05-407168

PERMIT SEWAGE DISPOSAL SYSTE

MARYLAND STATE DEPARTMENT OF HEALTH

5th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH 461-9933

INDEXED

DATE SYSTEM APPROVED

	Dwayne Thompson	B. W.T.	IS PERMITTED TO IN	STALL X ALTER
ADDRESS		0.0	PHONE	ALIER
SUBDIVISION $\underline{\mathrm{Tw}}$	elve Hills	ROAD 13014	Twelve Trees Ct.	LOT13
PROPERTY OWNE	ER	David & Aly	sia Carney	
ADDRESS				
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MARKAT X RX R XX X X X X X X X X X X X X X X	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	PAPERIX NEW TRANSPART	ey,
	KNXXXXeeXXXXXXXXXXXXXXXX	7 7 7 y 1	/	
SEPTIC TANK CAP	PACITY 1250 GALLON	S NUMBER OF BEDROO	oms <u>4</u>	
LOCATION -	original grade. Bo Effective area beging below distribution Place the distribution and 160 ft. from Twelve Trees C 454.00 ft. long. No trench to exceed and cap to grade or	ns at 4 feet below pipe. ion box 100 ft. from the left side of t. Run the trenched 100 feet length.	original grade. om the back line we the lot as seen as toward the back Provide 6" - 8" d	which is 454.00 ft. when facing the lot to line which is
LANS APPROVED BY		Raymond Hodges	cm	DATE03/14/90
NEITHER THE HOWAR NOTE: CLEANOUT RE NOTE: ALL PARTS OF NOTE: IF DEEP TREN NOTE: NO DRY WELL	TIL INSPECTED AND APPROVED TO COUNTY COUNCIL NOR THE HEALTH EQUIRED EVERY 70 FEET OF SEWER LII SEPTIC SYSTEMS (I.E., TANK, DISTRIBUT ICHIES) ARE USED CALL FOR INSPECTIC SHALL EXCEED 15 FOOT IN DIAMETER IN HOUSE TO SEPTIC TANK MUST BE CA	NE AND/OR AT 90° SWEEPS IN LINES ION BOX TRENCHES) TO BE 100 FEET ON BEFORE AND AFTER PLACING GRI INO ABSORPTION TRENCH TO EXCE	FROM HOUSE TO DRAIN FIELDS FROM WELL, (UNLESS OTHERWISE EVEL IN TRENCHIES BUILDING	SPECIFICALLY ALTHODIZED
ERMIT VOID AFTER T			*	· · ·
ACCEPTED. IF	THE THE PARTY OF T	3 FEET. MANHOLE TO GRADE REQU	RED	OR TERRA COTTA OR PVC OR ABS

INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

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	SEPTIC TANK, LEVEL	500		CLEANOUTS	INLINE	-OR ST	T. OF
		A 10 0 0	6016				· · · · · · · · · · · · · · · · · · ·
	DISTRIBUTION BOX. LEVEL	UK - BA		IN			
	the year of	DEPTH 8/7	7-	2			12
	DRAIN FIELD/TILE FIELD.	DEPTH	F7.5 TRENCH WI	OTH F	T. INLET DEPTH	+ <u>979 (9, 5</u> гт.	ena a su espera esperador e e e e
	EFFECTIVE COAVEL BEST	4 3	3	- O	4 85 86	•	
. •	EFFECTIVE GRAVEL DEFT		FT T	STAL LENGTH	1	FT 2/2	The second of th
	NUMBE	R OF TRENCHES _	<i>5</i> 0	NE SIDEWALL/BOTT	IOM AREA 33/6	55957 SO F	្រុក ខេត្តស្នាក់ទាំង១៩៩៩៩ ₹
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	ABSORE	ENT AREA	so.	FT.			
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HOWARD COUNTY HEALTH DEPARTMENT Bureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement		Receipt # 46.75
Name of Installer I.M. Barnon	APPly + Hig.	Telephone 46/6599
License Number 7248 Certified Well Pump Installer	Well Driller	Registered Plumber
		the state of the s
Name of Property Owner August Subdivision Twelve Hells Site Address 13014 Twelve To	Lot # 13	Well Tag # 100 - 88 - 1010
Pump 1. Type	Motor 1. Horsepower	Pitless Adapter 1. Make
a. Deep well jetb. Shallow well jet	2. RPM 3. Voltage	2. Model # 3. Depth
c. Submersible	a. 110 b. 220	
3. Model #GPM 5. Pump exceeds well capacity	-Ves No	
 If Yes, is low pressure cuto What methods are used to provibrations? Torque arresto 	ff switch installed? tect the pump and el	ectrical wiring from
Tank 1. Capacity 17901.	Piping 1. Type Byblue	Well data 1. Depth ft.
2. Pressure relief valve?	2. Size /// 3. NSF and/or BOCA	2. Yield GPM
	Code approved \angle 4. Depth of supply	levelft.
	line <u> 60'</u>	be disinfected by installer? <u>10</u>
I understand that it is my repertment when the installation is null and void).		
All information given above is	true to the best of	my knowledge.
1910KWEU	re of Applicant: MA	14/91
Note: A sticker indicating app on the well casing at the time		installation will be placed

