

5/2/89 ASAP
5/4/89 2AM

WPI

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-345010
INDEXED

P 43950

A 31261

DISTRICT 4th

DATE 4/11/89

DATE SYSTEM APPROVED 6/26/89

INSPECTOR C. Williams

Fogles Septic Service, Inc.

IS PERMITTED TO INSTALL ALTER

ADDRESS P. O. Box 659, Mt. Airy, Maryland PHONE 795-5670

SUBDIVISION Patapsco Overlook ROAD 691 Weller Drive LOT 32, Section 3

PROPERTY OWNER Larry Strewig

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

3189
31720
240 ft

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 2½ feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 2½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Location is different than platted sewage easement due to platting error. Place the distribution box 240 feet from the front lot line and 90 feet from the left lot line as seen when facing the property from Weller Drive. Run trenches along contour in both directions.

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

CONTRACTOR TO REQUEST INSP. AS SOON AS EXCAVATIONS BEGUN.

04/CW

PLANS APPROVED BY C. Williams DATE 9/23/88

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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.

A 31261

5/15/89

TEST HOLE A

100' BELOW
LEFT-REAR HOUSE CORNER
LOAM 3-10'

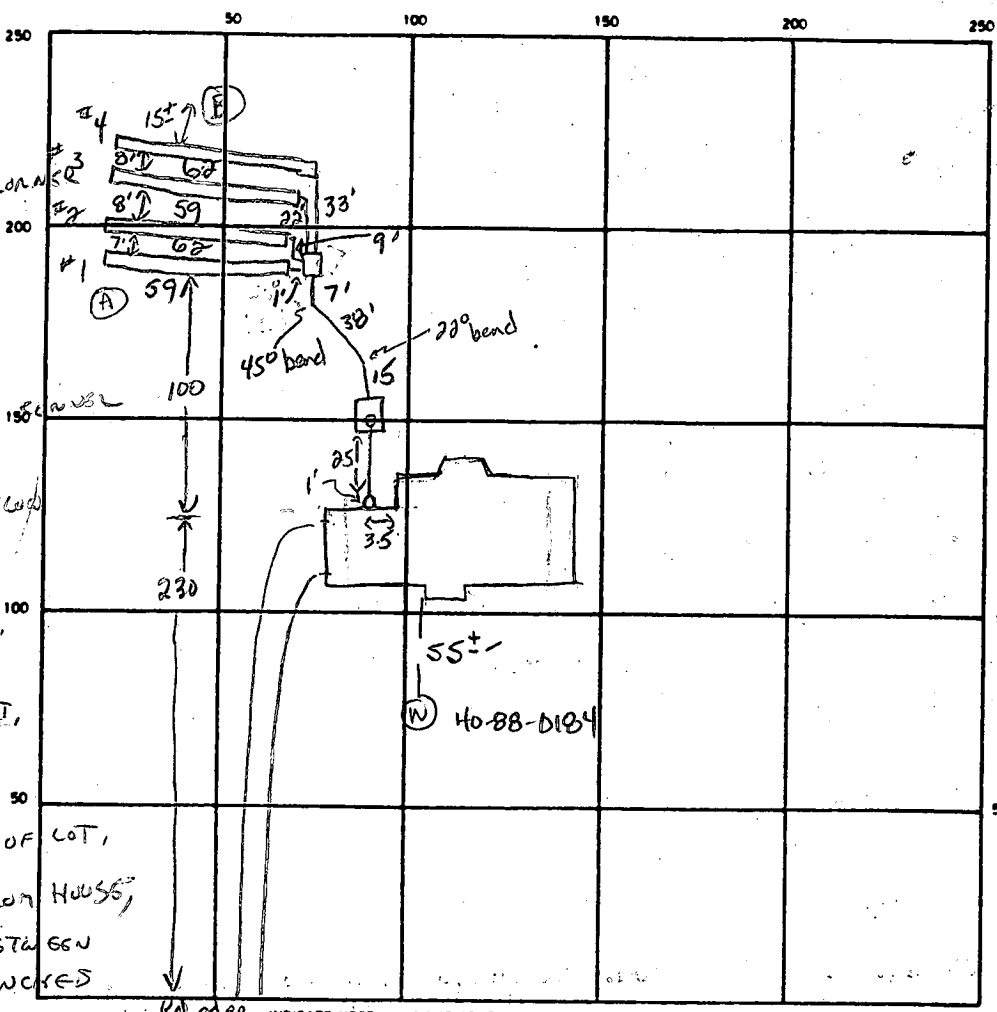
TEST HOLE B

130' BELOW
LEFT REAR HOUSE CORNER
LOAM 3 1/2 - 6 1/2'
HEAVY SHALES BELOW

OK TO INSTALL
SHALLOW SYSTEM
NO MORE THAN 10'
FROM HOUSE ON
LEFT HALF OF LOT,
OWNER INDICATES
STUMPS BURIED
ON RIGHT HALF OF

SET TANK 20' FROM HOUSE,
RESERVE AREA BETWEEN
TANK AND FRANCHES

FOR FUTURE REPAIR.



94
24
188
225.6
100 to 1st trench

33
34
9

WELL LINE
APPROVED
W/O INSP.
UNABLE TO
LOCATE PERMIT
(GANTLAND)

6/26/89 CWeller

