

5/16/88 11:30
5/17/88 PM

04-344863

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 41403

A 31279

4th

DISTRICT

DATE 4/5/88

DATE SYSTEM APPROVED 5/17/88

INSPECTOR CW

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Paul Schissler - South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Patapsco Overlook ROAD 680 Weller Drive LOT 27, Section II

PROPERTY OWNER Joseph Ppekarski
680 Weller Drive

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

267 FT DEPTH TRENCH REQUIRED
3/800

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

~~TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.~~

~~LOCATION - Start the first trench ³²⁰ 315 feet from the front lot line and 90 feet from the right lot line as seen when facing the property from Weller Drive. Run trenches along contour toward left side of property AND RIGHT SIDE OF PROPERTY.~~

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

5/16/88
LOCATION AND DEPTH CHANGED BECAUSE OF/SA
SLOPE OF SOIL CONDITIONS USES NOTES OTHER SIDE 5/16/88 CW
C. Williams

PLANS APPROVED BY _____ DATE 12/29/86

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.

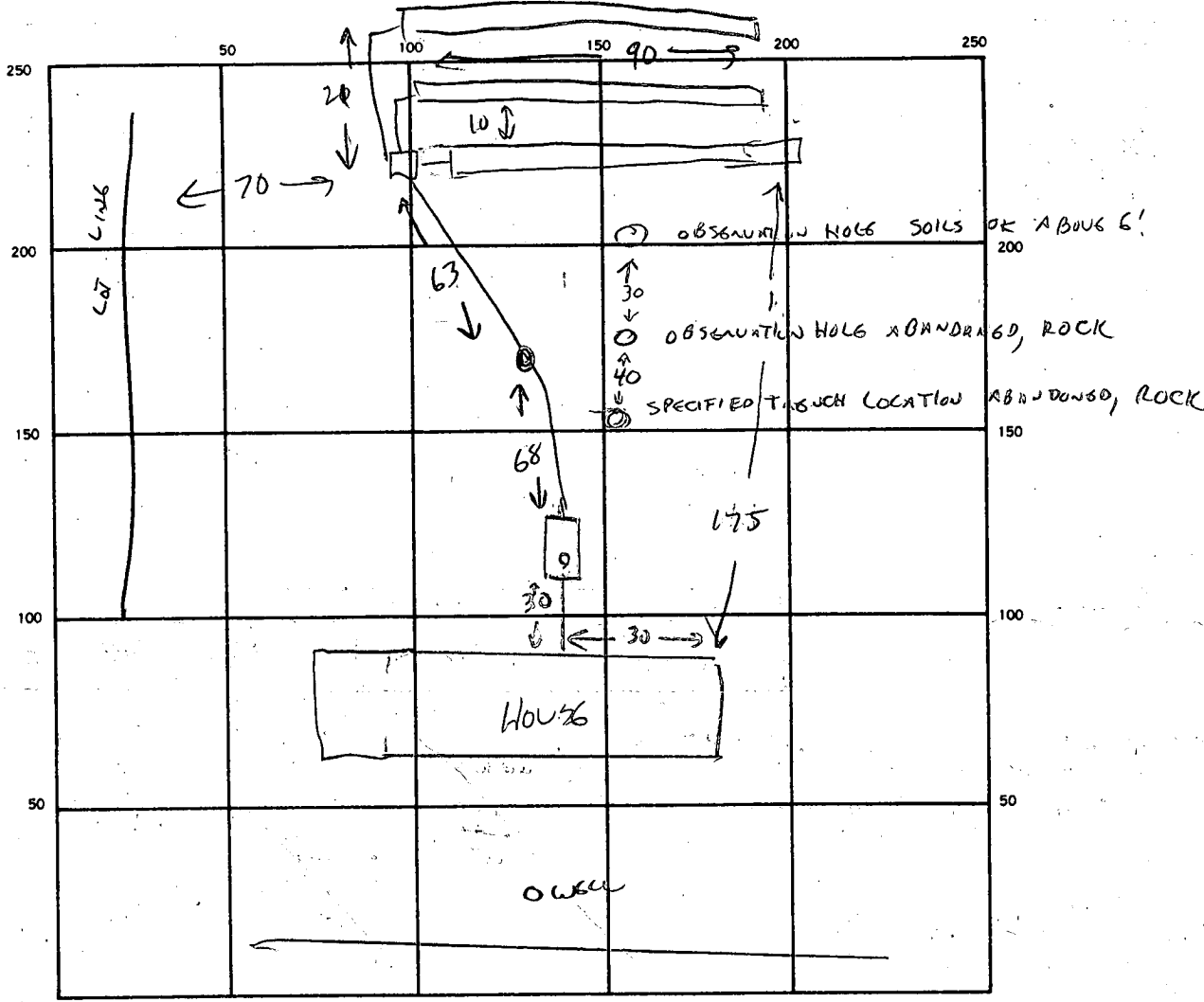
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

