1/18/72 Ready

File 1/18/72

PERMIT

P 16646
A 12442

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 5

DATE 1/7/72

Richard Lowe IS PERMITTED TO INSTALL X ALTER

ADDRESS Ilchester Road, Ellicott City, Md. PHONE RI 7-7598

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

13857 Triadelphia Mill Road.

SUBDIVISION ROAD ~~Triadelphia Rd.~~ LOT (see original application for better directions)

PROPERTY OWNER Wendall Kelly ~~Lewis O. Hicks~~

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 - ~~500~~ 429 sq. ft. absorbent sidewall area to begin below the first 3½ ft. of non-absorbent ground. Maximum depth permitted for dry well is 11 ft. below original grade. Place dry well 290 ft. from front lot line (459.85) line and 30 ft. from right side line as seen when facing lot from front lot line (459.85 line).

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

PERMIT VOID AFTER THREE YEARS.

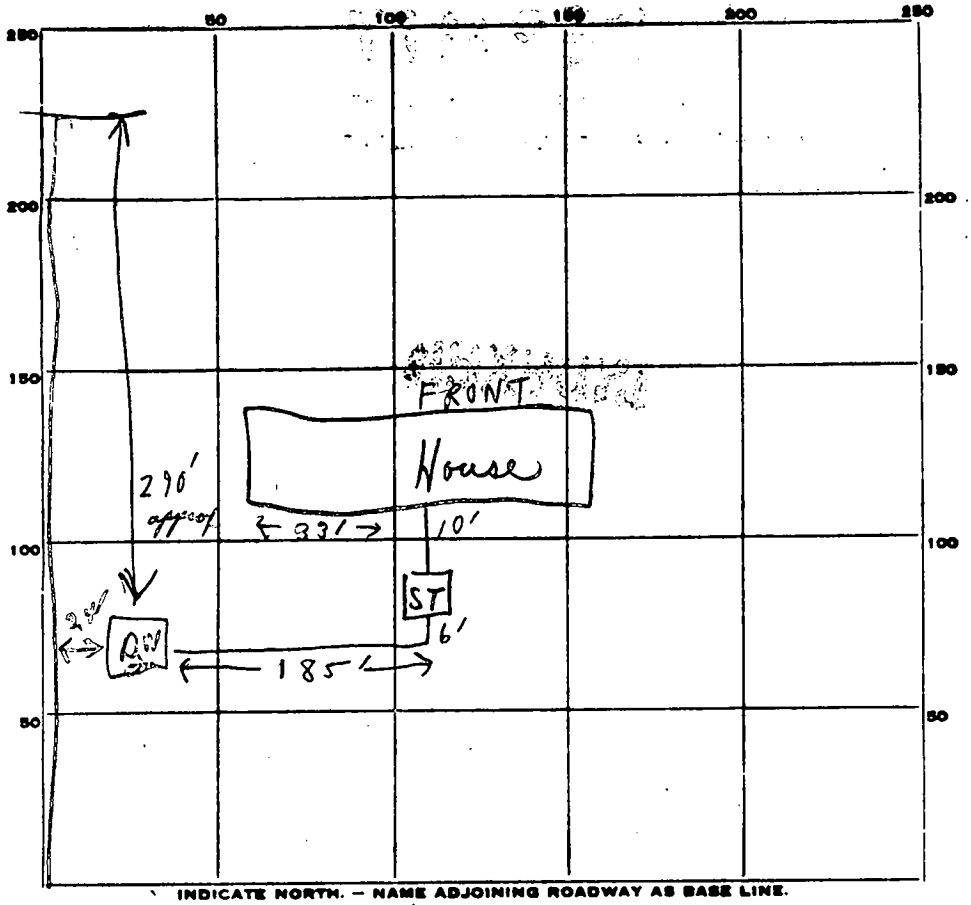
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY D. W. Monaghan DATE 7/16/71

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.

P 16646
A 12442



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Issued

SEPTIC TANK, LEVEL OK CLEANOUTS OK

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~~ OUTSIDE PERIMETER 48 FT. DEPTH BELOW INLET 9½ FT.

ABSORBENT AREA 456 SQ. FT.

48
9.5
240
432
456

REMARKS 1/18/72 S.T. Cleanouts cemented tightly; D.W. Cleanout loose, to be tight before covering of Dry Well!!

DATE SYSTEM APPROVED 1/18/72 INSPECTOR C. Stuckes

WR-W3 9/71

EMERGENCY NO. (If any) –

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

APPLICATION FOR PERMIT TO DRILL WELL

B 1 06725 — SEQUENCE NO. (DWR USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 OF ALL CARDS).

DWR PERMIT NUMBER

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY) A12442

8-13

OWNER: Hicks (COL 15 LAST NAME) Lewis (FIRST NAME COL. 34)

STREET OR RFD: 14040 Triadelphia mill Rd. (COL 36 – COL. 55)

POST OFFICE: Glenelg md. (COL 57 – COL. 76)

Saturie

B 1 CONTINUED — DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6

DATE: Jan. 10-72 LICENSE NUMBER: 42 (77–80)

J T Easterday
FIRST NAME — DRILLER — LAST NAME

SIGNATURE: J T Easterday

B 3 — LOCATION OF WELL
1 2 3 (SEQ. NO.) 6

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

SUBDIVISION: (23 – 42)

SECTION: (44 – 46) LOT: (48 – 50)

NEAREST TOWN: Dayton (52 – 71)

MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 (73 – 76) MI (77 78)

B 2 — WELL INFORMATION
1 2 3 (SEQ. NO.) 6

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

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 600 (14 – 20)

B 4 — DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
1 2 3 (SEQ. NO.) 6

N NORTH — E EAST — NE NORTHEAST — SE SOUTHEAST
(S) SOUTH (circled) — W WEST — NW NORTHWEST — SW SOUTHWEST
8 / 8 9

NEAR WHAT ROAD: Triadelphia mill (11 – 30)

