

04-34449 6

11/18/85 House connection Req'd.

- approved -

11/18/86

stayed

P 33468

A 28861

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

INDEXED

876 2195

ELLICOTT CITY

DISTRICT 4th

DATE 6/19/85

Commerical - Larry Gibbs

~~Frederick Sanitation Service~~IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 2808 Liberty Road, Eldersburg, Md. 21784

PHONE 795-2947

SUBDIVISION Countryside ROAD 3543 Countryside Drive LOT 7

PROPERTY OWNER James & Sally Abiba

ADDRESS

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

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

BUILDING PERMIT SIGNED
AND RETURNED

4-15-03 800 141222-New Front Porch

TRENCHES to be 2 feet wide. Inlet to be 3½ feet below original grade and effective absorbant area from 3½ - 7½ feet only. Maximum depth of trenches to be 7½ feet below original grade. A minimum of 158 sq. ft. effective absorbant sidewall area per bedroom needed. Trenches can not exceed 100 feet in length. Distribution box to be used if more than 1 trench used. Two inspections of trenches required - before and after stone installed. If more than 1 trench used - need to have 15 feet distance between trenches, center to center. Run trenches on contour and/or on level ground as much as possible. LOCATION: Start trenches at a point 115 feet in from left property line, S31°54'14"W, and 175 feet from rear propertyline when facing lot from Countryside Drive as front of lot.

PLANS APPROVED BY B. Streaker/C. Williams

DATE 6/19/85

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.

BLDG. PERMIT SIGNED
AND RETURNED

Serial # 15469

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A28861

COUNTRYSIDE S/D

Lot Number

#7

F80-108

Septic tank

1 - 3 Bedrooms 1000 gallons

4 Bedrooms 1250 gallons

Trenches to be 2' wide. Inlet to be $3\frac{1}{2}'$ below original grade and effective absorbant area from $3\frac{1}{2}'$ - $7\frac{1}{2}'$ only. Maximum depth of trenches to be $7\frac{1}{2}'$ below original grade. A minimum of 158 sq.ft. effective absorbant sidewall area per bedroom needed. Trenches can not exceed 100' in length. Distribution box to be used if more than 1 trench used. Two inspections of trenches required - before and after stone installed. If more than 1 trench used - need to have 15 ft. distance between trenches, center to center. Run trenches on contour and/or on level ground as much as possible.

LOCATION: Start trenches at a point - 115' in from left property line, $S 31^{\circ} 54' 14" W$, and 175' from rear property line when facing lot from COUNTRYSIDE DRIVE as front of lot

4
No

158
4
63 250 FT

158
4
632
4
232

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

A 28861

P

DISTRICT 4th

DATE 9/15/78

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 Estate of Sylvan Manger

ADDRESS PHONE

PROPERTY LOCATION:

