1/6/82 Appd R.H.

P 31779

A Repair

1/6/82 a.m. please

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

05-341590

INDEX

ELLICOTT CITY

DISTRICT 5th

DATE 1/5/82

Jack Fyock IS PERMITTED TO INSTALL ____ ALTER X

ADDRESS 13775 Triadelphia Road, Dayton, Md. 21036 PHONE 988-9270

SUBDIVISION Linden Chapel Hills ROAD 4948 Ten Oaks Road LOT 4, Blk A, Sec 1

PROPERTY OWNER Mr. Anderson

ADDRESS 4948 Ten Oaks Road, Dayton, Maryland 21036

SPECIFICATIONS 3 BEDROOMS

SEPTIC TANK CAPACITY _____ GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

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

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

REPAIR - Call for an appointment when ground is opened up and Sanitarian will recommend the repair system.

DEEP DITCH 360 SQ FT SIDEWALL AREA 12FT DEEP FILLED WITH 7 FT STONE RUN DITCH OFF OLD DWL

PLANS APPROVED BY Palmer F. Wine DATE 1/5/82

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

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

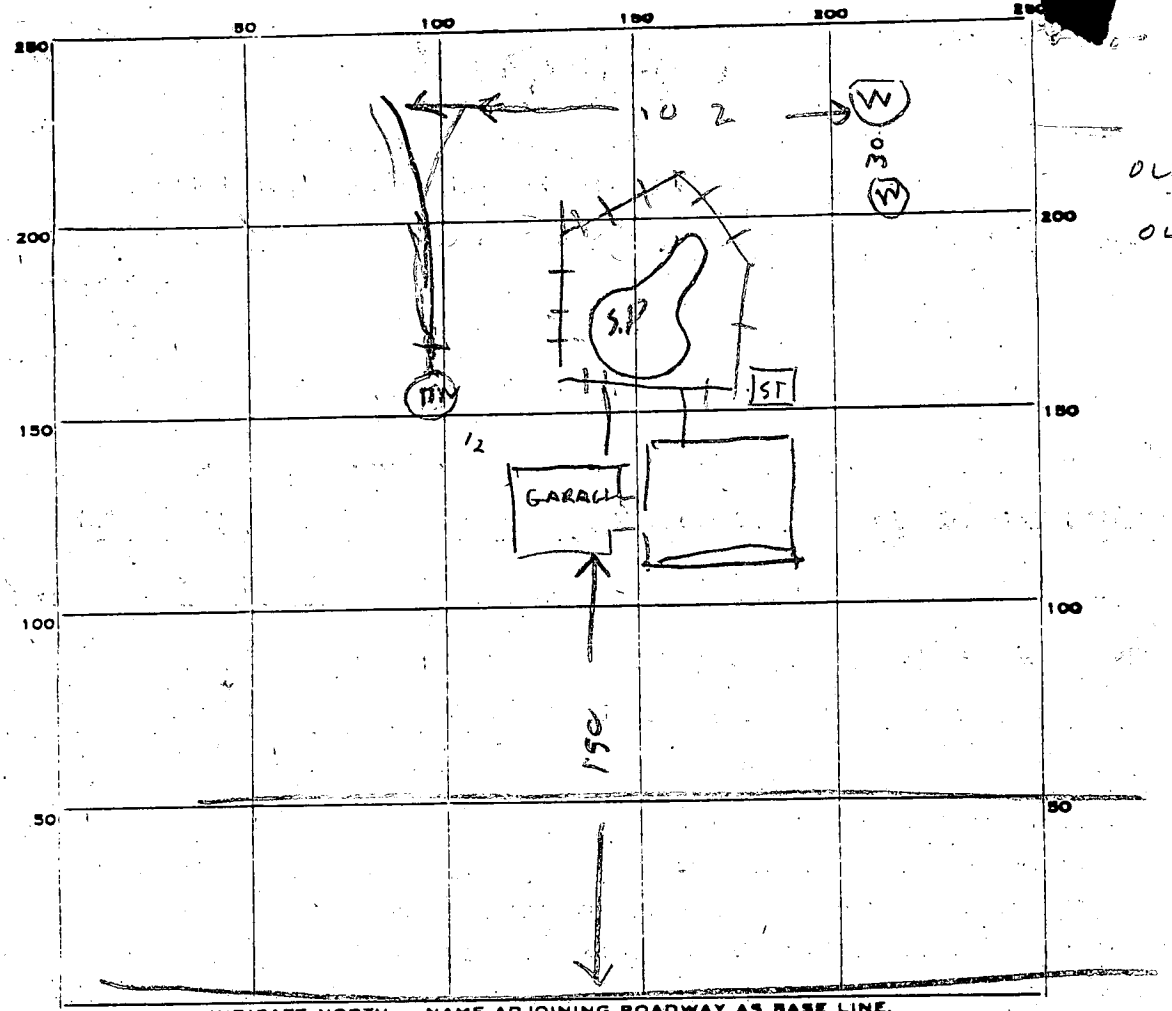
PERMIT VOID AFTER THREE YEARS.

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

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

X 031779

EH-2-1079



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE.

TEN OAKS RD

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 IN. TOTAL LENGTH 61 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 427

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 1/5/81 OLD DRY WELL IN USE 10 YEARS DITCH DUG 12 FT DEEP TOP 4FT CLAY BOT 8FT SANDY. SKIPSAID 15FT HOLE DUG B SOIL LOOKED OK EARLIER DITCH OK ADD STONE

1/5/81 PM STONE ADDED RH

DATE SYSTEM APPROVED 1/6/81 INSPECTOR Raymond Hadley

aff. 12.13.71

12/13/71

INDEXED

PERMIT

P 16551

A 15632

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 12/8/71

Jack Fyock IS PERMITTED TO INSTALL X ALTER

ADDRESS Ten Oaks Road, Glenelg, Md. PHONE 286-2939

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Linden Chapel Hills ROAD Ten Oaks LOT 4, Blk. A, Sec. 1

