

WPI Am 4/20/00
4/28/00
10-11

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-330575

P 513386

A 50830-H

DISTRICT _____

DATE 4/14/2000

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 4/28/00

INSPECTOR BB

Van Sant Plumbing & Heating IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 3 N. Main Street, Mt. Airy, MD. 21771 PHONE 410-795-6566

SUBDIVISION Brantwood LOT 8 ROAD 3021 Lancelot Cross

PROPERTY OWNER NV Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Begin trenches 180 feet down the left (340.64') lot line and 10 feet off that same lot line as seen when facing the lot from Lancelot Cross. Run trenches on contour toward the right lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *at 7/20/00*

PLANS APPROVED BY Amy McMillen DATE 7-12-1999

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. 90° ELBOWS NOT ACCEPTABLE.

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 35/40 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

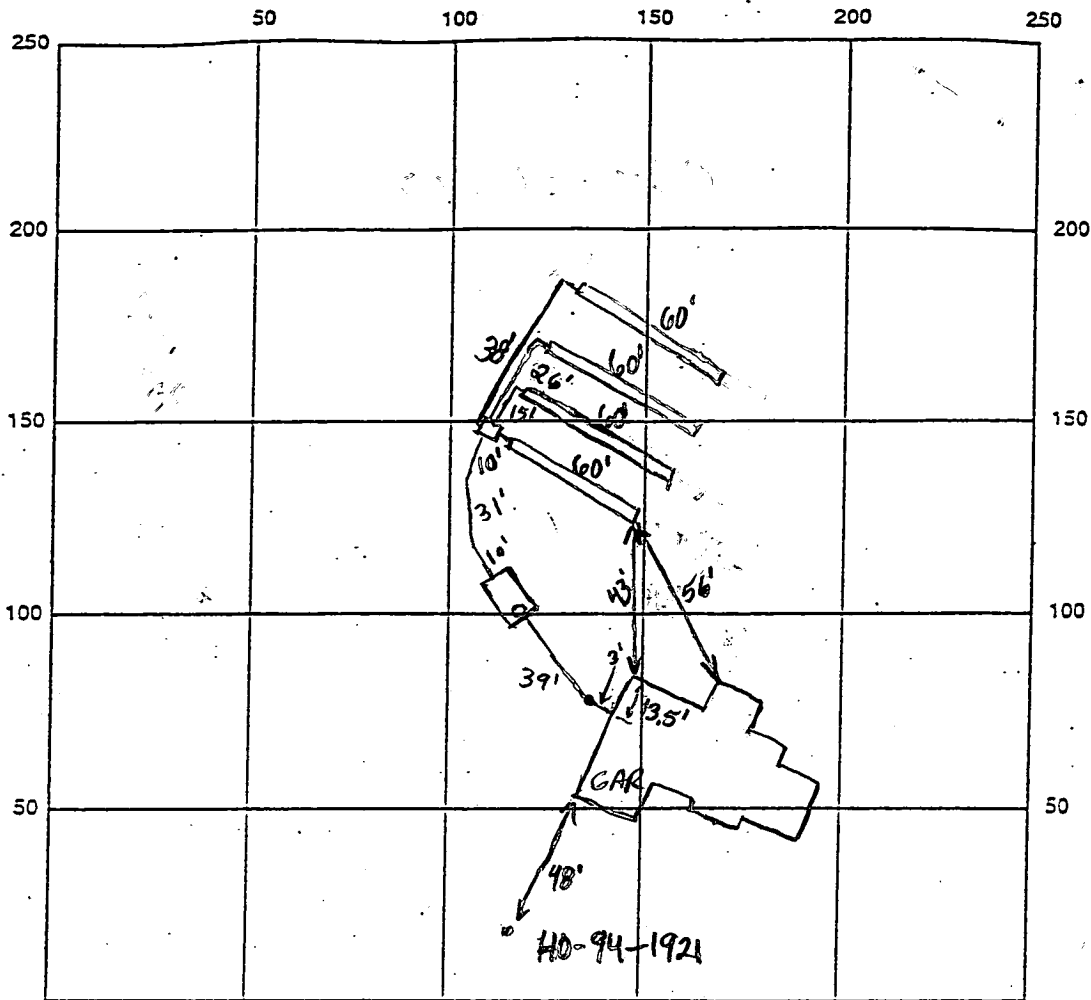
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

LOG PERMIT SKIPPED
AND RETURNED 7/20/00
Deck B00125558

11
50830H

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

LANCLOT CROSS

SEPTIC TANK LEVEL 1250 Mid-Scam CLEANOUTS 1-4" House, 1-8" TANK

DISTRIBUTION BOX LEVEL D.K.

DRAIN FIELD/TILE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 4x60' FT. (240' Total)

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 4/28/00 House connection made. Everything satisfactory. O.K. to cover. BB.