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Weller Dr.
Larry Staswig Present

SEPTIC TANK LEVEL 1250 gal ?

CLEANOUTS 1 at house / on septic tank

DISTRIBUTION BOX LEVEL OK w/ baffle

DRAIN FIELD TILE FIELD DEPTH 4.5 FT TRENCH WIDTH 3.0 FT INLET DEPTH 2.0 2.5 2.0 2.0 FT

EFFECTIVE GRAVEL DEPTH 2.5 2 2.5 2.5 FT TOTAL LENGTH 59 62 59 62 FT

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 177 186 177 186 SQ. FT.

354
372
726

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

ABSORBENT AREA 726 SQ. FT.

REMARKS 5-2-89 SET SEPTIC TANK 20' FROM HOUSE THEN BEGIN SYS. - (LEAVING ROOM BECAUSE OF
LIKELIHOOD OF DEER.) SAME 5/9/89 OWNER WILL RE-PERC. 5/15/89 OK TO INSTALL
FRANCHES NO FURTHER THAN 10' FROM HOUSE 6-21-89 First trench begins 100ft
downhill from rear left corner of house. Trenches 3 & 4 are below 110ft mark where
contractor was directed to install lowest trench. DEN

LOCATION OK 6/26/89 CWeller

DATE SYSTEM APPROVED 6/26/89

INSPECTOR CWeller

PATAPSCO OVERLOOK
WELLEN DRIVE

A 31261

SUBDIVISION:

LOT NUMBER: 32

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	_____
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.

TRENCHES

180 sq. ft./bedroom

Trench to be 3 wide.

Inlet 2½ feet below original grade.

Bottom maximum depth 4½ feet below original grade.

Effective area begins at 2½ feet below original grade.

2 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 absorbent sidewall area by 22%.

LOCATION: LOCATION IS DIFFERENT THAN PLATTED SEE ASS EASEMENT DUE TO PLATTING ERROR.

PLACE THE DISTRIBUTION BOX 240' FROM THE FRONT LOT LINE AND 90' FROM THE LEFT LOT LINE AS SEEN WHEN FACING THE PROPERTY FROM WELLEN DRIVE. RUN TRENCHES ALONG CONTOUR IN BOTH DIRECTIONS.

9/23/88 C. Williams

LOCATED TO BE ...

