

LAYOUT 2/5/03 2 PM INSP 4 _____
 INSP 2 2/6/03 1 PM INSP 5 _____
 INSP 3 2/10/03 3 PM INSP 6 _____
 ISSUE DATE: 2/4/2003

04-342364

APPROVAL DATE: 2/12/03

P 518532
 A 31916

PERMIT INDEXED

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Harry Eyre LOT NUMBER: 2

ADDRESS: 2835 Daisy Road PROPERTY OWNER: Mercer Custom Homes

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 240

LINEAR FEET OF TRENCH REQUIRED: 252

TRENCHES:	Trench to be 2.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Start the first trench 115 feet from the 278.96 foot long lot line and 140 feet from the 235.51 foot long lot line. Dig trenches on level ground running toward the 287.96 foot long lot line. Place successive trenches parallel to and down slope of the first trench.
NOTES:	

PLANS APPROVED: Frank Skinner DATE: 5/31/2002

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

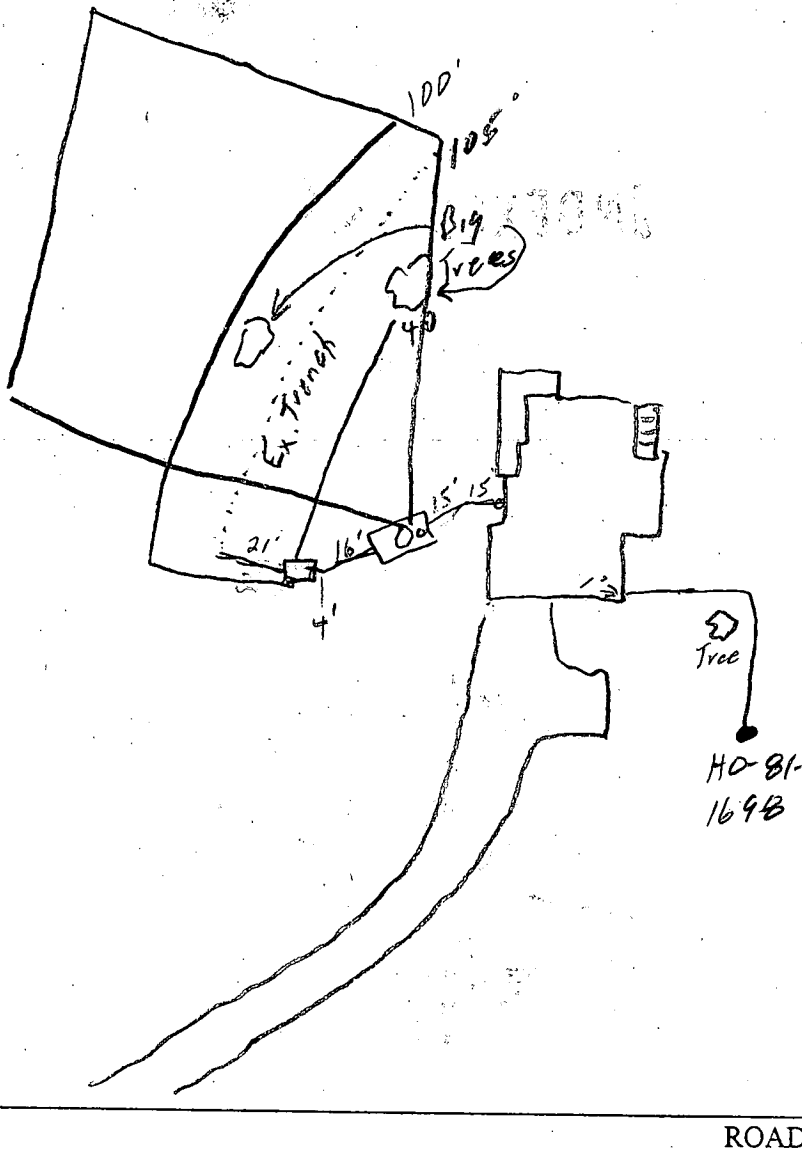
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

BUILDING PERMIT SIGNED AND RETURNED
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
 CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

3-25-03 BOD 140 818-46 Propane tank

A31914

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	3'	2'
NUMBER OF TRENCHES		3
TOTAL LENGTH		245'
ABSORPTION AREA		
DISTRIBUTION BOX LEVEL		<input checked="" type="checkbox"/>
DISTRIBUTION BOX BAFFLE		<input checked="" type="checkbox"/>
DISTRIBUTION BOX PORT		<input checked="" type="checkbox"/>

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	4'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input checked="" type="checkbox"/>
MANHOLE LOC	Center
6" PORT LOC	Front
WATERTIGHT TEST	<input checked="" type="checkbox"/>
SEPTIC TANK 2 LEVEL	<input type="checkbox"/>
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input checked="" type="checkbox"/>
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	<input type="checkbox"/>

PRE-CONSTRUCTION 2/5/03 Lot staked, located old trench, stay 10' off. Install (3) 30' trench to spec. Contour not accurate (SO) 2/6/03 Met w/ INSTALLATION Kirt, old trench a lot lower & off contour. Trench is dry Can They use old trench or cross it with new trenches? (SO) 2/12/03 Use Existing trench OK to cover all work (SO)