PROPERTY OWNER ~~Ashton Realty Co.~~ Gerald Anderson 6/26/81

ADDRESS

SPECIFICATIONS - 3 bedrooms

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

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

SEPTIC TANK CAPACITY 1,000 GALLONS

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

OTHER Dry well to be 100 sq. ft. absorbent sidewall area below the inlet pipe per bedroom. Inlet pipe to begin 4½ ft. below original grade. Maximum depth of dry well to be 13 ft. below original grade. Locate dry well 105 ft. from front property line and 18 ft. from left side line as lot is seen standing on Ten Oaks Road facing lot.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

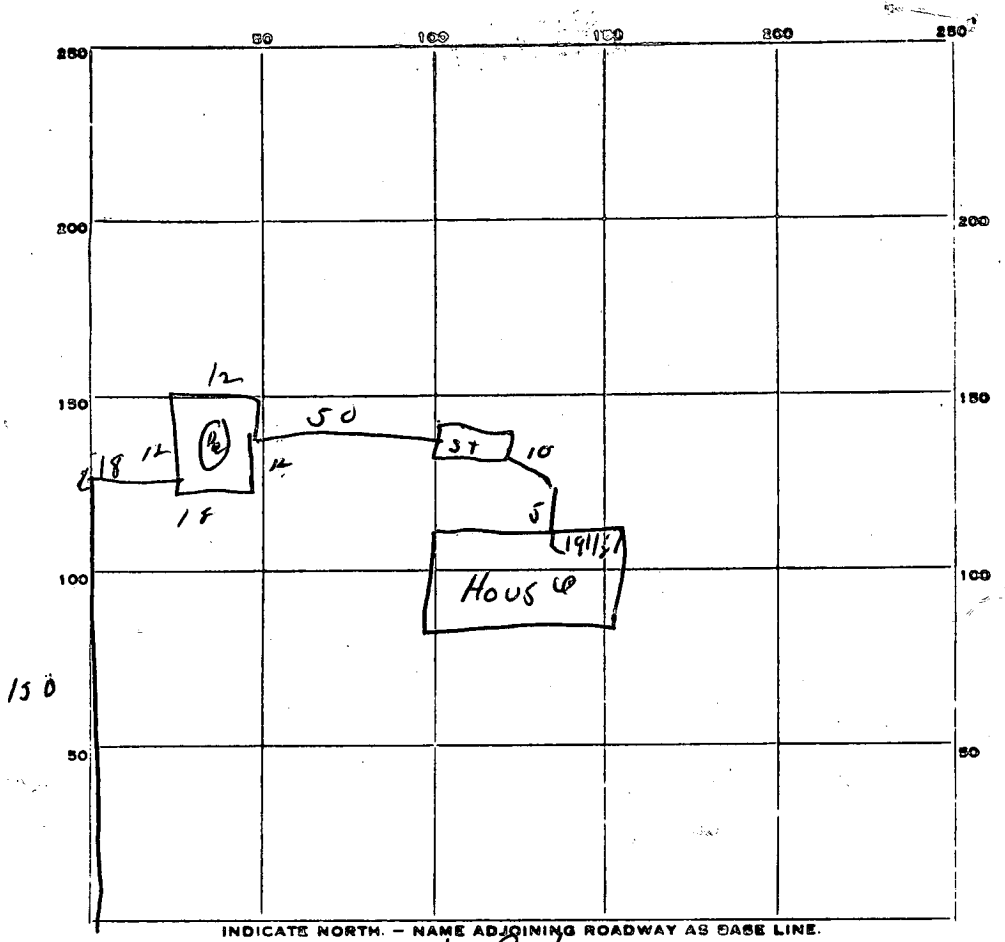
PLANS APPROVED BY James T. Wright DATE 11/18/70

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

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.

A 15632



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

Ten Oaks Rd

PERMIT CARD 01K

SEPTIC TANK, LEVEL 01K CLEANOUTS 01K

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH FT. TRENCH WIDTH FT.

GRAVEL DEPTH IN. TOTAL LENGTH FT.

NUMBER OF TRENCHES TOTAL BOTTOM AREA

SEEPAGE PITS, ~~INSIDE DIAMETER~~ Perimeter 48 FT. DEPTH BELOW INLET 6 1/2 FT.

ABSORBENT AREA 312 SQ. FT.

REMARKS

DATE SYSTEM APPROVED 12-13-71 INSPECTOR DW Monaghan

Preliminary

APPLICATION

SEWAGE DISPOSAL TESTING

A 15632

P

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY Septic tank for 3 bedroom 1000 gal ELLICOTT CITY

" " " 4 " " 1200 gal DISTRICT 5

Dry well to be 100 sq ft of absorbent DATE 11/17/70
sidewall area below the inlet pipe per bedroom
Inlet pipe to be an 4 inch ft below original grade. Max imum depth
of dry well to be 13 ft below original grade. Locate dry well
105 ft from front property line and 18 ft from left side line
as lot is seen standing on Ten Oaks Rd facing lot.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Ashton Realty Co.

ADDRESS Ashton, Maryland PHONE 924-4811

PROPERTY LOCATION: 4A SECT 1

SUBDIVISION Linden Chapel ~~Woods~~ Hills LOT NO. ~~4, Sec. 2~~

ROAD AND DESCRIPTION Ten Oaks Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 31,500 sq. ft. TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Robert Johnsen

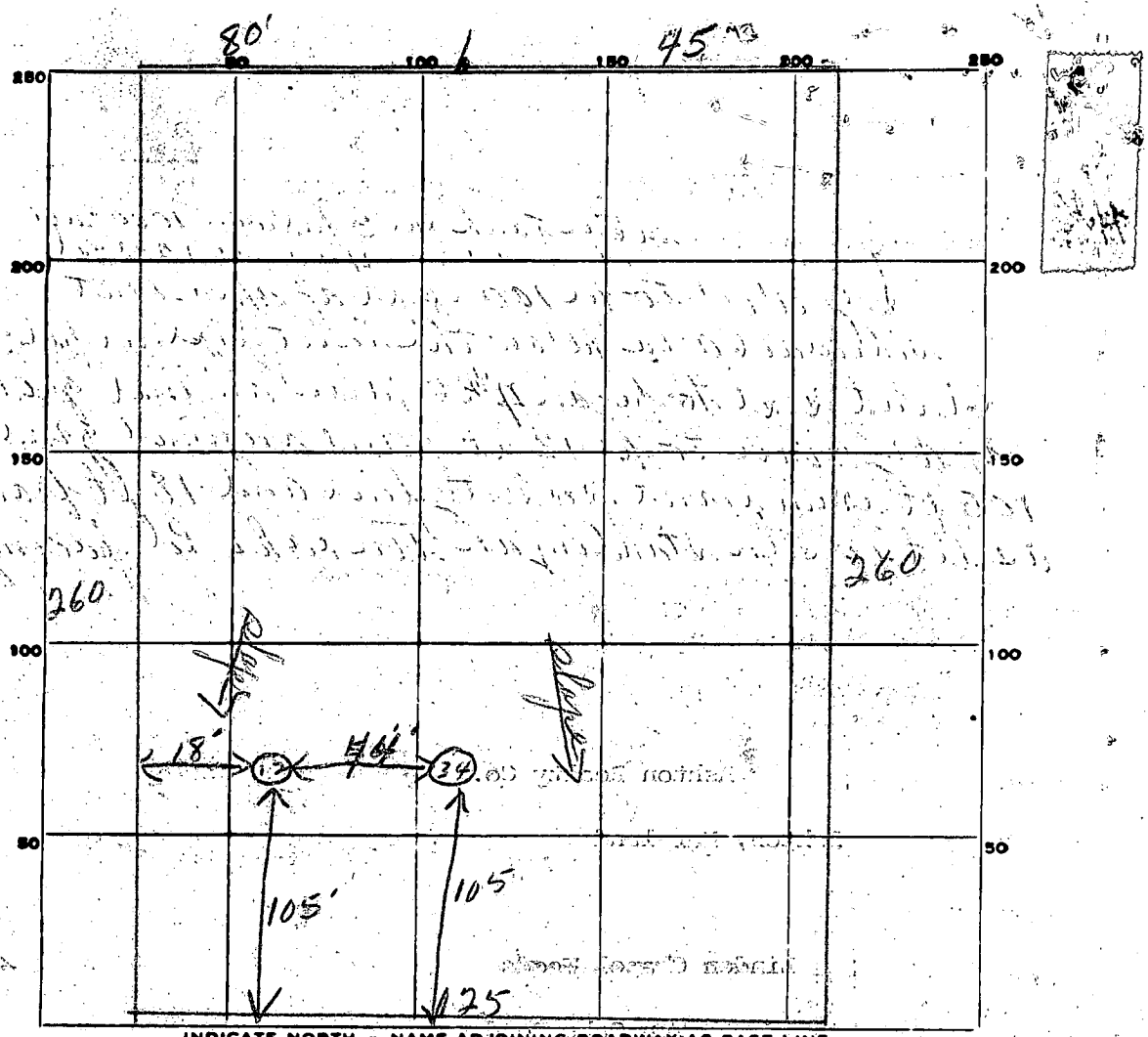
APPROVED BY James T. Wright FOR Dry well DATE 11/18/70
(KIND OF SYSTEM)

REJECTED BY FOR DATE
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/17/70	1	11'	10 34	10 36	10 36	10 38	2 min
	2	5'	10 35	10 38	10 38	10 44	6 min
	3	12'	10 45	10 47	10 47	10 49	2 min
	4	6'	10 47	10 49	10 49	10 51	2 min

SOIL AUGER FINDING _____

TESTED BY _____

REMARKS _____

APPLICATION

SEWAGE DISPOSAL TESTING

A 15632

P

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY Septic tank for 3 bedroom 1000 gal ELLICOTT CITY

" " " 4 " 1200 gal

Dry well to be 100 sq ft of absorbent DISTRICT 5

sidewall area below the inlet pipe per bedroom DATE 11/17/70

Inlet pipe to begin 6 ft below original grade. Maxim depth

of dry well to be 13 ft below original grade. Locate dry well

105 ft from front property line and 18 ft from left side line

as lot is seen standing on Ten Oaks Rd facing lot.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Ashton Realty Co.

ADDRESS Ashton, Maryland PHONE 924-4811

PROPERTY LOCATION:

SUBDIVISION Linden Chapel Woods Hills LOT NO. 4A Sect 1 ~~4, Sec. 2~~ ~~4, Sec. 3, Blk. A~~

ROAD AND DESCRIPTION Ten Oaks Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 31,500 sq. ft. TYPE BLDG. 3 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Robert Johnsen

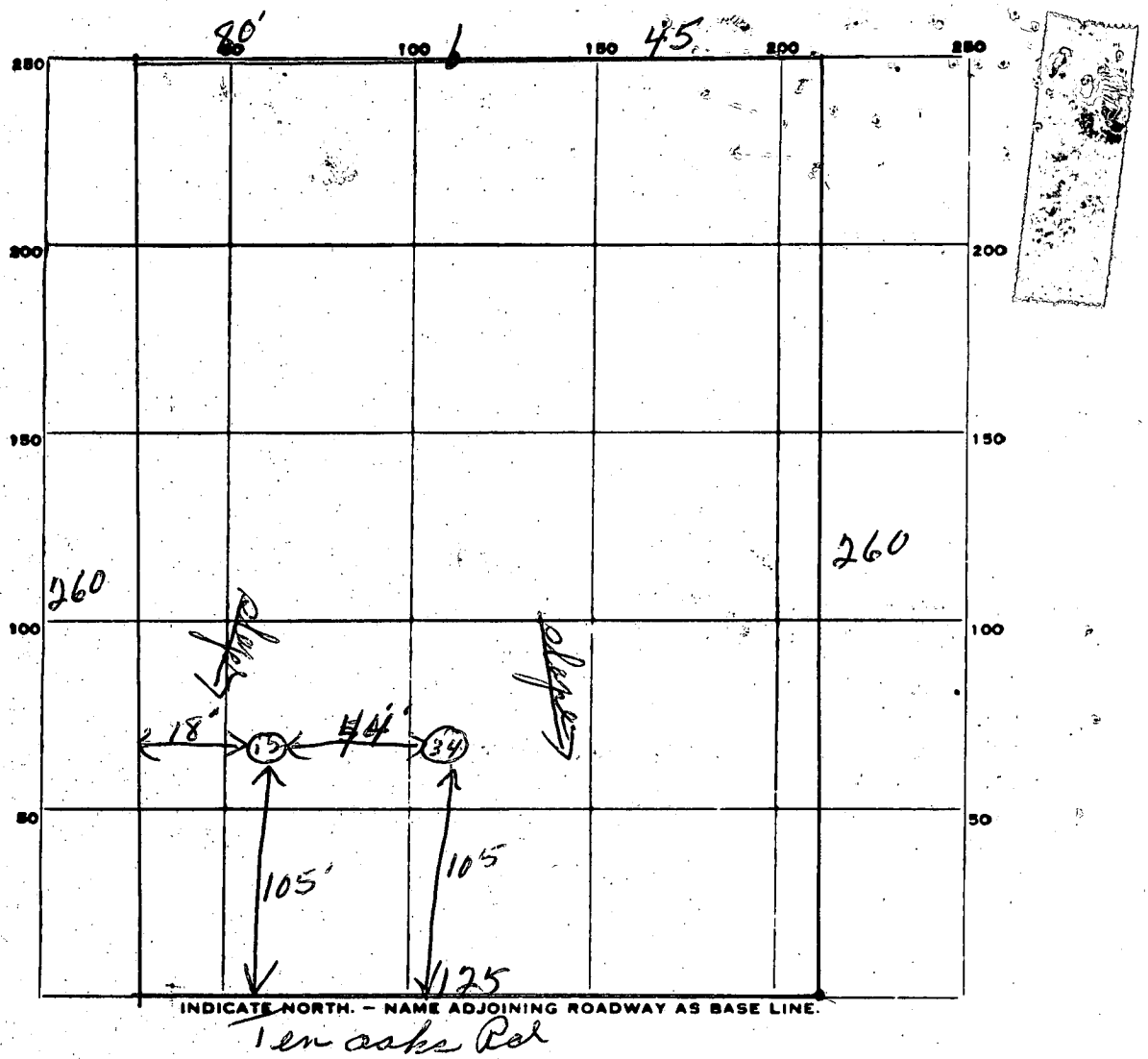
APPROVED BY James T. Wright FOR Dry well (KIND OF SYSTEM) DATE 11/18/70

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE.

Glenoaks Rd

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/17/70	1	11'	10 34	10 36	10 36	10 38	2 min
	2	5'	10 35	10 38	10 38	10 44	6 min
	3	12'	10 45	10 47	10 47	10 49	2 min
	4	6'	10 47	10 49	10 49	10 51	2 min

12 min AV

4½ ft inv

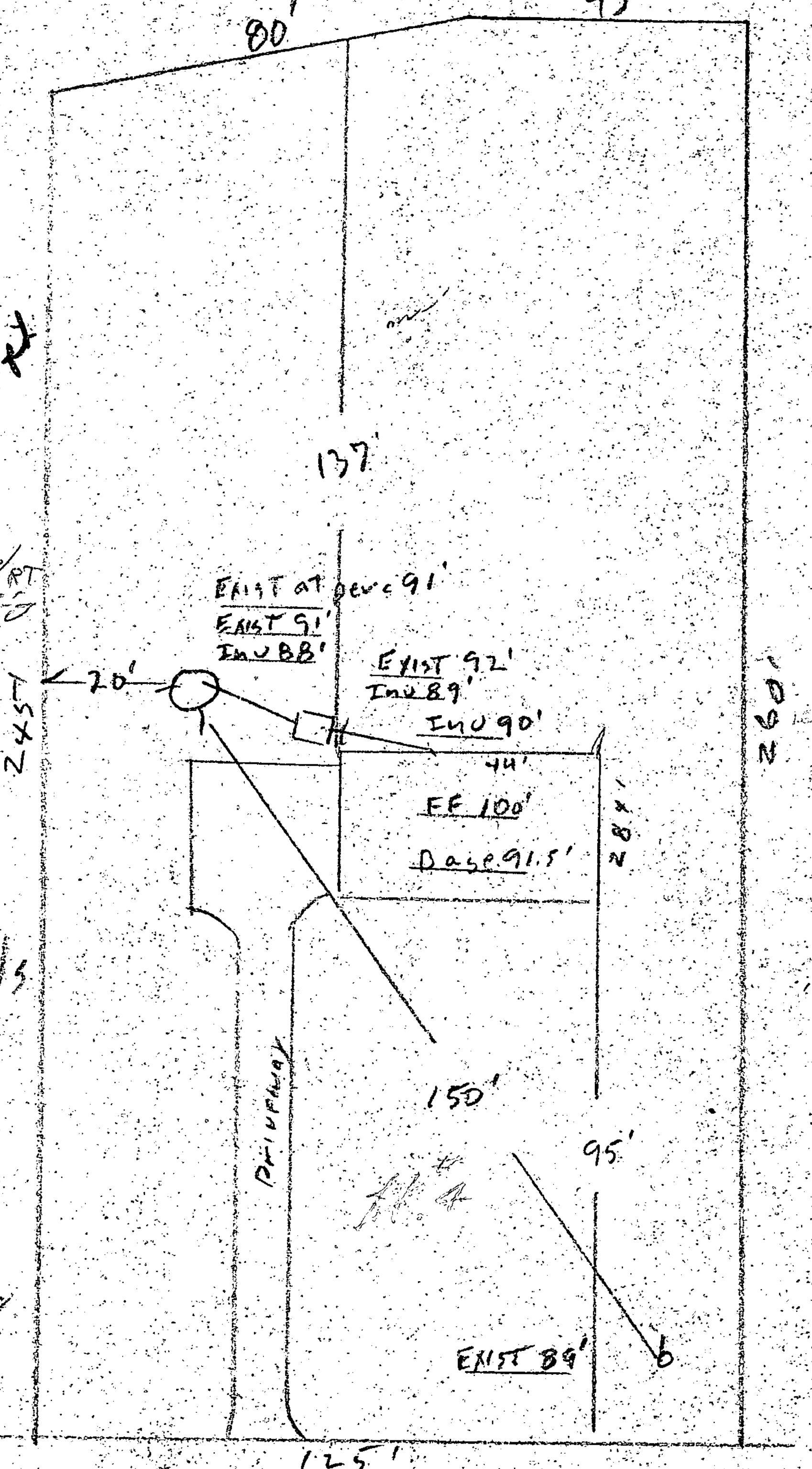
SOIL AUGER FINDING

TESTED BY

REMARKS

maximum depth permitted for inlet to Dry wells 3 ft

location change d/RT for purpose of relocating well, well & sprinkler



LOT 4 BLK A
Linden Chapel Hills
3/4" = 25'

Edwin G Willson
Ashton Md
7749698

4948 Ten Oak Rd

13 - Square
11 deep
6½ Right
10 Top

12' square
11' deep
6½' wall up
10' Top

1312 sq ft

PERMIT

P 16551

A 15632

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 12/8/71

Jack Fyock IS PERMITTED TO INSTALL X ALTER

ADDRESS Ten Oaks Road, Glenelg, Md. PHONE 286-2939

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Linden Chapel Hills ROAD Ten Oaks LOT 4, Blk. A, Sec. 1

PROPERTY OWNER Ashton Realty Co.

ADDRESS

SPECIFICATIONS - 3 bedrooms

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

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

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%.

OTHER Dry well to be 100 sq. ft. absorbent sidewall area below the inlet pipe per bedroom. Inlet pipe to begin 4½ ft. below original grade. Maximum depth of dry well to be 13 ft. below original grade. Locate dry well 105 ft. from front property line and 18 ft. from left side line as lot is seen standing on Ten Oaks Road facing lot.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

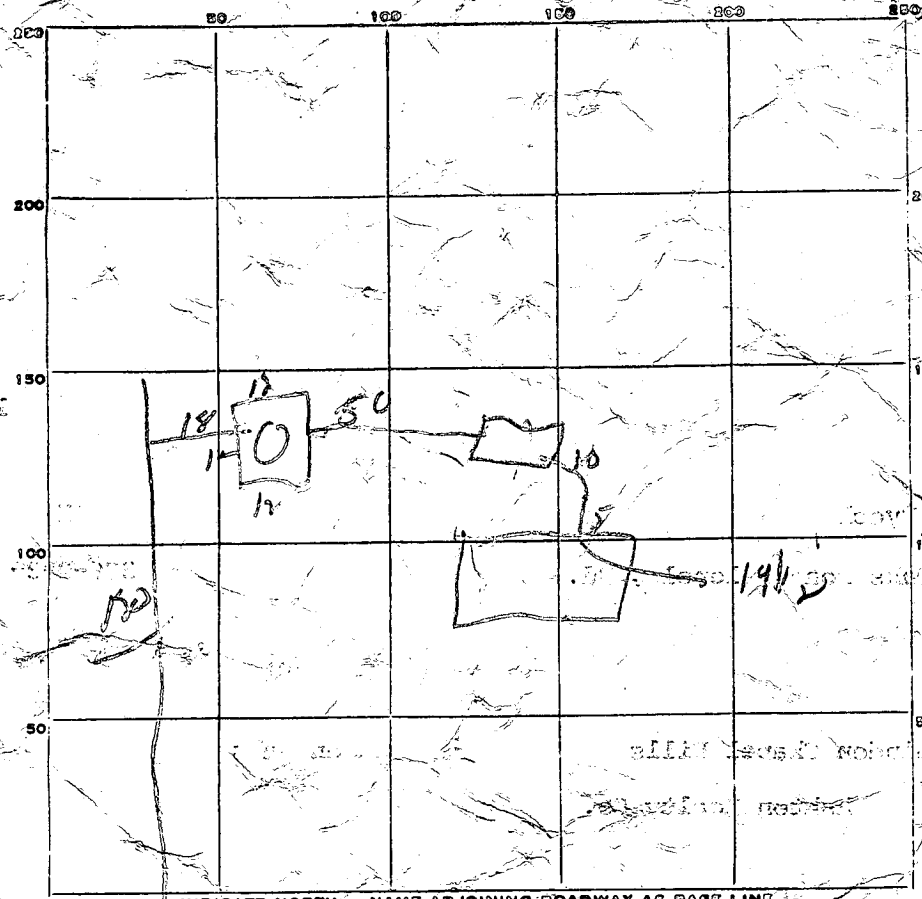
PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY James T. Wright DATE 11/18/70

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

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.



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

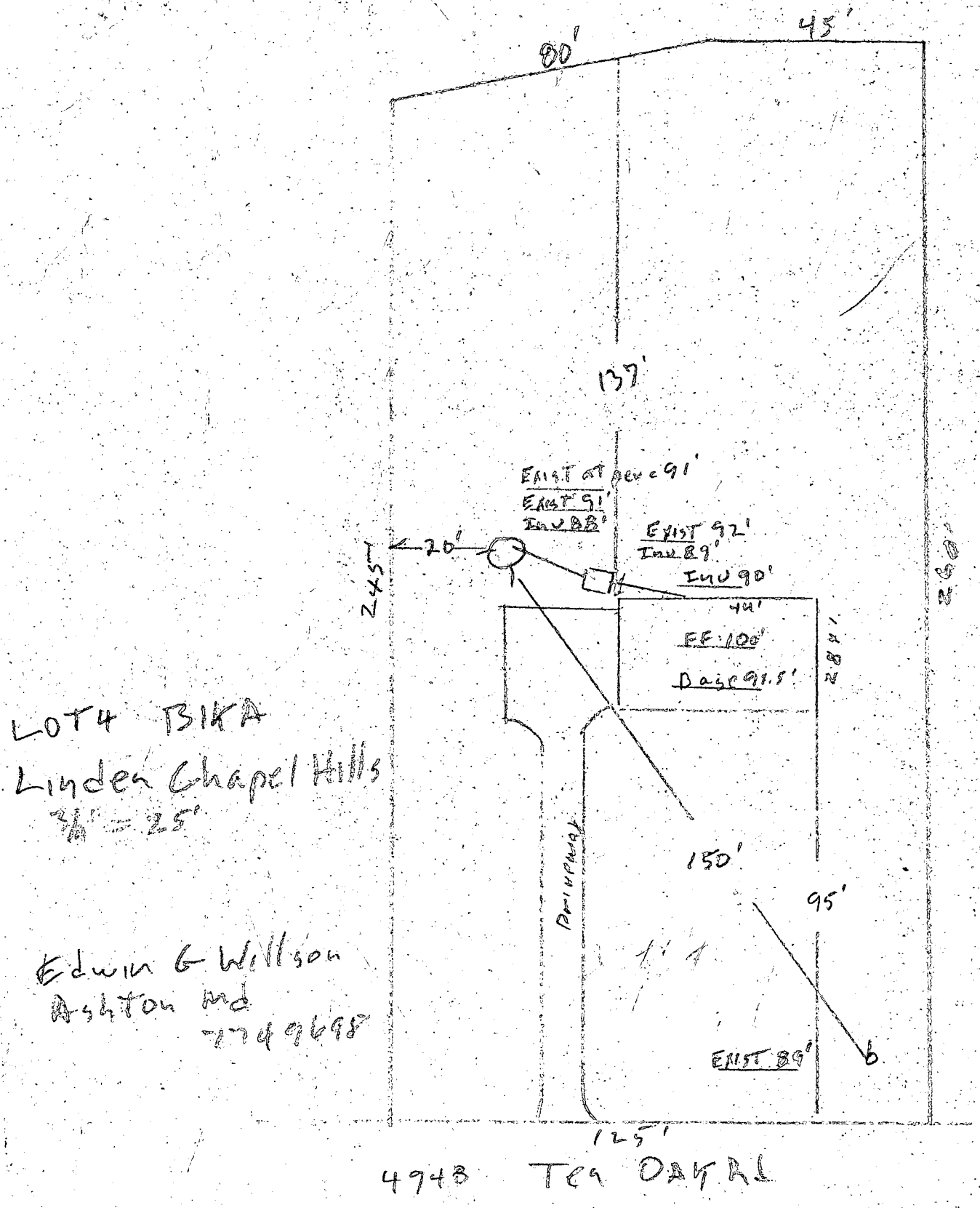
NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET 6½ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED _____ INSPECTOR _____



LOT 4 BIKA
Linden Chapel Hills
3/4" = 25'

Edwin G Willson
Ashton md
7749698

WR-W-3 9-70

B 1 4449 — SEQUENCE NO. (DWR USE ONLY) — (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) — 32

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

HO 72 0063

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY) 12/8/71 1:30 — A

OWNER: Willson, Edwin (COL 15 LAST NAME / FIRST NAME / COL. 34)

STREET OR RFD: 14507 Dilsin Rd. (COL 36 / COL. 55)

POST OFFICE: Dilsin Spring, Md. (COL 57 / COL. 76)

8-13

B 1 CONTINUED — DRILLER INFORMATION

DATE: 9-20-71 — LICENSE NUMBER: 201 (77–80)

JOHN A GREENE (FIRST NAME / DRILLER / LAST NAME)

SIGNATURE: John A. Greene

B 2 — WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 (8–12)

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500 (14–20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

} MUST HAVE STATE HEALTH DEPT. APPROVAL

- (T) TEST

APPROXIMATE DEPTH OF WELL: 125 FEET (24–28)

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) — JETTED — DRIVEN

(30-37) AIR-ROTARY — AIR-PERCUSSION — ROTARY (HYDRAULIC ROTARY)

CABLE — REVERSE 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 (DWR USE ONLY)

APPROPRIATION PERMIT NUMBER (GAP) (54–63) — ENGINEER REVIEW DISTRICT NO. (65)

FORCE WRITE INITIALS IN BOX (67 68) — CONDITIONS A E N S G W Q C L U (70 71 72 73 74 75 76 77 78 79)

B 4 CONTINUED — HEALTH DEPARTMENT APPROVAL

(41) STATE HEALTH (CIRCLE BOX) (S)

DATE MO. DAY YR.: 07 30 71 (43–48)

HOWARD — COUNTY NAME — 3756 — COUNTY NO.

Clinton R. Wilson — APPROVED BY

B 3 — LOCATION OF WELL

COUNTY: Howard (8–21) (DO NOT ABBREVIATE COUNTY NAME)

SUBDIVISION: Gundaker Chapel Hill (23–42)

SECTION: (44–46) — LOT: 4 (48–50)

NEAREST TOWN: Dayton (52–71)

MILES FROM TOWN (ENTER 0 IF IN TOWN): 1 (73–76) — (M) (I) (77 78)

B 4 — DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

(N) NORTH — (E) EAST — (N E) NORTHEAST — (S E) SOUTHEAST

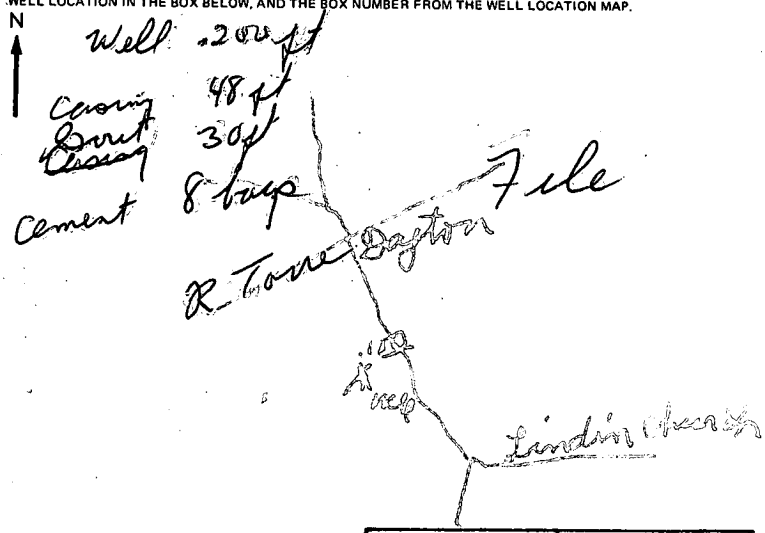
(S) SOUTH — (W) WEST — (N W) NORTHWEST — (S W) SOUTHWEST

NEAR WHAT ROAD: Ten Oaks Road (11–30)

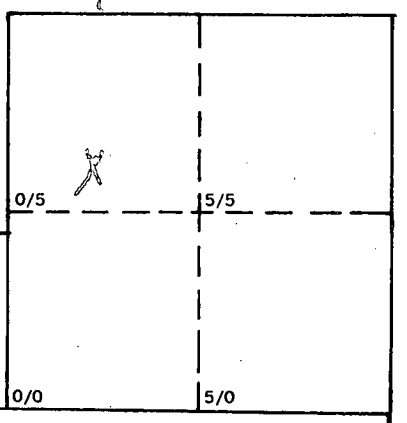
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): (N) NORTH (32) — (S) SOUTH (32) — (E) EAST (32) — (W) WEST (32)

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 100 (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 200 — N 510



NORTH CORDINATE: (50) DEG (51 52) MIN (53 54 55) SEC

EAST CORDINATE: (57 58 59 60 61 62 63)

ELEVATION AT WELL HEAD (FEET): (65 66 67 68)

B 5 — SPECIAL CONDITIONS 8-63 (DWR USE ONLY)

HEALTH

WR-W-4 9/70

C 1 2009 SEQUENCE NO. (DWR USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY) 8-13

DATE WELL COMPLETED: Dec. 9-72 (15 20)

DEPTH OF WELL: 200 (TO NEAREST FOOT) (22 26)

PERMIT NO. FROM "PERMIT TO DRILL WELL": 40-72-0063 (28 29 30 31 32 33 34 35 36 37)

DRILLERS IDENTIFICATION NO. 201

OWNER: W. L. Kem Est
LAST NAME FIRST NAME

STREET OR RFD: 17821 Glen Mar Rd. POST OFFICE: Silver Spring

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
	0	5	
	5	45	
	45	200	✓

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 5 NO. OF POUNDS 500

GALLONS OF WATER 45

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 (48 52) FT. TO 40 (54 58) FT.

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES — INSERT APPROPRIATE CODE BELOW

ST STEEL; CO CONCRETE; PL PLASTIC; OT OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
ST (60 61)	6 (63 64)	48 (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

ST STEEL; BR BRASS OR BRONZE; HO OPEN HOLE; PL PLASTIC; OT OTHER

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

DEPTH (NEAREST WHOLE FOOT)

EACH SCREEN

	FROM	TO
1 (8 9)	11	15 (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

DWR 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 2 3 (SEQ. NO.) 6)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1 (8 9)

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

METHOD USED TO MEASURE PUMPING RATE Guess

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 50 (17 20) (NEAREST FOOT)

WHEN PUMPING 200 (22 25) (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)

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

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 ____ (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).

House

CIRCLE APPROPRIATE BOXES

A — A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E — ELECTRIC LOG OBTAINED

C — COPY OF ELECTRIC LOG ATTACHED

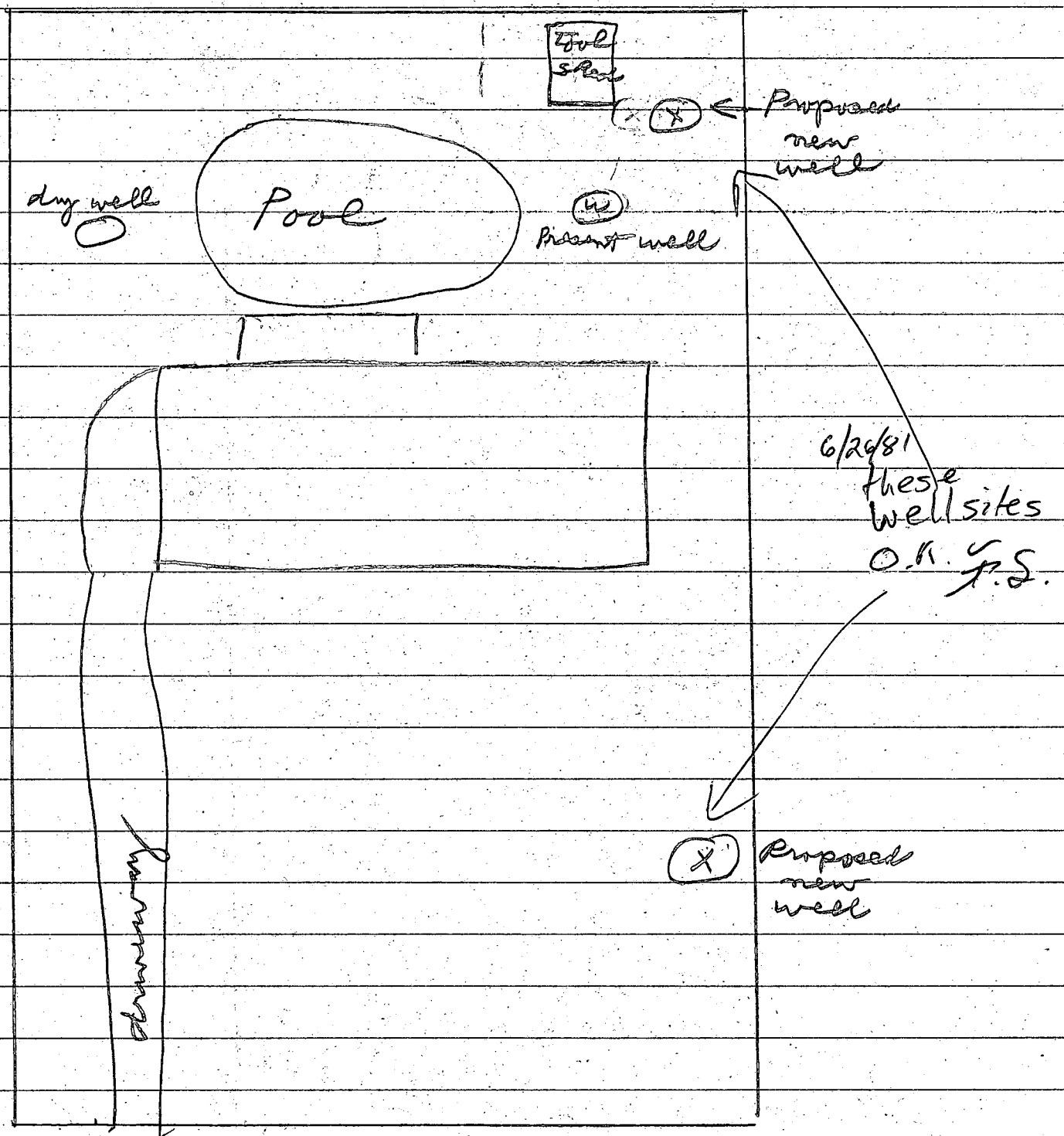
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME

(PLEASE PRINT) John P Greene

SIGNATURE John P Greene

HEALTH



4948 Ten Oaks Rd

Jerry Anderson Prop.

Discussed well site with Geo. Eastaday & Mrs. Anderson 6/23/81 JS

EMERGENCY / TEMP NO IF ANY

B 1 8173 SEQUENCE NO. WRA USE ONLY
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON A&L CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

WRA PERMIT NUMBER
H0-73-3939
fill in this form completely

DATE RECEIVED 6/23/81 (WRA USE ONLY)
~~6/18/81~~ 9:30 A.M.

OWNER INFORMATION

Anderson Gerald
LAST NAME OWNER FIRST NAME

4948 Ten Oaks Rd
STREET OR RFD

Dayton Md 21036
TOWN STATE ZIP

B 1 CONTINUED

DRILLER INFORMATION

George Easterday 40
DRILLER'S NAME LICENSE NO.

George Easterday 6-23-81
SIGNATURE DATE

WELL INFORMATION

B 2

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 600

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- F 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)

APPROXIMATE DEPTH OF WELL 150 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

REPLACEMENT OR DEEPENED 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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

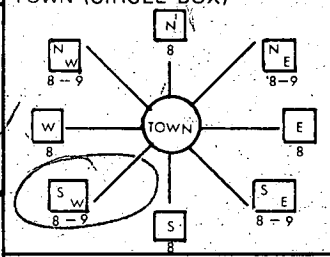
LOCATION OF WELL

B 3

COUNTY Howard
SUBDIVISION Linden Chapel Hills
SECTION 1 LOT 4
NEAREST TOWN Dayton
MILES FROM TOWN (enter o if in town) 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Ten Oaks Rd
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W 32 E EAST
SOUTH S

107 FT
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) MI

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX →

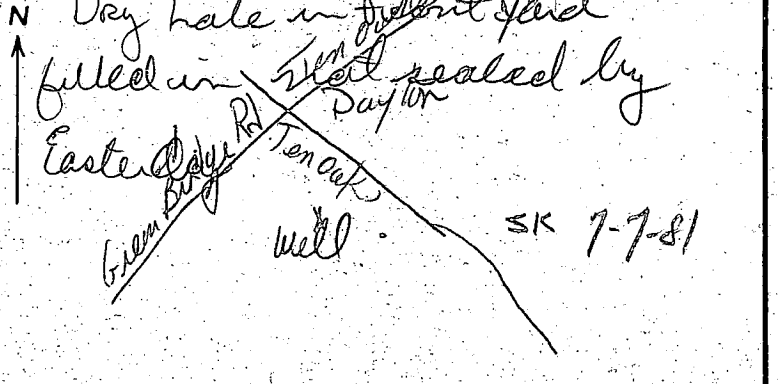
38' casing 1' above grnd
20' open
6' back

WRITE THE BOX NUMBER FROM THE MAP HERE ↓

E 800
N 500

000 000 X

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



B 4

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME
A15632 COUNTY NO.

EHA SIGNATURE
STATE HEALTH CIRCLE BOX S

MO 06 DAY 26 YR 81 Frank Skinner 6/26/81
CO SIGNATURE DATE

NORTH GRID 510000 EAST GRID 080400 ELEV. (FT.)

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

APPROP. PERMIT NUMBER GAP

FORCE FS WRITE INITIALS IN BOX

CONDITIONS A E N S G W Q C L U
H0-73-3939

B 5 SPECIAL CONDITIONS (WRA USE ONLY)

HEALTH

596-9140 (Home)
202-338-6689 (Work)

C 1 | 8111 | SEQUENCE NO. (WRA USE ONLY)

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

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY - PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER A15632

Date Received (WRA use only)

DATE WELL COMPLETED 7/7/81

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" WC-72-2059

OWNER Anderson (last name) Gerald (first name)

STREET OR RFD 4646 Ten Oaks Rd. TOWN Dayton

SUBDIVISION Linden Chapel Hills SECTION I LOT 44

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	FEET TO	Check if water bearing
Top Soil	0	2	
SHALEY	2	10	
SAND STONE	10	45	J
MICA	45	120	
FLINT	120	122	
MICA	122	250	
FLINT	250	255	
MICA	255	300	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes [Y] no [N]

TYPE OF GROUTING MATERIAL

CEMENT [C M] BENTONITE CLAY [B C]

NO. OF BAGS 6 NO. OF POUNDS 1000

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 20 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	6	38

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, BRONZE [H O] OPEN HOLE [P L] PLASTIC [O T] OTHER

C 2 | (seq. no.)

DEPTH (nearest ft.)

EACH SCREEN		from	to
1	H O	36	300
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX [F]

C 3 | (seq no)

PUMPING TEST
HOURS PUMPED (nearest hour) 2

PUMPING RATE (gal. per min. to nearest gal.) 1

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 50

WHEN PUMPING 350

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 APPROPRIATE BOX) YES [Y] NO [N]

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

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

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 2 (nearest foot)

CIRCLE APPROPRIATE BOX
[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 IDENT. NO. 410

Dennis R. Gastelow

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

Tom Fellows

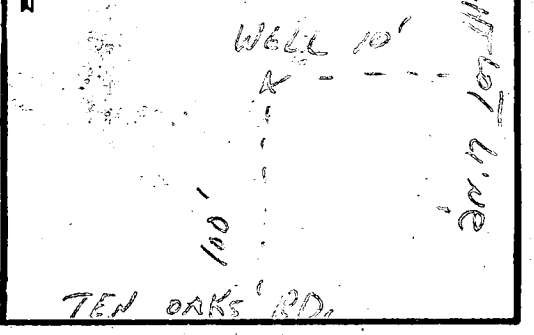
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

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

T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

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)



HEALTH