



MEMO

To: Brandon Pursel, USEPA
From: Francis Biehl, PE and Jason Martinez
CC: David Favero, RACER Trust
Date: November 7, 2016

Project #: R2330021
Re: RACER Van Buren Landfill Site (#11070) – Well Record Search

The Mannik & Smith Group, Inc. (MSG) has completed a Well Record Search for the Van Buren Landfill (VBL) Property located northeast of the Ecorse Road-Michigan Avenue intersection in Van Buren Township, Wayne County, Michigan (Site) on behalf of Revitalizing Auto Communities Environmental Response (RACER) Trust. *Figure 1, Site Location Map*, depicts the location of the Site relative to nearby roads and major topographic features.

WELL RECORD SEARCH

For the Well Record Search, MSG utilized the Michigan Department of Environmental Quality (MDEQ) Wellogic System website to scan for well records from 2000 to the present and the MDEQ Well Record Retrieval System Website provided by the Office of Drinking Water and Municipal Assistance website to scan for well records prior to 2000. Since these two sites state "This set of files may not be complete. County or district health department files may contain additional records that are not in these files" MSG contacted the Wayne County Health, Veterans and Community Wellness Department and the Washtenaw County Department of Health and Human Services to confirm if they had additional well record information.

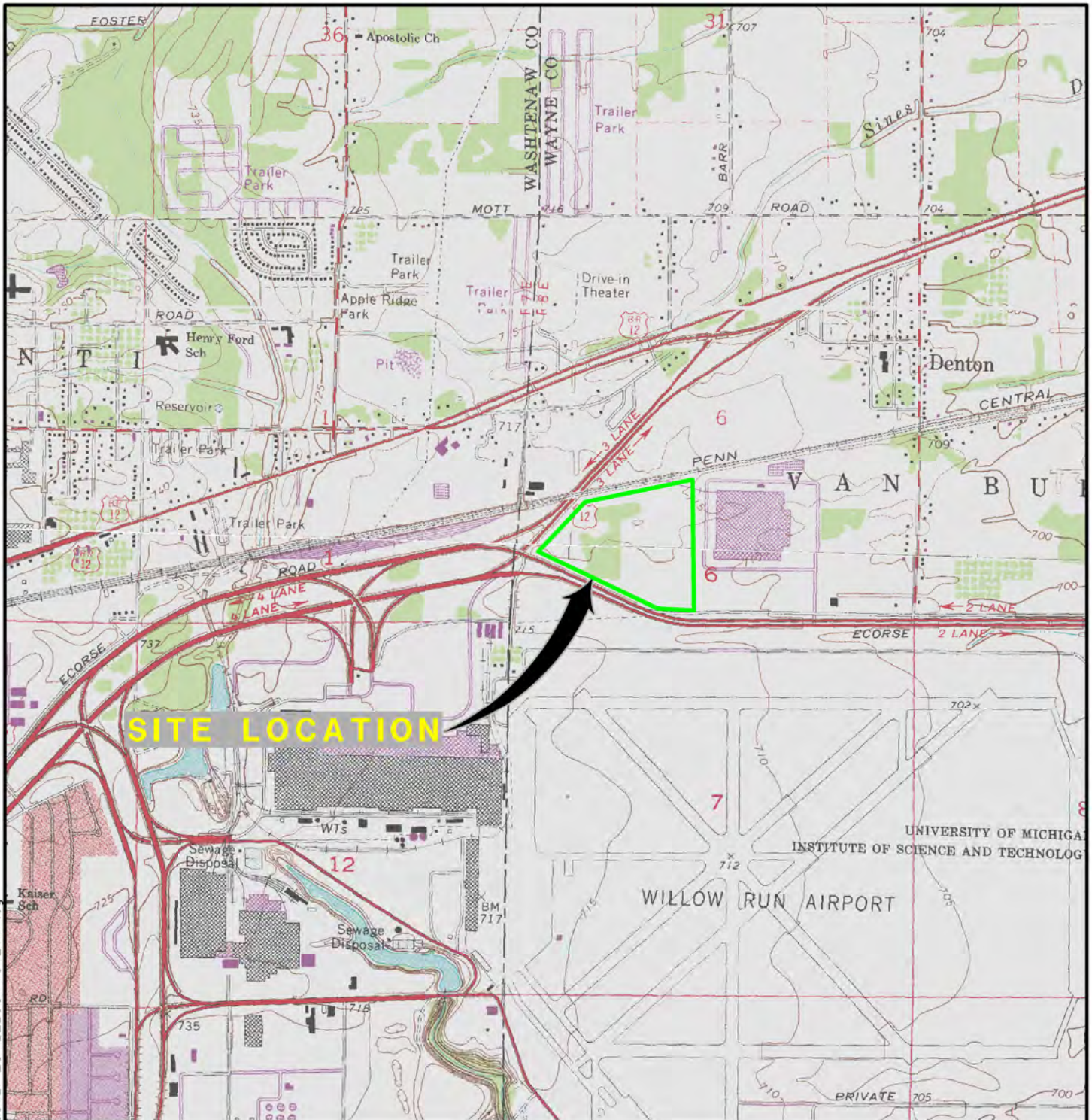
The Wayne County Health, Veterans and Community Wellness Department does not keep their own records of wells and rely on the two State sources named above as the source of well record information. The Washtenaw County Department of Health and Human Services does keep well records as a supplement to the State records. Well records were scanned for using the Washtenaw County Public Access Records Search website. MSG completed a scan of well records within a 1 mile radius (that is, the length or width of a Section within the Public Land Survey System) of the Site. The Van Buren Landfill Site is located in Township III South, Range VIII East, Section 6 in Wayne County. As depicted in *Figure 2, Wells Surrounding RACER Van Buren Landfill*, total of 6 Sections (Township III S, Range VII E, Sections 1 and 12; and Township III S, Range VIII E, Sections 5, 6, 7, 8) were searched.

Well Pump Records were found for each Section and include information such as owner of well, street address and location of well, well use, soil profile, depth of well and date of installation. The location of the wells on the Well and Pump Record are approximate. Well and pump records can be found in *Attachment 1, Well and Pump Records*. The addresses for each well found was imposed on a figure to visually describe the location of the nearby wells in relation to the Van Buren Landfill Site. When inputting the addresses, some addressed do not match up with the Section they were labeled under, resulting in a few wells outside of the search area. Adjacent and nearby wells surrounding the Site are illustrated on *Figure 2*.

A total of nineteen (19) domestic wells were found in Sections 1, 5 and 6. The definition of a domestic or household well is not provided within the well records. However, we are assuming that a domestic well is potentially used for drinking water and other domestic purposes. Non-domestic wells such as irrigation wells, test wells or pump wells were found as well in many of the Sections (Sections 12 and 7). We are assuming non-domestic wells are not used for drinking. We are aware of one non-domestic well on the Smith Property (the 20.81 acre property directly north of the Site) via verbal communication between MSG and Mr. Smith which did not show up in the search.

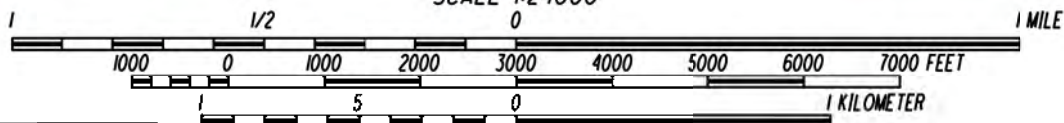
FIGURES





SITE LOCATION

SCALE 1:24000



CONTOUR INTERVAL 10 FEET
 NATIONAL GEODETIC VERTICAL DATUM OF 1929



NOTE: MAP ADAPTED FROM USGS TOPOGRAPHIC QUADRANGLES, (MICHIGAN 7.5 MINUTE SERIES) DENTON, MICHIGAN (PHOTOGRAPHS TAKEN 1952 AND REVISED FROM PHOTOGRAPHS TAKEN 1966 AND FIELD CHECKED 1969, REVISED AGAIN IN 1982) AND YPSILANTI EAST, MICHIGAN, (PHOTOGRAPHS TAKEN 1952, AND REVISIONS TAKEN FROM PHOTOGRAPHS TAKEN 1966, AND FIELD CHECKED 1967, REVISED AGAIN IN 1982)



**FIGURE 1
 SITE LOCATION MAP**

VAN BUREN LANDFILL SITE
 MICHIGAN AVE. & ECORSE RD.
 VAN BUREN TOWNSHIP, WAYNE COUNTY, MICHIGAN

DATE 3/12/14	DRAWN BY CJB	DESIGNED BY MJF	PROJECT NO. R2330012
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1. Well Records were retrieved from the MDEQ Well Records Retrieval Systems, Office of Drinking Water and Municipal Assistance at <http://www.deq.state.mi.us/well-logs/default.asp> and Wellogic website at (<https://secure1.state.mi.us/wellogic/Login.aspx?ReturnUrl=%2fwellogic%2fdefault.aspx>). Record locations use the Public Land Survey System.

2. Township III South and Range VII East, Sections 1 and 12 are located in Ypsilanti in Washtenaw County.

3. Township III South and Range VIII East, Sections 5, 6, 7, 8 of are located in Buren Township in Wayne County.

4. Wells locations are approximate (database lists only mailing address and generalized land description)

5. Well records indicate wells as either irrigation, domestic, test well, Type I Public, Type IIa Public, Type IIb, Type III, Heat Pump, Other

6. Mr. Smith Well was not found on website (location is approximate)



TITLE: RACER VAN BUREN LANDFILL
WATER WELLS SURROUNDING
VAN BUREN LANDFILL

DATE: 10/2016	DRAWING NO. 2
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SCALE: NOT TO SCALE	PROJECT NO. R2330021
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ATTACHMENT 1

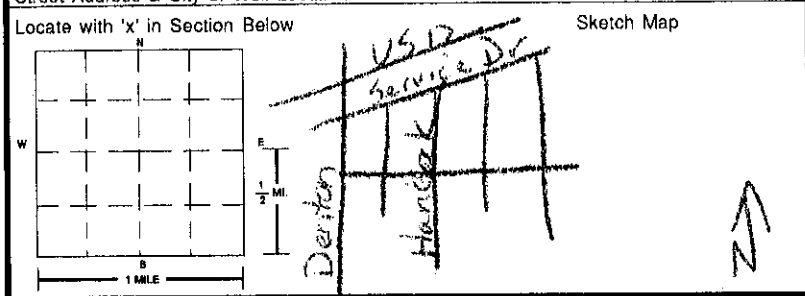
WELL AND PUMP RECORDS



1. LOCATION OF WELL
 County **Wayne** Township Name **VanBuren** Fraction **NE 1/4 NW 1/4 NW 1/4** Section No. **5** Town No. **3S** Range No. **8E**

Distance and Direction from Road Intersection
6100 Hancock
E. of Denton S. of Michigan
Belleville
 Street Address & City of Well Location

3. OWNER OF WELL **Charlie Brock**
 Address **1917 N. Walton**
Westland, MI 48187
 Address Same as Well Location Yes No



4. WELL DEPTH: **91** ft. Date Completed **7/9/97** New Well Replacement Well

5. Cable Tool Rotary Driven Dug
 Hollow Rod Auger/Bored Jetted

6. USE: Household Type I Public Type III Public
 Irrigation Type IIa Public Heat Pump
 Test Well Type IIb Public

7. CASING: Steel Threaded Plastic Welded
 Other
 Diameter: **5** in. to **37** ft. depth
 BORE HOLE: Diameter: **7-7/8** in. to **91** ft. depth

Height: Above/Below Surface: **2** ft
 Weight: **SUR21** lbs./ft.
 Drive Shoe
 Shale Packer

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Top Soil	2	2
Yellow Sandy Clay	6	8
Hard Blue Clay	2	10
Soft Blue Clay	15	25
Hard Blue Clay	15	40
Soft Blue Clay	32	72
Hard Blue Clay & Gravel	7	79
Medium Gray Sand & Gravel	12	91

8. SCREEN: Not Installed Gravel-Packed
 Type **stainless** Diameter **4"**
 Slot/Grate **15** Length: **4'**
 Set Between **87** ft. and **91** ft.
 FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other **plug**

9. STATIC WATER LEVEL: **2** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface **20** ft. After **2** hrs. Pumping at **40** G.P.M.
 Plunger Bailer Air Test Pump

11. WELL HEAD COMPLETION: Pitless Adapter 12" Above Grade
 Basement Offset Well House

12. WELL GROUTED? No Yes From **0** to **79** ft.
 Neat Cement Bentonite Other **pressure**
 No. of Bags **3** Additives **Benseal/Supermud**

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type **not installed yet** ft. Direction
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name **Aerjotor**
 Model Number **T20100** HP **1** Volts **230**
 Length of Drop Pipe _____ ft. Capacity _____ G.P.M.
 TYPE: Submersible Jet Other **23**
 PRESSURE TANK:
 Manufacturer's Name **Well X-TROL**
 Model Number **WX302** Capacity **86** Gallons **23.2**

15. ABANDONED WELL PLUGGED? Yes No
 Casing Diameter _____ in. Depth _____ ft.
 PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
 No. of Bags _____ Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name **Donald Bailey**

18. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Slusser Drilling Co., Inc. 81-0388
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **1701 W. Michigan Ypsilanti, MI 48197**

Signed **Richard A. Slusser** Date **10/8/97**
 AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

TAX NO:

PERMIT NO:
5633

Page of
1 1

1. LOCATION OF WELL

County WAYNE	Township Name VAN BUREN	Fraction NW 1/4 SE 1/4 NW 1/4	Section No 5	Town No 2 S	Range Number 8 E
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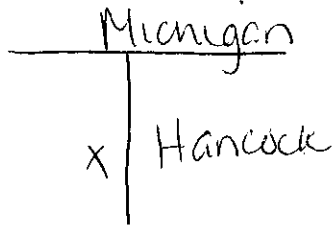
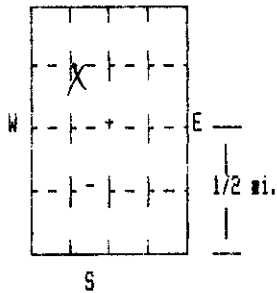
Distance And Direction From Road Intersection
1/2 MILE SOUTH OF MICHIGAN AVENUE ON THE WEST SIDE OF HANDCOCK

Well Addr: 6180 HANDCOCK ROAD

3. Owner of Well MAYCOCK CONSTRUCTION
Address

Address Same as Well Location? NO

Locate with 'X' in Sec. Below Sketch Map



4. WELL DEPTH : Date Compl This is a:
99 ft. 09/13/99 NEW WELL

5. EQUIPMENT USED: ROTARY
6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
Diam. Height ABOVE
5 in. to 95 ft. Surface 1 ft
in. to ft. Weight lb./ft.
BORE HOLE: Drive Shoe NO
8 1/2 in. to 102 ft. Shale Packer NO
in. to ft.

Formation Description	Thickness	Depth
BROWN CLAY	20	20
GRAY CLAY	75	95
STONE & GRAVEL	3	98
GRAY CLAY	4	102

8. Screen Type: SLOTTED Diam: 5 [] Not Inst.
SLOT 20 Length: 4
Set Between 35 ft. and 39 ft.
Fittings: [] Blank above scrn: ft

9. Static Level: 20 ft. Flow: [N]

10. Pumping Level below land surface:
95 ft. after 1 hrs. @ 10 GPM
[] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: 12" ABOVE GRADE

12. Grouted from 95 to 0 ft Material: BENSEAL
No. of Bags 10 bags Additives: EZ MUD

13. Nearest source of possible contamination:
Type: SEPTIC TANK Distance: 100 ft. Dir: SW
Type: CEMETERY Distance: ft. Dir:

14. Pump: [X] Not Installed [X] Installation Only
Manufacturer's Name: Fairbanks Morse
Model: 2FM72-10 HP: 0 3/4 Voltage: 0 230
Drop pipe: 80 ft. Capacity: 0 10 GPM
Pump type: submersible
Pressure Tank Manufacturer's Name: Permatank
Model: Pad 36 Capacity: 36 Gal. = 2

15. Abandoned Well Plugged? NO N/A
Casing Diameter in. Depth ft.
Plugging Material:
No. of Bags Casing Removed? JAN 20

16. Remarks, elevation, source of data, etc.
Brucepool set pump and hooked up adaptor
81-0630 Bruce Hoffman

17. Drilling Machine Operator: [X] Employee [] Subcontractor
Name BARRY BROWN

Handwritten note:
Pump installed

WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1637
Business Address 10655 Easton Road New Lothrop MI 48462
Signed *[Signature]* 09/14/99
Authorized Representative Date

GW-2-229 9/93
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

WATER WELL RECORD

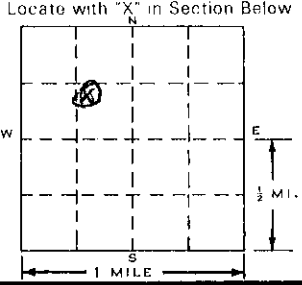
* ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		Van Buren			
County Wayne	Twp. Van Buren	Fraction SE 1/4 NE 1/4 NE 1/4	Section No. 5	Town 3 N	Range 8 E/W
Distance And Direction from Road Intersections 6070 Beck Rd Plymouth		OWNER No. _____		3 OWNER OF WELL: Address David Duncan, 6070 Beck Rd, Plymouth, Mich.	
2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	4 WELL DEPTH: (completed) 79 ft. Date of Completion 9-28-67		
Clay		4	5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> _____		
Sand		10	6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/> _____		
Clay		40	7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: Above/Below surface _____ ft. Diam. 4 in. to _____ ft. Depth _____ ft. Weight 11 lbs./ft. _____ in. to _____ ft. Depth _____ ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Rocks		50	8 SCREEN: Type: Wire wound Dia.: 4 Slot/Gauze: 35 Length: 4 Set between _____ ft. and _____ ft. Fittings: _____		
Sandy clay		77	9 STATIC WATER LEVEL 17 ft. below land surface		
Water gravel		79	10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.		
PUMP INSTALLED _____ BY KREZEL PUMP SERVICE 22000 Meadowbrook Rd. Northville, Mich. REG. NO. 0699 <i>John Krezel</i>			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____		
			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade		
			13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
			14 SANITARY: Nearest Source of possible contamination _____ feet _____ Direction _____ Type _____ Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: Manufacturer's Name Red Jacket Model Number 507B HP _____ Length of Drop Pipe 63 ft. capacity 10 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc. Pumped 8 gpm. from 150 ft. ADDED INFO. BY DRILLER. RTS CORRECTED BY: RTS ADDITION BY: RTS			17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. WAYNE W. CLAYPOOL 0111 REGISTERED BUSINESS NAME REGISTRATION NO. 4107 1/4 W. 7 Mile Rd. Northville, Mich Address Signed _____ Date _____ MICHIGAN REPRESENTATIVE		

WATER WELL AND PUMP RECORD

5310
PERMIT NUMBER

1. LOCATION OF WELL		3. OWNER OF WELL:	
County WAYNE	Township Name VAN BUREN	Fraction NW 1/4 SE 1/4 NW 1/4	Section Number 5
Town Number 3 N 10		Range Number 8 EW	
Distance And Direction From Road Intersection Louie Cochran 6185 Hancock Rd. Belleville, MI 48111		Address 23511 Clark Rd., Belleville, MI 48111	
Street Address & City of Well Location		Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Locate with "X" in Section Below		4. WELL DEPTH: Date Completed	
		MO. DAY YEAR <input checked="" type="checkbox"/> New Well	
		99 FT. 10 22 91 <input type="checkbox"/> Replacement Well	
		5. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug	
		<input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>	
		6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public	
		<input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump	
		<input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input type="checkbox"/>	
2. FORMATION DESCRIPTION		7 CASING Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input type="checkbox"/> Welded	
		<input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Height: Above/Below XXXX	
yellow sand		5 in. to 95 ft. depth	
		Surface 1 ft.	
gray clay		Weight SDR21 lbs./ft.	
		Drive Shoe <input type="checkbox"/> Yes	
coarse gravel		<input checked="" type="checkbox"/> No	
		8 SCREEN: <input type="checkbox"/> Not Installed	
		Type stainless w/w Diameter 4"	
		Slot/Grit xxxx 35 Length 4'	
		Set between 95 ft. and 99 ft.	
		FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check	
		<input type="checkbox"/> Blank above screen _____ ft. Other _____	
		9 STATIC WATER LEVEL:	
		4 ft. below land surface <input type="checkbox"/> Flow	
		10 PUMPING LEVEL: below land surface	
		4 ft. after 2 hrs. pumping at 24 G.P.M.	
		_____ ft. after _____ hrs. pumping at _____ G.P.M.	
		11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 12" above grade	
		<input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit	
		12 WELL GROUTED? <input type="checkbox"/> No <input type="checkbox"/> Yes From 0 to 80 ft.	
		<input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other BEN SEAL	
		No. of bags of cement _____ Additives _____	
		13 Nearest source of possible contamination	
		Type SEPTIC Distance 100 ft. Direction S	
		Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only	
		Manufacturer's name _____	
		Model number _____ HP _____ Volts _____	
		Length of Drop Pipe _____ ft. capacity _____ G.P.M.	
		TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____	
		PRESSURE TANK:	
		Manufacturer's name _____	
		Model number _____ Capacity _____ Gallons	
15. Remarks, elevation, source of data, etc.		16. WATER WELL CONTRACTOR'S CERTIFICATION:	
		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
17. Rig Operator's Name:		Cribley Drilling Co., Inc. 81-0524	
Kurt Wing, Kenny Pearce		REGISTERED BUSINESS NAME REGISTRATION NO.	
		Address 8300 Dexter Chelsea Rd., Dexter, MI	
		Signed Jacob L. Clark Date 1-9-92	
		AUTHORIZED REPRESENTATIVE	

USE A 2ND SHEET IF NEEDED



AUG 17 1979

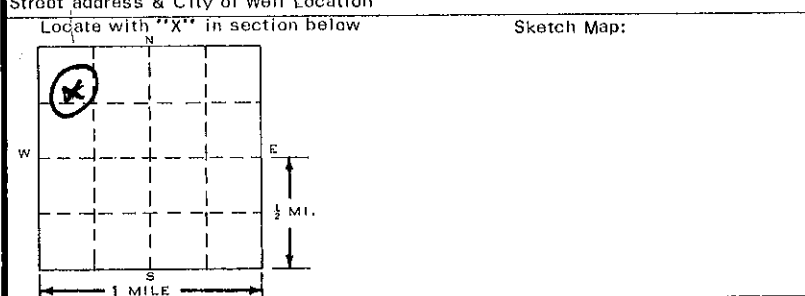
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL				
County WAYNE	Township Name VAN BUREN	Fraction S 1/4	Section Number 5	Town Number 3 S.
Range Number 8 E 1/4				

Distance And Direction from Road Intersections
5945 HANCOCK RD. S. OF MICHIGAN AVE 1/4 MI. E. OF DENTON

3 OWNER OF WELL:
Address **DONALD VOSTKOFSKY**
42042 LINCOLN ST.
BELLEVILLE, 48111



4 WELL DEPTH: (completed) Date of Completion
126 ft. 7-20-79

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded
Diam. _____ Height: Above/Below Surface _____ ft.
Weight **11** lbs./ft. Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
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YELLOW SAND	4	4
GRAY SAND	3	7
HARD BLUE CLAY	48	55
HARD BLUE CLAY & GRAVEL	55	110
HARD BLUE CLAY	4	(114)
SOFT GRAY SHALE	4	118
HARD LIMESTONE	8	126

8 SCREEN:
Type: **NONE** Dia.: _____
Slot/Gauze _____ Length _____
Set between _____ ft. and _____ ft.
Fittings: _____

9 STATIC WATER LEVEL
8 ft. below land surface

10 PUMPING LEVEL below land surface
40 ft. after **2** hrs. pumping **35** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
_____ feet _____ Direction **CITY SEWER** Type _____
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRILLER, ITEM NO.
CORRECTED BY **B.**
ADDITION BY
ELEVATION
DEPTH TO ROCK

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
SLUSSER DRILLING CO., INC. **0388**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **1701 W. MICHIGAN, UPSILANTI**
Signed **Richard A. Slusser** Date **7-31-79**
AUTHORIZED REPRESENTATIVE



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 5634	County: Wayne		Township: Van Buren	
Well ID: 82000001697		Town/Range: 03S 08E	Section: 5	Well Status: Active	WSSN:
		Source ID/Well No:			
Elevation:		Distance and Direction from Road Intersection: 1/2 mile south of Michigan Ave. on the west side of Hancock			
Latitude: 42.26100655		Well Owner: Kulwinder Singh			
Longitude: -83.52252602		Well Address: 6144 Hancock		Owner Address: 6144 Hancock	
Method of Collection: Interpolation-Map					

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 101.00 ft.	Date Completed: 9/24/1999	Pump Installation Date:	HP: 0.75
Well Type: New	Height:	Manufacturer: Other	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: 1CKT0724	Pump Capacity: 10 GPM
Casing Joint: Welded		Drop Pipe Length: 20.00 ft.	Pump Voltage:
Casing Fitting: None		Drop Pipe Diameter:	Drilling Record ID:
Diameter: 5.00 in. to 91.00 ft. depth		Draw Down Seal Used: No	
Borehole: 8.50 in. to 101.00 ft. depth		Pressure Tank Installed: Yes	
		Pressure Tank Type: Unknown	
		Manufacturer: Perma-Tank	
		Model Number: PAD52	Tank Capacity: 52.0 Gallons
		Pressure Relief Valve Installed: No	

Static Water Level: 5.00 ft. Below Grade	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 100.00 ft. after 1.00 hrs. at 50 GPM		Brown Clay	10.00	10.00
		Gray Clay	81.00	91.00
		Gravel	10.00	101.00

Screen Installed: Yes	Filter Packed: No			
Screen Diameter: 5.00 in.	Blank:			
Screen Material Type: PVC-slotted				
Slot Length Set Between				
15.00 10.00 ft. 91.00 ft. and 101.00 ft.				
Fittings: None				

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:		
Grouting Material	Bags	Additives	Depth	
Bentonite slurry	10.00	Other	0.00 ft. to 91.00 ft.	

Wellhead Completion: 12 inches above grade	
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Nearest Source of Possible Contamination:	Drilling Machine Operator Name: Barry Brown
Type	Employment: Employee
Septic tank	
Distance	Contractor Type: Water Well Drilling Contractor
55 ft.	Reg No: 78-1607
Direction	Business Name: Ed Birkmeier Well Drilling
North	Business Address:

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks: Grouting Additive 1:EZ-MUD, Pump Manufacturer:King Titan



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 5634	County: Wayne		Township: Van Buren	
Well ID: 82000001697		Town/Range: 03S 08E	Section: 5	Well Status: Active	WSSN:
		Source ID/Well No:			
Elevation:		Distance and Direction from Road Intersection: 1/2 mile south of Michigan Ave. on the west side of Hancock			
Latitude: 42.26100655		Well Owner: Kulwinder Singh			
Longitude: -83.52252602		Well Address: 6144 Hancock		Owner Address: 6144 Hancock	
Method of Collection: Interpolation-Map					

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 101.00 ft.	Date Completed: 9/24/1999	Pump Installation Date:	HP: 0.75
Well Type: New	Height:	Manufacturer: Other	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: 1CKT0724	Pump Capacity: 10 GPM
Casing Joint: Welded		Drop Pipe Length: 20.00 ft.	Pump Voltage:
Casing Fitting: None		Drop Pipe Diameter:	Drilling Record ID:
Diameter: 5.00 in. to 91.00 ft. depth		Draw Down Seal Used: No	
Borehole: 8.50 in. to 101.00 ft. depth		Pressure Tank Installed: Yes	
		Pressure Tank Type: Unknown	
		Manufacturer: Perma-Tank	
		Model Number: PAD52	Tank Capacity: 52.0 Gallons
		Pressure Relief Valve Installed: No	

Static Water Level: 5.00 ft. Below Grade	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 100.00 ft. after 1.00 hrs. at 50 GPM		Brown Clay	10.00	10.00
		Gray Clay	81.00	91.00
		Gravel	10.00	101.00

Screen Installed: Yes	Filter Packed: No			
Screen Diameter: 5.00 in.	Blank:			
Screen Material Type: PVC-slotted				
Slot Length Set Between				
15.00 10.00 ft. 91.00 ft. and 101.00 ft.				
Fittings: None				

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:		
Grouting Material	Bags	Additives	Depth	
Bentonite slurry	10.00	Other	0.00 ft. to 91.00 ft.	

Wellhead Completion: 12 inches above grade	
---	--

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: Barry Brown
Type	Employment: Employee
Septic tank	
Distance	Contractor Type: Water Well Drilling Contractor
55 ft.	Reg No: 78-1607
Direction	Business Name: Ed Birkmeier Well Drilling
North	Business Address:

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks: Grouting Additive 1:EZ-MUD, Pump Manufacturer:King Titan



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 6027	County: Wayne		Township: Van Buren	
Well ID: 82000002435		Town/Range: 03S 08E	Section: 5	Well Status: Active	WSSN:
		Source ID/Well No:			
		Distance and Direction from Road Intersection: SOUTH OF MICHIGAN AVENUE			
Elevation:		Well Owner: VOJTKOFSKY, DON & CAROL			
Latitude: 42.26148		Well Address: 5949 HANCOCK BELLEVILLE, MI 48111		Owner Address: 5949 HANCOCK BELLEVILLE, MI 48111	
Longitude: -83.52135					
Method of Collection: GPS Std Positioning Svc SA Off					

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 100.00 ft.	Date Completed: 10/17/2008	Pump Installation Date: 10/17/2008	HP: 0.50
Well Type: Replacement	Height: 1.00 ft. above grade	Manufacturer: AquaDuty	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: 10AV05P4	Pump Capacity: 10 GPM
Casing Joint: Solvent welded/glued		Drop Pipe Length: 80.00 ft.	Pump Voltage:
Casing Fitting: None		Drop Pipe Diameter: 1.00 in.	Drilling Record ID:
Diameter: 5.00 in. to 89.00 ft. depth SDR: 21.00		Draw Down Seal Used: No	
Borehole: 8.50 in. to 101.00 ft. depth		Pressure Tank Installed: Yes	
		Pressure Tank Type: Diaphragm/bladder	
		Manufacturer: Well-X-Trol	
		Model Number: WX-202	Tank Capacity: 5.5 Gallons
		Pressure Relief Valve Installed: Yes	

Static Water Level: 15.00 ft. Below Grade	Well Yield Test: Pumping level 90.00 ft. after 4.00 hrs. at 5 GPM	Yield Test Method: Test pump	Formation Description	Thickness	Depth to Bottom
			Brown Clay	14.00	14.00
			Gray Clay	48.00	62.00
			Sand	1.00	63.00
			Gray Clay	26.00	89.00
			Sand Fine	11.00	100.00
			Gray Clay	1.00	101.00

Screen Installed: Yes	Filter Packed: Yes	Geology Remarks:		
Screen Diameter: 5.00 in.	Blank:			
Screen Material Type: PVC-slotted				
Slot	Length	Set Between		
15.00	11.00 ft.	89.00 ft. and 100.00 ft.		
Fittings: None				
Well Grouted: Yes	Grouting Method: Grout pipe outside casing			
Grouting Material	Bags	Additives	Depth	
Bentonite slurry	7.00	None	0.00 ft. to 89.00 ft.	
Wellhead Completion: Pitless adapter, 12 inches above grade				

Nearest Source of Possible Contamination:			Drilling Machine Operator Name: STEVE WHEELER	
Type	Distance	Direction	Employment: Employee	
Sewer line	100 ft.	West	Pump Installer: J. STEPP	
None			Contractor Type: Water Well Drilling Contractor	Reg No: 81-2215
Abandoned Well Plugged: Yes			Business Name: Ann Arbor Well Drilling, Inc.	
			Business Address: Box 163, Dexter, MI, 48130	
			Water Well Contractor's Certification	
			This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Casing Diameter: 4 in.	Casing Removed: No		Signature of Registered Contractor	Date
Plugging Material: Bentonite chips/pellets				
No. of Bags: 3.50	Well Depth: 92 ft.			

General Remarks: PUMP STUCK IN OLD WELL AT 40'. CUT OFF CASING 6' BELOW GRADE.
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 82737805001

Tax No: 82018010048301	Permit No:	County: Wayne	Township: Van Buren		
Well ID: 82000001335		Town/Range: 03S 08E	Section: 5	Well Status:	WSSN:
Elevation: 701 ft.		Distance and Direction from Road Intersection: LOUIE COCHRAN			
Latitude: 42.2595436951		Well Owner: ENGINEERED HOUSING CONCEPTS IN			
Longitude: -83.5216597149		Well Address: 6185 HANCOCK RD. BELLEVILLE, MI 48111		Owner Address: 23511 CLARK RD BELLEVILLE, MI 48111	
Method of Collection: Interpolation-Map					

Drilling Method: Rotary	Well Use: Household	Pump Installed: No
Well Depth: 99.00 ft.	Date Completed: 10/22/1991	Pressure Tank Installed: No
Well Type: New	Height: 0.00 ft. below grade	Pressure Relief Valve Installed: No
Casing Type: PVC plastic		
Casing Joint: Unknown		
Casing Fitting: None		
Diameter: 5.00 in. to 95.00 ft. depth		
Borehole: 8.00 in. to 80.00 ft. depth		

Static Water Level: 4.00 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 4.00 ft. after 2.00 hrs. at 24 GPM	Yellow Sand	4.00	4.00
Yield Test Method: Unknown	Gray Clay	82.00	86.00
	Gravel Coarse	13.00	99.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 4.00 in.	Blank: 0.00 ft. Above
Screen Material Type:	
Slot	Length
35.00	4.00 ft.
Set Between	
95.00 ft. and 99.00 ft.	
Fittings: Neoprene packer	

Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags
Bentonite slurry	0.00
Additives	Depth
None	0.00 ft. to 80.00 ft.