BUILDING PERMIT SIGNED AND RETURNED

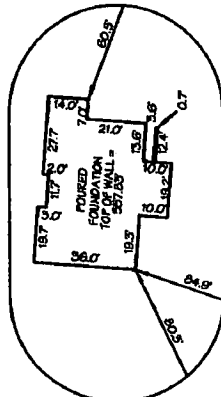
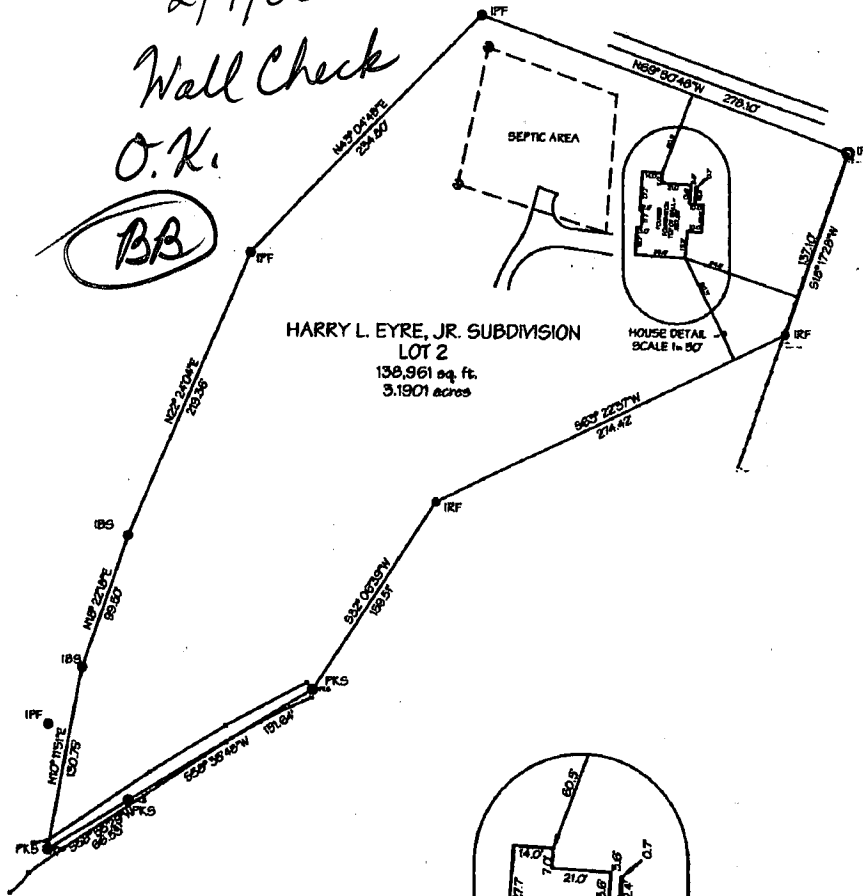
FINAL INSPECTOR *[Signature]*

DATE OF APPROVAL 2/12/03

PROPERTY KNOWN AS:
LOT 2
HARRY L. EYRE, JR. SUBDIVISION
PLAT NO. 5312
HOWARD, COUNTY, MD

THIS PLAT CAN NOT BE USED TO ESTABLISH
PROPERTY LINES OR CORNERS.

2/4/03
Wall Check
O.K.
BB



HOUSE DETAIL
SCALE 1 = 50'

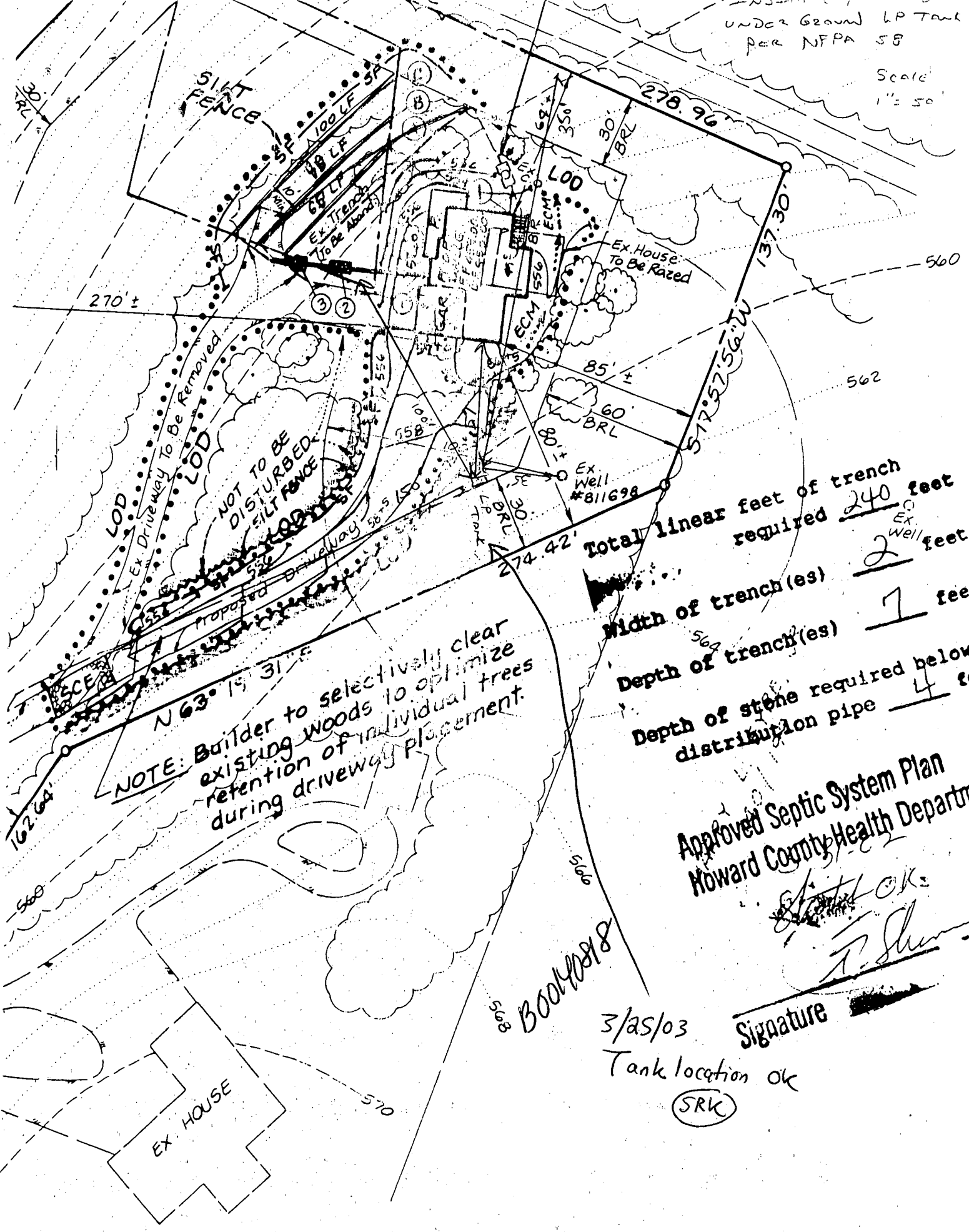
LOCATION DRAWING

TOP OF WALL = 557.83'