SUBDIVISION: TWELVE HILLS

SECTUTIVE TREES CT

DRY WELL OR DRY WELL AND TRENCH

"

	sq. ft./bedroom
Septic Tank	Minimum Total square Feet
3 bedroom 1000 gallon	
4 bedroom 1250 gallon	
5 bedroom 1500 gallon	
Inlat	
Inlet feet below original grade.	
Bottom maximum depth feet below o	
Effective area begins at feet bel	ow original grade.
NOTE: If trench is used to make up absorbe ground and leave a 5 foot earth buffer No trench is to exceed 100 feet in 1 as dry well, with feet of	between dry well and trench. ength. Trench inlet to be same
TRENC	
	2/0 sq. ft./bedroom
Trench to be wide.	
Inlet feet below original grade.	
Bottom maximum depth 8 feet below o	riginal grade.
Effective area begins at feet bel	·
feet of stone below distribution	pipe.
NOTE: (1) No trench to exceed 100 feet in (2) If more than one trench used, a	
(3) Trenches to be installed on lev	el ground.
(4) Call for inspection of trench b(5) Provide 6"-8" diameter cleanout	efore gravel is installed. and cap to grade or above on septic
tank and drywell.	
(6) If a Garbage disposal is used, and increase absorbant sidewall	increase septic tank capacity by 50% area by 22%.
LOCATION: 3/14/90 - PLACE THE	DISTRIBUTION BOX 110F7
FROM THE BACK LINE W	· · · · · ·
AND 160 FT FROM THE	LEFT SIDE OFTHE
LOT AS SEEN WHEN FACING	STHE LOT FROM TWELVE
TREES COURT. BUNTHETA	· · · · · · · · · · · · · · · · · · ·
BACK LOT LINE WHICH IS 9	
ATA LE PARE AN MARCHINES A	D. T. Will B. V. S. C.

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT.

BUREAU OF ENVIRONMENTAL HEALTH P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 461-9933 THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM PROSPECTIVE BUYER PROPERTY LOCATION: Twelve Hills 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 PERCITEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT REJECTED BY

THIS IS NOT A PERMIT

BUDG. PERMIT SIG

WB W/ 13 CHAY INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE PIN SON TEST - 1" DROP TEST NO. DEPTH DATE 510P START 250 TIME STOP 300 8.5 10 ħ 2/18/27 ON HAVE 28/14 244 249 4.5 25 20 35 256 257 255 256 12/8 (3) 306 3 302 305 362 OK 3 D 45 337 308 315 315 22 40 BROWN SAND 12/2 4) Cha7 REMARKS DAVE TESTED B. R. HODGES POP KENGENN



