38624

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

Walter W. King Plumbing & Heating Contractors IS PERMITTED TO INSTALL X ALTER
ADDRESS 5305 King's Court Frederick, Maryland 21701 PHONE 662-6990
SUBDIVISION Willow Springs ROAD1703 Willow Springs DrLOT 1
PROPERTY OWNER Willow Springs Limited Partnership
ADDRESS
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.
GARBAGE GRINDER? YESX NO
SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4
TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be 3 feet wide.  Inlet 3 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3.0 feet below original grade.  1.5 feet of stone below distribution pipe.  LOCATION - Start the first trench 140 feet off the front lot line (Willow Springs Dr and 310 feet from the left (Heatherwood Drive) lot line. Run trenches on contour toward the front lot line.  NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanou and cap to grade or above on septic tank. OK/(ω)
PLANS APPROVED BY Sid Abel DATE 2/14/89  COVER NO WORK UNTIL INSPECTED AND APPROVED  NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
NOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS
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 TRENCHIES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHIES)
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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.
NOTE DISTRIBUTION BOXES MUST HAVE BAFFLES

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

€ RA 99 → 30 100	150 200 250
}	
15/2	(3) 104'
200	2 /04 //2/
0. 5 2'	10.1
9"-> 7/1/2	<u> </u>
150 231/2	
	150
30/2/	
3 100 C.0=15 1-8 maly	
WELL J3 G	100
Home	
1 1 1 2 1 2 1 1	
30	50
16.13	
INDICATE NORTH - NAME ADJOINING RE	ROADWAY AS BASE LINE
WILLOW SYRENG	S. T. Zing Co. O. France S. T. Zing
SEPTIC TANK LEVEL OK	AU TOV
DISTRIBUTION BOX LEVEL OK (Baffle in)	
DRAIN FIELD/TILE FIELD. DEPTH 4.5 FT. TRENCH WIDTH 3	FT. INLET DEPTH 3 ET.
EFFECTIVE GRAVEL DEPTH	0 104' >
NUMBER OF TRENCHES ONEB	3100' J
	TH BELOW INLET FT.
ABSORBENT AREA SO FT	FI.
REMARKS 5/ 9/89 OK TO COVER ALL WO	ORK FINAI
	C.B. V.
DATE SYSTEM APPROVED 5/9/89 INSPEC	CTOR Charles Devan Stains

|--|--|

SUBDIVISION: Willow Springs

LOT NUMBER: /

### 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	
Inlet feet	below original grade.	
Bottom maximum depth	feet below or	iginal grade.
Effective area begins	at feet belo	ow original grade.
and leave a to exceed l	5-foot earth buffer bet	ent area, run the trench on level ground ween dry well and trench. No trench is ench inlet to be same as dry well, with bution pipe.
	TRENCHES	
Bottom maximum depth  Effective area begins  // S feet of st  NOTE: (1) No trenc (2) If more	below original grade.  4.5 feet below or at 3.5 feet belo one below distribution ph to exceed 100 feet in than one trench used, a	w original grade.  ipe.  length.  distribution box is required.
(4) Call for (5) Provide tank and (6) If a ga and incr	6" - 8" diameter clean drywell. rbage disposal is use ease absorbent sidewall	fore gravel is installed. out and cap to grade or above on septic d, increase septic tank capacity by 50% area by 22%.
LOCATION: STANT	THE FIRST TRENCH	140 Ft OFF THE FRONT LOT LINE
	•	TOUR TOWARD THE FRONT LOT
		100% /awhicis /// / /// C8/
LINE 2-14-89	5 Along	
The state of the s		
HD-191	- <u> </u>	

# APPLICATION

PERCOLATION TESTING

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A 38624

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

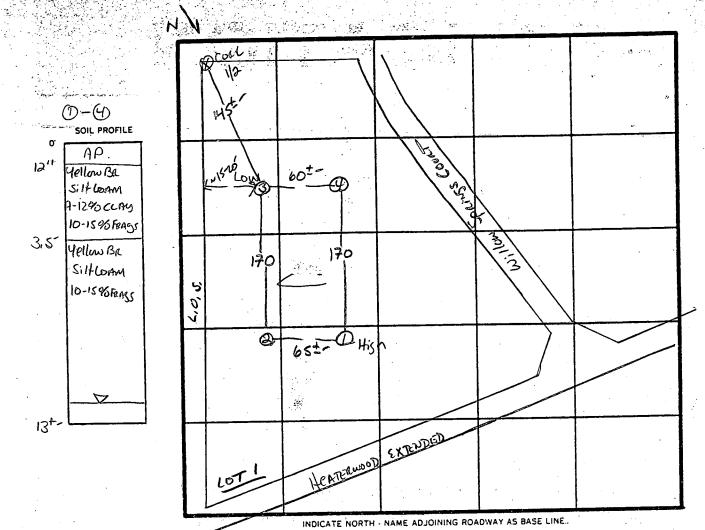
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 461-9933

