

NO # found on back flap

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 41402

A 37250

DISTRICT 5th

DATE 4/5/88

DATE SYSTEM APPROVED 4/12/88

INSPECTOR R17

Dave Hopkins

IS PERMITTED TO INSTALL X ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Thistledown ROAD 7205 Tall Pine Way LOT 9

PROPERTY OWNER Steve Cohen

7205 Tall Pine Way

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 175 feet down the left (468') lot line and 65 feet off the left lot line as seen when facing the lot from Tall Pine Way. Run trenches on contour toward the right lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY S. Abel DATE 1/09/87

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

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.

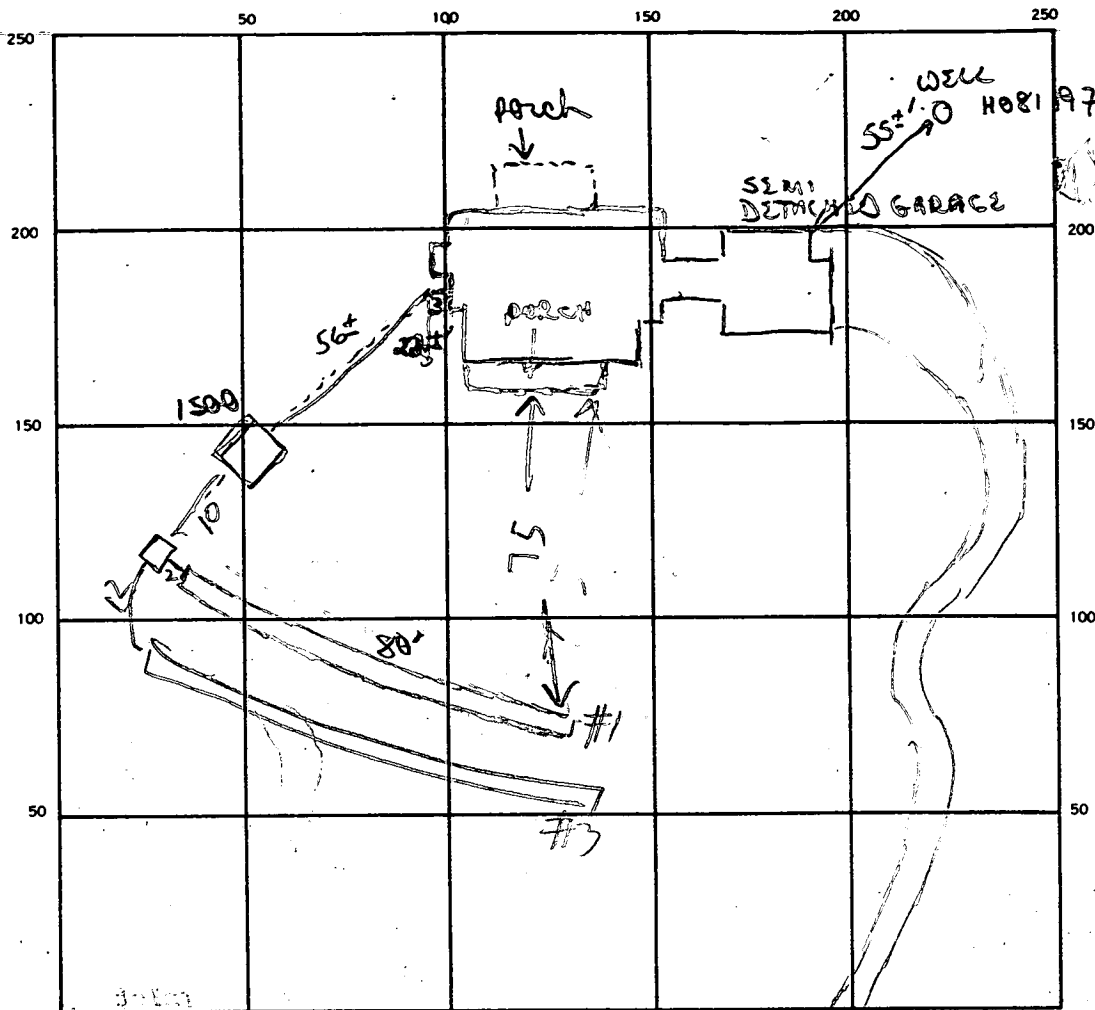
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 37250