PRELIMINARY

APPLICATION

A 3/26/81

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 4th

DATE 3/26/81

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 Georgia Avenue Properties, Inc. Larry Strewig Jack Boender

ADDRESS 13638 Georgia Avenue, Wheaton, Md 20906 PHONE 465-7777

PROPERTY LOCATION: PATAPSCO OVERLOOK III *NEW* *NEW* *LOT 32*

SUBDIVISION Georgia Avenue LOT NO. ST *See 3*

ROAD AND DESCRIPTION Route 94 and Old Frederick Road 691 Weller Drive

SIZE OF LOT 3 acres m/l TYPE BLDG. 3 or 4 bedrooms
(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. /s/ Jack Boender for E. Brooke Lee, III
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

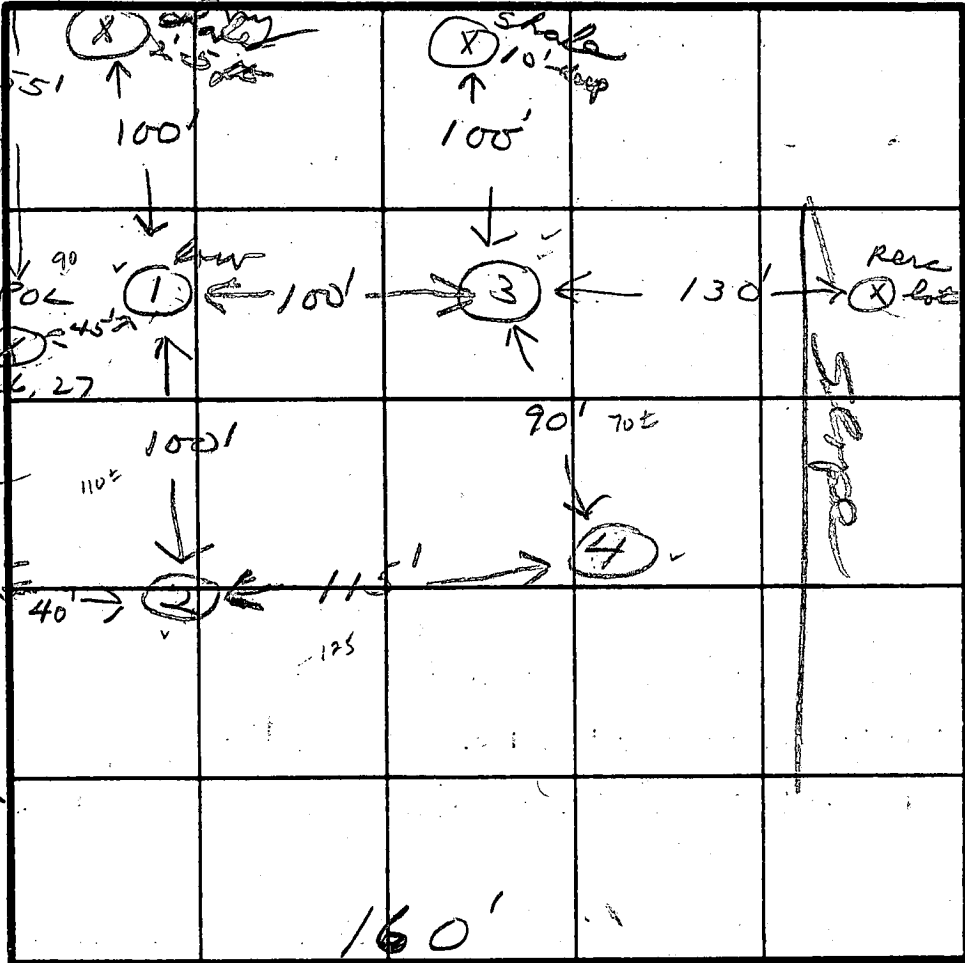
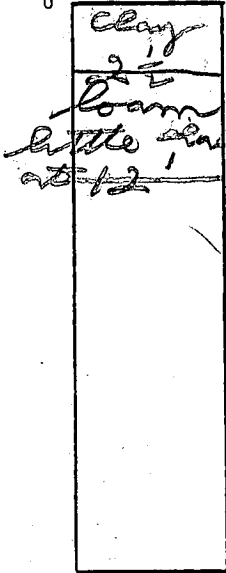
BLDG. PERMIT SIGNED
AND RETURNED 10/20/81
Serial # 21933 - SPD

