9/10/84 (AM.)

03-300005

approved 9/10/84 Stage V

P 34126

A Repair

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEX

ELLICOTT CITY
DISTRICT 3rd

DATE 7/20/84

Alan Mink IS PERMITTED TO INSTALL ____ ALTER X

ADDRESS 13088 Williamfield Drive, Ellicott City, Md. 21043 PHONE 531-3693

SUBDIVISION ~~Kingston~~ Rosemary Estates ROAD 13088 Williamfield Drive LOT 15B

PROPERTY OWNER Alan Mink

ADDRESS 13088 Williamfield Drive, Ellicott City, Md. 21043 Phone: 531-3693

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 - Need trench 25 feet long, 2 feet wide, 11 feet deep, 7 feet of stone.

Add new trench off old trench.

Direction Williamfield to END then left into woods (gravel DW)

Cedar Sid.

BLDG. PERMIT SIGNED AND RETURNED 7/20/84

special #6021 addition

PLANS APPROVED BY Frank A. Skinner DATE 7/20/84

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE YEARS.

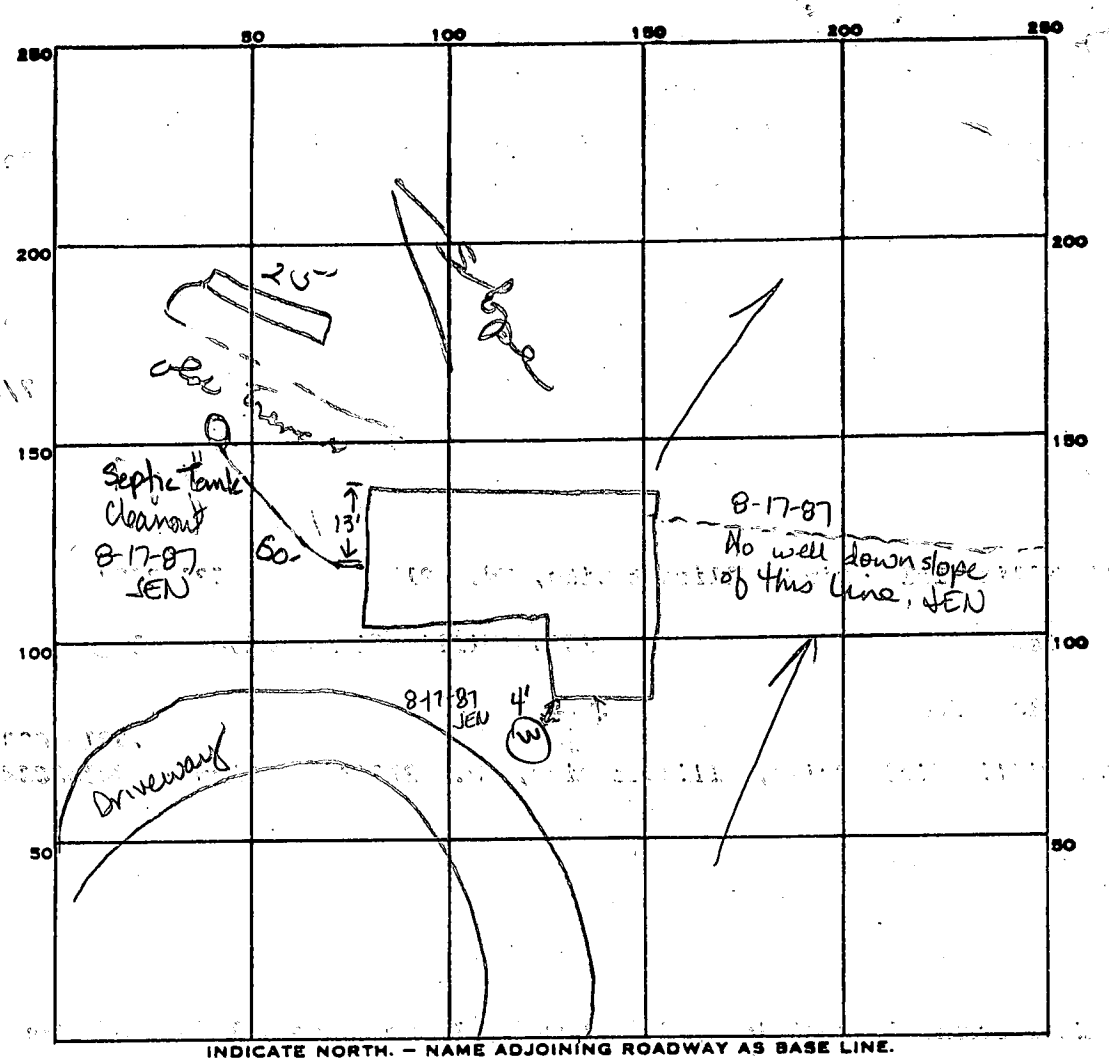
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

P 34126



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 IN. TOTAL LENGTH 25 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 175

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 175 SQ. FT.