Wellhead Completion: Other, 12 inches above grade	Geology Remarks:

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: KURT WING AND KENNY PEARCE
Type	Employment: Unknown
Septic tank	
Distance	Contractor Type: Unknown
100 ft.	Reg No: 81-0524
Direction	Business Name:
South	Business Address:

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks: Wellhead Completion:12 inch Above Grade



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 5634	County: Wayne	Township: Van Buren		
Well ID: 82000001696	Town/Range: 03S 08E	Section: 5	Well Status: Active	WSSN:	Source ID/Well No:
	Distance and Direction from Road Intersection: 1/2 MILE SOUTH OF MICHIGAN AVENUE ON THE WEST SIDE OF HANCOCK				
	Well Owner: KULWINDER SINGH				
	Well Address: 6144 HANCOCK MI			Owner Address:	
Elevation:					
Latitude: 42.256859					
Longitude: -83.517074					
Method of Collection: QQQ - Centroid					

Drilling Method: Rotary	Well Use: Household	Pump Installed: No
Well Depth: 95.00 ft.	Date Completed: 9/14/1999	Pressure Tank Installed: No
Well Type: New		Pressure Relief Valve Installed: No
Casing Type: PVC plastic	Height:	
Casing Joint: Welded		
Casing Fitting: None		
Diameter: 5.00 in. to 91.00 ft. depth		
Borehole: 8.50 in. to 100.00 ft. depth		

Static Water Level: 3.00 ft. Below Grade	Well Yield Test: Pumping level 90.00 ft. after 1.00 hrs. at 1 GPM	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
			Brown Sand	10.00	10.00
Screen Installed: Yes	Screen Diameter: 5.00 in.	Filter Packed: No	Gray Clay	81.00	91.00
			Unidentified Consolidated Fm	3.00	94.00
			Gray Clay	6.00	100.00
Screen Material Type: PVC-slotted	Slot	Length	Set Between		
	20.00	4.00 ft.	91.00 ft. and 95.00 ft.		
Fittings: Unknown					

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:	
Grouting Material	Bags		Additives
Bentonite slurry	10.00		Other
			Depth 0.00 ft. to 91.00 ft.
Wellhead Completion: 12 inches above grade			

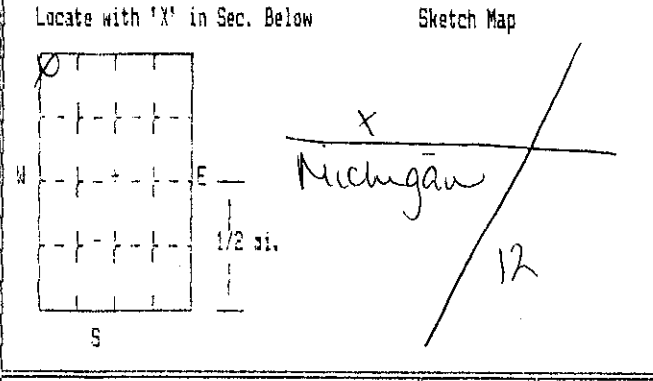
Nearest Source of Possible Contamination:	Drilling Machine Operator Name: BARRY BROWN
Type	Employment: Employee
Septic tank	
Distance	Contractor Type: Water Well Drilling Contractor
75 ft.	Reg No: 78-1607
Direction	Business Name: ED BIRKMEIER WELL DRILLING LTD
North	Business Address:
	Water Well Contractor's Certification
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
	Signature of Registered Contractor
	Date

General Remarks: DRY HOLE - PLUGGED WITH 5 BAGS BENSEAL
Other Remarks: Grouting Additive 1:EZ MUD

1. LOCATION OF WELL
 County: WAYNE Township Name: VAN BUREN
 Fraction: NW 1/4 NW 1/4 NW 1/4 Section No: 6 Town No: 3 S Range Number: 8 E

Distance And Direction From Road Intersection
 WEST OF 12 ON THE NORTH SIDE OF MICHIGAN AVENUE
 Well Addr: 43630 MICHIGAN AVENUE

3. Owner of Well: MIKE BAKER
 Address: 43630 MICHIGAN AVENUE
 Address Same as Well Location? NO



4. WELL DEPTH: 110 ft. Date Compl: 05/27/97 This is a: REPLACEMENT

5. EQUIPMENT USED: ROTARY
 6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
 Diam. 5 in. to 90 ft. Height ABOVE Surface 1 ft
 in. to ft. Weight 1b./ft.
 BORE HOLE: 8 3/4 in. to 100 ft. Drive Shoe NO
 in. to ft. Shale Packer NO

Formation Description	Thickness	Depth
BROWN SAND	5	5
BROWN CLAY	10	15
GRAY CLAY	69	84
GRAVEL	13	97
BLACK SHALE	13	110

DRILLERS NOTES:
 5 5/8" TO 110"
 Pump Lie 0630
 CLAY-POOL
 18241 MYRON
 LIVONIA MICH
 48152
 Bruce Hoffers

8. Screen Type: SLOTTED Diam: 5 [] Not Inst.
 SLOT 15 Length: 10
 Set Between 90 ft. and 100 ft.
 Fittings: [] Blank above screen: ft

9. Static Level: 15 ft. Flow: END

10. Pumping Level below land surface:
 100 ft. after 1 hrs. @ 40 GPM
 [] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: 12" ABOVE GRADE

12. Grouted from 90 to 0 ft Material: BENSEAL
 No. of Bags 9 bags Additives: SUPER MUD

13. Nearest source of possible contamination:
 Type: SEPTIC TANK Distance: 60 ft. Dir: NORTH
 Type: Distance: ft. Dir:

15. Abandoned Well? Plugged? NO See Remarks
 Casing Diameter: in. Depth: ft.
 Plugging Material:
 No. of Bags: Casing Removed?

14. Pump: [X] Not Installed [X] Installation Only
 Manufacturer's Name: STA-RITE
 Model: 20PYE2FWHP: 0 1 Voltage: 2230
 Drop pipe: 60 ft. Capacity: 20 GPM
 Pump type: SUBMERSIBLE
 Pressure Tank Manufacturer's Name: well-rite
 Model: WR200 Capacity: 20 Gal.

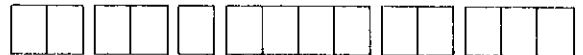
16. Remarks, elevation, source of data, etc.
 PUMP INSTALLED BY CLAYPOOL

17. Drilling Machine Operator: [X] Employee [] Subcontractor
 Name DAN CESAL

WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
 Business Address 10655 Easton Road No Lothrop MI 48460
 Signed *Edward Birkmeier* 05/30/97
 Authorized Representative Date

S 1
C-1
O-1
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GW-2-228 9/93
 Authority: Act 368 PA 1978
 Completion: Required
 Penalty: Conviction of a violation of any provision is a misdemeanor.



DEC 19 1972

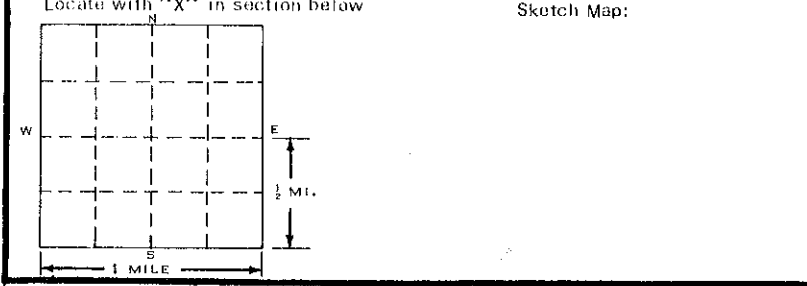
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL				
County WAYNE	Township Name VAN BUREN	Fraction NE 1/4 NW 1/4 NE 1/4	Section Number 6	Town Number 3 S. Range Number 8 E.

Distance And Direction from Road Intersections
50070 E. MICHIGAN

3 OWNER OF WELL:
Address **ROBERT JOHNSON**
50070 E. MICHIGAN
YASILANTI BELLEVILLE



4 WELL DEPTH: (completed) _____ Date of Completion _____
ft.

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
YELLOW SAND	7	7
GRAY SAND	5	12
BLUE CLAY	82	94
BLACK SHALE	21	115
BLUE SHALE	30	145
HARD BROWN SHALE	12	157
SALT WATER		
CALLED DRY HOLE - PULLED PIPE		
PLUGGED WITH BENTONITE & CUTTINGS		

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored _____

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well _____

7 CASING: Threaded Welded
Diam. _____ Height: Above/Below Surface _____ ft.
_____ in. to _____ ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

8 SCREEN:
Type: _____ Dia.: _____
Slot/Gauze _____ Length _____
Set between _____ ft. and _____ ft.
Fittings: _____

9 STATIC WATER LEVEL
94 ft. below land surface

10 PUMPING LEVEL below land surface
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
_____ feet _____ Direction _____ Type _____
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
ADDED INFO. BY DRILLER, **11/11/72**
CORRECTED BY **[Signature]**
ADDITION BY **[Signature]**

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
SWISSER DRILLING CO. INC **0388**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **1701 W. MICHIGAN, YASILANTI**
Signed **[Signature]** Date _____
AUTHORIZED REPRESENTATIVE

FEB 13 1984

WATER WELL AND PUMP RECORD

PART 127 ACT 368, P.A. 1978

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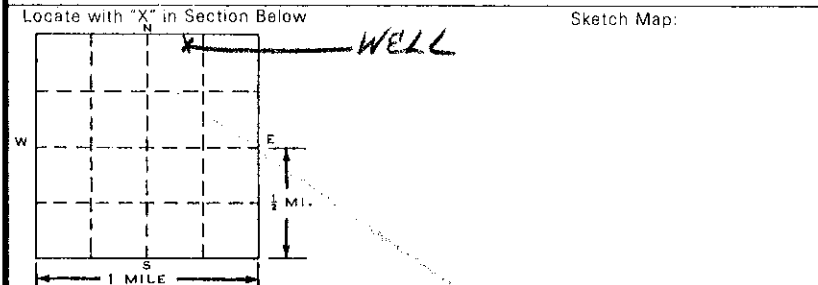
PERMIT NUMBER

1 LOCATION OF WELL		County	Township Name	Fraction	Section Number	Town Number	Range Number
		WAYNE	VAN BUREN	1/4 - 1/4 1/4	196	3	XIS 8 EX

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below



3 OWNER OF WELL:
 DON ADDINGTON
 Address: 59303 MOTT RD
 BELLEVILLE MI 48111
 Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) **92** ft. **Date of Completion** 8-31-83

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted _____

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public _____

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: Above/Below Surface 1 ft.
 Weight: SOR 21 lbs./ft.
 Grouted Drill Hole Diameter _____ in. to _____ ft. depth
 Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
BLACK DIRT	2	2
SAND	5	7
SAND (COARSE)	6	13
GRAY CLAY	72	85
SAND	5	90
GRAY CLAY	2	92

8 SCREEN: Not Installed
 Type 316 STAINLESS Diameter 4" NOM
 Slot/Gauge 14 Length 4'
 Set between 86 ft. and 90 ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen 1 ft. Other _____

9 STATIC WATER LEVEL: 30 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
50 ft. after 2 hrs. pumping at 9 G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From 0 to 86 ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
 Type SEPTIC Distance 75 ft. Direction S
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name RED JACKET
 Model number SACNMLC900 HP 1/2 Volts 220
 Length of Drop Pipe 60 ft. capacity 9 G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK: Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.

PERMIT # 22340

INFO BY DRILLER, ITEM NO. _____
 *CORRECTED BY _____
 **ADDITION BY _____
 ELEVATION _____
 DEPTH TO ROCK _____

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Creeley Drilling Co Inc 81-1586
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address Dexter MI 48130
 Signed Charles Creeley Date 9-8-83
 AUTHORIZED REPRESENTATIVE

RECEIVED
 Mich. Dept of Public Health
 Nov 18 1983
 General and
 Occupational Health
 Services Administration



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 5711	County: Wayne		Township: Van Buren	
Well ID: 82000001742		Town/Range: 03S 08E	Section: 6	Well Status: Active	WSSN:
		Source ID/Well No:			
Elevation:		Distance and Direction from Road Intersection: DENTON & DELLOR NORTH SIDE			
Latitude: 42.26036868		Well Owner: ANNETTE SWEENEY			
Longitude: -83.52975309		Well Address: 49890 MICHIGAN AVENUE BELLEVILLE, MI 48111		Owner Address: 49890 MICHIGAN AVENUE BELLEVILLE, MI 48111	
Method of Collection: Address Matching-House Number					

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 98.00 ft.	Date Completed: 11/8/2000	Pump Installation Date:	HP: 0.50
Well Type: Replacement	Height:	Manufacturer: Aermotor	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: T1250	Pump Capacity: 7 GPM
Casing Joint: Solvent welded/glued		Drop Pipe Length: 60.00 ft.	Pump Voltage:
Casing Fitting: Shale packer/trap		Drop Pipe Diameter:	Drilling Record ID:
Diameter: 5.00 in. to 93.00 ft. depth 4.00 in. to		Draw Down Seal Used: No	
Borehole: 7.88 in. to 92.00 ft. depth 4.75 in. to 98.00 ft. depth		Pressure Tank Installed: Yes	Tank Capacity: 8.6 Gallons
		Pressure Tank Type: Unknown	
		Manufacturer: Well-X-Trol	
		Model Number: WX203	
		Pressure Relief Valve Installed: No	

Static Water Level: 8.00 ft. Below Grade	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 60.00 ft. after 2.00 hrs. at 10 GPM		Topsoil	2.00	2.00
		Yellow Sand	6.00	8.00
		Gray Sand	4.00	12.00

Screen Installed: No	Intake: Bedrock Well	Blue Clay Hard	19.00	31.00
		Blue Clay Soft	12.00	43.00
		Blue Clay & Gravel	2.00	45.00
		Blue Clay Hard	4.00	49.00
		Blue Clay Soft	17.00	66.00
		Blue Clay & Gravel	4.00	70.00
		Blue Clay Hard	16.00	86.00
		Blue Clay & Gravel	5.00	91.00
		Black Shale	5.00	96.00
		Black & Gray Shale	2.00	98.00

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:		
Grouting Material: Bentonite slurry	Bags: 4.00	Additives: None	Depth: 0.00 ft. to 91.00 ft.	

Wellhead Completion: Pitless adapter, 12 inches above grade
--

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: DONALD BAILEY
Type: Sewer line	Employment: Employee
Distance: 10 ft.	
Direction: West	

Abandoned Well Plugged: Yes	Contractor Type: Water Well Drilling Contractor	Reg No: 83-2197
	Business Name: SLUSSER DRLG CO INC	
	Business Address:	

Casing Removed:	Water Well Contractor's Certification
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
	Signature of Registered Contractor
	Date

General Remarks:
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 5518	County: Wayne	Township: Van Buren
<h2 style="margin: 0;">Well ID: 82000002139</h2> <p>Elevation:</p> <p>Latitude: 42.26023</p> <p>Longitude: -83.541311</p> <p>Method of Collection: QQQ - Centroid</p>		Town/Range: 03S 08E	Section: 6
		Well Status: Active	WSSN:
		Source ID/Well No:	
Distance and Direction from Road Intersection: WEST OF 12 ON NORTH SIDE OF MICHIGAN AVE			
Well Owner: MIKE BAKER			
Well Address: 43630 MICHIGAN AVE MI		Owner Address: 43630 MICHIGAN AVE MI	

Drilling Method: Rotary Well Depth: 110.00 ft. Well Type: Replacement Casing Type: PVC plastic Casing Joint: Solvent welded/glued Casing Fitting: None Diameter: 5.00 in. to 90.00 ft. depth Borehole: 8.75 in. to 100.00 ft. depth	Pump Installed: No Pressure Tank Installed: No Pressure Relief Valve Installed: No
Well Use: Household Date Completed: 5/27/1997 Height:	

Static Water Level: 15.00 ft. Below Grade Well Yield Test: Pumping level 100.00 ft. after 1.00 hrs. at 40 GPM Yield Test Method: Air			
	Formation Description	Thickness	Depth to Bottom
	Brown Sand	5.00	5.00
	Brown Clay	10.00	15.00
	Gray Clay	69.00	84.00
	Gravel	13.00	97.00
	Black Shale	13.00	110.00

Screen Installed: Yes Screen Diameter: 5.00 in. Screen Material Type: PVC-slotted Slot Length Set Between: 15.00 10.00 ft. 90.00 ft. and 100.00 ft. Fittings: Unknown	Filter Packed: No Blank:
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Well Grouted: Yes Grouting Material: Bentonite slurry Bags: 9.00 Additives: None Depth: 0.00 ft. to 90.00 ft.	Grouting Method: Unknown
--	---------------------------------

Wellhead Completion: 12 inches above grade	
---	--

Nearest Source of Possible Contamination: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 30%;">Type</th> <th style="width: 30%;">Distance</th> <th style="width: 40%;">Direction</th> </tr> <tr> <td>Septic tank</td> <td style="text-align: center;">60 ft.</td> <td style="text-align: center;">North</td> </tr> </table>	Type	Distance	Direction	Septic tank	60 ft.	North	Drilling Machine Operator Name: DAN CESAL Employment: Employee Pump Installer: CLAYPOOL Contractor Type: Water Well Drilling Contractor Reg No: 78-1607
Type	Distance	Direction					
Septic tank	60 ft.	North					

Abandoned Well Plugged: No Reason Not Plugged: Unknown	Business Name: BIRKMEIER WEL DRLG LTD Business Address:
---	--

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 82737806001

Tax No: 82021010002003	Permit No:	County: Wayne	Township: Van Buren		
Well ID: 82000001336		Town/Range: 03S 08E	Section: 6	Well Status:	WSSN:
		Source ID/Well No:			
Elevation: 706 ft.		Distance and Direction from Road Intersection:			
Latitude: 42.2622493284		Well Owner: DON ADDINGTON			
Longitude: -83.5323625215		Well Address: 50323 MOTT RD. BELLEVILLE, MI 48111		Owner Address: 50323 MOTT RD. BELLEVILLE, MI 48111	
Method of Collection: Interpolation-Map					

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 92.00 ft.	Date Completed: 8/31/1983	Pump Installation Date:	HP:
Well Type: New	Height: 0.00 ft. below grade	Manufacturer: Red Jacket	Pump Type: Submersible
Casing Type: PVC plastic		Model Number:	Pump Capacity: 0 GPM
Casing Joint: Threaded & coupled		Drop Pipe Length: 60.00 ft.	Pump Voltage:
Casing Fitting: None		Drop Pipe Diameter:	Drilling Record ID:
Diameter: 5.00 in. to 92.00 ft. depth		Draw Down Seal Used: No	
Borehole:		Pressure Tank Installed: No	
		Pressure Relief Valve Installed: No	

Static Water Level: 30.00 ft. Below Grade	Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 50.00 ft. after 2.00 hrs. at 9 GPM		Black Topsoil	2.00	2.00
		Sand	5.00	7.00
		Sand Coarse	6.00	13.00
Screen Installed: Yes	Filter Packed: No	Gray Clay	72.00	85.00
Screen Diameter: 4.00 in.	Blank: 0.00 ft. Above	Sand	5.00	90.00
Screen Material Type:	Set Between	Gray Clay	2.00	92.00
Slot	Length			
14.00	4.00 ft.			
	86.00 ft. and 90.00 ft.			
Fittings: Neoprene packer				

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:
Grouting Material	Bags	
Bentonite slurry	0.00	
Additives	Depth	
None	0.00 ft. to 86.00 ft.	
Wellhead Completion: Pitless adapter		

Nearest Source of Possible Contamination:	Drilling Machine Operator Name:
Type	Employment: Unknown
Septic tank	
Distance	Contractor Type: Unknown
75 ft.	Reg No: 81-1586
Direction	Business Name:
South	Business Address:
	Water Well Contractor's Certification
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
	Signature of Registered Contractor
	Date

General Remarks: PERMIT #22340
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No:	County: Wayne			Township: Van Buren		
Well ID: 82000001820		Town/Range: 03S 08E	Section: 7	Well Status: Active	WSSN:	Source ID/Well No:	
		Distance and Direction from Road Intersection: 2320' N OF CENTER LINE TYLER RD, 4'2" N OF N 6" CHAIN LINK FENCE OF E TANK STORAGE, 34' EAST OF NW CORNER POSTS, 1510 E OF CTR LINE					
Elevation:		Well Owner: WAYNE CTY AIRPORT DIV.					
Latitude: 42.24143041		Well Address:					
Longitude: -83.54410837		Owner Address:					
Method of Collection: Interpolation-Map							

Drilling Method: Auger/Bored	Well Use: Unknown	Pump Installed: No
Well Depth: 10.70 ft.	Date Completed: 9/18/1986	Pressure Tank Installed: No
Well Type: Unknown	Height: 0.33 ft. above grade	Pressure Relief Valve Installed: No
Casing Type: Unknown		
Casing Joint: Threaded & coupled		
Casing Fitting: None		
Diameter: 2.00 in. to 7.50 ft. depth		
Borehole: 7.00 in. to 9.00 ft. depth		

Static Water Level: 6.95 ft. Below Grade	Well Yield Test:	Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
			Topsoil	1.00	1.00
			Yellow Gravel & Sand Fine To Coarse Clayey	2.00	3.00
			Yellow Sand Silty Clayey	2.00	5.00
			Tan & Gray Sand Fine Clayey	1.00	6.00
			White Sand Fine Clayey	1.00	7.00
			Black Sand Clayey Fine	1.00	8.00
			Gray Sand Fine Clayey	1.50	9.50
			Gray Sand & Clay Clayey Silty	1.50	11.00
			Gray Sand & Clay Fine Silty	2.00	13.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 2.00 in.	Blank: *u
Screen Material Type: Stainless steel-wire wrapped	
Slot	Length
7.00	3.00 ft.
Set Between	7.90 ft. and 10.70 ft.
Fittings: Unknown	

Well Grouted: Yes	Grouting Method: Unknown		
Grouting Material	Bags	Additives	Depth
Bentonite slurry	0.00	None	7.90 ft. to 10.70 ft.
Wellhead Completion: Unknown			

Nearest Source of Possible Contamination:			Drilling Machine Operator Name: GLENN MILLER
Type	Distance	Direction	Employment: Unknown
Fuel tank	5 ft.	South	
Abandoned Well Plugged: No			Contractor Type: Water Well Drilling Contractor Reg No: 47-0666
Reason Not Plugged:			Business Name: STRLING DRLG CO
			Business Address:

Water Well Contractor's Certification	
Signature of Registered Contractor	Date

General Remarks: SURFACE ELEVATION 718.19', TOP OF CASING 717.86
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No:	County: Wayne			Township: Van Buren		
Well ID: 82000001819		Town/Range: 03S 08E	Section: 7	Well Status: Active	WSSN:	Source ID/Well No:	
		Distance and Direction from Road Intersection: 36' NORTH OF 51/2 EAST OF N.W. CORNER HANGER #1, 2216' NORTH OF CENTER LINE TYLER RD, 1614' EAST OF CENTER LINE MCGREGOR RD.					
		Well Owner: WAYNE COUNTY AIRPORT DIV.					
		Well Address:			Owner Address:		
Elevation:							
Latitude: 42.240216							
Longitude: -83.533899							
Method of Collection: Section - Centroid							

Drilling Method: Auger/Bored	Pump Installed: No
Well Depth: 10.50 ft.	Pressure Tank Installed: No
Well Type: Unknown	Pressure Relief Valve Installed: No
Well Use: Unknown	
Date Completed: 9/16/1986	
Casing Type: Unknown	
Height: 0.12 ft. above grade	
Casing Joint: Threaded & coupled	
Casing Fitting: None	
Diameter: 2.00 in. to 7.40 ft. depth	
Borehole: 7.00 in. to 9.00 ft. depth	

Static Water Level: 6.95 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test:			
Yield Test Method: Unknown	Sand & Gravel	0.20	0.20
	Unidentified Consolidated Fm	0.10	0.30
	Unidentified Consolidated Fm	0.60	0.90
	Tan Clay & Gravel W/Silt	3.10	4.00
	Tan Gravel & Sand W/Clay Silty	1.50	5.50
	Tan Sand & Gravel Fine Silty	0.50	6.00
	Gray Gravel & Sand Fine To Medium Coarse	1.50	7.50
	Tan & Gray Sand Fine To Medium Coarse	2.00	9.50
	Gray Sand Fine To Medium Coarse	0.50	10.00
	Gray Sand & Clay Fine Silty	1.00	11.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 2.00 in.	Blank: *u
Screen Material Type: Stainless steel-wire wrapped	
Slot	Length
10.00	3.00 ft.
Set Between	7.40 ft. and 10.40 ft.
Fittings: Unknown	

Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags
Bentonite slurry	0.00
Additives	Depth
None	5.00 ft. to 7.00 ft.

Wellhead Completion: Unknown	Drilling Machine Operator Name: GLENN MILLER
	Employment: Unknown
Nearest Source of Possible Contamination:	Contractor Type: Water Well Drilling Contractor
Type	Reg No: 47-0666
Fuel tank	Business Name: STERLING DRLG CO
Distance	Business Address:
160 ft.	
Direction	
Northwest	

Abandoned Well Plugged: No	Water Well Contractor's Certification
Reason Not Plugged:	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.

General Remarks: SURFACE ELEVATION 717.87', TOP OF CASING 717.75'	Signature of Registered Contractor
Other Remarks:	Date

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

93
05968
PERMIT NUMBER

1 LOCATION OF WELL		
County <i>WASHTEWAR</i>	Township Name <i>YPSILANTI</i>	Fraction <i>1/4 1/4 1/4</i> Section Number <i>1</i> Town Number <i>3</i> Range Number <i>7 E/W</i>
Distance And Direction From Road Intersection <i>11 OF A MILE E OF RIDGE AT 51074 MOTT RD. 2956</i>		
Street Address & City Location <i>51074 MOTT RD. 2956</i>		
Locate with "X" in Section Below		Sketch Map:
2 FORMATION DESCRIPTION		
FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>SAND & GRAVEL</i>	<i>11</i>	<i>11</i>
<i>GRAY CLAY</i>	<i>48</i>	<i>59</i>
<i>WATER SAND</i>	<i>9</i>	<i>68</i>
3 OWNER OF WELL:		
Address <i>LORINE MCCURRY 51074 MOTT RD. CANTON MI 48188</i>		
Address Same As Well Location? <input type="checkbox"/> Yes <input type="checkbox"/> No		
4 WELL DEPTH: Date Completed <i>7 7 94</i>		
68 FT. <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement Well		
5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted		
6 USE:		
<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public		
7 CASING:		
Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above/Below Surface <i>1</i> ft. Weight _____ lbs./ft.		
5 in. to _____ ft. depth _____ in. to _____ ft. depth Grouped Drill Hole Diameter <i>8</i> in. to <i>ALL</i> ft. depth _____ in. to _____ ft. depth		
Drive Shoe <input type="checkbox"/> Yes <input type="checkbox"/> No		
8 SCREEN: <input type="checkbox"/> Not Installed		
Type <i>SS SCREEN</i> Diameter <i>4</i>		
Slot/Gauze <i>50</i> Length <i>4</i>		
Set between <i>64</i> ft. and <i>68</i> ft.		
FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen <i>1</i> ft. Other _____		
9 STATIC WATER LEVEL:		
<i>11</i> ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface		
<i>11</i> ft. after <i>2</i> hrs. pumping at <i>35</i> G.P.M.		
<i>11</i> ft. after <i>2</i> hrs. pumping at <i>35</i> G.P.M.		
11 WELL HEAD COMPLETION:		
<input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit		
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>5</i> to <i>60</i> ft.		
<input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____		
13 Nearest source of possible contamination		
Type <i>SEPTIC</i> Distance <i>125</i> ft. Direction <i>S</i>		
Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No		
14 PUMP: <input type="checkbox"/> Not installed <input type="checkbox"/> Pump Installation Only		
Manufacturer's name <i>RED SACKET</i>		
Model number <i>9 BC</i> HP <i>1/2</i> Volts <i>220</i>		
Length of Drop Pipe <i>40</i> ft. capacity <i>12</i> G.P.M.		
TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet		
PRESSURE TANK: Manufacturer's name <i>WELL X TROL</i>		
Model number <i>203</i> Capacity <i>10</i> Gallons		
15. Remarks, elevation, source of data, etc.		
RECEIVED AUG 2 1994 ENVIRONMENTAL HEALTH		
16. WATER WELL CONTRACTOR'S CERTIFICATION:		
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<i>Ann Arbor Well Drilling, 1890</i>		
REGISTERED BUSINESS NAME REGISTRATION NO.		
Address <i>2015 Weymouth</i>		
Signed <i>Ann Arbor Well Drilling</i> Date <i>7 27 94</i>		
AUTHORIZED REPRESENTATIVE		

RECEIVED
 DEPT. OF PUBLIC HEALTH
 ENVIRONMENTAL AND OCCUPATIONAL HEALTH

RDB
 8-3-94

RECEIVED

AUG 2 1994

ENVIRONMENTAL HEALTH

USE A 2ND SHEET IF NEEDED

Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.



WATER WELL RECORD

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

ACT 294 PA 1965

81-DEC 16 1981

1 LOCATION OF WELL	County Washtenaw	Township Name Ypsilanti	Fraction ¼ SE ¼ NW ¼
	Section Number 1	Town Number 3xxxS.	Range Number 7 E/W.

Distance And Direction from Road Intersections
 360' N. of C/L Holmes Rd.
 65' W. of C/L Edge Road

Street address & City of Well Location
 Locate with "X" in section below

Sketch Map:

→ X 65' ←
 ↑ 360 ↓
 Holmes Rd. Ridge Rd.

3 OWNER OF WELL:
 Ypsilanti Community Utility Authority
 Address
 2770 Clark Road
 Ypsilanti, Mich. 48197

4 WELL DEPTH: (completed) **Date of Completion**
 10 ft. 23 Oct. 81

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well **W.L. Monitoring**

7 CASING: Threaded Welded Diam. _____
 Height: Above/Below Surface **11.0** ft.
 _____ in. to _____ ft. Depth Weight _____ lbs./ft.
 _____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown Silty, Sandy, Clay Topsoil	6"	6"
Yellowish Tan trace of Gravel		
Silty, Sandy, Clay	2'	2½'
Variegated Lt. Gray & Yellow Gravelly, Sandy, Silty, Clay	1'	3½'
Tannish Gray Clayey, Very Fine & Fine - Med. Sand	1½'	5'
Gray trace of Clay Very Fine & Fine Sand	1'	6'
Gray Sandy, Silty, Clay	3'	9'
Gray Clayey, Very Fine Sand	1'	10'+
ADDED INFO. BY DRILLER, IISW NO. _____		
CORRECTED BY _____		
ADDITION BY _____		
USE A 2ND SHEET IF NEEDED		

8 SCREEN:
 Type: **Johnson** Dia.: **1½"**
 Slot/Grate **#7** Length **36"**
 Set between **8** ft. and **10** ft.
 Fittings: **threaded**

9 STATIC WATER LEVEL
3½ ft. below land surface

10 PUMPING LEVEL below land surface
 _____ ft. after _____ hrs. pumping _____ g.p.m.
Slug test 7½ GPM does not fill to top of 2" pipe after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 threaded cap Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite
 Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
 _____ feet Direction _____ Type _____
 Well disinfected upon completion Yes No

15 PUMP: **N/A** Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
 Glenn Miller, Consulting Geologist

17 WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Sterling Drilling Co. **0666**
REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **6236 W. Grand River, Brighton, MI 48116**
 Signed Date **30 Oct. 81**
AUTHORIZED REPRESENTATIVE

DEC 16 1981



WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

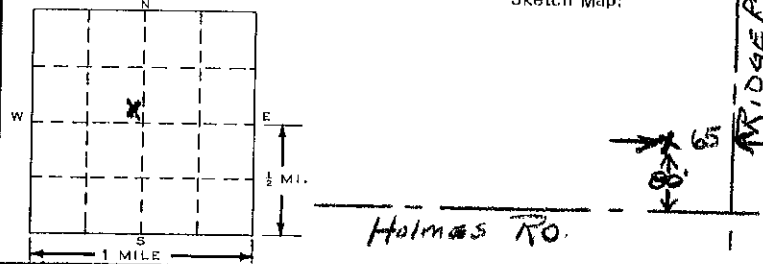
1 LOCATION OF WELL		81-2									
County	Township Name	Fraction	Section Number	Town Number	Range Number						
Washtenaw	Ypsilanti	1/4 SE 1/4 NW 1/4	1	3 30 /S.	7 E/W						

Distance And Direction from Road Intersections
 80' N. of C/L Holmes Rd.
 65' W. of C/L Ridge Rd.

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:
 Ypsilanti Community Utility Authority
 Address
 2770 Clark Road
 Ypsilanti, Mich. 48197

4 WELL DEPTH: (completed) Date of Completion
 76 ft.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well W.L. Monitoring

7 CASING: Threaded Welded
 Diam. _____ Height: Above ~~GROUND~~ Surface 9" ft.
 _____ in. to _____ ft. Depth Weight _____ lbs./ft.
 _____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Dark Brown Silty, Sand, Clay topsoil	6"	6"
Variegated Gray & Yellow Lt. Tan Silty, Sandy, Clay	1 1/2'	2'
Variegated gray & Lt. Tan Silty, Sandy, Clay	1/2'	2 1/2'
Gray Sandy, Silty, Clay	1'	3 1/2'
Gray Silty, Sandy, Clay	1 1/2'	5'
Gray Sand & Gravel - Clean	3 1/2'	8'
Gray Sandy, Silty, Clay	1 1/2'	10'
ADDED INFO. BY DRILLER, ITEM NO.		
CORRECTED BY		
USE A 2ND SECTION IF NEEDED		

8 SCREEN:
 Type: Johnson Dia.: 1 1/2"
 Slot/Grit #7 Length 36"
 Set between 4 ft. and 7 ft.
 Fittings: threaded

9 STATIC WATER LEVEL
 3.5 ft. below land surface

10 PUMPING LEVEL below land surface
 _____ ft. after _____ hrs. pumping _____ g.p.m.
 Slug test 1 pint/min. fills to top of _____ ft. after _____ hrs. pumping 2" Pipe g.p.m.

11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 threaded cap Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite
 Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
 _____ feet Direction _____ Type _____
 Well disinfected upon completion Yes No

15 PUMP: N/A Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
 Glenn Miller, Consulting Geologist

17 WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Sterling Drilling Co. 0666
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 6236 W. Grand River, Brighton, MI 48116
 Signed Date 30 Oct. 01
 AUTHORIZED REPRESENTATIVE

DEWATERING WELL RECORD
Act 218, P.A. 1972

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL B 23 1001

County Washtenaw	Township Name Ypsilanti	Fraction 1/4 1/4 1/4	Section Number 1	Town Number 3 *S	Range Number 7 E/X
----------------------------	-----------------------------------	-------------------------	----------------------------	----------------------------	------------------------------

STARTING POINT:
Distance and Direction from Nearest Road Intersection
1/2 Mile South of Michigan Avenue on Rawsonville Road

LOCATION:
From Eng. Plan Sheet No. _____
Other: _____

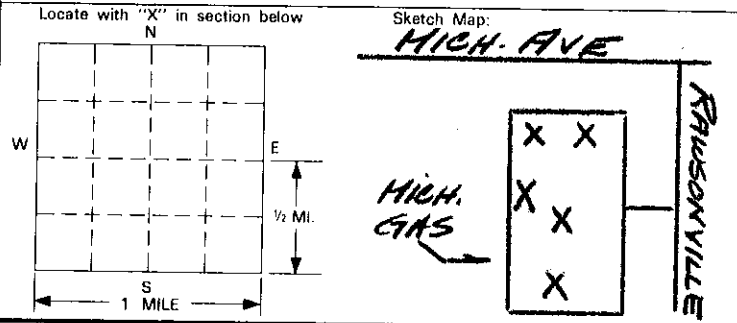
Engineering Firm: _____

PROJECT OWNER: **Michigan Consolidated Gas**

Address: **Ypsilanti, Michigan**

Project Name: _____

Type of Sewer Pumping Station
Project Foundations Other: _____



2 Single Well
 Several Wells: Total Number of Wells **5** Well Depth — Range **18** ft. _____ ft. Date of Drilling **6** Month **80** Year

Total Distance Covered _____ ft, N/S/E/W
Includes Wells From Station _____ to Station _____

4 Cable Tool Rotary Bored (Auger)
 Jetted Driven

3 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Sandy Gravel	4'	4'
Wet Gravel	2'	6'
Sand	4'	10'
Blue Clay	8'	18'

(USE REMARKS SECTION IF NEEDED)

5 CONSTRUCTION DETAILS: Drive Points Rock Well
 Natural Pack Gravel Pack

Drill Hole Size: Diam **36"** in Depth **18'** ft
Casing: Diam **26"** in Depth **17-18** ft
Gravel Pack: From **18** ft to **0** ft
Pack Material: **Pea Stone RMS**
Screened From **12** ft to **20** ft

8 ABANDONMENT PROCEDURES:

Wells under 40 feet
 Parent Material: from _____ ft to _____ ft
 Finer Textured Soils: from _____ ft to _____ ft
 Other: _____

Wells over 40 feet:
Bentonite-Fine Textured Soil Mixture from _____ ft to _____ ft
Other: _____

Special Cases: Gas Flowing Well
 Bedrock _____

Grout
 Bentonite Grout Neat Cement Grout
from _____ ft to _____ ft

6 STATIC WATER LEVEL **4** ft ~~above~~ below land surface

7 DEWATERED LEVEL _____ ft
Pump Operated **24** hr/day,
Pump Capacity _____ gpm
Discharge Point **Pond 200' West**
Water filtered with Straw
(river, pond, lake, storm sewer, etc.)