APPLICATION

● PERCOLATION TESTING

A 39436

HOWARD COUN	TY HEALTH DEPARTMENT		DU	STRICT	5t.h
	VIRONMENTAL HEALTH	i Gul		51111C1	
TELEPHONE: 461	ICOTT CITY, MARYLAND 21043 9933	OLEUR RE-TEST &K 6/5/87 C.C		DATE	6/05/87
		R6-1051			
		6/5/87 00	V.		
TO: THE COUNTY HEA			$\chi^{-k'}$		
ELLICOTT CITY. M	ARYLAND				
I HEREBY APPLY	FOR THE NECESSARY TEST IN ORD	ER TO CONSTRUCT (OR RECONSTI	RUCT) A SEWAGE DISPOSAL SYSTE	М.	
PROPERTY OWNER	Altogether Limit	ed Partnership			
PROPERTY OWNER		National Pike - Su	iite 210		
ADDRESS	Ellicott City, M	aryland 21043	PHONE		
				. :	
PROSPECTIVE BUYER	Dak Carney				
			201		
ADDRESS			PHONE	· · · · · · · ·	b
PROPERTY LOCATION:					
	, 11 .		1-2		
SUBDIVISION	ALT OGETHER		LOT NO. 12	 	
	*	Charach Basel			
ROAD AND DESCRIPTION	Linaen	Church Road	,		
	•	•			
TAX MAP	PARCEL #				
ι,					
SIZE OF LOT					amily Dwelling NELLING OR COMMERCIAL)
THE SYSTEM INSTALL	LED UNDER THIS APPLICATION	IS ACCEPTABLE ONLY UNTIL I	PUBLIC FACILITIES BECOME A	VAILABLE. I I	FULLY UNDERSTAND THE
FEE CONNECTED WIT	TH THE FILING OF THIS PERC T	EST APPLICATION IS NON-REF	UNDABLE UNDER ANY CIRCUM	ASTANCES. I	ALSO AGREE TO COMPLY
		Ola	L. Ville	1 11	·
WITH ALL M.O.S.H.A.	REQUIREMENTS IN TESTING	THIS LOT.	(SIGNATURE OF APPL	JCANT)	·
					•
APPROVED BY		FOR		DATE	· · · · · · · · · · · · · · · · · · ·
	,*		•		
REJECTED BY		FOR		DATE	
HOLD PENDING FURTHER	R TESTS			DATE	
		w love li			
REASONS FOR REJECTIO	in or holding 7-17-87			STREA	m, will
	PRIMIT 20 mi	LEMENT ON PARE	1. S. A60		
			35		* ::
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THIS IS NOT A PERMIT