REMARKS 9/10/84 OK to add stone in trench JS

9/10/84 - OK to cover all work JS

DATE SYSTEM APPROVED 9/10/84 INSPECTOR S Tanzer

REGION _____ AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health

BUREAU OF ENVIRONMENTAL HEALTH

RECORD OF INVESTIGATION

DISPOSITION	DATE

LOCATION 13088 Williamfield Drive, Ellicott City ZIP 21043

OWNER ☑
OCCUPANT ☐ Alan Mink ADDRESS same as above PHONE 531-3699

COMPLAINANT Well site inspection ADDRESS same as above PHONE _____

REASON FOR INVESTIGATION Owner would like to replace well and use original well for a back-up. Low yield

CODES _____

RECEIVED BY JE Nadeau DATE 8-17-87 ASSIGNED TO _____ DATE _____

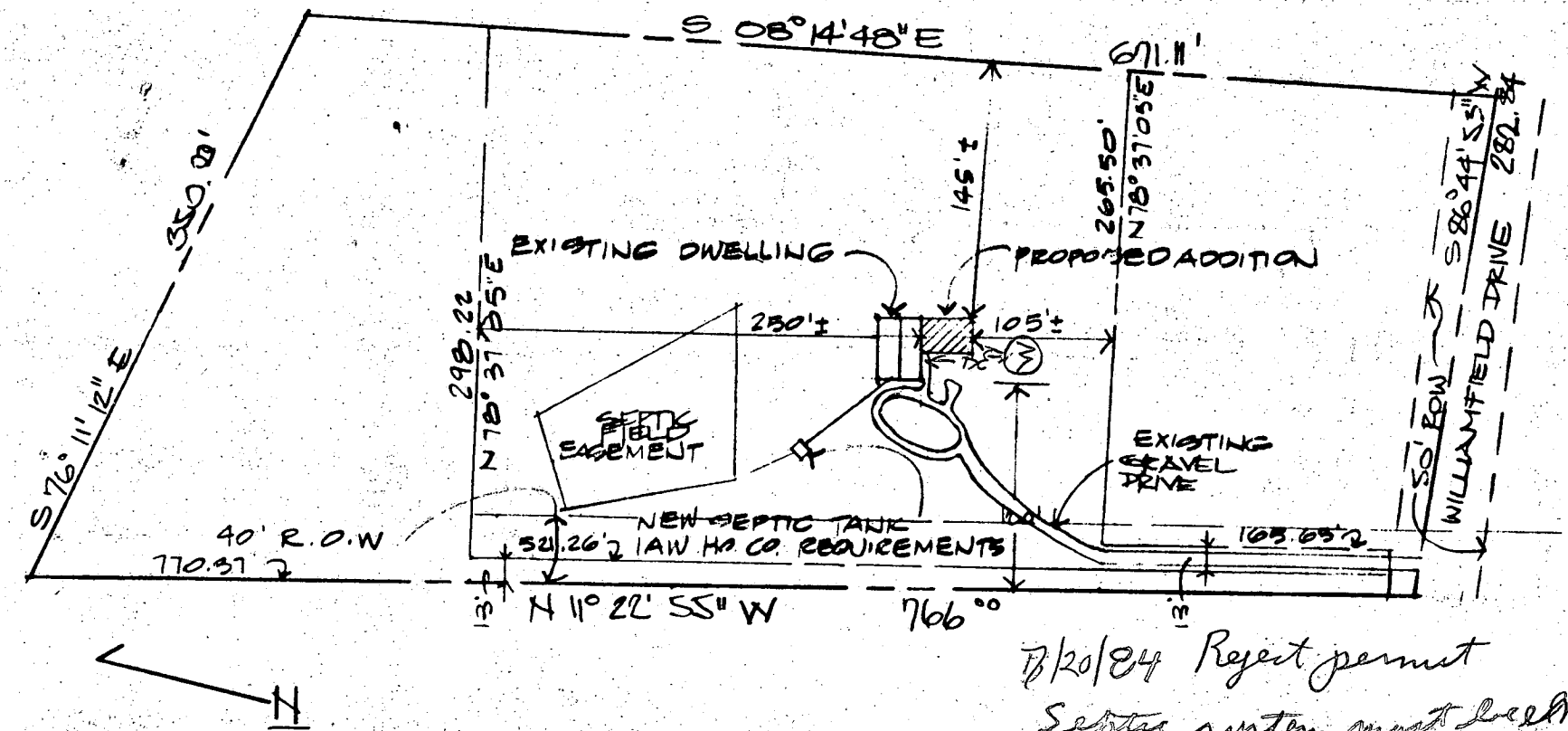
DATE OF INVESTIGATION 8-17-87 TIME 10:00 am WEATHER Sunny 90°±

REPORT Owner wants to drill an additional well to suppliment his low yield well. Easterday recommended an area lower than the existing septic tank. Well should not be staked lower than the ~~basement~~ floor elevation at the back of the house.

DATE SUBMITTED 8-17-87 SANITARIAN Jane E. Nadeau

HD-172

8-17-87
Well HO-73-1076 is
44 from addition. JEJ



SITE PLAN

EXISTING HOUSE LOCATION
LOT 15 - ROSEMARY ESTATES (5.003 AC.±)
3RD ELECTION DISTRICT, HO. CO.

