least 36" below grade ✓
- Two piece cap installed and attached to casing securely ✓
- Elec. conduit extends at least 18" below grade/attached to cap properly ✓
- Safety rope not seen outside of well cap/casing ✓
- Correct well tag attached properly and casing 8" above finished grade ✓
- Water supply line sleeved adequately at house connection fix to ex. house conn.
- Adequate grout observed below pitless adapter ✓

HD-215 Rev. 12/00

14246 SEQUENCE NO. (MDE USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY
PLEASE TYPE

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

COUNTY NUMBER A 29473

ST/CO USE ONLY
DATE Received MM DD YY

DATE WELL COMPLETED 10/22/02

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3494

OWNER Schneeberger [last name] [first name]
STREET OR RFD 912 E. Watersville Rd TOWN Lisbon
SUBDIVISION Poplar Springs SECTION ______ LOT 3

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	1	
reddish/brown Shale	1	8	
Brown Shale	8	23	
Tannish/brown Shale	23	32	
Brown Slate	32	50	
Greenish/gray Slate	50	90	✓
Tannish/gray Slate	90	110	
Green Slate	110	215	✓
Gray Slate	215	242	
Green Slate	242	400	

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED Y / (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. MWD 04__
George J. Easterday
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. JWD 7__
[signature]
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) (Y) N

TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY BC

NO. OF BAGS 21 NO. OF POUNDS 310

GALLONS OF WATER 126

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. (TOP) to 40 ft. (BOTTOM) (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below: ST STEEL, CO CONCRETE, PL PLASTIC, OT OTHER

MAIN CASING TYPE ST; Nominal diameter top (main) casing (nearest inch) 6; Total depth of main casing (nearest foot) 47

OTHER CASING (if used) 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

C2 DEPTH (nearest ft.) HO 47 400

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
6 GPM
TELESCOPE CASING / LOG INDICATOR / OTHER DATA

PUMPING TEST
C3

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 6

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)
BEFORE PUMPING 50 ft.
WHEN PUMPING 400 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 (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.

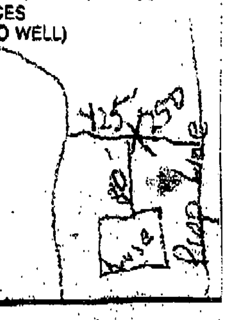
CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

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)



DENV-CR00 DRILLER

EMERGENCY/TEMP NO. IF ANY

B 1 | 1302 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

517441 please type

STATE PERMIT NUMBER: HO -94 - 3474

fill in this form completely

Date Received (APA): 08 28 02 (8 MM DD YY 13)

9193

OWNER INFORMATION

SCHNEEBERGER JOHN (15 Last Name Owner First Name 34)

912 E. WATERSVILLE RD (36 Street or RFD 55)

MT. AIRY, MD 21771 (57 Town 70 State 72 Zip 76)

DRILLER INFORMATION

George F. Easterday M WD 040 (Driller's Name 76 License No: 81)

L. Franklin Easterday, Inc. (Firm Name)

9265 Brown Church Rd., MT. Airy, Md. 21771 (Address)

George F. Easterday 8/28/2002 (Signature Date)

B 2 | 1 2 | WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 (8 12)

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 (14 20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- I INDUSTRIAL, COMMERICIAL, DEWATERING (22)
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL

APPROXIMATE DEPTH OF WELL 300 FEET (24 28)

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

(30) AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)

(37) CABLE REVerse-ROTary DRive-POINT

other

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- 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 (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER ____ - ____ - ____ G ____ - ____

PERMIT No. HO 94 3474 (70 71 72 73 74 75 76 77 78 79)

B 3 | LOCATION OF WELL

Howard CC# (8 COUNTY 21)

23 SUBDIVISION 42

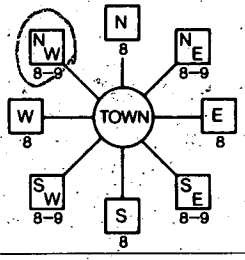
SECTION (44 46) LOT (48 50)

Lisbon (52 NEAREST TOWN 71)

MILES FROM TOWN (enter 0 if in town) 2 M I (73 76 77 78)

B 4 | 1 2

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



912 East Watersville Rd (11 NEAR WHAT ROAD 30)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

(34) 50 (37) DISTANCE FROM ROAD Ft.

ENTER FT OR MI (38 39)

TAX MAP: 07 BLK: 03 PARCEL 287

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (13) A29473 (COUNTY NAME COUNTY NO.)

STATE SIGNATURE ____ INSERT S → (41)

DATE ISSUED 08 28 02 (43 MM DD YY 48) CO SIGNATURE 08/28/03 EXP. DATE

NORTH GRID 550 000 (50 55) EAST GRID 772 000 (57 63)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. wells
2.
3.

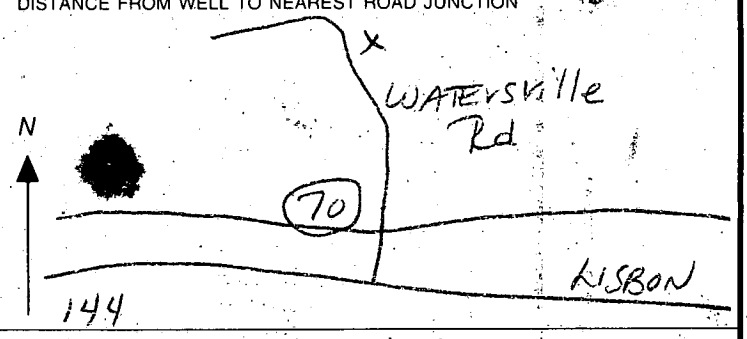
WRITE THE BOX NUMBER FROM THE MAP HERE

E 772 / 550

N ____

10/22/02 2pm Grout leaks OK (SC)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