SOIL PROFILE

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	Service Control	132	5 Tick		
					\$ 6,50 L
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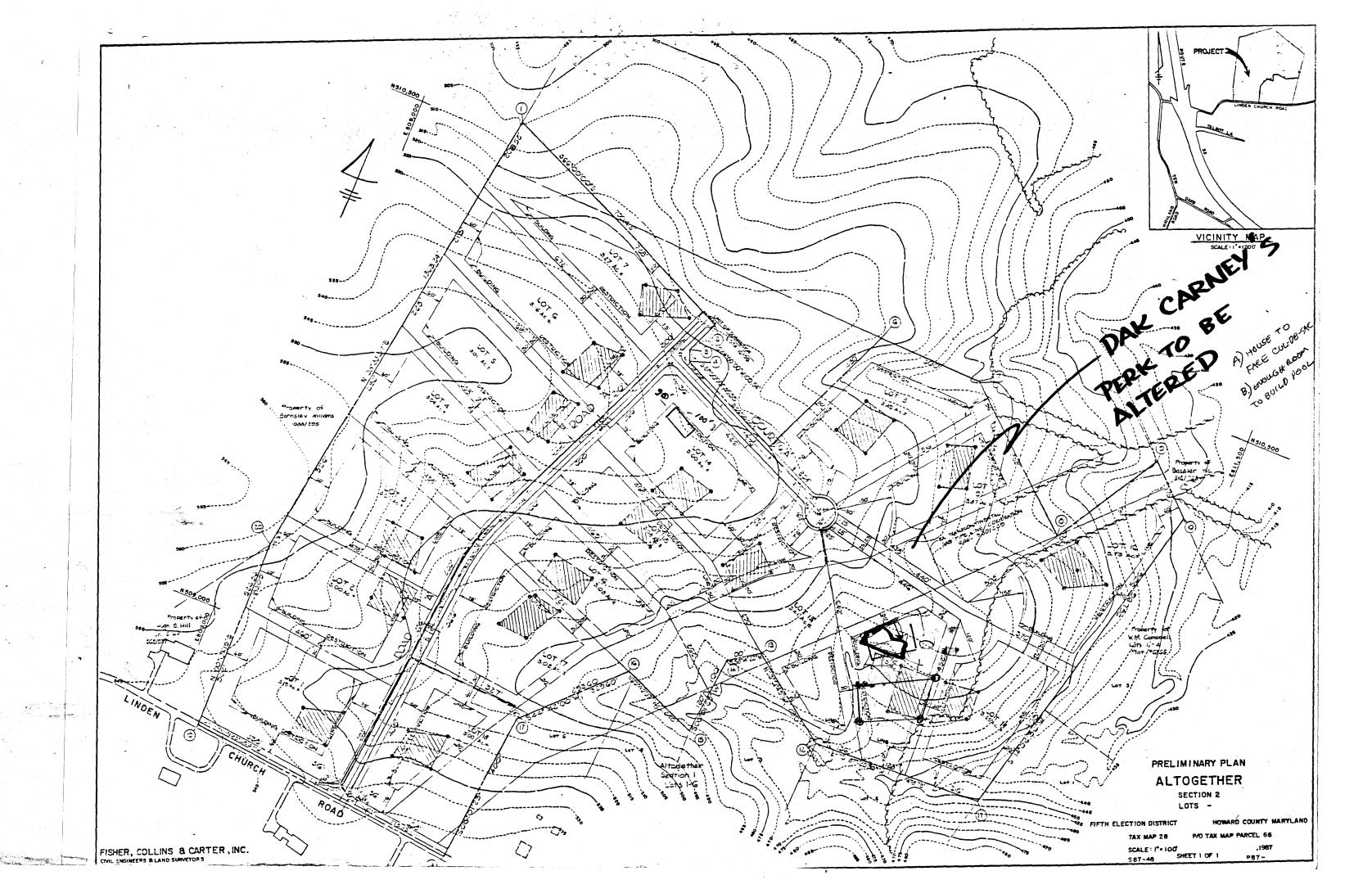
INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

TEST - 1" DROP

DATE TEST NO. DEPTH START STOP START STOP TIME

TYPE OF SOIL	. 				
TESTED BY _	*	* * * * * * * * * * * * * * * * * * * *		ALSO PRESENT	

FH-12-1079



HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H. COUNTY HEALTH OFFICER



Bureau of Environmental Health 3525 Ellicott Mills Drive Ellicott City, Maryland 21043

Director - 461-9956 Water & Sewerage, Permits - 461-9933 Community Environmental Health - 461-9944 Technical Services - 461-9955

July 27, 1987

Mr. Dak Carney 10848 Faulkner Ridge Circle Columbia, Maryland 21044

RE: Altogether - Lot 2 State

Dear Mr. Carney:

Percolation testing performed on the above referenced property on July 17, 1987 revealed unsatisfactory site conditions. The presence of a stream within 140 feet of the previous test holes and multiple swails did not permit further testing.

I understand that you intented to move the percolation field down hill to improve your house site. At this time, the best I can offer you would be a change in the location of the perc field by 20 feet down hill.

I hope this will be sufficient for you to relocate the house site. If you should have any further questions, please feel free to contact me at 461-9933.

Very truly yours,

Sid Abel, Sanitarian

I abel

Water and Sewerage Program

SA:JR

283 ñ 8 9 88 وأونا Prepares L=25.80 1.8654 MATOR CONSTRuction AND Development Lit. R.G. NEGETT 577 Elliatt By, Md. 2104 5770 STATE OF THE STATE NS30) 637-5230 3000 S 8 OF LENGTH TO BE Tacres Determined Ar S かい 1 Septic Ü がった 35 MM 4000 A SCALE 0 K 1 500004 15 901= 49315 YNN) ExISTING GRADE AT HOUSE 483 Elevation Out 1 483.5" TREMENT **^**n OF House BASEMENT Elevation 4845 EDTOY TO TWE 481.0' Oct of TAME 480.0 to Trease 477 25 THE WIND THE COOPS , 62°59'. 100 45V