DATE SYSTEM APPROVED 4/28/00 INSPECTOR B. Baker

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 8/15/95

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing, Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808
21042

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 68

ROAD AND DESCRIPTION Rt 194 + Folly Quarter Rd

TAX MAP 16+23 PARCEL # 34+63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. Mark A. Keil
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR BLDG. PERMITS DATE _____

DISAPPROVED BY _____ FOR 000118679 DATE 7/12/99

HOLD PENDING FURTHER TESTS _____
SFA-40RMS

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE
1020 1019

0' brn
cllm

2' pink
Salm

2.5' orange
dark
brown
Salm
micaceous
15-20%
decayed
shale

12'

1017

6" topsoil

dark blk
brn
decayed
micashale
Salm
few large
1" dia rocks

9' lgt grey
tan to
micaceous
orange
brn Sa
mottles - not
H₂O related

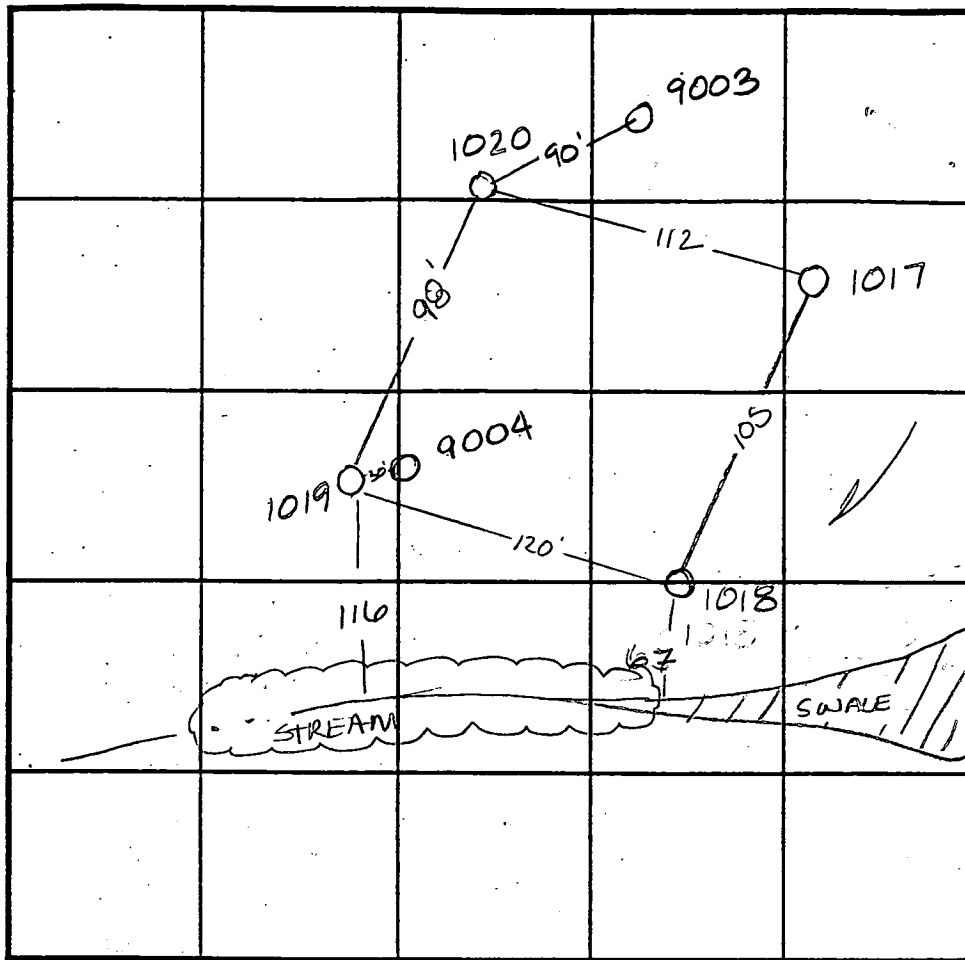
12'

1018

no.
distinct
Clay
layer
dark brn
Sa
micaceous
Lown

6' orange
white
mottled
Salm
decayed
quartz

12'



SOIL PROFILE
9003 9004

0' red brn
Si cllm

2.0' lgt
brown
Si Salm
pockets
of
decayed
quartzite
micaceous

12.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-7-95	1020	Visual	to 11'	see profile	—	—	
	1019	3' / V12'	11:38 ³⁰	11:39 ³⁰	11:39 ³⁰	11:41 ³⁰	1 1/2 min
9-6-95	1017	6' / V12'	10:10	10:10 ⁴⁵	10:10 ⁴⁵	11:12 ¹⁵	1 1/2 min
	1017	3' / V12'	10:10 ¹⁵	10:10 ⁴⁵	10:10 ⁴⁵	10:12 ³⁰	1 3/4 min
	1018	3' / V12'	11:17	11:18 ³⁰	11:18 ³⁰	11:20 ³⁰	2 min
5-1-97	9003	Visual	to 12.5'	see profile	—	—	OK
	9004	Visual	to 12.0'	see profile	—	—	OK