THIS IS NOT A PERMIT

new 1

LOT 27

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

630
455
11

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
4/16/81	15	3	2:30	2:35	2:35	2:40	5
	1M	7	2:30	2:34	2:34	2:39	5
	25	3	2:45	2:51	2:51	3:05	14
	2M	7	2:45	2:47	2:47	2:50	3
	33	3	3:09	3:20	3:20	3:37	17
	3M	7	3:09	3:13	3:13	3:19	6
	4 V	12	same				

inlet
3'

8 min.

EH-12-1079

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY AS ALSO PRESENT _____

B 1 8684

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

10-91-1212

Date Received

8 13

OWNER INFORMATION

15 Last Name: STEWART, 13 Owner: LARSEN, 34 First Name

36 Street or RFD: 5629 BRAYFIELD RD, 55

57 Town: DARTMOUTH, 70 State: MD, 72 Zip: 21225, 76

B 3

LOCATION OF WELL

8 COUNTY: TARRANT

23 SUBDIVISION: DARTMOUTH COUNTRY CLUB

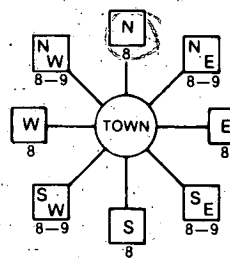
SECTION: 12, LOT: 51

52 NEAREST TOWN: HILSDEN

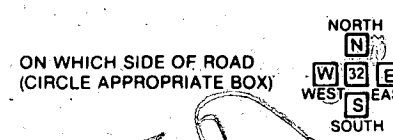
MILES FROM TOWN (enter 0 if in town): 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: WISCONSIN DRIVES



ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): WEST

DISTANCE FROM ROAD: 34 FT, 37 M

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 450

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: 100 FEET

APPROXIMATE DIAMETER OF WELL: 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

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 deepen an existing well
Permit number of well to be replaced or deepened (if available)

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

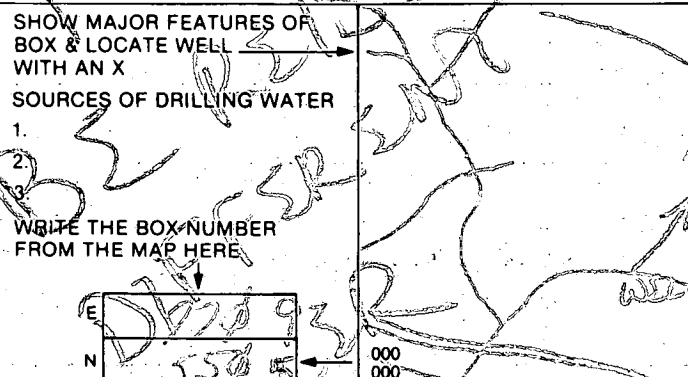
APPROP. PERMIT NUMBER: GAP

FORCE: WRITE INITIALS IN BOX, PERMIT No. 10-91-1212

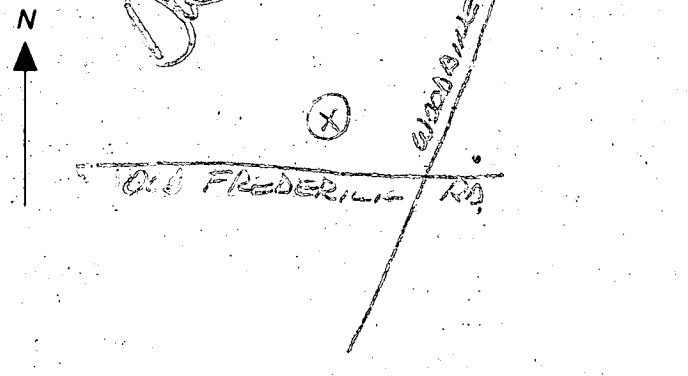
SPECIAL CONDITIONS

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: TARRANT, COUNTY NO.: A-3061, DATE ISSUED: 10/15/91, CO-SIGNATURE, EXP. DATE, NORTH GRID: 554000, EAST GRID: 5774000