C 1 1 25 SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2.3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER 138572
ST/CO USE ONL DATE WELL COMPLETE 8 13 15 26	Depth of Well 22 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL-WELL"
OWNERTHE	first name	
STREET OR RFD last name 70.1/1/12		Chanse wille LOT 13
SUBDIVISION	GROUTING RECORD	C 3
Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH;	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL	. 1 2 PUMPING TEST.
THICKNESS AND IF WATER BEARING	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
DESCRIPTION (Use FEET Check from diffusional sheets if needed) FROM TO bearing	NO. OF BAGS NO. OF POUNDS 45 46	PUMPING RATE (gal. per min. 11 15
Tursont 6 2-	GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE LE LA
2	from 1 ft. to 4 ft. 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	WATER LEVEL (distance from land surface) BEFORE PUMPING
5hn/e 2 35 5	casing CASING RECORD types insert ST CO	WHEN PUMPING
m, Ka 35 60	appropriate STEEL CONCRETE COMPLETE OF CONCRETE OF CON	TYPE OF PUMP USED (for test). A air P piston T turbine
SandHerre 60 65 -	PLASTIC OTHER MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary O other (describe
Mika 15 90	TYPE (nearest inch) (nearest foot)	27 below) S submersible
	E OTHER CASING (if used) C diameter depth (feet)	A CONTRACTOR OF THE PROPERTY O
Jand Mine	H inch from to	PUMP INSTALLED
Sind Howe 90 75 4	C S	DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES OF NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED
	or open hole ST BR HO appropriate STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
	code below PLASTIC OTHER	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
	C 2	PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH
	DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height)
	C 78' 9 11' 15 17 21	LAND SURFACE (nearest
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED	C 23 24 26 30 32 36 E 30 20 44 47 47	LOCATION OF WELL ON LOT
WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED	N 38 39 41 45 47 51 SLOT SIZE 1 2 3	A SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P WELL CONVERTED TO PRODUCTION	DIAMETER (NEAREST	N. LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
THEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"	56 60 from to	A CONTRACTOR OF THE PROPERTY O
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.	GRAVEL-PACK L IF WELL DRILLED WAS FLOWING WELL INSERT	
DRILLERS IDENT, NO. L. 45	FIN BOX 68 68 68	Joseph Tricker 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DRILLERS SIGNATURE	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W.Q	
(MUST MATCH SIGNATURE ON APPLICATION)	70 72 74 75 76	R www
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).	TELESCOPE LOG OTHER DATA CASING INDICATOR	Lindew Chill 32
	COUNTY	

Page of Date 10 12 1/49

Review <u>DK 11/13/89 MR</u>

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

	•	nonard court was	11000 1001	}	2	
Well Permit No. Location of pro	HO - 58-10	Twelve Hill C	<i>1</i> ·	•		
Subdivision		Lot	/3 Block	Plat	Sec	2
Well Driller	JAMES !	E. DelpH Owne	r JHP De	velop		
Depth of	well 205			÷:	•	
Distance	of measuring povater level (S.W.	oint (M.P.) above gr L.) below M.P.	ound 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		· · · · · · · · · · · · · · · · · · ·	
I. High rate	pumping reser	rvoir drawdown	4,	1. July 1. Jul		
		0	Pumping rate	10 6PM	1	
Total tin	ne 15 mil to	reach pumping water	level 40	ft. below	W-M.P.	
II. Recovery p	oump test data -	observations to be	recorded every	15 minutes	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·
TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER RE	ľ	ALCULATED	
minute in-	below M.P.	time to fill 5	(if used)	1	gallons p	er
tervals		gallon bucket			minute)	