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

TO MEADOWOOD DR ← TALL PINE WAY

SEPTIC TANK LEVEL 1500 gal CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 5' / 5 FT. TOTAL LENGTH 80 + 90 FT. 7 INSTALLED REQUIRE

NUMBER OF TRENCHES 2+ ONE SIDEWALL/BOTTOM AREA 400 / 450 SQ. FT. 850 / 800

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 4/11/88 OK to add stone pipe paper to trench #1 OK to start
trench #2 + stone pipe paper if unable to inspect in am
OK to hook up all piping.
4/12/88 JOB FINISHED

DATE SYSTEM APPROVED 4/12/88 INSPECTOR Raymond P. Hodge

SUBDIVISION: THISTLE DOWN

LOT NUMBER: 9

DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>sq. ft./bedroom</u>
3 bedroom	1000 gallon	<u>Minimum Total square Feet</u>
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES160 sq. ft./bedroomTrench to be 2 wide.Inlet 3.5 feet below original grade.Bottom maximum depth 8.5 feet below original grade.Effective area begins at 3 feet below original grade.5 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX 175 FE DOWN THE LEFT (463') LOT
LINE AND 65 FE OFF THE LEFT LOT LINE AS SEEN WHEN FACING
THE LOT FROM TALL PINE WAY. RUN TRENCHES ON CONTOUR
TOWARD THE RIGHT LOT LINE, 1-9-87 S.D. AHLR

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37250

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 6/25/86

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 Grace E. Lager Steve Cohen
c/o Tom Lloyd

ADDRESS Lloyd, Kane and Wieder 2716 Court Place PHONE _____
Ellicott City, Maryland 21043

PROPERTY LOCATION:

SUBDIVISION Thistledown LOT NO. 10 9 on Prelim

ROAD AND DESCRIPTION South Guilford Road between Hall Shop and Pindell School Road.

7205 Tall Pine way

SIZE OF LOT 3.1 acres TYPE BLDG. residential
(NUMBER OF 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. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY Siching Abel FOR Deep trenches DATE 1-9-87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7-17-86 PERC SATISFACTORY; OK FOR DEEP SYST. HOLD FOR SUBMISSION