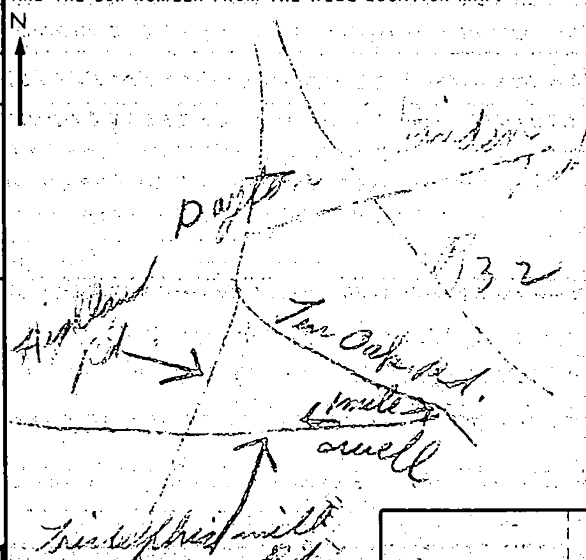
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH N — (SOUTH S circled) — EAST E — WEST W (32)

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 1400 (34 – 37) FT / MI (38 39)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

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.



APPROXIMATE DEPTH OF WELL: 100 (24 – 28) FEET

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

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

OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

39
- (N circled) 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)

BOX NUMBER: E 800 / N 500

0/5 — 5/5 — 0/0 — 5/0

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

APPROPRIATION PERMIT NUMBER (54 – 63) G A P — ENGINEER REVIEW DISTRICT NO. (65)

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

NORTH COORDINATE (50 51 52 53 54 55)

EAST COORDINATE (57 58 59 60 61 62 63)

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

B 4 CONTINUED — HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 6

41 S STATE HEALTH (CIRCLE BOX)

HOWARD — COUNTY NAME — 2013 — COUNTY NO.

DATE (MO. DAY YR.): 7 1 1 2 7 2 (43 – 48)

APPROVED BY: Palmer F. Hine, Director

B 5 — SPECIAL CONDITIONS 8-63 (DWR USE ONLY)
1 2 3 (SEQ. NO.) 6
8 — 63

HEALTH

WR-W3 (2/71)

EMERGENCY NO. (If any) –

B 1 06725 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 **APPLICATION FOR PERMIT TO DRILL WELL**	DWR PERMIT NUMBER / FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY): 1/26/72

OWNER: Hicks Lewis (COL 15 LAST NAME) — Fattrie (FIRST NAME, COL. 34)

STREET OR RFD: 14040 Triadelphia mill Rd. (COL 36 – COL. 55)

POST OFFICE: Glenelg md. (COL 57 – COL. 76)

DRILLER INFORMATION

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

DATE: [illegible] 10-72 — LICENSE NUMBER: 42 (77 – 80)

DRILLER: Easterday (FIRST NAME / LAST NAME)

SIGNATURE: Easterday

LOCATION OF WELL

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

COUNTY: Howard (DO NOT ABBREVIATE COUNTY NAME) (5 – 21)

SUBDIVISION: (23 – 42)

SECTION: (44 – 46) LOT: (48 – 50)

NEAREST TOWN: Dayton (52 – 71)

MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 — M I (76 77 78)

WELL INFORMATION

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

5

DIRECTION FROM TOWN

(CIRCLE APPROPRIATE BOX)

B 4

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

NEAR WHAT ROAD: Triadelphia mill (11 – 30)

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

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 1400 — F T (circled) / M I (34 – 37, 38 39)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

... SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

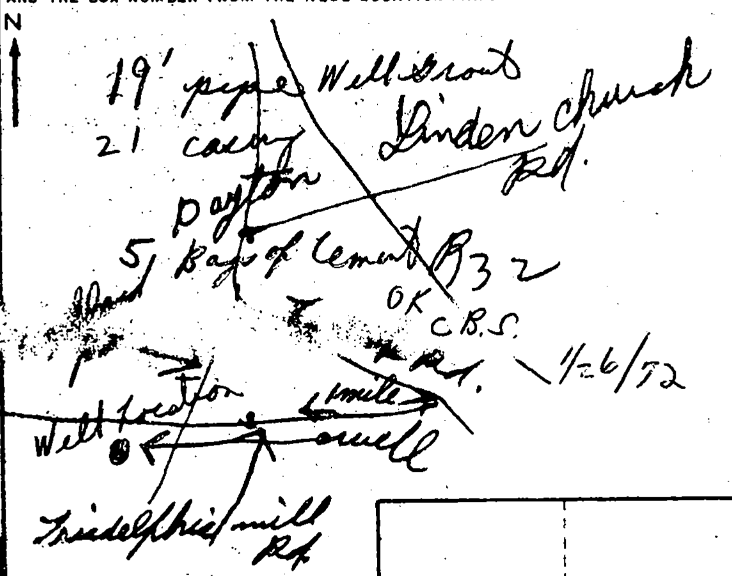
... AGRICULTURE, IRRIGATION

... COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

M MUNICIPAL WATER SUPPLY / P PRIVATE WATER COMPANY — MUST HAVE STATE HEALTH DEPT. APPROVAL

T TEST

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.



APPROXIMATE DEPTH OF WELL: 100 FEET (26 – 28)

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

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

OTHER (DESCRIBE)

... REPLACED OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

... 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) (62)

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

APPROPRIATION PERMIT NUMBER: G A P (54 – 63) — ENGINEER REVIEW DISTRICT NO. (65)

FORCE — WRITE INITIALS IN BOX — CONDITIONS: A B H S G W Q C ... U (70 71 72 73 74 75 76 77 78 79)

BOX NUMBER: E 800 / N 500

0/5 5/5 X 0/0 5/0

NORTH COORDINATE (50 51 52 53 54 55)

EAST COORDINATE (57 58 59 60 61 62 63)

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

HEALTH DEPARTMENT APPROVAL

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

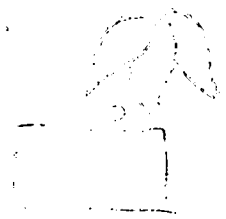
41 3 STATE HEALTH (CIRCLE BOX) — HOWARD (COUNTY NAME) — 2817 (COUNTY NO.)