TRICT		3_	
DATE	12-	16-	1986

TO: THE COUNTY HEALTH OFFICER	
ELLICOTT CITY, MARYLAND	
I. HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR REC	ONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER WILLOW SPRINGS LIMITED	PARTMERSHIP
16801 WESLEY CHAPEL ROAD ADDRESS MONKTON, MARYLAND 21111	8722 PHONE 347-8700
PROSPECTIVE BUYER	
ADDRESS	PHONE
PROPERTY LOCATION: Highlands	
SUBDIVISION WILLOW SPRINGS GOLF COURSE	LOT NO.
POAD AND DESCRIPTION HIS 11.5. RTE TO N AT	LIVE STOCK ROAD
road and description 1703 Willow Spaings Dr.	CIVO STOCK INCHID
TAX MAP 9 \$ 15 PARCEL # 151 \$ 11	
SIZE OF LOT 3.0 Ac.±	TYPE BLDG S.F. D.
	(SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UN	NITH BILDING FACILITIES DECOME AVAILABLE LEHLLY HADEDSTAND TUS
THE STOTEM INSTALLED UNDER THIS ATTEICATION IS ACCEPTABLE UNET OF	THE PUBLIC PACIENTES BECOME AVAILABLE. TPUCET UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON	
	LOW SPRINGS JOB ComPartner
WITH ALL MOSHA REQUIREMENTS IN TESTING THIS LOT.	(SIGNATURE OF APPLICANT)
ARREQUED BY STULULY	Standard tunely DATE 2-14-89
APPROVED BY STACKORY FOR FOR	STUMBOUCH / WHEN DATE _d-14-0/
REJECTED BY	DATE
. 6°	
HOLD PENDING FURTHER TESTS	DATE
REASONS FOR REJECTION OR HOLDING 4-15-87 PEAC SATIST ACTORY 1.	LALD FOR SUBLIVISION RATI S. ALL
	BEDG. PERMIT SIGNEU
	AND DESTIDATED 2-12-89

THIS IS NOT A PERMIT



X Perc 5 min 180 FIBR INLET 3-BOTTOM 5

		*	, · · · · · · · · · · · · · · · · · · ·	:	·	<u> </u>	
			PF	RE-WET		T - 1" DROP	
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
UI a		4-	2117	2:20	2:20	2:05	5 MN
4/15/87	M	7.5	2:17	2:19	2119	2:22	3 MIN
		/					1
, ,	1.0	13- 0	WIFORM 5	p/m 3.5°			
-				2,24	2:24	2131	7 MIN
	2 ×	125- 15	01/8 01/ DAY	UNIFORM	below 3.	51	
		4	12:23	2:26	2:26	2:31	5miN
	33		TOXAT"	UNIFORM .	elen 3.5		
		,		1			1
	40	12- UZ	FORM !	20/m. 3.3			
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EH-12-1079