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



DRILLER

B 1 5535 SEQUENCE NO. (OEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

110-81-1712

fill in this form completely

B 2 **OWNER INFORMATION**

Date Received: 12/4/86

15 Last Name: STOSWIG, 13 Owner: LARRY, 34 First Name

36 Street or RFD: 5025 BRAXFIELD RD, 55

57 Town: BALTIMORE, 70 State 72: MD, 71 Zip: 21227, 76

B 3 **LOCATION OF WELL**

8 COUNTY: HOUNSLOW, 21

23 SUBDIVISION: PATRICKSON COUNTRYSIDE, 42

SECTION: 3, 44 46 LOT: 32, 48 50

52 NEAREST TOWN: LISBON, 71

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

DRILLER INFORMATION

Driller's Name: [Redacted], 77 License No. 80

Firm Name: [Redacted]

Address: 16093 Fred. Rd. Lisbon Md 21105

Signature: [Redacted], Date: 12/1/86

B 4 **DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

11 NEAR WHAT ROAD: W. L. 3rd Drive, 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH, WEST, SOUTH, EAST

34 DISTANCE FROM ROAD: 50, 37 ENTER FT or MI: 50, 38 39

B 2 **WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.): 4, 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 400, 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: [Redacted], COUNTY NO.: A-31261

OEP SIGNATURE: [Redacted], STATE HEALTH INSERT S: [Redacted]

DATE ISSUED: [Redacted]

CO SIGNATURE: [Redacted], EXP. DATE: 06/02/87

NORTH GRID: 455000, 50 55 EAST GRID: 0771000, 57 63

APPROXIMATE DEPTH OF WELL: 200, 24 28 FEET

APPROXIMATE DIAMETER OF WELL: [Redacted], 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: _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER:

- 1.
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 731 9, N 531 5

000 000

Copy seal downtown

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 [Redacted] 52

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

N

WELL

copy seal downtown

W. L. 3rd Drive

OLD FRED. RD

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

APPROP. PERMIT NUMBER: [Redacted] GAP, 54 63

FORCE: [Redacted], WRITE INITIALS IN BOX: [Redacted] PERMIT NO.: 110-81-1712, 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

B 1 **9750** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-88-0184
 fill in this form completely

Date Received (APA) **PT P. I. B. P.**
 OWNER INFORMATION
STREWIBERRY Last Name Owner First Name
56 RB BRAYFIELD RD Street or RFD
BALETTI MDR Town **MD 21227** State Zip

B 3 LOCATION OF WELL **R-42517**
HOWARD COUNTY
PATAPSCO OVERLOOK SUBDIVISION
 SECTION **32** LOT
LISBON NEAREST TOWN
 MILES FROM TOWN **3** M I

DRILLER INFORMATION
 George F. Easterday
 L. Franklin Easterday, Inc.
 9205 Brown Church Rd., Mt. Airy, Md. 21771
 Signature: *George F. Easterday* Date: **8/20/88**

B 4 **Weller DR.** NEAR WHAT ROAD
 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) **N**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) **W**
 DISTANCE FROM ROAD **200** FT
 ENTER FT or MI **FF**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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 COUNTY NAME **A 31261** COUNTY NO.
 STATE SIGNATURE **Charles L. ...** DATE ISSUED **13/09/89**
 NORTH GRID **555000** EAST GRID **078000**