SCALE 1"=100'

8/20/84 Reject permit
Septic system must be enlarged
Waiver letter should be written
for well location. Well is 34 ft from
House but after addition would
be only 15 ft from Well RH

REVISIONS

CRAIG L STEWART

1/30/76 11:00 A.M. Wanted if possible

PERMIT

Block HL 1-30-76

P 22707

A 21454

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 1/14/76

Jack Fyock IS PERMITTED TO INSTALL X ALTER

ADDRESS Ten Oaks Road, Glenelg, Maryland PHONE 286-2939

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION (Rosemary Estates) ROAD Williamfield Drive LOT 15

PROPERTY OWNER Alan Mink

ADDRESS 1510 Kanawha Street, Adelphia, Md. 20783 Phone: 445-1118

SPECIFICATIONS 3 bedrooms

DRAIN FIELD ____ DEPTH ____ FEET, BOTTOM AREA ____ SQ. FT.

SEEPAGE PITS ____ ABSORBENT SIDE-WALL AREA ____ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

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

OTHER Trench - 75 ft. long for a total of 525 sq. ft. absorbent area. Inlet at 4 ft. and maximum depth 11 ft. Locate the trench 50 ft. from the left lot line and 385 ft. from the front lot line as seen when facing the property from the end of Williamfield Drive. Keep trench on as level ground as possible. If septic tank is 3 ft. of more below grade, use manhole type cleanout to grade. CALL FOR INSPECTION OF TRENCH BEFORE PLACING STONE IN TRENCH.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY Frank Skinner DATE 8/29/75 & 1/14/76

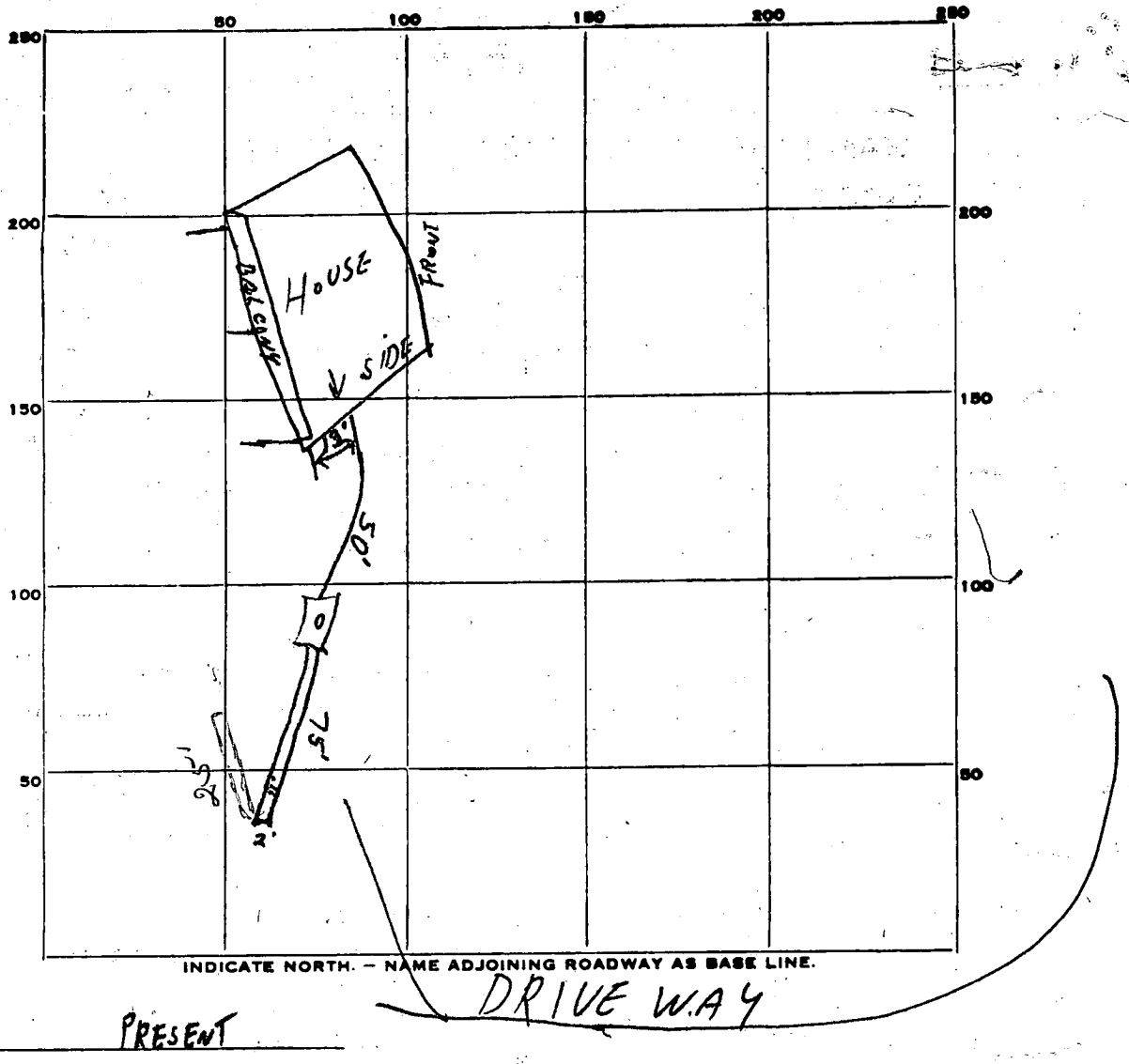
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

BLDG. PERMIT SIGNED AND RETURNED 7/20/84

Sewer # 60121 Addition

A 21454



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD PRESENT

SEPTIC TANK, LEVEL OK CLEANOUTS OK S.T

~~DISTRIBUTION BOX, LEVEL~~ INLET PIPE COMES IN AT 4'

~~TILE FIELD,~~ TRENCH DEPTH 11' FT. TRENCH WIDTH 2' FT.