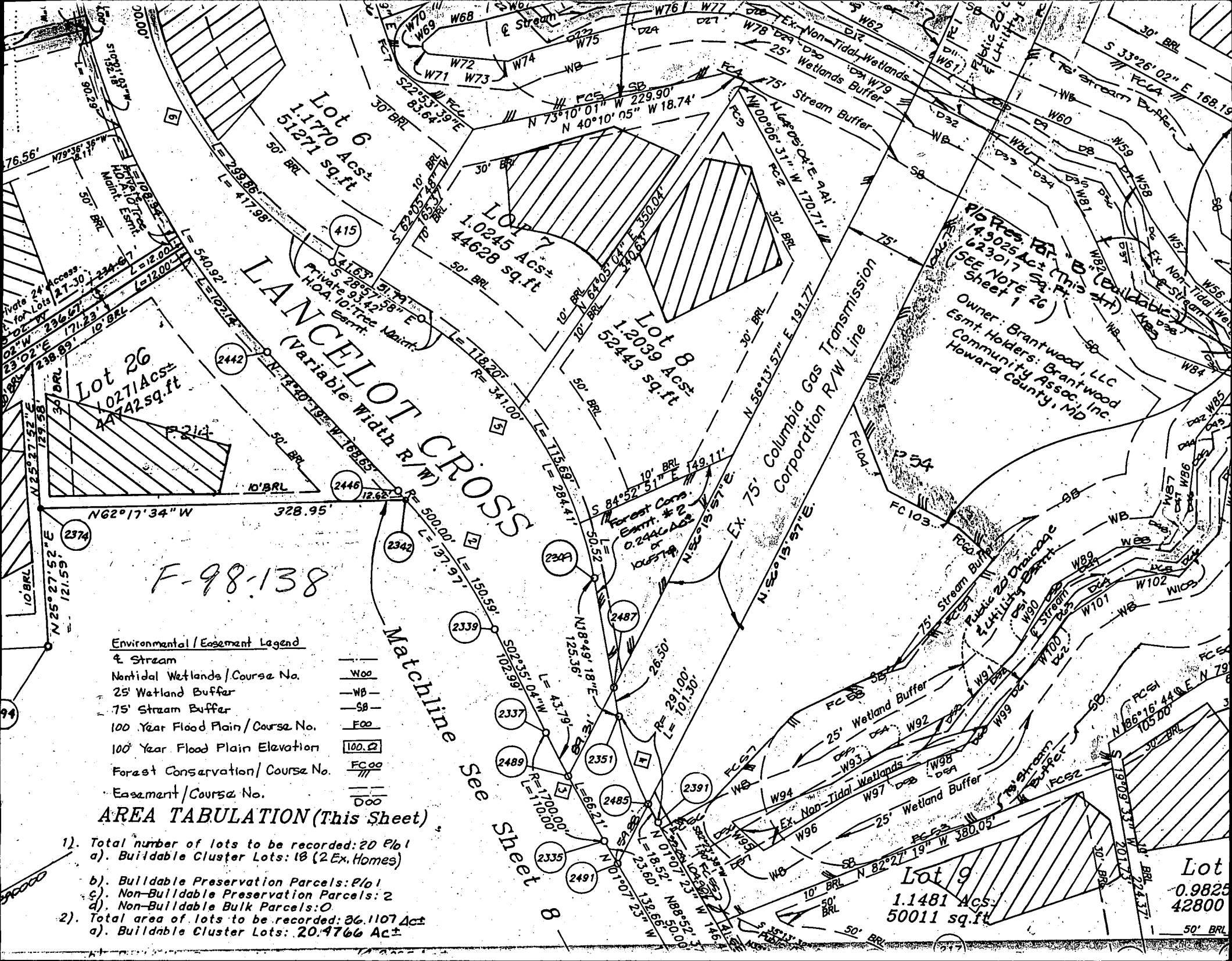
REMARKS wet season testing 1018 less than 100' from stream

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



F-98-138

Environmental / Easement Legend

& Stream	W00
Nontidal Wetlands / Course No.	WB
25' Wetland Buffer	SB
75' Stream Buffer	FC00
100 Year Flood Plain / Course No.	100.0
100 Year Flood Plain Elevation	FC00
Forest Conservation / Course No.	FC00
Easement / Course No.	D00

AREA TABULATION (This Sheet)