DATE (MO. DAY YR.): 1 1 2 7 2 (43 – 48)

APPROVED BY: Palmer F. Hine, Director

SPECIAL CONDITIONS 8-63 (DWR USE ONLY) 63

Cap not on but as soon as rig is moved will be put on.



WR-W-4 9/70

C 1 6273 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)

DATE WELL COMPLETED 15 20

DEPTH OF WELL 300 (TO NEAREST FOOT) 22 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

8-13

OWNER LAST NAME FIRST NAME

STREET OR RFD POST OFFICE

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
Top soil	0	2	
Clay	2	15	
Limerock	15	60	✓
Shale	60	300	

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 6 NO. OF POUNDS 500

GALLONS OF WATER 80

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

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

(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 S T 60 61

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 63 64

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 51 66 70

OTHER CASING (IF USED)

EACH CASING

	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW

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

C 2 (SEQ. NO.)

EACH SCREEN

DEPTH (NEAREST WHOLE FOOT)

	FROM	TO
1	11	17
2	26	32
3	41	47

SLOT SIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN 6 56 60 (NEAREST INCH)

GRravel PACK FROM TO

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 8 9

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

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 40 17 20 (NEAREST FOOT)

WHEN PUMPING 22 25 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

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

PUMP INSTALLED

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

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

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE; − BELOW — LAND SURFACE (NEAREST FOOT) 49 50 51

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).

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) ____

SIGNATURE ____

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

HEALTH

Make check payable to:
Howard County Health Dept., Sanitation

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

A 12442

P

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 2/6/67

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 Lewis O. Hicks

ADDRESS 8110 Riggs Road, Hyattsville, Maryland PHONE 439-3842

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 8.178 acres lying approximately 1000' south of Triadelphia Rd. between Green Bridge Rd. and Highland Rd., between the Royal Brown Farm & Zeberlein Property.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 8.178 acres, see attached survey TYPE BLDG. 4 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT L O Hicks

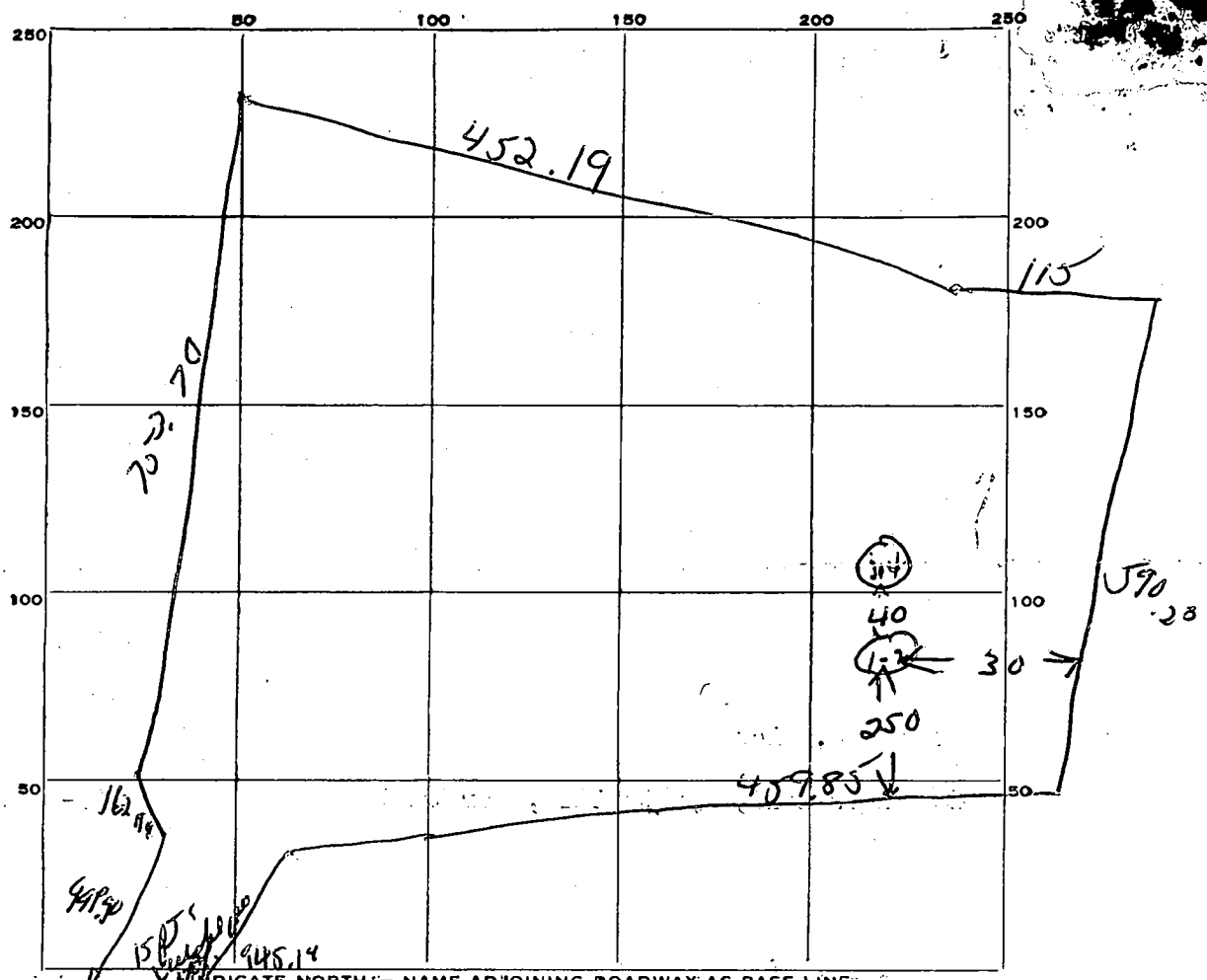
APPROVED BY D W Monaghan FOR Dry well (KIND OF SYSTEM) DATE 7-16-71