BOG. PERMIT SIGNED
AND RETURNED 4/15/89
Serial #31968 - 2nd garage

BOG. PERMIT SIGNED
AND RETURNED 4/16/89
Serial #24476 - deck

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK LEVEL ✓ 1500 GAL CLEANOUTS ST ✓ IN LINE ✓

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TILE FIELD DEPTH 4 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2 1/2 FT.

EFFECTIVE GRAVEL DEPTH 1 1/2 FT. TOTAL LENGTH 270 FT.

NUMBER OF TRENCHES 3 (90 each) ONE SIDEWALL/BOTTOM AREA 810 SQ. FT.

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

ABSORBENT AREA 810 SQ. FT.

REMARKS HEAVY SHALE AT TANK AND SPECIFIED TRENCH LOCATION

PLATTED SEPTIC AREA APPEARS INCORRECT. BETTER SOILS LOCATED DOWN LOT

CHANGE TO SHALLOW DRAINFIELD 75+ FEET DISTANCE FROM PLATTED LOCATION.

FUTURE REPAIRS POTENTIALLY DEEPER IF SOILS IMPROVE DOWNHILL 5/16/88 CWL

5/17/88 TRENCHES COMPLETE - COVER ALL WORK.

DATE SYSTEM APPROVED 5/17/88

INSPECTOR CWILLIAMS

B 1 **3887** SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

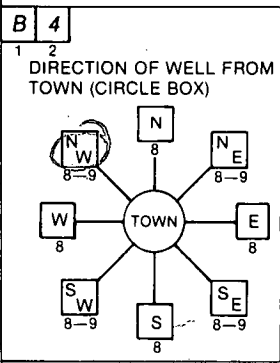
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type


OEP PERMIT NUMBER
HO-81-2231
 fill in this form completely

Date Received
 OWNER INFORMATION
PIEKARSKY JOSEPH
 Last Name Owner First Name
9332 OLD SCAGGSVILLE
 Street or RFD
LAUREL MD 20702
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
CATAFSCO CUERLOOK SUBDIVISION
 SECTION **2** LOT **27**
ZIMBORN NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **1** MI

DRILLER INFORMATION
Ralph Mayne Driller's Name License No. **223**
Ralph Mayne (well driller) Firm Name
9700 Snow Hill Rd Mt. Airy Address
Ralph Mayne 5/25/87 Signature Date



Weller Rd. NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 DISTANCE FROM ROAD **90** FEET
 ENTER FT or MI **FT**

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

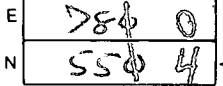
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME
A-31279 COUNTY NO.
 OEP SIGNATURE _____ STATE HEALTH INSERT S
 DATE ISSUED _____
081787 CO SIGNATURE **Chandler** EXP. DATE **8/17/88**
 NORTH GRID **554000** EAST GRID **0780000**
 9:00 Grout