CERTIFICATION	SEAL	SCALE 1"= 100'	DATE 6/26/02
<p>This is to certify that I have surveyed the property known as:</p> <p><u>2835 DAISY ROAD</u></p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.</p>		<p>LDE Inc. Engineers, Surveyors, Planners</p> <p>9250 Rumsey Road, Suite 106 Columbia, Maryland - 21045 (410)715-1070 - (410)715-9540 Fax</p>	

UNDER GROUND LP TANK
PER NFPA 58

Scale
1" = 50'



Total linear feet of trench required 240 feet
 Width of trench(es) 2 feet
 Depth of trench(es) 7 feet
 Depth of stone required below distribution pipe 4 feet

Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature

3/25/03
 Tank location OK
 (SRK)

LEGEND:

5/11/87
5/18/87
10:30 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 58289
A 31916
DISTRICT 4th
DATE 12/17/86
DATE SYSTEM APPROVED 12/17/86
INSPECTOR Sidwell

Dave Hopkins

IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Harry L. Eyre Property ROAD 2855 ^{A 2835} Daisy Road LOT 2

PROPERTY OWNER Old Line Construction

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 174 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start 1st trench 160 feet down the left (278.96') lot line (from the juncture of 278.96 & 137.30 corner) and 20 feet off the left line as seen when facing property from Daisy Road. Run trenches along contour towards the right (274.26) line.

NOTE: SYSTEM STARTING AT 2ND HIGH HOLE RUNNING BACK TOWARDS HIGH HOLE TO AVOID POTENTIAL DRIVEWAY IMPACT.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above

PLANS APPROVED BY on septic tank. ok/cw B. Nixon DATE 10/01/86

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 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.

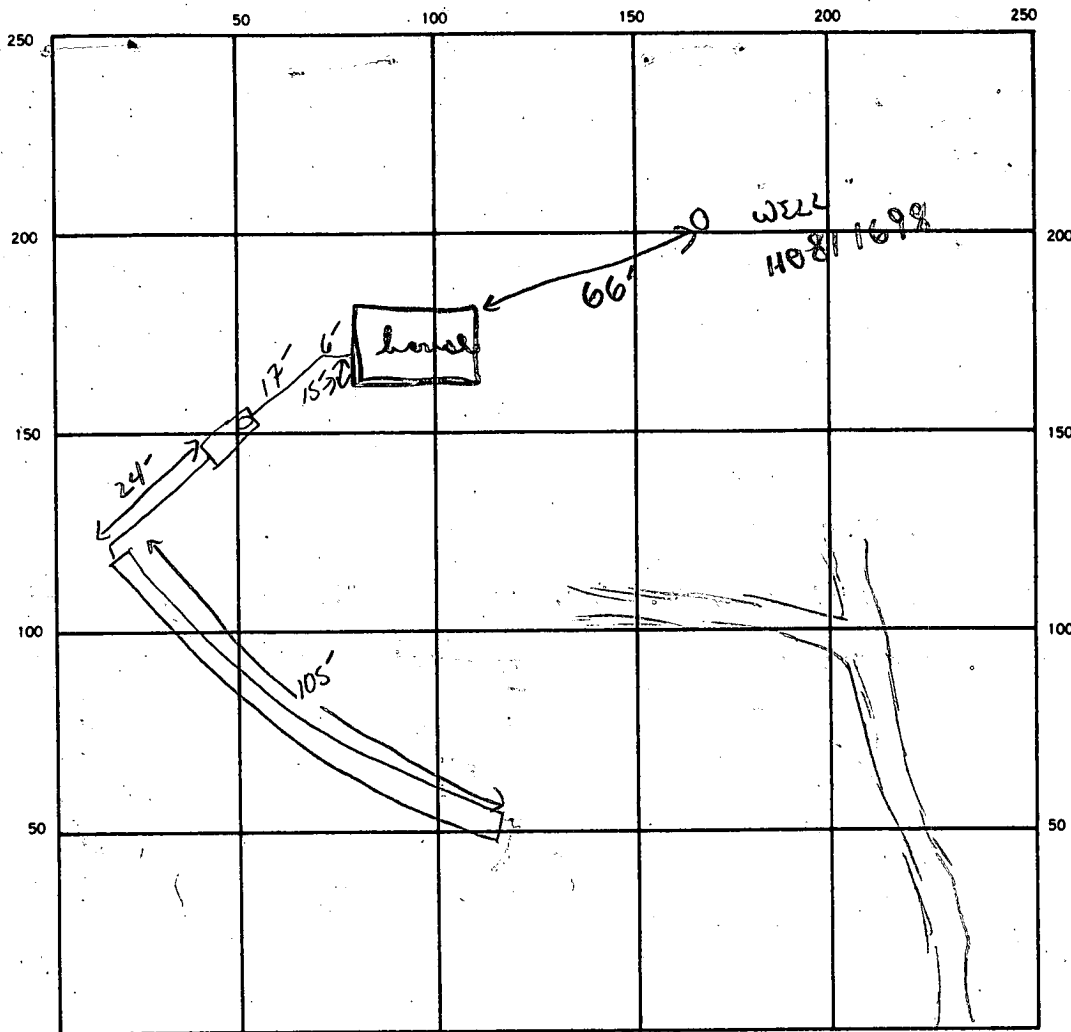
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 31916



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

DAISY RD

SEPTIC TANK. LEVEL ✓ 1000 GAL CLEANOUTS ✓

DISTRIBUTION BOX. LEVEL N/A

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

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 105 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL BOTTOM AREA 525 SQ. FT.