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - DROP START	TEST - DROP STOP	TIME
2/25/67	1	11"	10 00	10 06	10 06	10 17	11 min
	2	4"	10 01	10 09	10 09	10 28	19 min
	3	10"	10 03	10 05	10 05	10 09	4 min
	4	4"	10 04	10 09	10 09	10 20	11 min

SOIL AUGER FINDING

2/25/67 TESTED BY DW M

REMARKS

depressed Permeasleb / DW M 8/1 78

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

A 16640

P

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 12-30-71

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 Lewis O. Hicks

ADDRESS 8110 Riggs Rd., Myattsville, Md. PHONE 439-3842

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 8.178 acres lying approximatel 1000' south of Triadelphia Rd. between Green Bridge Rd. & Highland Rd., between the Royal Brown Farm & Zaberlein Property.

OCCUPANT 108 Tin Oaks Ct PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 8.178 acres, see attached survey. TYPE BLDG. Single Family Dwellings 3 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT X Roy A. G. Fattrus

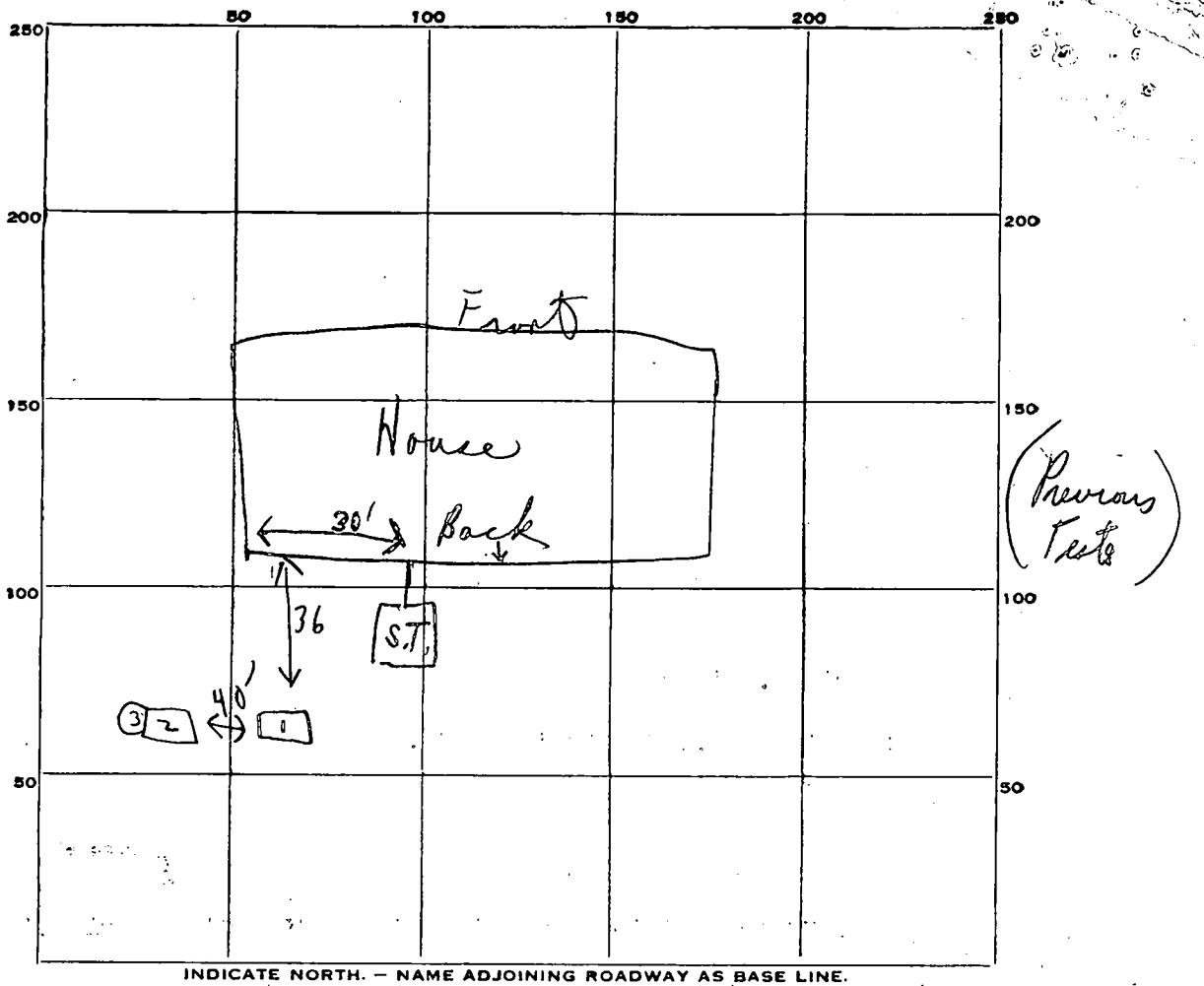
APPROVED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

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

HOLD PENDING FURTHER TESTS C. Stuntz DATE 1/6/72

REASONS FOR REJECTION OR HOLDING Hold or installs in area where passed prior to tests on 1/6/72. C.S.