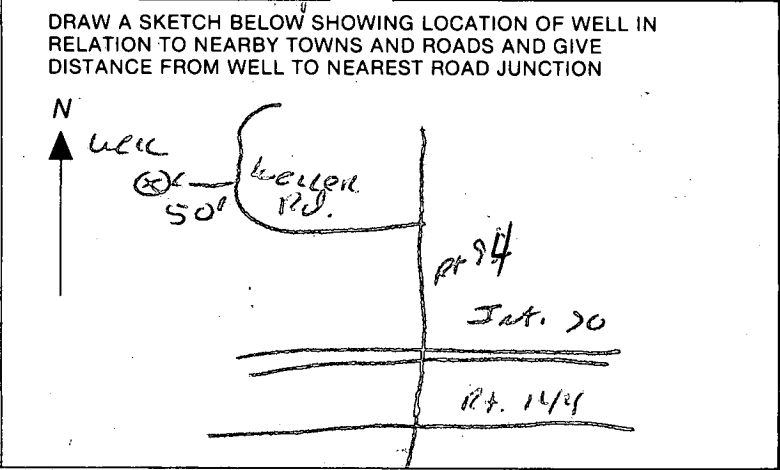
APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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. well
 2. ?
 3. ?
 WRITE THE BOX NUMBER FROM THE MAP HERE