GRAVEL DEPTH 7.0 FT. TOTAL LENGTH 75' FT.

25
3 | 75

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA N/A

SEEPAGE PITS, INSIDE DIAMETER N/A FT. DEPTH BELOW INLET N/A FT.

ABSORBENT AREA 525 EXACTLY SQ. FT.

REMARKS 1-30-76 OK TO PUT REST OF GRAVEL IN SYSTEM & BACKFILL.

DATE SYSTEM APPROVED 1-30-76 INSPECTOR H. J. ZBAR

Rosewood Estates 1/14/76

LOT NUMBER 15

Absorbant Area/bedroom _____ SEPTIC TANK 1000 gal 3 bdrms 1250 gal 4 bdrms 1500 gal 5 bdrms

___ DRY WELL _____ inlet _____ Max. depth _____ Abs. Area

Located _____

X TRENCH 4ft Inlet 11ft Max. depth

# bedrooms	Length	Abs. Area
3	75	525 SQ. FT.
4	100	700 SQ. FT.

Locate the trench 50 ft from the East lot line and 385 ft from the front lot line on the upper side of the property at the end of Willowfield Drive. Keep trench on as level ground as possible

If dry well and trench are used leave a 5' earth buffer between them.

√If septic tank is 3' or more below grade, use manhole type cleanout to grade.

√If more than one trench is used space them parallel , twice their depth apart.

√Call office for inspection of trench before placing stone in trench.

√All pipe from house to disposal area cast iron.

√Install standpipe (6" min.) on septic tank ~~and dry well~~. Cast iron, concrete, terra cotta ok. Trench distribution lines may be clay, asbestos cement, orangburg type, open joint cast iron or heavy duty plastic.(Commercial standard Cs228-61).

4-12' holes on 10,000 sq. ft.

Re-test

Mink

APPLICATION

A 21454

P

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE 5/6/75

3 B.R. 1000 gal. septic tank | 4 B.R. 1250 gal. septic tank

Dry well to have 125 Sq. ft. effective sidewall absorption area per bedroom to begin below the first 4 ft. of non-porous soil. Maximum depth permitted for dry well is 12 ft. below original grade. Place the dry well 385 ft. from the front lot line and 50 ft. from the left side line as seen when facing the property from Williamfield Drive.

NOTE: Manhole type cleanout to grade is required if septic tank is more than 3 ft. in ground.

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 Alan Mink

ADDRESS 1510 Kanawha Street, Adelphia, Md. 20783 PHONE 301-445-1118

PROPERTY LOCATION:

SUBDIVISION (Rosemary Estates) LOT NO. 15

ROAD AND DESCRIPTION Williamfield Drive

SIZE OF LOT 5.003 acres TYPE BLDG. (3) or 4
NUMBER OF BEDROOMS (Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