9 ABANDONMENT CERTIFICATION
This well has been abandoned under my jurisdiction and this report is true to the best of my knowledge and belief.

10 REMARKS, Water Quality, Gas, etc.

Low Yield

ADDED INFO BY DRILLER, 11MM N/A
*CORRECTED BY
**ADDITION BY
ELEVATION
DEPTH TO ROCK

UNION CONSTRUCTION CO. **D 1315**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER _____
Address **505 TERRITORIAL ROAD, MANCHESTER, MICH**

Signed James F. F. F. **6/16/80**
AUTHORIZED REPRESENTATIVE DATE

11 DRILLING CONTRACTOR'S CERTIFICATION
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

UNION CONSTRUCTION CO. **D 1315**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER _____
Address **505 TERRITORIAL ROAD, MANCHESTER, MICH.**

Signed James Wilde **6/13/80**
AUTHORIZED REPRESENTATIVE DATE

DEC 16 1981

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL		81-3	
County Washtenaw	Township Name Ypsilanti	Fraction ¼ SE ¼ NW ¼	Section Number 1
		Town Number 3 WKS.	Range Number 7 E/W.

Distance And Direction from Road Intersections

80' N. of C/L Holmes Rd.
395' W. of C/L Ridge Rd.

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:

3 OWNER OF WELL:

Ypsilanti Community Utility Authority
Address
2770 Clark Rd.
Ypsilanti, Mich. 48197

4 WELL DEPTH: (completed) Date of Completion

15 ft.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well **W.L. Monitoring**

7 CASING: Threaded Welded Height: Above/~~Below~~ Surface **11"** ft.
_____ in. to _____ ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown Sand Topsoil	2"	2"
Tannish Yellow Very Fine & Fine Sand	2'10"	3'
Yellow-occasionally w/1/2" x 3" brown topsoil lens Clayey, Silty, Fine & Very Fine Sand	2'	5'
Whitish Tan trace fine gravel Med.& Fine & Very Fine Sand	2'	7'
Lt. Tan Gravelly Sand	1'	8'
Gray Gravelly, Sand	4'	12'
Gray Med.-Fine & Very Fine Sand	3'	15'+

8 SCREEN:

Type: **Johnson** Dia.: **1 1/4"**
Slot ~~Size~~ **#7** Length **36"**
Set between **12** ft. and **15** ft.
Fittings: **threaded**

9 STATIC WATER LEVEL

9 1/2 ft. below land surface

10 PUMPING LEVEL below land surface

_____ ft. after _____ hrs. pumping _____ a.p.m.

Slug test 12 1/2 GPM fails to fill to top of 2" Pipe

11 WATER QUALITY in Parts Per Million:

Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination

_____ feet _____ Direction _____ Type
Well disinfected upon completion Yes No

15 PUMP: **N/A** Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

Glenn Miller, Consulting Geologist

ADDED INFO. BY DRILLER, ITEM NO. _____
CORRECTED BY _____

17 WATER WELL CONTRACTOR'S CERTIFICATION:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Sterling Drilling Co. **0666**
REGISTERED BUSINESS NAME REGISTRATION NO.

Address **6236 W. Grand River, Brighton, MI 48116**

Signed _____ Date **Oct. 30, 1981**
AUTHORIZED REPRESENTATIVE

DEWATERING WELL RECORD
Act 218, P.A. 1972

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

SEP 21 1981

1 LOCATION OF WELL

County: Washtenaw Township Name: Ypsilanti Fraction: 1/4 1/4 1/4 Section Number: 1 Town Number: 3 Range Number: 7

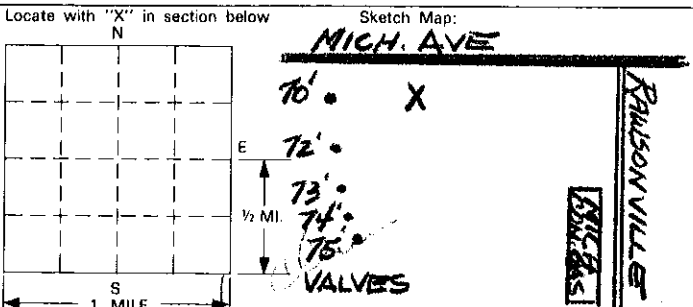
STARTING POINT:
Distance and Direction from Nearest Road Intersection
800' South of Michigan Ave.
250' West of Rawsonville Road

LOCATION:
From Eng. Plan Sheet No. _____
Other: _____

Engineering Firm: _____

PROJECT OWNER: Michigan Consolidated Gas
Address: _____
Project Name: _____

Type of Sewer Pumping Station
Project Foundations Other: _____



2 Single Well Several Wells: Total Number of Wells _____

Well Depth — Range 20 ft. _____ ft. Date of Drilling 7/22 Month 1981 Year

Total Distance Covered _____ ft, N/S/E/W
Includes Wells From Station _____ to Station _____

4 Cable Tool Rotary Bored (Auger)
 Jetted Driven

3 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Sandy Clay	6	6
Silty Sand	5	11
Blue Clay	9	20
(USE REMARKS SECTION IF NEEDED)		

5 CONSTRUCTION DETAILS: Drive Points Rock Well
 Natural Pack Gravel Pack

Drill Hole Size: Diam 36 in Depth _____ ft
Casing: Diam 24 in Depth _____ ft
Gravel Pack: From 20 ft to 0 ft
Pack Material: Pea Stone Mason Sand
Screened From 14 ft to 20 ft

8 ABANDONMENT PROCEDURES:

Wells under 40 feet

Parent Material: from _____ ft to _____ ft
 Finer Textured Soils: from _____ ft to _____ ft
 Other: _____

Wells over 40 feet:
Bentonite-Fine Textured Soil Mixture from _____ ft to _____ ft
Other: _____

Special Cases: Gas Flowing Well
 Bedrock _____

Grout
 Bentonite Grout Neat Cement Grout
from _____ ft to _____ ft

6 STATIC WATER LEVEL _____ ft above/below land surface

7 DEWATERED LEVEL _____ ft
Pump Operated 24 hr/day, 385 gpm
Pump Capacity _____ gpm
Discharge Point Creek 100' West
(river, pond, lake, storm sewer, etc.)

9 ABANDONMENT CERTIFICATION
This well has been abandoned under my jurisdiction and this report is true to the best of my knowledge and belief.

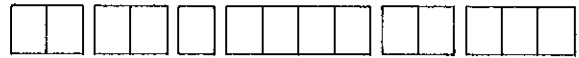
10 REMARKS, Water Quality, Gas, etc.

11 DRILLING CONTRACTOR'S CERTIFICATION
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

UNION CONSTRUCTION CO. D 1315
REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER: _____
Address: 505 TERRITORIAL ROAD
MANCHESTER, MICHIGAN 48158
Signed: [Signature] 7/27/81
AUTHORIZED REPRESENTATIVE DATE

UNION CONSTRUCTION CO. D 1315
REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER: _____
Address: 505 TERRITORIAL ROAD
MANCHESTER, MICHIGAN 48158
Signed: [Signature] 7/22/81
AUTHORIZED REPRESENTATIVE DATE

DEC 16 1981



WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL 81-4		County	Township Name	Fraction	Section Number	Town Number	Range Number
Wachtow		Ypsilanti	1/4 Sec 14 NW 1/4	1	3 N/S.	7 E/W.	

Distance And Direction from Road Intersections
 360' N. of C/L Holmes Rd.
 395' W. of C/L Ridge Rd.
 Street address & City of Well Location

Locate with "X" in section below

Sketch Map:

3 OWNER OF WELL:
 Ypsilanti Community Utility Authority
 Address
 2770 Clark Rd.
 Ypsilanti, Mich. 48197

4 WELL DEPTH: (completed) Date of Completion
 19 ft.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well **W.L. Monitoring**

7 CASING: Threaded Welded
 Height: Above/Below Surface 3/33 ft.
 Weight _____ lbs./ft.
 Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown Sand Topsoil Typical Fill	2"	2"
Variegated Yellow & Tan Clayey, Silty, Gravelly Sand	1' 10"	2'
Yellow Silty, Clayey, Very Fine & Fine Sand	1'	3'
Yellow Clayey, Silty, Very Fine Sand	3'	6'
Black Sludge	2 1/2'	8 1/2'
Greenish Gray Silty, Clayey, Very Fine Sand	1 1/2'	10'
Gray Very Fine & Fine Sand	3'	13'
Variegated Greenish Gray & Gray Clayey, Very Fine Sand, Silt	5'	18'
Gray Sandy, Silty, Clay	14'	32'
Gray Sandy, Silty, Clay	18'	50'
ADDED INFO. BY DRILLER, ITEM NO. _____		
CORRECTED BY _____		

8 SCREEN:
 Type: Johnson Dia.: 1 1/2"
 Slot/Screen: #7 Length 36"
 Set between 16 ft. and 19 ft.
 Fittings: threaded

9 STATIC WATER LEVEL
12 1/2' ft. below land surface

10 PUMPING LEVEL below land surface
 _____ ft. after _____ hrs. pumping _____ g.p.m.
 Slug test 7 1/2 GPM Fills top of Pipe
 _____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 threaded cap Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
 Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
 _____ feet Direction _____ Type _____
 Well disinfected upon completion Yes No

15 PUMP: N/A Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
 Glenn Miller, Consulting Geologist

17 WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Sterling Drilling Co. 0666
REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 6236 W. Grand River, Brighton, MI
 Signed _____ Date 30 Oct. 81
AUTHORIZED REPRESENTATIVE

MAY 26 1976

WATER WELL RECORD

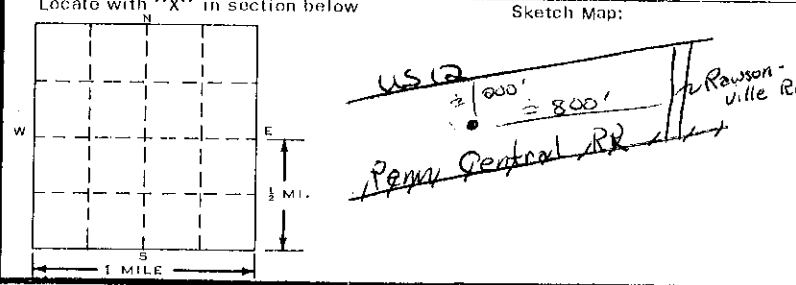
ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County: Washtenaw Township Name: Approx. 1/2 mi. S. of Rawsonville Fraction: 1/4 NW 1/4 Sec 1 Section Number: 1 Town Number: 3 Range Number: 7

Distance And Direction from Road Intersections: Rawsonville Road and Michigan Approx 2950 Michigan Ave



3 OWNER OF WELL: Michigan Consolidated Gas Co. Address: One Woodward Ave. Detroit 48226 Att: Mr. D. Beaver

4 WELL DEPTH: (completed) Date of Completion: 80 ft. 10-7-75

5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry Irrigation Air Conditioning Commercial Test Well

7 CASING: Threaded Welded Height: Above Surface: 8" Drive Shoe? Yes No

Table with 3 columns: FORMATION, THICKNESS OF STRATUM, DEPTH TO BOTTOM OF STRATUM. Rows include Sandy Clay, Dry Sand, Gravily Clay, Medium Coarse Gravel.

8 SCREEN: Johnson SS Dia.: 6 inch Slot Length: 5 Ft. Set between 74-8" ft. and 80" ft. Fittings: 5" X 18" nipple

9 STATIC WATER LEVEL: 12 ft. below land surface

10 PUMPING LEVEL below land surface: 18 ft. after 1 1/2 hrs. pumping 60 g.p.m.

11 WATER QUALITY in Parts Per Million: Iron (Fe) 1.1 Chlorides (Cl) 68 Hardness 272

12 WELL HEAD COMPLETION: Pitless Adapter 12" Above Grade

13 Well Grouted? Neat Cement Bentonite Depth: From ft. to ft.

14 Nearest Source of possible contamination: unknown Type Well disinfected upon completion

15 PUMP: Red Jacket Manufacturer's Name Model Number 500T4-5LB HP 5 Volts 230 Length of Drop Pipe 63 ft. capacity 85 G.P.M.

16 Remarks, elevation, source of data, etc. Test Well

17 WATER WELL CONTRACTOR'S CERTIFICATION: O.O. Corseut Inc. 0025 15101 W. 11 Mile Road, Oak Park 48237 Signed: [Signature] Date Nov. 6, 1975

Washburn Co.

Ypsilanti

357E7

YPSILANTI STATE HOSPITAL

DESCRIPTION:	Thickness (feet)	Depth (feet)
Drift:		
Clay, light brown	15	15
Clay & sand; a little fine gravel	30	45
Sand & fine gravel	25	70
Sand, very fine silty	65	135
Clay with streaks of gravel	150	285
	TOTAL DEPTH	285

Drift

Washburn 7191 357E

Remundar Refer to

600' South of office
 Jayne Miller

not given

not given

DESCRIPTION OF STRATA

1	Clay shale	13	13
2	Clay shale	24	37
3	Weakly bedded	2	46
4	Clay shale	4	50
5	Hard clay shale	4	54
6	Clay shale	22	80
7	Clay shale	4	84
8	Clay shale	4	88
9	Clay shale	6	94
10	Clay shale	2	96
11	Clay shale	2	98
12	Clay shale	2	100
13	Clay shale	2	102
14	Clay shale	2	104
15	Clay shale	2	106
16	Clay shale	6	110
17	Clay shale	3	113
18	Clay shale	8	121
19	Clay shale		
20	Clay shale		

Observed Water Level in Well

Date	Testimony FROM	Pumping Conditions	Observed Water Level
		Steady Head	27
		(?)	31
		(?)	25
		(?)	33
		(?)	33
		112	17
		20	21

Shearcraft, Drury and Namee, Eng. Notes by

Date

Y.P.S. 1
 Top of Hill near of Power House
 Jayne Washburn
 Permit to Pump Co
 W. of River
 B-5-81
 not given

Depth	Remarks	Temp	Sp. Gr.
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Dry Case Ground
 lay with some rock
 sand & gravel
 bottom
 dry

13 13
 42 54
 N 70
 27 70

Observed Water Level in Well

Date	Stationary Height from bench	Pumping conditions	Water level in well
	10.0	Auto	3.2

Yps?

Y-124

770

1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

sand
gravel

6.3
9

gravel - very coarse

glacial boulders
to be seen gravel and
in heavy clay

Observed Water Level in Well

Date	Res. Line Name	Depth to bottom	Water Level

Pittsford

Sec 1 35/6E

Wells

3rd. Lane, Long Point, N.E. of V. 1st. & 2nd. Sts. Pittsford

Shaw

4. 1917

221.9

7. 1917

Section of	Character of Strata	Depth in Feet	Depth in Feet
1			
2			
3		13	12
4	Blue clay	18	30
5	Some water	25	34
6	Blue clay	30	40
7	with sand	45	50
8	Black clay	52	60
9	Sand with water	60	70
10	Black clay	70	80
11	Sand	80	90
12	Blue clay	90	100
13	Sand with clay	100	110
14	Blue clay	110	120
15	Clear sand	120	130
16	water came to		
17	40 ft. of water		
18			
19			

Observed Water Level in Well

Date	Testimony from	Pumping Station	Depth in Feet
	Shaw	8. 1917	70

Shoecraft, Drury and McNamee, Eng. Notes by

Date

(Circular stamp)



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800
Fax (734) 222-3930
<http://eWashtenaw.org>

TOS

TOS2007-00151

REC'D DATE:

4/10/07

EXPIRE DATE:

4/11/2008

Time Of Sale Permit #: TOS2007-00151

Parcel Number: K -11-01-100-011

Site Address: 1422 RIDGE

Township: Ypsilanti Twp

Owner

ELLEN B PEDERSEN
1422 RIDGE
YPSILANTI, MI 48198
PRI 734-223-6885

Applicant

ELLEN PEDERSEN
1422 RIDGE RD
YPSILANTI, MI 48198
PH1 734-223-6885

TOS Inspector

JAMES FROST
315 KOCH ST
ANN ARBOR, MI 48103
PRI (734) 761-9325
FAX (734) 761-7324
EML jfrossthe@yahoo.com

<u>ACTION DESCRIPTION</u>	<u>DATE1</u>	<u>DATE2</u>	<u>DATE3</u>	<u>DISP</u>	<u>DONE BY</u>
TOS - Both			4/10/07	DONE	DLN
TOS Review			4/11/07		KMG
Authorization Sent			4/11/07	DONE	KMG

P07-00371



REPORT OF RESIDENTIAL ONSITE WATER SUPPLY AND SEWAGE DISPOSAL INSPECTION

THIS REPORT IS SUBMITTED AS REQUIRED BY THE WASHTENAW COUNTY REGULATION FOR THE INSPECTION OF RESIDENTIAL ONSITE WATER AND SEWAGE DISPOSAL SYSTEMS AT TIME OF PROPERTY TRANSFER REGULATION

This form is to only be completed by inspectors certified by the Washtenaw County Department of Planning & Environment. (Rev. 04/15/2005)

Date Inspected: 4-4-2007

Owner Name/Property Address: MS. ELLEN PEDERSEN
1422 RIDGE ROAD
YPSILANTI, MI 48198

Township: YPSILANTI Tax I.D. #: K-11-01-100-011

Applicant Name (If other than owner): SAME

Mailing Address (If other than above): SAME

Phone #: 734-223-6885

Fax #: _____

TRANSACTION	#397
CK/CC #	506
TOS-INSPECT	\$105.00
TOTAL	\$105.00
CRED CARD	\$105.00
CLERKS	NO.010804
04/09/2007 MON 04:46PM	

Systems Inspected:

Onsite Water Supply (Reason not inspected _____)
 Onsite Sewage Disposal (Reason not inspected _____)

Age of Home: 6 years
Number of Bedrooms: 3
Number of Bathrooms: 2

Current Number of Residents: 5
or
Time of Vacancy: _____ months

I, JAMES FROST, being a Washtenaw County Certified Inspector, inspected the onsite water supply and/or onsite sewage disposal system indicated above. I certify that this inspection was done within the guidelines established by Washtenaw County and was completed in a thorough and complete manner. Further, I certify that this report includes all knowledge that I have concerning the operation and function of said system(s).

James Frost
(Signature)

4, 4, 2007
(Date)

Certification Number: 37

KEYED
APR 10 2007
DAWN REISEBAUER

Office Use Only:
Case #: TOS 20 07-00151

WATER SUPPLY SYSTEM

Age of Well: 6 Permit #: WEL2001-05199 Approval Date: 10-29-01

Well Depth: 97 ft. Verified from: Well Log County Records
 Driller Owner

Pump Type: Submersible
 Deep Well Jet *
 Shallow Well Jet*
 Other(_____) *
*Protected Suction Line y/n

Water Treatment in Use	
<input checked="" type="checkbox"/> Softener	<input checked="" type="checkbox"/> Sediment Filter
<input type="checkbox"/> Iron Removal	<input type="checkbox"/> Reverse Osmosis
<input type="checkbox"/> Gas Removal	<input type="checkbox"/> Chemical
<input type="checkbox"/> Ozonation	<input type="checkbox"/> Other

Cycling: Long (>90 sec.)
 Adequate (30-90 sec.)

Yield (approx.): 10+ gpm

Short (<30 sec.) 15 SEC.

Casing Diameter: 5 inches

Termination: Above grade (14 inches above ground)
 Basement offset (____ inches above floor)
 Drained Pit (____ inches above floor)
 Undrained Pit
 Dug Well
 Not Found/Buried

Well cap: structurally sound
 cap loose
 cap missing
 cap loose w/ insects
 cap/conduit/casing damaged

Venting: not vented
 screened vent
 unscreened vent
 unscreened vent w/ insects

Location: on property
 off property

If shared well: use agreement N/A
 no use agreement

Improperly abandoned well(s): N y/n

Auxiliary wells: 0 number

Use: irrigation
 pond
 livestock
 heating/cooling
 not used
 other

Isolation Distances (if not met) OK

Drainfield (<100ft) _____ ft
Septic Tank (<50 ft) _____ ft
Grinder pump (<50ft) _____ ft
Sewer Line (<50ft) _____ ft
HazMat Storage (<100ft) _____ ft
Fuel Oil Tank (<100ft) _____ ft (Tank buried y/n In basement y/n)

SEWAGE DISPOSAL SYSTEM

AND WOULD
OF BEEN
THERE IN
2001

Permit #: SEW2001-05179 Approval Date: 10-30-01 Location: ON on/off property

Municipal/Sanitary Sewer Available: ? y/n → MUNICIPAL SEWER & WATER ARE ON RIDGE ROAD, BUT HOME IS ~ 570' FROM THE ROAD.

Not Connected to System OK

- toilet(s)
- sink(s)
- shower(s)
- tub(s)
- laundry
- other

Connected to System

- footing drains
- water treatment discharge(s) VIA LAUNDRY DRAIN
- dehumidifier(s)
- storm water drain(s)
- other

TANK(S) SPECIFICATIONS

Number: 1 Total capacity: 1500 gal Verified by: county records
 pumping receipts

Last pumped: < 1 (ON 3/20/07) years ago

Isolation Distance (if not met): OK Accessible for pumping: y/n
 surface water (<25 ft) y/n
 nearest well (<50ft) y/n Tank access within 18" of grade: y/n

Complete septic tank inspection or attach Septic Tank Maintenance Report if septic tanks have not been approved:

Tanks structurally sound: y/n Effluent above outlet: y/n

Outlet type: vented elbow tee baffle effluent filter none

Effluent filter: N y/n/unknown Pre-Treatment Unit: N y/n
 List type: _____
 (i.e. sand filter, scat, advantex, etc.)

Pump-type system: N y/n
 Alarm test: N OK/silent/on/other N/A
 (Turn circuit on if necessary) (Note unusual conditions i.e. circuit off, etc.)

DISPOSAL AREA

Number: none found
 one
 multiple/one connected
 multiple connected
 multiple w/diverter *

*Note: If multiple fields connected with diverter valve, record condition of field in use on next page and use site plan to show size and condition of other field(s).

Type: Bed-conventional } Size of bed: 1400 sq. ft. (28' x 50')
 Bed-deep excavation }
 Bed-raised } Verified by: County permit
 Modified fill } Field measurement

Trenches Number of Trenches: _____ Trench width: _____ ft.
Trench length: _____ ft.
 Dry well
 Other

DRAINFIELD CONDITION (Show location & condition of each test hole on site plan)

Sewage exposed (including back-up, direct discharge, etc.): N y/n

Depth of cover: 16 to 20 inches
(minimum) (maximum)

Encroachment on field: Y y/n
(Show type and location on site plan)

Saturation of field:

Sludge/Biomat in field:

none
 <50% below tile holes ~30%
 >50% below tile holes
 <50% above tile holes
 >50% above tile holes

none
 <50% below tile holes ~15%
 >50% below tile holes
 <50% above tile holes
 >50% above tile holes

GARAGE ON
~10% OF
DRAIN FIELD,
DRIVEWAY
ON ANOTHER
~10%.

Tile: plastic
 concrete/clay no blockage
 concrete/clay <50% blockage
 concrete/clay >50% blockage

Isolation Distances (if not met): OK
nearest well (<100ft) _____
surface water (<50ft) _____

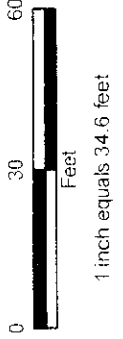
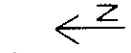
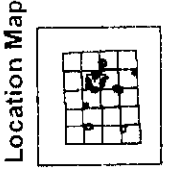
Sandy soil under field: Y y/n
Surface water diverted from system: Y y/n
Woody vegetation on/within 5 ft of system: N y/n
Automatic sprinklers on/near system: N y/n

Based on data presented in this inspection report, the Washtenaw County Department of Planning and Environment office will issue a letter stating whether the water supply and sewage system meets minimum standards for sale of the property. The following observations or recommendations for extending the life of these systems are in addition to any requirements addressed by the Department of Planning and Environment office:

Inspector Observations/Comments/Recommendations:

X SEE ATTACHED INSPECTION SUMMARY PAGE.

ATTACH REQUIRED WATER SAMPLES (COLIFORM BACTERIA, NITRATES, AND ARSENIC) AND SITE PLAN TO REPORT!



THIS MAP REPRESENTS PARCELS AT THE TIME OF PRINTING. THE OFFICIAL PARCEL TAX MAPS ARE MAINTAINED SOLELY BY THE WASHTEENAW COUNTY EQUALIZATION DEPARTMENT AND CAN BE OBTAINED BY CONTACTING THAT OFFICE AT 734-222-6662.

The information contained in this document is provided as a service to the public and is not intended to be used as a legal document. The information is provided with the understanding that the user assumes all liability for any use of the information. ANY INFORMATION CONTAINED HEREIN IS PROVIDED AS IS. THE COUNTY OF WASHTENAW, MICHIGAN, DOES NOT WARRANT THE ACCURACY OF THIS INFORMATION. THE COUNTY OF WASHTENAW, MICHIGAN, IS NOT RESPONSIBLE FOR ANY DAMAGES, INCLUDING CONSEQUENTIAL DAMAGES, ARISING FROM THE USE OF THIS INFORMATION.

1422 Ridge Road
Well & Septic System
Location

Date Printed: 03/19/2007

CHEMICAL ANALYSIS OF WATER

Please return sample by 3:00 p.m. Monday thru Friday to:
 Washtenaw County Environmental Health
 705 N. Zeeb Rd., P.O. Box 8645
 Ann Arbor, MI 48107-8645
 (734) 222-3800

RESIDENTIAL
 COMMERCIAL

T.O.S.

WSSN # N/A Well Permit # N/A
 Date Collected: 4-04-07 Time Collected: 5:30 PM
 Collected by: JIM FROST / HOME ENV. SERVICES
N 1422 RIDGE ROAD YPSILANTI

Sampling Point: _____
 (E.g. kitchen faucet, outside faucet, hand pump, pressure tank)

Well Data Age: 6 Diameter 5" Depth 97'
 Facility Name: HOME SALE
 Reason for Analysis: HOME SALE

Report results to:
 Name: JIM FROST Phone No. 734-761-9324
 Address: 815 KOCH ST
ANN ARBOR MI 48103
734-761-7324 Fax _____ Zip Code _____
 E-mail address _____

Next Day Service**: YES NO ISA 2030026
 **Next day service is provided at two times the cost of regular turnaround.

CHEMICAL INFORMATION:

- NITRATES
- ARSENIC
- HARDNESS
- LEAD
- PARTIAL CHEMICAL SCAN
- OTHER _____

*RESULTS
20.10
0.001

- NITRITES
- VOC
- CHLORINE **RECEIVED**
- CONDUCTIVITY
- IRON **APR 09 2007**

*RESULTS

Washtenaw County
 Planning & Environment

All chemical results are in milligrams per liter (mg/l) unless otherwise noted.

Analyst: PC 04/05/07
DM 04/06/07

*Check chart on back for explanation of your results.



Paid \$29
 S.W.

DATE / TIME Chemical Analysis / Meter

(OVER)

Printed on computer

HT-08-2007 (Rev. 03-20-07)

BACTERIOLOGICAL ANALYSIS OF WATER



Please return sample by 3:00 p.m. Monday thru Friday to:

Washtenaw County Environmental Health
705 North Zeeb Road
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800

T.O.S.

WELL PERMIT NO.: N/A

Date Collected: 4-04-07

Time: 5:30 PM

Collected by: JIM FROST / HOME ENV. SERVICES

At: 1422 RIDGE ROAD YPSILANTI
(Address) (Township)

Sampling Point: _____
(between faucet) outside faucet, hand pump, pressure tank)

Check on: Private Well Public System

Well Date: Age 6 Diameter 5" Depth 91'

Well Owner Name: HOME SALE

Daytime Phone No.: 734-761-9325

Fax No.: 734-761-7324

Mail Results To: Name: JIM FROST

Address: 315 KOCH STREET
ANN ARBOR MI 48103
City State Zip

Laboratory Results: Sample Rec'd.: 04/05/07 4:00 Lab. No.: 1592030026
date/time

Bacteria Absent 0 Safe Sample
 Bacteria Present _____ Unsafe: Chlorinate and resample

If Bacteria Present, E-Coli Level: _____

Lab Notes: _____

RECEIVED

Analyst NM
Date 4-6-07

APR 09 2007

Washtenaw County
Planning & Environment

pd 15
3/27/07
KSL

1st Sample _____
2nd Sample _____
3rd Sample _____

Other _____

(over)

Septic and Well System Inspection Summary Page

(For Washtenaw County Residential On-Site Systems at Time of Property Transfer)

Property Address	1422 Ridge Road	County	Washtenaw
Subdivision	None	Lot Number	N/A
		City/Village/Township	Ypsilanti
Last Occupied	Current	Bedrooms/Bathrooms	3/2
		Tax ID Number	K-11-01-100-011

Sewage Disposal System

General Information	Property Sketch (Not to Scale)
System Type: <u>Drainfield.</u>	<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>*See Attached Aerial View*</p> </div>
Date Installed: <u>2001 per county permit.</u>	
County Permit Available: <u>Yes.</u>	
System Size (ft2): <u>28' X 50' = 1,400.</u>	
Replacement Area Available: <u>Yes.</u>	
Septic Tank Capacity (gal): <u>1,500.</u>	
Tanks Last Pumped: <u>3/20/07.</u>	
Municipal Sewer Available: <u>Not determined.</u>	<input checked="" type="checkbox"/> TEST HOLES
<p>Observations and Comments: <u>Overall Condition: Auger inspection soil test borings into the drainfield (front, middle, and rear) revealed the septic system is functioning properly as evidenced by, slightly saturated, slightly discolored (grey) drainfield stones at the front and middle areas, and clean, dry, nondiscolored, drainfield stones at the rear area.</u></p> <p><u>Other Items: A garage has been recently built on the property and part of it and part of the driveway to it extend over part of the drainfield. Structures of any type should not be built over drainfields because they can compact/damage the drainfield and also block evaporation processes. The north edge of the driveway to the garage should be moved southward as much as possible to avoid the drainfield area. The water softener filter backflush discharge line is connected to the septic system via the laundry drain. See "Standard Recommendations" on the back of this report with regards to this item.</u></p>	

Water Supply System

General Information	Water Analysis				
System Type: <u>Drilled well, 5" dia., Depth: 97'</u>	Contaminate	Sample Dates	Results	Recommended	Potability
Date Installed: <u>2001 per well drilling records.</u>	Coliform (bacteria)	<u>4/4/07</u>	<u>0</u>	<u>0/100 ml</u>	<u>Safe</u>
County Permit Available: <u>Yes.</u>	Nitrates (No ₃ as N)	<u>4/4/07</u>	<u><0.1mg/L</u>	<u>Less than 10 mg/L</u>	<u>Safe</u>
Estimated Flow (gpm): <u>Good, (10+).</u>	Arsenic	<u>4/4/07</u>	<u><0.001mg/L</u>	<u><0.01mg/L</u>	<u>Safe</u>
Isolation to Septic Tank / Sewage System: <u>+150'/+160'</u>	Lab Name: <u>Paragon Water Lab. Livonia, MI, ID#9901</u>				
Municipal Water Available: <u>Not determined.</u>	<p>Observations and Comments: <u>Overall Condition: The well system was functioning properly at the time of the inspection. All three water samples were within safe/recommended limits-none detected. Other Items: The well pump is short-cycling (i.e. turning on and off rapidly) slightly. Short-cycling is most often caused by an undercharged pressure tank. Recharging the pressure tank with air is a minor maintenance operation and is similar to adding air to a car tire. A well drilling company can be contacted for further information or help, if needed. *Note, a section of the wiring to the pressure switch is not enclosed in protective conduit.</u></p>				

Evaluation Limitations

This evaluation is only intended to be a summary of existing conditions as observed at the time of the inspection and is not a guarantee or warranty of the system(s) continued proper functioning or safety. Because most of the inspected system(s) are located underground, is virtually impossible to verify overall construction integrity. System(s) functioning determination is based on and limited by those conditions and components observed during the inspection. The validity of information from health department documents or other sources is not guaranteed or warranted. Evaluation is subject to all terms, conditions, and limitations set forth in the evaluation application form.

Septic Systems

On-site septic systems are not designed or intended to be a permanent means of sewage disposal. Excessive water usage can lead to premature system failure and necessitate replacement. Implementation of measures to reduce water usage, such as installing low-flow fixtures, can be beneficial for most systems. Proper system design, construction, and maintenance are all important for effective system functioning and long life span; however, they may not completely eliminate the need for system replacement.

Water Analysis

Water analysis are limited to the specific bacteriological indicator organisms indicated and specific chemicals listed. Test results indicate neither the presence nor absence of any other environmental pollutants.

Standard Recommendations

The septic tank(s) should be pumped-out every 3 to 5 years, or every 2 to 3 years, if the septic tank(s) are undersized for current code. The septic tank(s) should be checked and pumped at this time if it is unknown when the last pumping occurred. The septic tank(s)'s outlet: baffle, elbow, or tee should always be checked whenever the septic tank(s) are pumped.

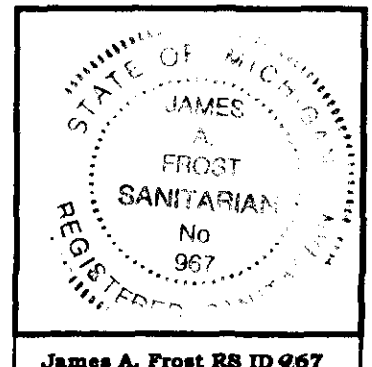
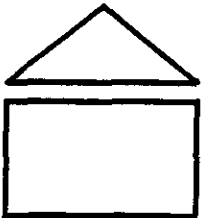
Wastewater from the water softener filter back-flush discharge is not sewage and should not be connected to the septic system. This wastewater can be discharged to the sump, to it's own dry well or small drainfield, or to the ground surface, etc. It is recommended that any work to the water supply or sewage disposal system be done by a licensed professional.

Leaking water fixtures in the home, especially toilets, can contribute a significant water burden to the septic system and should be repaired immediately.

Automatic lawn sprinkler systems should not be installed over the active drainfield area. In addition, trees should not be planted in the vicinity of the drainfield, and automobiles and heavy equipment should not be driven over any part of the septic system.

Home Environmental Services

315 Koch Street
Ann Arbor, MI 48103
(734)-761-9325




James A. Frost, Registered Sanitarian

Date

4-9-07

James A. Frost RS ID 967



WASTHENAW COUNTY
DEPARTMENT OF PLANNING AND ENVIRONMENT

April 11, 2007

ELLEN PEDERSEN
1422 RIDGE RD
YPSILANTI, MI 48198

RE: Approval of Authorization for Sale of
Property Located at 1422 RIDGE,
YPSILANTI.
Case Number: TOS2007-00151

To whom it may concern,

On April 10, 2007, this office received an inspection report for the well and/or septic system at the above referenced address. This report was reviewed to determine compliance with Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. Based on the information submitted it has been determined that the system(s) is/are functioning properly and are adequate for their intended use.

As the result of this review this PROPERTY IS AUTHORIZED FOR TRANSFER OF THE DEED.