6/29/89 AM

#### 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 X Replacement		Receipt # 44219 Date <u>5/11889</u>
Name of Installer W.W.King F	lbg. & Htg. Contr Inc.	Telephone <u>1-301-662-6</u> 99
License Number <u>2217</u> Certified Well Pump Installe	•	
Name of Property Owner <u>Pulte</u> Subdivision <u>Willow Springs</u> Site Address <u>1703 Willow Spr</u>	Lot # <u>1                                   </u>	Telephone 1-301-921-8707 ell Tag # HO - 88 - 0407
	Motor	Pitless Adapter
1. Type	1. Horsepower $3/4$	1. Make Martinson
a. Deep well jet		2. Model # BP-10X
b. Shallow well jet	3. Voltage	3. Depth 42" min
c. Submersible X	a. 110	60" max
2. Make Goulds	b. 220 X	•
3. Model # 7EH07422	glanned demonstration of the production and the contract of th	•
4. Capacity 7 GPM		•
5. Pump exceeds well capacit		
6. If Yes, is low pressure of		Yes No
•	stors Cable guards	s X Other
Tank	Piping	Well data
1. Capacity 80		1. Depth <u>185</u> ft.
2. Pressure relief	2. Size 1"	2. Yield 10 GPM
valve? yes	3. NSE and/or BOCA	3. Static water
	Code approved $X$	level ft.
IN AR (O) II II I		
	4. Depth of supply	4. Will water supply
P.A. OK @ 4' B.G	line 42" min	be disinfected by
P. A. OK Q 4 13.6 MR6/29/89	line 42" min	be disinfected by installer? ves
	line 42" min 60" max responsibility to notify	be disinfected by installer? ves the Howard County Health
I understand that it is my Department when the installatis null and void).  All information given above	responsibility to notify tion is ready for inspection is true to the best of my	be disinfected by installer? ves the Howard County Health ion (otherwise this permit
I understand that it is my Department when the installatis null and void).  All information given above	responsibility to notify tion is ready for inspection is true to the best of my nature of Applicant:	be disinfected by installer? ves  the Howard County Health ion (otherwise this permit knowledge.
I understand that it is my Department when the installatis null and void).  All information given above  Sign	line 42" min 60" max  responsibility to notify tion is ready for inspection is true to the best of my nature of Applicant:  Date:	be disinfected by installer? ves  the Howard County Health ion (otherwise this permit  knowledge.
I understand that it is my Department when the installatis null and void).  All information given above	responsibility to notify tion is ready for inspection is true to the best of my nature of Applicant:  Date:  Date:  papproval/status of the in	be disinfected by installer? ves  the Howard County Health ion (otherwise this permit  knowledge.