BLDG. PERMIT SIGNED AND RETURNED 8/29/75

SIGNATURE OF APPLICANT /s/ Alan Mink

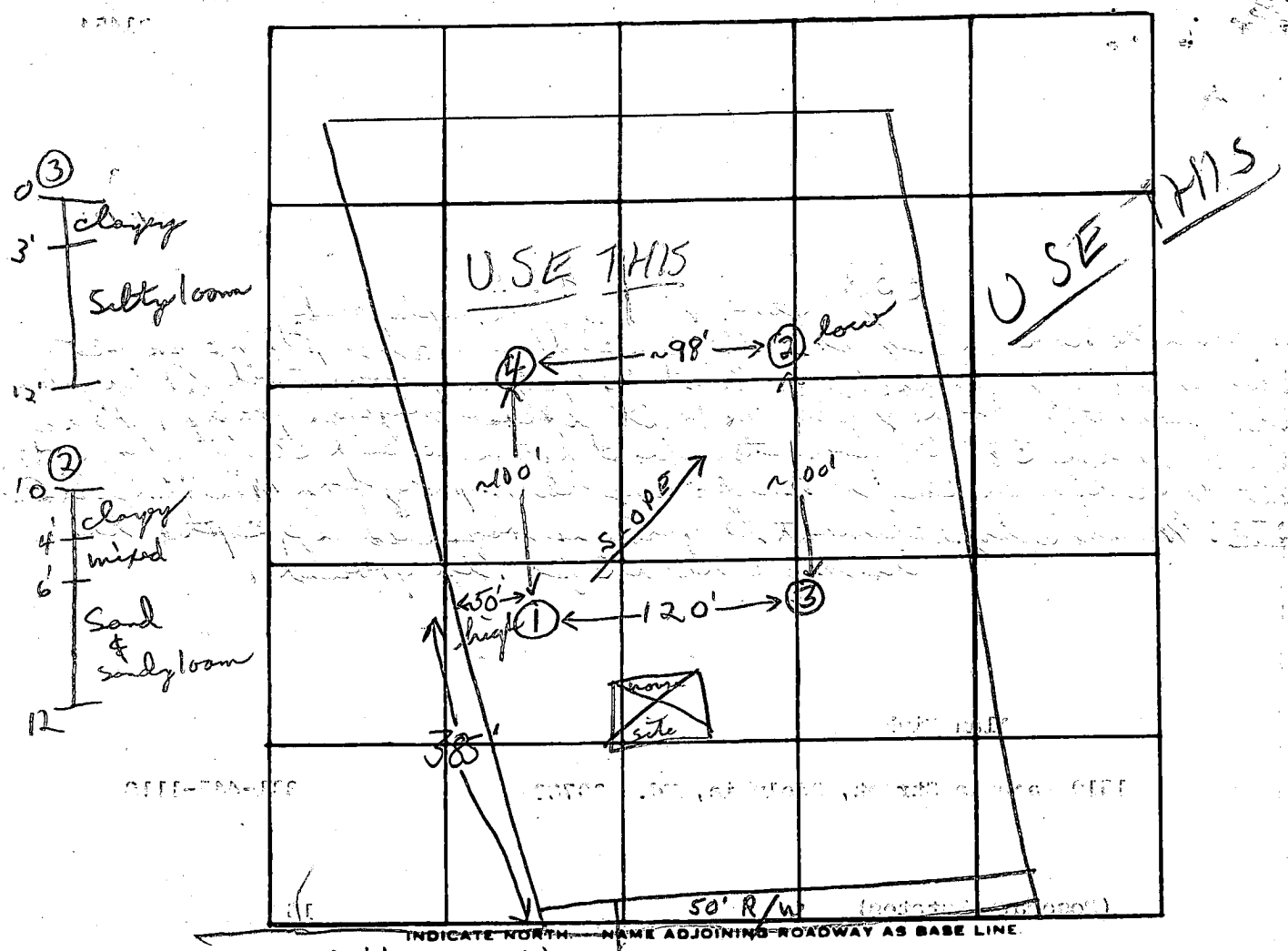
✓ APPROVED BY Frank Cheiner FOR Drywell (KIND OF SYSTEM) DATE 8/29/75

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING 5/21/75 Hold for certified lot location P.S.

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/21/25	1 high	5'	9:59	10:01	10:01	10:04	3min
	1A	12'	10:00	10:09	10:09	10:29	20min
	2	5½'	10:25	10:26	10:26	10:28	2 min
	2A	12'	10:30	10:33	10:33	10:39	6 min
	3	5'	10:05	10:06	10:06	10:09	3min
	3A	12'	10:14	10:15	10:15	10:19	4min
	4	12'	Visual;	clayey to 2', mixed 2→5			sandy & silty loam below

7 min avg
inlet 4'
effective area
Slowest 4"
125#/B.R.

REMARKS Certify all holes toward rear of lot (4 holes)

TYPE OF SOIL Sandy & silty loam below top ~4' clayey soil

TESTED BY F.S. ALSO PRESENT: J. Fyock & Co.

APPLICATION

A 21363

P

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE 4/18/75

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 John Mikolasko and A. A. Krometis

ADDRESS 2205 Foxley Road, Timonium, Md. 21093 PHONE Work 765-2930 (Westinghouse)

PROPERTY LOCATION:

SUBDIVISION ______ LOT NO. 15

ROAD AND DESCRIPTION Williamfield Drive - Rosemary Lane - first driveway to left on Rosemary Lane if using Triadelphia Road

SIZE OF LOT 5.003 acres TYPE BLDG. 3 or 4 NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE ______

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Mikolasko

APPROVED BY ______ FOR ______ (KIND OF SYSTEM) DATE ______

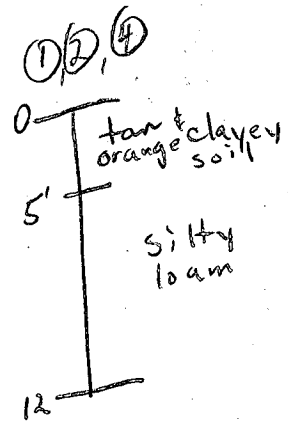
REJECTED BY ______ FOR ______ (KIND OF SYSTEM) DATE ______

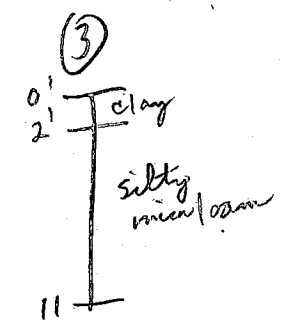
HOLD PENDING FURTHER TESTS ______ DATE ______