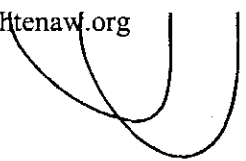
This letter does not imply that the system(s) meet new construction standards. Further, this authorization does not imply or express any warranty or guarantee as to the future function and suitability of the inspected systems. The referenced evaluation was performed based on current operation, and any change in use may change the operational status of the system(s).

Although authorized for property transfer, we do make the following recommendations:

1. The septic tanks were not pumped out as part of the inspection. According to the inspection report, the tanks were pumped less than 1 month ago. The Department of Environmental Health Regulation recommends pumping out the septic tanks every 3 to 5 years and that no "additives" be used in the tanks. Property owners have full responsibility for upkeep, maintenance and repair of the systems
2. The drainfield is encroached upon by a garage and driveway. Vehicular weight and structures on the drainfield can inhibit its functioning through tile damage, soil compaction, and reduced oxygen availability, which can contribute to system failure. It is recommended that cover over the drainfield be maintained as mowed grass.
3. The water treatment system discharge was connected to the sewage system. Water treatment discharges, along with footing drain and downspout discharges, are considered as clear water that contribute unnecessary loads on the drainfield. Those discharges should be directed away from the sewage system to extend the life of the drainfield.

705 N. Zeeb Rd., P.O. Box 8645 Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800 Fax (734) 222-3930
www.ewashtenaw.org

gebhardk@ewashtenaw.org
734-222-3934



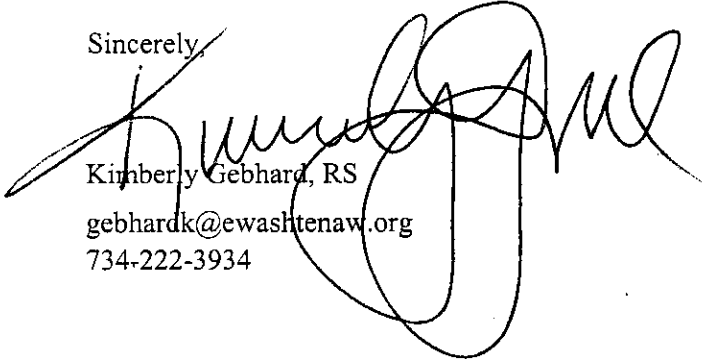
4. The well pump was cycling on and off quickly, which indicates that the pressure tank is "water logged", or undercharged with air. A registered well driller or master plumber should be contacted to recharge or replace the pressure tank as needed.

This Authorization should be kept with other important records concerning this property.

This AUTHORIZATION is valid until April 11, 2008.

Any questions regarding this letter should be directed to the Washtenaw County Department of Planning and Environment.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kimberly Gebhard', written over a large, stylized circular scribble.

Kimberly Gebhard, RS
gebhardk@ewashtenaw.org
734-222-3934



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800
Fax (734) 222-3930

WEL2006-00648

http://eWashtenaw.org

<h1>WEL</h1> Replacement	PRJ2006-01703	Well Permit #: WEL2006-00648 Parcel Number: K -11-01-100-014 Site Address: 1344 RIDGE Township: Ypsilanti Twp
	<u>ISSUE DATE:</u> 10/9/2006 <u>EXPIRE DATE:</u> 4/9/2007	

PROJECT NAME: TIME OF SALE

PROJECT DESCRIPTION: WELL PERMIT FOR EXISTING 4 BD 2 BATH HOME

Directions to site: MOTT & CLARK

Property Owner:

ARNOLD T WEIBEL
708 SAINT ANDREWS DR. APT 15
WILMINGTON, NC 28412
PH1 910-575-1026

Permit Applicant:

ROGER PRITZEL
3099 WATERS RD
ANN ARBOR, MI 48103
PH1 734-395-7821

This permit is to install a potable water well in the approved location shown on the attached plot plan and in accordance with applicable County regulations and Michigan Water Well Construction and Pump Installation Code, Part 127, Act 368. No newly drilled wells are to be used for potable purposes until final approval is received.

Type of Work : Replacement

Type of Well : Residential

Time of Sale related : Yes

Well First Area : No

Provide water samples for the following :

- Arsenic
- Coliform
- Nitrates

Water samples must be collected in approved laboratory bottles and processed by a laboratory certified by the State of Michigan for the type of test requested. Sample results must be within acceptable ranges and be provided prior to final approval.

PERMIT CONDITIONS

1. _____ Well shall be a minimum of 50 feet from septic tanks. If the well casing is more than 50 feet deep, the well shall be a minimum of 100 feet from any drainfield or contamination source. If the casing is less than 50 feet deep the well must have a 10 feet impervious (clay) layer or be at least 150 feet from any drainfield or contamination source.
2. _____ A well log is to be submitted by the well drilling contractor.
3. _____ The well must produce at least 7 gallons per minute.
4. _____ If this is a replacement well, the old well must be abandoned by a registered well drilling contractor.
5. _____ A safe coliform bacteria test is required.
6. _____ A safe nitrate test is required.
7. _____ A safe arsenic test is required.
8. _____ A protected aquifer (10 feet of clay) is recommended.
9. _____ Pump log is required.

This permit may be transferred to a new property owner if a written request by both parties is submitted to this Division prior to the expiration date. NOTE - this permit is NOT transferrable to another property.

Sanitarian: Cheri Baber Date: 10/9/06

10/9/06 10:33AM

TO : CHRISTINE BENBOW



WATER WELL AND PUMP RECORD

Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Well ID: 81000017419

Tax No:	Permit No: WEL2006-00648	County: Washtenaw	Township: Ypsilanti
Well ID: 81000017419		Fraction: 1/4 1/4 1/4	Section: 1
Elevation:		Town/Range: 03S 07E	French Claim: WSSN:
Latitude: 42.26013		Distance and Direction from Road Intersection: NEAREST CROSSROADS: MOTT & CLARK	
Longitude: -83.55372		Well Name:	
		Well Owner: Weibel, Arnold	
		Well Address: 1344 RIDGE ROAD YPSILANTI MI 48197	Owner Address: 708 SAINT ANDREWS DR/APT. 15 WILMINGTON NC 28412

Drilling Method: Rotary	Pump Installed: Yes	Pump Installation only: No																					
Well Depth: 126.00 ft.	Pump Installation date: 10/13/2006	HP: 0.50																					
Well Use: Household	Manufacturer: Aermotor	Pump Type: Submersible																					
Well Type: Replacement	Model Number: T12-50	Pump Capacity: 12.00 GPM																					
Date Completed: 10/12/2006	Length of Drop Pipe: 60.00 ft.	Id of Well:																					
Casing Type: PVC plastic	Diameter of Drop Pipe: 1.00 in.																						
Casing Joint: Solvent welded/glued	Draw Down Seal Used: No																						
Diameter: 5.00 in. to 118.00 ft. depth	Pressure Tank Installed: Yes																						
Bore Diameter 1: 8.50 in. to 126.00 ft. depth	Pressure Tank Type: Diaphragm/bladder	Tank Capacity: 32 Gallons																					
Bore Diameter 2:	Manufacturer: Well-X-Trol																						
Bore Diameter 3:	Model Number: WX-203																						
Height: 1.00 ft. above grade	Pressure Relief Valve Installed: Yes																						
Casing Fitting: None																							
Static Water Level: 25.00 ft. Below Grade(Not Flowing)	<table border="1"> <thead> <tr> <th>Formation Description</th> <th>Thickness</th> <th>Depth to Bottom</th> </tr> </thead> <tbody> <tr> <td>Topsoil</td> <td>2.00</td> <td>2.00</td> </tr> <tr> <td>Sand</td> <td>12.00</td> <td>14.00</td> </tr> <tr> <td>Gray Clay</td> <td>51.00</td> <td>65.00</td> </tr> <tr> <td>Gray Clay & Gravel</td> <td>4.00</td> <td>69.00</td> </tr> <tr> <td>Gray Clay</td> <td>49.00</td> <td>118.00</td> </tr> <tr> <td>Black Shale Water Bearing W/Gravel</td> <td>8.00</td> <td>126.00</td> </tr> </tbody> </table>		Formation Description	Thickness	Depth to Bottom	Topsoil	2.00	2.00	Sand	12.00	14.00	Gray Clay	51.00	65.00	Gray Clay & Gravel	4.00	69.00	Gray Clay	49.00	118.00	Black Shale Water Bearing W/Gravel	8.00	126.00
Formation Description	Thickness	Depth to Bottom																					
Topsoil	2.00	2.00																					
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Gray Clay & Gravel	4.00	69.00																					
Gray Clay	49.00	118.00																					
Black Shale Water Bearing W/Gravel	8.00	126.00																					
Yield Test Method: Air																							
Measurement Taken During Pump Test:																							
4.00 hrs. pumping at 15.00 GPM																							
Abandoned Well Plugged: Yes	Geology Remarks:																						
Reason for not plugging Well:	<i>C. Benbow 10-25-06</i>																						
Abandoned well ID:	Abandonment Details																						
Screen Installed: Yes	Casing Diameter: 3	Well Depth: 9ft																					
Well Intake:	Plugging Material: Bentonite chips/pellets	No. of Bags: 0.5																					
Filter Packed: Yes	Casing Removed: No																						
Screen Diameter: 5.00 in.	Contractor Type: Water well drilling contractor																						
Length: 8.00 ft.	Registration Number: 2215																						
Screen Material Type: PVC-slotted	Business Name: Ann Arbor Well Drilling, Inc.																						
Slot: 25.00 in. Set Between 118.00 ft. and 126.00 ft.	Business Address: Box 163 Dexter, MI 48130																						
Blank:	WATER WELL CONTRACTOR'S CERTIFICATION:																						
Fittings:	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.																						
None	Signature of Registered Representative	Date																					
Well Grouted: Yes	<i>Steven H. Wheeler</i>	10-17-06																					
Grouting Method: Grout pipe outside casing	General Remarks: REMOVED DROP PIPE/FOOT VALVE FROM 3" WELL IN BASEMENT.																						
No. of Bags: 10	OTHER REMARKS																						
Additives: None																							
Grouting Materials:																							
Bentonite slurry																							
From 0.00 ft. to 115.00 ft.																							
Well Head Completion: 12 inches above grade, Pitless adapter																							
Nearest source of possible contamination:																							
Type: Drainfield/Dry well																							
Distance Direction: 100.00 ft. East																							
None																							
Drilling Machine Operator Name: EDWARD WHEELER																							
Employment: Employee																							
Well Pump Installer Name: J. STEPP																							

EOP 2017C (2/2000)

ATTENTION WELL OWNER: FILE WITH DEED

10/17/2006 08:50

BACTERIOLOGICAL ANALYSIS OF WATER



Please return sample by 3:00 p.m. Monday thru Friday to:

Washtenaw County Environmental Health
705 North Zeeb Road
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800

WELL PERMIT NO.: WEL 2006-00648

Date Collected: 10-16-06

Time: 1:00 PM

Collected by: ROGER PRITZEL

At: 1344 RIDGE RD, YPSILANTI, MI, 48198

(Address)

2006

YPSILANTI

(Township)

Sampling Point: PRESSURE TANK

(kitchen faucet, outside faucet, hand pump, pressure tank)

Check on: Private Well X / Public System

Well Data: Age 10-13-06 Diameter 5" Depth

Well Owner Name:

Daytime Phone No.: 395 7821

Fax No.: 334 444 3130

Mail Results To:

Name: ROGER PRITZEL

Address: 555 BRIARWOOD CIRCLE STE 333

ANN ARBOR,

MI,

48108

City

State

Zip

Laboratory Results:

Sample Rec'd.: 10-16-06/3:45

date/time

Lab. No.: 157355 0089

Bacteria Absent

Bacteria Present 1

If Bacteria Present, E-Coli Level: 0

Lab Notes:

Analyst AUB

Date 10-17-06

1st Sample _____

2nd Sample _____

3rd Sample _____

Other _____

10/16/2006 MON 11:48AM #01

TRANSACTION #2198

CR/CC # 3962

WATER \$15.00

TOTAL \$15.00

CRED CARD \$15.00

CLERK12 NO. 003667

Safe Sample

Unsafe: Chlorinate

Water Sample

(OVER)

BACTERIOLOGICAL ANALYSIS OF WATER



Please return sample by 3:00 p.m. Monday thru Friday to:

Washtenaw County Environmental Health
705 North Zeeb Road
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800

WELL PERMIT NO. WEL 2006-00648

Date Collected: 10-20-06

Time: 2:00 P.M.

Collected by: ROGER PRITZEL

At: 1344 RIDGE RD, IPSILANTI, MI, 48198

(Address)

2006 OCT 23 PM 3:54

IPSILANTI
(Township)

Sampling Point: PRESSURE TANK

(kitchen faucet, outside faucet, hand pump, pressure tank)

Check on: Private Well /Public System

Well Data: Age 10-12-06 Diameter 5" Depth 126'

Well Owner Name: ARNOLD WEIBEL

Daytime Phone No.: 395 7821

Fax No.: 994 3130

Mail Results To:

Name: ROGER PRITZEL

Address: 555 BRIAR WOOD CIRCLE STE 333

ANN ARBOR, MI, 48108

City

TRANSACTION #6

CK/CC #

State

3962

WATER

TOTAL No.:

157355

\$15.00

0134

CRED CARD

CLERK8

\$15.00

NO. 003951

Laboratory Results:

Sample Rec'd.: 10-20-06 4:00

date/time

Bacteria Absent

Bacteria Present 20

10/20/2006 FRI 12:31PM

Safe Sample

Unsafe: Chlorinate #01

and resample

If Bacteria Present, E-Coli Level: 0

Lab Notes:

Analyst NM

Date 10-22-06

1st Sample

2nd Sample

3rd Sample

Other

(OVER)



718 S. Michigan

Howell, MI 48843

(517) 548-2505

Fax (517) 548-3434

www.watertech-inc.com

WATER ANALYSIS RESULTS

To:
Ann Arbor Well Drilling
7446 Joy
Dexter, MI 48130

Date Sampled: 11/9/2006
Date Received: 11/9/2006
Collected By: Ann Arbor Well
Sample Point: PSI Tank

Sample ID:
1344 Ridge Rd.

Lab Sample Number: 22103-01

Test Parameter	Result	Units	DL	Maximum Desired Limit
Total Coliform	0	MPN/100ml	1	MCL=0

Released By: *Yvonne Gault*

Date: 11/10/2006

Laboratory #23 assigned by the Michigan Department of Environmental Quality for the microbiological and chemical analysis of drinking water

ABBREVIATIONS

DL = Lowest reportable level of detection
 MCL = Maximum Contaminant Level - The maximum permissible level established by the USEPA and/or MDEQ for safe drinking water
 SMCL = Secondary Maximum Contaminant Level - Suggested maximum level established by the USEPA for desirably water quality
 CFU/100 ml = Colony Forming Units/100 milliliter sample volume; MPN = Most Probable Number.
 mg/L = Milligrams per liter (= parts per million).

CERTIFICATE OF APPROVAL



Washtenaw County Environmental Health Division
WASHTENAW COUNTY
DEPARTMENT OF PLANNING & ENVIRONMENT
705 N. Zeeb
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800

Sanitary facilities have been inspected and approved by the Washtenaw County Environmental Health Division as follows:

Permit Number: **WEL2006-00648**

Description: **WELL PERMIT FOR EXISTING 4 BD 2 BATH HOME**

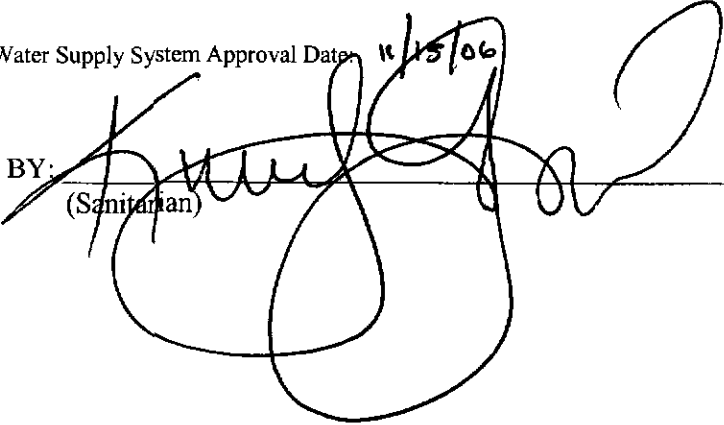
Township: **Ypsilanti Twp**

Premises: **1344 RIDGE**

Owner: **ARNOLD T WEIBEL**

Sewage System Approval Date: ~~Not approved~~ 11/13/06

Water Supply System Approval Date: 11/15/06

BY: 
(Sanitarian)



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645

Phone (734) 222-3800
Fax (734) 222-3930

WASHTENAW COUNTY
DEPARTMENT OF PLANNING & ENVIRONMENT

<http://ewashtenaw.org>

TOS	TOS2006-00628	Time Of Sale Permit #: TOS2006-00628
	<u>REC'D DATE:</u> 9/20/06 <u>EXPIRE DATE:</u> 11/13/2007	Parcel Number: K -11-01-100-014 Site Address: 1344 RIDGE Township: Ypsilanti Twp

Owner
VIRGINIA WEIBEL
1344 RIDGE RD
YPSILANTI, MI 48198

Applicant
JAMES PETERS
1819 KNOLLWOOD BEND
YPSILANTI, MI 48198
PRI 395-7821

TOS Inspector
JACK SPACK JR.
7415 CARPENTER RD
YPSILANTI, MI 48197
PRI (734) 434-3220
FAX (734) 434-7774
EML JRJACO@Earthlink.NET

<u>ACTION DESCRIPTION</u>	<u>DATE1</u>	<u>DATE2</u>	<u>DATE3</u>	<u>DISP</u>	<u>DONE BY</u>
TOS - Septic Only			9/20/06	DONE	SLR
TOS Review			9/21/06		KMG
Denial Letter Sent			9/21/06	DONE	KMG
CAP Required	9/21/06	10/21/06	11/13/06	DONE	KMG
CAP Reviewed			11/13/06		KMG
CAP Approved			11/13/06		KMG
CA Required	11/13/06	5/12/07	11/13/06	DONE	KMG
Authorization Sent			11/13/06	DONE	KMG



REPORT OF RESIDENTIAL ONSITE WATER SUPPLY AND SEWAGE DISPOSAL INSPECTION

THIS REPORT IS SUBMITTED AS REQUIRED BY THE WASHTENAW COUNTY REGULATION FOR THE INSPECTION OF RESIDENTIAL ONSITE WATER AND SEWAGE DISPOSAL SYSTEMS AT TIME OF PROPERTY TRANSFER REGULATION
This form is to only be completed by inspectors certified by the Washtenaw County Department of Planning & Environment.
(Rev. 04/15/2005)

Date Inspected: 9-14-06

Owner Name/Property Address: VIRGINA WEIBEL
1344 RIDGE RD
YPSILANTI

Township: YPSILANTI Tax ID #: K 11 01 100 014

Applicant Name (if other than owner): JAMES PETERS

Mailing Address (if other than above): 1819 KNOLLWOOD BEND
YPSILANTI MI 48198

Realtor
ROGER PRITZEL
395-7821

Phone #: _____ Fax #: _____

Systems Inspected:
 Onsite Water Supply (Reason not inspected POINTWELL, MUNICIPAL WATER AVAILABLE)
 Onsite Sewage Disposal (Reason not inspected _____)

Age of Home: 50 years \pm Current Number of Residents: _____
Number of Bedrooms: 3 or _____
Number of Bathrooms: 1 Time of Vacancy: 18 months

I, Jack Spack Jr being a Washtenaw County Certified Inspector, inspected the onsite water supply and/or onsite sewage disposal system indicated above. I certify that this inspection was done within the guidelines established by Washtenaw County and was completed in a thorough and complete manner. Further, I certify that this report includes all knowledge that I have concerning the operation and function of said system(s).

(Signature) Jack Spack Jr (Date) 9, 20, 06
Certification Number: 041

Office Use Only:
Case #: TOS 20 06-001078



KEYED

SEP 20 2006

STEPHANIE REAMES

WATER SUPPLY SYSTEM

Age of Well: _____ Permit #: _____ Approval Date: _____

Well Depth: _____ ft. Verified from: Well Log County Records
 Driller Owner

Pump Type: Submersible
 Deep Well Jet *
 Shallow Well Jet*
 Other(_____)
*Protected Suction Line y/n

Water Treatment in Use	
<input type="checkbox"/> Softener	<input type="checkbox"/> Sediment Filter
<input type="checkbox"/> Iron Removal	<input type="checkbox"/> Reverse Osmosis
<input type="checkbox"/> Gas Removal	<input type="checkbox"/> Chemical
<input type="checkbox"/> Ozonation	<input type="checkbox"/> Other

Cycling: Long (>90 sec.)
 Adequate (30-90 sec.)
 Short (<30 sec.)

Yield (approx.): _____ gpm
Casing Diameter: _____ inches

Termination: Above grade (_____ inches above ground)
 Basement offset (_____ inches above floor)
 Drained Pit (_____ inches above floor)
 Undrained Pit
 Dug Well
 Not Found/Buried

Well cap: structurally sound
 cap loose
 cap missing
 cap loose w/ insects
 cap/conduit/casing damaged

Venting: not vented
 screened vent
 unscreened vent
 unscreened vent w/ insects

Location: on property
 off property

If shared well: use agreement
 no use agreement

Improperly abandoned well(s): N y/n

Auxiliary wells: 0 number
Use: irrigation
 pond
 livestock
 heating/cooling
 not used
 other

Isolation Distances (if not met)

Drainfield (<100ft) _____ ft

Septic Tank (<50 ft) _____ ft

Grinder pump (<50ft) _____ ft

Sewer Line (<50ft) _____ ft

HazMat Storage (<100ft) _____ ft

Fuel Oil Tank (<100ft) _____ ft (Tank buried _____ y/n In basement _____ y/n)



SEWAGE DISPOSAL SYSTEM

Permit #: _____ Approval Date: _____ Location: ON on/off property

Municipal/Sanitary Sewer Available: N y/n

Not Connected to System

- toilet(s)
- sink(s)
- shower(s)
- tub(s)
- laundry
- other

Connected to System

- footing drains
- water treatment discharge(s)
- dehumidifier(s)
- storm water drain(s)
- other

TANK(S) SPECIFICATIONS

Number: 1 Total capacity: 500 gal Verified by: _____ county records
 pumping receipts
 Last pumped: 6 years ago

Isolation Distance (if not met):
 surface water (<25 ft) _____ y/n
 nearest well (<50ft) _____ y/n

Accessible for pumping: Y y/n
 Tank access within 18" of grade: Y y/n

Complete septic tank inspection or attach Septic Tank Maintenance Report if septic tanks have not been approved:

Tanks structurally sound: N y/n Effluent above outlet: N y/n

Outlet type: _____ vented elbow _____ tee _____ baffle _____ effluent filter none

Effluent filter: N y/n/unknown

Pre-Treatment Unit: N y/n

List type: _____
(i.e. sand filter, scot. advantex, etc.)

Pump-type system: N y/n

Alarm test: OK/silent/on/other
(Turn circuit on if necessary)

(Note unusual conditions i.e. circuit off, etc.)



DISPOSAL AREA

Number: none found
 one
 multiple/one connected
 multiple connected
 multiple w/diverter *

*Note: If multiple fields connected with diverter valve, record condition of field in use on next page and use site plan to show size and condition of other field(s).

Type: Bed-conventional
 Bed-deep excavation
 Bed-raised
 Modified fill
Size of bed: _____ sq. ft.
Verified by: County permit
 Field measurement

Trenches Number of Trenches: 2? Trench width: 1 ft.
 Dry well Trench length: 15 ft.
 Other

DRAINFIELD CONDITION (Show location & condition of each test hole on site plan)

Sewage exposed (including back-up, direct discharge, etc.): N y/n

Depth of cover: 24 to 30 inches
(minimum) (maximum)

Encroachment on field: N y/n
(Show type and location on site plan)

Saturation of field:
 none
 <50% below tile holes
 >50% below tile holes
 <50% above tile holes
 >50% above tile holes

Sludge/Biomat in field:
 none
 <50% below tile holes
 >50% below tile holes
 <50% above tile holes
 >50% above tile holes

Tile: plastic
 concrete/clay no blockage
 concrete/clay <50% blockage
 concrete/clay >50% blockage

Isolation Distances (if not met):
nearest well (<100ft) _____
surface water (<50ft) _____

Sandy soil under field: Y y/n
Surface water diverted from system: Y y/n
Woody vegetation on/within 5 ft of system: Y y/n
Automatic sprinklers on/near system: N y/n



Based on data presented in this inspection report, the Washtenaw County Department of Planning and Environment office will issue a letter stating whether the water supply and sewage system meets minimum standards for sale of the property. The following observations or recommendations for extending the life of these systems are in addition to any requirements addressed by the Department of Planning and Environment office:

Inspector Observations/Comments/Recommendations:

CEMENT Block SEPTIC TANK WAS EMPTY EXCEPT FOR
HEAVY SLUDGE ON BOTTOM OF TANK.

TOP OF SEPTIC TANK IS BROKEN. HOLES ARE COVERED WITH
TIN AND BOARDS.

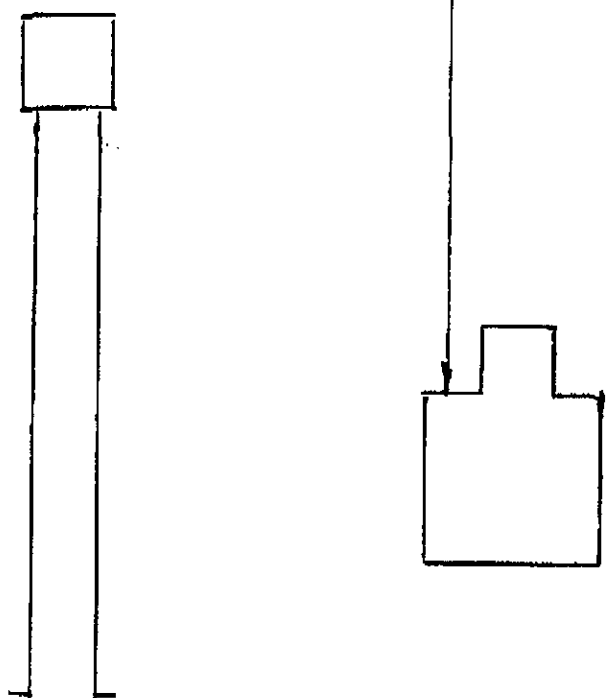
I WAS ONLY ABLE TO FIND TWO LINES IN THE
DRAINFIELD - SOME SPOTS DIDN'T HAVE MUCH STONE.

ATTACH REQUIRED WATER SAMPLES (COLIFORM BACTERIA,
NITRATES, AND ARSENIC) AND SITE PLAN TO REPORT!



WOODS
(a) (a) (a) (a)
(a) (a) (a)

1344 RIDGERD





WASHTENAW COUNTY DEPARTMENT OF PLANNING & ENVIRONMENT

September 21, 2006

JAMES PETERS
1819 KNOLLWOOD BEND
YPSILANTI, MI 48198

RE: DENIAL of authorization for sale of
property located at 1344 RIDGE, YPSILANTI.
Case number TOS2006-00628.

To whom it may concern,

On September 20, 2006, this office received an inspection report for the well and/or septic system at the above referenced address. This report was reviewed to determine compliance with Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. Based on the information submitted it has been determined that the system(s) is/are are not adequate for their intended use.

As the result of this review, this PROPERTY IS NOT AUTHORIZED FOR TRANSFER OF THE DEED.

This denial is the result of the following deficiencies:

1. The water supply consists of a point well. It has an unprotected suction line and is less than 25 feet deep, which subjects the water supply to potential contamination.
2. The septic tank is damaged and has lost integrity.
3. The drainfield size is less than 50% of the size required to meet minimum conformance.

A corrective action plan must be submitted to Environmental Health within thirty (30) days. Recommended solutions are:

1. Drill a new well. A permit must be obtained before drilling a well. An application should be made to this office and must include an accurate site plan (drawn to 1" = 40' scale), the legal description for the property, and the permit fee (currently \$218).
2. Connect to the available public water supply.
3. Replace the sewage system. A soil evaluation and permit will be needed for this solution. An application for the permit should be made to this office and must include an accurate site plan (drawn to 1" = 40' scale), the legal description and survey for the property, and the permit fee (currently \$416 for a conventional system permit). The applicant must arrange for a backhoe to dig test holes for the evaluation.
4. Due to the current conditions of the systems, the option for closing with escrow, as outlined below, will not be allowed unless accompanied by an affidavit requiring vacancy until corrections are complete.

Authorization for sale can be issued after both of the following conditions have been met:

705 North Zeeb Road, P.O. Box 8645 Ann Arbor, MI 48107-8645
Phone: (734) 222-3800 Fax: (734) 222-3930

www.ewashtenaw.org

Page 1 of 2

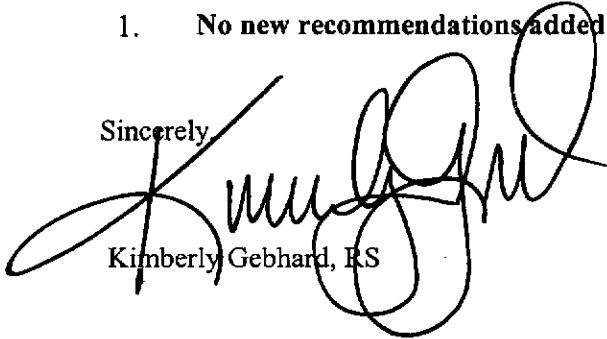
1. The corrective action plan is approved by the Environmental Health office.
2. The corrective action is completed -or- a performance contract has been signed and an escrow account of 1½ times the contract amount has been established to guarantee performance. A processing fee (currently \$52) must be paid before an escrow closing will be authorized. A site visit fee (currently \$99) will be charged for any corrective action that requires a site visit from this office.

Any owner or interested party who is adversely affected by any decision may request an administrative conference by contacting H. Leon Moore, R.S, Rural Division Director at (734) 222-3848. If concerns are not resolved during the conference, the decision may be appealed to the HCBA/PHAC. A request for hearing before the HCBA/PHAC must be made within thirty (30) days and must be accompanied by a \$364 appeal fee.

In addition, the following recommendations are made for the care and maintenance of the systems:

1. **No new recommendations added**

Sincerely,

A handwritten signature in black ink, appearing to read 'Kimberly Gebhard', written over a large, stylized circular flourish.

Kimberly Gebhard, RS



WASHTENAW COUNTY
DEPARTMENT OF PLANNING & ENVIRONMENT

November 13, 2006

James Peters
1819 Knollwood Bend
Ypsilanti, MI 48198

RE: Authorization for sale of property
located at 1344 Ridge Road, Ypsilanti
Twp.

To Whom It May Concern:

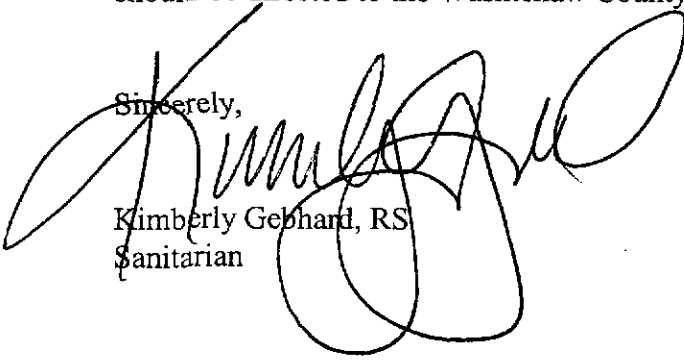
This letter is a follow up to our letter of non-conformance dated September 21, 2006. The well and sewage systems have been replaced and approved in accordance with permits #WEL2006-00648 & #SEW2006-00351. This corrects all issues of substantial non-conformance that were previously cited.

In light of the corrections made and other information contained in the inspection report of September 20, 2006, this office has determined that the water supply and sewage disposal systems inspected are in substantial conformance with the Washtenaw County Regulation for the Inspection of Residential Onsite Water Supply and Sewage Disposal Systems at Time of Property Transfer and the property is authorized for sale.

This AUTHORIZATION is valid for one year and does not imply that the system(s) meet all current construction standards. Further, this authorization does not imply or express any warranty or guarantee as to the future function and suitability of the inspected systems. The referenced evaluation was performed based on past use of said system(s) and any change in future use may change the operational status of the inspected systems.

It is encouraged that all owners of the subject property maintain a copy of this AUTHORIZATION with other important home records. Any questions regarding this letter should be directed to the Washtenaw County Department of Environmental Health Regulation.

Sincerely,


Kimberly Gebhard, RS
Sanitarian



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800
Fax (734) 222-3930
http://eWashtenaw.org

SEW2006-00351

SEW
Replacement

PRJ2006-01703

Sewage Permit #: SEW2006-00351

ISSUE DATE:
10/9/2006
EXPIRE DATE:
4/9/2007

Parcel Number: K -11-01-100-014
Site Address: 1344 RIDGE
Township: Ypsilanti Twp

PROJECT NAME: TIME OF SALE

DESCRIPTION: SOIL EVAL/SEWAGE PERMIT FOR EXISTING 4 BD 2 BATH HOME

Directions to site: MOTT & CLARK

Property Owner:

ARNOLD T WEIBEL
708 SAINT ANDREWS DR. APT 15
WILMINGTON, NC 28412
PH1 910-575-1026

Permit Applicant:

ROGER PRITZEL
3099 WATERS RD
ANN ARBOR, MI 48103
PH1 734-395-7821

This permit is for a residential (>= 1 acre) dwelling with 4 bedrooms :

Type of Disposal System: Standard Bed
Bed Size : 28 Feet By 44 Feet
Bed Area : 1,232 Sq. Ft.

Number of Bedrooms: 4 / Baths : 2.0
PreTreatment: None
Drainfield Elevation: Below Grade

Time of Sale Related: Yes
Effluent Filter: Not Required

Tank Tightness Test : Not Required
Type of Parcel: Metes and Bounds / Residential >= 1 acre
Type of Water Supply : Residential

2 New Septic Tank(s)
0 Existing Septic Tank(s)

Total Capacity (new) : 2,000 gallons
Total Capacity (existing) : 0 gallons
Pump Chamber Capacity : N/A Gallons

The system is to be constructed in accordance with the permit condition below, the approved plot plan, and the general construction guidelines included with the permit.

PERMIT CONDITIONS

- 1 Maintain at least 100 feet of isolation from the new drainfield to all wells and 50 feet from septic tank(s) to all wells.
2 Excavate to sand at +/- 2-5 feet (if loamy brown layer encountered, excavate through to dry coarse gray sand).
3 Lay bottom of stone no lower than 30" below highest existing grade in the drainfield area.
4 Recommend marking underground electric line running to garage.
5 Complete the installation of the septic system and call for inspection prior to covering any portion.
6 Connect all Sanitary lines into the new sewage disposal system.
7 Additional inspections may be required. If required, a \$99 fee must be paid prior to inspection.
8 Properly abandon old septic tank by thoroughly pumping contents and crushing.
9 Install split header if installing greater than 7 tile lines.
10 Grade area over septic system as to divert all surface water away.
11 Septic system maintenance is important. A licensed septic tank pumper should pump septic tanks every 3-5 years. Also it advisable to limit the amount of grease and strong cleaners going into the system.

This permit may be transferred to a new property owner if a written request by both parties is submitted to this division prior to the permit expiration date. NOTE - this permit is NOT transferrable to another property. The sewage system installed under this permit must be installed in compliance with the Washtenaw County Engineering and Construction Guidelines.