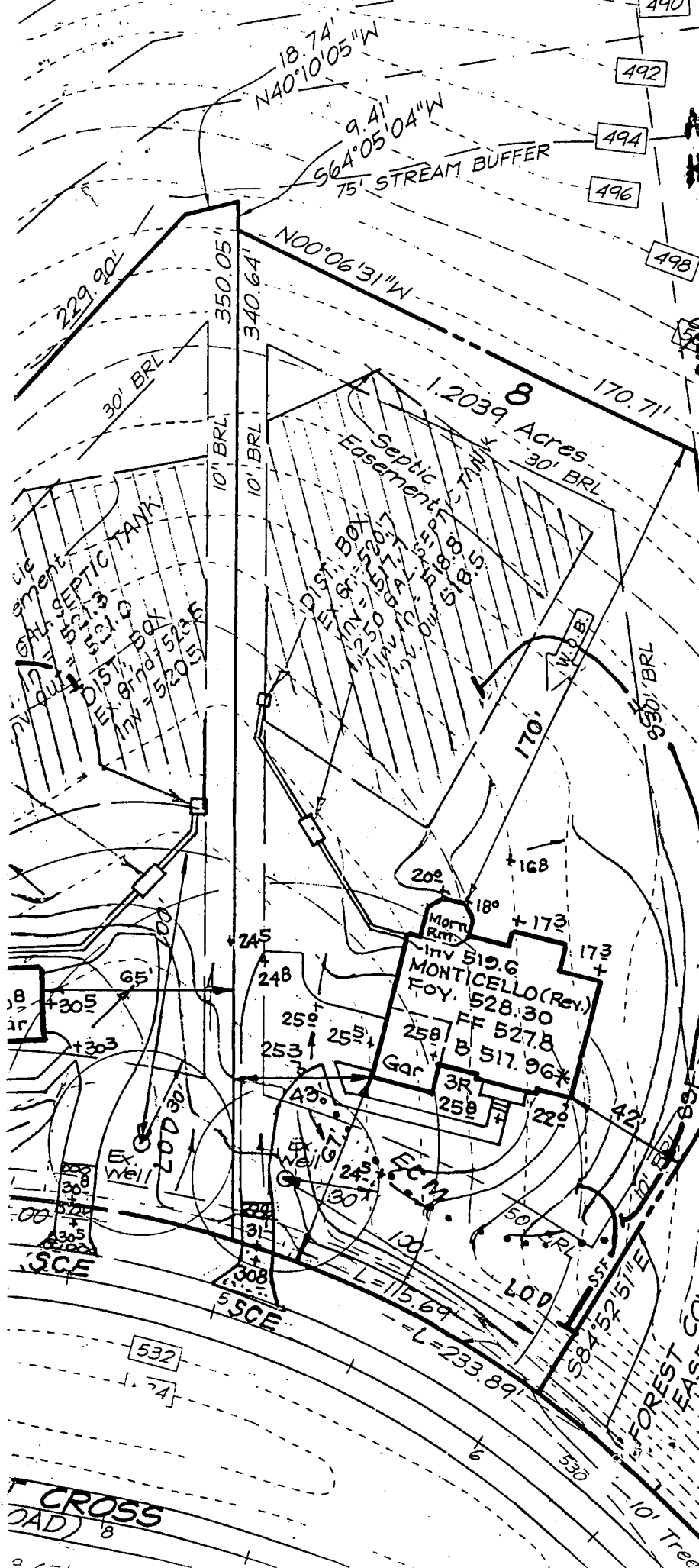
1. Total number of lots to be recorded: 20 P/1
 - a. Buildable Cluster Lots: 18 (2 Ex. Homes)
 - b. Buildable Preservation Parcels: P/1
 - c. Non-Buildable Preservation Parcels: 2
 - d. Non-Buildable Bulk Parcels: 0
2. Total area of lots to be recorded: 36.1107 Acs
 - a. Buildable Cluster Lots: 20.4766 Acs

Lot 9
1.1481 Acs
50011 sq.ft

P/1 Pres. for (This Sheet)
14.9025 Acs (Buildable)
623017 sq.ft
(SEE NOTE 26)
Sheet 1
Owner: Brantwood, LLC
Esmt. Holders: Brantwood
Community Assoc, Inc.
Howard County, MD

Approved Septic System Plan
Howard County Health Department

Signature 7/12/99
DATE



Total linear feet of trench required 240 feet
Width of trench(es) 3.0 feet
Depth of trench(es) 5.0 feet
Depth of stone required below distribution pipe 20.5 feet