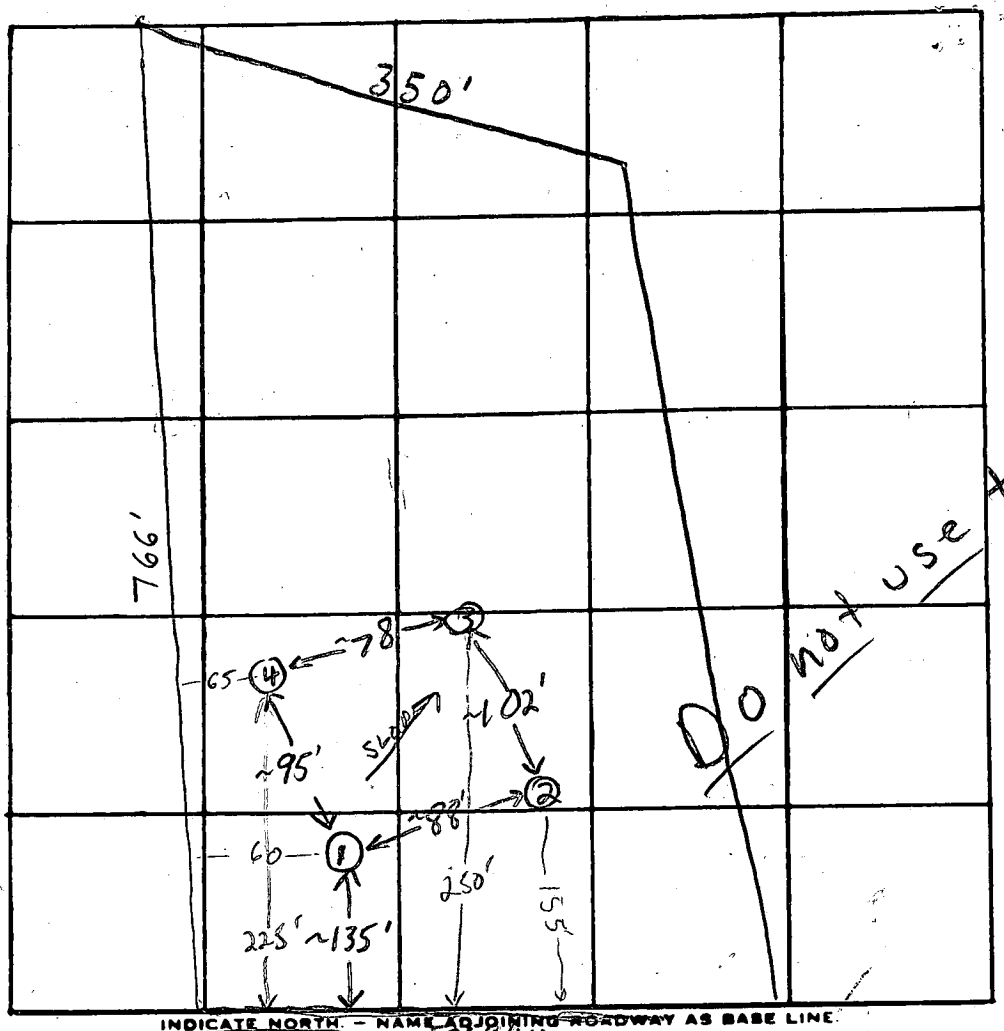
5/21/75 retested in rect F.S.

REASONS FOR REJECTION OR HOLDING ~~4/23/75 Hold for certified perc. hole location F.S.~~

THIS IS NOT A PERMIT







DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
4/23/75	1 high	4½'	2:52	2:54	2:54	2:56	2 min
	1A	12'	2:52	2:59	2:59	3:15	16 min
	2	5'	2:55	3:04	3:04	3:16	12 min
	2A	12'	2:55	2:58	2:58	3:03	5 min
	3 low	4'	3:00	3:02	3:02	3:05	3 min
	3A	11'	3:00	3:06	3:06	3:17	11 min
	4	11	Visual;	top 3' clayey;	silty	loam below	