SUBDIVISION Countryside S/D

LOT NO. 7

ROAD AND DESCRIPTION Route 97

SIZE OF LOT 3 acres m/1

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/ Bernard Rome

APPROVED BY FOR DATE

REJECTED BY FOR DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

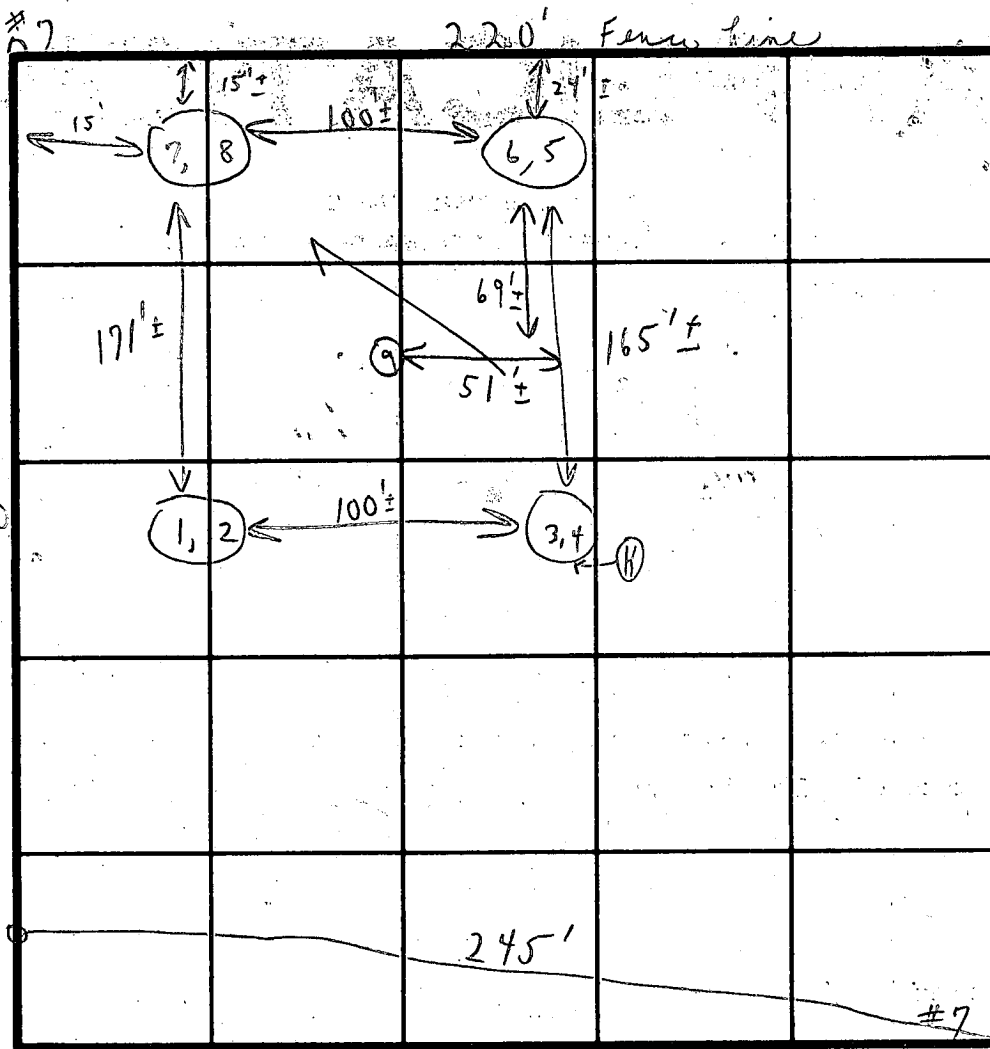
BLDG. PERMIT SIGNED

AND RETURNED

Serial # 65469

THIS IS NOT A PERMIT

Sandry.
Joan



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Unsub Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/20/78	1	3 1/2'	12:35	12:39	12:39	12:45	6 min
	2	8' ^{px}	12:35	12:39	12:39	12:44	5 min
	3	4'	12:37	12:43	12:43	12:54	11 min
	4	8'	12:37	12:39	12:39	12:41	2 min
	5 ^{px}	3 1/2'	12:58	1:05	^{act} 1:05	1:07	5 min
	6 ^{px}	8 1/2'	12:58	1:00	1:00	1:05	5 min
	7	4'	12:49	12:51	12:51	12:53	2 min
	8	8 1/2'	12:51	12:53	12:53	12:56	3 min
11/2/78	9	{ 11 1/2'	Visual		dry &	loose	}