THIS IS NOT A PERMIT



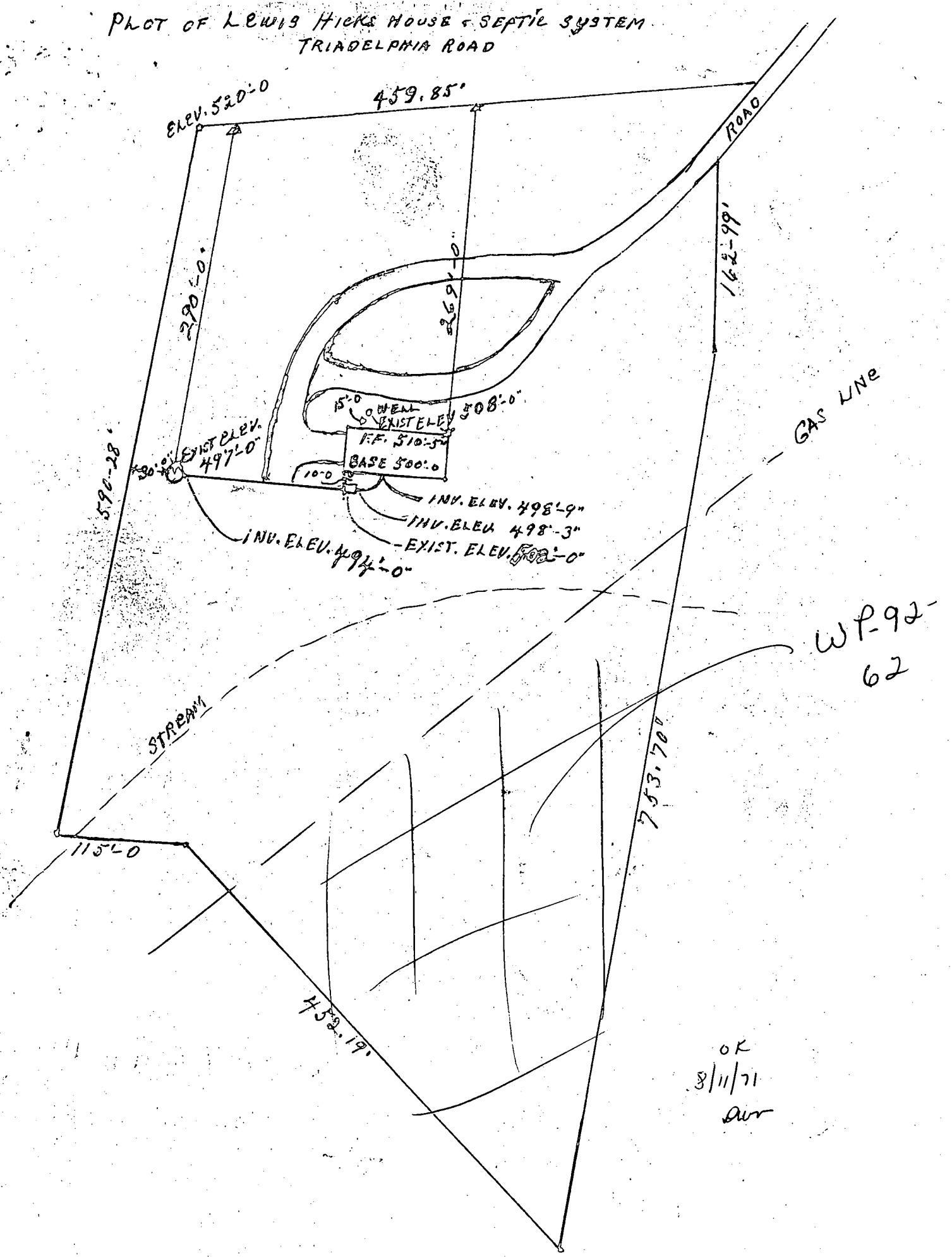
INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

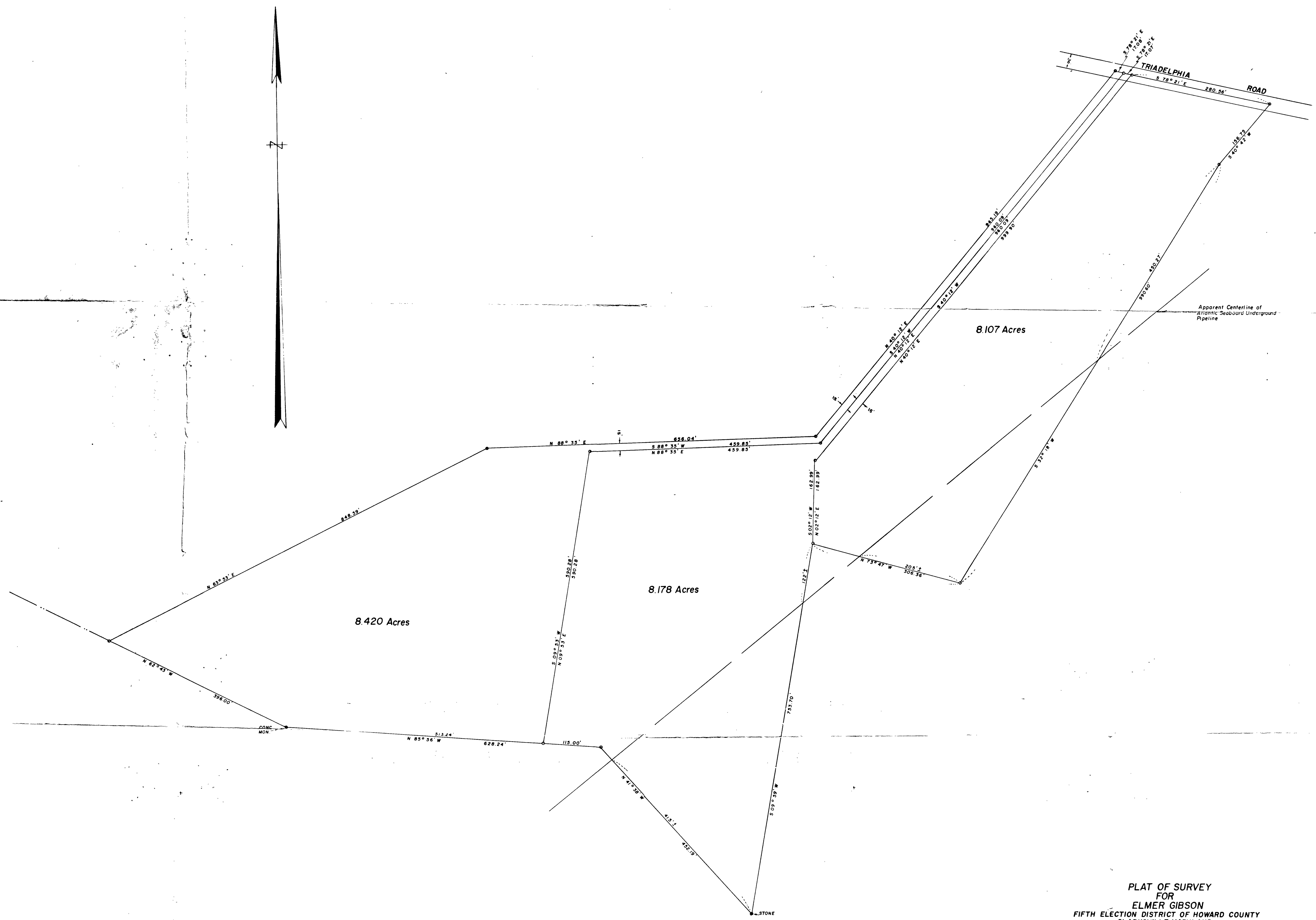
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
1/6/72	(1)	5'	255	301	301	310	9 min
1/6/72	(2)	5½'	3:05	307	307	311	4 min
1/6/72	(3)	3½'	3:19	Too	little	perc	