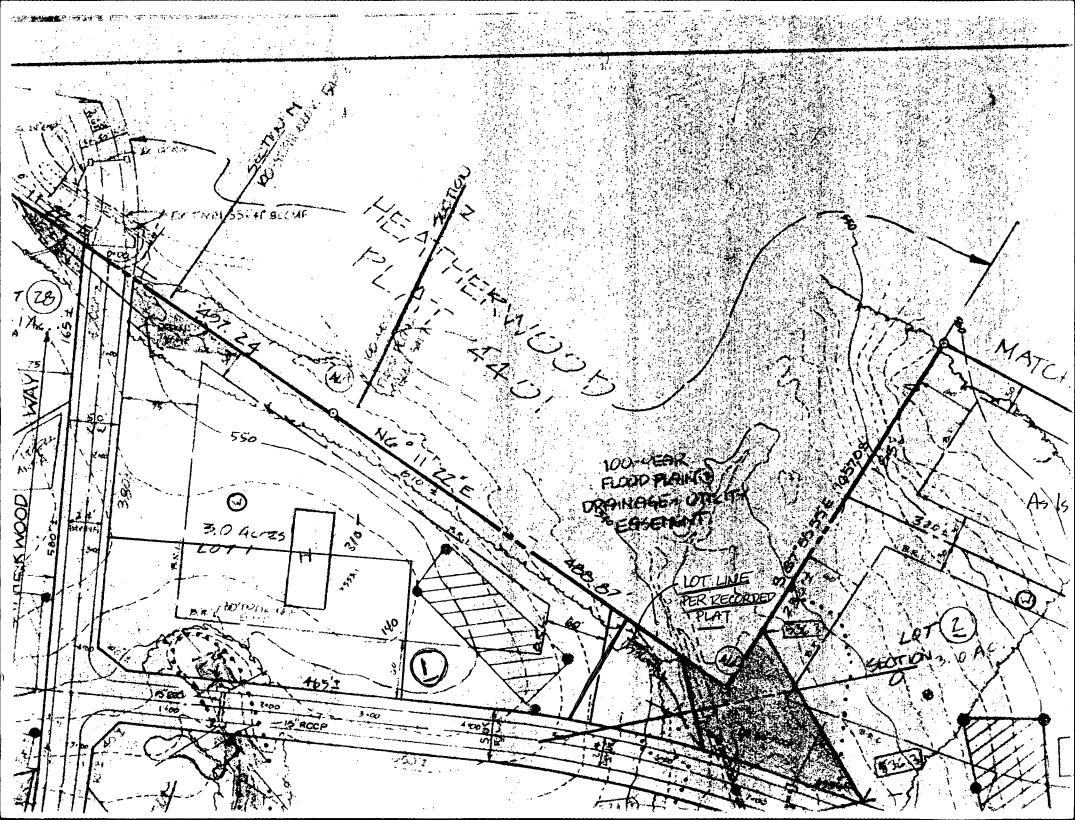
PT 3-11-89		
GROUT 9:30	3/13/8Review	

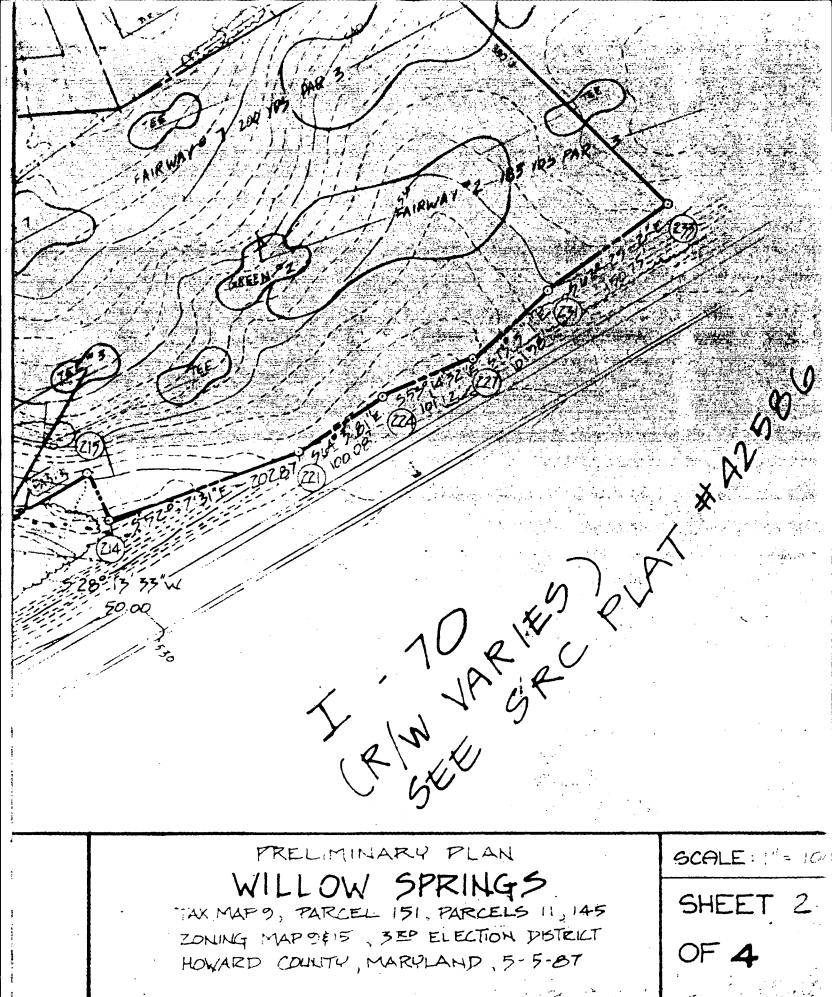
Page	 of	
Date		

## FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No Location of pr Subdivision <u>6</u> Well Driller _	. HO - <u>88-09</u> operty (road) <u>Villow /fishladds</u> R. Mayne	107 Wilbw Springs DK- Lot Owne	Block Plater   Plater   Willow Spring (FD)	Sec
Depth o Distance Static e I. High rate	f well e of measuring powater level (S.W. pumping reser	pint (M.P.) above gr L.) below M.P.	round	
	· .		Pumping rate r levelft. recorded every 15 minu	
TIME (in 15 minute in- tervals	WATER LEVEL	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING	CALCULATED FLOW (gallons per minute)
			3/13/84	
		150	8Abn	
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B 1 7918 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER
1 2 3 6	PERMIT TO DRILL WELL		40-48-0404
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	please pr	int or type	70 fill in this form completely 79
Date Received (APA)		B 3	LOCATION OF WELL
OWNER INFORMA	ATION	HOWAND	
WILLOW SPLIM	1+60	8 COUNTY	
15 Last Name Owner    1680	First Name 34	23 SUBDIVISION	1416H 29R 05
36 Street or RFD	55	SECTION 44 46	LOT 48 50
	M D 2 / ) / ) State 72 Zip 76	Westeri	ENOSA; P
DRILLER INFORMATION	ON	52 NEAREST TOWN	71
DEALT MAYNE	273	MILES FROM TOWN (ent	73 . 76 77 78
Driller's Name RALAL MAYAK (WELL	77 License No. 80	B 4	SCRING DR.
9120 Brown Chunel	1 48	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30
Address Market Marcel		TOWN (CIRCLE BOX)	NORTH (IZ)
Signature Programme	1124185 Date	N E 8-9	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) (CIRCLE APPROPRIATE BOX) (WEST EAST
B 2 WELL INFORMATION	1	TOWN E	WEST SEAST SOUTH
ÁPPROX. PUMPING RATE (GAL. PER MIN.)	<del></del>		34 2 25 37