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

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) _____

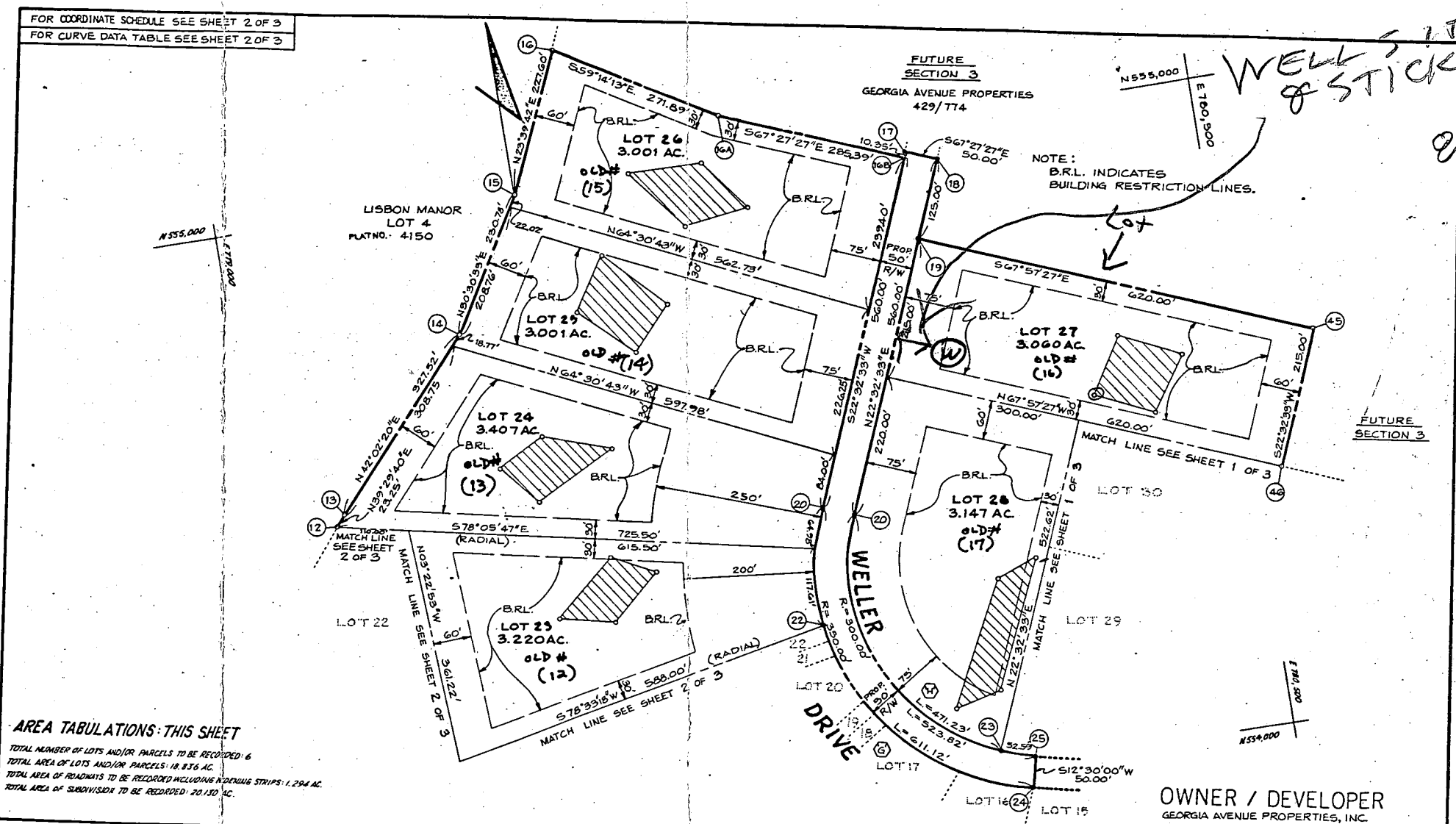


Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **AA** WRITE INITIALS IN BOX PERMIT No. **HO-81-2231**

SPECIAL CONDITIONS **792-7459**

FOR COORDINATE SCHEDULE SEE SHEET 2 OF 3
FOR CURVE DATA TABLE SEE SHEET 2 OF 3

WELL SITE 0/5
& STICKER APPLIED
8/15/87
R.H.



AREA TABULATIONS: THIS SHEET
TOTAL NUMBER OF LOTS AND/OR PARCELS TO BE RECORDED: 6
TOTAL AREA OF LOTS AND/OR PARCELS: 18.836 AC.
TOTAL AREA OF ROADWAYS TO BE RECORDED INCLUDING RIDING STRIPS: 1.294 AC.
TOTAL AREA OF SUBDIVISION TO BE RECORDED: 20.130 AC.

OWNER / DEVELOPER
GEORGIA AVENUE PROPERTIES, INC.
13638 GEORGIA AVENUE
WHEATON, MARYLAND 20906

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT.
[Signature] 6-18-86
HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING.
PLANNING DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS. HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.
DIRECTOR DATE

OWNERS STATEMENT
WE, GEORGIA AVENUE PROPERTIES INC. A MARYLAND CORPORATION BY: E. BROOKE LEE, PRESIDENT AND E. BROOKE LEE III, TREASURER, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES, IN AND UNDER ALL ROADS AND STREET RIGHT-OF-WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOOD PLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY WANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOOD PLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; AND (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THERE CONSTRUCTION, REPAIR, AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED ON OR OVER THE SAID EASEMENTS AND RIGHT-OF-WAYS.

WITNESS MY/OUR HANDS THIS 27 DAY OF Aug. 1981
[Signatures]
WITNESS

SURVEYORS CERTIFICATE
I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT, THAT IT IS A SUBDIVISION OF PART OF THE LANDS CONVEYED BY E. BROOKE LEE & LEE, HIS WIFE TO GEORGIA AVENUE PROPERTIES INC. BY DEED DATED DECEMBER 30, 1964 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 429 AT FOLIO 774 AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

[Signature] 8-10-81
WILLIAM G. HARTEL, P.L.S. NO. 9436 DATE

RECORDED AS PLAT 6784 ON 6/30/86
AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND

PATAPSCO OVERLOOK SECTION 2 LOTS 12 THRU 31

SHEET 3 OF 3
TAX MAP 2
4th ELECTION DISTRICT
SCALE: 1" = 100'

S-81-16, P-81-33, 17-18, F-11-30
ZONING R
HOWARD COUNTY, MARYLAND
DATE: AUGUST, 1985

boender associates engineers/surveyors/planners
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MARYLAND 21043
BALTIMORE 301-465-7777

Joseph Piekarski

9332 Old Scaggsville Rd.

Laurel, Md. 20707

301-792-7459

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 # 41480
 Date 4/11/88
 Name of Installer ROBERT L. FEELER CO., INC. Telephone 781-4655
 License Number 2122
 Certified Well Pump Installer Well Driller Registered Plumber
 Name of Property Owner M/M JOSEPH DIKARSKI Telephone _____
 Subdivision PATAPSCO OVERLOOK Lot # 27 Well Tag # 140-81-2231
 Site Address 680 WELDER DRIVE - LISBON