REMARKS

TYPE OF SOIL

TESTED BY

Tests in open field Holes ready at times of tests

C. B. ✓

ALSO PRESENT

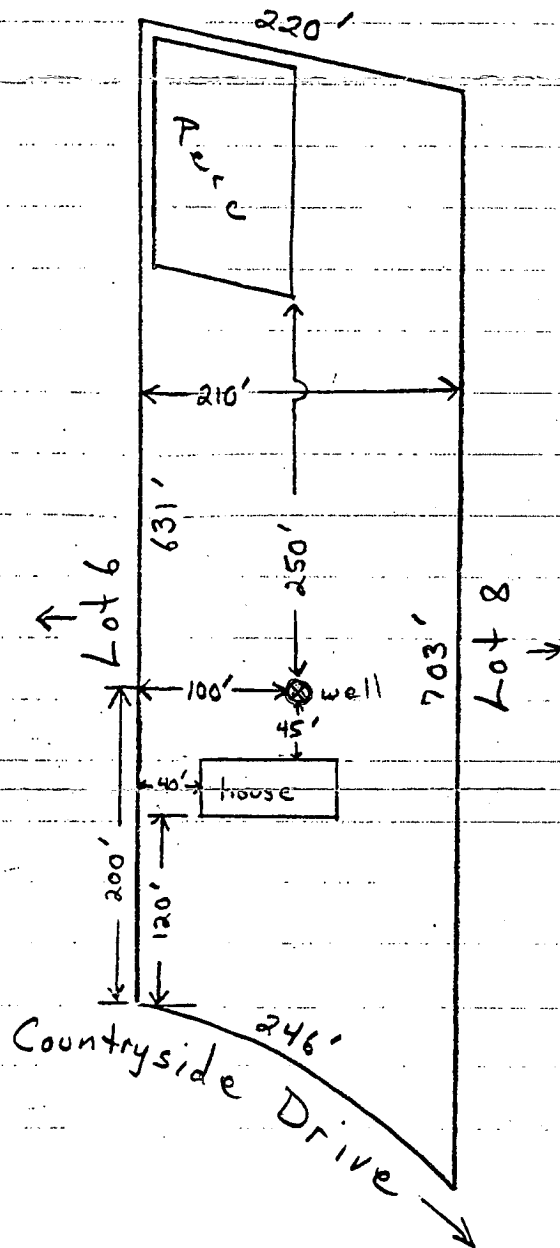
Mr. Rome
Mrs. Ballenger

HO-734174

Dear Mr. Skinner,

Below is the proposed site for our well.

5/12/82
Shelton
J.S.



Lot #7 Countryside
Glenwood, MD 21738
3.265 Acres

Earl & Peggy Whitney
3664 Waterwheel Square
Randallstown, MD 21133
Home-922-2059 / Work 594-2893

Well to be drilled by:

Franklin L. Easterday, Inc.
9265 Brown Church Road
Mount Airy, MD

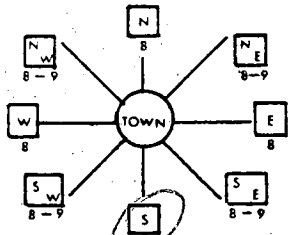
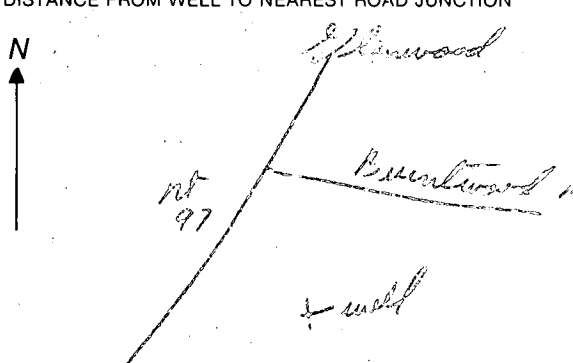
Thank you,

Earl L Whitney Jr.

Pump test to begin at 8:00 A.M.

EMERGENCY/TEMP. NO. IF ANY

B 1 7221		SEQUENCE NO. (OEP USE ONLY)		STATE OF MARYLAND PERMIT TO DRILL WELL please print or type		OEP PERMIT NUMBER HO-73-4174 fill in this form completely	
<small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small> Date Received 5/13/82 9:30 AM 0 5 0 7 8 2 <small>(OEP Use Only)</small>							
OWNER INFORMATION							
Last Name 15		Owner		34 Name			
3664		Waterwheel		Sgt.			
36		Street or RFD		55			
Maadad		11 Stowa		Md.			
Town 57		State		76 Zip			
B 1 Continued		DRILLER INFORMATION					
Driller's Name George F. Castorday		77 License No. 80 40					
Firm Name L.F. Castorday, Inc.							
Address 226 Brown Church Rd. Mt. Airy, Md.							
Signature George F. Castorday		Date 4/13/82					
B 2		WELL INFORMATION					
APPROX. PUMPING RATE (GAL. PER MIN.)		5					
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		500					
USE FOR WATER (CIRCLE APPROPRIATE BOX)							
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)							
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)							
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)							
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)							
<input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)							
APPROXIMATE DEPTH OF WELL		100		FEET			
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)							
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL							
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED							
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY							
<input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL							
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41							
<small>Not to be filled in by driller (OEP USE ONLY)</small>							
APPROX. PERMIT NUMBER		G A P					
FORCE FS		WRITE INITIALS IN BOX		PERMIT No. HO-73-4174			
64 68				70 71 72 73 74 75 76 77 78 79			
B 5		SPECIAL CONDITIONS 8-63					
1 2 3		6					