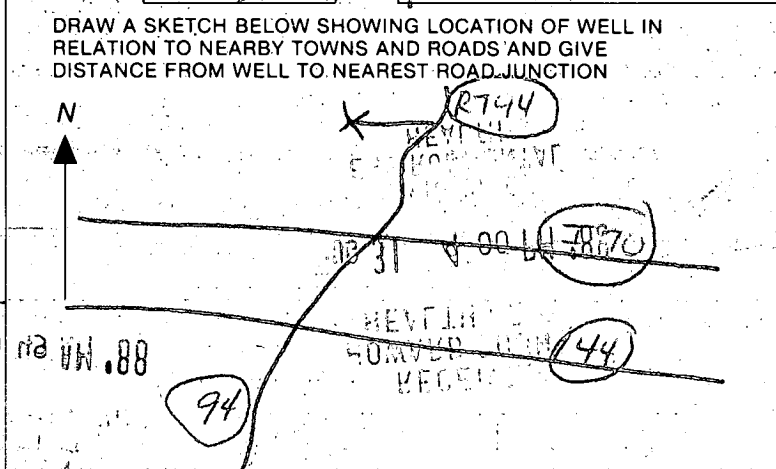
APPROXIMATE DEPTH OF WELL **200** FEET

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 _____

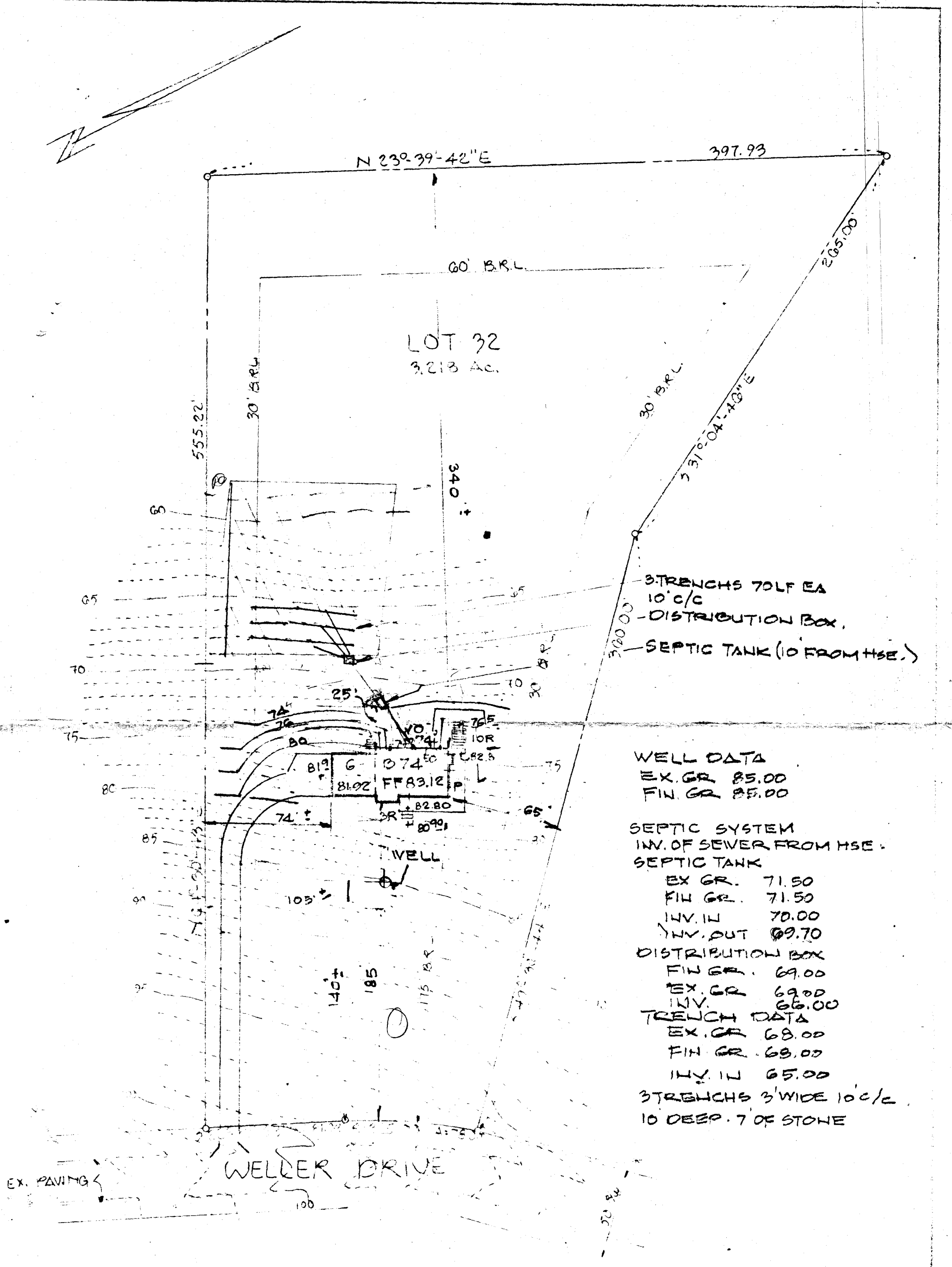
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER WELL
 WRITE THE BOX NUMBER FROM THE MAP HERE
780
550