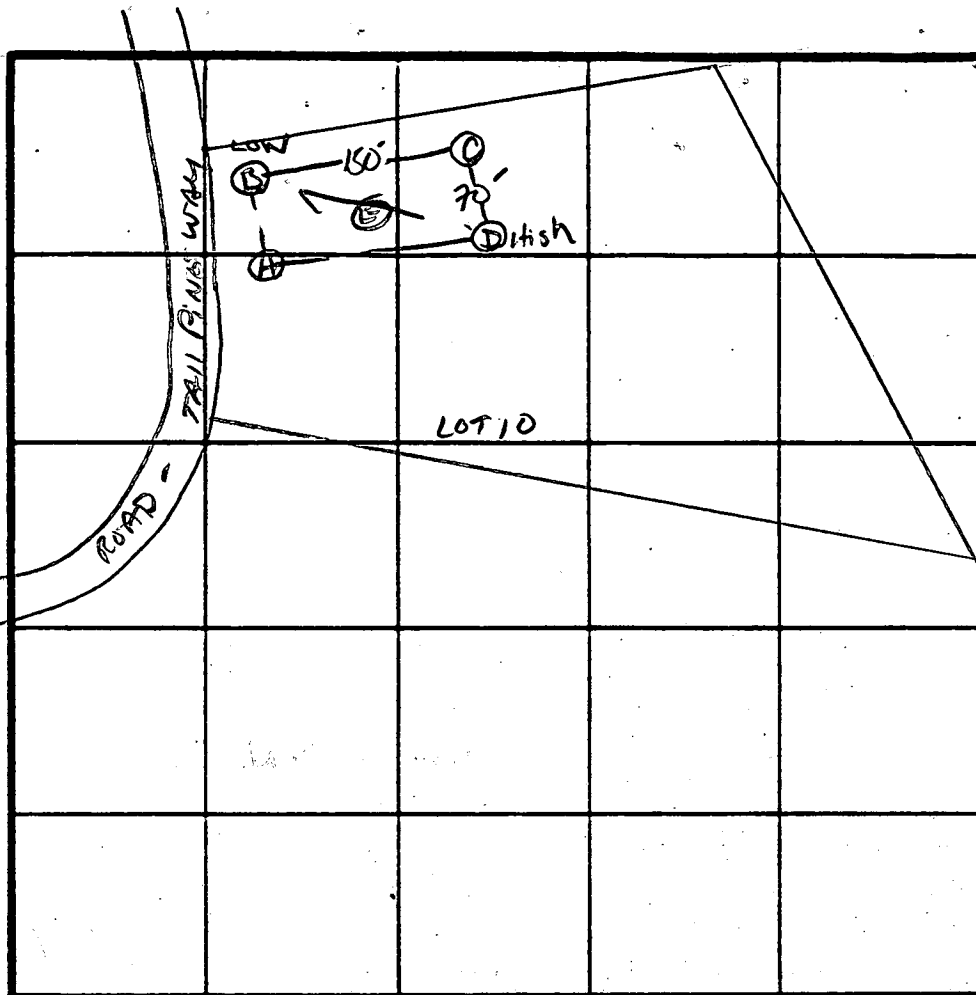
PLAT. S. ABEL

BLDG. PERMIT SIGNED
AND RETURNED 7/14/87

BP 12748 886

THIS IS NOT A PERMIT

①
 SOIL PROFILE
 0
 9" AP
 Yellow BR.
 Silty loam
 <10%
 FRAGMENTS
 10-12%
 CLAY
 3-35"
 Yellow BR.
 w/ PINK
 COATS
 <10%
 FRAGMENTS
 13"



2 PERC
 7min
 160¢/BR
 INLET 3.5
 BOTTOM 8.5
 5' STONE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rt 32 V

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/17/86	A S	3.5" 14"	2:19 UNIFORM	2:21 SOIL below	2:21 3.5"	2:27	6 MIN
	B S	3.5 13	1:54 UNIFORM	1:58 SOIL comp	1:58 below 3.5"	2:06	8 MIN
	C S	4" 13"	2:02 UNIFORM	2:03 SOIL below	2:03 3"	2:04	1 MIN
	D S	4.5" 9"	2:07 2:09	2:16 2:11	2:16 2:11	2:29 2:16	13 MIN 5 MIN
	DV	13"	uniform soil below 4"				
	E	12"	uniform below 3.5"				

REMARKS 1603 PER PLAT / OK DEEP SYSTEM

TYPE OF SOIL Chester

TESTED BY S. Abel

ALSO PRESENT MARRIC, Allen backhoe

APPLICATION

SEWAGE DISPOSAL TESTING

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HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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TELEPHONE: 992-2330

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(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

37250

Depth 140'

New Installation ☒
Replacement ☐

Receipt #
Date

Name of Installer

Crouse P+H Inc

Telephone

531-3311

License number

2356

Certified Well Pump Installer

Well Driller

Registered Plumber

Name of Property Owner

Mr. & Mrs. Cohen

Telephone

547-4270

Subdivision

Thistle Down

Lot #

9

Well tag #

Site Address

7205 Tall Pine Way

Pump

1. Type

a. Deep well jet

b. Shallow well jet

c. Submersible ☒

2. Make

GOULD

3. Model #

4. Capacity

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

2. RPM

3. Voltage

a. 110

b. 220 ☒

Pitless Adapter

1. Make

2. Model #

3. Depth

Tank

1. Capacity

60 GAL

2. Pressure relief valve? ☐

Piping

1. Type

PLASTIC

2. Size

1"

3. NSF and/or BOCA Code approved ☐

4. Depth of supply line

42"

Well data

1. Depth

ft.

2. Yield

GPM

3. Static water level

ft.

4. Will water supply be disinfected by installer? ☐

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.