B 3		LOCATION OF WELL							
COUNTY		Howard							
SUBDIVISION		County Side							
SECTION		23		LOT		7			
NEAREST TOWN		Glenwood							
MILES FROM TOWN (enter 0 if in town)		1							
B 4		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		NEAR WHAT ROAD		30			
				ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)		WEST		EAST	
						34		DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)	
								37	
								38 39	
		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		Location OK					
		SOURCES OF DRILLING WATER		2 1/2" casing					
		1. 1 1/2" annular		18' open					
		2. 5" base cement		7" full cement					
		3. WRITE THE BOX NUMBER FROM THE MAP HERE		JS 5/13/82					
				000 CW					
		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION							
B 4		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL							
		COUNTY NAME		HOWARD					
		COUNTY NO.		A25561					
		OEP SIGNATURE		STATE HEALTH CIRCLE BOX					
		DATE ISSUED		05/10/82					
		CO SIGNATURE		Frank S. ...					
		NORTH GRID		524		EAST GRID		0792	
				50				55	
								57	
								63	
								EXPIRES 11/10/92	

[illegible]

Lot 7 parcel 63

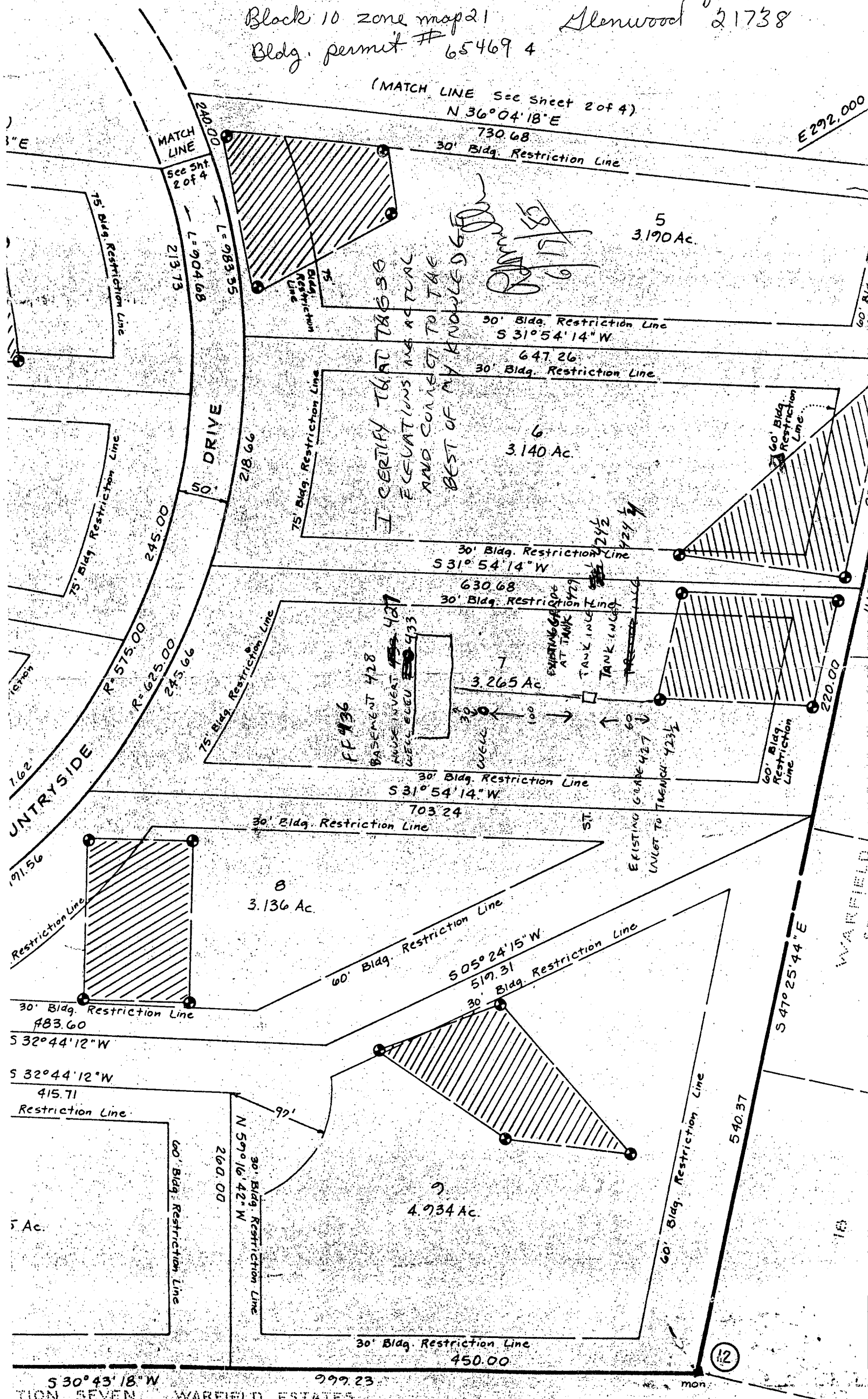
Block 10 zone map 21

Bldg. permit # 65469 4

James + Sally Abiba

3543 Countryside Dr.

Glenwood 21738



BUILDING OFFICIAL HOWARD COUNTY
BUILDING PERMIT

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS LICENSES & PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3543 Country Side Dr.
Glenwood, Md 21738

RESIDENTIAL

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
7	63			10		
SUB DIVISION			ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
			R	21	4	6040

OWNER'S NAME AND ADDRESS

James S. , Sally D. Abiba
2377 Crampton South
Laurel, Md 20707

PHONE NO.

490-0484

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

Pace construction Co., Inc.