SOIL AUGER FINDING (1) Rock at 5' (2) Rocky at 2½'

TESTED BY B.S.

REMARKS Maximum depth 5½ Put system in original test area or retest in some other area.


PLOT OF LEWIS HICKS HOUSE & SEPTIC SYSTEM
TRIADELPHIA ROAD
ELEV. 520'-0
459.85'
ROAD
290'-0"
269'-0"
162'-99"
15'-0
WELL
EXIST ELEV 508'-0"
F.F. 510'-5"
BASE 500'-0
10'-0
EXIST ELEV. 497'-0"
30'-0"
596'-28"
INV. ELEV. 498'-9"
INV. ELEV 498'-3"
EXIST. ELEV. 502'-0"
INV. ELEV. 494'-0"
GAS LINE
WP-92-62
STREAM
753.70'
115'-0
458.19'
OK
8/11/71
Dur



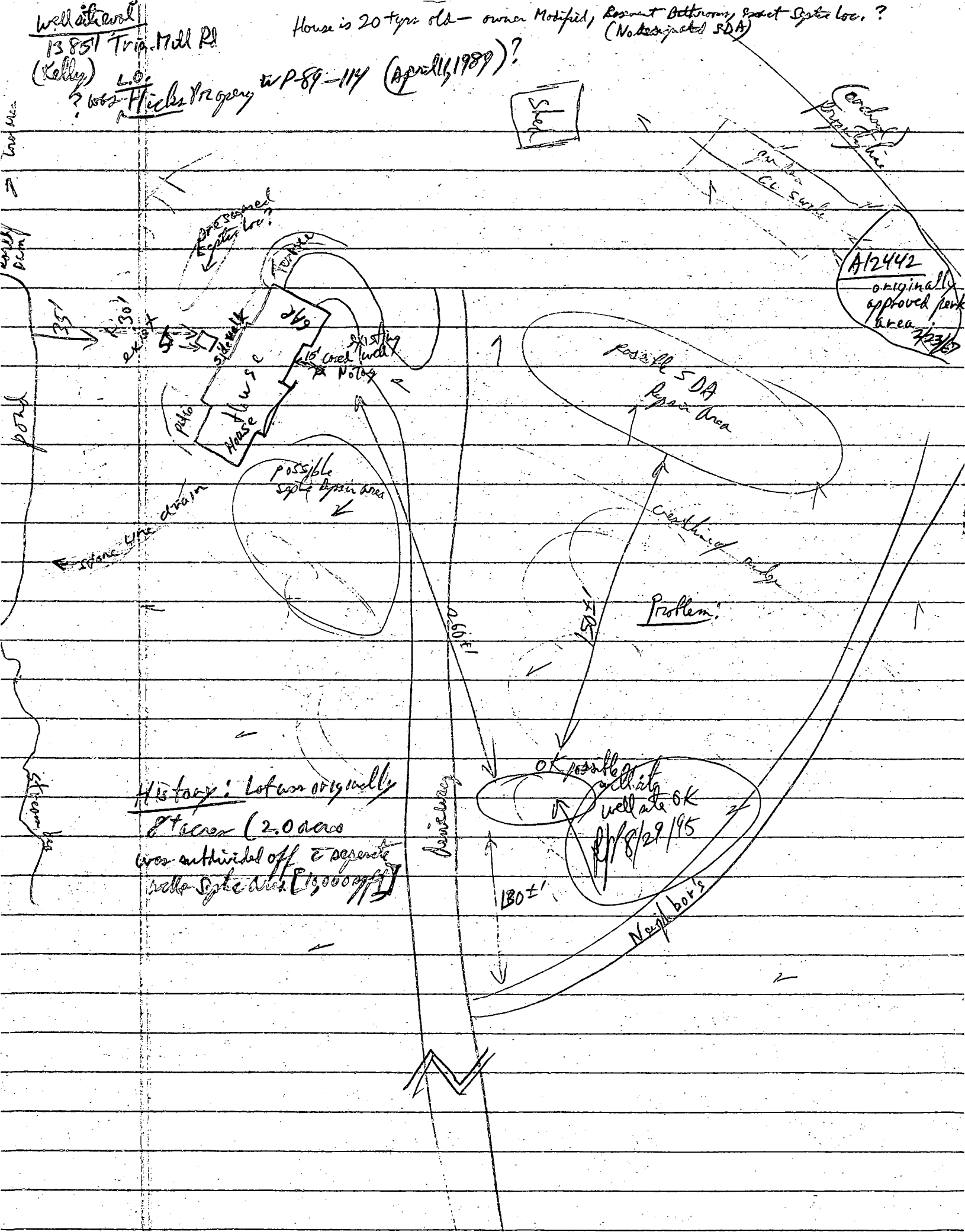
PLAT OF SURVEY
FOR
ELMER GIBSON
FIFTH ELECTION DISTRICT OF HOWARD COUNTY
CLARKSVILLE, MARYLAND
SCALE: 1 IN. = 100 FT. JANUARY 24, 1966