REMARKS ~~crushed lot ... top soil removed~~

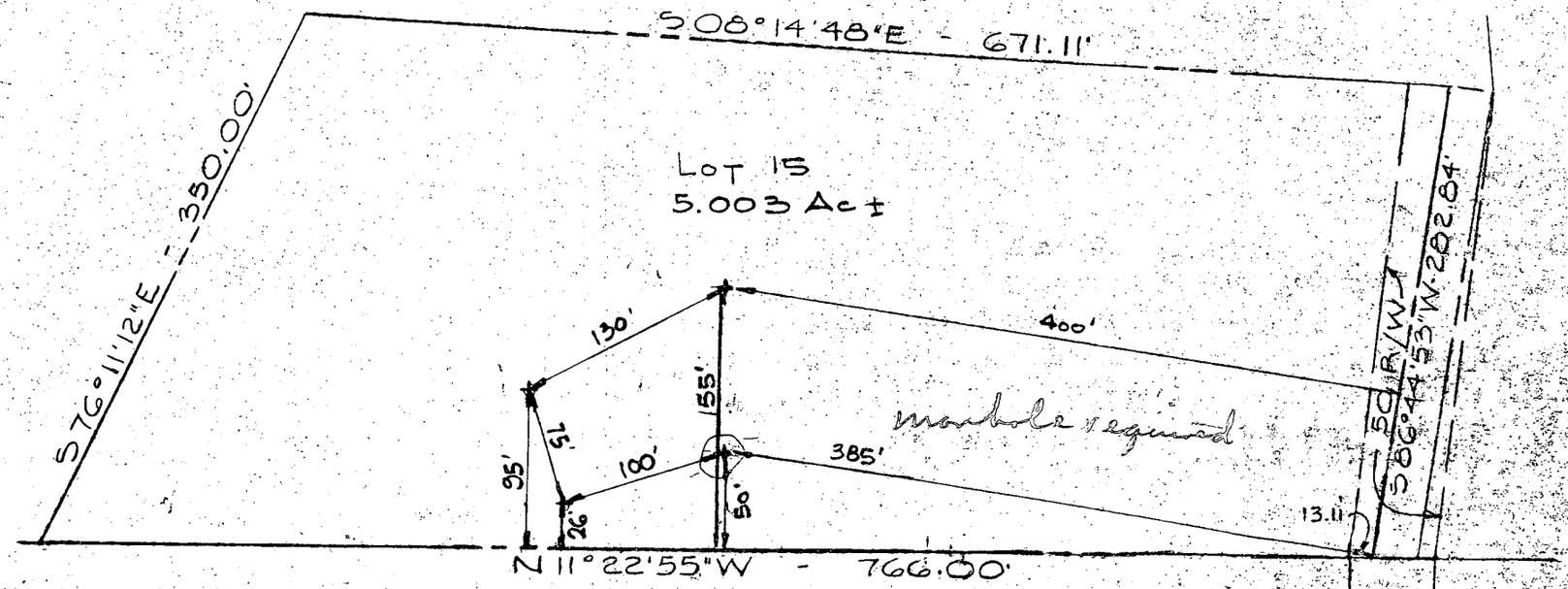
TYPE OF SOIL silty loam after 4-5' clayey soil

TESTED BY F.S. ALSO PRESENT: Fyock & Co.

NOTE: The lot shown hereon complies with minimum ownership width and lot area as required by the Maryland State Department of Health Regulations.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPT.

County Health Officer — Date 6/11/75



STATE OF MARYLAND
WILLIAM G. RASCH III
No. 4575
REGISTERED
Professional Engineers & Land Surveyor

PURDUM & JESCHKE
ENGINEERS &
LAND SURVEYORS
3897 PARK AVENUE
ELLICOTT CITY, MD. 21043

+ Percolation Test field located

LOT 15
PROPERTY OF
ROSE MARY ESTATES
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SEPTEMBER 1974
SCALE: 1" = 100'

DNR-131 (7/73) EMERGENCY NO. (If any) –

B 1 0926 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER HO-79-107 (6)
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) 12/15/75 10:00 A.M.

OWNER [illegible] COL 15 LAST NAME [illegible] FIRST NAME COL. 34
STREET OR RFD 20 [illegible] COL 36 COL. 55
POST OFFICE [illegible] COL 57 COL. 76

6-13

B 1 CONTINUED
1 2 3 (SEQ. NO.) 6

DRILLER INFORMATION

DATE 6-27-75 LICENSE NUMBER 42 (77–80)
FIRST NAME L. F. DRILLER LAST NAME Eastridge
SIGNATURE L. F. Eastridge

B 2
1 2 3 (SEQ. NO.) 6

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 (8–12)
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600 (14–20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

22
- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- F FARMING, AGRICULTURE, IRRIGATION
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
- M MUNICIPAL WATER SUPPLY
- P PRIVATE WATER COMPANY
- T TEST

} MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL 150 FEET (24–28)
APPROXIMATE DIAMETER OF WELL 6" (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

30-37
- BORED (OR AUGERED)
- AIR-ROTARY
- CABLE
- JETTED
- AIR-PERCUSSION
- REVERSE-ROTARY
- DRIVEN
- ROTARY (HYDRAULIC ROTARY)
- DRIVE-POINT

OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

39
- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- D THIS WELL WILL DEEPEN AN EXISTING WELL
  PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

(41–52)

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

APPROPRIATION PERMIT NUMBER G A P (54–63) ENGINEER REVIEW DISTRICT NO. (65)
FORCE (67–68) WRITE INITIALS IN BOX
CONDITIONS A E N S G W Q C L U (70 71 72 73 74 75 76 77 78 79)

B 4 CONTINUED
1 2 3 (SEQ. NO.) 6

HEALTH DEPARTMENT APPROVAL

41 S STATE HEALTH (CIRCLE BOX)
COUNTY NAME [illegible] COUNTY NO. [illegible]
DATE MO. 6 DAY 30 YR. 75 (43–48)
APPROVED BY [illegible] Sanitarian

B 3
1 2 3 (SEQ. NO.) 6

LOCATION OF WELL

COUNTY Harford (8–21) (DO NOT ABBREVIATE COUNTY NAME)
SUBDIVISION Norman Estates (23–42)
SECTION (44–46) LOT 15 (48–50)
NEAREST TOWN Aberdeen (52–71)
MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 (73–76) M I (78)