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 5	(if used)	(gallons per minute)
tervals		gallon bucket		
1:15	460	4 DIC		10 6 PM
1:30	401	6 on	- Contract of the Contract of	LOGPM
1:45	46'	6 arc		10 G/M
2:00	437	6 sec		loglm
2:15	40'	classe		17:08m
2:30	NO 40'	1. base	· · · · · · · · · · · · · · · · · · ·	106 Pm
2:45	40	6 per.		10 60 m
3:00	40'	ben		18 GBM
3:15	40'	liser		werm
3.30	40'	6 sec		10 CPM
3:45	40'	6 pec		locm
4:00	401	bell		106 PM
4:15	40	le ou		106th
			·	
				,
· .		·		÷
			,	, ,

	OF MARYLAND	STATE PERMIT NUMBER
	TO DRILL WELL	#0-88-1010
(THIS NUMBER IS TO BE PUNCHED IN GOLS. 3-6 ON ALL' CARDS) plea	se print or type	⁷⁰ fill in this form completely ⁷⁹
Date Received (APA)	B 3	LOCATION OF WELL
OR / O 8 9 OWNER INFORMATION	HUWARD	
THP DEVELOPMENT CO.	8 COUNTY	21
15 Last Name Owner First Name 34	TWELVEL 23 SUBDIVISION	W//L/5
	J MITT	ьот / 3
BALTIMORE MO21204	44 46	48 50
57 Town 70 State 72 Zip 76	52 NEAREST TOWN	
TANA TO FAMILE BRILLER INFORMATION	MILES FROM TOWN (ent	er 0 if in town) 2 3 MI
Tosept L. Mayne 238 Driller's Name 77 License No.		73 76 77 78
Joseph L. Illayine Well DinLing	_ 1 2	twelvetrees ct.
5512 Killer RD. Mit. Miky 21771	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	NEAR WINI HOAD
Address 1 d d 32 d d d d		NORTH N
Signature / Date	- NW 8 NE 8-9	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST
B 2 WELL INFORMATION	W (TOWN) E	SOUTH
ÁPPROX. PUMPING RATE (GAL. PER MIN.)		34 4 00 1 37
AVERAGE DAILY QUANTITY NEEDED 8 12	S _W S _E	34 4 0 0 37 DISTANCE FROM ROAD
(GAL PER DAY) 5 0 0 14 20	S S S S S S S S S S	ENTER FT or MI
USE FOR WATER (CIRCLE APPROPRIATE BOX)	. 8	NOT TO BE FILLED IN BY DRILLER
DHOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	./	HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)	Howar D	1- 3857Z COUNTY NO.
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.	COUNTY NAME STATE	
22 L'_ OTHER (REQUIRES APPROPRIATION PERMIT) PUBLIC OR PRIVATE WATER COMPANY (REQUIRES	SIGNATURE DATE ISSUED	INSERT S 41
P APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)	08/489	ordy all 62-13-90
TEST, OBSERVATION, MONITORING (MAY REQUIRE	NORTH / A O C	CO SIGNATURE EXP. DATE CO SIGNATURE EXP. DATE CO SIGNATURE O O O O
APPROPRIATION PERMIT)	GRID 50	55 GRID 57 63
APPROXIMATE DEPTH OF WELL 300 FEET	SHOW MAJOR FEATUR BOX & LOCATE WELL	RES OF 10/24/89 9:00 GROUP
APPROXIMATE DEPTH OF WELL 3 0 1 FEET	WITH AN X	DISBO FON ACUIUM
ADDROVIMATE DIAMETER OF WELL	SOURCES OF DRILLING	G WATER 45 CASING
APPROXIMATE DIAMETER OF WELLINCH	2.	1100000
METHOD OF DRILLING (circle one)	3.	40 OFEN
BORED (or Augered) 30 AIR-ROTary) AIR-PERcussion BOTARY (Hydraulic Rotar	— WRITE THE BOX NOME	
CABLE REVerse-ROTary DRive-POIN	1	
	E 810	1 2 CASING A-G
other	N 510 0	29 - 000 MAGOK 10/26/29
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)	DRAW A SKETCH BELO	DW SHOWING LOCATION OF WELL IN
: (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL	I	TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION
THIS WELL WILL REPLACE A WELL THAT WILL BE	N	TO NEARLEST NOVE CONSTITUTE OF
ABANDONED AND SEALED 39 This well will replace a well that will be used	A	2 Jan
AS A STANDBY	T	What was ct
D THIS WELL WILL DEEPEN AN EXISTING WELL	THE REAL PROPERTY.	1 HULLYC TREE
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENDED (IF AVAILABLE) 41 52		X
		1EA 11 (83 Well
Not to be filled in by driller (OEP USE ONLY)		3
APPROP. PERMIT NUMBER G A P 63	HEAL	16/22
FORCE MINITALS PERMIT NO. 140 - 88-11016	T HURNE	EN HURCH RP.
67 68 N BOX 70 71 72 73 74 75 76 77 78 78	5 1404)	Ch AKKSWIT
SPECIAL CONDITIONS		