Pump Motor Pitless Adapter
 1. Type 1. Horsepower 1/2 1. Make MEXELL
 a. Deep well jet _____ 2. RPM 3450 2. Model # M/B-10
 b. Shallow well jet _____ 3. Voltage _____ 3. Depth 42" +
 c. Submersible a. 110 _____
 2. Make GRISWOLD - DENNING b. 220
 3. Model # 3XLN
 4. Capacity 5 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 _____

Tank Piping Well data
 1. Capacity CAPTIVE AIR WX-250 1. Type POLY. 1. Depth 200 ft.
 2. Pressure relief valve? YES 2. Size 1" 2. Yield 3.0 GPM
 3. NSF and/or BOCA Code approved YES 3. Static water level _____ ft.
 4. Depth of supply line 42" + 4. Will water supply be disinfected by installer? YES
 WELL LING # PITLESS 3-4' BELOW GROUND
 MIXED TANK W/ RELIEF VALVE OK 5/16 (88 CW)

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).

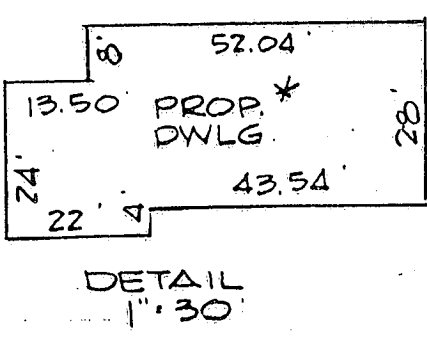
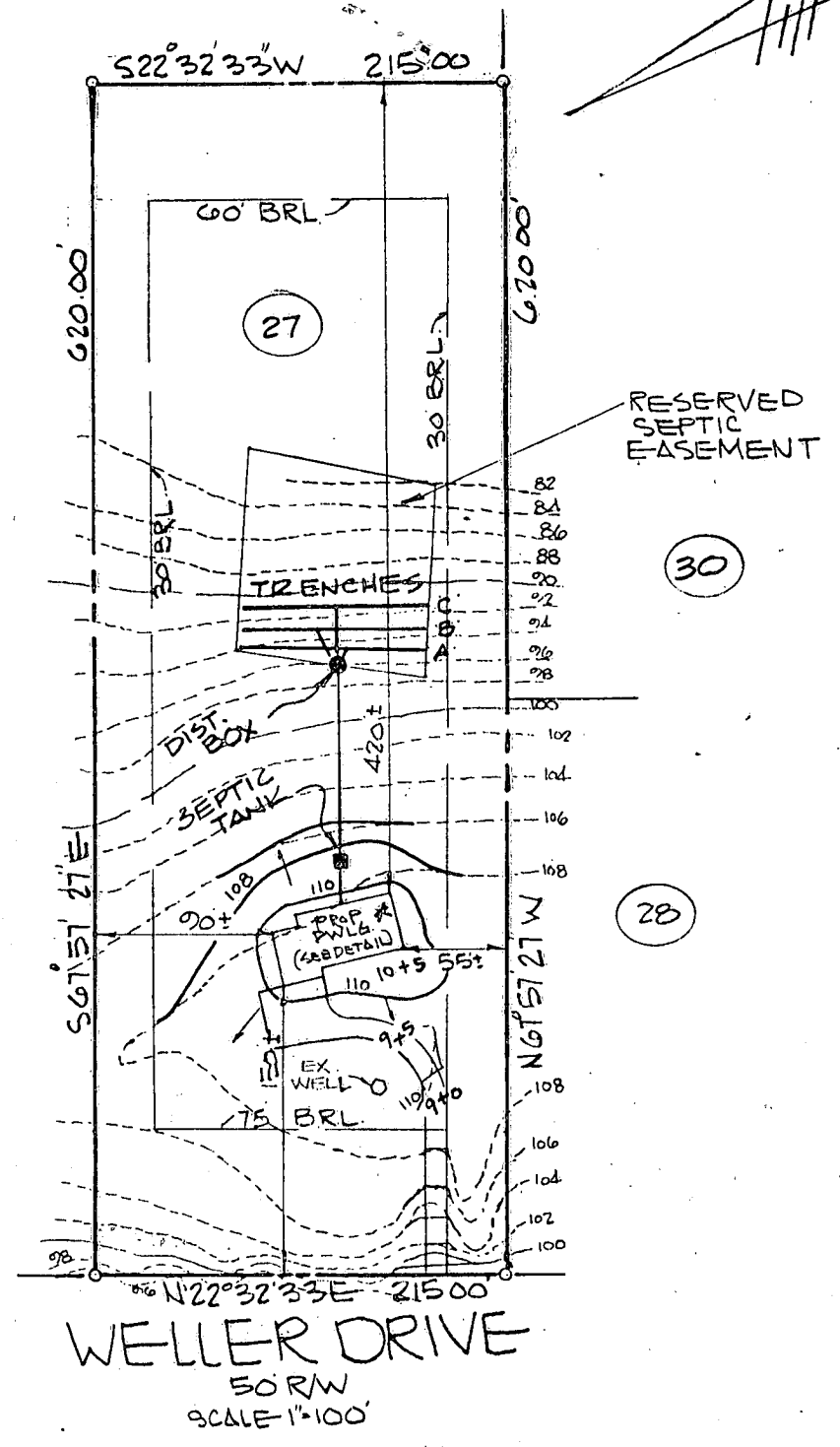
All information given above is true to the best of my knowledge.