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS

Pace Construction Co., Inc.

PHONE NO.

828-1218

EXISTING USE

PROPOSED USE

SFD

01/A1

EST. CONSTRUCTION COST

\$130,000

LICENSE NUMBER

PERMIT FEE
\$351.00

W/S CODE

7

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE -75'min

SIDE YARD 30'min

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE n/a

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK 60'min

CONDITIONS (IF ANY) (CORNER LOT ONLY)

SDP #

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69
Revised

Signature

[Signature]

(Name of applicant)

Date

6/14/85

Approved

COMPLETION DATE

SERIAL NUMBER

65469

DATE ISSUED

6/28/85

USE & OCCUPANCY DATE

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

DESCRIPTION OF WORK AUTHORIZED

SDP #

X 1 1/2 story, fullb smt, 10 rooms, 2 FB,
1 HB, 2 FP, garage (4 BR)

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
1	100'	32'	10'
2	28'4"	20'6"	8'
B	52'	32'	10'
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	2535	25350	asp gable
ROOMS			
BATHS	550	4400	
FIREPLACES	1278	12780	42,530

FOOTINGS

20" x 10"

FOUNDATION

12"CMU

S. WALLS

wd fr w/

sid

UTILITIES

WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
X	X		X	HP	

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

/s/ Ronald L. Miller

cont.

SIGNATURE

6/14/85

TITLE

DATE

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	6/21/85	D.L.Calloway
SHA	6/20/85	Stephen Jones
SEDIMENT/GRADING		
BUILDING OFFICIAL	6/26/85	G.E.Martin
WATER & SEWER	no public	cw & S required
HEALTH DEPT.	6/21/85	Frank Skinner
FIRE PROTECTION		
STORM WATER MGM.	6/17/85	Carl Lacy

M.R.Gemmill/dl

6/28/85

APPROVED

OK

DATE

White - Building Official
Green - Planning & Zoning

Gold - S.H.A.

Address 3543 Country Side Dr. Glenwood, Md 21738

21073

ATTENTION: The permit, when issued, is valid for period not to exceed one year.