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

ABSORBENT AREA 525 SQ. FT.

REMARKS 2/17/86 OK to make trench 105' long. OK to install tank + stand trench.

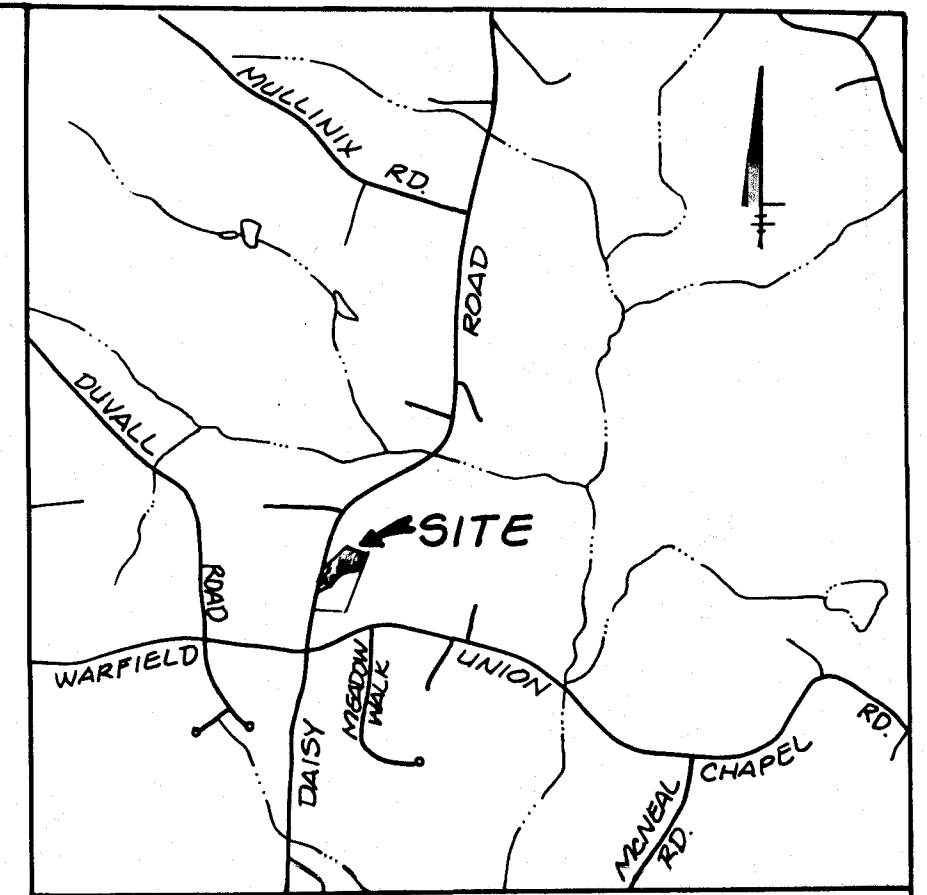
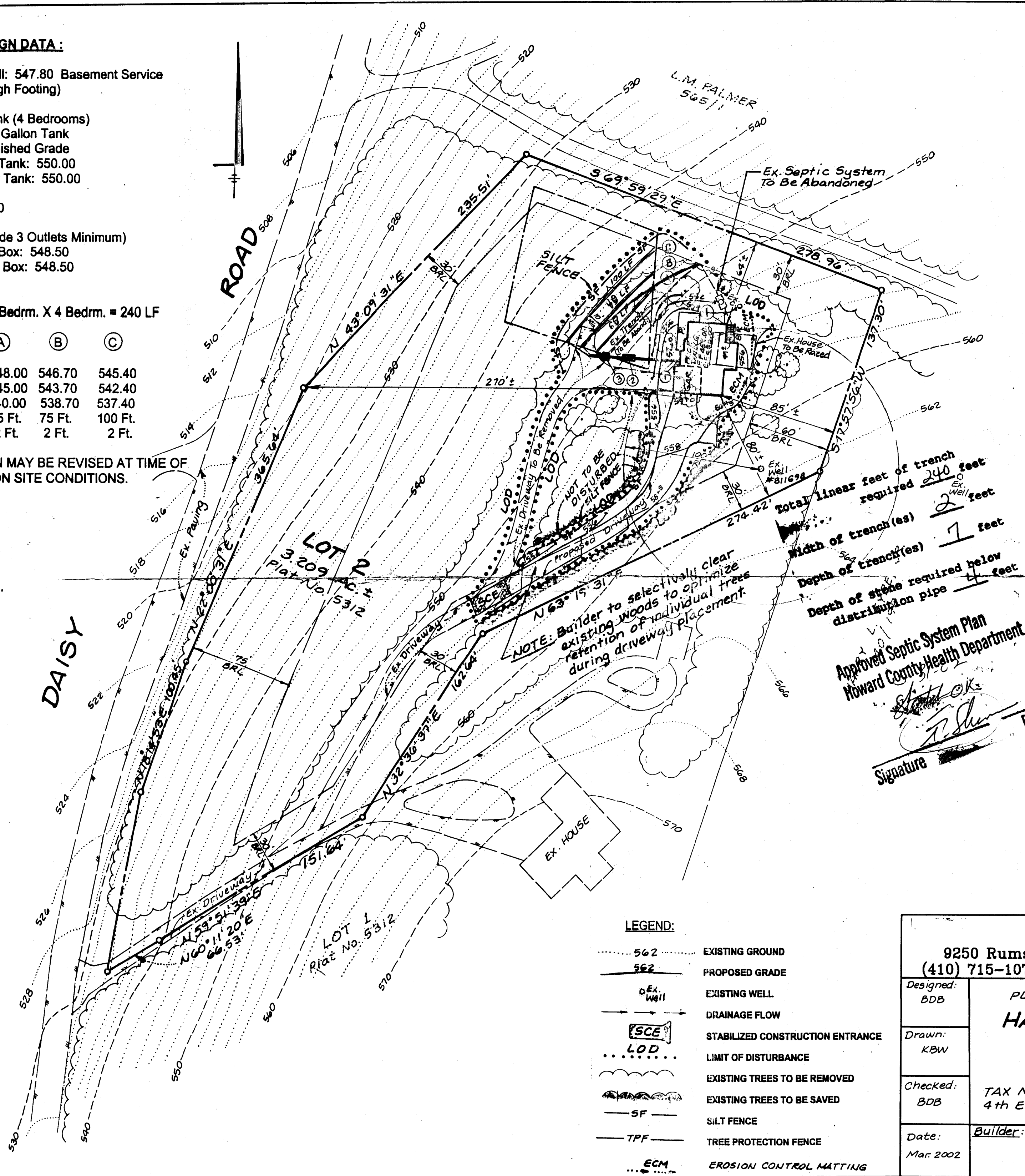
DATE SYSTEM APPROVED 2-18-87 INSPECTOR S. Abel