DENV-Permit 97

② COUNTY

8/28/02
11:00

SITE INSPECTION SHEET

OWNER: Schneeberger **PHONE #:** _____

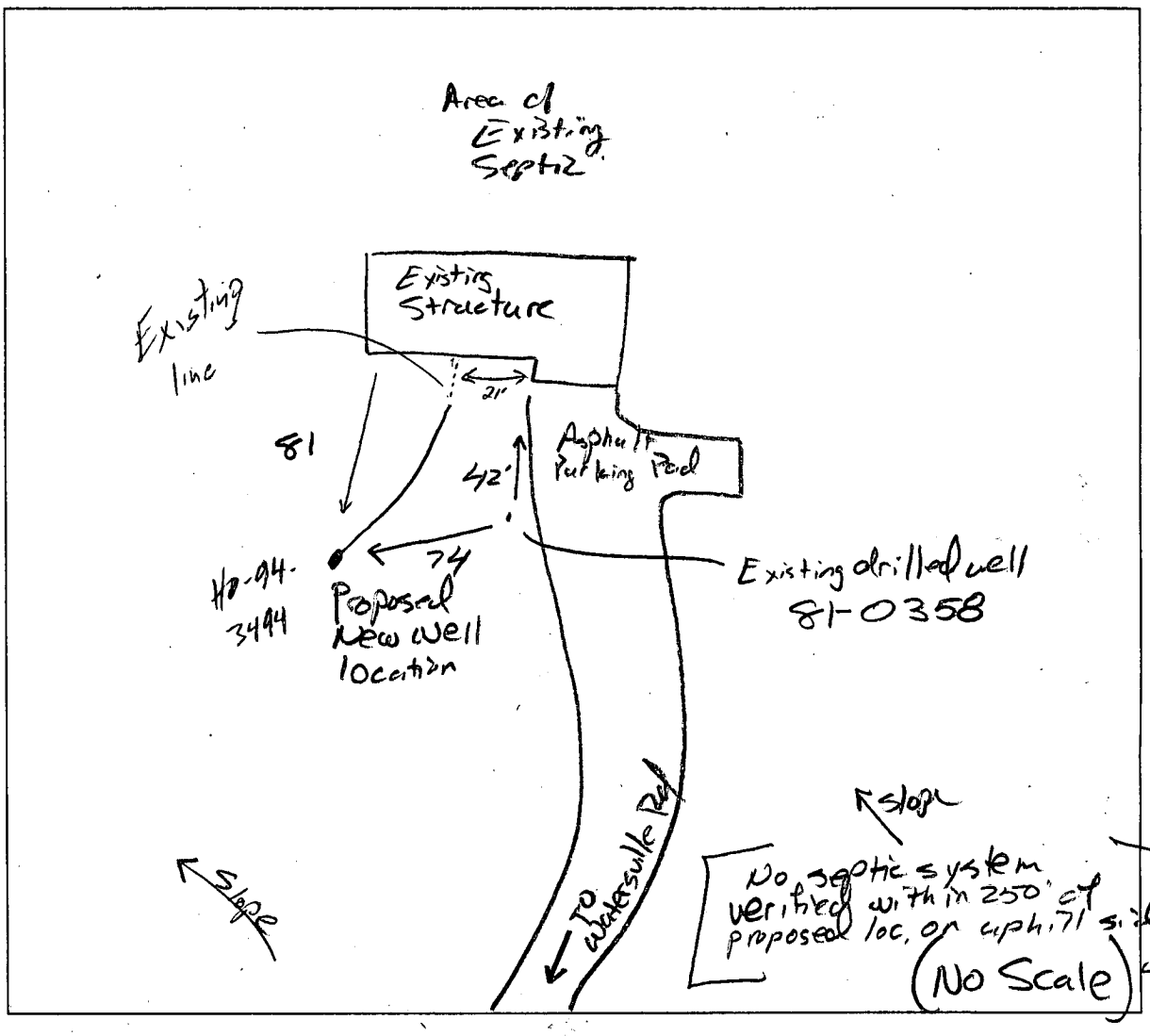
ADDRESS: 912 E. WATERSVILLE ROAD **CONTRACTOR:** FEASTERDAY

WELL TAG #: HO-94-3494

SUBDIVISION: POPLAR SPRINGS **LOT:** 3 **COUNTY #:** HOWARD A29473

PROPOSAL: Replacement Well

LOCATION DIAGRAM



COMMENTS: Keeping existing low yield well. Its possible that well driller will tie both wells together. 10/31/02 Old well to be abandoned (SO)

DATE: 8/28/02 INSPECTOR: J. Boris

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: 11/29/02 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any): HO -81-0358

* PERMIT NUMBER OF REPLACEMENT WELL: HO -94- 3494

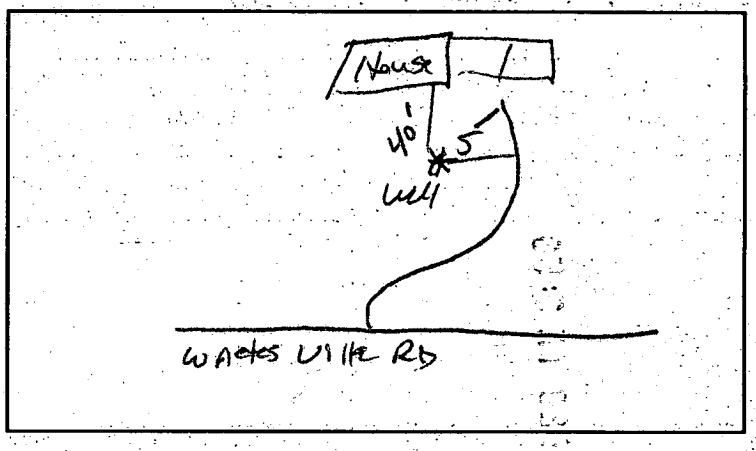
* PERSON ABANDONING WELL: Richard A Crummitt WELL DRILLERS LICENSE NUMBER: WRO 014