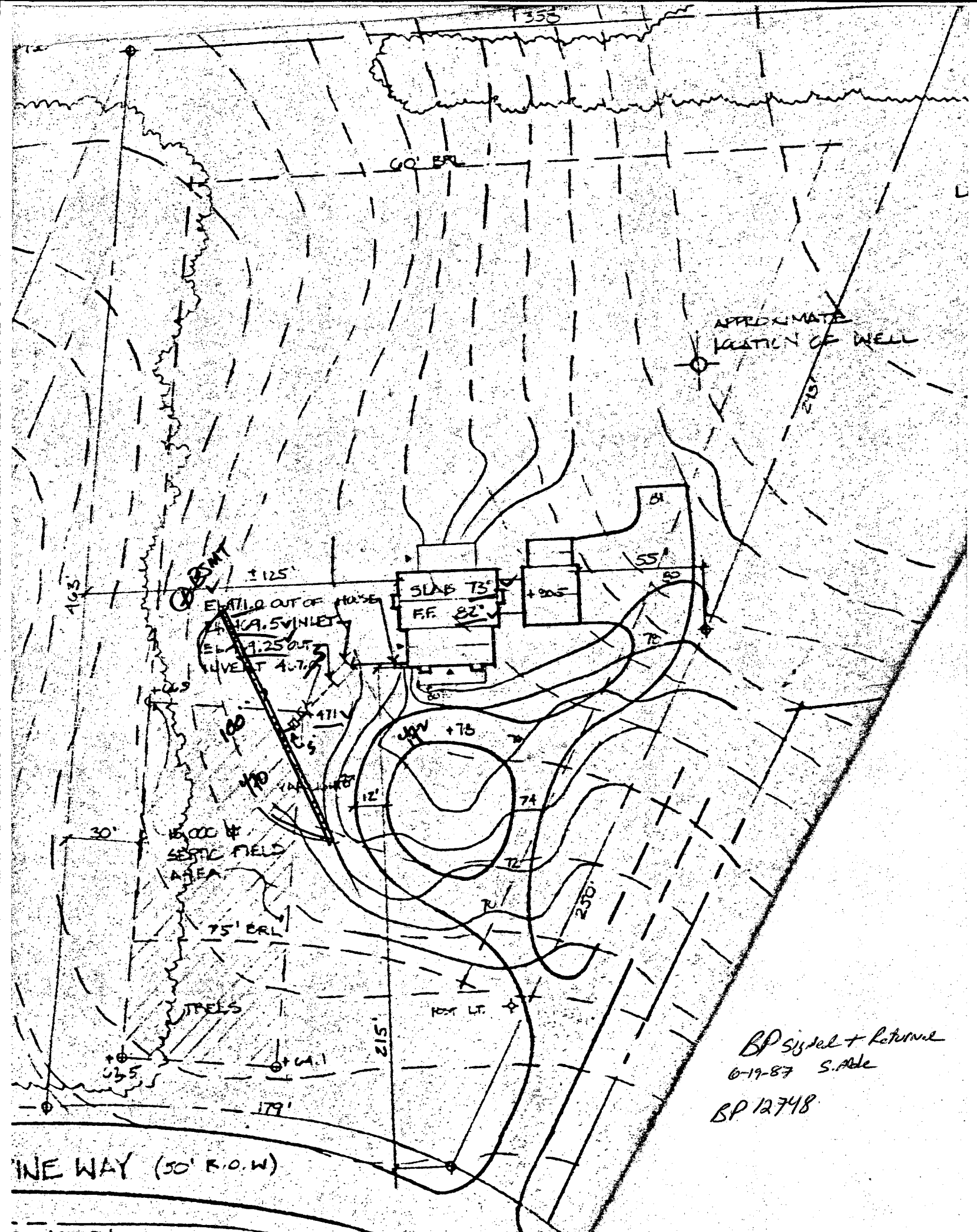
Signature of Applicant:

Charles J. Crouse

Date:

January 21, 1988

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



B 7 1538

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
7/6/87 PERMIT TO DRILL WELL
Am please print or type

OEP PERMIT NUMBER

40-81-1973

fill in this form completely

Date Received

7/1/87

OWNER INFORMATION

CIVILIAN HILL IMPROVEMENT

15 Last Name Owner First Name 34

10005 CLD COLUMBIA RD

36 Street or RFD 55

LAWRENCE HILL MD 21046

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Driller's Name 238 77 License No. 80