Claude M. Skinner Jr. Reg. Engineer & Land Surveyor No. 2237

Well site visit
13851 Trip Mill Rd
(Kelley)

House is 20 +yrs old — owner Modified, Basement Bathroom, Septic loc. ?
(No designated SDA)

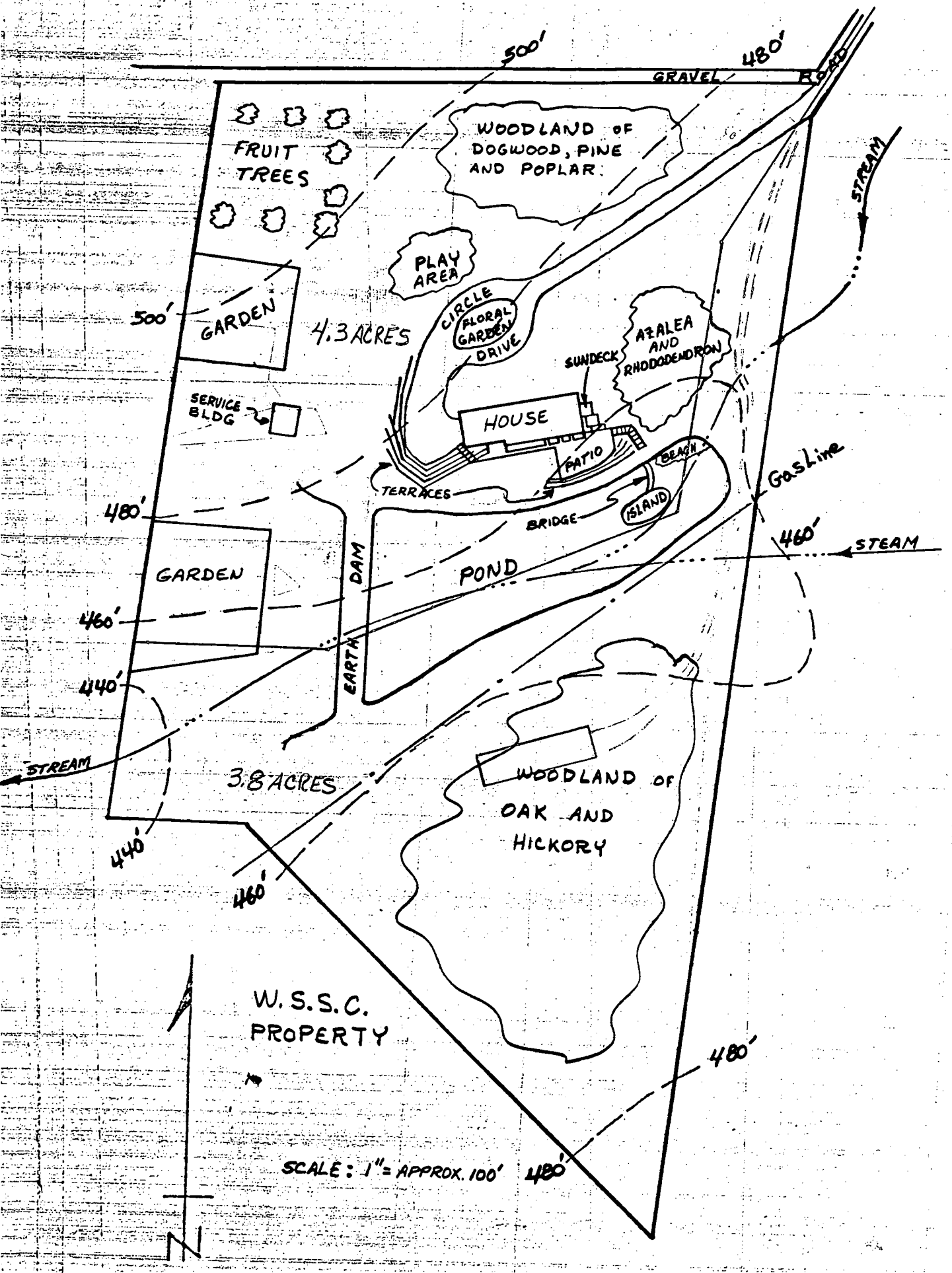
? was L.O. Hicks Property in P-89-114 (April 6, 1989)?



History: Lot was originally 8 +acres (2.0 acres was subdivided off & separate well & Septic dev. [15,000 sq ft])

P1664 A12442
1/7/92 2/6/67

95 AUG 30 AM 9:05


500'
480'
GRAVEL ROAD
FRUIT TREES
WOODLAND OF DOGWOOD, PINE AND POPLAR
STREAM
PLAY AREA
CIRCLE
FLORAL GARDEN
DRIVE
500'
GARDEN
4.3 ACRES
AZALEA AND RHODODENDRON
SUNDECK
SERVICE BLDG
HOUSE
PATIO
BEACH
TERRACES
BRIDGE
ISLAND
Gas Line
480'
460'
STEAM
GARDEN
DAM
POND
460'
EARTH
440'
STREAM
3.8 ACRES
WOODLAND OF OAK AND HICKORY
440'
460'
W.S.S.C. PROPERTY
480'
SCALE: 1" = APPROX. 100'
480'

C 1 | 2823 | SEQUENCE NO. (MDE 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 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER: 13 A12442

ST/CO USE ONLY DATE Received: ______

DATE WELL COMPLETED: 090195

Depth of Well: 300 (TO NEAREST FOOT) — OK 10/12/95 DKS

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-0668

OWNER: Kelly (last name) Wendall (first name)
STREET OR RFD: 13851 Triadelphia Mill Rd TOWN: Dayton
SUBDIVISION: — SECTION: ______ LOT: —

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	
SANDSTONE	2	30	
MICA	30	105	
SAND STONE	105	106	✓
MICA	106	130	
FLINT	130	135	✓
MICA	135	300	

NUMBER OF UNSUCCESSFUL WELLS: ______

WELL HYDROFRACTURED: yes Y / no N (N marked)

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 26.04.04 "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.