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: JOHN SCHNEEBERGER

* WELL LOCATION:
COUNTY: HOWARD
NEAREST TOWN: MT AIRY
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: 912 E. Waterville Rd

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:
✓ DRILLED _____ JETTED
_____ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

* USE CODE:
✓ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
_____ TEST/OBSERVATION _____ GEOTHERMAL

** TYPE OF CASING:
✓ STEEL _____ PLASTIC
_____ CONCRETE _____ OTHER (specify)
_____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 249 FEET DEEP

* WAS ANY CASING REMOVED? ✓ YES _____ NO
if yes, length removed, in feet: 4

* WAS CASING RIPPED OR PERFORATED? ___ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	249	4
Grout	4	0

VOLUME OF MATERIAL USED: 10 Bags Bentonite

George F. Rustenburg 040 MWD/MSD/MGD 12-17-02
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

DENV 828 JULY 1997 2) COUNTY ENVIRONMENTAL AGENCY

C 1 0878 — SEQUENCE NO. (OEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 NUMBER A29473

DATE Received

DATE WELL COMPLETED 12/20/83

Depth of Well 260 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-0358

OWNER Foremost Industries

STREET OR RFD Watersville Rd. (last name) (first name) TOWN Poplar Springs

SUBDIVISION Poplar Springs SECTION LOT 3

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
Top Soil	0	2	
Brown Shale	2	40	✓
Brown Slate	40	45	
Blue Slate	45	60	
Brown Slate	60	65	✓
Blue Slate	65	260	

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

TYPE OF GROUTING MATERIAL

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 15 NO. OF POUNDS 1500

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. (TOP) to 30 ft. (BOTTOM)

(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	6	52

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

EACH SCREEN		DEPTH (nearest ft.)
1	HO	50 to 260
2		
3		

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 3

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 25

WHEN PUMPING 260

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 WILL INSTALL PUMP (CIRCLE) (YES or NO) YES (NO)

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

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

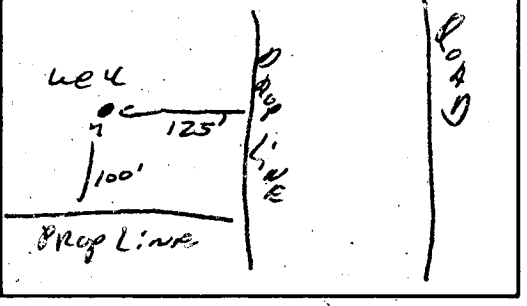
PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

(+) above (−) below LAND SURFACE 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)



CIRCLE APPROPRIATE LETTER

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

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 223

Robert Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

Robert E. Mayne

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

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

T (70) TELESCOPE CASING

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

WQ (74 75 76) OTHER DATA

HEALTH

Page ___ of ___
Date Oct 20, 1983

Review OK 12/4/85 CWH

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0358
Location of property (road) Watersville Road
Subdivision Poplar Springs Lot 3 Block ___ Plat ___ Sec. ___
Well Driller Ralph Mayne Owner Foremost Industries

Depth of well ±60 ft
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 25 ft

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 9 G.P.M
Total time 15 min to reach pumping water level 34 ft. below M.P.

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

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	34 ft	20 sec		3 G.P.M
8:00	34 ft	20 sec		3 G.P.M
8:15	34 ft	20 sec		3 G.P.M
8:30	34 ft	20 sec		3 G.P.M
8:45	34 ft	20 sec		3 G.P.M
9:00	34 ft	20 sec		3 G.P.M
9:15	34 ft	20 sec		3 G.P.M
9:30	34 ft	21 sec		3 G.P.M
9:45	34 ft	20 sec		3 G.P.M
10:00	34 ft	20 sec		3 G.P.M
10:15	45 ft	20 sec		3 G.P.M
10:30	55 ft	20 sec		3 G.P.M
10:45	65 ft	60 sec		1 G.P.M
11:00	65 ft	60 sec		1 G.P.M
11:15	65 ft	60 sec		1 G.P.M
11:30	65 ft	60 sec		1 G.P.M
11:45	65 ft	60 sec		1 G.P.M
12:00	65 ft	60 sec		1 G.P.M
12:15	65 ft	60 sec		1 G.P.M
12:30	65 ft	60 sec		1 G.P.M
12:45	65 ft	60 sec		1 G.P.M
1:00	65 ft	61 sec		1 G.P.M
1:15	65 ft	61 sec		1 G.P.M
1:30	65 ft	61 sec		1 G.P.M
1:45	65 ft	61 sec		1 G.P.M

1 1/2 hours

EMERGENCY/TEMP NO. IF ANY

B 1 6689 SEQUENCE NO. (OEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

12/21/83

STATE OF MARYLAND
PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER: HO-81-0358

fill in this form completely

Date Received 11/28/83 9:30 A.M.

OWNER INFORMATION

Formost Industries (Owner / First Name)

2365 Buchanan Trail (Street or RFD)

Greencastle PA 17225 (Town / State / Zip)

DRILLER INFORMATION

Ralph Mayne — 323 — Driller's Name / 77 License No. 80

Ralph Mayne (well Drilling) — Firm Name

9120 Brague Church Rd. Mt. Airy Md. — Address

Ralph Mayne 11/21/83 — Signature / Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN

(AIR-ROTary) — AIR-PERcussion — ROTARY (Hydraulic Rotary)

CABLE — REVerse-ROTary — DRive-POINT

other

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
- 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 DEEPENDED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE FS WRITE INITIALS IN BOX PERMIT No. HO-81-0358

SPECIAL CONDITIONS

LOCATION OF WELL

B 3

HOWARD COUNTY

PLAR SPRINGS

POPLAR SPRINGS 23 SUBDIVISION

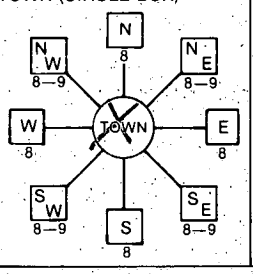
SECTION LOT 3

POPLAR SPRINGS 52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 0 MI

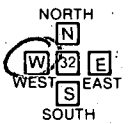
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



WATERSVILLE Rd. — NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 500

ENTER FT or MI FT

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD — COUNTY NAME

A29473 — COUNTY NO.