Firm Name W.H. DRILLING

Address 5512 Ridge Rd. Mt. Airy Md. 21071

Signature 1/7/87 Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

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 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 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 DEEPEINED WELLS
(CIRCLE APPROPRIATE BOX)☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY☐ THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER 54 GAP 63

FORCE 67 68 WRITE INITIALS IN BOX PERMIT NO. 40-81-1973 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

B 3

LOCATION OF WELL

HILLARY

8 COUNTY 21

HISTLETON

23 SUBDIVISION 42

SECTION 1 LOT 9

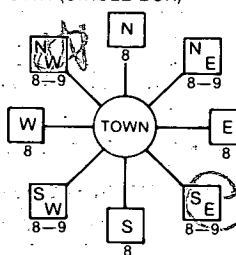
CLARKSVILLE

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 2 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Tall Pine Way

NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



330 34 37 DISTANCE FROM ROAD

ENTER FT or MI 38 39

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD

COUNTY NAME

A37250

COUNTY NO.

OEP

SIGNATURE

STATE HEALTH

INSERT S

DATE ISSUED

03/1/87 B. Nylon 09/11/87

NORTH

GRID

490000

EAST

GRID

0822000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. WELL

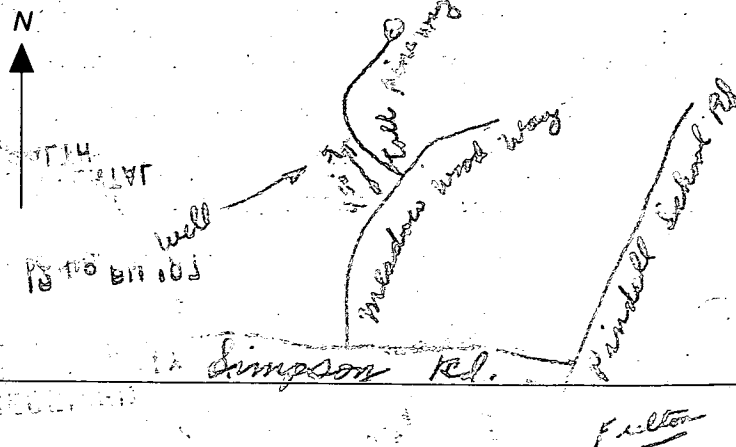
2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

8200
49007/6/87
WELL OK
SEE OTHER
SIDE
RA

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



- ① 53 FT open hole
② 60 FT casing 2 ft out of ground /
LOCATION OK

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
JAN 8 12 48 PM '87
DIVISION OF
ENVIRONMENTAL
HEALTH

HARLES EAVILSON
BET. 442, FOLI 2-202
ZONING

LOT #10
3027

LOT #11
5.356 AC

LOT-23

SON WOODS
ION-3, AREA 1
AT NO 4562
ZONING

LOT #5
2.266

LOT-22

LOT-21

EX 30' STORM
DRAINAGE EASMENT

172' TALL
PROP. PAVING

Crystal Hill Investments

10005 Old Columbia Rd.

Columbia Rd 21046

Steve Murray

381-4444

Page 2 of 2
Date July 4, 1987

9/1/8 7:30 AM - ~~9:00 AM~~ 3 hrs?
9:00 AM - ~~grout~~
7/6/87

Review _____

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 87-1973
Location of property (road) TALL PINEWAY
Subdivision THISTLE DOWN Lot 9 Block _____ Plat _____ Sec. 1
Well Driller JOSEPH MAYNE Owner INVESTMENT, CRYSTAL HILL

Depth of well 142
Distance of measuring point (M.P.) above ground 2 1/2
Static water level (S.W.L.) below M.P. 43