DEVELOPER'S/ENGINEER'S CERTIFICATE

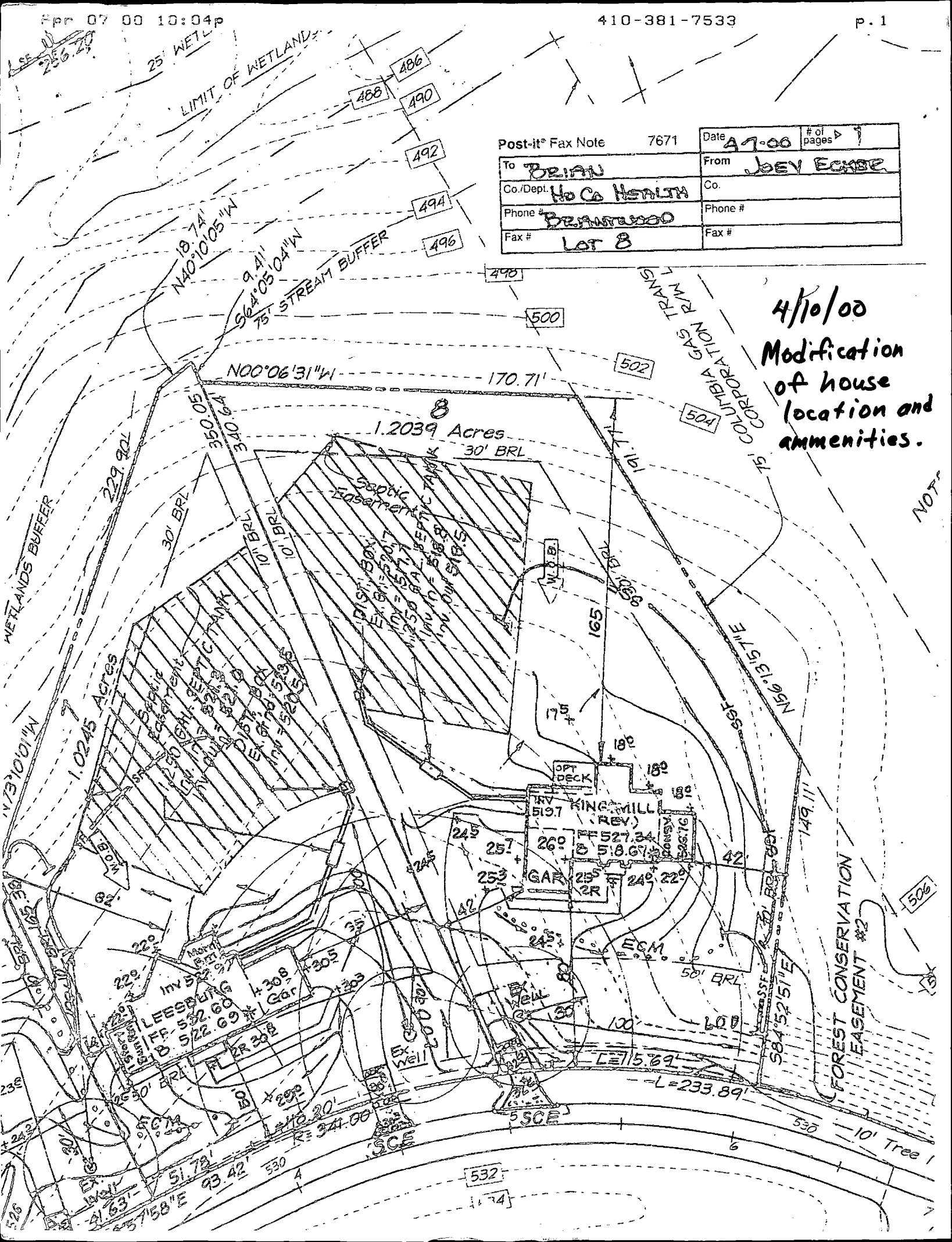
"I/We certify that all developments shown on this plan of development are in accordance with the Certificate of Attendance Training Program for the project. I also authorize the Soil Conservation District to perform any necessary inspections."

WJG
 NAME

CROSS
 (DAD) 8

Post-it® Fax Note	7671	Date	4-7-00	# of pages	1
To	BRIAN	From	JOEY ECKSE		
Co./Dept.	HO CO HEALTH	Co.			
Phone #	BRANTWOOD	Phone #			
Fax #	LOT 8	Fax #			

4/10/00
 Modification
 of house
 location and
 amenities.



NOTE

506

530

10' Tree

6/5/00 10:15 a.m.

*6/6/00 A.M.



Inspection made - ditch around ex well, rest of yard has been seeded. unable to determine whether

HOWARD COUNTY HEALTH DEPARTMENT

or not casing is Diane L. Matuszak, M.D., M.P.H., County Health Officer

8" above final grade. ds

June 2, 2000

Resolved 6/6/00
SRK

NV Homes
2200 Defense Highway, Suite 301
Crofton, MD 21114

RE: Height of Well Casing
Brantwood, Lot - 8
3021 Lancelot Cross
Well Permit #: HO-94-1921

Dear Sirs:

During a recent well line installation inspection for the well on the above referenced property, it was discovered that the well casing did not extend above the existing grade to comply with regulatory standards.

According to Code of Maryland Regulations, COMAR 26.04.04.07D(3)(c), "a minimum of 8 (eight) inches of the casing length shall extend above ground level after final grading." This is to help protect against contaminants entering the water supply.

After final grading is completed, please make certain that the well casing meets the COMAR standard explained above and contact this office to schedule a field inspection. Additional casing should be added in order to extend the well casing to the required height. Necessary casing repair/extension should be performed by a licensed well driller and not a registered plumber. This should be done prior to having a lab submit water samples to this office.

Please be advised that no Interim Certificate of Potability (recommendation for use and occupancy approval) will be issued for this property until this issue is resolved. Thank you for your cooperation in this matter and please call me if you have any further questions.

Respectfully,
Brian Baker SRK
Brian Baker, Sanitarian
Water and Sewerage Program

SRK
cc: Cline and Duvall
file ✓

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
Name of Installer Van Sant Plbg + Htg Receipt # _____ Date _____ Telephone 301-829-0444
License Number 1467 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner WV Homes Telephone 301-858-0522
Subdivision Brantwood Lot # 8 Well Tag # HO-94-1921
Site Address 3021 Lancelot Cross

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Goulds
3. Model # 7G307422
4. Capacity _____ 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 _____

Motor
1. Horsepower 1/2
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make Campbell
2. Model # B10X
3. Depth 48"

Tank
1. Capacity V-100
2. Pressure relief valve? Yes

Piping PE
1. Type PE
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 48

Well data
1. Depth 300 ft.
2. Yield 8.3 GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? _____

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.

4/20/00 - WPI on BB SRU Signature of Applicant: Harford Van Sant
Casing not 8" above grade Date: 1/21/00
4/28/00 - Casing not 8" above grade
6/6/00 - Casing 8" above grade - SRU

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

C1 4125

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER A50830H

ST/CO USE ONLY DATE Received 07 06 99

DATE WELL COMPLETED MM 02 DD 26 YY 99

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1921

OWNER Brantwood LLC STREET OR RFD Lancelot Cross TOWN Ellicott City SUBDIVISION Brantwood SECTION I LOT 8

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for BROWN SHALE and BLUE SLATE.

