

368871

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT _____

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 9/16/88

DATE SYSTEM APPROVED 10-3-88

INSPECTOR S. Aul

INDEXED

Donald Parlette

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 6575 Route 32, Clarksville, Maryland 21029 PHONE 531-2140

SUBDIVISION Clarksville Ridge ROAD 6613 Whitegate Road LOT 16

PROPERTY OWNER JACK KALBACH Willis Francis Thompson PHONE: W-792-4510
6613 Whitegate Road H-531-6216

ADDRESS Clarksville, Maryland 21029

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

PLANS APPROVED BY C. Williams DATE 9/16/88

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES).

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

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

BLOG. PERMIT SIGNED

AND RETURNED 7-27-98

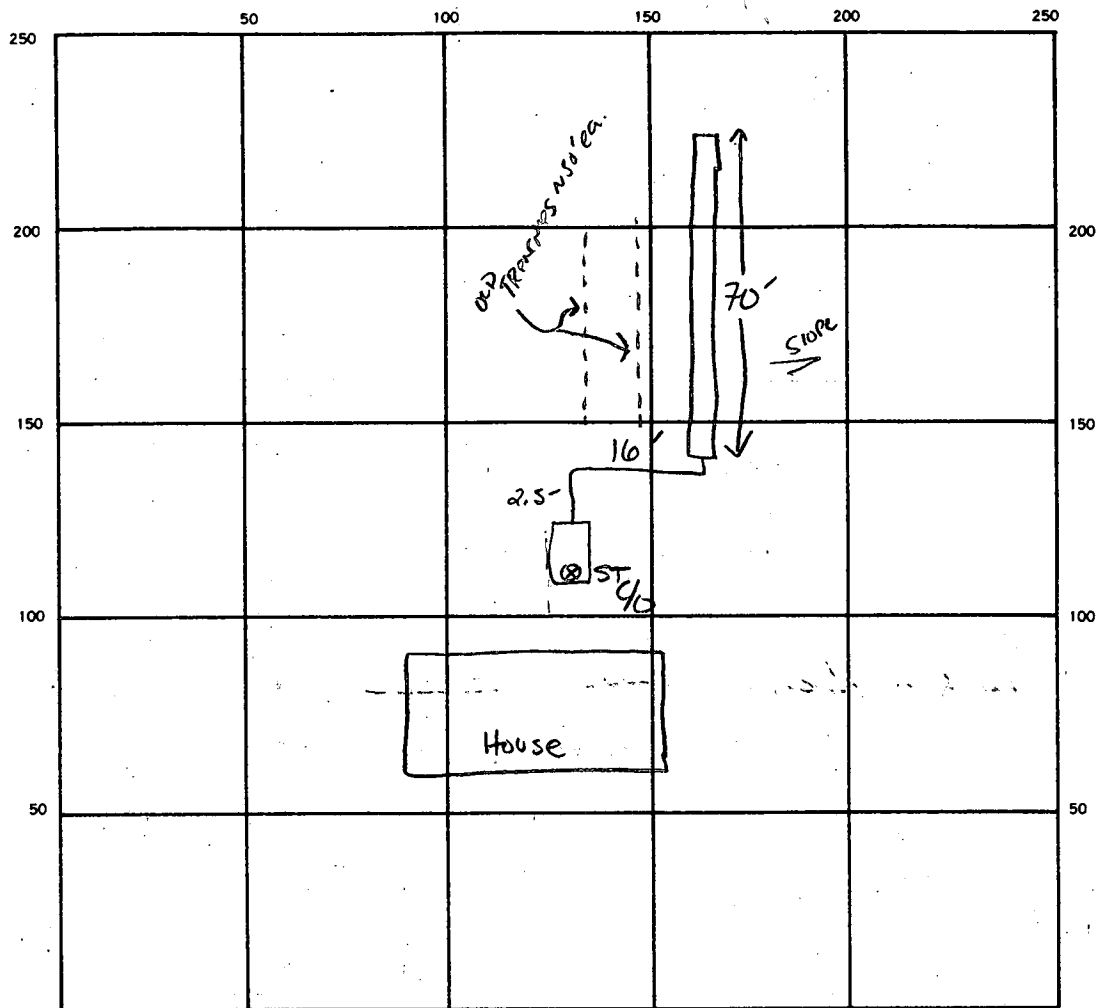
Handwritten signature and date 7/13/98

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

Handwritten vertical text: 104558



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

WHITE GATE Rd

SEPTIC TANK, LEVEL ✓ EXISTING CLEANOUTS C/O ST EXISTING

DISTRIBUTION BOX, LEVEL _____

DRAIN FIELD/TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 7 FT. TOTAL LENGTH 70 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL BOTTOM AREA 490 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 490 SQ. FT.

REMARKS 10/3/88 OK TO ADD SOME SAGE

DATE SYSTEM APPROVED 10-3-88 INSPECTOR S. Abel

10.24-62 approved BH
PERMIT

P 01843

A 01426

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 1/17/61 Empty lot

No House built as yet BH

ELLICOTT CITY

DISTRICT 5

INDEXED DATE 10/22/59

INDEXED

Claude Cassel

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS

Highland

PHONE

Atlas 6-3326

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION

Clarksville Ridge ROAD White Gate

LOT

16

PROPERTY OWNER

Shaughnessy, John R

ADDRESS

Camp Springs, Mo.

SPECIFICATIONS

DRAIN FIELD ☒

DEPTH

FEET, BOTTOM AREA

300

SQ. FT.

SEEPAGE PITS

ABSORBENT SIDE-WALL AREA

SQ. FT.

SEPTIC TANK CAPACITY

750

GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER

Place part of the field about 150-200 ft.
from Whitegate Rd. and about 20-30 ft.
from lot 15.

PLANS APPROVED BY

Raymond Hodges

DATE

7/28/59

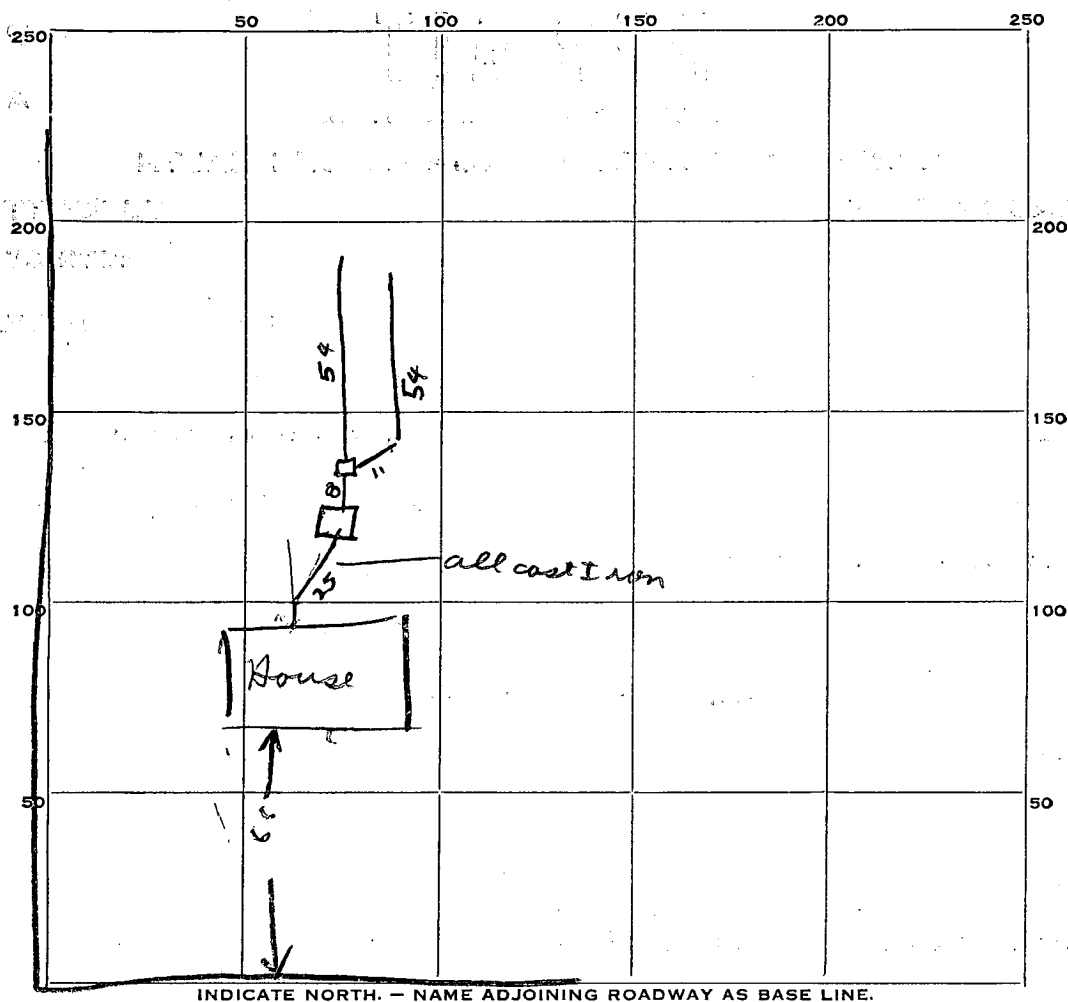
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

BLDG. PERMIT SIGNED
AND RETURNED 7/14/61

Serial # 47142.

A 01426



PERMIT CARD BK

CLEANOUTS OK

GRAVEL DEPTH 12 IN. TOTAL LENGTH 108 FT.

SEEPAGE PITS, INSIDE DIAMETER_____FT. DEPTH BELOW INLET_____FT.

REMARKS

DATE SYSTEM APPROVED

INSPECTOR

DATE SYSTEM APPROVED 24 Oct 62 INSPECTOR Raymond Hodges

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

A 014 26
P 01843

HOWARD COUNTY

ELLICOTT CITY

750 Gallon Tank

DISTRICT

5

Tile Field - 300 sq. ft. Bottom Area

DATE

7-23-59

Place part of the field about 150-200 ft from
Whitgate Rd and about 20-30 ft from
Lot # 15

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Shaughnessy, John R.

ADDRESS Camp Springs, Mo.

PHONE Hickory 98298

PROPERTY LOCATION:

SUBDIVISION Clarksville Ridge

LOT NO.

16

ROAD AND DESCRIPTION White Gate Rd.

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT 1 acre plus

TYPE BLDG.

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT

APPROVED BY

FOR

(KIND OF SYSTEM)

DATE

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

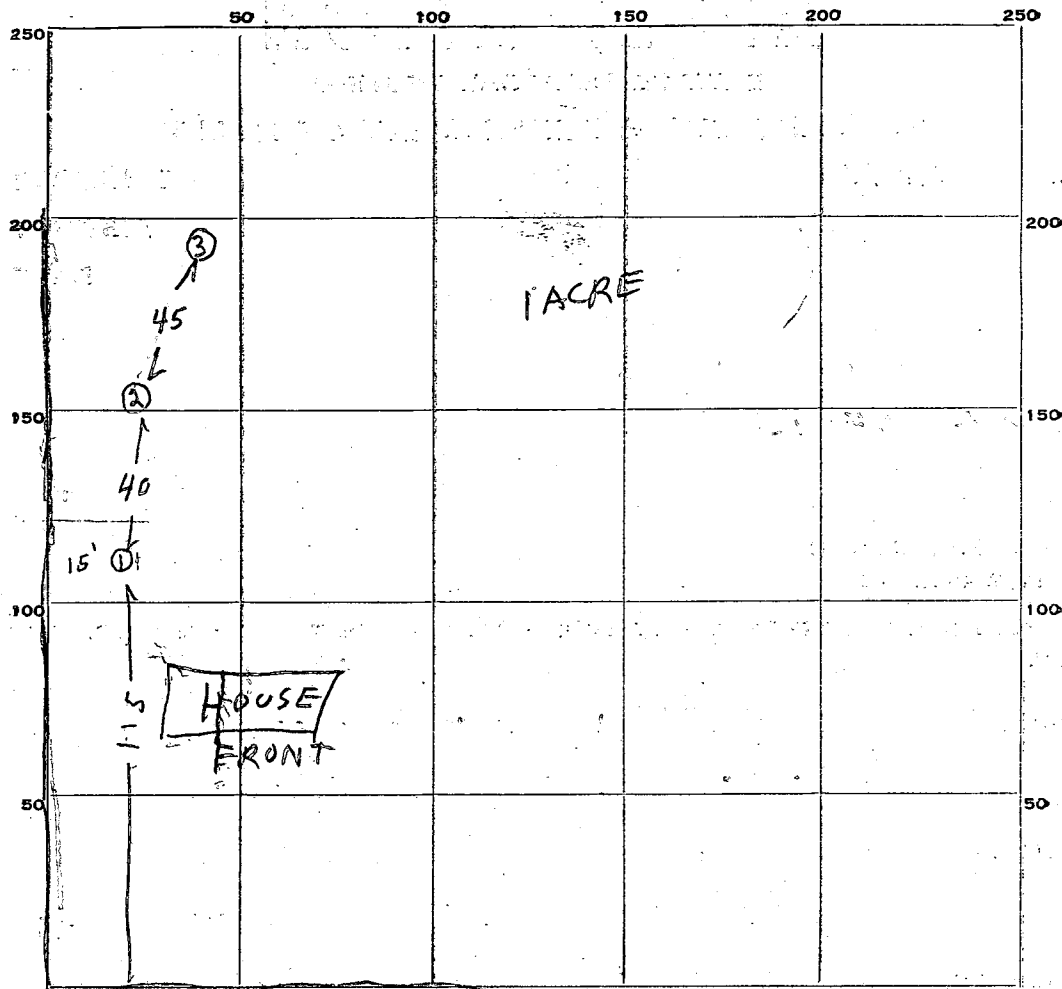
HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

Lot #15



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.
WHITE GATE RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/28/57	1	3	1254	100	100	116	16 min
	2	3	1257	100	100	104	4 min
	3	3	1259	100	100	101	1 min

15
3/21

SOIL AUGER FINDING

TESTED BY Raymond Hodges

REMARKS

ALSO PRESENT

Rep. Muscott

LOT NO.

16

334.45

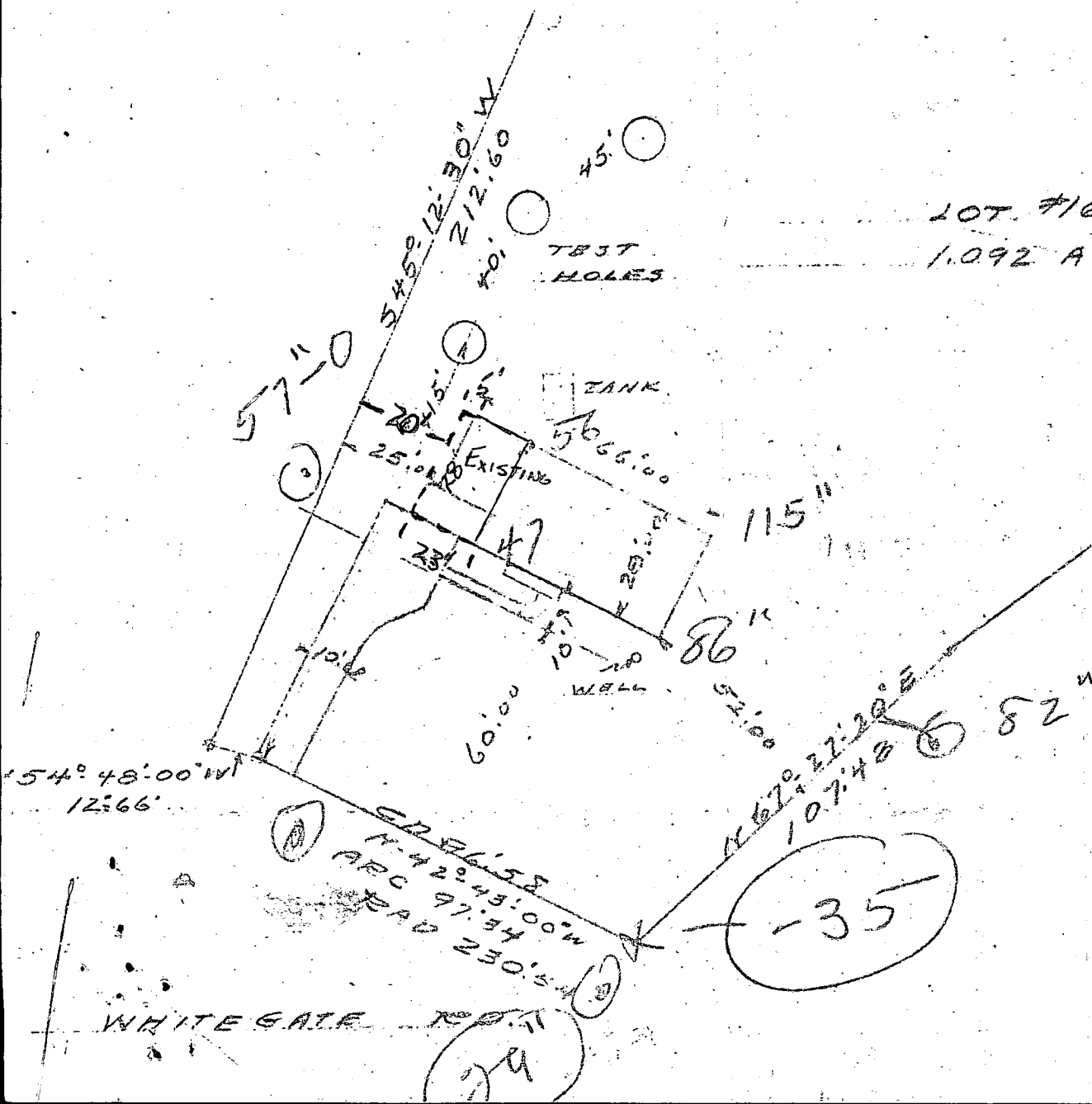
1.092 A.

~~N 76° 33' 10"
 297:11~~

CLARKSVILLE

SCALE 1" = 40'-0"

HEAT OIL



MR

7/23 + 7/24/98

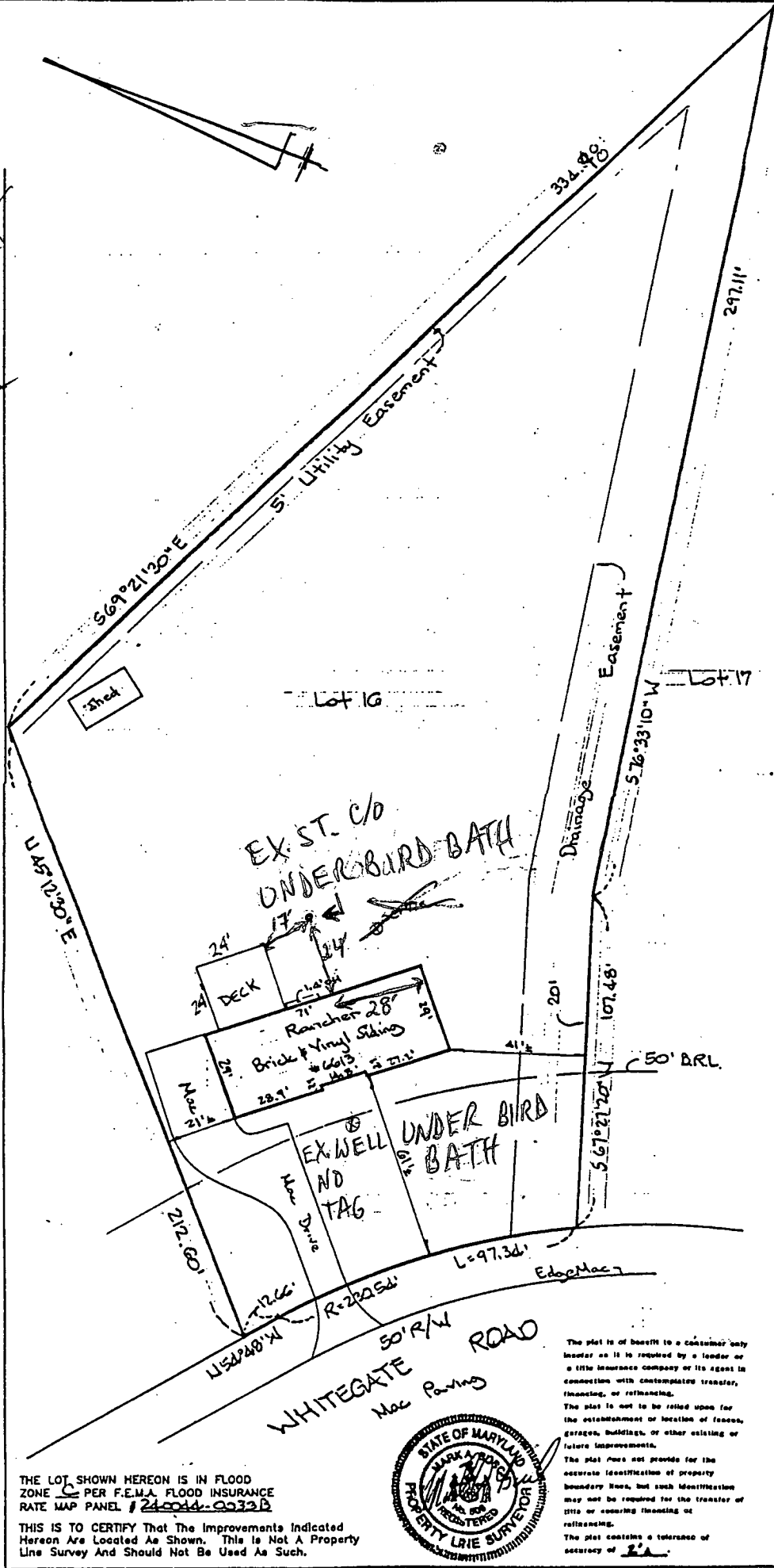
NO INSP
OPPORTUNITY

1:50

PROP
DECK OK
TO SIGN

MR

7/27/98



THE LOT SHOWN HEREON IS IN FLOOD
ZONE C PER F.E.M.A. FLOOD INSURANCE
RATE MAP PANEL # 240044-0032B

THIS IS TO CERTIFY That The Improvements Indicated
Hereon Are Located As Shown. This Is Not A Property
Line Survey And Should Not Be Used As Such.



The plot is of benefit to a consumer only
insofar as it is required by a lender or
a title insurance company or its agent in
connection with contemplated transfer,
financing, or refinancing.
The plot is not to be relied upon for
the establishment or location of fences,
garages, buildings, or other existing or
future improvements.
The plot does not provide for the
accurate identification of property
boundary lines, but such identification
may not be required for the transfer of
title or securing financing or
refinancing.
The plot contains a tolerance of
accuracy of 2.1'

THICKS ENGINEERING CO., INC.
ENGINEERS SURVEYORS & PLANNERS

LOCATION CERTIFICATION
#6613 WHITEGATE ROAD, LOT 16

6613 Whitegate Rd
Charlotte NC 28216

P4255P
Epin

A01426
P01P43

B 1	6343	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-88-0191 <small>fill in this form completely</small>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
Date Received (APA) 01/12/88		INDEXED		
OWNER INFORMATION DRELL WARREN I <small>15 Last Name 34 First Name</small> 5391 LANDINGS ROAD <small>36 Street or RFD 55</small> ELK RIDGE <small>57 Town 70 State 72 Zip 76</small>		LOCATION OF WELL HOWARD <small>8 COUNTY 21</small> 23 SUBDIVISION SECTION 44 LOT 48 ELK RIDGE <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) 4 M I <small>73 76 77 78</small>		
DRILLER INFORMATION Dana Kyker, Jr. II <small>Driller's Name 77 License No. 80</small> Westminster Rotary Well Drilling, Inc. <small>Firm Name</small> P.O. Box #861., Westminster, Md. 21157 <small>Address</small> Dana Kyker, Jr. II 9/14/88 <small>Signature Date</small>		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NEAR WHAT ROAD 5391 Landings <small>11 30</small> DISTANCE FROM ROAD 500 <small>34 37</small> ENTER FT or MI 27 <small>38 39</small>		
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 <small>8 12</small> AVERAGE DAILY QUANTITY NEEDED 400 <small>14 20</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME W-42560 COUNTY NO. STATE SIGNATURE _____ INSERT S DATE ISSUED 09/16/88 <small>43 48</small> CO SIGNATURE Charles H. Thacker 3/1/89 <small>50 55</small> EXP. DATE NORTH GRID 503000 EAST GRID 0871000 <small>50 55 57 63</small>		
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. City 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 830 71 N 500 3 000 000		
APPROXIMATE DEPTH OF WELL 200 FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL 60 INCH <small>NEAREST INCH</small>		METHOD OF DRILLING (circle one) BORED (or Augered) <u>JETTED</u> Jetted & DRIVEN <small>30 37</small> AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary DRIVE-POINT other _____		
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEANED (IF AVAILABLE) _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ <small>54 63</small> FORCE _____ WRITE INITIALS IN BOX PERMIT NO. 40-88-0191 <small>67 68 70 71 72 73 74 75 76 77 78 79</small>		PERMIT SIGNED RETURNED 6-11-96 Serial # 1300100524 Address plu		
SPECIAL CONDITIONS				

RECEIVED
HOWARD COUNTY
HEALTH DEPT

SEP 16 12 43 PM '88

HEALTH DEPT
HEALTH

9/20/88

- ① 10.6 FT of casing
- ② location OK per plans
- ③ 36 FT open hole at least that is
36 FT to water in hole Measured
with a string
- ④ 13 bags used so far
- ⑤ Had to leave to go to next
appointment

R/Hodge

9/26/88 noon

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 # 42004
Date 9/26/88

Name of Installer ROBERT L. FEELER CO., INC.

Telephone

License Number 2122

Certified Well Pump Installer ✓ Well Driller Registered Plumber ✓

Name of Property Owner M/M WARREN DRELL

Telephone 781-46555

Subdivision Lot #

Well Tag # 110-88-0191

Site Address 5391 LANDING ROAD

Pump

1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible ✓
2. Make GOULD
3. Model # 7EAS412
4. Capacity 7 GPM
5. Pump exceeds well capacity Yes No ✓
6. If Yes, is low pressure cutoff switch installed? Yes No
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards ✓ Other

Motor

1. Horsepower 1/2
2. RPM 3450
3. Voltage
 - a. 110
 - b. 220 ✓

Pitless Adapter

1. Make MERILL MB-1
2. Model # MB-1
3. Depth 42"

Tank CAPTIVE AIR

1. Capacity WM-6 WELL-MATE
2. Pressure relief valve? YES

Piping

1. Type Poly
2. Size 1"
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 42"

Well data

1. Depth 278 ft.
2. Yield 50 GPM
3. Static water level 36 ft.
4. Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Robert L. Feeler R.L.F.Co., Inc.

Date: 9/23/88

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

HD-215

9/26/88 - OK sticker placed

REGION _____

AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health
BUREAU OF ENVIRONMENTAL HEALTH

RECORD OF INVESTIGATION

DISPOSITION	DATE

LOCATION _____ ZIP _____

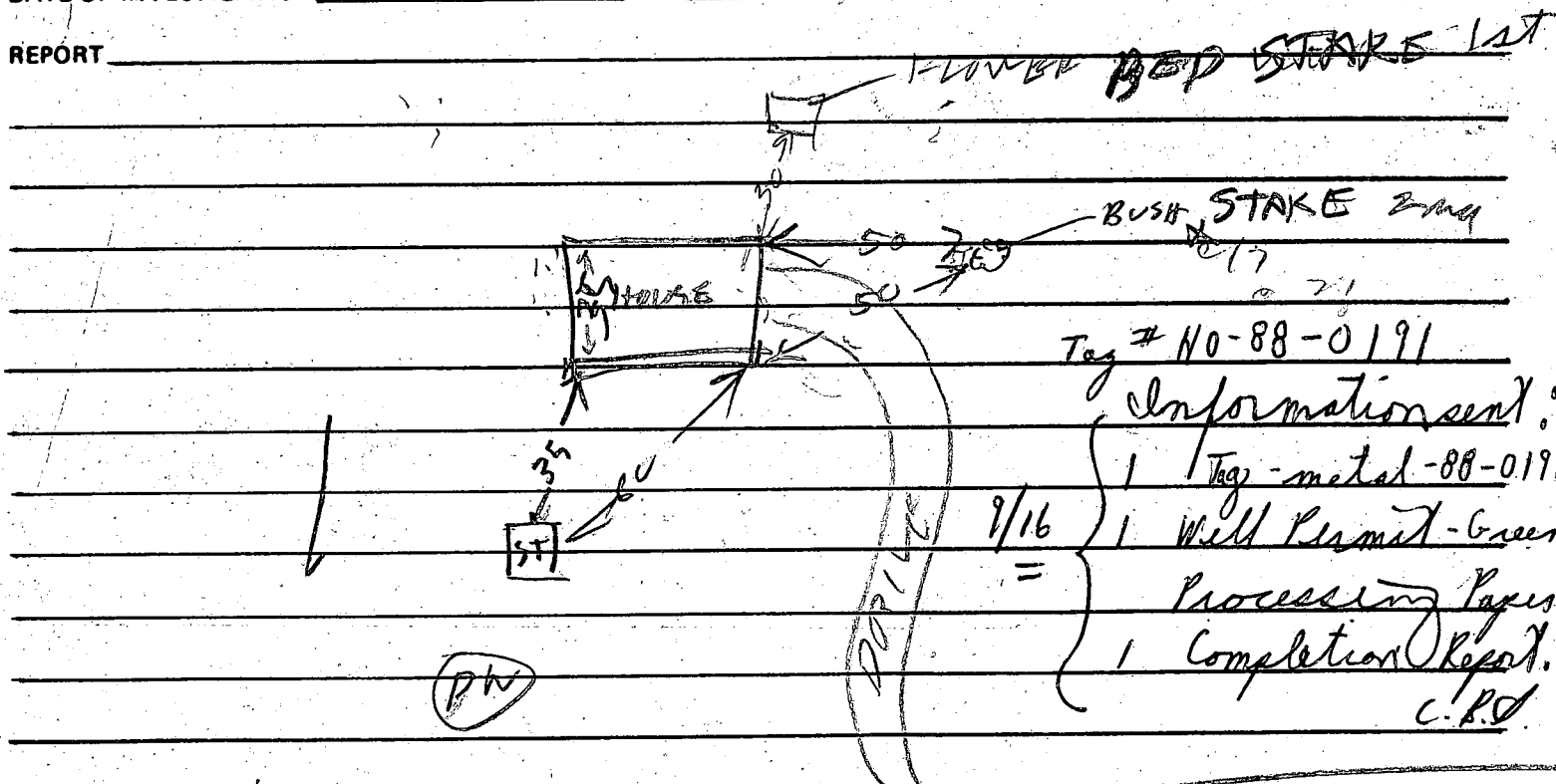
OWNER ☐ OCCUPANT ☐ DRELL ADDRESS 5391 LANDING RD PHONE 796-0732COMPLAINANT WARREN DRELL ADDRESS _____ PHONE _____REASON FOR INVESTIGATION REPLACEMENT WELL SITE REQUEST. SPRING IS CONTAMINATED.APPLICATION VIA WESTMINSTER ROTARY.H0-88-0191

CODES _____

RECEIVED BY C. Wilson DATE 9/12/88 ASSIGNED TO _____ DATE _____

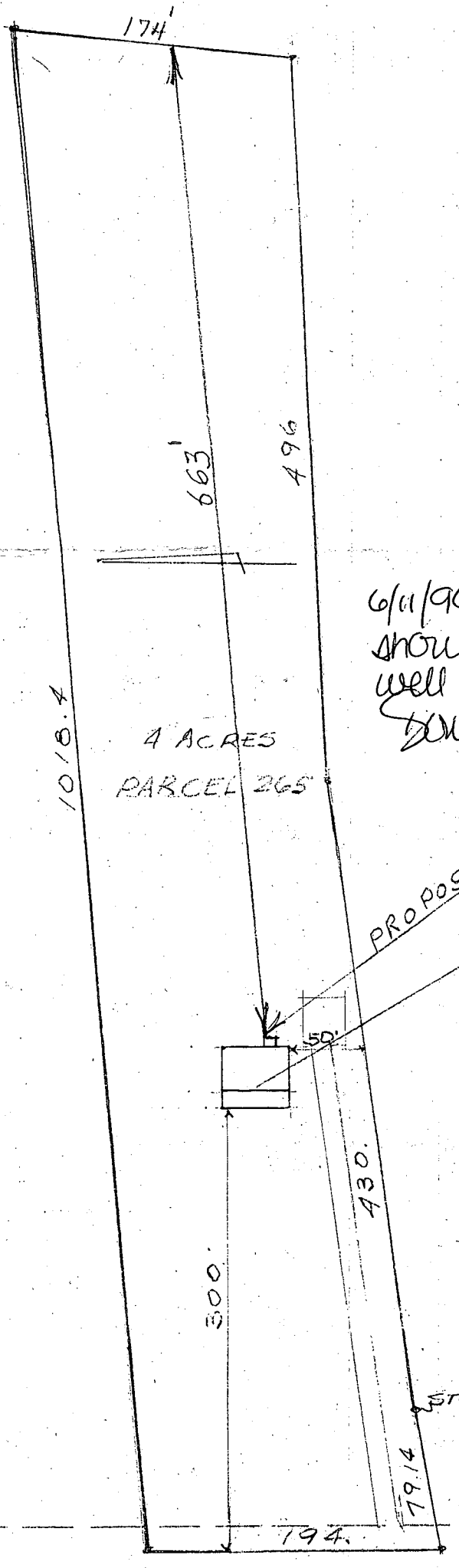
DATE OF INVESTIGATION _____ TIME _____ WEATHER _____

REPORT _____

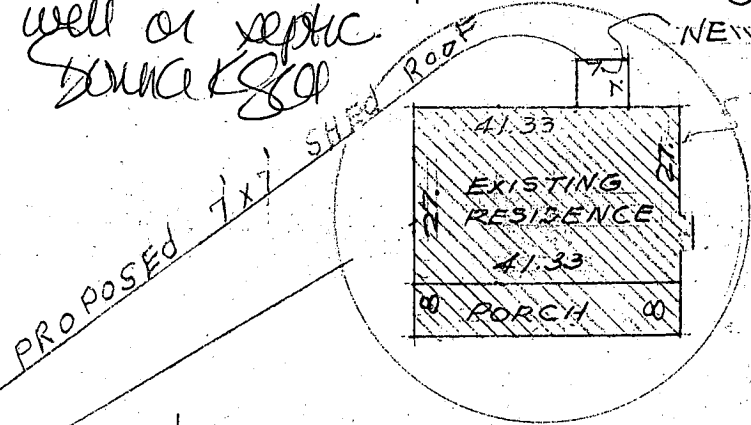
LANDING RDOK Replacement well stake

DATE SUBMITTED _____ SANITARIAN _____

83691617.02



6/11/96 proposed addition
should not impact existing
well or septic
DANCE & SON



COVERED PORCH FOR -
MR & MRS WARREN J DRELL
5391 LANDING ROAD, ELK RIDGE MD.
FIRST ELECTION DISTRICT, HOWARD CO.
JUNE 6 1996 SCALE 1"=100'

C1 0525 SEQUENCE NO. (DENV USE ONLY)
1-23 6
(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 W²-42560

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

092088
15 20

22 273 26
(TO NEAREST FOOT)

10-08-0191
28 29 30 31 32 33 34 35 36 37

OWNER DRELL WIREN J.
STREET OR RFD last name 5371 LAUNDING ROAD first name TOWN ELK LIDGE, MD. 21227
SUBDIVISION SECTION LOT

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		Check if water bearing
	FROM	TO	
Dirt	0	1	
Soft Brown Clay			
& Mica	1	9	
Soft Brown			
Mica & Sand	9	60	X
Soft Brown			
Sandstone	60	75	X
Hard Black			
Sandstone	75	94	
Soft Brown			
Sandstone	94	97	X
Hard Black			
Sandstone	97	109	
Hard Brown			
Sandstone	109	112	
Hard Black			
Sandstone	112	267	
Opening & Sand	267	268	X
Hard Black			
Sandstone	268	278	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 57 NO. OF POUNDS 5358

GALLONS OF WATER 342

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 104 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

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

ST 6 106.8
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from to

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

ST BR HO
STEEL BRASS OPEN
BRONZE HOLE
PL OT
PLASTIC OTHER

C2

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21
1 HO 106.8 278
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)
56 60

from to

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

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

T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 15
METHOD USED TO MEASURE PUMPING RATE Submersible
WATER LEVEL (distance from land surface)
BEFORE PUMPING 36
WHEN PUMPING 43
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 YES NO
(CIRCLE) (YES or 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) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height)
+ above } LAND SURFACE
- below } 2 (nearest foot)
49 50 51

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. 256

Dana Kyker, Jr. II

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

Review OK MR 1/9/91

Permit No. HO - 88-0191

Location of property (road) 5391 Landing Road
 subdivision ---- Lot ----- Block ----- Plat ----- Sec. -----
 Well Driller Westm. Rotary Well Drill, Inc. Owner Warren J. Drell

Depth of well 278 Ft.

Distance of measuring point (M.P.) above ground 2 Ft.

Static water level (S.W.L.) below M.P. 36

High rate pumping -- reservoir drawdown

Time pump started 8:40 Am Pumping rate 15
Total time _____ to reach pumping water level _____ ft. below M.P.

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

[illegible]