Sanitarian: [Signature] Date: 10/9/06

Issue Date: 10/9/2006
Expire Date: 4/9/2007

10-24-06 C. Benben

Excavation White Tag

28 x 44' depth = 3 feet

location, per plan

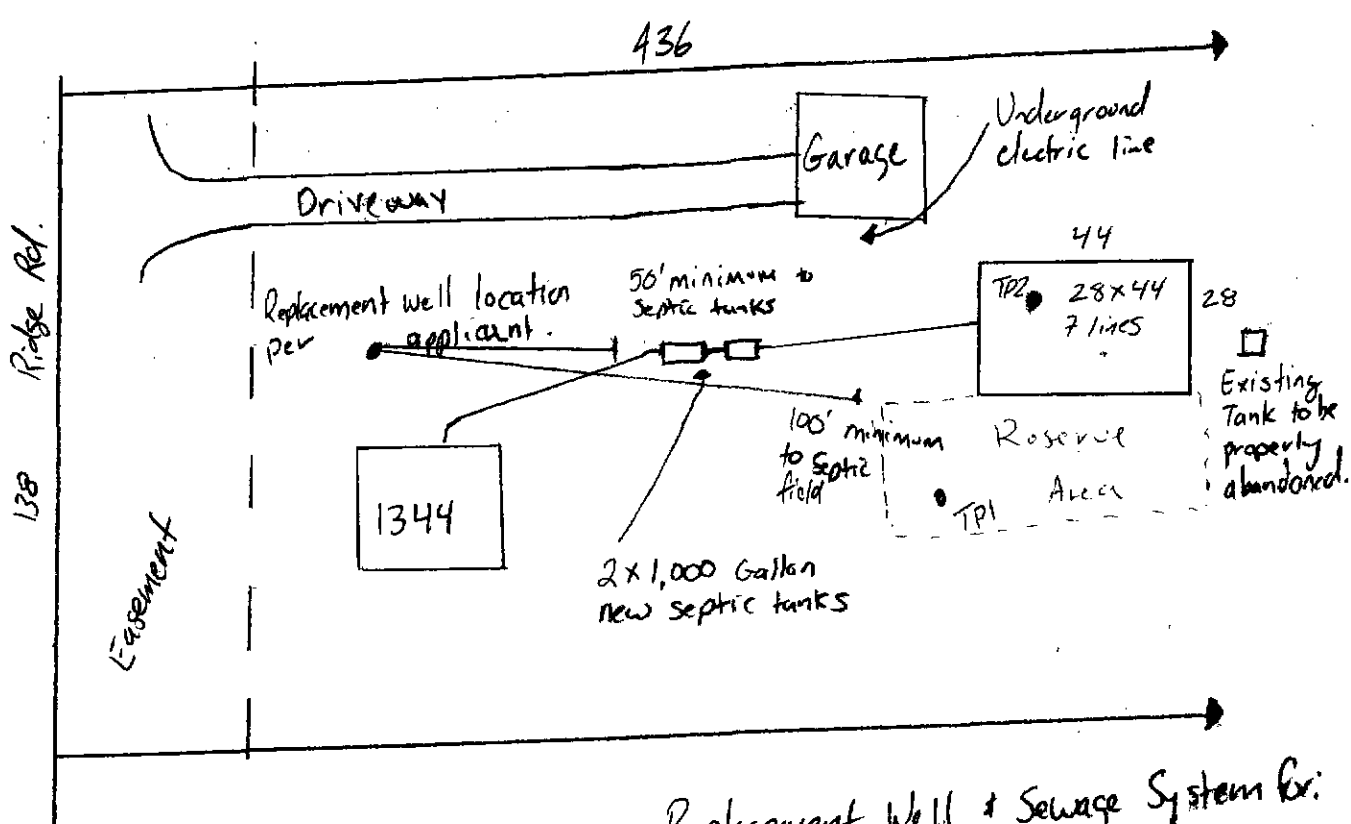
reserve area, available, tight

Tanks approved, line to field approved.

okay to

10-25-06 BB Final field only Green Tag

7 lines stone straw approved, cover field with
12" - 24" soil, grade for runoff



Replacement Well + Sewage System for:
 1344 Ridge Rd. Ypsilanti Twp.
 K-11-01-100-014

Scale 1:40 N ↑

Replacement Sewage System:

- 28 x 44 feet
- 7 lines
- 2 x 1,000 Gallon Tanks

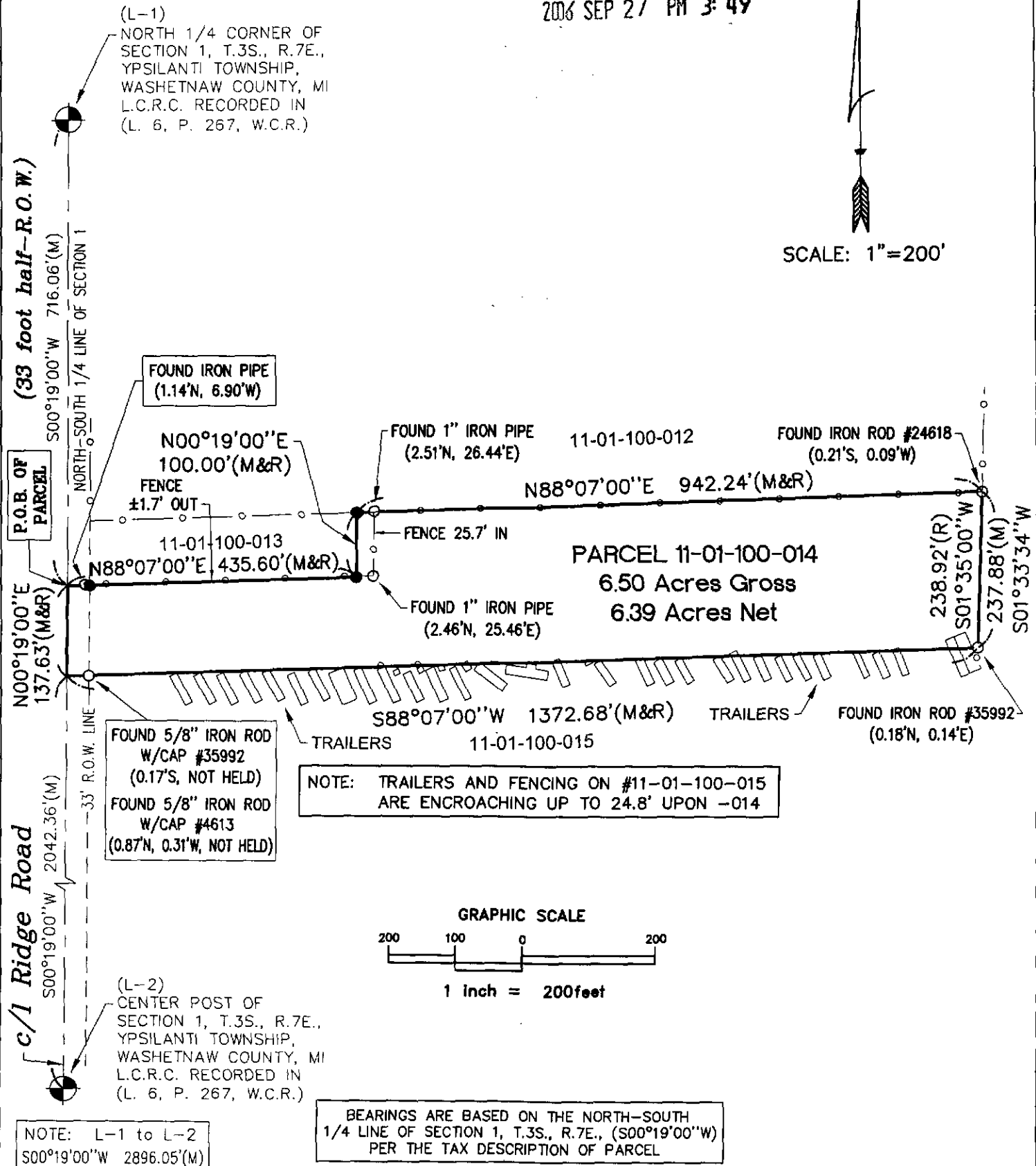
PLAN APPROVED
 WGL 06-00648
 Permit No. SEW06-00351
 Washtenaw County
 Environmental Health
 This plan has been
 approved this 10th day of
 October, 2006 and no
 changes will be made
 without written approval.
 Signed: *[Signature]*

CERTIFIED SURVEY

2006 SEP 27 PM 3:49



SCALE: 1"=200'



(L-1)
NORTH 1/4 CORNER OF SECTION 1, T.3S., R.7E., YPSILANTI TOWNSHIP, WASHETNAW COUNTY, MI L.C.R.C. RECORDED IN (L. 6, P. 267, W.C.R.)

(L-2)
CENTER POST OF SECTION 1, T.3S., R.7E., YPSILANTI TOWNSHIP, WASHETNAW COUNTY, MI L.C.R.C. RECORDED IN (L. 6, P. 267, W.C.R.)

NOTE: L-1 to L-2
S00°19'00"W 2896.05'(M)

BEARINGS ARE BASED ON THE NORTH-SOUTH 1/4 LINE OF SECTION 1, T.3S., R.7E., (S00°19'00"W) PER THE TAX DESCRIPTION OF PARCEL

SURVEYOR'S CERTIFICATE — I HEREBY CERTIFY THAT THIS SURVEY WAS PREPARED BY ME, OR UNDER MY DIRECT SUPERVISION, THAT I AM A PROFESSIONAL SURVEYOR UNDER THE LAWS OF THE STATE OF MICHIGAN, THAT THIS SURVEY COMPLIES WITH THE REQUIREMENTS OF SECTION 3, P.A. 132 OF 1970 AS AMENDED BY P.A. 280 OF 1972, AND THAT THE ERROR OF CLOSURE IS NO GREATER THAN 1 TO 5000.

Eric W. Tiahart

ERIC W. TIAHRT, PS #46693



LEGEND	
●	= Set Capped Iron #24598
○	= Fnd. 5/8" Iron Rod
-○-○-	= 4' WIRE FENCE
(R)	= RECORDED
(M)	= MEASURED

CLIENT: ARNOLD WEIBEL

E.P. KUBISKE & ASSOCIATES, INC.
1430 E. MICHIGAN AVE.
YPSILANTI, MICHIGAN 48198-5906
(734) 481-1322
FAX (734) 481-2215

JOB # 02-312	
DATE 2/27/03	
DWG. BY EWT	BK PG
SHEET 1 OF 2	

CERTIFIED SURVEY

2006 SEP 27 PM 3:49

LEGAL DESCRIPTION - Parcel #11-01-100-014

Part of the Northeast 1/4 of Section 1; T.3S., R.7E., Ypsilanti Township, Washtenaw County, Michigan, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: Beginning at a point on the North-South 1/4 line of said Section 1 located S00°19'00"W 716.06 feet Measured and Record along said line from the North 1/4 corner of said Section; thence N88°07'00"E 435.60 feet Measured and Record; thence N00°19'00"E 100.00 feet Measured and Record; thence N88°07'00"E 942.24 feet Measured and Record; thence S01°33'34"W 237.88 feet Measured (S01°35'00"W 238.92 feet Record); thence S88°07'00"W 1372.68 feet Measured and Record to a point on the North-South 1/4 line of said Section; thence N00°19'00"E 137.63 feet Measured and Record the point of beginning. Containing 6.50 acres gross and 6.39 acres net less right-of-way. Subject to the rights of the public in Ridge Road (R.O.W. varies) over the West 33 feet thereof, and easements, restrictions, and rights-of-way of record.

BEARINGS ARE BASED ON THE NORTH-SOUTH
1/4 LINE OF SECTION 1, T.3S., R.7E., (S00°19'00"W)
PER THE TAX DESCRIPTION OF PARCEL

SURVEYOR'S CERTIFICATE - I HEREBY CERTIFY THAT THIS SURVEY WAS PREPARED BY ME, OR UNDER MY DIRECT SUPERVISION, THAT I AM A PROFESSIONAL SURVEYOR UNDER THE LAWS OF THE STATE OF MICHIGAN, THAT THIS SURVEY COMPLIES WITH THE REQUIREMENTS OF SECTION 3, P.A. 132 OF 1970 AS AMENDED BY P.A. 280 OF 1972, AND THAT THE ERROR OF CLOSURE IS NO GREATER THAN 1 TO 5000.



LEGEND	
●	= Set Capped Iron #24598
○	= Fnd. 5/8" Iron Rod
-○-○-	= 4' WIRE FENCE
(R)	= RECORDED
(M)	= MEASURED

Eric W. Tiahrt
ERIC W. TIAHRT, PS #46693

CLIENT: ARNOLD WEIBEL

E.P. KUBISKE & ASSOCIATES, INC.
1430 E. MICHIGAN AVE.
YPSILANTI, MICHIGAN 48198-5906
(734) 481-1322
FAX (734) 481-2215

JOB # 20-00137	
DATE 2/27/03	
DWG. BY EWT	BK PG
SHEET <u>2</u> OF <u>2</u>	

1344 Ridge



At the time of this publication, 2005 aerial imagery was being quality checked. Washtenaw County hereby disclaims responsibility for the accuracy or clarity of the imagery. The map shown here is for illustrative purposes only, and is not suitable for site-specific decision making. Any assumptions of the legal status of this data is hereby disclaimed.

SOIL EVALUATION NOTES

SEV/SEW/ARV2006-00351 Date: October 5 2006
 Address: 1344 Ridge Ridge Lot/Parcel: _____ Township: Vasilanti
 Circle One: New Build Replacement Field Addition Review Other
 Sanitarian: C. Berber Excavator: Kovalak, Jim Sr., Mike
 Additional People: Roger Patzel
 Well First Area: YES NO MUNICIPAL H2O Tank First: YES NO

RESULTS: APPROVED DENIED

Oversized Field Required: NO YES ___% Mottling Observed: NO YES @ _____
 Approvable Soils Found: 2 ft. to 5 ft. Approval letter issued in field: YES NO
 Set Header Invert 32 " ABOVE BELOW AT Grade
 Basement plumbing: YES NO UNKNOWN SOILS MAPPED AS: Spinks Loamy Sand
 COMMENTS: 4 bedroom house (application). (TOS = 3 bedroom, Existing
500 gallon tank 3 bedroom house
2 x 1,000 gallon tanks 28 x 44. 7 dies
Mark electric live going to garage.

TEST PIT DESCRIPTIONS:

Record: color, texture, moisture (presence, absence and degree), soil type, and mottling (presence, absence and degree); preferably in that order.

<p><u>TPI</u> 0-1.5' topsoil 1.5-4' lt. brown f/fm dry sand 4'-6' wt. coarse dry sand no sign of water / faint mottling @ 4.5 feet</p>	<p><u>TP2</u> 0-1.5' topsoil 1.5-5' lt brown f/fm dry sand loamy layer @ 4' 5-7' gray c wet sand damp dry sand loamy layer no sign of water faint mottling @ 5'</p>
<p style="text-align: center;">TP2 22' E of SE corner of garage, 35' S of SE corner.</p> <p style="text-align: center;">Layer under-topsoil is good on TPI, TP2 dig through loamy layer to gray sand.</p>	



DEVELOPMENT SERVICES DIVISION

705 NORTH ZEEB RD.
P.O. BOX 8645
ANN ARBOR, MI 48107-8645

PO#-01703

APPLICATION FOR PERMIT

Phone: (734) 222-3800
Fax: (734) 222-3930
Website: www.ewashtenaw.org



Property Tax ID #: 11-01-100-014 Township: YPSILANTI Section #: 1
Address of Property: 1344 RIDGE RD
City: YPSILANTI Zip: 48198
Nearest Two Crossroads: MOTT, CLARK

2006 SEP 27 PM 3:01

Description of Property (check one):

- Metes & Bounds Acres: 6.5 Provide 2 copies of a scaled site plan (1" = 40') and 3 copies of a Certified Survey/Legal Description.
Subdivision Sub. Name: Lot: Provide 2 copies of a scaled site plan (1" = 40').

Type of Building/Structure (check one):

- New: Single family dwelling with bedrooms, bathrooms (including rough-in plumbing).
Existing: Single family dwelling with 4 bedrooms, 2 bathrooms. (If an addition, total bedrooms, bathrooms).
Other: 3 per Reg... letter wants to finish another bedroom.

APPLICANT: ROGER PRITZEL
Address: 3099 WATERS RD
City: ANN ARBOR State: MI Zip: 48103
Work/Cell Phone: (734) 395-7821
Home Phone:
Email: RPRITZEL@AOL.COM
Applicant's Signature: Roger Pritzel

OWNER (if not Applicant): ARNOLD WEIBEL
Address: 719 BERMUDA WALK
City: SUNSET BEACH State: NC Zip: 28468
Work/Cell Phone:
Home Phone: (910) 575-1026
Email:
Date: 9-27-06

SERVICE(S) APPLYING FOR:

- Soil Evaluation
Permit(s)
Addition/Remodeling Review
Seasonal High Water Table Evaluation
Other:

TYPE OF SEWAGEWATER SUPPLY SYSTEM(S) (check all that apply):

- Sewage Disposal: New OR Replacement
Conventional
Sand Filter System
Modified Fill-Type
Municipal
Water Supply: New OR Replacement
Potable Water (House/Barn)
Test Well
Municipal

FOR OFFICE USE ONLY
Soil Evaluation #
Sewage Permit #
Well Permit #
Sanitation
CSR

CERTIFICATE OF APPROVAL



Washtenaw County Environmental Health Division
705 N. Zeeb Rd
P.O. Box 8645
DEPARTMENT OF PLANNING & ENVIRONMENT
Ann Arbor, MI 48107-8645
(734) 222-3800

Sanitary facilities have been inspected and approved by the Washtenaw County Environmental Health Division as follows:

Permit Number: **SEW2006-00351**

Description: **SOIL EVAL/SEWAGE PERMIT FOR EXISTING 4 BD 2 BATH HOME**

Township: **Ypsilanti Twp**

Premises: **1344 RIDGE**

Owner: **ARNOLD T WEIBEL**

Sewage System Approval Date : **11/13/2006**

Water Supply System Approval Date : **11/13/06**

BY: 
(Sanitarian)



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: WEL2006-00648	County: Washtenaw	Township: Ypsilanti
Well ID: 81000017419	Town/Range: 03S 07E	Section: 1	Well Status: Active
	WSSN:		
	Source ID/Well No:		
	Distance and Direction from Road Intersection: NEAREST CROSSROADS: MOTT & CLARK		
Elevation:	Well Owner: WEIBEL, ARNOLD		
Latitude: 42.26013	Well Address: 1344 RIDGE ROAD YPSILANTI, MI 48197		Owner Address: 708 SAINT ANDREWS DR/APT. 15 WILMINGTON, NC 28412
Longitude: -83.55372			
Method of Collection: GPS Std Positioning Svc SA Off			

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 126.00 ft.	Date Completed: 10/12/2006	Pump Installation Date: 10/13/2006	HP: 0.50
Well Type: Replacement	Height: 1.00 ft. above grade	Manufacturer: Aermotor	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: T12-50	Pump Capacity: 12 GPM
Casing Joint: Solvent welded/glued		Drop Pipe Length: 60.00 ft.	Pump Voltage:
Casing Fitting: None		Drop Pipe Diameter: 1.00 in.	Drilling Record ID:
Diameter: 5.00 in. to 118.00 ft. depth		Draw Down Seal Used: No	
Borehole: 8.50 in. to 126.00 ft. depth		Pressure Tank Installed: Yes	
		Pressure Tank Type: Diaphragm/bladder	
		Manufacturer: Well-X-Trol	
		Model Number: WX-203	Tank Capacity: 32.0 Gallons
		Pressure Relief Valve Installed: Yes	

Static Water Level: 25.00 ft. Below Grade	Well Yield Test: 4.00 hrs. at 15 GPM	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
			Topsoil	2.00	2.00
Screen Installed: Yes Filter Packed: Yes Screen Diameter: 5.00 in. Screen Material Type: PVC-slotted Slot Length Set Between: 25.00 8.00 ft. 118.00 ft. and 126.00 ft. Fittings: None			Sand	12.00	14.00
			Gray Clay	51.00	65.00
			Gray Clay & Gravel	4.00	69.00
			Gray Clay	49.00	118.00
			Black Shale Water Bearing W/Gravel	8.00	126.00

Well Grouted: Yes	Grouting Method: Grout pipe outside casing
Grouting Material: Bentonite slurry	Bags Additives Depth: 10.00 None 0.00 ft. to 115.00 ft.
Wellhead Completion: Pitless adapter, 12 inches above grade	

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: EDWARD WHEELER
Type: Drainfield/Dry well	Employment: Employee
Distance: 100 ft.	Pump Installer: J. STEPP
Direction: East	Contractor Type: Water Well Drilling Contractor
	Reg No: 81-2215

Abandoned Well Plugged: Yes	Business Name: Ann Arbor Well Drilling, Inc.
	Business Address: Box 163, Dexter, MI, 48130
Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

Casing Diameter: 3 in.	Casing Removed: No
Plugging Material: Bentonite chips/pellets	
No. of Bags: 0.50	Well Depth: 9 ft.

General Remarks: REMOVED DROP PIPE/FOOT VALVE FROM 3" WELL IN BASEMENT.
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No: K-11-01-100-007	Permit No: WEL2003-00187	County: Washtenaw	Township: Ypsilanti
Well ID: 81000013586		Town/Range: 03S 07E	Section: 1
Elevation:		Well Status: Active	WSSN:
Latitude: 42.26205316		Source ID/Well No:	
Longitude: -83.55275377		Distance and Direction from Road Intersection: E. OF RIDGE S. SIDE OF MOTT	
Method of Collection: Interpolation-Map		Well Owner: FANNIE MAE C/O JENNY POELMAN	
		Well Address: 280 MOTT RD	Owner Address: 1884 W. STADIUM ANN ARBOR, MI 48103

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 130.00 ft.	Date Completed: 7/9/2003	Pump Installation Date:	HP: 0.50
Well Type: Replacement	Height:	Manufacturer: Aermotor	Pump Type: Submersible
Casing Type: PVC plastic		Model Number: T1250	Pump Capacity: 10 GPM
Casing Joint: Welded		Drop Pipe Length: 40.00 ft.	Pump Voltage:
Casing Fitting: Shale packer/trap		Drop Pipe Diameter:	Drilling Record ID:
Diameter: 5.00 in. to 126.00 ft. depth		Draw Down Seal Used: No	
Borehole: 7.88 in. to 125.50 ft. depth 4.75 in. to 130.00 ft. depth		Pressure Tank Installed: Yes	Tank Capacity: 35.0 Gallons
		Pressure Tank Type: Unknown	
		Manufacturer: Sta-Rite Signature	
		Model Number: SR35	
		Pressure Relief Valve Installed: No	

Static Water Level: 20.00 ft. Below Grade	Yield Test Method: Air	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 40.00 ft. after 2.00 hrs. at 15 GPM		Topsoil	1.00	1.00
		Yellow Sand	2.00	3.00
		Yellow Sand & Gravel	5.00	8.00
Screen Installed: No	Intake: Bedrock Well	Gravel Coarse	4.00	12.00
		Blue Clay Hard	36.00	48.00
		Blue Clay Soft	9.00	57.00
		Blue Clay & Gravel	35.00	92.00
		Blue Clay Hard	17.00	109.00
		Blue Clay & Gravel	16.00	125.00
		Black Shale	5.00	130.00

Well Grouted: Yes	Grouting Method: Unknown	Geology Remarks:	
Grouting Material: Bentonite slurry	Bags: 4.00	Additives: None	Depth: 0.00 ft. to 124.00 ft.

Wellhead Completion: Pitless adapter, 12 inches above grade
--

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: DONALD BAILEY
Type: Septic tank	Employment: Employee
Distance: 100 ft.	
Direction: North	
	Contractor Type: Water Well Drilling Contractor
	Reg No: 83-2197
	Business Name: SLUSSER DRILLING CO. INC
	Business Address:

Abandoned Well Plugged: Yes	Water Well Contractor's Certification
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
Casing Removed:	Signature of Registered Contractor
	Date

General Remarks:
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737701006

Tax No:	Permit No:	County: Washtenaw	Township: Ypsilanti		
Well ID: 81000007366		Town/Range: 03S 07E	Section: 1	Well Status:	WSSN:
		Source ID/Well No:			
Elevation: 723 ft.		Distance and Direction from Road Intersection: 0.5 MILE S OF MICHIGAN AVE, ON RAWSONVILLE RD.			
Latitude: 42.2539269121		Well Owner: MICHIGAN CONSOLIDATED GAS			
Longitude: -83.5453067583		Well Address:		Owner Address:	
Method of Collection: Interpolation-Map		YPSILANTI, MI 48198		YPSILANTI, MI 48198	

Drilling Method: Rotary	Well Use: Industrial	Pump Installed: No
Well Depth: 18.00 ft.	Date Completed: 6/1/1980	Pressure Tank Installed: No
Well Type: Replacement	Height: 0.00 ft. below grade	Pressure Relief Valve Installed: No
Casing Type: Unknown		
Casing Joint: Unknown		
Casing Fitting: None		
Diameter: 26.00 in. to 17.00 ft. depth		
Borehole:		

Static Water Level: 4.00 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test:			
Yield Test Method: Unknown	Gravel Sandy	4.00	4.00
	Gravel Wet/Moist	2.00	6.00
	Sand	4.00	10.00
	Blue Clay	8.00	18.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 0.00 in.	Blank: 0.00 ft. Above
Screen Material Type:	
Slot	Length
0.00	8.00 ft.
Set Between	
12.00 ft. and 20.00 ft.	
Fittings: None	
Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags
Unknown	0.00
Additives	Depth
None	0.00 ft. to 0.00 ft.
Wellhead Completion: Unknown	

Nearest Source of Possible Contamination:	Drilling Machine Operator Name:
Type	Employment: Unknown
Unknown	
Distance	Contractor Type: Unknown
0 ft.	Reg No:
Direction	Business Name:
	Business Address:

Abandoned Well Plugged: No	Water Well Contractor's Certification
Reason Not Plugged:	
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
	Signature of Registered Contractor
	Date

General Remarks: THIS IS A DEWATERING WELL. 5 WELLS, PACK MATERIAL: PEA STONE. DISCHARGE POINT: POND 200' WEST WATER FILTERED WITH STRAW

Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737701005

Tax No:	Permit No:	County: Washtenaw	Township: Ypsilanti		
Well ID: 81000007365		Town/Range: 03S 07E	Section: 1	Well Status:	WSSN:
		Source ID/Well No:			
Elevation: 723 ft. Latitude: 42.2526689085 Longitude: -83.5452478118 Method of Collection: Interpolation-Map		Distance and Direction from Road Intersection: 800' S OF MICHIGAN AVE, 250' W OF RAWSONVILLE RD.			
		Well Owner: MICHIGAN CONSOLIDATED GAS			
		Well Address:		Owner Address:	
		YPSILANTI, MI 48197		4641 WASHTEAW ANN ARBOR, MI 48108	

Drilling Method: Rotary Well Depth: 20.00 ft. Well Type: Replacement Casing Type: Unknown Casing Joint: Unknown Casing Fitting: Drive shoe Diameter: 24.00 in. to 0.00 ft. depth Borehole:	Well Use: Unknown Date Completed: 7/22/1981 Height:	Pump Installed: No Pressure Tank Installed: No Pressure Relief Valve Installed: No
---	--	---

Static Water Level: 999.99 ft. Below Grade Well Yield Test: Pumping level 0.00 ft. after 24.00 hrs. at 0 GPM Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
	Clay Sandy	6.00	6.00
	Sand Silty	5.00	11.00
	Blue Clay	9.00	20.00

Screen Installed: Yes Screen Diameter: 0.00 in. Screen Material Type: Slot Length Set Between: 0.00 6.00 ft. 14.00 ft. and 20.00 ft.	Filter Packed: No Blank: 0.00 ft. Above Set Between:
Fittings: None	

Well Grouted: Yes Grouting Material: Unknown Grouting Method: Unknown Bags Additives Depth: Unknown 0.00 None 0.00 ft. to 0.00 ft.	Geology Remarks:
--	-------------------------

Wellhead Completion: Unknown

Nearest Source of Possible Contamination: Type Distance Direction: Unknown 0 ft.	Drilling Machine Operator Name: Employment: Unknown Contractor Type: Unknown Reg No:
--	--

Abandoned Well Plugged: No Reason Not Plugged:	Business Name: Business Address:
---	---

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks:



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800
Fax (734) 222-3930

http://eWashtenaw.org

WEL

Non-Potable

WEL2012-00324

ISSUE DATE:
5/3/2012

EXPIRE DATE:
5/3/2013

Well Permit #: WEL2012-00324

Parcel Number: K -11-01-400-010

Site Address: 3244 E MICHIGAN

Township: Ypsilanti-Twp

PROJECT NAME: NON-POTABLE WELL

PROJECT DESCRIPTION: WELL USE FOR LANSCAPE SUPPLY (ARBOR GREEN) WATER TREES, SCRUBS, & FLOWERS, ETC.

Directions to site:

Property Owner:

AGL REALTY LLC
3244 E MICHIGAN
YPSILANTI, MI 48198

Permit Applicant:

LAWRENCE CLARK
8300 DEX-CHELSEA RD
DEXTER, MI 48130
PH1 734 216-0450

This permit is to install a non-potable well or direct-push well(s) in the approved location shown on the attached plot plan and in accordance with applicable County regulations and Michigan Water Well Construction and Pump Installation Code, Part 127, Act 368.

Type of Work : Non-Potable

Type of Well : Irrigation Well

PERMIT CONDITIONS

- 1. Shall be a minimum of 50 feet from septic tanks, 60+ feet from any drainfield*, and 100 feet from Calcium Chloride storage Tanks*.
*Protected Aquifer required in order grant isolation distance deviations cited a
Submit a well log from a registered well driller.
Submit a pump record from a Registered Well Driller.
Well and associated irrigation distribution system shall be separate from any potable water distribution network.
Well head termination shall be in compliance with all applicable codes (well construction and electrical).
Well shall be equipped with a back flow prevention device at the well head to prevent back siphoning of surface water or other possible contaminants into the well.

*** This well permit is being issued as a Non-potable Well Permit for irrigation purposes only. Since the facility served is connected to a municipal water supply, no conversion to a drinking water well wil be allowed.

NOTE - this permit is NOT transferable to another property or refundable.

Director: [Signature] Date: _____

5/3/12 1:14PM

Michigan Ave -



Mich Con

prop. well

DF?

S.T.

Fuel Tanks

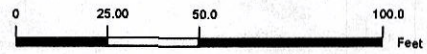
100'

CACL Tanks

oil tanks

MANAGED BY
WASHTENAW COUNTY
EQUILIZATION DEPARTMENT
1975
APPROVED BY
1975
changes without
without written
contact

N
↑
1" = 50'



1:600

5/3/2012



NOTE: Parcels may not be to scale.

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Washtenaw County Department of Public Health
 Environmental Health Division
 705 N. Zeeb Road, P.O. Box 8645
 Ann Arbor, MI 48107-8645
 Phone: (734) 222-3800 Fax: (734) 222-3930
 www.eWashtenaw.org

APPLICATION FOR NON-POTABLE WELL PROJECT

Property Tax ID #: K 11-01-400-010 City/Township: Ypsi Sec 1

Address of Property: 3244 E Mich Ave

City: Ypsilanti Zip: _____

DESCRIPTION OF PROPERTY (check one):

- Commercial Property Residential Property Municipal/Right-of-Way Property

Provide 2 copies of a scaled site plan that shows well location(s) and major features of property.

PROJECT DESCRIPTION: Well Use For landscape supply (Arbor Green)
Water Trees, Shrubs & Flowers ETC

NAME OF SITE (If well is being drilled as part of a site investigation or clean-up): _____

APPLICANT: Lawrence D Clark (Cribley) CONSULTING FIRM (If not applicant): Arbor Green Landscape

Address: 8300 Dex-Chelsea Rd Address: 3244 E Mich Ave

City: Dexter State: MI Zip: 48130 City: Ypsi State: MI Zip: _____

Work / Cell Phone #: (734) 426-4720 Work / Cell Phone #: (734) 748-2040 GME9

Alternate Phone #: (734) 216-0433 (Larry) Alternate Phone #: (734) 748-7778 (Cribley)

Email Address: _____ Email Address: _____

Contact Person: Larry Clark

By signing below, I hereby certify that the information provided is complete and accurate.

Applicant's Signature: [Signature] Date: 5-16-07 TIME: 13:45

CHECK/C.C. #	6562
CREDIT CARD	\$111.00
TOTAL	\$111.00
CREDIT CARD	\$111.00

TYPE OF NON-POTABLE WELL:

Fee per Well	Fee per Parcel	Fee per Well + Site Visit Fee	TUE
<input type="checkbox"/> Monitoring well	<input type="checkbox"/> Direct push well	<input type="checkbox"/> Industrial well	131
<input type="checkbox"/> Purge/Extraction well	<input type="checkbox"/> Geothermal/Heat Exchange Boring - Closed Loop System**	<input type="checkbox"/> Geothermal/Heat Exchange well	59.00
<input type="checkbox"/> Injection well	Geothermal/Heat Exchange Information:	<input checked="" type="checkbox"/> Irrigation well (Site visit fee not required)	59.00
<input type="checkbox"/> Dewatering well (> 25 feet in depth)	Number of Borings/Depth	REG 01 TOHYA	12:20
	** Include layout of proposed closed-loop geothermal system piping on plot plan.		

FOR OFFICE USE ONLY

Permit #: WEL12-00324

CSS: [Signature]

Deviation from Minimum Well Isolation


LOCATION: 3244 E. Michigan Ave., Ypsilanti Township
OWNER: Michigan Greenscape supplies
ADDRESS 3244 E. Michigan Ave Ypsilanti, MI 48198
PERMIT # WEL-2012-00324

A deviation from the provisions of R 325.1622, 1994 Revision to Part 127-Act 368, P.A. 1978 (Groundwater Quality Control Act) is being issued in accordance with the provisions of R 325.1613.

The deviation is to reduce the isolation distance between a irrigation well serving the business and the approximate drainfield area from 100' to approximately 60'+; and from the Calcium Chloride storage tanks from 150' to 100'+. The specific reason for these deviations are as follows:

1. The dimensions and features of the property on which the well is to be constructed do not permit location of the well to be in compliance with the specified minimum distance.
2. The depth of the well, including the requirement provision of penetrating a protected aquifer, will provide equivalent protection of public health.
3. The well is drilled for irrigation purposes only and shall not be used as a potable water supply. The property upon which this well is drilled is served by a municipal water supply.

Issuance Date: 5-3-12

Issued By: 

cc: MDEQ Groundwater Section
Deviation File



Water Well And Pump Record

Completion is required under authority of Part 127 Act 368 PA 1978.



Import ID:

Failure to comply is a misdemeanor.