GROUTING RECORD form with fields for material type (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for casing types (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form with fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER) and DEPTH.

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.

WATER AT 97-290

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED Y N

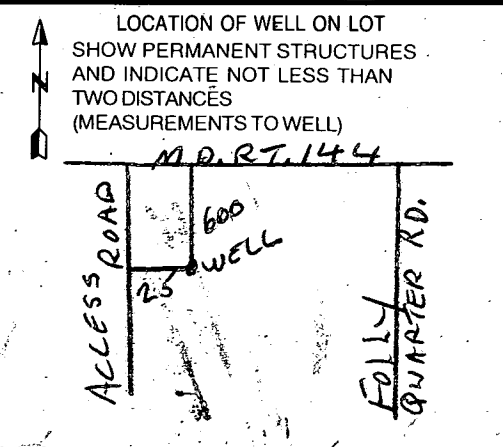
CIRCLE APPROPRIATE LETTER A, E, P. I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04...

DRILLERS LIC. NO. MWD 139 Robert Cline DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. MWD 168 Rick Fogle

Table with columns: A, C, H, S, R, E, N. Rows for casing sections with diameters and depths.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA



B 1	8507	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-1921 <small>70 fill in this form completely 79</small>
------------	-------------	--------------------------------	---	---

OWNER INFORMATION

Date Received (APA) **10.13.98**
8 MM DD YY 13

Brantwood LLC
15 Last Name Owner First Name 34

8835 -P Columbia 100 Parkway
36 Street or RFD 55

Columbia, MO 21045
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

Howard
8 COUNTY 21

Peaga Property
23 SUBDIVISION 42

SECTION **8** LOT **8**
44 46 48 50

Pine Orchard meadows
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **2** M I I
73 76 77 78

DRILLER INFORMATION

Hartman, David MW D517
Driller's Name 76 License No. 81

A.C. Schultes of MO, Inc.
Firm Name

24 South River Road
Address

Egglewater, MD 21031
Address

10/6/98
Signature Date

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

MO. Rt. 144
11 NEAR WHAT ROAD 30

600
34 DISTANCE FROM ROAD 37

FT
ENTER FT OR MI 38 39

TAX MAP: _____ BLK: _____ PARCEL: _____

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **10**
1 2 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **800**
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co COUNTY NAME **A5083000H** COUNTY NO.

STATE SIGNATURE _____ INSERT S → _____

DATE ISSUED **10-26-98** **A. McMillan** **10-26-98**
43 MM DD YY 48 CO-SIGNATURE EXP. DATE

NORTH GRID **520 0:0 0** EAST GRID **820 0:0 0**
50 55 57 63

APPROXIMATE DEPTH OF WELL **200** FEET
24 28

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- Tanker**
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E **820**

N **520**

1/13/99 **11:30**

No INSP

Fall 17

000
000

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 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEM AN EXISTING WELL

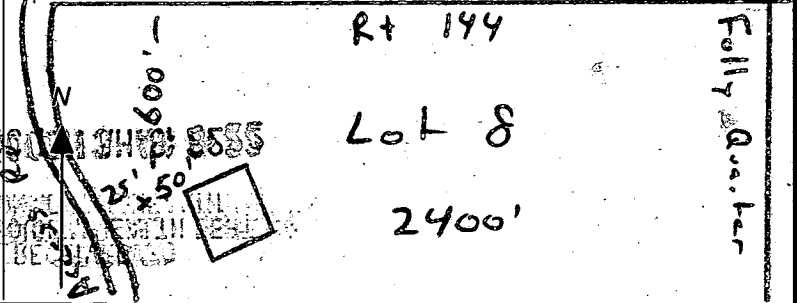
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ 52

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

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER _____ G A P

FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **HO-94-1921**
67 68 70 71 72 73 74 75 76 77 78 79



B 1 8607 SEQUENCE NO. (MDE USE ONLY) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

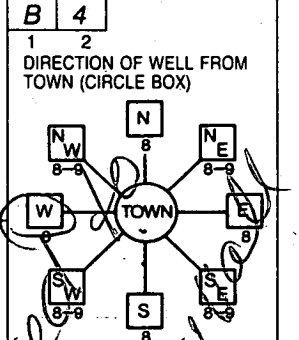
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER HO-94-1921 fill in this form completely

OWNER INFORMATION Date Received (APA) 10/13/98 B. Antwood LLC 8835 - P Columbia 100 Parkway Columbia, MO 21045

LOCATION OF WELL Howard Feaga Property Pine Orchard meadows MILES FROM TOWN 2

DRILLER INFORMATION Driller's Name: Hartman, David MW D517 Firm Name: A.C. Schuller of MD, Inc. Address: 24 South River Road, Edgewater, MD 21037