B 4
1 2 3 (SEQ. NO.) 6

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

- N NORTH
- E EAST
- N E NORTHEAST
- S E SOUTHEAST
- S SOUTH
- W WEST
- N W NORTHWEST
- S W SOUTHWEST

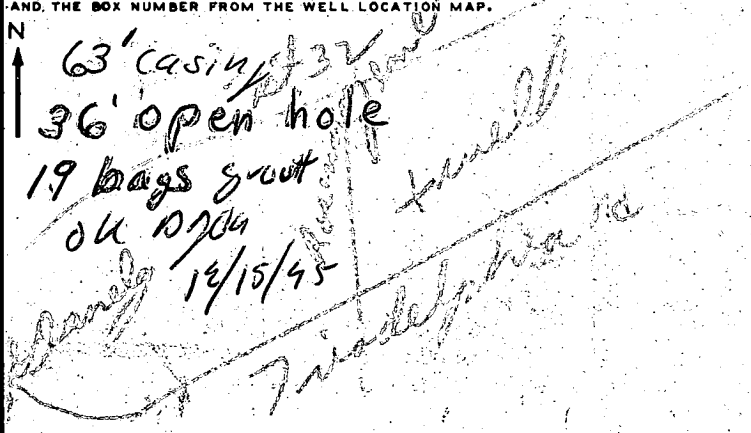
(8 8 8 9 8 9)

NEAR WHAT ROAD Philadelphia Rd (11–30)

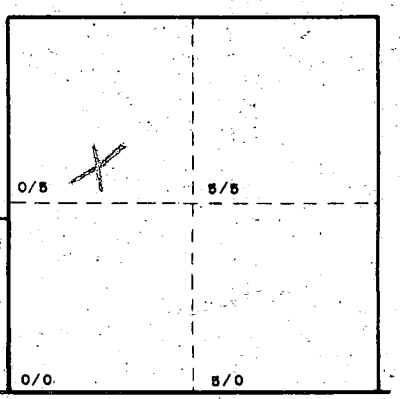
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N (32) S (32) E (32) W (32)

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 500 (34–37) F T M I (38 39)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



BOX NUMBER E 810 N 520



NORTH COORDINATE (50–55)
EAST COORDINATE (57–63)
ELEVATION AT WELL HEAD (FEET) (65–68)

B 5
1 2 3 (SEQ. NO.) 6

SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

8 63

HEALTH

DNR 214 9/71

C 1 8091 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 8-13

DATE WELL COMPLETED 12-11-75 (15–20)

DEPTH OF WELL 400 (TO NEAREST FOOT) (22–26)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-83-1016 (28–37)

DRILLERS IDENTIFICATION NO. 42

OWNER Mink Alan
LAST NAME FIRST NAME

STREET OR RFD 200 Longview Rd. POST OFFICE Simpsonville Md

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Top Soil	0	3	
Sandy Shaley	3	50	
Brown Slate	50	80	~
Mika	80	260	
Gray Rock	260	280	~
Mika	280	400	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [Y] (44) NO [N] (44)

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [C M] (45 46) BENTONITE CLAY [B C] (45 46)

NO. OF BAGS 15 NO. OF POUNDS 1500

GALLONS OF WATER 75

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 (48–52) FT. TO 46 (54–58) FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [C O] CONCRETE [P L] PLASTIC [O T] OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
S T (60–61)	6 (63–64)	63 (66–70)

OTHER CASING (IF USED)

EACH CASING

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [B R] BRASS OR BRONZE [H O] OPEN HOLE [P L] PLASTIC [O T] OTHER

C 2 (1–6) (SEQ. NO.)

EACH SCREEN

		DEPTH (NEAREST WHOLE FOOT) FROM	TO
1	H O (8–9)	61 (11–15)	400 (17–21)
2	(23–24)	(26–30)	(32–36)
3	(38–39)	(41–45)	(47–51)

SLOT SIZE 1, ____ 2, ____ 3, ____

DIAMETER OF SCREEN ____ (56–60) (NEAREST INCH)

GRAVEL PACK FROM ____ TO ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX (68) [F]

CIRCLE APPROPRIATE BOXES

[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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME

(PLEASE PRINT) L. F. Easterday

SIGNATURE L F Easterday

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

T (70) TELESCOPE CASING

(E.R.O.S.) (72) LOG INDICATOR

W Q (74 75 76) OTHER DATA AVAILABLE

C 3 (1–6) (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3 (8–9)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1 (11–15)

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 50 (17–20) (NEAREST FOOT)

WHEN PUMPING 400 (22–25) (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

[A] AIR (27) [P] PISTON (27) [T] TURBINE (27)
[C] CENTRIFUGAL (27) [R] ROTARY (27) [O] OTHER (DESCRIBE BELOW) (27)
[J] JET (27) [S] SUBMERSIBLE (27)

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O) (29)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) (31–35)

PUMP HORSE POWER (37–41)

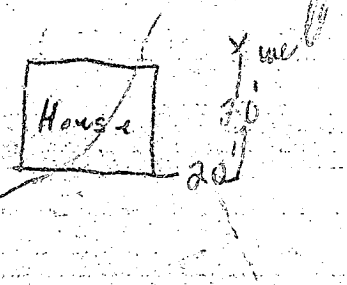
PUMP COLUMN LENGTH (NEAREST FOOT) (43–47)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

[+] ABOVE / [−] BELOW (49) LAND SURFACE 2 (50–51) (NEAREST FOOT)

LOCATION OF WELL ON LOT

N ↑ SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



HEALTH