OEP SIGNATURE

STATE HEALTH INSERT S

DATE ISSUED 12/01/83 — Frank Skinner — CO SIGNATURE — 6/1/84 EXP. DATE

NORTH GRID 55100 EAST GRID 07720

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

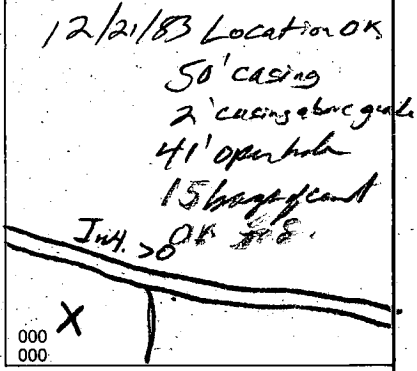
SOURCES OF DRILLING WATER

1. well
2.
3.

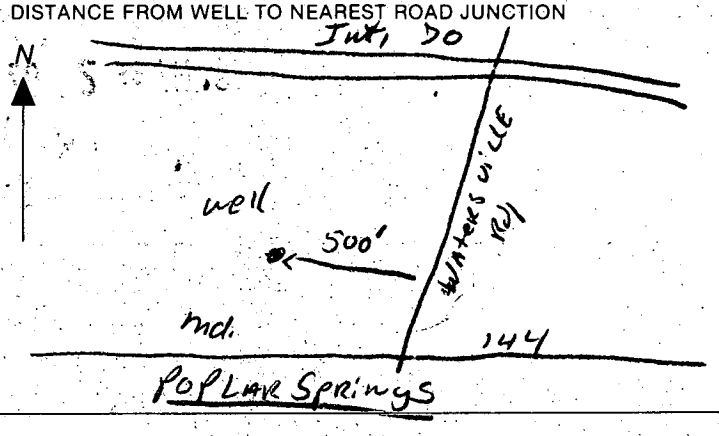
WRITE THE BOX NUMBER FROM THE MAP HERE

E 7702

N 5501



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



HEALTH

lot 3

Prel.

APPLICATION

A 29473

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th

DATE 2/1/79

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 ~~Georgia Conn property, c/o E. Brooke Lee~~ Foremost Ind. Inc.

ADDRESS 10000 Sweepstakes Road, Damascus, Md. 20750 PHONE Boender - 465-7777

PROPERTY LOCATION

SUBDIVISION _____ LOT NO. Now 3

ROAD AND DESCRIPTION 912 Watersville Road (old 5 old 6 old 4 Combined to make new 3)

SIZE OF LOT 3 acres m/l TYPE BLDG. 3 or 4 bedrooms

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

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT /s/ Jack Boender for E. Brooke Lee

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

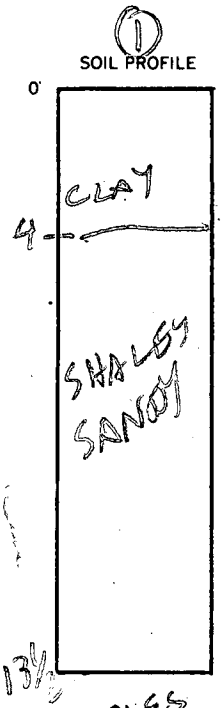
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING B.P.# 67678