Signature of Applicant: Robert L. Feeler R. L. F. CO., INC.

Date: 10 07 4/18/88

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

Piekarski



- F. EL. 112.2 ✓
- SMT. 103.2 ✓
- IV. OUT. HS. 101.2 ✓ + BSAT
- IV. IN TANK 100.2 ✓
- IV. OUT TANK 100.4 ✓
- IV. IN BOX 94.2 ✓
- IV. OUT BOX 93.2 ✓
- INV. IN TRENCH A. 92.2 ✓ EX. GND. 95.2 ✓
- B. 90.2 ✓
- C. 88.2 ✓
- EX. GND. ELEV. @ WELL 110.2 ✓

12/15/87
 elevations ok
 PAB

BLDG. PERMIT SIGNED
 AND RETURNED 12-15-87

BP #15523
 SA

NOTE: CONTRACTOR SHALL PROVIDE POSITIVE DRAINAGE AWAY FROM FOUNDATION.

LOT 27. SECT. 2
 "PATAPSCO OVERLOOK"
 Δ G784
 4TH EL. DIST. HO. CO., MD.
 "PIEKARSKI"



SITE PLAN #680 WELLER DRIVE	date 11-2-87
VTA ASSOCIATES, INC. SURVEYING & ENGINEERING	scale AS SHOWN
3132 E. JOPPA RD. BALTIMORE, MARYLAND 21234	job no. P.16
668-0090	drawn JFS. JSD
	checked MJB

SUBDIVISION: PATAPSCO OVERLOOK
WELLEN DRIVE

LOT NUMBER: 27

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	_____ sq. ft./bedroom
		<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

200 sq. ft./bedroom

Trench to be 2 wide.

Inlet 3 feet below original grade.

Bottom maximum depth 7 feet below original grade.

Effective area begins at 3 feet below original grade.

4 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: START THE FIRST TRENCH ³¹⁰/_{318'}

FROM THE FRONT LOT LINE AND 90' FROM
THE RIGHT LOT LINE AS SEEN WHEN FACING
THE PROPERTY FROM WELLEN DRIVE, RUN TRENCHES
ALONG CONTOUR TOWARD LEFT SIDE OF PROPERTY, AND RIGHT SIDE

12/29/86 CW

OF PROPERTY

PRELIMINARY

APPLICATION

A 31279

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

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

DATE 3/27/81

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. JOSEPH PEKARSKI

ADDRESS 13638 Georgia Avenue, Wheaton, Md. 10906 PHONE 465-7777
Jack Boender

PROPERTY LOCATION:
SUBDIVISION Georgia Avenue LOT NO. LOT 27 Sec. 17

ROAD AND DESCRIPTION Route 94 and Old Frederick Road 680 Weller Dr.