10/24/89

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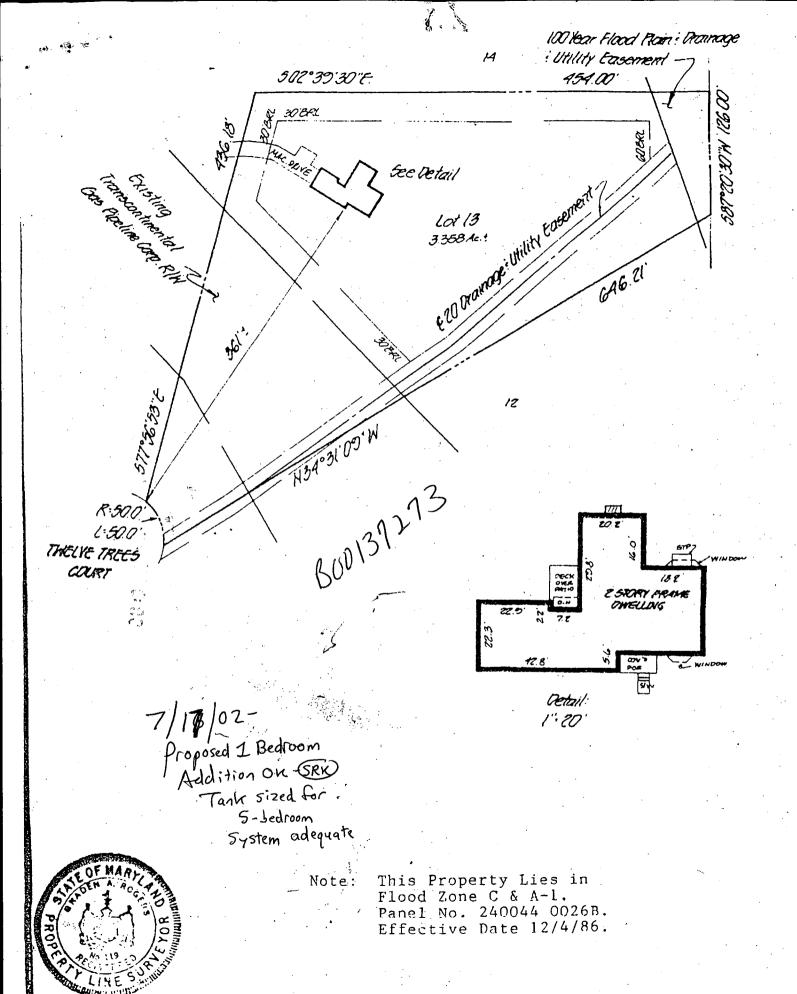
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Review		100	

Page ____ of ____

Well Permit No. HO - 88-1010

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Location of pro Subdivision Well Driller	Twelve Hills	DELPH Owne	13 Block Plat r THP Develop.	Sec2			
Depth of well 205' 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 / OD Pumping rate / O GPM Total time S M (n) to reach pumping water level ft. below M.P. II. Recovery pump test data - observations to be recorded every 15 minutes							
TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \$\frac{1}{2}\$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)			
2:45	40	6 sec		10 GPM			
		1.					
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	10/26/89	VISUAL CLA	RITH AK TAKEN M				
		INO SAMPLI	E TAKEN M				



NOTE: No title report furnished.

CENTIFICATION: This is to certify that the improvements indicated become one located as shown. This is not a property

12014 Twolve Trees O