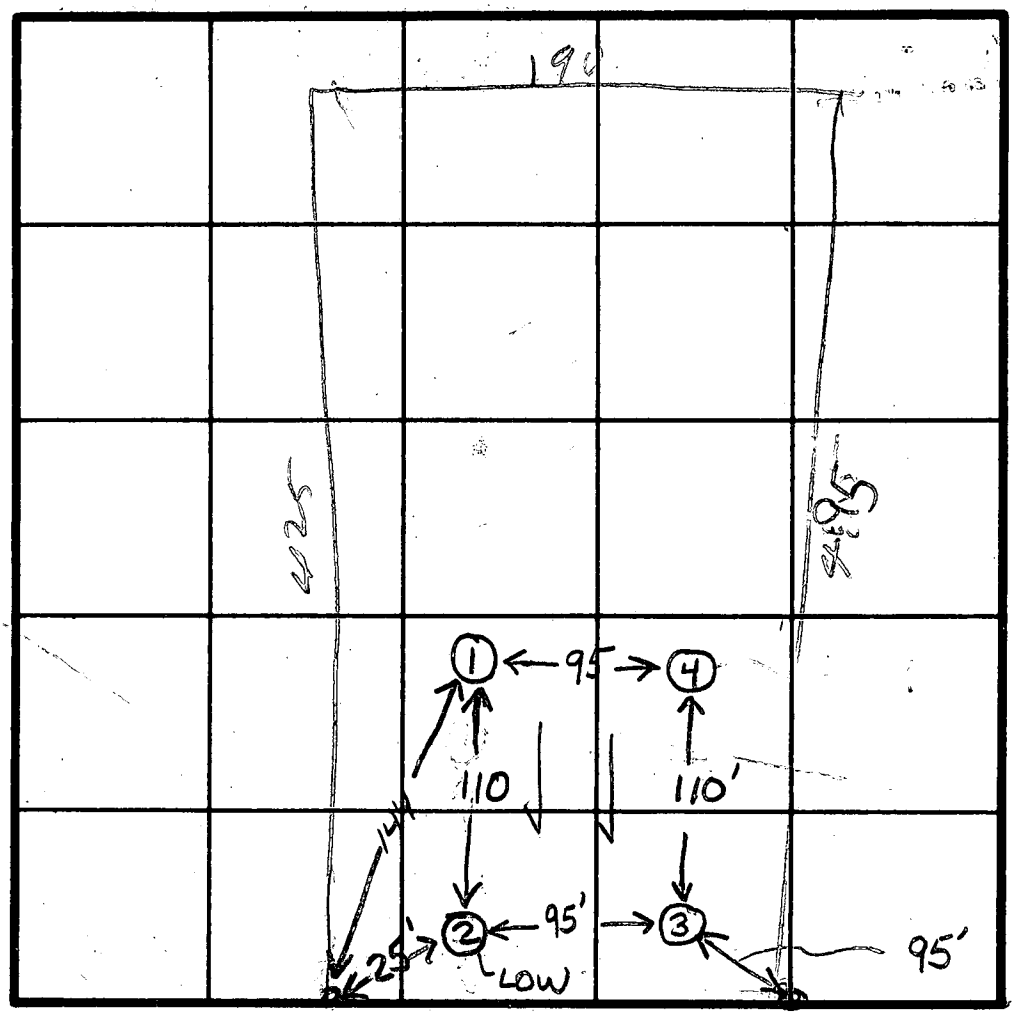
THIS IS NOT A PERMIT

LOT 3

Lot 3



ALL HOLES SMALL AMTS. WEATHERED SHALE



① ③ ④ EQUALLY HIGH

② ③ EQUALLY LOW

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

COUNTY A

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/20/79	1D	13½	207	227	227	253	26
3/28/79	1S	5½	207	215	215	227	8
3/30/79	2S	4	146	154	154	200	6
	2D	13	145	147	147	151	4
	3S B	5	155	158	158	208	10
	3D	14	155	202	202	213	11
	4S	5	215	216	216	220	4
	4D	12½	VISUAL - SIMILAR TO			③	

REMARKS open field

TYPE OF SOIL

TESTED BY B. H ALSO PRESENT DENNY TENURA

Prel

APPLICATION 6

A 29478

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th

DATE 2/1/79

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 Georgia Conn property, c/o E. Brooke Lee

ADDRESS 10000 Sweepstakes Road, Damascus, Md. 20750 PHONE Boender - 465-7777

PROPERTY LOCATION: Now 3

SUBDIVISION _____ LOT NO. 6

ROAD AND DESCRIPTION Watersville Road old 5, old 4, old 6 combined to make new 3

SIZE OF LOT 3 acres m/l TYPE BLDG. 3 or 4 bedrooms

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

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT /s/ Jack Boender for E. Brooke Lee

APPROVED BY _____ FOR _____ DATE _____

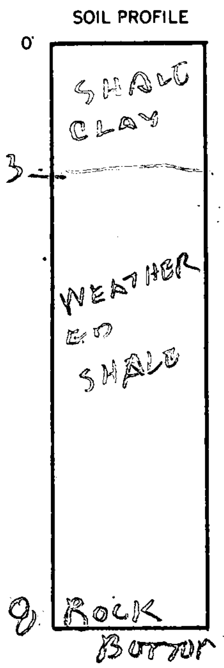
REJECTED BY _____ FOR _____ DATE _____

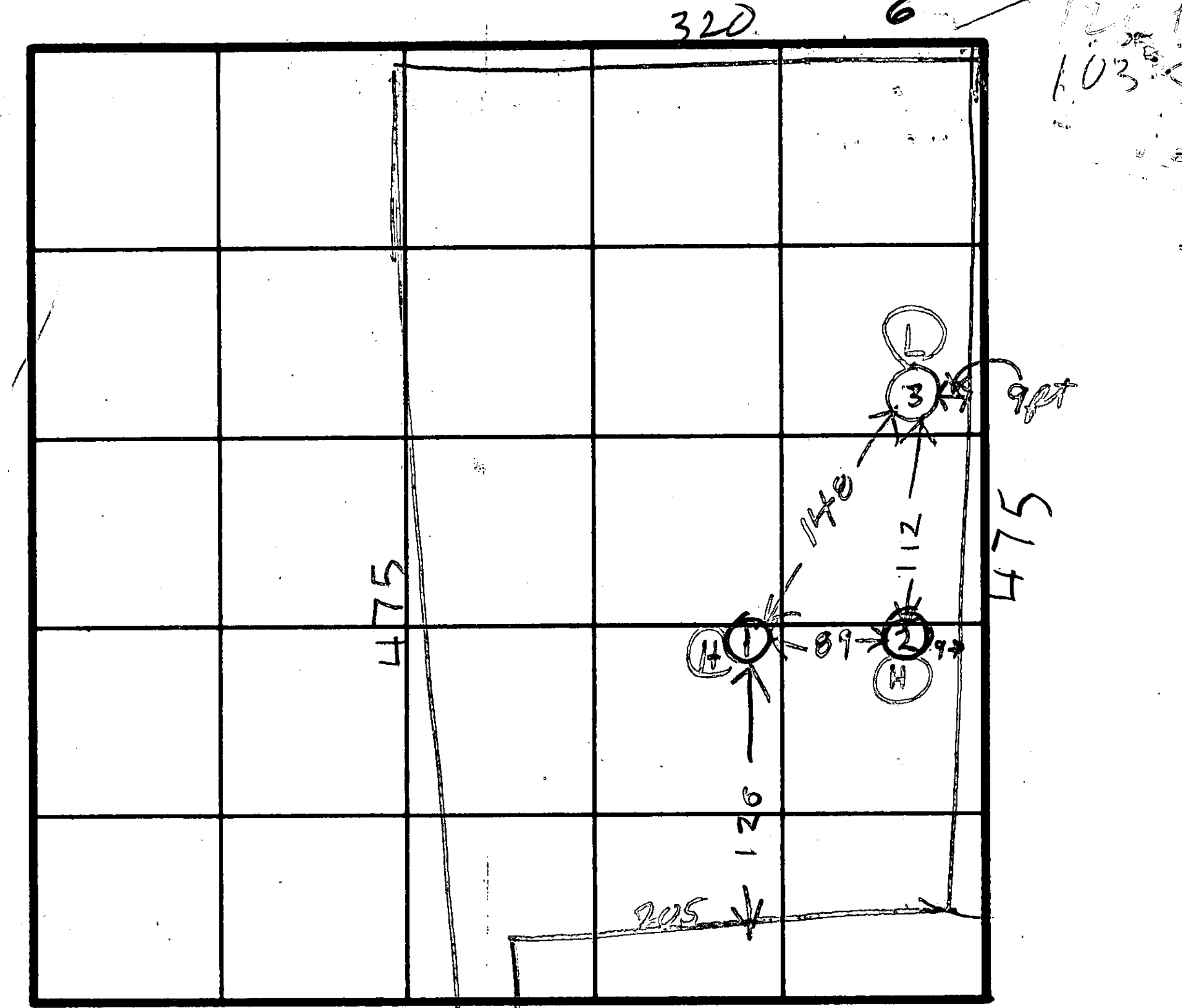
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