Tax No:		Permit No: 2012 00324		County: Washtenaw		Township: Ypsilanti		
Well ID: 81000019634				Town/Range:	Section:	Well Status:	WSSN:	Source ID/Well No:
				03S 07E		1	Plugged	
Elevation:				Distance and Direction from Road Intersection:				
Latitude: 42.25414				Well Owner: ARBOR GREEN LANDSCAPING				
Longitude: -83.5472				Well Address:		Owner Address:		
Method of Collection: GPS Std Positioning Svc SA Off				3244 E. MICHIGAN AVE		3244 E. MICHIGAN AVE		
				YPSILANTI, MI 48197		YPSILANTI, MI 48197		

Drilling Method: Rotary
Well Depth: 160.00 ft. Well Use: Irrigation
Well Type: Dry Hole Date Completed: 5/10/2012
Casing Type: None Height: 0.00 ft. below grade
Casing Joint: Solvent welded/glued
Casing Fitting: None
Diameter:
Borehole: 9.00 in. to 102.00 ft. depth
5.87 in. to 108.00 ft. depth
4.87 in. to 160.00 ft. depth

Pump Installed: No
Pressure Tank Installed: No
Pressure Relief Valve Installed: No

Static Water Level: 0.00 ft. Below Grade
Well Yield Test: Yield Test Method:

Formation Description	Thickness	Depth to Bottom
Yellow Sand W/Clay	5.00	5.00
Gray Sand	5.00	10.00
Gray Clay	91.00	101.00
Black Shale	34.00	135.00
Gray Shale	25.00	160.00

Screen Installed: No Intake:

Grouting Material	Bags	Additives	Depth
Bentonite slurry	4.00	None	0.00 ft. to 75.00 ft.
Neat cement	12.00	None	75.00 ft. to 160.00 ft.

Geology Remarks:

Wellhead Completion: Other

Nearest Source of Possible Contamination:
Type Distance Direction

Drilling Machine Operator Name: KURT WING
Employment: Employee

Abandoned Well Plugged: No
Reason Not Plugged: Other

Contractor Type: Water Well Drilling Contractor Reg No: 81-2014
Business Name: Cribley Drilling Co Inc
Business Address: 8300 Dexter Chelsea, Dexter, MI, 48130

Water Well Contractor's Certification
This well/pump was constructed under my supervision and I hereby certify that the work complies with Part 127 Act 368 PA 1978 and the well code.
Signature of Registered Contractor Date

General Remarks: DRY HOLE, NO CASING SET GROUTED WITH BENSEAL AND NEAT CEMENT MATERIAL
Other Remarks: Grouting Method:NO CASING- GROUTED BOREHOLE, Wellhead Completion:NO CASING, Not Plugged Reason:NONE



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 705 N. Zeeb Rd., P.O. Box 8645 Ann Arbor, Michigan 48107-8645
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 http://eWashtenaw.org

SAR 5/27/10 Sm.

SEW2010-00056

SEW Replcmnt W/SEV	PRJ2010-00128	Sewage Permit #: SEW2010-00056
	ISSUE DATE: 4/26/2010	Parcel Number: K -11-01-100-003
	EXPIRE DATE: 4/26/2012	Site Address: 3080 MOTT
		Township: Ypsilanti Twp

PROJECT NAME: TIME OF SALE

Description: SEWAGE PERMIT FOR AN EXISTING 3 BEDROOM 1 BATH SFR

Directions to site: NEAREST CROSSROADS: RIDGE & MICHIGAN

Property Owner:

FANNIE MAE
 3080 MOTT RD
 YPSILANTI, MI 48198

Permit Applicant:

BOLLINGER SANITATION & EXC INC
 6950 WERKNER RD
 CHELSEA, MI 48118
 PH1 734 433-1831
 MOB 734-260-2064

This permit is for a residential (>= 1 acre) dwelling with 3 bedrooms :

Type of Disposal System: **Conventional**
 Bed Size: 28 Feet By 44 Feet
 Bed Area: 1,232 Sq. Ft.

Number of Bedrooms: 3 / Baths: 1.0
 PreTreatment: N/A
 Drainfield Elevation: At Grade

Type of Flow: **Gravity**
 Time of Sale Related: **Yes**
 Effluent Filter: **Not Required**

Tank Tightness Test: **Not Required**
 Type of Parcel: **Metes and Bounds / Residential >= 1 acre**
 Type of Water Supply : **Residential**

[2] New Septic Tank(s)
 [0] Existing Septic Tank(s)

Total Capacity (new): 2,000 gallons
 Total Capacity (existing): 0 gallons

The system is to be constructed in accordance with the permit condition below, the approved plot plan, the General Construction Requirements, and the Engineering Guidelines for Onsite Sewage Systems. This permit must be posted on-site in the vicinity of the septic system installation. No changes to this permit may be made unless authorized by the Health Officer. The system must be installed by a Washtenaw County Certified Contractor.

PERMIT CONDITIONS

1. Maintain at least 100 feet of isolation from the new drainfield to all wells and 50 feet from septic tank(s) to all wells.
2. Excavate to sand at 2-3 feet.
3. Call for excavation inspection prior to backfilling. Any wet excavations should be pumped dry to allow for inspection and soils should be "roughed up" to allow for better drainage.
4. Lay bottom of stone no lower than EXISTING GRADE grade in the drainfield area.
5. Complete the installation of the septic system and call for inspection prior to covering any portion.
6. Connect all Sanitary lines into the new sewage disposal system.
7. Raise plumbing in home to a height sufficient to meet the required elevations of the new sewage disposal system. -see note on recur
8. Properly abandon old septic tank by thoroughly pumping contents and crushing. -see note on recur
9. Properly abandon / remove old fuel tank.
10. Call for final grading inspection.
11. The property consists of (3) three smaller lots that shall be kept under common ownership.

This permit is the sole property of the owner. This permit may be transferred to a new property owner if a written request by both parties is submitted to this division prior to the permit expiration date. NOTE - this permit is NOT transferrable to another property.

Sanitarian:

Date: 4/26/10

Issue Date: 4/26/2010
 Expire Date: 4/26/2012

Approved Statics
 Todd Miller

Learn the

- for J. Bollinger - 2 men paid to locate old tank. must to locate, could be under deck 10' not simply a by well.
- for J. Bollinger discussion all plumbing properly rated + connected to septic system
- cover old tank - covered

TA Statics
 Final Grade

- Tanks inspected all to cover
- well isolation 100' +
- location pop-pla
- depth ± 2'
- Fall 28 x 44
- 5/17/09
- Excavation - Trip

#146

White Tag

- TA Statics
- (2) 1000 TANKS - old
 - set up to OF
 - 7 lines, 40' long
 - Blowing / Stone - old
 - while TBL
 - abandon old tank
 - straw OF
 - All sewage + gray thru to septic
 - Cover OF - call for fill trap

Fannie MAS. (SW 10-00056)
3080 Mett
Ypsilanti, MI 48198

Mott Rd

* Raise fence planting

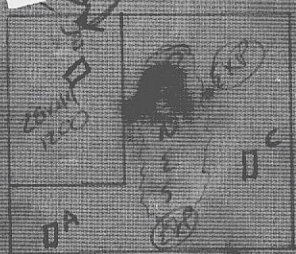
Garage

Binned Fuel Tank

3080 Mett

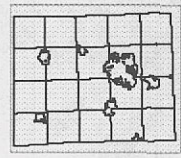
1000 Tank
1000 Tank

Point of Stone
AT Circle

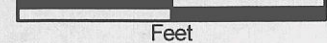


TX 5724 1020 AS BUILT

Location Map



0 40 80



Feet

1 inch = 50 feet



Geographic Information System

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NOTE: PARCELS MAY NOT BE TO SCALE

GIS Map Print

Aerial Date: 4/2002
Date Printed: 04/21/2010

THIS MAP REPRESENTS PARCELS AT THE TIME OF PRINTING. THE OFFICIAL PARCEL TAX MAPS ARE MAINTAINED SOLELY BY THE WASHTENAW COUNTY EQUALIZATION DEPARTMENT AND CAN BE OBTAINED BY CONTACTING THAT OFFICE AT 734-222-6662.

SOILS EVALUATION NOTES

SEV2010-
SEW2010-00056

Date: 4/26/10

Address: 3080 Matt Parcel: K-11-C-100003 Twp. Upsalanti

For: New Construction Replacement field Sanitarian: TR Excavator: Bollinger

Additional people onsite:

RESULTS: APPROVED DENIED Well First Area: YES NO Tank first: YES NO

Oversized field required: YES %, NO Mottling observed: YES @ 24" NO

Approvable soils found from: 2 ft. to: 3 ft. Approval letter issued in field: YES NO

Set header invert 4" ABOVE BELOW grade Basement plumbing: YES NO UNKNOWN

COMMENTS: T.O.S Replacement 3 Bedrm, 1 Bath, Install (2) new 1,000 tanks + 12x12 soft DF, Corrected electric plumbing in Basement. Gravity is Achievable. Abandon old TANK, Abandon Fuel Tank, WASSEP Soils

TEST PIT DESCRIPTIONS:

(A) 0-12" TS, sandy
12"-2' Brn Loamy sand
2'-5.5' mottled moist sand
5.5' + Grey saturated sand & gravel
-motts 2'
-H2O 4'
-Bottom stone at grade
Comments
1.) Install - (2) 1000 TANKS
- (1) 28x44 DF
- Bottom stone at grade
2.) Raise + reroute plumbing
3.) Gravity achievable

(B) 0-14" TS
14"-24" Brn Dry L. sand
24"-56" moist mottled red sand
56" + Grey saturated sand
-motts 24"
-H2O 4'
-DF install / Bottom stone at grade
4.) Abandon old TANK
5.) Abandon 275 Fuel TANK
6.) 3 small holes shall remain
Under common ownership!

(C) 0-12" TS
12"-18" Dry Brn L. sand
18"-36" mottled Brn Loamy sand
36"-5' Loamy saturated sand + gravel
-motts 18"
-H2O 36"
-Bottom stone 6" Above Grade



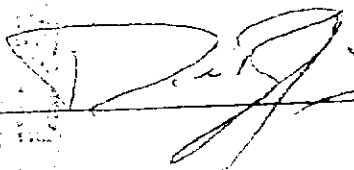
Washtenaw County Environmental Health Division
Sewage System Contractor
Affidavit of Installation

I, Donald W. Bollinger, am a Certified Washtenaw County Sewage System Installation/Repair Contractor. My certification number is 146. I hereby certify that I performed the following work in accordance with all permit conditions and Washtenaw County Construction Guidelines.

Type of work:

Plumbing rerouted to New Septic System.
Fuel oil ^{tank} has been removed ^{from} Site

This work was performed at the address of 3080 Mott Rd. under permit number 10-00056. I completed this work on 5/26/10.

Signed: 

Date: 5/26/10



FAILURE EVALUATION WORKSHEET

Address: 3080 Mott Township: Ypsilanti

Purpose of visit: T.O.S Replacement

Approximate age of current system: _____ years

Permitted: ___ yes no
If yes, date permit issued: _____ Approval date: _____

Date(s) of previous repairs: _____

- Final treatment area:
- Bed (_____ square feet)
 - Modified Fill
 - Trench (_____ trenches _____ long _____ wide)
 - Other none found

Septic tank(s):
#1 7 gals. unable to locate drain Pump chamber: NA gals.
#2 _____ gals. soils

Soil texture: sand loam Slope: 0% (approx. %)
Water table: 2' below (depth below field)

List probable cause(s) for failure (check all appropriate):

<input type="checkbox"/> Leaky plumbing	<input type="checkbox"/> Poor soils
<input type="checkbox"/> Lack of maintenance	<input type="checkbox"/> Construction-related
<input type="checkbox"/> Groundwater infiltration in field	<input type="checkbox"/> Damage (vehicle, etc.)
<input type="checkbox"/> Groundwater infiltration in tank(s)	<input type="checkbox"/> Landscaping
<input type="checkbox"/> Undersized	<input type="checkbox"/> Poor site drainage
<input type="checkbox"/> Hydraulic overload	<input type="checkbox"/> Chemical/medicine disposal to system
<input type="checkbox"/> Septic tank(s) not pumped	<input type="checkbox"/> Poor design
<input type="checkbox"/> Irrigation system	<input checked="" type="checkbox"/> Other: <u>none</u>

Sanitarian: Todd Alvar Date: 4/26/10



ENVIRONMENTAL HEALTH DEPARTMENT

705 North Zeeb Road
P.O. BOX 8645
ANN ARBOR, MI 48107-8645

APPLICATION FOR RESIDENTIAL PROPERTY

Phone: (734) 222-3800
FAX Number: (734) 222-3930
Website: www.ewashtenaw.org

Permits will not be issued without correct address assigned by the Township or local utilities company.

Property Tax ID #: K11-01-100-003 Township: Ypsilanti Section #:

Address of Property: 3080 Mott Rd
(for soil evaluations, provide nearest existing address, including the direction)

City: Ypsilanti, MI Zip: 48198

Nearest Two Crossroads: N of Prescott East of Ridge

DESCRIPTION OF PROPERTY (check one):

[X] Metes & Bounds Acres: 2.11 For permits, provide 2 copies of a scaled site plan (1" = 40'), 3 certified surveys / legal descriptions.

[] Subdivision Name: Lot #: For permits, provide 2 copies of a scaled site plan (1" = 40').

TYPE OF BUILDING / STRUCTURE (check one):

[] New: Single family dwelling with bedrooms, bathrooms (including rough-in plumbing).

[X] Existing: Single family dwelling with 3 bedrooms, 1 bathrooms. (If an addition, total # of bedrooms bathrooms #).

[] Other:

TRANSACTION #2430
CK/CP # 3845
SEPTIC 48200 \$126.00
GISFEE 48280 \$5.00
TOTAL \$431.00
CHECK \$431.00
CLERK3 NO.058616
04/19/2010 MON 11:42AM

APPLICANT: Bollinger Sanitation & Exc. Inc. OWNER (if not applicant): Fannie Mae

Address: 6950 Werkner Rd Address: 1884 W. Stadium Blvd

City: Chelsea State: MI Zip: 48118 City: Ann Arbor State: MI Zip: 48103

Work / Cell Phone #: 734 433-1831 Work / Cell Phone #: 734 741-4072

Alternate Phone #: () Alternate Phone #: ()

Applicant's Signature: Date:

SERVICE(S) APPLYING FOR:

- [X] Soil Evaluation
[X] Permits(s)
[] Addition / Remodeling Review
[] Seasonal High Water Table Evaluation
[] Non-Conformance Plan Review/Inspection (T.O.S.)
[] Feasibility Study For On-Site Sewage Disposal
[] Other:

TYPE OF SEWAGE / WATER SUPPLY SYSTEM(S) (check all that apply):

- Sewage Disposal: [] New OR [X] Replacement
Conventional Gravity OR
Conventional Pumped
Sand Filter System
Modified Fill-Type
Other:
Municipal
Water Supply: [] New OR [X] Replacement
Rotable Water (Home / Barn)
Other:
Municipal

PR10-00128

FOR OFFICE USE ONLY
Soil Evaluation #:
Well Permit #:
Sewage Permit #: 10-00056
SHWTE #:
Addn. Rev #:
Sanitarian:
CSR'S Initials: JH



CERTIFICATE OF APPROVAL

Washtenaw County Environmental Health Division
705 N. Zeeb Rd.
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800

Sanitary facilities have been inspected and approved by the Washtenaw County Environmental Health Division as follows:

Permit Number: **SEW2010-00056**

Description: **SEWAGE PERMIT FOR AN EXISTING 3 BEDROOM 1 BATH SFR**

Township: **Ypsilanti Twp**

Premises: **3080 MOTT**

Owner: **FANNIE MAE**

Sewage System Approval Date : **5/26/2010**

Water Supply System Approval Date : *EXIST*

BY: _____

(Sanitarian)

A handwritten signature in black ink, appearing to read "Todd [unclear]", written over a horizontal line.



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
 Ann Arbor, Michigan 48107-8645
 Phone (734) 222-3800
 Fax (734) 222-3930
<http://eWashtenaw.org>

<h1>TOS</h1>	TOS2010-00049	Time Of Sale Permit #: TOS2010-00049
	<u>REC'D DATE:</u> 1/28/10 <u>EXPIRE DATE:</u> 5/27/2011	Parcel Number: K -11-01-100-003 Site Address: 3080 MOTT Township: Ypsilanti Twp

Owner

FANNIE MAE
 3080 MOTT RD
 YPSILANTI, MI 48198

Applicant

EDWARD SUROVELLE REALTY
 C/O JEANETTE STEVENS
 1898 STADIUM BLVD
 ANN ARBOR, MI 48103
 FAX 734-665-9918
 PH1 734-741-4072

TOS Inspector

STEVE WHEELER
 7446 JOY ROAD
 DEXTER, MI 48130
 PRI 734-426-3850
 EML a2well@yahoo.com
 FAX 734-426-1692

<u>ACTION DESCRIPTION</u>	<u>DATE1</u>	<u>DATE2</u>	<u>DATE3</u>	<u>DISP</u>	<u>DONE BY</u>
TOS - Both			1/28/10	DONE	SLR
Sewage Only Denial			1/28/10		KMG
TOS Review			1/28/10		KMG
Denial Letter Sent			1/28/10	DONE	KMG
CAP Required	1/28/10	2/27/10			
CAP Approved			5/27/10	DONE	SM
CA Required	5/27/10	11/23/10			
Corrective Action Authorizatio			5/27/10	DONE	SM
Authorization Sent			5/27/10	DONE	SM



**WASHTENAW COUNTY
ENVIRONMENTAL HEALTH DIVISION
DEPARTMENT OF PUBLIC HEALTH**

May 27, 2010

EDWARD SUROVELLE REALTY
C/O JEANETTE STEVENS
1898 STADIUM BLVD
ANN ARBOR, MI 48103

RE: Approval of authorization for sale of
property located at 3080 MOTT,
YPSILANTI
Case Number: TOS2010-00049

To whom it may concern,

In light of the corrections made and other information contained in the inspection report of January 21, 2010, this office has determined that the water supply and sewage disposal systems inspected are in substantial conformance with the Washtenaw County Regulation for the Inspection of Residential Onsite Water Supply and Sewage Disposal Systems at Time of Property Transfer and the property is authorized for sale.

This AUTHORIZATION is valid until **May 28, 2011** and does not imply that the system(s) meet all current construction standards. Further, this authorization does not imply or express any warranty or guarantee as to the future function and suitability of the inspected systems. The referenced evaluation was performed based on past use of said system(s) and any change in future use may change the operational status of the inspected systems.

It is encouraged that all owners of the subject property maintain a copy of this AUTHORIZATION with other important home records. Any questions regarding this letter should be directed to the Washtenaw County Department of Planning and Environment.

Sincerely,

Steve Manville
Manvills@ewashtenaw.org
734-222-3895



**WASHTENAW COUNTY
ENVIRONMENTAL HEALTH DIVISION
DEPARTMENT OF PUBLIC HEALTH**

January 28, 2010

EDWARD SUROVELLE REALTY
C/O JEANETTE STEVENS
1898 STADIUM BLVD
ANN ARBOR, MI 48103

RE: DENIAL of authorization for sale of
property located at 3080 MOTT, YPSILANTI
Case Number: TOS2010-00049.

To whom it may concern,

On January 28, 2010, this office received an inspection report for the well and/or septic system at the above referenced address. This report was reviewed to determine compliance with Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. Based on the information submitted it has been determined that the system(s) is/are are not adequate for their intended use.

As the result of this review, this PROPERTY IS NOT AUTHORIZED FOR TRANSFER OF THE DEED.

This denial is the result of the following deficiencies:

1. No drainfield was found during the inspection.
2. Drywells are used for sewage disposal for several plumbing fixtures. Dry wells do not provide adequate treatment of sewage.

A corrective action plan must be submitted to Environmental Health within thirty (30) days. Recommended solutions are:

1. Obtain a permit and replace the sewage system. A permit application is required and the fee for a replacement permit is \$431, as a soil evaluation is required. In addition, all plumbing discharges must be connected to the approved sewage system.

All work to replace/repair the sewage system must be performed by a Sewage System Installation/Repair Contractor certified by Washtenaw County. It is recommended that once a permit has been issued, the owner receive competitive bids and enter a contract for the sewage system replacement. This contract can be used as the basis for establishing an escrow account if requested.

THIS HOUSE MUST REMAIN VACANT UNTIL THE REPLACEMENT SEWAGE SYSTEM IS PERMITTED, INSTALLED, AND APPROVED BY THIS DEPARTMENT.

Authorization for sale can be issued after both of the following conditions have been met:

1. The corrective action plan is approved by the Environmental Health office.
2. The corrective action is completed -or- a performance contract has been signed and an escrow

705 North Zeeb Road, P.O. Box 8645 Ann Arbor, Michigan 48107-8645

Phone: (734) 222-3800

Fax: (734) 222-3930

www.eWashtenaw.org

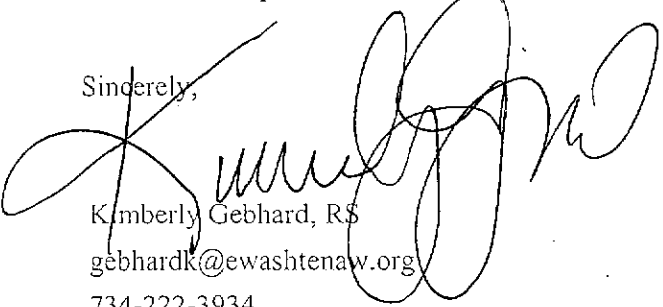
account of 1½ times the contract amount has been established to guarantee performance. A processing fee (currently \$55) must be paid before an escrow closing will be authorized. A site visit fee (currently \$108) will be charged for any corrective action that requires a site visit from this office.

Any owner or interested party who is adversely affected by any decision may request an administrative conference by contacting H. Leon Moore, R.S, Rural Division Director at (734) 222-3848. If concerns are not resolved during the conference, the decision may be appealed to the HCBA/PHAC. A request for hearing before the HCBA/PHAC must be made within thirty (30) days and must be accompanied by a \$384 appeal fee.

In addition, the following recommendations are made for the care and maintenance of the systems:

1. The buried fuel oil tank is a potential contamination source to the water supply well, which is located ± 60 feet away. Spilled fuel oil can reach the water supply through leaking underground pipes and spills when filling the tank. Care should be taken to avoid spills and to clean up any spills quickly and thoroughly.

Sincerely,



Kimberly Gebhard, RS
gebhardk@ewashtenaw.org
734-222-3934



REPORT OF RESIDENTIAL ONSITE WATER SUPPLY AND SEWAGE DISPOSAL INSPECTION

THIS REPORT IS SUBMITTED AS REQUIRED BY THE WASHTENAW COUNTY REGULATION FOR THE INSPECTION OF RESIDENTIAL ONSITE WATER AND SEWAGE DISPOSAL SYSTEMS AT TIME OF PROPERTY TRANSFER REGULATION
This form is to only be completed by inspectors certified by the Washtenaw County Environmental Health Division.
Revised 1/6/09

Date Inspected: 1/21/2010

Owner Name/Property Address: FANNIE MAE
3080 MOTT ROAD
YPSILANTI, MI 48198

97
-83
14

Township: YPSILANTI Tax I.D. #: K-11-01-100-003

Applicant Name (If other than owner): EDWARD SUROVELL/J. STEVENS

Mailing Address (If other than above): 1884 W. STADIUM
ANN ARBOR, MI 48103

Phone #: 734-741-4072 Fax #: 734-665-9918

TRANSACTION	#405
CK/CC #	570
TOS 48230	\$110.00
TOTAL	\$110.00
CRED CARD	\$110.00
CLERK3	NO. 055012

01/28/2010 THU 03:37PM #01

Age of Home: 83 years Current Number of Residents: 0
Number of Bedrooms: 3 or
Number of Bathrooms: 1 Time of Vacancy: months

I, STEVEN WHEELER, being a Washtenaw County Certified Inspector, inspected the onsite water supply and/or onsite sewage disposal system indicated above. I certify that this inspection was done within the guidelines established by Washtenaw County and was completed in a thorough and complete manner. Further, I certify that this report includes all knowledge that I have concerning the operation and function of said system(s).

Steven Wheeler
(Signature) (Date) 1/28, 2010

Certification Number: 101

Office Use Only: Case #: TOS 20 10-00049

WATER SUPPLY SYSTEM

Age of Well: 7 Permit #: 03-00025 Approval Date: 4/23/03

Well Depth: 76 ft. Verified from: Well Log County Records
 Driller Owner

Pump Type: Submersible
 Deep Well Jet *
 Shallow Well Jet*
 Other(_____) *
*Protected Suction Line y/n

Water Treatment in Use	
<input checked="" type="checkbox"/> Softener	<input type="checkbox"/> Sediment Filter
<input type="checkbox"/> Iron Removal	<input checked="" type="checkbox"/> Reverse Osmosis
<input type="checkbox"/> Gas Removal	<input type="checkbox"/> Chemical
<input type="checkbox"/> Ozonation	<input type="checkbox"/> Other

Cycling: Long (>90 sec.)
 Adequate (30-90 sec.)
 Short (<30 sec.)

Yield (approx.): 7+ gpm
Casing Diameter: 5 inches

Termination: Above grade (12+ inches above ground)
 Basement offset (____ inches above floor)
 Drained Pit (____ inches above floor)
 Undrained Pit
 Dug Well
 Not Found/Buried

Well cap: structurally sound
 cap loose
 cap missing
 cap loose w/ insects
 cap/conduit/casing damaged

Venting: not vented
 screened vent
 unscreened vent
 unscreened vent w/ insects

Location: on property
 off property

If shared well: use agreement
 no use agreement

of other wells on property: _____

Complete for each additional well:

Use: _____

Diameter: _____

In use & produces water _____ y/n

Separate from potable water supply _____ y/n

Isolation Distances (if not met)

Drainfield (<100ft) _____ ft

Septic Tank (<50 ft) _____ ft

Grinder pump (<50ft) _____ ft

Sewer Line (<50ft) _____ ft

HazMat Storage (<100ft) _____ ft

Fuel Oil Tank (<100ft) +60 ft (Tank buried Y y/n In basement _____ y/n)

SEWAGE DISPOSAL SYSTEM

Permit #: _____ Approval Date: _____ Location: _____ on/off property

Municipal/Sanitary Sewer Available: _____ y/n

Not Connected to System

- toilet(s)
- sink(s)
- shower(s)
- tub(s)
- laundry
- other

Connected to System

- footing drains
- water treatment discharge(s)
- dehumidifier(s)
- storm water drain(s)
- other

TANK(S) SPECIFICATIONS

Number: _____ Total capacity: _____ gal Verified by: _____ county records
_____ pumping receipts

Last pumped: _____ years ago

Isolation Distance (if not met):
surface water (<25 ft) _____ y/n
nearest well (<50ft) _____ y/n

Accessible for pumping: _____ y/n

Tank access within 18" of grade: _____ y/n

Complete septic tank inspection or attach Septic Tank Maintenance Report if septic tanks have not been approved:

Tanks structurally sound: _____ y/n

Effluent above outlet: _____ y/n

Outlet type: _____ vented elbow _____ tee _____ baffle _____ effluent filter _____ none

Effluent filter: _____ y/n/unknown

Pre-Treatment Unit: _____ y/n

List type: _____
(i.e. sand filter, scat, advantex, etc.)

Pump-type system: _____ y/n

Alarm test: _____ OK/silent/on/other _____
(Turn circuit on if necessary) (Note unusual conditions i.e. circuit off, etc.)

DISPOSAL AREA

Number: none found
 one
 multiple/one connected
 multiple connected
 multiple w/diverter *

*Note: If multiple fields connected with diverter valve, record condition of field in use on next page and use site plan to show size and condition of other field(s).

Type: Bed-conventional } Size of bed: _____ sq. ft.
 Bed-deep excavation }
 Bed-raised } Verified by: County permit
 Modified fill } Field measurement

Trenches Number of Trenches: _____ Trench width: _____ ft.
Trench length: _____ ft.
 Dry well
 Other

DRAINFIELD CONDITION (Show location & condition of each test hole on site plan)

Sewage exposed (including back-up, direct discharge, etc.): _____ y/n

Depth of cover: _____ to _____ inches Encroachment on field: _____ y/n
(minimum) (maximum) (Show type and location on site plan)

Saturation of field: Sludge/Biomat in field:
 none none
 <50% below tile holes <50% below tile holes
 >50% below tile holes >50% below tile holes
 <50% above tile holes <50% above tile holes
 >50% above tile holes >50% above tile holes

Tile: plastic Isolation Distances (if not met):
 concrete/clay no blockage nearest well (<100ft) _____
 concrete/clay <50% blockage surface water (<50ft) _____
 concrete/clay >50% blockage

Sandy soil under field: _____ y/n
Surface water diverted from system: _____ y/n
Woody vegetation on/within 5 ft of system: _____ y/n
Automatic sprinklers on/near system: _____ y/n

Based on data presented in this inspection report, the Washtenaw County Environmental Health Division office will issue a letter stating whether the water supply and sewage system meets minimum standards for sale of the property. The following observations or recommendations for extending the life of these systems are in addition to any requirements addressed by the Environmental Health Division office:

Inspector Observations/Comments/Recommendations:

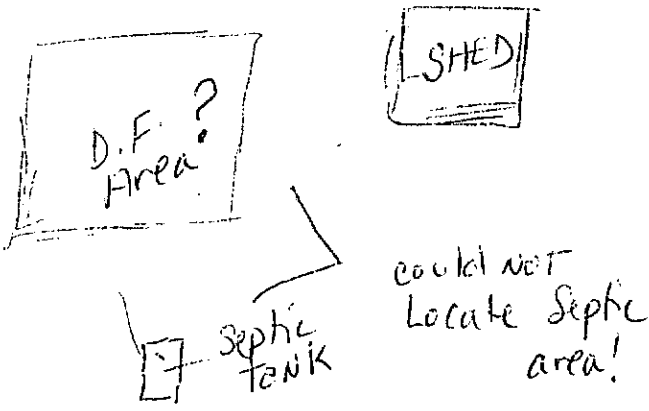
I DID A WELL & SEPTIC INSPECTION AT 3080 MOTT ROAD ON 1/21/10. ACCORDING TO WELL PERMIT 03-00025. THE SEPTIC FIELD IS IN THE VERY BACK OF THE PROPERTY. I WAS UNABLE TO LOCATE A SEPTIC TANK OR THE FIELD. THERE IS A SEPERATE DRAIN LINE WHERE THE KITCHEN SINK & DISHWASHER DISCHARGE INTO (POSSIBLY A DRYWELL?). THE WASHING MACHINE GOES TO THE SUMP CROCK, WHICH DISCHARGES OUT THE SIDE OF THE HOUSE (POSSIBLE 2ND DRYWELL). THE WELL SYSTEM APPEARS TO BE WORKING PROPERLY. THERE IS A VENT PIPE AT THE SIDE OF THE HOUSE, APPROX. 60' AWAY FROM THE WELL - POSSIBLE BURIED FUEL TANK.

SAMPLE RESULTS: ARSENIC: <0.001 NITRATES: <0.10

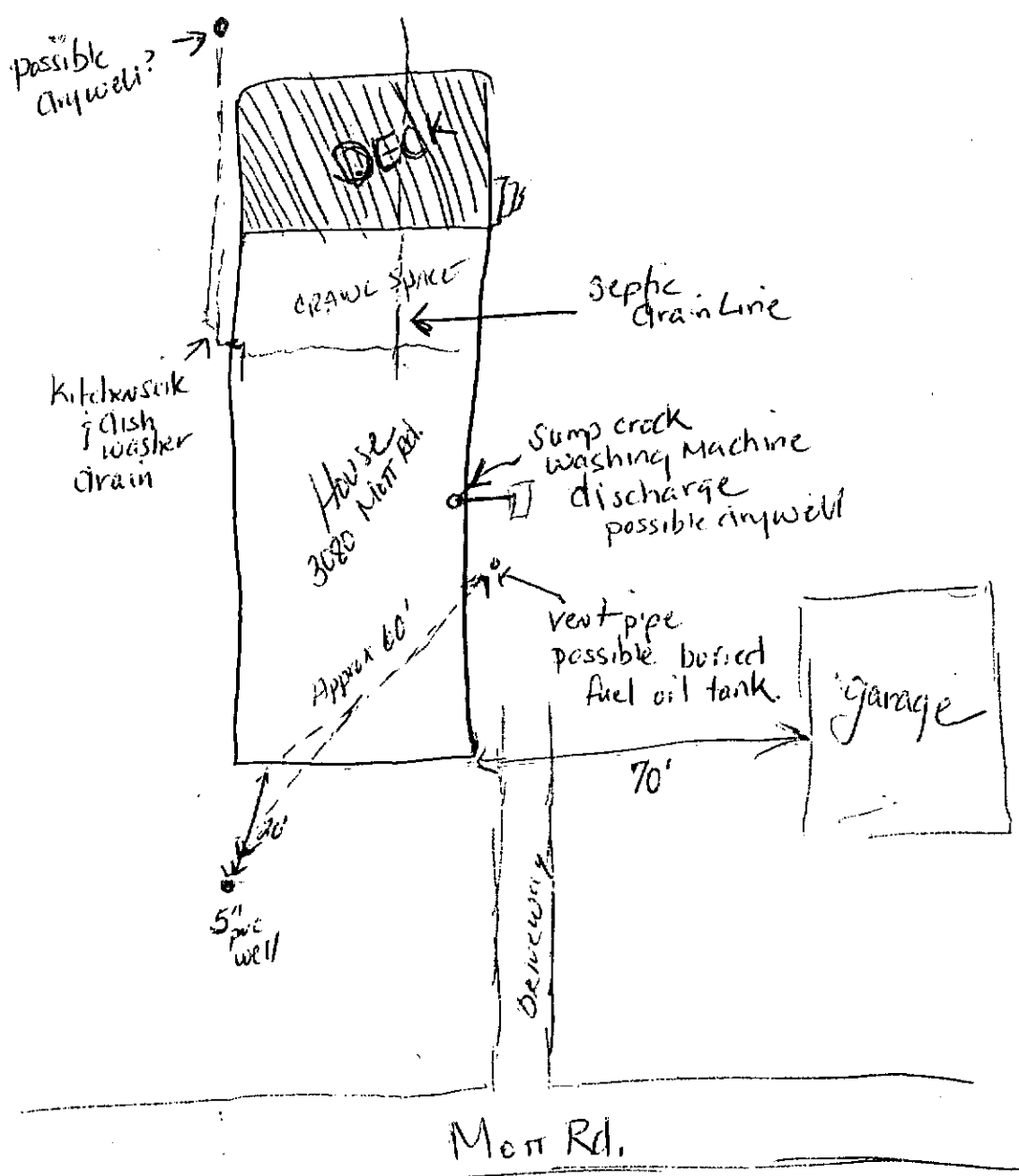
BACTERIA: 0

ATTACH REQUIRED WATER SAMPLES (COLIFORM BACTERIA, NITRATES, AND ARSENIC) AND SITE PLAN TO REPORT!

Inspector:
Steve Wheeler
3080 Mott Rd
Ypsi twp
1-21-2010
N ↓



could not
locate septic
area!