C1 3164	SEQUENCE NO. (OEP 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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER A 28861	

Date Received (OEP use only)	DATE WELL COMPLETED 5/13/72	Depth of Well 140 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" AC-13-0177
---------------------------------	--------------------------------	---	---

OWNER last name Whitney first name Carl	STREET OR RFD Countryside Drive	TOWN Glenwood
SUBDIVISION Countryside	SECTION	LOT 7

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
Top soil	0 3	
Shaley	3 15	
SANDSTONE	15 45	✓
MICA	45 60	
SANDSTONE	60 65	
MICA	65 70	
SANDSTONE	70 76	✓
MICA	76 140	

WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT <input checked="" type="checkbox"/> CM BENTONITE CLAY <input checked="" type="checkbox"/> BC	
NO. OF BAGS 5	NO. OF BOUNDS 500
GALLONS OF WATER 25	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 18 ft.	(enter 0 if from surface)

Casing types insert appropriate code below		Casing RECORD	
<input checked="" type="checkbox"/> ST STEEL	<input checked="" type="checkbox"/> CO CONCRETE	<input checked="" type="checkbox"/> PL PLASTIC	<input checked="" type="checkbox"/> OT OTHER
MAIN CASING TYPE	Nominal diameter top(main)casing (nearest inch)	Total depth of main casing (nearest foot)	
57	6	21	

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

screen type or openhole	SCREEN RECORD		
insert appropriate code below	<input checked="" type="checkbox"/> ST STEEL	<input checked="" type="checkbox"/> BR BRASS	<input checked="" type="checkbox"/> HO OPEN HOLE
	<input checked="" type="checkbox"/> PL PLASTIC	<input checked="" type="checkbox"/> OT OTHER	

C 2 (Seq. no.)	
DEPTH (nearest ft.)	140
EACH SCREEN	
1 170	140
2	
3	

CIRCLE APPROPRIATE BOX	
<input checked="" type="checkbox"/> A	A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
<input checked="" type="checkbox"/> E	ELECTRIC LOG OBTAINED
<input checked="" type="checkbox"/> 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. 40	DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)	

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

GRAVEL PACK	
IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX	<input checked="" type="checkbox"/> F

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T (E.R.O.S.)	W Q
70 <input type="checkbox"/>	74 75 76
TELESCOPE CASING	LOG INDICATOR

C 3 (Seq. no.)		
PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	10	
METHOD USED TO MEASURE PUMPING RATE	Bucket	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	30	
WHEN PUMPING	55	
TYPE OF PUMP USED (for test)		
<input checked="" type="checkbox"/> A air	<input checked="" type="checkbox"/> P piston	<input checked="" type="checkbox"/> T turbine
<input checked="" type="checkbox"/> C centrifugal	<input checked="" type="checkbox"/> R rotary	<input checked="" type="checkbox"/> O other (describe below)
<input checked="" type="checkbox"/> J jet	<input checked="" type="checkbox"/> S submersible	

PUMP INSTALLED		YES NO
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)		<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE		
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))		
CAPACITY: GALLONS PER MINUTE (to nearest gallon)		
PUMP HORSE POWER		
PUMP COLUMN LENGTH (nearest ft.)		
CASING HEIGHT (circle appropriate box and enter casing height)		
<input checked="" type="checkbox"/> above	LAND SURFACE	
<input checked="" type="checkbox"/> 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)	
well 60' to Road 325'	

Review 8/5/82 W. S.

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 73-4174
Location of property (road) Countryside Dr
Subdivision Countryside Lot 7 Block Plat Sec.
Well Driller Owner Carl Whitney

Depth of well 140 406 P.M. 8 AM.
Distance of measuring point (M.P.) above ground 2
Static water level (S.W.L.) below M.P. 30'

I. High rate pumping -- reservoir drawdown

Time pump started 7:45 Pumping rate 10 A.P.M
Total time 45 min to reach pumping water level 55 ft. below M.P.

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

[illegible]

SHEET 3 OF 4

Date: 1-4-80

3.190 Ac.

(F)

GAID NORTH