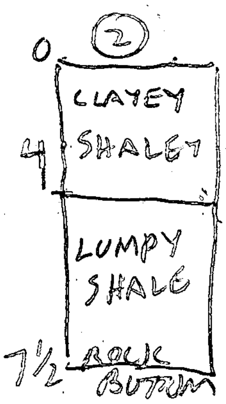
THIS IS NOT A PERMIT

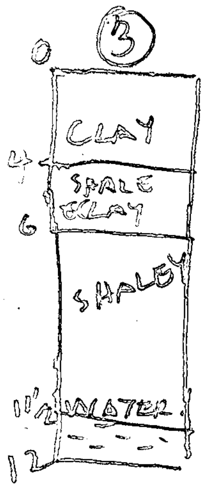
103 S





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	
5/2/79	1	8	SEE SOIL PROFILE ROCK BOTTOM					HIGH
5/2/79	2	7½	SEE SOIL PROFILE ROCK BOTTOM					HIGH
5/2/79	3	12	SEE SOIL PROFILE WATER 11½ FT.					LOW

REMARKS ______________________________

TYPE OF SOIL ______________________________

TESTED BY BH ______________________________ ALSO PRESENT DENNY & GARY

lot 5

APPLICATION

A 27893

P

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 4/18/78

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER GA-Conn. Inc. & Conn.-Aspen Inc.

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

Now 3

SUBDIVISION _____ LOT NO. 5

ROAD AND DESCRIPTION Watersville Rd. (old 4, old 5, old 6 combined to make new 3)

SIZE OF LOT ? TYPE BLDG. 3 or 4
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/ E. Brooke Lee

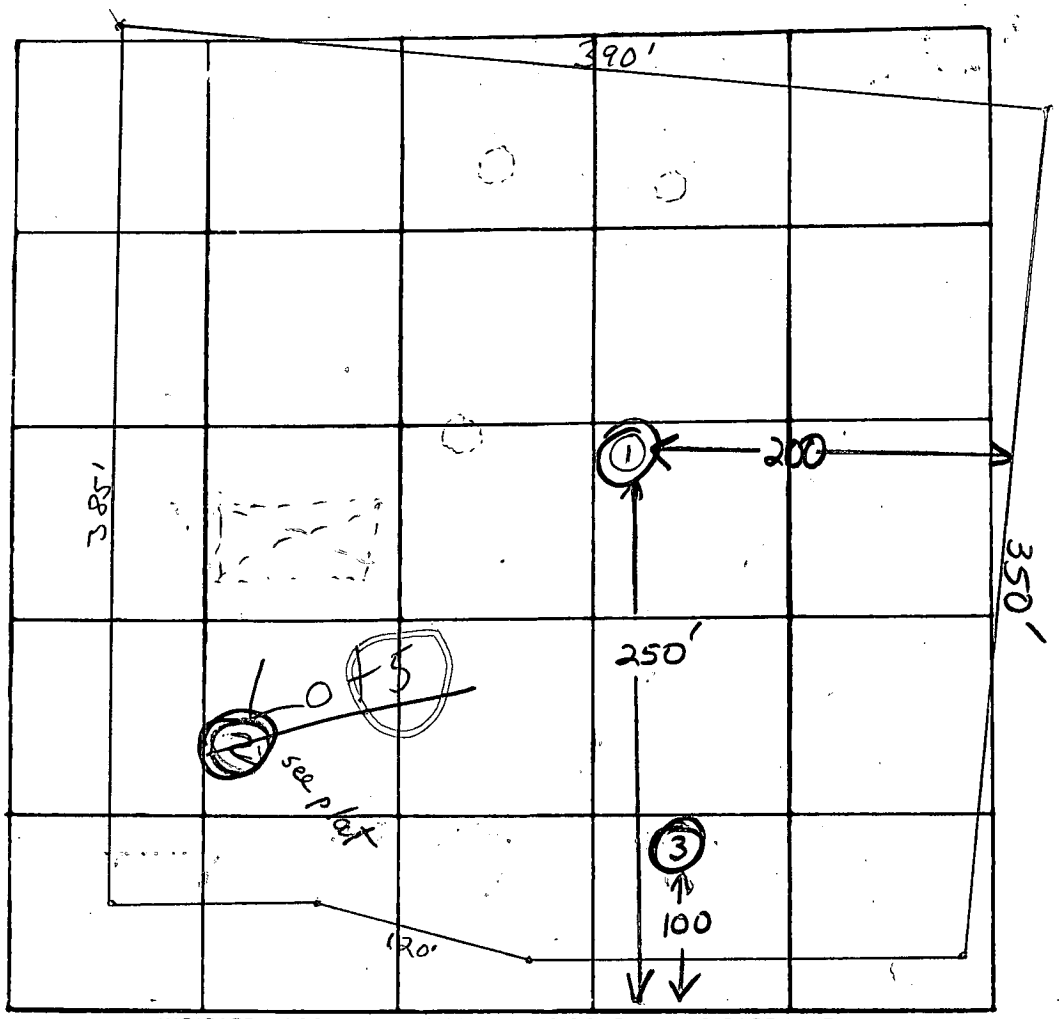
APPROVED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