AVERAGE DAILY QUANTITY NEEDED (SO	·   12	S <sub>W</sub> S <sub>E</sub>	DISTANCE FROM ROAD
14		8-9 S 8-9	ENTER FT or MI 1 38 39
USE FOR WATER (CIRCLE APPRI	,		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & A	OLD UNIT ONLY)	House	A-38624
I IRRIGATION)		COUNTY NAME	COUNTY NO.
22 INDUSTRIAL, COMMERCIAL, STATE A OTHER (REQUIRES APPROPRIATION F	ND FEDERAL GOV. PERMIT)	STATE SIGNATURE	INSERT S
PUBLIC OR PRIVATE WATER COMPAN	Y (REQUIRES	DATE ISSUED	Sel- Che 08-13-89
APPROVAL)	•	NORTH Fred As I 3 I I	DISIGNATURE EXP. DATE
T TEST, OBSERVATION, MONITORING (I APPROPRIATION PERMIT)	MAY REQUIRE	GRID 50	0 GRID 8 0 8 0 0 55 63
156		SHOW MAJOR FEATUR BOX & LOCATE WELL	ES OF 3-13-84
APPROXIMATE DEPTH OF WELL 150	JFEET 28	WITH AN X	WATER NO JUST
APPROXIMATE DIAMETER OF WELL	NEAREST	SOURCES OF DRILLING	WATER SA
		2.	
METHOD OF DRILLING ( BORED (or Augered) JETTED	Jetted & DRIVEN	3.	
30	OTARY (Hydraulic Rotary)	WRITE THE BOX NUMB FROM THE MAP HERE	ER
CABLE REVerse-ROTary	<u>DR</u> ive-POINT	- C	
other		E 800	" MEALTH IAL
REPLACEMENT OR DEEPENE	D WELLS	N 578	<u> </u>
(CIRCLE APPROPRIATE B		RELATION TO NEARBY	W SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVEO
THIS WELL WILL NOT REPLACE AN E		DISTANCE FROM WELL	TO NEAREST ROAD JUNCTION
ABANDONED AND SEALED		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	CENT I H STATE
39 S THIS WELL WILL REPLACE A WELL TO AS A STANDBY	HAT WILL BE USED	1 5	HEARD COM
D THIS WELL WILL DEEPEN AN EXISTIN	NG WELL	0 10	A HOWE DE LA
PERMIT NUMBER OF WELL TO BE REPLAC			المر
	52	Jan 3	25 n7
Not to be filled in by driller (OEP L	<del>, , , , , , , , , , , , , , , , , , , </del>	2 WILL	ough Spainy on.
APPROP. PERMIT NUMBER G	A P 63	or Kind in	or string on
FORCE WRITE INITIALS PERMIT NO FORCE OF THE P	8     -     0     4     0     7       73     74     75     76     77     78     79	ASWARD 3	U JNTY
SPECIAL CONDITIONS		*	