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 SEALED
 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) _____



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____
 FORCE **CI** WRITE INITIALS IN BOX PERMIT NO. **HO-88-0184**

SPECIAL CONDITIONS



3 TRENCHS 70LF EA
 10' c/c
 - DISTRIBUTION BOX
 - SEPTIC TANK (10' FROM HSE.)

WELL DATA
 EX. GR. 85.00
 FIN. GR. 85.00

SEPTIC SYSTEM
 INV. OF SEWER FROM HSE.
 SEPTIC TANK
 EX. GR. 71.50
 FIN. GR. 71.50
 INV. IN 70.00
 INV. OUT 69.70

DISTRIBUTION BOX
 FIN. GR. 69.00
 EX. GR. 69.00
 INV. 66.00

TRENCH DATA
 EX. GR. 68.00
 FIN. GR. 69.00
 INV. IN 65.00

3 TRENCHS 3' WIDE 10' c/c
 10' DEEP. 7' OF STONE

PREPARED BY:
 JOHN C. MELLEMA SR., INC.
 LAND SURVEYORS
 6100 BALTO. NATL. PIKE - BALTO., MD. 21228
 (301) 741-8880

SITE PLAN
 LOT 32
 33414 WELLER DRIVE
 PATAPSCO OVERLOOK
 SECT. 3
 4TH DIST.
 SCALE 1" = 50'

40.00 MD
 8-12-88

C1 = 0695

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)

COUNTY NUMBER 6# 31261

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 10/13/88

22 26 200 (TO NEAREST FOOT)

28 37 40-08-0184

OWNER STREET OR RFD SUBDIVISION SECTION LOT

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED...

Table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries like Top Soil, Clay, Shale, Blue & Brown Slate, etc.

GROUTING RECORD WELL HAS BEEN GROUTED TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

CASING RECORD MAIN CASING Nominal diameter Total depth

OTHER CASING (if used) diameter depth

SCREEN RECORD screen type or open hole

Table for SCREEN RECORD with columns for depth (nearest ft.) and rows for casing sections.

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

OEP USE ONLY TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED PUMPING RATE METHOD USED TO MEASURE PUMPING RATE

PUMP INSTALLED DRILLER WILL INSTALL PUMP IF DRILLER INSTALLS PUMP...

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS...

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED...

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13...

DRILLERS IDENT. NO. DRILLERS SIGNATURE SITE SUPERVISOR