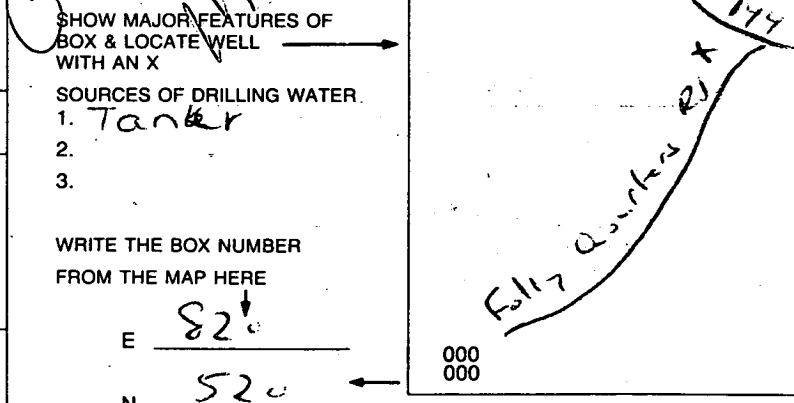
DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD MD Rt. 144 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 600 FT

WELL INFORMATION APPROX. PUMPING RATE 10 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 800 GAL. PER DAY

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 APPROVAL) TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard Go 15083004H COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 10/26/98 CO SIGNATURE M. Miller EXP. DATE 10/26/99 NORTH GRID 520 000 EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 200 FEET APPROXIMATE DIAMETER OF WELL 6" INCH

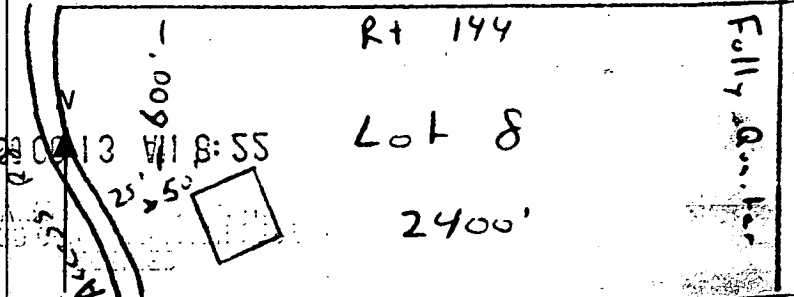


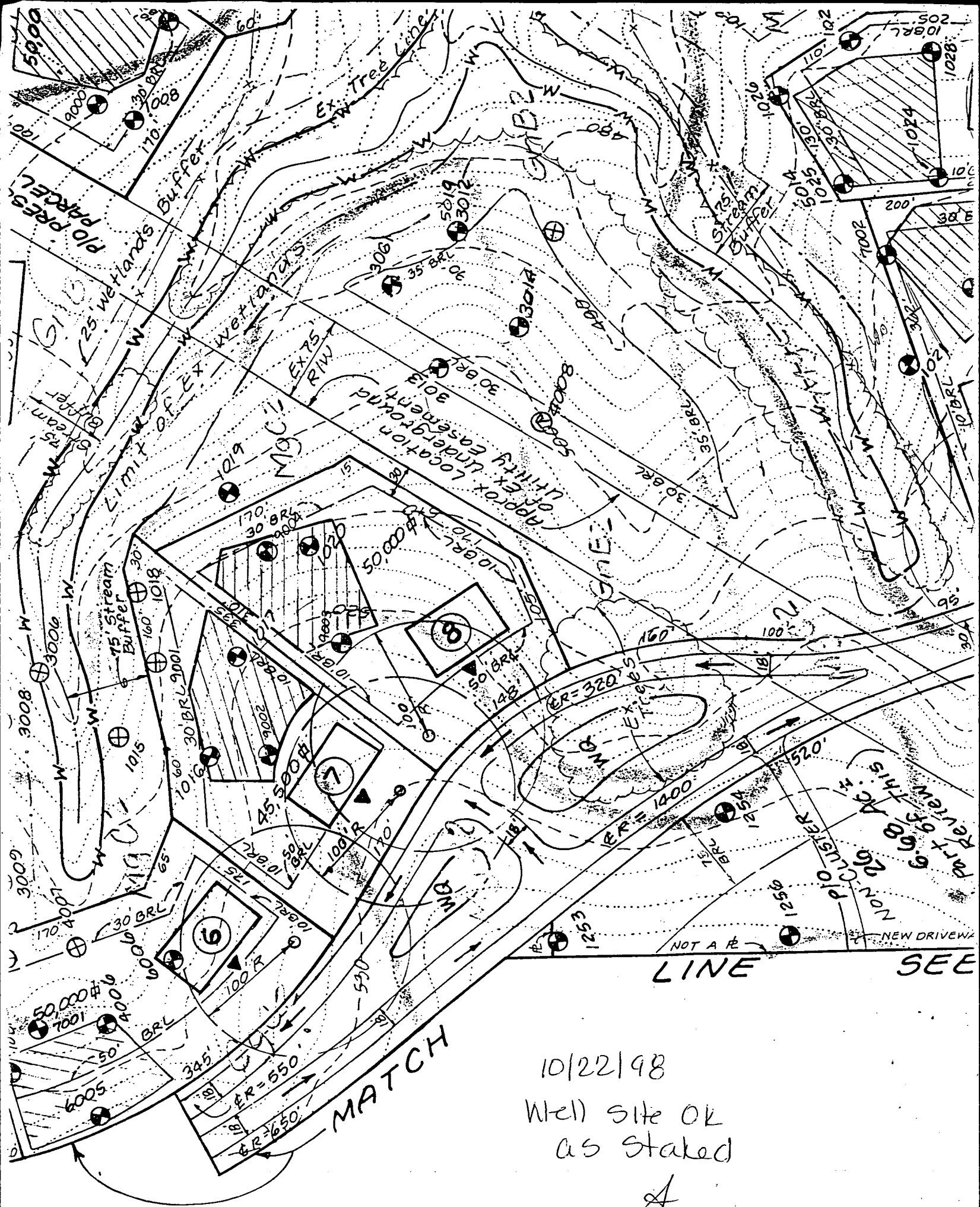
METHOD OF DRILLING (circle one) BORED (or Augered) AIR-ROTary JETTED ROTARY (Hydraulic Rotary) CABLE DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