I. High rate pumping -- reservoir drawdown

Time pump started 1200 Pumping rate 10
Total time 30 MIN to reach pumping water level 9.3 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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
1215	72	6		10
1230	93	6		10
1245	93	10		6
1300	93	10		6
1315	93	10		6
1330	93	10		6
1345	93	10		6
1400	93	10		6
1415	93	10		6
1430	93	10		6
1445	93	10		6
1500	93	10		6
1515	93	10		6
1530	93	10		6
1545	93	10		6
1600	93	10		6
1615	93	10		6
1630	93	10		6
1645	93	10		6
1700	93	10		6
1715	93	10		6
1730	93	10		6
1745	93	10		6
1800	93	10		6
1815	93	10		6
1830	93	10		6
1845	93	10		6
1900	93	10		6
1915	93	10		6
1930	93	10		6
1945	93	10		6
2000	93	10		6
2015	93	10		6
2030	93	10		6
2045	93	10		6
2100	93	10		6
2115	93	10		6
2130	93	10		6
2145	93	10		6
2200	93	10		6
2215	93	10		6
2230	93	10		6
2245	93	10		6
2300	93	10		6
2315	93	10		6
2330	93	10		6
2345	93	10		6
2400	93	10		6
2415	93	10		6
2430	93	10		6
2445	93	10		6
2500	93	10		6
2515	93	10		6
2530	93	10		6
2545	93	10		6
2600	93	10		6
2615	93	10		6
2630	93	10		6
2645	93	10		6
2700	93	10		6
2715	93	10		6
2730	93	10		6
2745	93	10		6
2800	93	10		6
2815	93	10		6
2830	93	10		6
2845	93	10		6
2900	93	10		6
2915	93	10		6
2930	93	10		6
2945	93	10		6
3000	93	10		6
3015	93	10		6
3030	93	10		6
3045	93	10		6
3100	93	10		6
3115	93	10		6
3130	93	10		6
3145	93	10		6
3200	93	10		6
3215	93	10		6
3230	93	10		6
3245	93	10		6
3300	93	10		6
3315	93	10		6
3330	93	10		6
3345	93	10		6
3400	93	10		6
3415	93	10		6
3430	93	10		6
3445	93	10		6
3500	93	10		6
3515	93	10		6
3530	93	10		6
3545	93	10		6
3600	93	10		6
3615	93	10		6
3630	93	10		6
3645	93	10		6
3700	93	10		6
3715	93	10		6
3730	93	10		6
3745	93	10		6
3800	93	10		6
3815	93	10		6
3830	93	10		6
3845	93	10		6
3900	93	10		6
3915	93	10		6
3930	93	10		6
3945	93	10		6
4000	93	10		6
4015	93	10		6
4030	93	10		6
4045	93	10		6
4100	93	10		6
4115	93	10		6
4130	93	10		6
4145	93	10		6
4200	93	10		6
4215	93	10		6
4230	93	10		6
4245	93	10		6
4300	93	10		6
4315	93	10		6
4330	93	10		6
4345	93	10		6
4400	93	10		6
4415	93	10		6
4430	93	10		6
4445	93	10		6
4500	93	10		6
4515	93	10		6
4530	93	10		6
4545	93	10		6
4600	93	10		6
4615	93	10		6
4630	93	10		6
4645	93	10		6
4700	93	10		6
4715	93	10		6
4730	93	10		6
4745	93	10		6
4800	93	10		6
4815	93	10		6
4830	93	10		6
4845	93	10		6
4900	93	10		6
4915	93	10		6
4930	93	10		6
4945	93	10		6
5000	93	10		6
5015	93	10		6
5030	93	10		6
5045	93	10		6
5100	93	10		6
5115	93	10		6
5130	93	10		6
5145	93	10		6
5200	93	10		6
5215	93	10		6
5230	93	10		6
5245	93	10		6
5300	93	10		6
5315	93	10		6
5330	93	10		6
5345	93	10		6
5400	93	10		6
5415	93	10		6
5430	93	10		6
5445	93	10		6
5500	93	10		6
5515	93	10		6
5530	93	10		6
5545	93	10		6
5600	93	10		6
5615	93	10		6
5630	93	10		6
5645	93	10		6
5700	93	10		6
5715	93	10		6
5730	93	10		6
5745	93	10		6
5800	93	10		6
5815	93	10		6
5830	93	10		6
5845	93	10		6
5900	93	10		6
5915	93	10		6
5930	93	10		6
5945	93	10		6
6000	93	10		6
6015	93	10		6
6030	93	10		6
6045	93	10		6
6100	93	10		6
6115	93	10		6
6130	93	10		6
6145	93	10		6
6200	93	10		6
6215	93	10		6
6230	93	10		6
6245	93	10		6
6300	93	10		6
6315	93	10		6
6330	93	10		6
6345	93	10		6
6400	93	10		6
6415	93	10		6
6430	93	10		6
6445	93	10		6
6500	93	10		6
6515	93	10		6
6530	93	10		6
6545	93	10		6
6600	93	10		6
6615	93	10		6
6630	93	10		6
6645	93	10		6
6700	93	10		6
6715	93	10		6
6730	93	10		6
6745	93	10		6
6800	93	10		6
6815	93	10		6
6830	93	10		6
6845	93	10		6
6900	93	10		6
6915	93	10		6
6930	93	10		6
6945	93	10		6
7000	93	10		6
7015	93	10		6
7030	93	10		6
7045	93	10		6
7100	93	10		6
7115	93	10		6
7130	93	10		6
7145	93	10		6
7200	93	10		6
7215	93	10		6
7230	93	10		6
7245	93	10		6
7300	93	10		6
7315	93	10		6
7330	93	10		6
7345	93	10		6
7400	93	10		6
7415	93	10		6
7430	93	10		6
7445	93	10		6
7500	93	10		6
7515	93	10		6
7530	93	10		6
7545	93	10		6
7600	93	10		6
7615	93	10		6
7630	93	10		6
7645	93	10		6
7700	93	10		6
7715	93	10		6
7730	93	10		6
7745	93	10		6
7800	93	10		6
7815	93	10		6
7830	93	10		6
7845	93	10		6
7900	93	10		6
7915	93	10		6
7930	93	10		6
7945	93	10		6
8000	93	10		6
8015	93	10		6
8030	93	10		6
8045	93	10		6
8100	93	10		6
8115	93	10		6
8130	93	10		6
8145	93	10		6
8200	93	10		6
8215	93	10		6
8230	93	10		6
8245	93	10		6
8300	93	10		6
8315	93	10		6
8330	93	10		6
8345	93	10		6
8400	93	10		6
8415	93	10		6
8430	93	10		6
8445	93	10		6
8500	93	10		6
8515	93	10		