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

HOLD PENDING FURTHER TESTS F. Skinner DATE 5/12/78

REASONS FOR REJECTION OR ~~HOLDING~~ 7/17/78 - Poor soil (clay, water, or Rock throughout lot) GLK

THIS IS NOT A PERMIT



INTER STATE 70

2= highest part of lot

INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE

Watersville Rd.

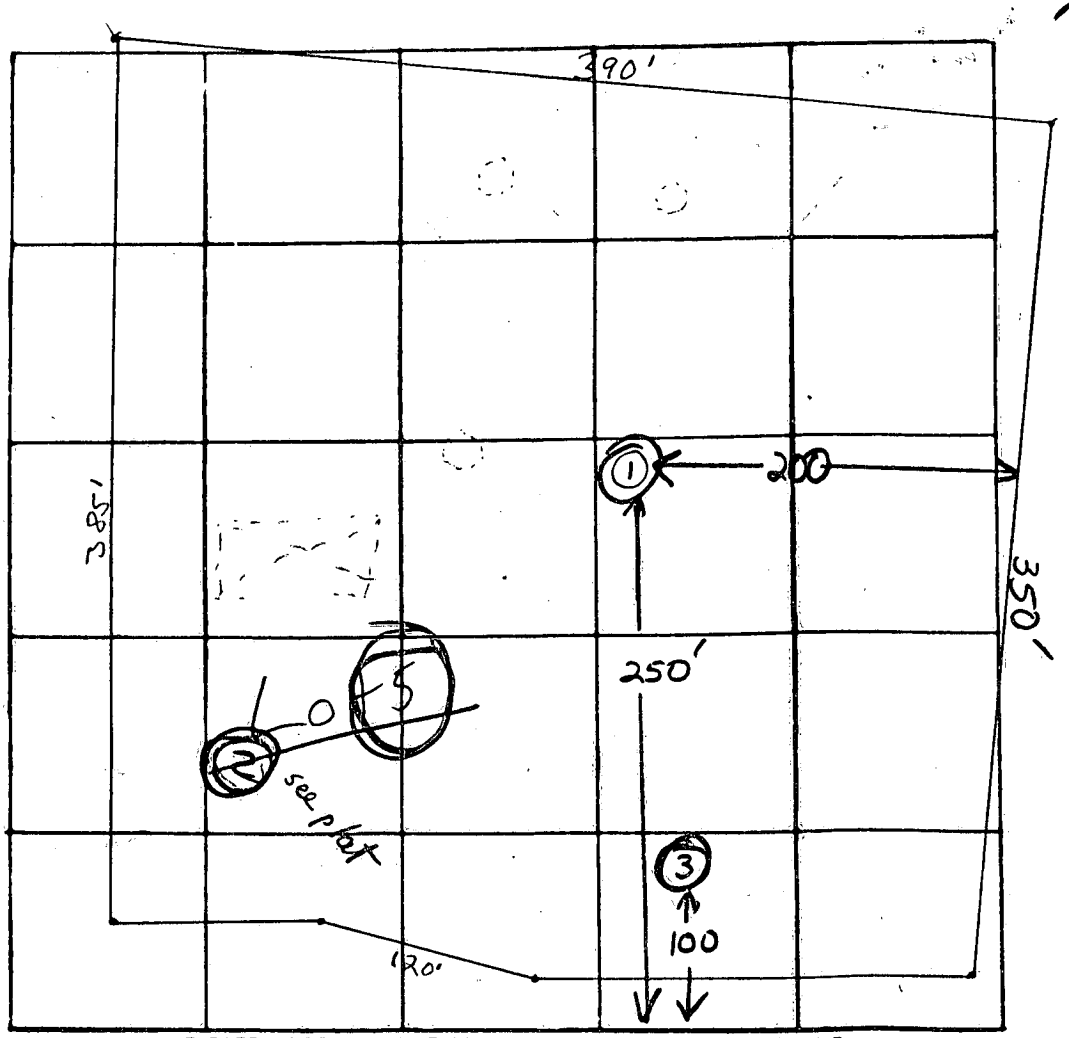
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/11/78	(1)	6'	1:41	pulled pcg 2:03 ≈ 1/4" drop			FAILS
	(1A)	13' Clayey throughout					
7/14/78	2	hard blue mica at 2'					
	(3)	water at 3'					

REMARKS

TYPE OF SOIL clayey

TESTED BY F.S. on 5/11/78 ALSO PRESENT: Rick of Fyncks crew

Lot 5



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE

Watersville Rd.