SEWAGE SYSTEM DESIGN DATA :

- ① Invert at foundation wall: 547.80 Basement Service (Provide Sleeve Through Footing)
- ② 1250 Gallon Septic Tank (4 Bedrooms)
Remove Existing 1000 Gallon Tank
Provide Manhole to Finished Grade
 - A. Ex. Ground Over Tank: 550.00
 - B. Prop. Grade Over Tank: 550.00
 - C. Invert In: 547.30
 - D. Invert Out: 547.00
- ③ Distribution Box: (Provide 3 Outlets Minimum)
 - A. Ex. Ground Over Box: 548.50
 - B. Prop. Grade Over Box: 548.50
 - C. Invert In: 545.50
4. Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF

	(A)	(B)	(C)
Existing Ground			
Over Trench:	548.00	546.70	545.40
Inv. Trench:	545.00	543.70	542.40
Botm. Trench:	540.00	538.70	537.40
Trench Length:	65 Ft.	75 Ft.	100 Ft.
Trench Width:	2 Ft.	2 Ft.	2 Ft.

NOTE: TRENCH DESIGN MAY BE REVISED AT TIME OF INSTALLATION BASED ON SITE CONDITIONS.



VICINITY MAP

Scale: 1" = 2000'

NOTES:

1. Existing Zoning: RC (Rural Conservation)
2. Plat Reference: Plat No. 5312
3. Limit of Disturbance: 14,000 Sq. Ft. +/-
4. The proposed driveway for this lot shall be a minimum of 10 feet wide, 6" crusher run with 2 1/2" macadam surface.
5. The topography shown is taken from the Howard County aerial photogrammetry and field run by LDE, Inc.
6. See architectural plans for building dimensions.

Total linear feet of trench required **240 feet**
 Width of trench(es) **2 feet**
 Depth of trench(es) **1 foot**
 Depth of stone required below distribution pipe **4 feet**

NOTE: Builder to selectively clear existing woods to optimize retention of individual trees during driveway placement.

Approved Septic System Plan
 Howard County Health Department

Signature: *[Signature]* Date: _____

LEGEND:

	EXISTING GROUND
	PROPOSED GRADE
	EXISTING WELL
	DRAINAGE FLOW
	STABILIZED CONSTRUCTION ENTRANCE
	LIMIT OF DISTURBANCE
	EXISTING TREES TO BE REMOVED
	EXISTING TREES TO BE SAVED
	SILT FENCE
	TREE PROTECTION FENCE
	EROSION CONTROL MATTING

LDE, INC. 9250 Rumsey Road, Suite 106, Columbia, MD. 21045 (410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)		
Designed: BDB	PLOT PLAN FOR BUILDING PERMIT HARRY L. EYRE, JR. SUBDIVISION LOT 2	Scale: 1" = 50'
Drawn: KBW		Drawing 1 of 1
Checked: BDB	TAX MAP 13 P/O PARCEL 114 4th ELECTION DISTRICT HOWARD CO., MD	Job No. 02-012
Date: Mar. 2002	Builder: MERCER CUSTOM HOMES, INC 13787 ROVER MILL ROAD WEST FRIENDSHIP, MD 21794 (410) 489-5438	File No.

Attn: Mary Lou

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Van Sant Pllbs + 111p Telephone #: 301-825-0444
Address: 3 N. Main St.
Mc Dow Md 2071

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Harold Van Sant License# 1467

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Messer Telephone #: 410-484-5438
Subdivision: _____ Lot #: _____ Well Tag #: HO-81-11698
Site Address: 2835 Daisy Rd
Lisbon, MD 21765

Submersible Pump Data
Make: Goulds
Model #: 716S05452
Pump Capacity _____ GPM
Well Yield: _____ GPM

Pitless Adapter
Make: Lampbell
Model#: Blox
Depth: 42 (36" min)
NSF approved: Yes

Well Cap and Electric Conduit
Two piece watertight cap:
Screened, vented well cap:
Cap secured to casing:
Conduit min 18" B.G.:
Conduit secured to well cap:

Depth of well encountered at time of pump installation: 40 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt _____

Piping to house
Type: Polyethylene
PSI: 200 (160 psi min)
Depth of supply line: 12 (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: 15
Approximate length of sleeve: 15
Sleeve caulked and sealed properly: Yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Harold Van Sant _____ 3.14.03
Signature of company representative responsible for installation date