BACTERIOLOGICAL ANALYSIS OF WATER

Please return sample by 3:00 p.m. Monday thru Friday to:

Washtenaw County Environmental Health
705 North Zeeb Road
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800
www.ewashtenaw.org



RESIDENTIAL

TOS

Well Permit # 2003-00025

Date Collected: 1-22-2010 Time Collected: 12:30

Collected by: A2 well

At: 3080 Mott (Address) Ypsilanti (Township)

Sampling Point: Kitchen Faucet
(e.g. Kitchen faucet, outside faucet, hand pump, pressure tank)

Check on: Private System / Public System

Well Data: Age 7yr Diameter 5" Depth 76'

Well Owner: Edward Sunwell

Daytime Phone No: 426-3850 & A2well

Fax No: 426-1692

Report Results To:

Name: Ann Arbor Well Drilling

Address: 7446 Joy Rd
Dexter MI 48130
City State Zip

Laboratory Results:

Sample Received by Lab 01/22/10 330 Date/Time AVB 172457.0080 Lab

Coliform Absent 0 Coliform

TRANSACTION	#133
CK/CC #	9973
WATER 47900	\$1.50
WATER 47900	\$13.50
TOTAL	\$15.00

Safe Sample

Coliform Present 0 Coliform 116.00 CRED CARD

If Coliform Present, E-Coli Level: 0 E-Coli 01/15/2010 FRI 04:31PM Chlorinate & Resample NO. 05-1538 #01

Lab Notes: JAN 25 2010

Analyst KS Analyst Date 1-23-10

(OVER)
PRINTED ON RECYCLED PAPER

Amh

CHEMICAL ANALYSIS OF WATER

Please return sample by 3:00 p.m. Monday thru Friday to:

Washtenaw County Environmental Health
705 North Zeeb Rd
P.O. Box 8645
Ann Arbor, MI 48107-8645
(734) 222-3800
www.ewashtenaw.org

COMMERCIAL

RESIDENTIAL

TIME OF SALE

WSSN # _____ Well Permit # 2003-00025

Date Collected: 1-28-2010 Time Collected: 12:30

Collected by: A2 well

At: 3080 Nott (address) Ypsilanti (city)

Sampling Point: Kitchen faucet (e.g. kitchen faucet, outside faucet, hand pump, pressure tank)

Treated? Untreated?
Well Data: Age 7yr Diameter 5 Depth 70'

Well Owner / Facility: Edward Suravell

Daytime Phone No: 426-3850 A2 well

Fax No: 426-1692

Report Results To:

Name: Ann Arbor Well Drilling

Address: 7446 Joy Rd

Dexter City Mi State 48130 Zip

Laboratory Results:
Sample Received by Lab 01/24/10 Date/Time 3:20 Lab No 1724570080

CHEMICAL INFORMATION:		TRANSACTION #132
<input checked="" type="checkbox"/> ARSENIC	*RESULTS <0.001	CK/CC # 9973
<input checked="" type="checkbox"/> NITRATES	<0.10	WATER 47900
<input type="checkbox"/> HARDNESS		FLUORIDE \$29.00
<input type="checkbox"/> OTHER: <u>RESIDUAL</u>		LEAD CRED CARD \$29.00
		CLERK1 NO 054537
		GENERATES FRI 04:30PM #01
		OTHER _____

All chemical results are in milligrams per liter (mg/l) unless otherwise noted.
Date 01/24/10 Analyst AW
*Check chart on back for explanation of your results.

(OVER)
PRINTED ON RECYCLED PAPER

AW



Washtenaw County Environmental Health Department

705 N. Zeeb Rd., P.O. Box 8645
Ann Arbor, Michigan 48107-8645
Phone (734) 222-3800
Fax (734) 222-3930
http://eWashtenaw.org

TOS

TOS2013-00870

REC'D DATE:

10/23/13

EXPIRE DATE:

10/24/2014

Time Of Sale Permit #: TOS2013-00870

Parcel Number: K -11-01-100-003

Site Address: 3080 MOTT

Township: Ypsilanti Twp

Owner

VINCENT C GUSTY
3080 MOTT RD
YPSILANTI, MI 48198

Applicant

SARA MADDOCK
2555 PLYMOUTH RD
ANN ARBOR, MI 48105
FAX 734-747-6811
EML SARA@SARAMADDOCK.COM
MOB 734-649-1180

TOS Inspector

KEN BAKER
6690 JOY RD
DEXTER, MI 48130
EML kenwbaker@aol.com
PRI (734) 426-5883
FAX (734) 426-4866
MOB (734) 216-4672

Table with 6 columns: ACTION DESCRIPTION, DATE1, DATE2, DATE3, DISP, DONE BY. Rows include TOS - Both, TOS Review, and Authorization Sent.



REPORT OF RESIDENTIAL ONSITE WATER SUPPLY & SEWAGE DISPOSAL INSPECTION

THIS REPORT IS SUBMITTED AS REQUIRED BY THE WASHTENAW COUNTY REGULATION FOR THE INSPECTION OF RESIDENTIAL ONSITE WATER AND SEWAGE DISPOSAL SYSTEMS AT TIME OF PROPERTY TRANSFER REGULATION
This form is to be only completed by inspectors certified by the Washtenaw County Environmental Health Division
(Rev. 02/26/2013)

Date(s) Inspected: OCTOBER 14, 2013

Owner Name: VINCENT GUSTY

Property Address: 3080 MOTT ROAD
YPSILANTI, MI 48198

Township: YPSILANTI Tax I.D. #: K-11-01-100-003

Applicant Name:	<u>SARA MADDOCK</u>		
Company (if any):	<u>PRUDENTIAL SNYDER REALTORS</u>		
Street Address:			
City:	<u>ANN ARBOR</u>	State:	<u>MI</u>
Zip:			

Phone #: () Cell #: ()

DATE	<u>10/22/2013</u>	TUE
TRANSACTION	<u>8230 TOS</u>	<u>#49</u>
CHECK/C.C. #	<u>3590</u>	\$153.00
SUBTOTAL		\$153.00
TOTAL		\$153.00
CHECK		\$153.00
REG 01 YVORNE		TIME 14:40

E-mail to Name: SARA MADDOCK at SARA@SARAMADDOCK.COM

Fax to Name: at ()

System(s) Inspected:

- Onsite Water Supply (Reason not inspected _____)
- Onsite Sewage Disposal (Reason not inspected _____)

Age of Home: +70 years Number of Bedrooms: 3 Number of Bathrooms: 1

Current Number of Residents: 0 **OR** Time of Vacancy: 24 months

I, KEN BAKER, being a Washtenaw County Certified Inspector, inspected the onsite water supply and/or onsite sewage disposal system indicated above. I certify that this inspection was done within the guidelines established by Washtenaw County and was completed in a thorough and complete manner. Further, I certify that this report includes all knowledge that I have concerning the operation and function of said system(s).

Ken Baker
(Signature)

OCTOBER 14, 2013

(Date)

Certification Number: 009

13-01883
3-00870

Office Use Only
Case #: TOS 20

WATER SUPPLY SYSTEM

4/23/08 *(signature)*

Age of Well: 10

Permit #: 03-00025

Approval Date: 4/23/08

Well Depth: 76 ft.

Verified from: Well Log Driller County Records Owner

Location:

- On property
- Off property

Shared well? Yes No

Flowing well? Yes No

Flow discharged properly? Yes No

Number of other wells on property: ZERO

Complete for each additional well:

Use: _____

Diameter: _____ inches

In use and produces water? Yes No

Separate from potable water supply? Yes No

per well log (-12 ft below surface) peg

Isolation Distances Not Met: (fill in actual distance if minimum not met)

Drainfield (<100 ft.) _____ ft.

Septic tank (<50 ft.) _____ ft.

Grinder pump (<50 ft.) _____ ft.

Sewer line (<50 ft.) _____ ft.

HazMat storage (<100 ft.) _____ ft.

Fuel oil tank (<100 ft.) _____ ft.

Buried? Yes No

In basement? Yes No

Concrete floor? Yes No

Pump Type:

- Submersible
- Deep Well Jet *
- Shallow Well Jet *
- Other: _____ *

*Protected Suction Line? Yes No

Cycling:

- Long (>90 sec.)
- Adequate (30-90 sec.)
- Short (<30 sec.)

Yield (approx.): +10 gpm

Casing Diameter: 5 inches

Termination:

- Above grade (14 inches above ground)
- Basement offset (_____ inches above floor)
- Drained Pit (_____ inches above floor)
- Undrained Pit
- Dug Well
- Not Found/Buried

Well Cap:

- Structurally sound
- Cap loose
- Cap missing
- Cap loose w/insects
- Cap/conduit/casing damaged

Venting:

- Not vented
- Screened vent
- Unscreened vent
- Unscreened vent w/insects

Water Treatment In Use:

- Softener
- Sediment Filter
- Iron Removal
- Reverse Osmosis * Point of use Whole house
- Other: _____

***Initial water samples must be taken from untreated water. Additional Arsenic sample should be taken from treatment device.**

SEWAGE DISPOSAL SYSTEM

Permit #: 10-00128

Approval Date: 5-26-10

Location:

Municipal/Sanitary Sewer Available: Yes No

On property

Off property

Not Connected to System:

Toilet(s)

Sink(s)

Shower(s)

Tub(s)

Laundry

Other: _____

Connected to System:

Footing drains

Water treatment discharge(s)

HVAC discharge(s)

Storm water drain(s)

Other: _____

SEPTIC TANK(S): *If septic tanks have not been previously inspected and approved by this Department, a Septic Tank Maintenance Report from a Licensed Sewage Pumper must be attached.*

Number of Tanks: TWO Total capacity: 2000 gal. Verified by: County Records Pumping Receipts

Last pumped: NO years ago Accessible for pumping: Yes No

Tank access within 18" of grade: Yes No

Pump Alarm Functional: Yes No

*If No, please explain: _____

Isolation Distances Not Met: *(fill in actual distance if minimum not met)*

Surface water (<25 ft.) _____ ft.

Nearest well (<50ft.) _____ ft.

DISPOSAL AREA(S):

Number:

None found

One

Multiple/one connected

Multiple connected*

Multiple w/diverter *

Type:

Bed-conventional

Bed-deep excavation

Bed-raised

Modified fill

Trenches

Dry well

Other: _____

Size of bed: 1232 sq. ft. (28 ft. X 44 ft.)

Verified by:

County records

Field measurement

Number of Trenches: _____

Trench width: _____ ft. Trench length: _____ ft.

***Note:** *If multiple fields are connected please include additional Page 4 for each field and show on site plan.*

DRAINFIELD CONDITION: Show location and condition of each test hole on site plan.

Sewage exposed (including back-up, direct discharge, surfacing, etc.): Yes No

Depth of cover: 18 inches to 19 inches
(minimum) (maximum)

Encroachment on field: Yes No
(If Yes, show type and location on site plan.)

Saturation of field:

- None
- <50% below tile holes
- >50% below tile holes
- <50% above tile holes
- >50% above tile holes

Sludge/Biomat in field:

- None
- <50% below tile holes
- >50% below tile holes
- <50% above tile holes
- >50% above tile holes

Tile:

- Plastic-per records/age
- Plastic-per owner
- Concrete/clay -per records/age
- Concrete/clay -per owner
- Concrete/clay -observed
(Approx. % blockage _____)

Isolation Distances Not Met: (fill in actual distance if minimum not met)

- Nearest well (<100 ft.): _____ ft.
- Surface water (<50 ft.): _____ ft.

Sandy soil under field: Yes No

Surface water diverted from system: Yes No

Woody vegetation on/within 5ft of system: Yes No

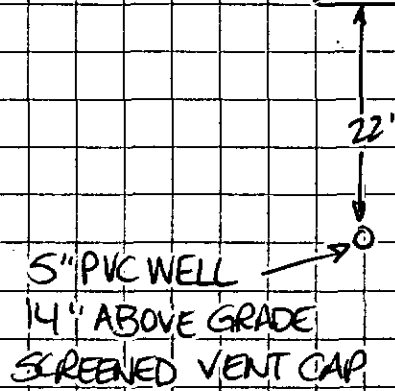
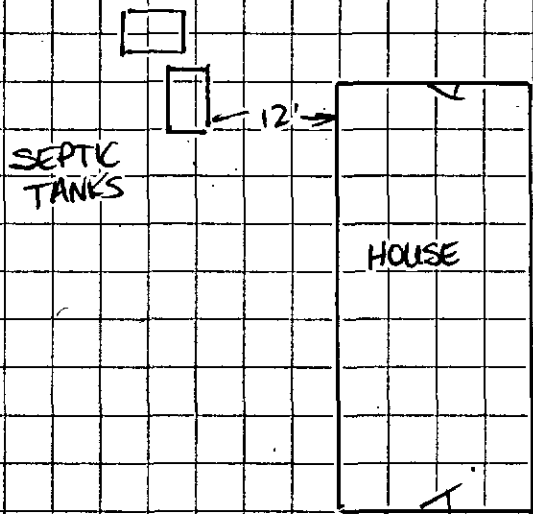
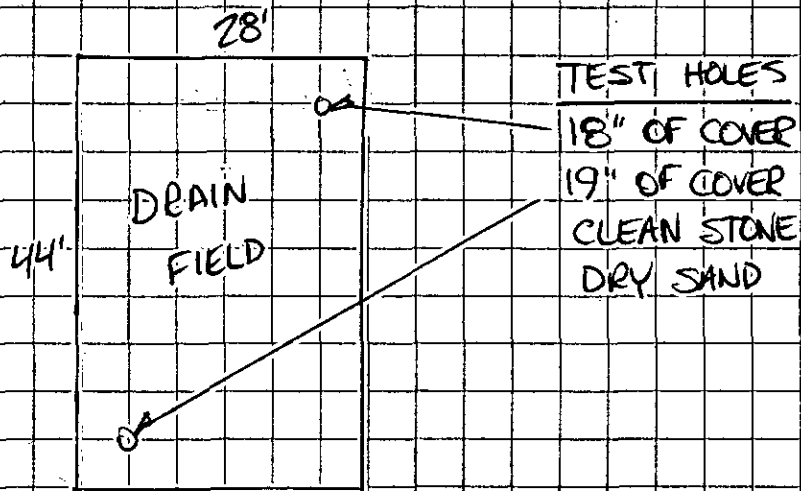
Automatic sprinklers on/near system: Yes No

INSPECTOR OBSERVATIONS/COMMENTS/RECOMMENDATIONS

Based on data presented in this inspection report, the Washtenaw County Environmental Health Division will issue a letter stating whether the water supply and/or sewage disposal system meets minimum standards for sale of the property. The following observations or recommendations for extending the life of these systems are in addition to any requirements addressed by the Environmental Health Division:

ATTACH REQUIRED WATER SAMPLES (COLIFORM BACTERIA, NITRATES, AND ARSENIC) AND SITE PLAN* TO REPORT

(*Site plans must contain location and conditions of each test hole and any tile excavation.)



3080 MOTT RD

YPSILANTI TWP

K-11-01-100-003

OCTOBER 14, 2013

KEN BAKER #009

N



718 S. Michigan

Howell, MI 48843

(517) 548-2505

Fax (517) 548-3434

www.watertech-inc.com

WATER ANALYSIS RESULTS

To:
Baker Inspections
6690 Joy Rd.
Dexter, MI 48130

Date Sampled: 10/18/2013 10:00
Date Received: 10/18/2013
Collected By: Ken
Sample Point: Hose

Sample ID:
3080 Mott
Ypsilanti, MI

Lab Sample Number: 66302-02

Test Parameter	Result	Units	DL	Date of Analysis	Maximum Desired Limit
Total Coliform	0	MPN/100ml	1	10/18/2013 16:30	MCL=0

Released By

Date: 10/19/2013

Laboratory #23 assigned by the Michigan Department of Environmental Quality for the microbiological and chemical analysis of drinking water.

ABBREVIATIONS:

DL = Lowest reportable level of detection

MCL = Maximum Contaminant Level - The maximum permissible level established by the USEPA and or MDEQ for safe drinking water.

SMCL = Secondary Maximum Contaminant Level - Suggested maximum level established by the USEPA for desirable water quality.

CFU/100 ml = Colony Forming Units/100 milliliter sample volume. MPN = Most Probable Number.

mg/L = Milligrams per liter (= parts per million).



718 S. Michigan

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WATER ANALYSIS RESULTS

To:
Baker Inspections
6690 Joy Rd.
Dexter, MI 48130

Date Sampled: 10/14/2013 17:00
Date Received: 10/15/2013
Collected By: Ken
Sample Point: Kitchen

Sample ID:
3080 Mott
Ypsilanti, MI

Lab Sample Number: 66204-01

Test Parameter	Result	Units	DL	Date of Analysis	Maximum Desired Limit
Total Coliform	Present* (E.coli=Absent)	Pres/Abs.		10/15/2013 16:25	MCL=Abs.
Nitrate-N	Not Detected	mg/L-N	0.1	10/15/2013 17:08	MCL=10
Total Arsenic	Not Detected	mg/L	0.001	10/16/2013 0:00	MCL=0.010

*Exceeds the Maximum Contaminant Level for bacteriological water quality. Safety cannot be assured.

Released By _____

Date: 10/16/2013

Laboratory #23 assigned by the Michigan Department of Environmental Quality for the microbiological and chemical analysis of drinking water.

ABBREVIATIONS:

DL = Lowest reportable level of detection

MCL = Maximum Contaminant Level - The maximum permissible level established by the USEPA and or MDEQ for safe drinking water.

SMCL = Secondary Maximum Contaminant Level - Suggested maximum level established by the USEPA for desirable water quality.

CFU/100 ml = Colony Forming Units/100 milliliter sample volume. MPN = Most Probable Number.

mg/L = Milligrams per liter (= parts per million).



**WASHTENAW COUNTY
ENVIRONMENTAL HEALTH DIVISION
DEPARTMENT OF PUBLIC HEALTH**

October 24, 2013

SARA MADDOCK
2555 PLYMOUTH RD
ANN ARBOR, MI 48105

RE: Approval of Authorization for Sale of
Property Located at 3080 MOTT,
YPSILANTI.
Case Number: TOS2013-00870

To whom it may concern,

On October 23, 2013, this office received an inspection report for the well and/or septic system at the above referenced address. This report was reviewed to determine compliance with Washtenaw County Regulation for the Inspection of Residential Onsite Water and Sewage Disposal Systems at Time of Property Transfer. Based on the information submitted it has been determined that the system(s) is/are functioning properly and are adequate for their intended use.

As the result of this review this PROPERTY IS AUTHORIZED FOR TRANSFER OF THE DEED.

This letter does not imply that the system(s) meet new construction standards. Further, this authorization does not imply or express any warranty or guarantee as to the future function and suitability of the inspected systems. The referenced evaluation was performed based on current operation, and any change in use may change the operational status of the system(s).

Although authorized for property transfer, we do make the following recommendations:

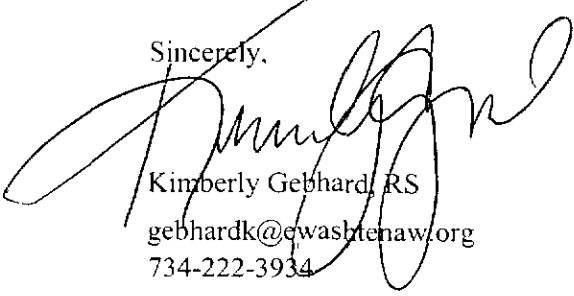
1. The sewage system was permitted, installed, and approved by this Department on May 26, 2010. This Department recommends pumping and inspecting the septic tanks every 3 to 5 years and that no "additives" be used in the tanks. Property owners have full responsibility for upkeep, maintenance and repair of the system.
2. The home has been vacant for 24 months and the condition of the septic system may not be representative of a system that is in use.

This Authorization should be kept with other important records concerning this property.

This AUTHORIZATION is valid until October 24, 2014.

Any questions regarding this letter should be directed to Washtenaw County Environmental Health.

Sincerely,


Kimberly Gebhard, RS
gebhardk@ewashtenaw.org
734-222-3934



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No: K-11-01-100-003	Permit No: WEL2003-00025	County: Washtenaw	Township: Ypsilanti
--------------------------------	---------------------------------	--------------------------	----------------------------

Well ID: 81000012991	Town/Range: 03S 07E	Section: 1	Well Status: Active	WSSN:	Source ID/Well No:
	Distance and Direction from Road Intersection: SOUTH SIDE EAST OF RIDGE				
	Well Owner: BERNARD M CARNAHAN				
	Well Address: 3080 MOTT YPSILANTI, MI 48198		Owner Address: 3080 MOTT YPSILANTI, MI 48198		

Drilling Method: Rotary	Well Use: Household	Pump Installed: Yes	Pump Installation Only: No
Well Depth: 76.00 ft.	Date Completed: 2/7/2003	Pump Installation Date:	HP: 0.50
Well Type: Replacement	Height:	Manufacturer: Aermotor	Pump Type: Submersible
Casing Type: PVC plastic	Casing Joint: Solvent welded/glued	Model Number: T1250	Pump Capacity: 12 GPM
Casing Fitting: None	Diameter: 5.00 in. to 72.00 ft. depth	Drop Pipe Length: 20.00 ft.	Pump Voltage:
Borehole: 7.88 in. to 76.00 ft. depth		Drop Pipe Diameter:	Drilling Record ID:
		Draw Down Seal Used: No	
		Pressure Tank Installed: Yes	
		Pressure Tank Type: Unknown	
		Manufacturer: Sta-Rite Signature	Tank Capacity: 35.0 Gallons
		Model Number: SR35	
		Pressure Relief Valve Installed: No	

Static Water Level: 12.00 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 20.00 ft. after 2.00 hrs. at 35 GPM			
	Yellow Sand & Gravel	9.00	9.00
	Gray Sand	3.00	12.00
	Blue Clay Hard	34.00	46.00
	Blue Clay Soft	17.00	63.00
	Gray Sand & Gravel Medium	13.00	76.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 4.00 in.	Blank: 1.00 ft. Above
Screen Material Type: Stainless steel-wire wrapped	
Slot	Length
10.00	4.00 ft.
	Set Between
	72.00 ft. and 76.00 ft.
Fittings: Bottom plug	

Well Grouted: Yes	Grouting Method: Unknown		
Grouting Material	Bags	Additives	Depth
Bentonite slurry	2.00	None	0.00 ft. to 70.00 ft.

Wellhead Completion: Pitless adapter, 12 inches above grade
--

Nearest Source of Possible Contamination:	Drilling Machine Operator Name: DONALD BAILEY
Type	Employment: Employee
Drainfield/Dry well	
Distance	
120 ft.	
Direction	
South	
	Contractor Type: Water Well Drilling Contractor
	Reg No: 83-2197
	Business Name: SLUSSER DRLG CO INC
	Business Address:

Abandoned Well Plugged: Yes	Water Well Contractor's Certification This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
Casing Removed:	
Signature of Registered Contractor	
	Date

General Remarks:
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID:

Tax No:	Permit No: 05199	County: Washtenaw		Township: Ypsilanti	
Well ID: 81000011714		Town/Range: 03S 07E	Section: 1	Well Status: Active	WSSN:
		Source ID/Well No:			
Elevation:		Distance and Direction from Road Intersection: ON EAST SIDE OF RIDGE RD 200 YARDS NORTH OF CLARK RD			
Latitude: 42.26103096		Well Owner: JONATHAN WATTS			
Longitude: -83.55394748		Well Address: 1422 RIDGE RD YPSILANTI, MI 48198		Owner Address: 1422 RIDGE RD YPSILANTI, MI 48198	
Method of Collection: Address Matching-House Number					

Drilling Method: Rotary	Well Use: Household	Pump Installed: No
Well Depth: 97.00 ft.	Date Completed: 10/4/2001	Pressure Tank Installed: No
Well Type: New	Height:	Pressure Relief Valve Installed: No
Casing Type: PVC plastic		
Casing Joint: Welded		
Casing Fitting: Shale packer/trap		
Diameter: 5.00 in. to 93.00 ft. depth		
Borehole: 8.00 in. to 93.00 ft. depth		

Static Water Level: 14.00 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test: Pumping level 85.00 ft. after 1.00 hrs. at 60 GPM			
Yield Test Method: Air	Sand W/Gravel	14.00	14.00
	Gray Clay	39.00	53.00
	Clay W/Gravel	8.00	61.00
	Gray Clay Hard	32.00	93.00
	Sand	3.00	96.00
	Gravel & Clay	4.00	100.00
	Gray Clay Hard	18.00	118.00
	Clay & Stones Broken	17.00	135.00
	Blue Slate W/Shale	21.00	156.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 4.00 in.	Blank: 1.00 ft. Above
Screen Material Type: Stainless steel-wire wrapped	
Slot	Length
0.02	4.00 ft.
Set Between	93.00 ft. and 97.00 ft.
Fittings: Neoprene packer	

Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags
Bentonite slurry	5.00
Additives	Depth
None	0.00 ft. to 85.00 ft.

Wellhead Completion: 12 inches above grade	Geology Remarks:
Nearest Source of Possible Contamination:	Drilling Machine Operator Name: MARC MCKEAGUE
Type	Employment: Employee
Septic tank	
Distance	Contractor Type: Water Well Drilling Contractor
100 ft.	Reg No: 13-1593
Direction	Business Name: KATZ W/D
West	Business Address:

Water Well Contractor's Certification	
This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Signature of Registered Contractor	Date

General Remarks:
Other Remarks:

**MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD**

PERMIT NUMBER

1 LOCATION OF WELL																				
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i> Section Number <i>12</i> Town Number <i>3 N(S)</i> Range Number <i>7 (E/W)</i>																		
Distance And Direction From Road Intersection																				
Street Address & City of Well Location																				
Locate with "X" in Section Below 	Sketch Map:																			
2 FORMATION DESCRIPTION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">FORMATION DESCRIPTION</th> <th style="width: 15%;">THICKNESS OF STRATUM</th> <th style="width: 15%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><i>Misc fill</i></td> <td style="text-align: center;"><i>5</i></td> <td style="text-align: center;"><i>5</i></td> </tr> <tr> <td><i>Medium brown fine Sand</i></td> <td style="text-align: center;"><i>2</i></td> <td style="text-align: center;"><i>7</i></td> </tr> <tr> <td><i>Dark brown/gray Sand</i></td> <td style="text-align: center;"><i>4</i></td> <td style="text-align: center;"><i>11</i></td> </tr> <tr> <td><i>Fine gray, silty Sand</i></td> <td style="text-align: center;"><i>2</i></td> <td style="text-align: center;"><i>13</i></td> </tr> <tr> <td><i>Hard gray Silt</i></td> <td style="text-align: center;"><i>2</i></td> <td style="text-align: center;"><i>15</i></td> </tr> </tbody> </table>			FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<i>Misc fill</i>	<i>5</i>	<i>5</i>	<i>Medium brown fine Sand</i>	<i>2</i>	<i>7</i>	<i>Dark brown/gray Sand</i>	<i>4</i>	<i>11</i>	<i>Fine gray, silty Sand</i>	<i>2</i>	<i>13</i>	<i>Hard gray Silt</i>	<i>2</i>	<i>15</i>
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3 OWNER OF WELL: <i>Hydra-Matic Division General Motors Corp.</i> Address <i>Ypsilanti, Michigan 48197</i> Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																				
4 WELL DEPTH: (completed) <i>15 ft. 0</i> Date of Completion <i>10-29-84</i>																				
5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>																				
6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> MONITOR																				
7 CASING: Diameter <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Threaded <input type="checkbox"/> Welded Height: Above/Below Surface <i>0</i> ft. Weight _____ lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																				
8 SCREEN: <input type="checkbox"/> Not Installed Type <i>PVC</i> Diameter <i>2" ID</i> Slot/Gauze <i>010</i> Length <i>10'</i> Set between <i>5</i> ft. and <i>15</i> ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____																				
9 STATIC WATER LEVEL: <i>8</i> ft. below land surface <input type="checkbox"/> Flow																				
10 PUMPING LEVEL: below land surface _____ ft. after _____ hrs. pumping at _____ G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.																				
11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit																				
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>2</i> to <i>4</i> ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____																				
13 Nearest source of possible contamination Type _____ Distance _____ ft. Direction _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																				
14 PUMP: <i>N.A.</i> <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons																				
USE A 2ND SHEET IF NEEDED																				
15. Remarks, elevation, source of data, etc. <i>MW-1</i>		16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Earth Sciences Services, Inc</i> <i>1758</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>P.O. Box 557 Ypsilanti, MI 48197</i> Signed <i>Michael V. Gylf</i> Date <i>6/25/85</i> AUTHORIZED REPRESENTATIVE																		

WATER WELL AND PUMP RECORD

--	--	--	--	--	--	--

PERMIT NUMBER

1 LOCATION OF WELL			3 OWNER OF WELL: <u>General Motors Corporation</u>																				
County Washtenaw	Township Name Ypsilanti	Fraction NE 1/4 NW 1/4	Section Number 12	Town Number 3 N(S)	Range Number 7 (E)W																		
Distance And Direction From Road Intersection			Address Ypsilanti, MI 48197																				
Street Address & City of Well Location			Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																				
Locate with "X" in Section Below			4 WELL DEPTH: (completed) 15 ft. Date of Completion 9/24/85																				
Sketch Map: 			5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>																				
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15. Remarks, elevation, source of data, etc. S.W.#6 Elevation 721.12			16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. EARTH SCIENCES SERVICES 1758 REGISTERED BUSINESS NAME REGISTRATION NO. Address P.O. Box 5517 MAUMEE, OHIO 43537 Signed [Signature] Date 11/5/85 AUTHORIZED REPRESENTATIVE																				

WATER WELL AND PUMP RECORD

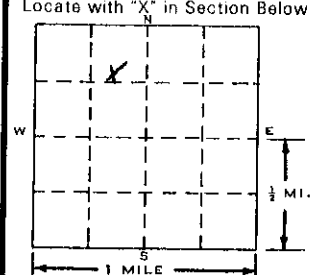
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PERMIT NUMBER

1 LOCATION OF WELL				
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i>	Section Number <i>12</i>	Town Number <i>3 N10</i>
Distance And Direction From Road Intersection		Range Number <i>7 EW</i>		

Street Address & City of Well Location

Locate with "X" in Section Below



3 OWNER OF WELL: <i>Hydra-Matic Division General Motors Corp</i>	
Address <i>Ypsilanti, Michigan 48197</i>	
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Misc fill</i>	<i>2</i>	<i>2</i>
<i>Med. brown fine sand</i>	<i>3</i>	<i>5</i>
<i>med brown/gray sand</i>	<i>2</i>	<i>7</i>
<i>bray fine sand w/ tr. silt</i>	<i>6</i>	<i>13</i>
<i>stiff gray silt</i>	<i>2</i>	<i>15</i>

4 WELL DEPTH: (completed) <i>15 ft. 0</i>		Date of Completion <i>11-2-84</i>	
5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>		6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> Monitor	
7 CASING: Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded <i>2</i> in. to <i>5</i> ft. depth _____ in. to _____ ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth _____ in. to _____ ft. depth		Height: Above/Below Surface <i>0</i> ft. Weight _____ lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

8 SCREEN: <input type="checkbox"/> Not Installed	
Type <i>PVC</i> Diameter <i>2" I.D.</i>	Slot/Gauze <i>010</i> Length <i>10 ft</i>
Set between <i>5</i> ft. and <i>15</i> ft.	
FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____	

9 STATIC WATER LEVEL: <i>7.5</i> ft. below land surface <input type="checkbox"/> Flow	
10 PUMPING LEVEL: below land surface	
_____ ft. after _____ hrs. pumping at _____ G.P.M.	
_____ ft. after _____ hrs. pumping at _____ G.P.M.	

11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade	
<input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit	
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>2</i> to <i>4</i> ft.	
<input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____	
No. of bags of cement _____ Additives _____	

13 Nearest source of possible contamination	
Type _____ Distance _____ ft. Direction _____	Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

14 PUMP: <input checked="" type="checkbox"/> Not installed <input type="checkbox"/> Pump Installation Only	
Manufacturer's name _____	
Model number _____ HP _____ Volts _____	
Length of Drop Pipe _____ ft. capacity _____ G.P.M.	
TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____	
PRESSURE TANK: Manufacturer's name _____	
Model number _____ Capacity _____ Gallons	

15. Remarks, elevation, source of data, etc.
MW-11

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Earth Sciences Services *1758*

REGISTERED BUSINESS NAME REGISTRATION NO.

Address *P.O. Box 557/Manitou OH* *43537*

Signed *[Signature]* Date *6/25/85*

AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL												
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i> Section Number <i>12</i> Town Number <i>3 N10</i> Range Number <i>7 EW</i>										
Distance And Direction From Road Intersection												
Street Address & City of Well Location												
Locate with "X" in Section Below		Sketch Map:										
		3 OWNER OF WELL: <i>Hydra-Matic Division General Motors Corp.</i> Address <i>Ypsilanti, Michigan 48197</i> Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
2 FORMATION DESCRIPTION		4 WELL DEPTH: (completed) <i>15 ft. 0</i> Date of Completion <i>2-8-85</i>										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">THICKNESS OF STRATUM</th> <th style="width: 40%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><i>Misc fill</i></td> <td><i>1.5</i></td> </tr> <tr> <td><i>Medium brown, fine Sand</i></td> <td><i>3.5</i></td> </tr> <tr> <td><i>Medium brown/gray fine Sand, fr. silt</i></td> <td><i>5.0</i></td> </tr> <tr> <td><i>gray fine Sand, w/ some silt</i></td> <td><i>5.0</i></td> </tr> </tbody> </table>		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<i>Misc fill</i>	<i>1.5</i>	<i>Medium brown, fine Sand</i>	<i>3.5</i>	<i>Medium brown/gray fine Sand, fr. silt</i>	<i>5.0</i>	<i>gray fine Sand, w/ some silt</i>	<i>5.0</i>	5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/> _____ 6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> Monitor
THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM											
<i>Misc fill</i>	<i>1.5</i>											
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<i>Medium brown/gray fine Sand, fr. silt</i>	<i>5.0</i>											
<i>gray fine Sand, w/ some silt</i>	<i>5.0</i>											
		7 CASING: Diameter <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Plastic Height: Above/Below <i>2" in. to 5 ft. depth</i> Surface <i>0</i> ft. _____ in. to _____ ft. depth Weight _____ lbs./ft. _____ in. to _____ ft. depth Drive Shoe <input type="checkbox"/> Yes _____ in. to _____ ft. depth <input checked="" type="checkbox"/> No										
		8 SCREEN: <input type="checkbox"/> Not Installed Type <i>PVC</i> Diameter <i>2" I.P.</i> Slot/Gauze <i>.010</i> Length <i>10 ft</i> Set between <i>5.0</i> ft. and <i>15.0</i> ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____										
		9 STATIC WATER LEVEL: <i>7.0</i> ft. below land surface <input type="checkbox"/> Flow										
		10 PUMPING LEVEL: below land surface _____ ft. after _____ hrs. pumping at _____ G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.										
		11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit										
		12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>1</i> to <i>3</i> ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____										
		13 Nearest source of possible contamination Type _____ Distance _____ ft. Direction _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
		14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons										
15. Remarks, elevation, source of data, etc. <i>MW-13</i>		16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Earth Sciences Services, Inc. 1758</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>P.O. Box 957 Maumee/Ohio 43537</i> Signed <i>Michael V. Gyle</i> Date <i>6/25/85</i> AUTHORIZED REPRESENTATIVE										

DEWATERING WELL RECORD
Act 218, P.A. 1972

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

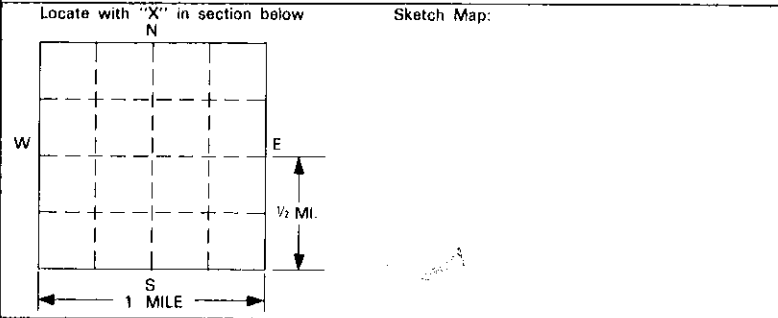
1 LOCATION OF WELL

County Washtenaw	Township Name Ypsilanti	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number 12	Town Number 3	Range Number 7 (N.S.) (E.W.)
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STARTING POINT:
Distance and Direction from Nearest Road Intersection

**200' South of Gate 3 at
General Motors Assembly Plant, Willow Run**

LOCATION:
From Eng. Plan Sheet No. _____
Other: _____
Engineering Firm: _____



PROJECT OWNER: **General Motors**

Address: _____

Project Name: _____

Type of Sewer Pumping Station

Project Foundations Other: **Water Main Repaired**

2 Single Well

Several Wells: Total Number of Wells **4** Well Depth — Range **24** — **26** ft. Date of Drilling **8** Month **85** Year

Total Distance Covered _____ ft, N/S/E/W

Includes Wells From Station _____ to Station _____

4 Cable Tool Rotary Bored (Auger)

Jetted Driven _____

3 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Clay	8	8
Fine Sand	8	16
Clay	9	25
(USE REMARKS SECTION IF NEEDED)		

5 CONSTRUCTION DETAILS: Drive Points Rock Well

Natural Pack Gravel Pack

Drill Hole Size: Diam **36** in Depth **26** ft

Casing: Diam **24** in Depth **26** ft

Gravel Pack: From **0** ft to **26** ft

Pack Material: **Pea Stone & Mason Sand**

Screened From **25** ft to **17** ft

6 STATIC WATER LEVEL **N.A.** ft above/below land surface

8 ABANDONMENT PROCEDURES:

Wells under 40 feet

Parent Material: from _____ ft to _____ ft

Finer Textured Soils: from _____ ft to _____ ft

Other: _____

Wells over 40 feet:

Bentonite-Fine Textured Soil Mixture from _____ ft to _____ ft

Other: _____

Special Cases: Gas Flowing Well

Bedrock _____

Grout

Bentonite Grout Neat Cement Grout

from _____ ft to _____ ft

7 DEWATERED LEVEL _____ ft

Pump Operated _____ hr/day,

Pump Capacity _____ gpm

Discharge Point _____

(river, pond, lake, storm sewer, etc.)