2= highest part of lot

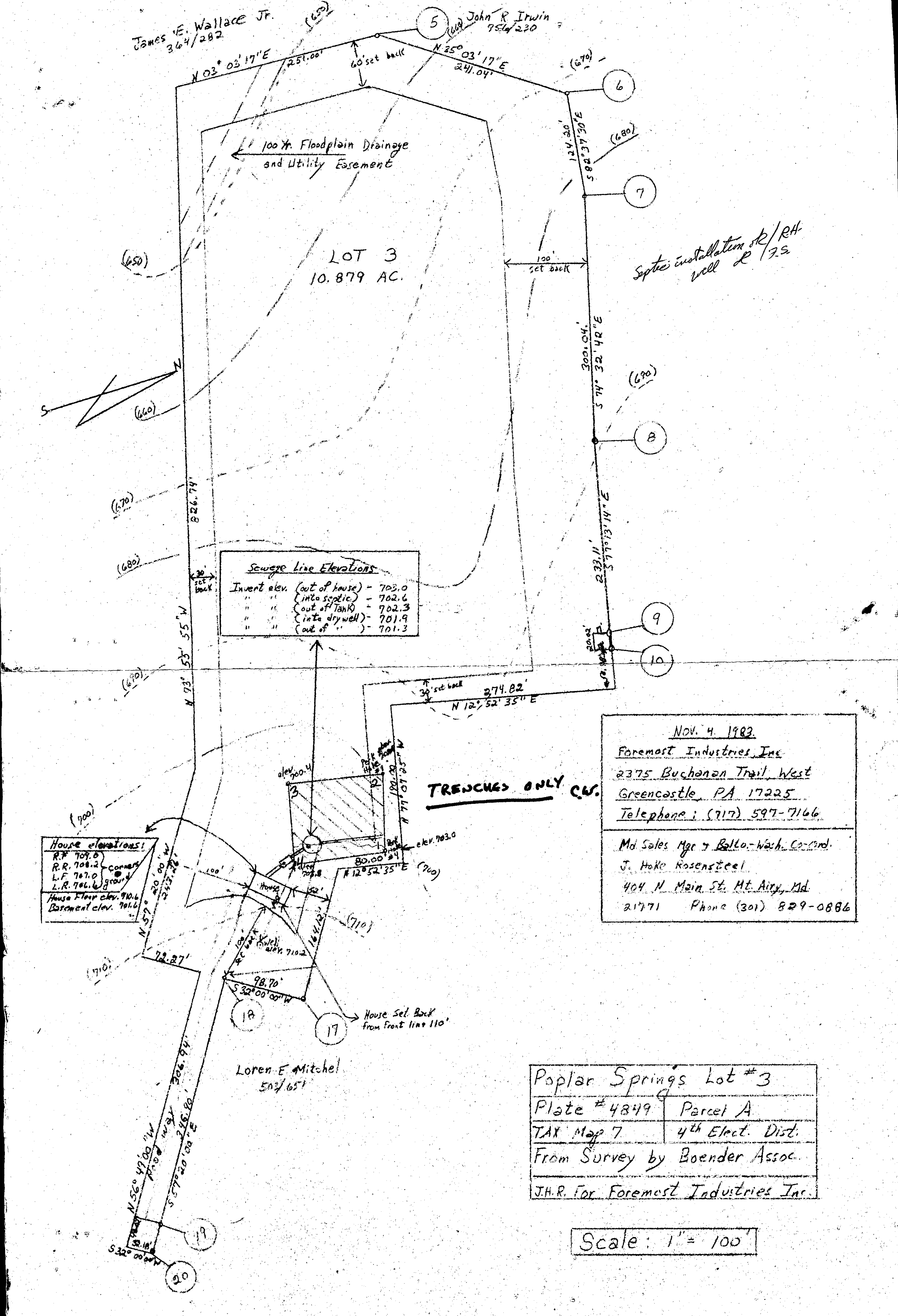
A29473

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/11/78	(1)	6'	1:41	pulled pg 2:03 = 1/4" drop			FAILS
	(1A) 13'	Clayey throughout					
7/14/78	2	hard blue mica at 2'					
	(3)	water at 3'					

REMARKS

TYPE OF SOIL clayey

TESTED BY F.S. on 5/11/78 ALSO PRESENT: Rick & Fyncks crew


James E. Wallace Jr.
364/282
John R Irwin
756/230
N 03° 03' 17" E
251.00'
60' set back
N 35° 03' 17" E
241.04'
124.20'
S 82° 37' 30" E
100 Yr. Floodplain Drainage and Utility Easement
LOT 3
10.879 AC.
100' set back
Septic installation ok/well ok RH 7.S.
300.04'
S 74° 32' 42" E
233.11'
S 77° 13' 14" E
20.02'
826.74'
N 73° 55' 55" W
30' set back
Sewage Line Elevations
Invert elev. (out of house) - 703.0
" " (into septic) - 702.6
" " (out of Tank) - 702.3
" " (into drywell) - 701.9
" " (out of ") - 701.3
30' set back
274.82'
N 12° 52' 35" E
180.00'
N 77° 07' 25" W
TRENCHES ONLY C.W.
elev. 700.4
elev. 703.0
80.00'
N 12° 52' 35" E
House elevations!
R.F. 709.0
R.R. 708.2
L.F. 707.0
L.R. 706.6
corners @ ground
House Floor elev. 710.6
Basement elev. 701.6
N 57° 20' 00" W
243.76'
100'
House
52'
164.12'
well elev. 710.2
72.27'
98.70'
S 32° 00' 00" W
House Set Back from front line 110'
Loren E. Mitchel
503/651
306.94'
N 56° 47' 00" W
Road way
246.80'
S 57° 20' 00" E
32.18'
S 32° 00' 00" W
NOV. 4. 1983.
Foremost Industries, Inc
2375 Buchanan Trail, West
Greencastle, PA 17225
Telephone: (717) 597-7166
Md Sales Mgr & Balto.-Wash. Co-Ord.
J. Hoke Rosensteel
404 N Main St. Mt. Airy, Md.
21771 Phone (301) 829-0886
Poplar Springs Lot #3
Plate #4849
Parcel A
TAX Map 7
4th Elect. Dist.
From Survey by Boender Assoc.
J.H.R. for Foremost Industries Inc.
Scale: 1" = 100'