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: _____ Date Insp. Approved: 2/16/03
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

2/17/87 (early pr)
2/24/87

437-161

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

New Installation Replacement
 Receipt # 38701
 Date 2-13-87

Name of Installer Jimmy Yonetz, Fred. Plumbing Telephone 663-4175

License number 8109
 Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Harry Eyre Telephone 531-3908
 Subdivision mml-sub Lot # 2 Well tag # RH-19-54
 Site Address 2855 ADALSY ROAD HO - 81-1698

Pump	Motor	Pitless Adapter
1. Type a. Deep well jet <input type="checkbox"/> b. Shallow well jet <input type="checkbox"/> c. Submersible <input checked="" type="checkbox"/>	1. Horsepower <u>1/2</u> 2. RPM <input type="checkbox"/> 3. Voltage <input type="checkbox"/> a. 110 <input type="checkbox"/> b. 220 <input type="checkbox"/> <u>230</u> <input checked="" type="checkbox"/>	1. Make <u>Martinson</u> 2. Model # <u>B10X</u> 3. Depth <input type="checkbox"/>
2. Make <u>Goulds</u>		
3. Model # <u>SES05412</u>		
4. Capacity <input type="checkbox"/> GPM		
5. Pump exceeds well capacity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input type="checkbox"/> No <input type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other <input type="checkbox"/>		
Tank	Piping	Well data
1. Capacity <input type="checkbox"/>	1. Type <input type="checkbox"/>	1. Depth <u>140</u> ft.
2. Pressure relief valve? <u>Yes</u>	2. Size <u>1"</u>	2. Yield <u>20</u> GPM
	3. NSF and/or BOCA Code approved <u>Yes</u>	3. Static water level <input type="checkbox"/> ft.
	4. Depth of supply line <input type="checkbox"/>	4. Will water supply be disinfected by installer? <u>NO</u>

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: Douglas Zettle Jr.

Date: 2/12/87

2/26/87 STICKER APPLIED OK TO COVER PIPING

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

PRESSURE TANK STILL NEEDS INSPECTION BY H

C1 5330

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 31916

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

DATE RECEIVED

8 13

DATE WELL COMPLETED

11 20 81

DEPTH OF WELL

22 140 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

10-81-16913

OWNER

CONSTRUCTION

OLD LINE

STREET OR RFD

Daisy RD

FIRST NAME

TOWN

LISBON

SUBDIVISION

HARRY L. SYRE PROP.

SECTION

LOT

2

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 FROM TO Check if water bearing

DESCRIPTION	FEET FROM	TO	Check if water bearing
TOP Soil	0	2	
Clay	2	4	
Shaley	4	10	
Silt & Clay	10	20	
Shale	20	80	
Mica	80	85	
sand stone	85	90	✓
Mica	90	140	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

Y N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 13 NO. OF POUNDS 1300

GALLONS OF WATER 65

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 50 ft. (enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING Nominal diameter Total depth top (main) casing of main casing (nearest inch) (nearest foot)

ST 6 63

OTHER CASING (if used)

diameter depth (feet) inch from to

screen type or open hole

SCREEN RECORD

insert appropriate code below

ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

DEPTH (nearest ft.)

1 40 61 140

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK from to

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

3

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

12

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 66

WHEN PUMPING

76

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)

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

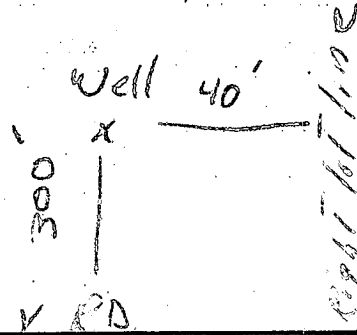
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above LAND SURFACE - below (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)



CIRCLE APPROPRIATE LETTER 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. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

RN - 1454

Jul 11-21-84
12:30

Page _____ of _____
Date _____

Review of 3/2/87 c/w

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1698
Location of property (road) DAISY RD
Subdivision HARRY L BYRS PROP. Lot 2 Block _____ Plat _____ Sec. _____
Well Driller GEORGE EASTRDAY Owner CONSTRUCTION, OLD LINE

Depth of well 140 ft. 206 PM
Distance of measuring point (M.P.) above ground 0'
Static water level (S.W.L.) below M.P. 66'

I. High rate pumping -- reservoir drawdown
Time pump started 12:35 Pumping rate 12 gpm
Total time 12:50 to reach pumping water level 76' ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
1:05	76'	5 SEC		12 gpm
1:20	76	5		12 gpm
1:35	76	5		12 gpm
1:50	76	5		12
2:05	76	5		12
2:20	76	5		12
2:35	76	5		12
2:50	76	5		12
3:05	76	5		12
3:20	76	5		12
3:35	76	5		12
3:50	76	5		12
4:05	76	5		12

PUMP SET 130'
BSP

B 1 8850

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

00-51-1097

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

please print or type

Date Received

9/2/86

OWNER INFORMATION

15 Last Name: O'DONNELL, 16 First Name: JOHN, 17 Street or RFD: 341, 18 Town: LISAON, 19 State: MD, 20 Zip: 21779

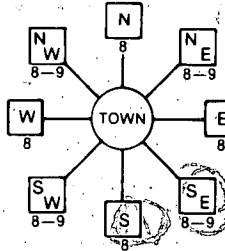
B 3

LOCATION OF WELL

1 2: HOWARD, 3 COUNTY: HOWARD, 4 23 SUBDIVISION: MARY H ELYRS HACH, 5 SECTION: 44, 46, 6 LOT: 48, 50, 7 52 NEAREST TOWN: LISADON, 8 MILES FROM TOWN: 3 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 2855 NEAR WHAT ROAD: DAISY RD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 300 37 DISTANCE FROM ROAD: 300 FT