C12307SEQUENCE 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.
COUNTY NUMBERA37250

DATE Received

DATE WELL COMPLETED07/06/87

Depth of Well2214226
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HC-81-11973

OWNER

STREET OR RFDlast nameTHISTLE DOWNTownCRYSTAL HILL

SUBDIVISIONSECTION1LOT9

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
FROMTO

Check
if water
bearing

SAND

034

GRAY MICA BED

54142

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS15NO. OF POUNDS1410

GALLONS OF WATER90

DEPTH OF GROUT SEAL (to nearest foot)
from0ft. to53ft.
(enter 0 if from surface)

CASING RECORD

casing types
insert
appropriate
code
below

STCO
STEELCONCRETE
PLOTP
PLASTICOTHER

MAIN Casing TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

ST6061A6364406570

OTHER CASING (if used)

diameter
inchdepth (feet)
fromto

EACH CASING

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

STBRHO
STEELBRASSOPEN
HOLE
PLBRONZEHOLE
OTPLASTICOTHER

C2

DEPTH (nearest ft.)

EACH SCREEN

1H258142

2

3

SLOT SIZE 123

DIAMETER OF SCREEN5660 (NEAREST INCH)

fromto

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

7072747576

TELESCOPE CASINGLOG INDICATOROTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min. to nearest gal.)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)
BEFORE PUMPING43
WHEN PUMPING93

TYPE OF PUMP USED (for test)
AairPpistonTturbine
CcentrifugalRrotaryOother (describe below)
JjetSsubmersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YESNO

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)

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)

3' 0"

12' 0"

WELL

DRIVEWAY

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. 238

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

Well Permit No. HO - 81-1973
Location of property (road) TALL PINE WAY
Subdivision THISTLEDOWN Lot 9 Block Plat Sec. 1
Well Driller JOSEPH MAYNE Owner INVESTMENT, CRYSTAL HILL

Depth of well 142
Distance of measuring point (M.P.) above ground 23
Static water level (S.W.L.) below M.P. 43

Time pump started 12:00 Pumping rate 10 gal.
Total time 30 min to reach pumping water level 93 ft. below M.P.

[illegible]