TYPE: MWD/MSD/MGD
DRILLERS LIC. NO. MWD ~~501~~ 640
[signature] ... for Easterday
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MWD 501
Charles R Fellows [signature]
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box): yes Y (circled) / no N

TYPE OF GROUTING MATERIAL (Circle one): CEMENT CM (circled) BENTONITE CLAY BC

NO. OF BAGS 9 NO. OF POUNDS 900
GALLONS OF WATER 45
DEPTH OF GROUT SEAL (to nearest foot): from 0 ft. (TOP) to 32 ft. (BOTTOM) (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	6	40

OTHER CASING (if used): diameter inch; depth (feet) from / to — (blank)

SCREEN RECORD

screen type or open hole insert appropriate code below: ST STEEL, BR BRASS BRONZE, HO OPEN HOLE, PL PLASTIC, OT OTHER

C 2 — 10/12/95 per Sarah of Easterday

EACH SCREEN	TYPE	DEPTH (nearest ft.) from	to
1	HO	38	300
2			
3			

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

MDE 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

C 3 PUMPING TEST

HOURS PUMPED (nearest hour): 3
PUMPING RATE (gal. per min.): 30
METHOD USED TO MEASURE PUMPING RATE: Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING: 130 ft.
WHEN PUMPING: 300 ft.

TYPE OF PUMP USED (for test): A air (circled); P piston; T turbine; C centrifugal; R rotary; O other (describe below); J jet; S submersible

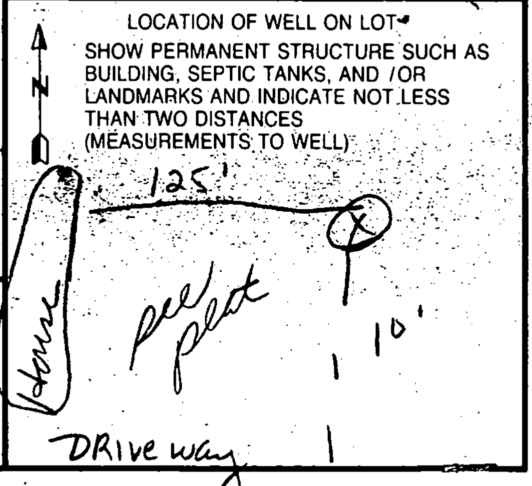
PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO): NO (circled)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29: ____
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 (circled) / − below LAND SURFACE: 2 (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)



COUNTY

Fee Received 8/30/95 EMERGENCY/TEMP. NO. IF ANY Fee Paid 9-1-95

JESSUP, MD 20794

B 1 | 6352 SEQUENCE NO. (MDE 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-94-0668
fill in this form completely

Date Received (APA): 08/29/95

OWNER INFORMATION

KELLY WENDELL
Last Name / Owner / First Name

13851 TRIADELPHIA MILL
Street or RFD

CLARKSVILLE | MD | 21029
Town | State | Zip

DRILLER INFORMATION

CIRCLE: MSD/MGD/MWD

George F. Easterday
Driller's Name

40
License No.

L. Franklin Easterday, Inc.
Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771
Address

George F. Easterday
Signature / Date

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)

- (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: 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

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- [D] 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 (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: KP (WRITE INITIALS IN BOX) PERMIT No. HO-94-0668

B 3 LOCATION OF WELL

HOWARD
COUNTY

SUBDIVISION

SECTION LOT

DAYTON
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town): 2 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NW 8-9 | N 8 | NE 8-9
W 8 | TOWN | E 8
SW 8-9 | S 8 | SE 8-9

13851 TRIADELPHIA MILL
NEAR WHAT ROAD

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

DISTANCE FROM ROAD: 1000

ENTER FT OR MI: FT

TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard — 13-A12442
COUNTY NAME / COUNTY NO.

STATE SIGNATURE _____ INSERT S

DATE ISSUED: 08/29/95 — CO SIGNATURE — EXP. DATE: 8/29/96

NORTH GRID: 50900 EAST GRID: 48000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

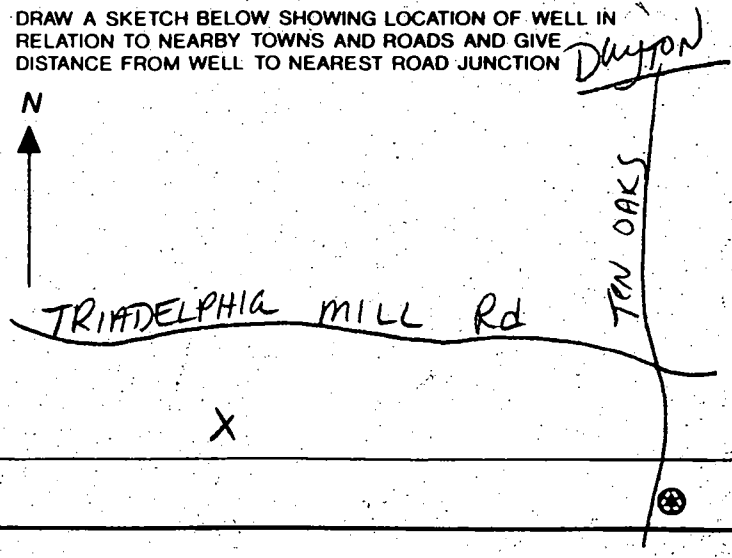
SOURCES OF DRILLING WATER
1. wells
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 800
N 5064

9/1/95 8'00grout
No unsp
Ann

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



SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

COUNTY

From Front to back

Depending on yield of new replacement well, old well may be kept or abandoned

No fee received.

Fee paid 9-1-95

95 AUG 30 AM 9:05