86-167

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Date MANCH 11, 1985

## FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

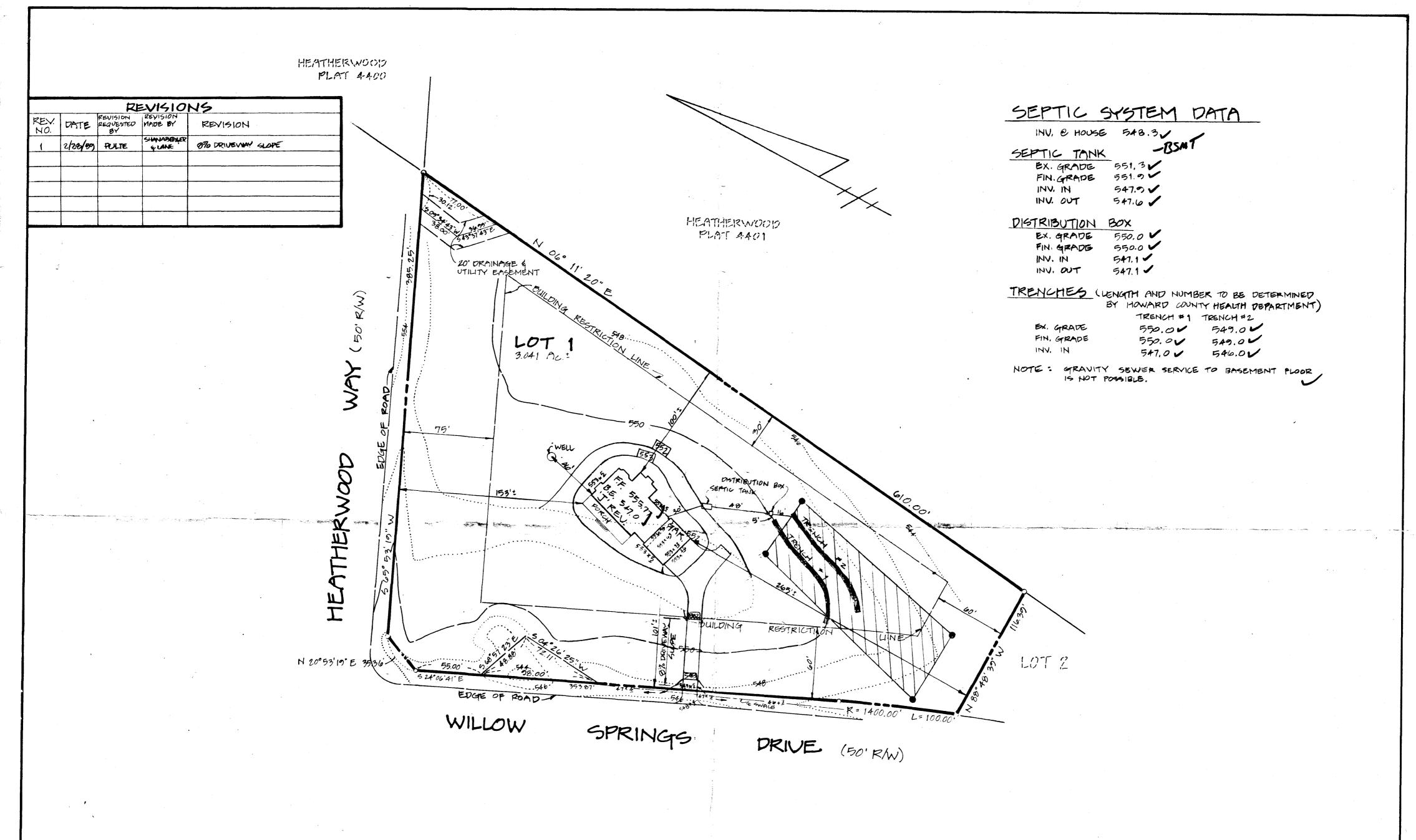
Well Permit No. HO - 88-0407 Location of property (road)	D. Du		
Subdivision Willew Highland		Plat Sec.	
Well Driller R. Mayne	Owner Willow SONT	(50 (FT)	
Depth of well $\frac{\int \langle S \rangle}{Distance}$ of measuring point (M.P.) abstatic water level (S.W.L.) below M.P	ove ground 2 4		
I. High rate pumping reservoir drawdown			
Time pump started 7.45 Total time 15 miw to reach pumping	Pumping rate 10 water level 23	ft. below M.P.	

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

TIME (in 15 minute in- tervals	WATER LI below M		PUMPING time to gallon	fill <b>J</b>		TER READING used)		ATED FLOW ons per ce)
8:00	22	For	6	Sec		·	jo	GPM
8:15	22	fo	6	Sec			10	GPM
8:30	22	Ko	6	Sec		/	10	GPM BPM
8:45	22	for	6	Sec Sec			10	SPM
9:00	22	FF	6	Sec		1	10	GPVH
9:15	22	ft	6	Sec		1	10	Grm
5:30 9:45 10:00	22	fg	6	Sec		1	10	6.001
9:45	22	fo	6	Sec Sec			10	GPM
10:00	22	R	6	Sec	Y		10	Grm
10:15	22	for	6	Sec	/\		10	6PM
10:30	22	16	6	Sec	1		10	() 8m
10145	22	H	6	ي څ≥ر			10	6PM
11:00	22	R	6	ن ت			10	EPM
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HD-224 6014 CHS: My 40 open 15 BASS