SIZE OF LOT 3 acres m/1 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 12-15-81
BP # 15923
SAU

THIS IS NOT A PERMIT

DATE 8/17/82

WELL YIELD TEST DATA SHEET - ~~FRANKLIN~~ HOWARD COUNTY

REVIEWED BY OKSA 11/21/82

Maryland Well Permit No. HO-81-2231

Owner or Applicant PIEKARSKI JOSEPH

Location of Property (road) OFF Weller DR.

Subdivision PATAPSCO OVERLOOK Lot 27 Block Plat Sec.

Depth of Well 325 ft Height of Measuring Point Above Ground 1 ft

Static Water Level Below Measuring Point 43 ft
Pump Started 9:45 106pm

The first entry in the table must be when you begin the drawdown. Enter all appropriate information. Indicate when the drawdown phase ends and the recovery test begins.

TIME (CHRON.)	WATER LEVEL Below M.P.	PUMPING RATE Time to fill 1 gal. bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per min.)
10:00	150 ft	20 Sec		3 GPM
10:15	150 ft	20 Sec		3 GPM
10:30	150 ft	20 Sec		3 GPM
10:45	150 ft	20 Sec		3 GPM
11:00	150 ft	20 Sec		3 GPM
11:15	150 ft	20 Sec		3 GPM
11:30	150 ft	20 Sec		3 GPM
11:45	150 ft	20 Sec		3 GPM
12:00	150 ft	20 Sec		3 GPM
12:15	150 ft	20 Sec		3 GPM
12:30	150 ft	20 Sec		3 GPM
12:45	150 ft	20 Sec		3 GPM
1:00	150 ft	20 Sec		3 GPM
1:15	150 ft	20 Sec		3 GPM
1:30	150 ft	20 Sec		3 GPM
1:45	150 ft	20 Sec		3 GPM
2:00	150 ft	20 Sec		3 GPM
2:15	150 ft	20 Sec		3 GPM
2:30	150 ft	20 Sec		3 GPM
2:45	150 ft	20 Sec		3 GPM
3:00	150 ft	20 "		3 "
3:15	150 ft	20 "		3 "
3:30	150 ft	20 "		3 "
3:45	150 ft	20 "		3 "
4:00	150 ft	20 "		3 "

I hereby certify that the yield test was conducted as described in State Health Department Regulations COMAR 10.17.13.07Q.

35 casing 30 open
DB45

Signature of Well Driller

C1 **6034**
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE 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 NUMBER **A-31279**

DATE Received
 [] [] [] [] [] [] [] []

DATE WELL COMPLETED
08 1987

Depth of Well
31 (TO NEAREST FOOT)

PERMIT NO.
NO-81-2231

OWNER **PISKARSKI** first name **JOSEPH**
 STREET OR RFD **WILLER DRIVE** TOWN **LISBON**
 SUBDIVISION **DATAPSCO ONSELEAK** SECTION **2** LOT **27**

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	
Top Soil	0	2	
Brown Shale	2	24	
Brown Slate	24	30	
Blue Slate	30	40	
Brown Slate	40	50	✓
Blue Slate	50	325	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **7** NO. OF POUNDS **200**
 GALLONS OF WATER **42**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **2** ft. to **30** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO**
 STEEL CONCRETE
PL **OT**
 PLASTIC OTHER

MAIN CASING TYPE **PL** **A** **35**
 Nominal diameter top (main) casing (nearest inch) **6**
 Total depth of main casing (nearest foot) **35**

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

C2

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
1	HO 33	325
2		
3		

SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) [] [] [] [] [] [] [] []

C3

PUMPING TEST
 HOURS PUMPED (nearest hour) **6**
 PUMPING RATE (gal. per min. to nearest gal.) **3**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **43**
 WHEN PUMPING **150**
 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**
 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 } LAND SURFACE (nearest foot) **2**
- below }

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. **273**
 DRILLERS SIGNATURE **Rahel Mayne**
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK from to
 IF WELL DRILLED WAS FLOWING WELL INSERT IN BOX 68 [] [] [] [] [] [] [] []

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) [] [] [] [] [] [] [] []
 WQ [] [] [] [] [] [] [] []
 TELESCOPE CASING LOG INDICATOR OTHER DATA