WRITE THE BOX NUMBER FROM THE MAP HERE E 820 N 520

Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER FORCE AMI PERMIT No. HO-94-1921

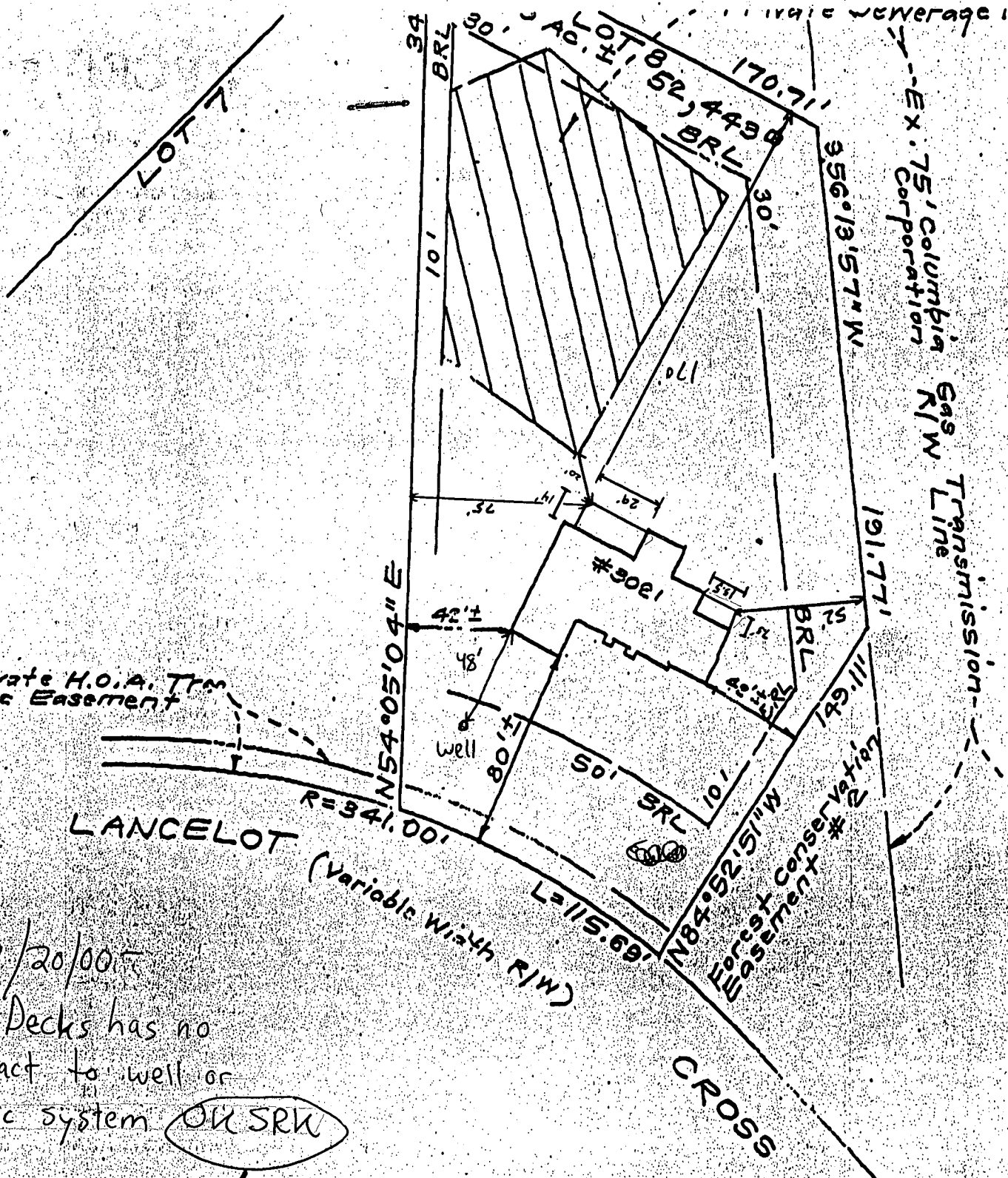




10/22/98

Well site OK
as Staked

★



Private H.O.A. Maintenance Easement

LANCELOT (Variable Width R/W)
 R=341.00'
 L=115.69'

7/20/00
 Location of Decks has no impact to well or septic system OK SRW

[Handwritten signature]

NOTES:
 1. The ± setback distance