C 1 SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	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)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A-38624			
DATE Received DATE WELL COMPLE		PERMIT NO. FROM "PERMIT TO DRILL WELL"			
03/35C	22     8   S       26   (TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37			
OWNER Littles Street	SITD	28 29 30 31 32 33 34 35 36 37			
		W. Fairwoship.			
SUBDIVISION <u>bullous Hickens</u> WELL LOG		roi			
Not required for driven wells	WELL HAS BEEN GROUTED  (Circle Appropriate Box)  (Circle Appropriate Box)	C 3			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	(Circle Appropriate Box)  TYPE OF GROUTING MATERIAL  44  44	PUMPING TEST			
THICKNESS AND IF WATER BEARING DESCRIPTION (Use FEET Chec		HOURS PUMPED (nearest hour)			
additional sheets if needed) FROM TO if wat bearing		PUMPING RATE (gal. per min. ) 0 to nearest gal.)			
	GALLONS OF WATER	METHOD USED TO BULLET BULLET			
Top Sul 0 2	from O ft. to 40 ft.	WATER LEVEL (distance from land surface)			
	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING			
Top Sul 0 2 andy 2 50 -	casing CASING RECORD	WHEN PUMPING 20			
I I I	insert ST CO	22 25			
0000	code PI OT	TYPE OF PUMP USED (for test)  A air  P piston  T turbine			
- MICKA 55 25	MAIN Nominal diameter Total depth	27 27 27 Oother			
SAND STONE ST 80 V MICKA 80 185	CASING top (main) casing of main casing  TYPE (nearest inch) (nearest foot)	centrifugal R rotary (describe 27 below)			
murica 80 185	PI (IIIIII)	jet (S) submersible			
MICKA  80 100	60 61 63 64 66 70				
	E OTHER CASING (if used)  A depth (feet)	PUMP INSTALLED			
	inch from to	DRU LED MUL INCTALL DUMP			
		(CIRCLE) (YES OF NO)  IF DRILLER INSTALLS PUMP, THIS SECTION			
	N L L L L L L L L L L L L L L L L L L L	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE			
	screen type SCREEN RECORD or open hole COLT DIE	TYPE OF PUMP INSTALLED			
	insert appropriate STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX SEE ABOVE:  29			
	code   BRONZE HOLE	CAPACITY: GALLONS PER MINUTE			
and the second of the second o	below PLASTIC OTHER	(to nearest gallon) 31 35 PUMP HORSE POWER			
	C 2	PUMP COLUMN LENGTH			
	DEPTH (nearest ft.)	(nearest ft.)			
	E '	CASING HEIGHT (circle appropriate box and enter casing height)			
		49 LAND SURFACE			
CIRCLE APPROPRIATE LETTER	S 23 24 26 30 32 36 R	below below to the foot)			
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT			
E ELECTRIC LOG OBTAINED	SLOT SIZE 123	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR			
P TEST WELL CONVERTED TO PRODUCTION	DIAMETER (NEAREST INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES			
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED II ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION	from to	(MEASUREMENTS TO WELL)			
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN TH ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BES	LIE WELL DRILLED WAS	3 <del>150</del> → ₩			
OF MY KNOWLEDGE.	FLOWING WELL INSERT F IN BOX 68 68				
DRILLERS IDENT. NO.	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	= 1225			
DRILLERS SIGNATURE	T (E.R.O.S.) WQ				
(MUST MATCH SIGNATURE ON APPLICATION)	70 72 75 76				
SITE SUPERVISOR (sign. of driller or journeyman	TELESCOPE LOG OTHER DATA	and the same of the same			
responsible for sitework if different from permittee	CASING INDICATOR	British British British British			



SHANABERGER & LANE

8726 TOWN & COUNTRY BLVD, SUITE 107 ELLICOTT CITY, MD 21043 (301) 461-9563 owner:

R: PULTE HOME CORPORATION

9059 GAITHER ROAD GAITHERSBURG, MARYLAND 20817 (301) 021-0707

BADG. PERMIT SIGNED
AND RETURNED 3-13-89
Bl 2386/

WILLOW HIGHLANDS AT WILLOW SPRINGS GOLF COURSE

PLAT # 7917

3rd ELECTION DISTRICT

HOWARD COUNTY, MD

SCALE: 1"= 50'

DATE: