

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48453

A 47770

DISTRICT _____

DATE 5/27/92

DATE SYSTEM APPROVED 6/1/92

INSPECTOR M. Rifkin

5/21/92
5/28/92
6/1/92

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER _____

ADDRESS _____ PHONE 988-9270

SUBDIVISION Schroyer Farm LOT Tenant House A ROAD 1235 Morgan Station Road ^{Emmalls}

PROPERTY OWNER Charles W. Schroyer

ADDRESS 1245 Morgan Station Road
Woodbine, Maryland 21797

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BLOG. PERMIT SIGNED
AND RETURNED 5/26/92
Serial # B0104145
Approved p.r.l.

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 89 feet below original grade. Effective area begins at 4 feet below original grade. 54 feet of stone below distribution pipe.

LOCATION - Start the first trench at the highest part of the sewage easement, or approximately at a point midway between the two high holes. Run the trenches toward I-70 on contour.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 5/8/92 RIF
REVISED DEPTH 5/21 CW

PLANS APPROVED BY Mark Rifkin/ C. Williams REVISED _____ DATE 3/13/92
4/28/92

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

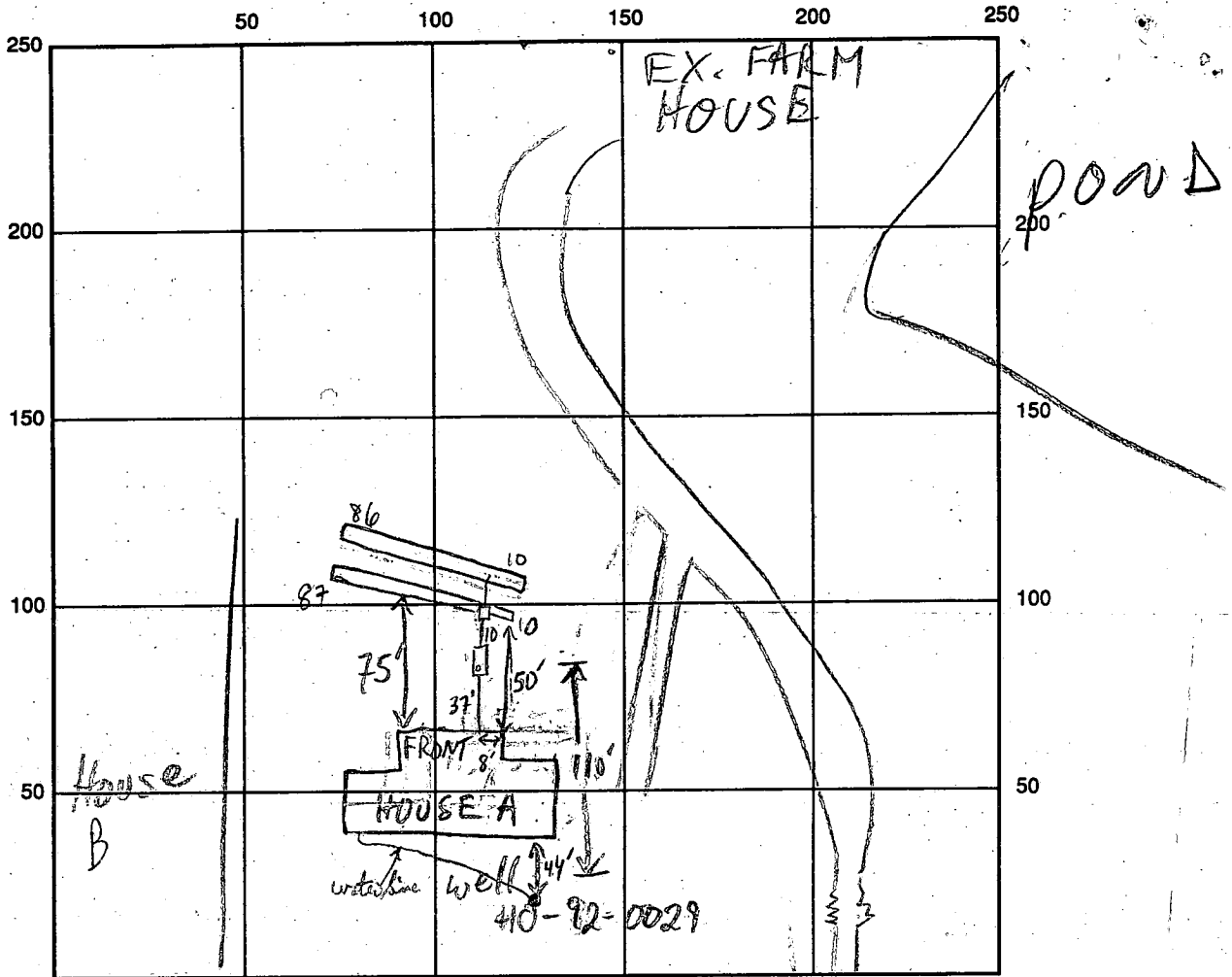
PERMIT VOID AFTER TWO YEARS

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 PVA 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 APPROVAL ON THIS PERMIT**

A
42220



MORGAN STA. 125 INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL - OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH $\frac{112314}{391919}$ FT. TRENCH WIDTH 2 FT. INLET DEPTH $\frac{112314}{41414}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{4234}{5555}$ FT. TOTAL LENGTH $\frac{112314}{10108786}$ FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA $\frac{112314}{5050435430}$ SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 965 SQ. FT.

REMARKS: 5/21/92 OK TO CONTINUE MR
5/22/92 OK TO COVER S.T. + TRENCHES; HOLD FOR
HOUSE CONN. MR
6/1/92 ALL WORK + HOUSE CONN OK TO COVER MR

DATE SYSTEM APPROVED 6/1/92 INSPECTOR M. Ripkin

APPLICATION

PERCOLATION TESTING

A 47770

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

Previous OK
TENANT HOUSE NOT SUBD.
200' RESTRICTION SEPTIC TO STREET.
DISTRICT _____
DATE 4/27/92
C.W.

TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND

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

PROPERTY OWNER Charles W. Schroyer

ADDRESS 1245 Morgan Station Road, Woodhike, MD PHONE 301 854-6217

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Schroyer, Farm LOT NO. House A

ROAD AND DESCRIPTION 1235 Morgan Station Rd

TAX MAP 8 PARCEL # P313

SIZE OF LOT TENANT HOUSE TYPE BLDG Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Charles W. Schroyer
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING PERC OK - HOLD FOR PERC CERT MR 3/10/92

BLDG. PERMIT SIGNED
AND RETURNED 4/27/92
Serial # 42061
SFD - 4 Bedroom

THIS IS NOT A PERMIT

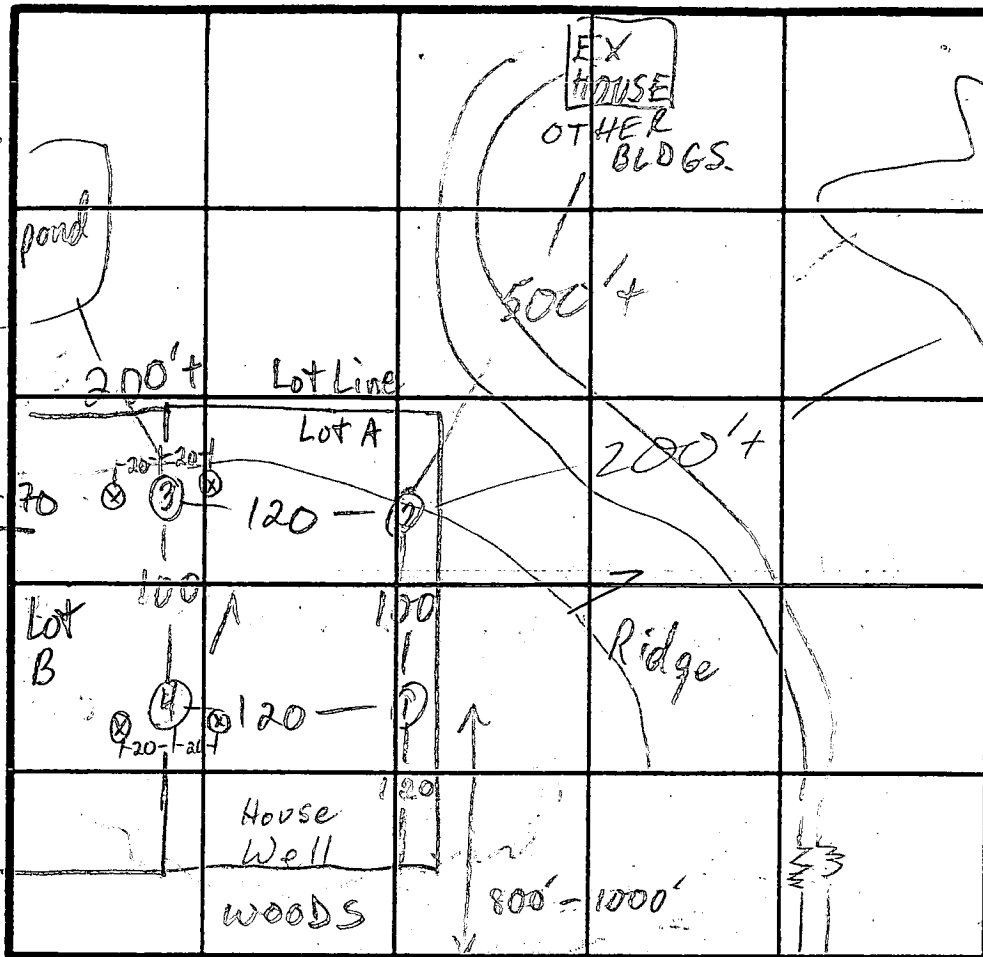
HD-216

Lot A
A 47770

ALL HOLES
SOIL PROFILE

0
org brn
clay
silty
cl m
5-6
tan
org
sandy
silt
sandy
15% shale
fragments

13-13 1/2



large lake

⊗ = STAKED
NOT DUG

$\bar{x} = 17$
240' BR
Inlet 4 1/2'
Bottom 6 1/2'

MORGAN STA. RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/9/92	1 S	4 1/2 6	10:16 10:29	10:24 10:38	24" slow 10:38	10:59	2.1
	1 V	13	see profile				
	2 S	5	10:22	10:30	10:30	10:44	14.
	2 V	13	see profile				
	3 S	6 1/2	10:46	10:53	10:53	11:18	25
	3 V	13 1/2	see profile				
	4 S	4	11:02	11:10	11:10	11:29	19
	4 V	13	sim to profile		clay to 3"		
	4 M	8	11:30	11:32	11:32	11:36	4

REMARKS HOLES ① & ② PER PLAN, ③ & ④ NOT PER PLAN

TYPE OF SOIL

TESTED BY M. Rifkin

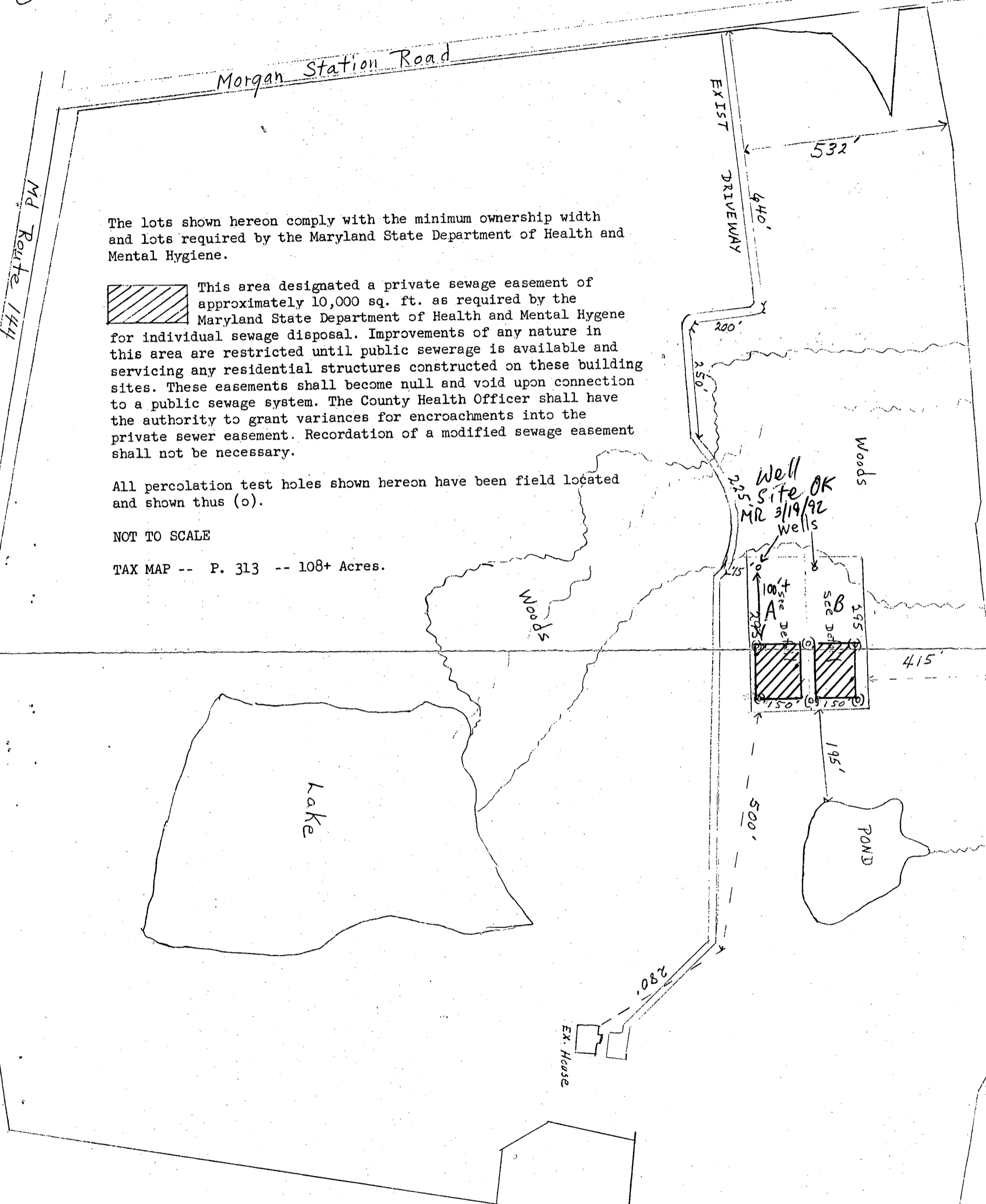
ALSO PRESENT Ricky + Kenny

Charles H. Schuger
 OWNER
 854-6217

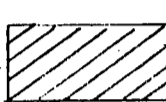
March 10, 1992
 DATE

Juan Byl
 HOWARD COUNTY HEALTH OFFICER MR

3-11-92
 DATE



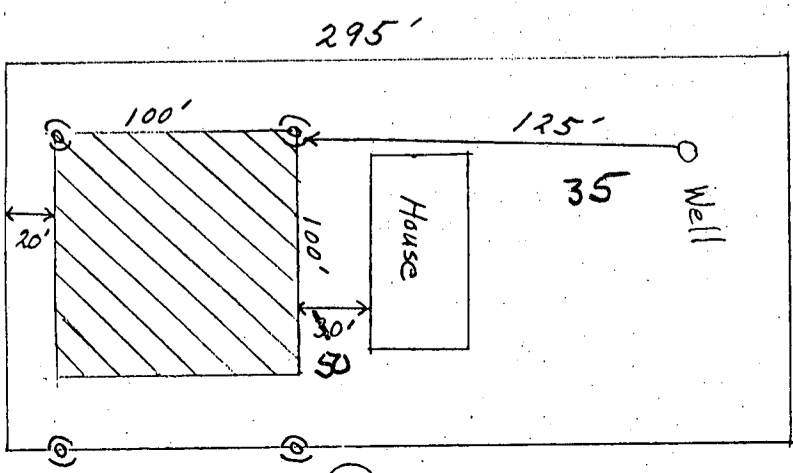
The lots shown hereon comply with the minimum ownership width and lots required by the Maryland State Department of Health and Mental Hygiene.

 This area designated a private sewage easement of approximately 10,000 sq. ft. as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewerage is available and servicing any residential structures constructed on these building sites. These easements shall become null and void upon connection to a public sewerage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewer easement. Recordation of a modified sewage easement shall not be necessary.

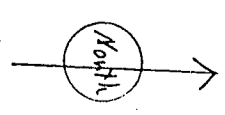
All percolation test holes shown hereon have been field located and shown thus (o).

NOT TO SCALE

TAX MAP -- P. 313 -- 108+ Acres.



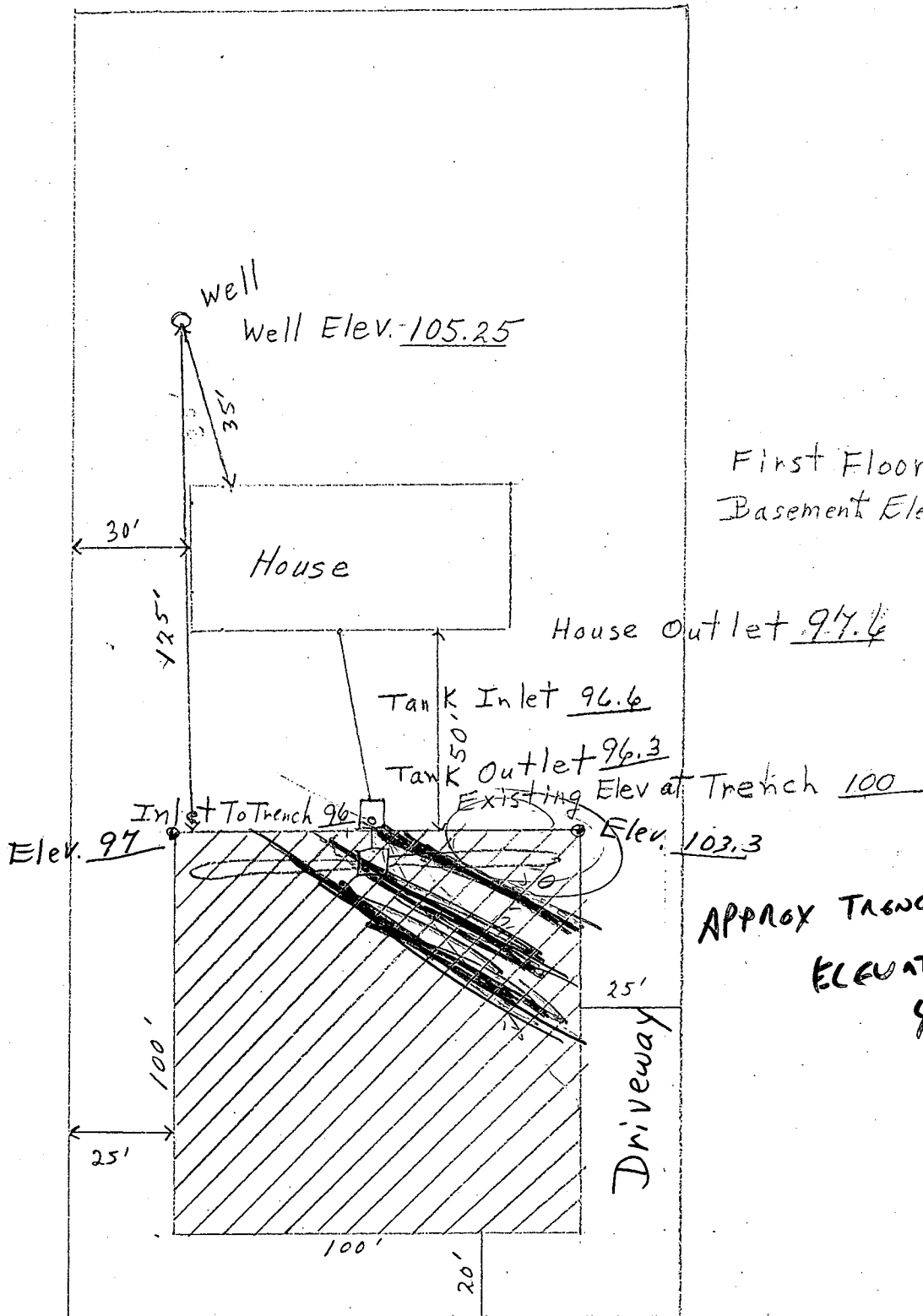
Site Detail (Typ.)
 TWO PROPOSED
 HOUSE SITES



Elevation Drawings For Building Permit Approval

RECEIVED
HOWARD COUNTY
HEALTH DEPARTMENT
Charles W. Schroyer Property

92 APR 30 AM 10:29



First Floor Elevation 108.4
Basement Elevation 98.4

APPROX TRENCH ORIENTATION
ELEVATIONS OK
4/30/92 CW

I certify that the above measurements are actual and correct for this property.

Charles W. Schroyer
Charles W. Schroyer

C1 5156 SEQUENCE NO. (DENY 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)

COUNTY NUMBER A47770

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED. 040692

Depth of Well 1785 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-92-0029

OWNER Schroyer Charles Morgan Station Rd. TOWN Lisbon SUBDIVISION Schroyer Farm SECTION LOT Tenant House A

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: Brown Shale 0-84, Blue Rock 84-185.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 18 NO. OF POUNDS 1642 GALLONS OF WATER 108 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 88

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

DEPTH (nearest ft.) HO 89 1785. SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 905 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 34 WHEN PUMPING 62 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP 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) LAND SURFACE 1 (nearest foot)

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 IDENT. NO. 938 DRILLERS SIGNATURE

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

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.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

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)

See Attached LOCATION

C1 5131 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)

Tax ID -

COUNTY NUMBER W 47774

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 04-313232

Depth of Well 130 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-2050

OWNER Dickey last name 13850 Forsythe Rd first name Jean TOWN Sykesville

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Overburden, Brown Shale, Granite, and granite.

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

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)

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), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER)

DEPTH (nearest ft.) HO 60 150. SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 489

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

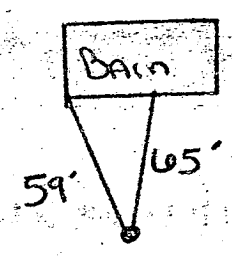
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: HOURS PUMPED (nearest hour) 1. PUMPING RATE (gal. per min. to nearest gal.) 4. METHOD USED TO MEASURE PUMPING RATE Air. WATER LEVEL (distance from land surface) BEFORE PUMPING 30. WHEN PUMPING 125. TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible.

PUMP INSTALLED DRILLER WILL INSTALL PUMP 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) LAND SURFACE (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)



1557 SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HD-88-2050
fill in this form completely

Date Received (APA) 020691
OWNER INFORMATION
DICKLEY Jean
13850 Forsythe Road
Sylesville MD 21784

LOCATION OF WELL
HOWARD
8 COUNTY
23 SUBDIVISION
SECTION 44 46 LOT 48 50
Sylesville
52 NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 3 MI

DRILLER INFORMATION
Leroy Brown
Driller's Name G. Edgar Harr Sons' Corp.
Firm Name
12047 Falls Road Cockeysville 21030
Address
Signature: Leroy Brown Date: 2/5/92

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NEAR WHAT ROAD Forsythe Road
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 4000 FT
ENTER FT or MI

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME
W47774 COUNTY NO.
STATE SIGNATURE DATE ISSUED 020592
CO SIGNATURE Mark E. Ripkin 8/5/92
NORTH GRID 551000 EAST GRID 0801000

USE FOR WATER (CIRCLE APPROPRIATE BOX)
HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 200 FEET

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
WRITE THE BOX NUMBER FROM THE MAP HERE
8001
5501

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
THIS WELL WILL NOT REPLACE AN EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A-STANDBY Additional Supply
THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (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
214192
LOCATION OK
96 FT CROWN
70 FT OPEN HOLE
20 BASE
Forsythe Road 8:13
WOOD UNDERWOOD
RH
EXISTING HOUSE WALL

Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP
FORCE MR PERMIT No. HD-88-2050

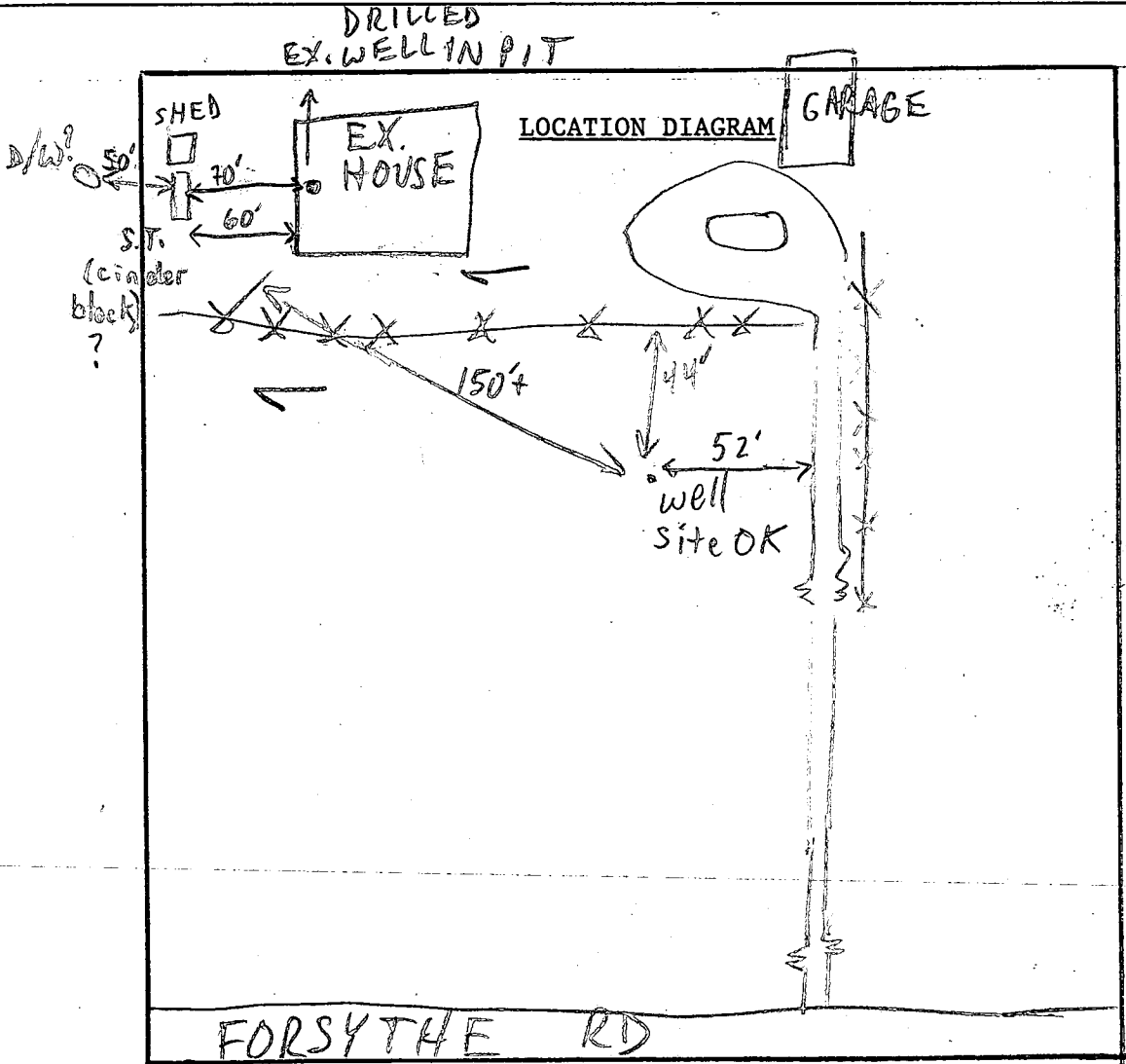
SPECIAL CONDITIONS

SITE INSPECTION SHEET

OWNER: Lean Dickey
PHONE #: 442-2226
ADDRESS: 13850 Forsythe Rd

DATE REQUESTED: 2/5/92
CONTRACTOR: Hart
WELL TAG #: HO-88-2050
COUNTY #: ~~HO 88 2050~~ W47774

PROPOSAL: _____



COMMENTS: 2/5/92 WELL SITE OK; EX. WELL

DATE: _____ INSPECTOR: _____

C1 5119 SEQUENCE NO. (DENV 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 W 47774

ST/CO USE ONLY
 DATE RECEIVED [] [] [] [] [] []
 DATE WELL COMPLETED 1 17 92

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 6/18/92 40-88-2098

OWNER John Nicky last name 13850 Forsythe Road first name TOWN Sykesville
 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	
Overburden	0	15	
Brown Shale	15	78	
Granite	78	300	X

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 20 NO. OF POUNDS 200
 GALLONS OF WATER 125
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft to 80 ft

CASING RECORD
 casing types insert appropriate code below
 ST CO STEEL CONCRETE
 PL OT PLASTIC OTHER
 MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
 ST 6 80

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

SCREEN RECORD
 screen type or open hole insert appropriate code below
 ST BR HO STEEL BRASS OPEN HOLE
 PL OT PLASTIC OTHER

DEPTH (nearest ft.)
 1 80 300
 2
 3
 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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

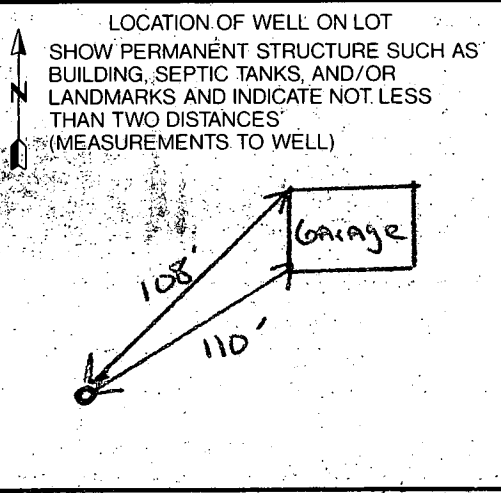
PUMPING TEST
 HOURS PUMPED (nearest hour) 1
 PUMPING RATE (gal. per min. to nearest gal.) 2
 METHOD USED TO MEASURE PUMPING RATE Air
 WATER LEVEL (distance from land surface) BEFORE PUMPING 35 WHEN PUMPING 215
 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe 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 (nearest foot)

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 IDENT. NO. 489
 DRILLERS SIGNATURE Conley Price
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



B 1 **1574** SEQUENCE NO. (DP USE ONLY)
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
 APPLICATION FOR PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-88-2048
 fill in this form completely

Date Received (APA) **012392**
 OWNER INFORMATION
 Dickey Jean
 13850 Forsythe Road
 Sykesville MD 21784

B 3 LOCATION OF WELL
Howard
 8 COUNTY 21
 23 SUBDIVISION 42
 SECTION 44 46 LOT 48 50
Sykesville
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **2** MI
 73 76 77 78

DRILLER INFORMATION
 Leroy Brown 489
 Driller's Name 77 License No. 80
 G. Edgar Hair Sons' Corp
 Firm Name
 12047 Falls Rd Cockeysville
 Address
 Leroy Brown 1/21/92
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 N, NE, E, SE, S, SW, W, NW
 TOWN
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH, WEST, SOUTH, EAST
 13850 Forsythe Rd
 11 NEAR WHAT ROAD 30
 34 1000 37
 DISTANCE FROM ROAD
 ENTER FT or MI 38 39

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **750**

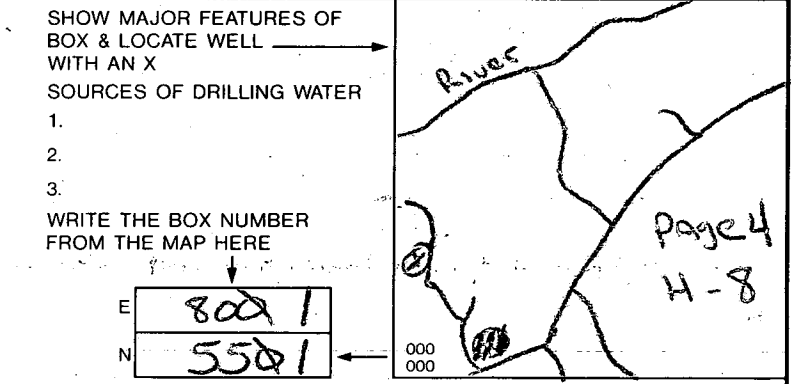
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 Howard W47774
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE INSERT S 41
 DATE ISSUED 01/31/92
 CO SIGNATURE EXP. DATE 07-31-92
 NORTH GRID 551000 EAST GRID 0801000
 50 55 57 63

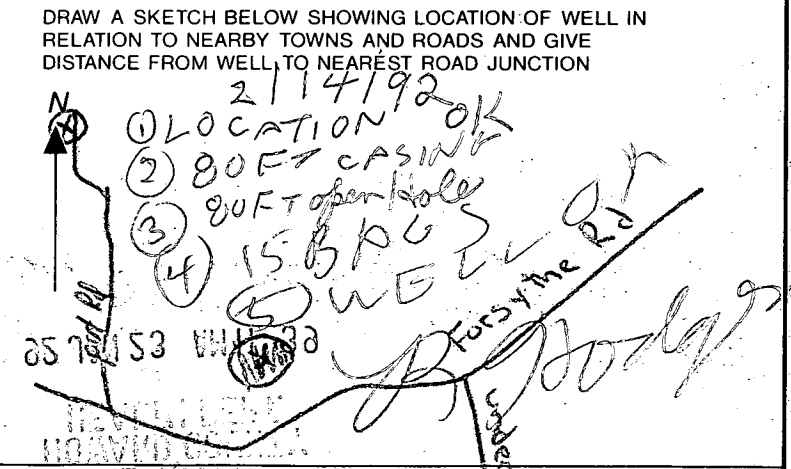
APPROXIMATE DEPTH OF WELL **200** FEET
 24 28

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 DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 54 63
 FORCE R P WRITE INITIALS IN BOX PERMIT No. HO-88-2048
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

EXISTING BARN WELL
 COUNTY

SITE INSPECTION SHEET

OWNER: Sean Dickey

DATE REQUESTED: 1-23-92

PHONE #: 442-2226

CONTRACTOR: J. Edgar Harr Sons

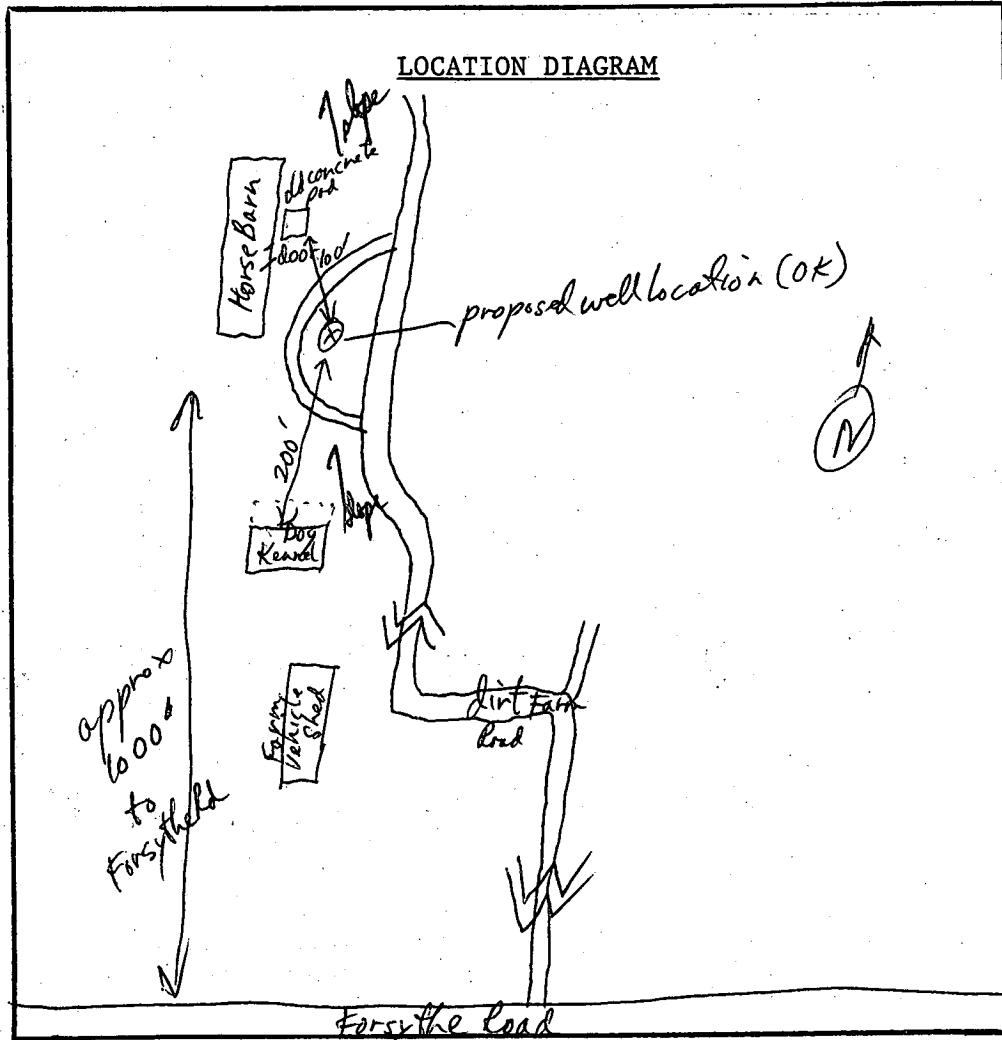
ADDRESS: 13850 Forsythe Rd

WELL TAG #: HO-88-2048

Sykeeville

COUNTY #: Howard (W 47774)

PROPOSAL: Well for agricultural farm purposes only



COMMENTS: Suitable distance from possible sources of contamination.
well site approved RP 1-30-92

DATE: 1-30-92

INSPECTOR: Russell [Signature]