ENTER FT or MI

B 2

WELL INFORMATION

1 2 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)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
E FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD, COUNTY NO: 231916, DATE ISSUED: 10/01/86, CO SIGNATURE: [Signature], EXP. DATE: 04/01/87, NORTH GRID: 23000, EAST GRID: 0751000

APPROXIMATE DEPTH OF WELL: 200 FEET

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 DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

- 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 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: GAP

FORCE: [Signature], PERMIT No.: 00-51-1097

SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

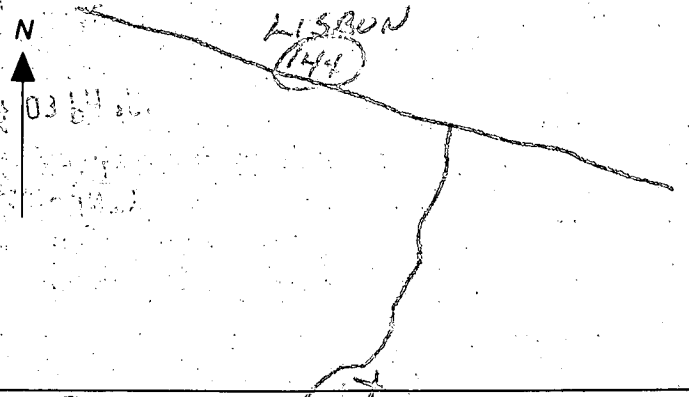
SOURCES OF DRILLING WATER

- 1 WELL, 2, 3

WRITE THE BOX NUMBER FROM THE MAP HERE

E 4001, N 5303

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



could not locate site 10/2/86 call [Name] per Easterday's men 63" casing 50' open 13 bags

11/20/86 grouted pervious clay
↓
has ≈ 3' of settling ^{all} around
pipe
location as per approved
site

11/21/86
called
in

13 cement
50' open hole
— casing
160 sample

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
SEP 26 4 03 PM '86
DIVISION OF
ENVIRONMENTAL
HEALTH

L.M. PALM
565/1

L.M. PALMED
365/1

N 553000

ROAD

t ROAD

VAISY

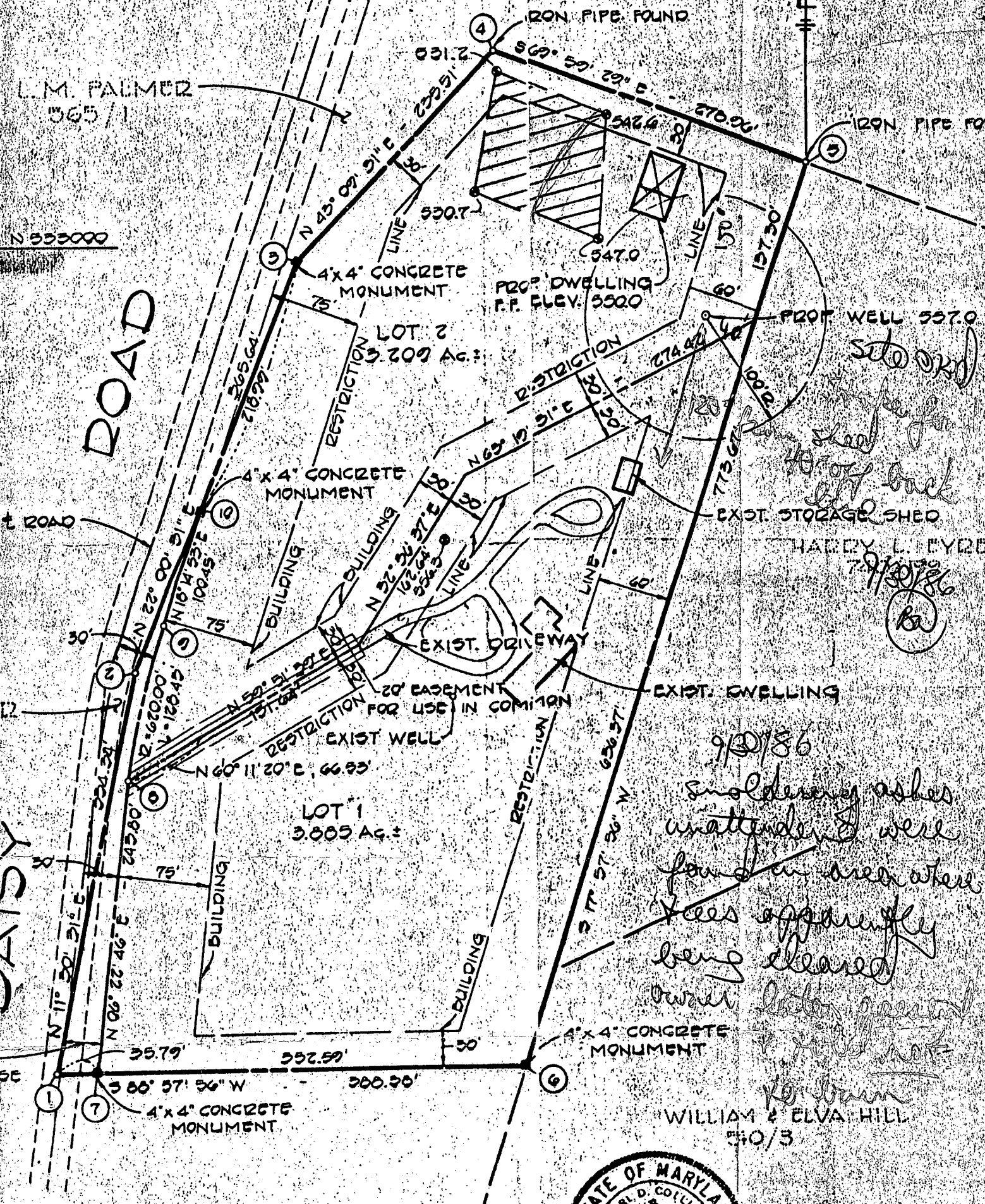
SE

H.L. EYRE & WIFE
444/368

FUTURE RIGHT OF WAY LINE

IRON PIPE FOUND

IRON PIPE FOUND



WILLIAM & ELVA HILL
540/3



EARL D. GOLLINS

8-26-82
OATE

Ote line Construction
Lot 2 - Eyre Property
2855 Daisy Rd.

pd - 9/18/86

R - 37673

30.00

RECORDED

APPLICATION

SEWAGE DISPOSAL TESTING

A 31916

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT FOURTH

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

DATE July 12, 1982

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 HARRY L. EYRE JR.

ADDRESS 2855 DAISY ROAD WOODBINE MARYLAND 21797 PHONE 442-1330

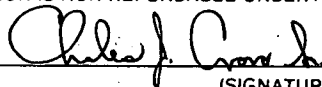
PROPERTY LOCATION:

SUBDIVISION PROPERTY OF HARRY L. EYRE JR. LOT NO. 2

ROAD AND DESCRIPTION 500' ± NORTH FROM INTERSECTION OF DAISY ROAD AND UNION CHAPEL ROAD

SIZE OF LOT 3.4 Ac. ± TYPE BLDG. SINGLE FAMILY
(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 _____ FOR _____ DATE _____

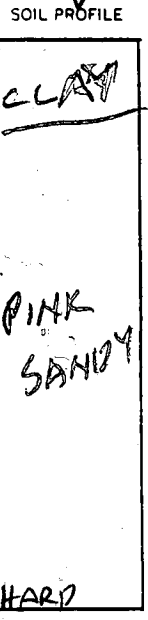
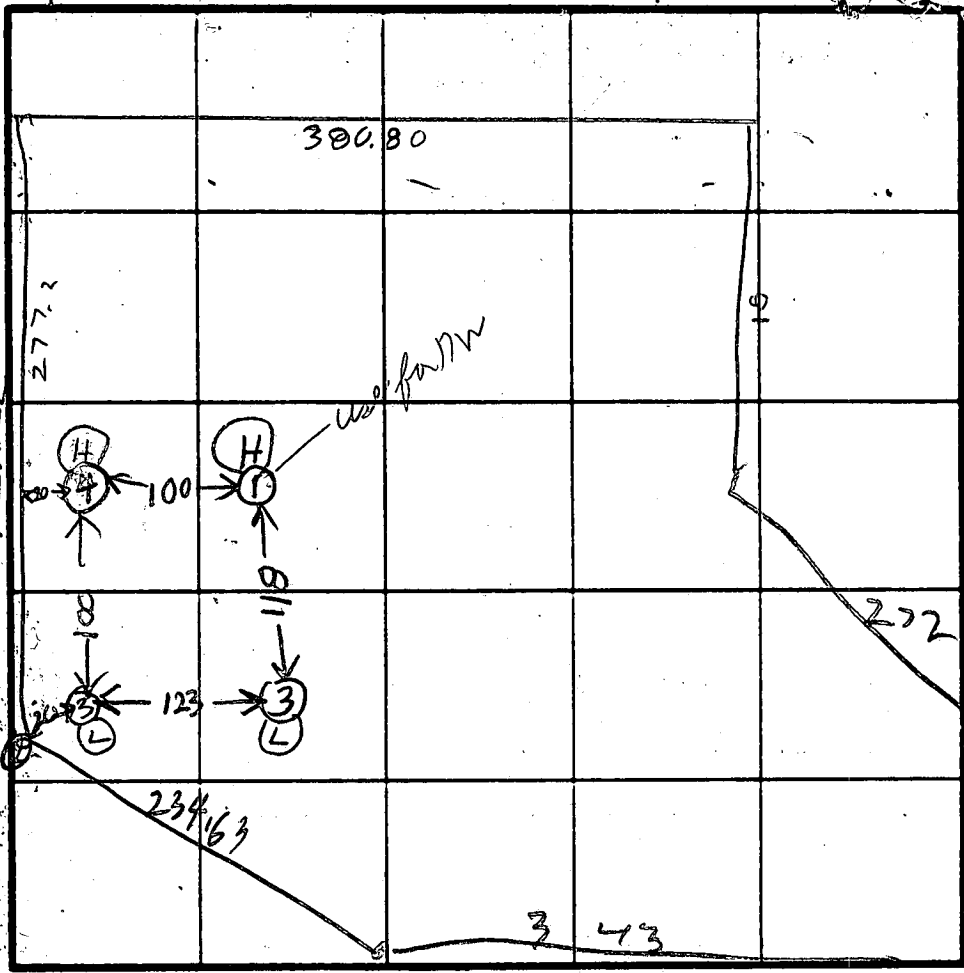
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

FENCE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME	
			START	STOP	START	STOP		
7/21/82	1 S	2 1/2	1015	1015 1/2	1015 1/2	1016	1/2	
	1 D	7	1015	1018	1019	1021	3	
	1 V	13	ALL SANDY					
	2 S	2 1/2	1022	1023	1023	1026	3	
	2 D	6 1/2	1022	1024	1024	1026	4	
	2 V	13	ALL SANDY					
	3 S	2 1/2	1029	1030	1030	1032	2	
	3 D	7	1029	1030	1030	1033	3	
	3 V	13	ALL SANDY					
	4 V	12 1/2	ALL SANDY					
	(V)	11	VISUAL HOLE FOR EXIST HOUSE ON RESIDUAL LOT SE 30					
			SEE SOIL PROFILE					

USE FOR DRY WELL

REMARKS 7/21/ WETHINK EXISTING HOUSE NOT LOCATED CORRECTLY ON PLAT A BOGDAN WILL CHECK

TYPE OF SOIL _____
TESTED BY R HODGES

ALSO PRESENT HEYRE FLOCK & SKIP A. BOGDAN

Lot 1

EH-12 1079