10 REMARKS, Water Quality, Gas, etc.

RECEIVED
Mich. Dept. of Public Health
SEP 18 1985
Bureau of Environmental and
Occupational Health - GWOS

9 ABANDONMENT CERTIFICATION

This well has been abandoned under my jurisdiction and this report is true to the best of my knowledge and belief.

11 DRILLING CONTRACTOR'S CERTIFICATION

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

UNION CONSTRUCTION CO. **D 1315**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER _____

Address **505 TERRITORIAL ROAD, MANCHESTER, MICH 48158**

Signed *Frank J. Johnson* **8/26/85**
AUTHORIZED REPRESENTATIVE DATE

UNION CONSTRUCTION CO. **D 1315**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER _____

Address **505 TERRITORIAL RD., MANCHESTER, MICH. 48158**

Signed *James D. Wilde* **8/26/85**
AUTHORIZED REPRESENTATIVE DATE

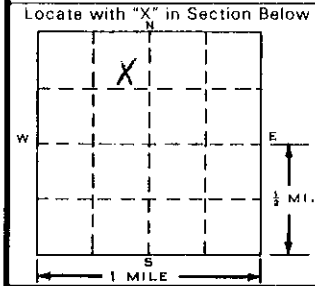
WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL				
County Washtenaw	Township Name Ypsilanti	Fraction NE 1/4 NW 1/4 1/4	Section Number 12	Town Number 3 N(S)
Distance And Direction From Road Intersection		Range Number 7 (EW)		

Street Address & City of Well Location
Locate with "X" in Section Below



Sketch Map:

3 OWNER OF WELL: General Motors Corporation
Hydra-Matic Division
 Address **Ypsilanti, MI 48197**

Address Same As Well Location? Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
WOOD	0.2'	0.2'
CONCRETE	0.67'	0.88'
GRAVEL - with trace sand	6.1'	7.0'
GRAVEL	0.5'	7.5'
SAND - with trace gravel, med.-fine	6.5'	14.0'
CLAY - blue to gray	1.0'	15.0'
USE A 2ND SHEET IF NEEDED		

4 WELL DEPTH: (completed) **15** ft. Date of Completion **9/18/85**

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

7 CASING: Steel Threaded Welded
 Plastic Height: Above/Below
3 in. to **18** ft. depth Surface **flush** ft.
11 in. to **15** ft. depth Weight **7.58** lbs./ft.
 Grooved Drill Hole Diameter Drive Shoe Yes No
 8 in. to **15** ft. depth

8 SCREEN: Not Installed
 Type **stainless steel** diameter **3'**
 Slot/Gauze **.010** Length **5'**
 Set between **6** ft. and **11** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **6** ft. Other **4' below screen**

9 STATIC WATER LEVEL: **6' 6"** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
 _____ ft. after _____ hrs. pumping at _____ G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit **valve box**

12 WELL GROUTED? No Yes From **1'** to **3'** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement: _____ Additives **1 bag benseal**

13 Nearest source of possible contamination
 Type **gasoline** Distance _____ ft. Direction _____
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name _____
 Model number _____ HP _____ Volts _____
 Length of Drop Pipe **14'** ft. capacity _____ G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK:
 Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
S.W.#5 Elevation 721.16

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
EARTH SCIENCES SERVICES 1758
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **P.O. Box 1557 / MAUMEE, OH 43537**
 Signed **Michael T. G...** Date **11/5/85**
 AUTHORIZED REPRESENTATIVE

**MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD**

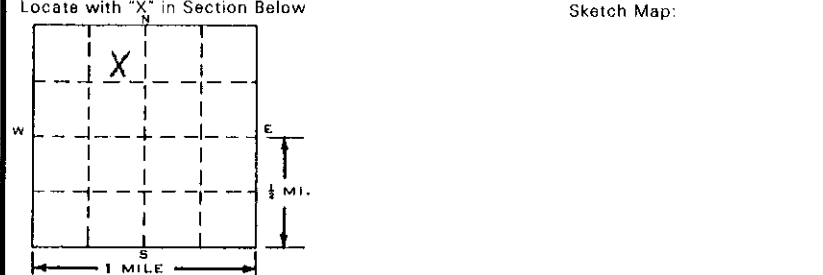
PERMIT NUMBER									

1 LOCATION OF WELL					
County Washtenaw	Township Name Ypsilanti	Fraction NE 1/4 NW 1/4 1/4	Section Number 12	Town Number 3 NS	Range Number 7 EW

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below



**3 OWNER OF WELL: General Motors Corporation
Hydra-Matic Division
Ypsilanti, MI 48197**

Address

Address Same As Well Location? Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
WOOD	0.2'	0.2'
CONCRETE	0.67'	0.88'
SAND	8.1'	9.0'
SAND	4.0'	13.0'
CLAY	2.0'	15.0'

4 WELL DEPTH: (completed) 15 ft. Date of Completion 9/20/85

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Best Well Type IIb Public

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: Above/Below Surface **Flush** ft.
 Weight **7.58** lbs./ft.
 Drive Shoe Yes No

8 SCREEN: Not Installed
 Type **stainless steel** Diameter **3'**
 Slot/Gauze **.010** Length **5'**
 Set between **6** ft. and **11** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **6** ft. Other **4' below screen**

9 STATIC WATER LEVEL: **7' 2"** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
 _____ ft. after _____ hrs. pumping at _____ G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit **valve box**

12 WELL GROUTED? No Yes From **1'** to **3'** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives **1 bag benseal**

13 Nearest source of possible contamination
 Type **gasoline** Distance _____ ft. Direction _____
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name _____
 Model number _____ HP _____ Volts _____
 Length of Drop Pipe **14** ft. capacity _____ G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK:
 Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

USE A 2ND SHEET IF NEEDED

15. Remarks, elevation, source of data, etc.
S.W. #4 Elevation 721.05

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
EMATA SCIENCES SERVICES 1758
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **P.O. BOX 557 MAUMEE OHIO 43537**
 Signed **Michael T. G/yc** Date **11/5/85**
 AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL				
County Washtenaw	Township Name Ypsilanti	Fraction NE 1/4 NW 1/4 1/4	Section Number 12	Town Number 3 N(S) Range Number 7 (E)W

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below

Sketch Map:

3 OWNER OF WELL: General Motors Corporation
Hydra-Matic Division
 Address **Ypsilanti, MI 48197**

Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) **15** ft. Date of Completion **9/19/85**

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: Above/Below Surface **flush** ft.
 Weight **7.58** lbs./ft.
 Drive Shoe Yes No

3 in. to **15** ft. depth
11' in. to **15** ft. depth
 Grouted Drill Hole Diameter **8** in. to **15** ft. depth

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
WOOD	0.2'	0.2'
CONCRETE	0.67'	0.88'
BACKFILL - native soil	2.5'	3.5'
CONCRETE - thin layer	0.5'	4.0'
SAND - lt. brn. med.-fine, trace	3.0'	7.0'
gravel		
GRAVEL - with some silt	1.0'	8.0'
SAND	5.0'	13.0'
CLAY	2.0'	15.0'

8 SCREEN: Not Installed
 Type **stainless steel** Diameter **3'**
 Slot/Gauze **.010** Length **5'**
 Set between **6** ft. and **11** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **6** ft. Other **4' below screen**

9 STATIC WATER LEVEL: **7' 1/2"** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
 _____ ft. after _____ hrs. pumping at _____ G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit **valve box**

12 WELL GROUTED? No Yes From **1'** to **3** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives **1 bag benseal**

13 Nearest source of possible contamination
 Type **gasoline** Distance **0** ft. Direction _____
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name _____
 Model number _____ HP _____ Volts _____
 Length of Drop Pipe **14** ft. capacity _____ G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK:
 Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
S.W.#3 Elevation 721.18

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
EARTH SCIENCES SERVICES 1758
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **P.O. Box 557 MAUMEE, OHIO 43537**
 Signed *Michael V. G...* Date **11/5/85**
 AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL
County: Washtenaw, Township Name: Ypsilanti, Fraction: NE 1/4 NW 1/4 1/4, Section Number: 12, Town Number: 3, Range Number: 7

3 OWNER OF WELL: General Motors Corporation
Hydra-Matic Division
Ypsilanti, MI 48197
Date of Completion: 9/17/85
WELL DEPTH: 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Rows include Wood, Concrete, Clay-gravel-backfill, Sand-med-fine brn., Sand-and gravel, Sand-trace gravel, Sand-trace clay-gravel, Clay-gray to blue.

15. Remarks. elevation, source of data, etc.
S.W.#2 Elevation 721.09

16. WATER WELL CONTRACTOR'S CERTIFICATION:
EARTH SCIENCES SERVICES 1758
Address: P.O. Box 557, MAUMEE, OHIO 43537
Date: 11/5/85

(C)

12-33-7E
Ypsilanti Twp. (Washtenaw Co.)

Ford Test Well No. 44

Well No. Y-12-1

Drilling Contractor: Foe Company

Location: NW¹/₄ Section 12, T.3S., R.7E.,
By old barn and spur track at NW corner of Section 12,
of Leorse Road or Ward Road.

Record by: Testimony from driller.

	Distance Down Feet
Yellow sand and a few stones	5
Clay and a few stones	10
Clay, sand, few stones	15
Fine sand	20
Sand, clay	25
Blue clay, few stones	30, 35, 40, 45
Clay, few stones	50
Clay, stones	55
Clay, few fine stones	60
Clay and stones	65, 70, 75
Sand, gravel, clay	80
Clay, few stones	85
Clay and stones	90, 95, 100, 105, 110, 115, 120, 125, 130
Fine Sand	135
Gravel	136
Fine sand	140

Date Drilled: 7-30-41

Pumping conditions: At 135' water came to 78' level.
At 136' water came to 55' level.

WATER WELL AND PUMP RECORD

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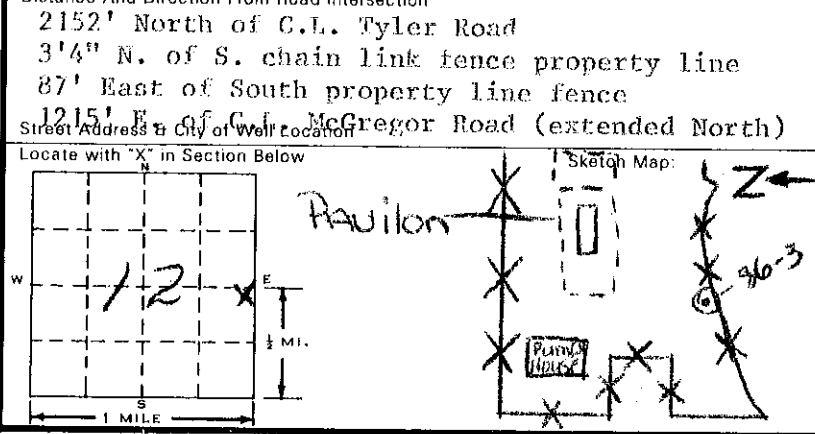
PERMIT NUMBER

1 LOCATION OF WELL		
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>N 1/4 NW 1/4 1/4</i>
		Section Number <i>12</i>
		Town Number <i>3 N 1/2</i>
		Range Number <i>7 EW</i>
Distance And Direction From Road Intersection		
Street Address & City of Well Location		
Locate with "X" in Section Below		
Sketch Map:		
3 OWNER OF WELL: <i>Hydra-Matic Division</i>		
Address <i>General Motors Corp.</i>		
<i>Ypsilanti, Michigan 48197</i>		
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4 WELL DEPTH: (completed) <i>15 ft. 0</i>		Date of Completion <i>10-24-85</i>
5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>		
6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> Monitor		
7 CASING: Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded		Height: Above/Below Surface <i>0</i> ft.
<i>2</i> in. to <i>5</i> ft. depth		Weight _____ lbs./ft.
_____ in. to _____ ft. depth		Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Grouted Drill Hole Diameter _____ in. to _____ ft. depth		
_____ in. to _____ ft. depth		
8 SCREEN: <input type="checkbox"/> Not installed		
Type <i>PVC</i> Diameter <i>2" I.D.</i>		
Slot/Gauze <i>010</i> Length <i>10 ft</i>		
Set between <i>5</i> ft. and <i>15</i> ft.		
FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____		
9 STATIC WATER LEVEL: <i>8</i> ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface		
_____ ft. after _____ hrs. pumping at _____ G.P.M.		
_____ ft. after _____ hrs. pumping at _____ G.P.M.		
11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit		
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>2</i> to <i>4</i> ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____		
13 Nearest source of possible contamination		
Type _____ Distance _____ ft. Direction _____		
Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
14 PUMP: <i>N.A.</i> <input checked="" type="checkbox"/> Not installed <input type="checkbox"/> Pump Installation Only		
Manufacturer's name _____		
Model number _____ HP _____ Volts _____		
Length of Drop Pipe _____ ft. capacity _____ G.P.M.		
TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____		
PRESSURE TANK: Manufacturer's name _____		
Model number _____ Capacity _____ Gallons		
USE A 2ND SHEET IF NEEDED		
15. Remarks, elevation, source of data, etc. <i>MW-4</i>		
16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Earth Sciences Services, Inc 1758</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>P.O. Box 557 Maumee OH 43537</i> Signed <i>Michael J. G/85</i> Date <i>6/25/85</i> AUTHORIZED REPRESENTATIVE		

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL				
County Washtenaw	Township Name Ypsilanti	Fraction NH₄	Section Number SW₄ 1/4 12	Town Number 3 NWS
Distance And Direction From Road Intersection 2152' North of C.L. Tyler Road 3'4" N. of S. chain link fence property line 87' East of South property line fence 1215' E. of C.L. McGregor Road (extended North)		Range Number 7 E/W		



3 OWNER OF WELL:
Wayne County
Airport Division
Address **West Fuel Farm, Willow Run Airport**
Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) **11** ft. Date of Completion **13 Sept 86**

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public **Monitoring**

7 CASING: Diameter Steel Threaded Plastic Welded
Height: ~~XXX~~ Above/Below Surface **0.33** ft.
Weight **3.5** lbs./ft.
2 in. to **5** ft. depth
9 in. to **4.5** ft. depth
GROUTED DRILL HOLE DIAMETER
9 in. to **4.5** ft. depth
Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Tan, sand	2"	2"
Black Asphalt	4"	6"
Tan silt, clay, gravel & sand	1'	1.5'
Pale yellow clay, very fine & fine sand	1.5'	3'
Pale yellow clay, very fine & fine sand	1'	4'
Light clay, very fine & fine sand	2'	6'
Tan clay, very fine & fine sand	1.5'	7.5'
Gray silty clays, fine & very fine sand	2.5'	10'
Very fine sand, silty clay	3'	13'+

8 SCREEN: **Stainless Steel** Not Installed
Type **S** Diameter **2"**
Slot ~~XXXX~~ **#7** Length **6.5'**
Set between **5.5'** ft. and **11'** ft.
FITTINGS: K-Packer Lead Packer Brainer Check
 Blank above screen _____ ft. Other **threaded**

9 STATIC WATER LEVEL: **7.11'** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
_____ ft. after _____ hrs. pumping at _____ G.P.M.
_____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
threaded cap Basement offset Approved pit

12 WELL GROUTED? No Yes From **2.5'** to **4.5'** ft.
 Neat cement Bentonite Other _____
No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
Aviation Fuels Distance **40'** ft. Direction **North**
Type _____
Filler Pipes **200'**
Well disinfected upon completion? Yes No

14 PUMP: Not installed Pump Installation Only
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
TYPE: Submersible Jet _____
PRESSURE TANK:
Manufacturer's name _____
Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
Surface Elevation 717.02'
Top of Casing 716.69' MSL
12-15-87
H. Miller

16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Sterling Drilling Company 0666
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **6236 W. Grand River, Brighton, MI 48116**
Signed *H. Miller* AUTHORIZED REPRESENTATIVE Date **13 Sept. 1986**

Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

TAX NO:

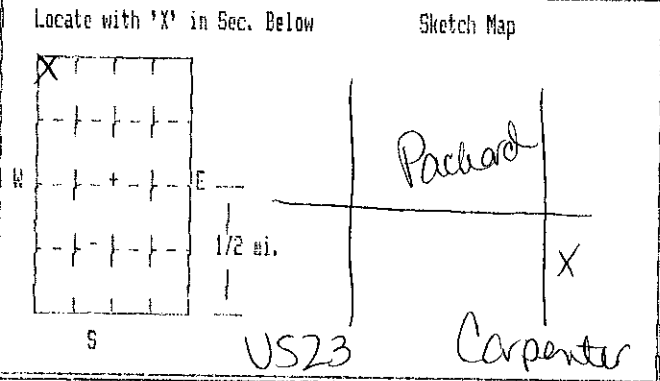
PERMIT NO: Page of
1 1

1. LOCATION OF WELL					
County WASHTENAW	Township Name PITTSFIELD	Fraction NW 1/4 NW 1/4 NW 1/4	Section No 12	Town No 3 S	Range Number 6 E

Distance And Direction From Road Intersection
SOUTH OF PACKARD ROAD ON THE EAST SIDE OF CARPENTER ROAD

Well Addr: 3113 CARPENTER ROAD

3. Owner of Well MILES OF GOLF
Address 3113 CARPENTER ROAD
YPSILANTI MI 48197
Address Same as Well Location? YES



4. WELL DEPTH Date Compl This is a:
117 ft. 09/30/96 NEW WELL

5. EQUIPMENT USED: ROTARY
6. WELL USE: IRRIGATION

7. CASING Type: PLASTIC Connection: WELDED
Diam. Height ABOVE
6 in. to 97 ft. Surface 1 ft
in. to ft. Weight 1b./ft.
Grouted Drill Hole Drive Shoe NO
10 1/2 in. to 125 ft. Shale Packer NO
in. to ft.

Formation Description	Thickness	Depth
BROWN CLAY	5	5
GRAY CLAY	15	20
GRAY SAND	6	26
GRAY CLAY	14	40
GRAY SAND	7	47
GRAY CLAY	33	80
COARSE GRAVEL	40	120
COARSE SAND	5	125

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8. Screen Type: SLOTTED Dia: 6 [] Not Inst.
SLOT 15 Length: 20
Set Between 97 ft. and 117 ft.
Fittings: [] Blank above screen: ft

9. Static Level: 20 ft. Flow: [N]

10. Pumping Level below land surface:
117 ft. after 2 hrs. @ 100 GPM
[] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: 12" ABOVE GRADE

12. Grouted from 97 to 0 ft Material: BENSEAL
Genent: 9 bags Additives: SUPER MUD

13. Nearest source of possible contamination:
Type: CITY SEWER Distance: 700 ft. Dir: WEST
Type: Distance: ft. Dir:

14. Pump: [] Not Installed [] Installation Only
Manufacturer's Name: RED JACKET
Model: HP: 15 Voltage: 0
Drop pipe: ft. Capacity: 40 GPM
Pump type: SUBMERSIBLE
Pressure Tank Manufacturer's Name :
Model: Capacity: Gal.

15. Abandoned Well Plugged? NO N/A
Casing Diameter in. Depth ft.
Plugging Material:
No. of Bags Casing Removed?

16. Remarks, elevation, source of data, etc.
PUMP - ED BIRKMEIER

17. Drilling Machine Operator: [X] Employee [] Subcontractor
Name MATT TRANKA

WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
Busin. Address 10555 Euston Road New Lothrop MI 48460
Signed *Edward Birkmeier* 11/13/96
Authorized Representative Date

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DEC 17 1996
ENV. HEALTH

GW-2-228 9/93
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

WATER WELL AND PUMP RECORD

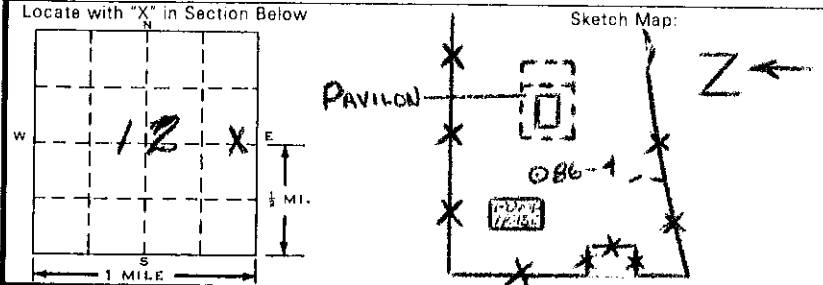
PERMIT NUMBER

1 LOCATION OF WELL

County: Washtenaw Township Name: Ypsilanti Fraction: NE 1/4 SW 1/4 1/4 Section Number: 12 Town Number: 3 Range Number: 7

Distance And Direction From Road Intersection
 2277' North of C.J. Tyler Road
 1236' East of C.L. McGregor Road (extended North)
 126' North of South property line fence (S. gate posts)
 5' East of East edge pump house
 Street Address & City of Well Location

3 OWNER OF WELL: Wayne County
Airport Division
 Address West Fuel Farm, Willow Run Airport
 Address Same As Well Location? Yes No



4 WELL DEPTH: (completed) 11' ft. Date of Completion 8/84

2 FORMATION DESCRIPTION

FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
White broken lime stone and SLAG	6"	6"
Grayish black, silty, clayey, gravel, very fine to medium		
SAND	1.5'	2'
Blackish gray, silty, clayey, very fine, fine sand, GRAVEL	2'	4'
Dark gray, silty, gravel, clayey, very fine, fine, medium SAND	2'	6'
Dark gray, silty, gravel, clayey, very fine-fine SAND	6'	12'
Grayish tan, silty, gravel, clayey, very fine, fine SAND	1'	13'

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public Monitoring

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: ABOVE/Below Surface 0.41' ft.
 Weight 3.5 lbs./ft.
 Drive Shoe Yes No

8 SCREEN: Stainless Steel Not Installed
 Type _____ Diameter 2"
 Slot/Grate # 7 Length 3'
 Set between 7.8' ft. and 10.8' ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other threaded

9 STATIC WATER LEVEL: 7.82' ft. below land surface Flow

10 PUMPING LEVEL: below land surface N/A
 _____ ft. after _____ hrs. pumping at _____ G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
threaded cap Basement offset Approved pit

12 WELL GROUTED? No Yes From 5' to 7' ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
 Type filler pipes Distance 20' ft Direction South
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name _____
 Model number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK:
 Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
 Surface Elevation 717.39'
 Top of Casing 716.98

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Sterling Drilling Company 0666
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 6236 W. Grand River, Brighton MI
 Signed Glean Miller Date 18 Sept 1986

RECEIVED
 Mich. Dept. of Public Health
 JAN 06 1988
 Bureau of Environmental and Occupational Health - CWCOS

12-15-87
 H. J. M.

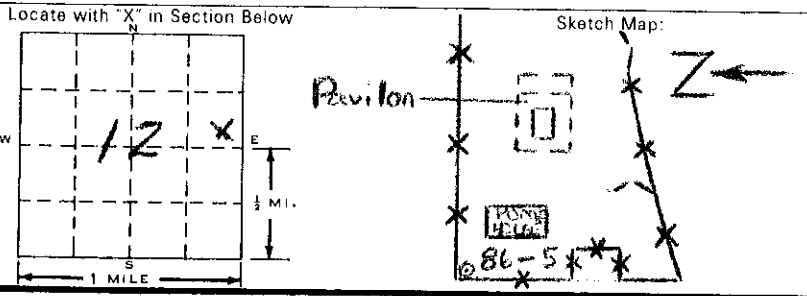
MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL: Wayne County Airport Division Address West Fuel Farm, Willow Run Airport Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
County Washtenaw	Township Name Ypsilanti	Fraction SE 1/4 NE 1/4	Section Number 12 Town Number 3 Range Number 7 E/W

Distance And Direction From Road Intersection
2375' North of Center Line Tyler Road
11' South of North property fence
13.5' East of West property line fence
1132' East of C.L. McGregor Road (extended North)
 Street Address & City of Well Location



2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown clayey, silty, sand TOPSOIL	3.5'	3.5'
Light gray tan, clayey, silty, SAND	3.5'	3.5'
Gray, clayey, gravel, with tan, sandy, SILTY	3'	10'
Gray, very fine, fine, medium SAND	3'	13'

4 WELL DEPTH: (completed) 13' ft. Date of Completion 15 Sept 86
5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>
6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> Monitoring
7 CASING: Diameter <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above <input checked="" type="checkbox"/> Below Surface 1.25' Weight 3.5 lbs./ft. Ground Drill Hole Diameter 9" in. to 7" ft. depth Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8 SCREEN: Stainless Steel <input type="checkbox"/> Not Installed Type _____ Diameter 2" Slot/Screen XXX #10 Length 6.50' Set between 7' ft. and 13.5' ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other threaded
9 STATIC WATER LEVEL: 9.0' ft. below land surface <input type="checkbox"/> Flow
10 PUMPING LEVEL: below land surface N/A _____ ft. after _____ hrs. pumping at _____ G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.
11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade threaded cap <input checked="" type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From 5' to 7' ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____
13 Nearest source of possible contamination: Type filler pipes Distance 95' ft. Direction East Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
Surface Elevation 718'
Top of Casing 719.69'
12-15-87
H. P. Miller

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Sterling Drilling Company 0666
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **6236 W. Grand River, Brighton MI**
 Signed *H. P. Miller* Date **15 Sept. 86**
 AUTHORIZED REPRESENTATIVE

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USE A 2ND SHEET IF NEEDED

WATER WELL AND PUMP RECORD

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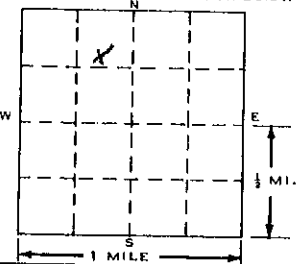
PERMIT NUMBER

1 LOCATION OF WELL					
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i>	Section Number <i>12</i>	Town Number <i>3 N/S</i>	Range Number <i>7 E/W</i>

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below



Sketch Map:

3 OWNER OF WELL: *Hydra-Matic*
Division of General Motors
 Address *Ypsilanti, Michigan 48197*

Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) *15 ft. 0*

Date of Completion *10-29-84*

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public Monitor

7 CASING: Diameter Steel Threaded Welded
 Plastic Height: Above/Below
2 in. to *5* ft. depth Surface *0* ft.
 _____ in. to _____ ft. depth Weight _____ lbs./ft.
 Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe Yes
 _____ in. to _____ ft. depth No

8 SCREEN: Not installed

Type *PVC* Diameter *2" I.D.*

Slot/Gauze *010* Length *10 ft*

Set between *5* ft. and *15* ft.

FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: *7.5* ft. below land surface Flow

10 PUMPING LEVEL: below land surface

_____ ft. after _____ hrs. pumping at _____ G.P.M.

_____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From *2* to *4* ft.

Neat cement Bentonite Other _____

No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination

Type _____ Distance _____ ft. Direction _____

Well disinfected upon completion? Yes No

14 PUMP: *N.A.* Not installed Pump Installation Only

Manufacturer's name _____

Model number _____ HP _____ Volts _____

Length of Drop Pipe _____ ft. capacity _____ G.P.M.

TYPE: Submersible Jet _____

PRESSURE TANK: Manufacturer's name _____

Model number _____ Capacity _____ Gallons

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Misc. fill</i>	<i>2</i>	<i>2</i>
<i>Dk brown fine Sand</i>	<i>5</i>	<i>7</i>
<i>gray fine Sand</i>	<i>4</i>	<i>11</i>
<i>gray fine Sand w/ silt</i>	<i>2</i>	<i>13</i>
<i>Stiff gray silt</i>	<i>2</i>	<i>15</i>

15. Remarks, elevation, source of data, etc.
MW-5

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Earth Sciences Services, Inc *1758*

REGISTERED BUSINESS NAME REGISTRATION NO.

Address *P.O. Box 8579 Maumee, OH* *43537*

Signed *Michael J. C. / J.C.* Date *6/25/85*

AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL				
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i>	Section Number <i>12</i>	Town Number <i>3 N(6)</i> Range Number <i>7 EW</i>

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below

Sketch Map:

3 OWNER OF WELL: *Hydra-Matic Division General Motors Corp*
 Address: *Ypsilanti, Michigan 48197*

Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) *15 ft. 0* Date of Completion *10-29-85*

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public Monitor

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: Above/Below Surface *0* ft.
 Weight _____ lbs./ft.
 Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Misc fill</i>	<i>1.5</i>	<i>1.5</i>
<i>DK brown Sand</i>	<i>1.5</i>	<i>3.0</i>
<i>Md. brown Sand</i>	<i>4</i>	<i>7</i>
<i>Gray fine Sand</i>	<i>4</i>	<i>11</i>
<i>Gray fine Sand w/ silt</i>	<i>2</i>	<i>13</i>
<i>Stiff gray Silt</i>	<i>2</i>	<i>15</i>

8 SCREEN: Not Installed
 Type *PVC* Diameter *2" I.D.*
 Slot/Gauze *010* Length *10 ft*
 Set between *5* ft. and *15* ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: *8* ft. below land surface Flow

10 PUMPING LEVEL: below land surface
 _____ ft. after _____ hrs. pumping at _____ G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From *2* to *4* ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
 Type _____ Distance _____ ft. Direction _____
 Well disinfected upon completion? Yes No

14 PUMP: *N.A.* Not Installed Pump Installation Only
 Manufacturer's name _____
 Model number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK:
 Manufacturer's name _____
 Model number _____ Capacity _____ Gallons

15. Remarks, elevation, source of data, etc.
MW-6

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Earth Sciences Services, Inc *1758*
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address *P.O. Box 507 Maumee OH 43537*
 Signed *Michael J. G...* Date *6/25/85*
 AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

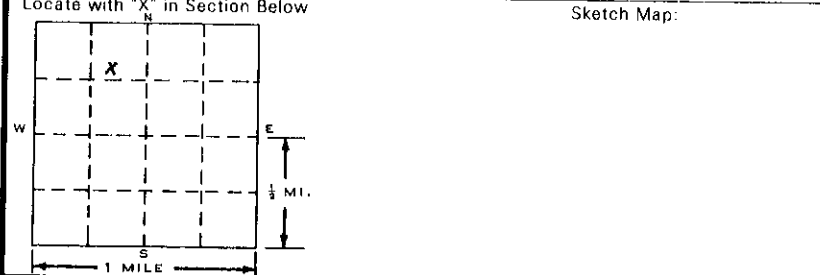
Permit number grid

PERMIT NUMBER

1 LOCATION OF WELL: County: Washtenaw, Township Name: Ypsilanti, Fraction: NE 1/4 NW 1/4 1/4, Section Number: 12, Town Number: 3 NW, Range Number: 7 EW

Distance And Direction From Road Intersection
Street Address & City of Well Location

3 OWNER OF WELL: Hydra-matic Division, General Motors Corp, Ypsilanti, Michigan 48197



4 WELL DEPTH: (completed) 15 ft. 0, Date of Completion 10-30-85

5 Cable tool, Rotary, Driven, Dug, Hollow rod, Auger, Jetted

6 USE: Domestic, Type I Public, Type III Public, Irrigation, Type IIa Public, Heat pump, Test Well, Type IIb Public, Monitor

7 CASING: Diameter 2 in. to 25 ft. depth, Height: Above/Below Surface 0 ft., Drive Shoe No

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Rows include misc fill, DK brown fine sand, med brown fine sand, fine gray sand w/ to silt, fine gray sand w/ some silt, stiff gray silt.

8 SCREEN: Type PVC, Diameter 2" I.D., Slot/Gauze 010, Length 10 ft, Set between 5 ft. and 15 ft.

9 STATIC WATER LEVEL: 7.5 ft. below land surface, Flow

10 PUMPING LEVEL: below land surface, ft. after hrs. pumping at G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter, 12" above grade, Basement offset, Approved pit

12 WELL GROUTED? No Yes From 2 to 4 ft., Neat cement, Bentonite, Other

13 Nearest source of possible contamination: Type, Distance, Direction, Well disinfected upon completion?

14 PUMP: Not Installed, Pump Installation Only, Manufacturer's name, Model number, HP, Volts, Length of Drop Pipe, Capacity, G.P.M., TYPE: Submersible, Jet, PRESSURE TANK: Manufacturer's name, Model number, Capacity, Gallons

15. Remarks, elevation, source of data, etc. mw-7

16. WATER WELL CONTRACTOR'S CERTIFICATION: Earth Sciences Services Inc, 1758, REGISTERED BUSINESS NAME, REGISTRATION NO. 43137, Address P.O. Box 551, Manksee, OH, Signed Michael J. G... Date 6/25/85

WATER WELL AND PUMP RECORD

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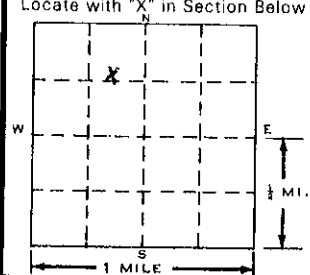
PERMIT NUMBER

1 LOCATION OF WELL				
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>N 2 1/4 NW 1/4 1/4</i>	Section Number <i>12</i>	Town Number <i>3 N 10</i> Range Number <i>7 EW</i>

Distance And Direction From Road Intersection _____

Street Address & City of Well Location _____

Locate with "X" in Section Below



Sketch Map: _____

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Misc fill</i>	<i>3</i>	<i>3</i>
<i>DK brown fine Sand</i>	<i>2</i>	<i>5</i>
<i>Mud brown fine Sand</i>	<i>2</i>	<i>7</i>
<i>Grey fine Sand</i>	<i>4</i>	<i>11</i>
<i>Grey fine Sand w/ fr. silt</i>	<i>2</i>	<i>13</i>
<i>Stiff gray Silt</i>	<i>2</i>	<i>15</i>

3 OWNER OF WELL: <i>Hydra-matic Division General Motors Corp Ypsilanti, Michigan 48197</i>	
Address _____	
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4 WELL DEPTH: (completed) <i>15 ft. 0</i>	Date of Completion <i>10-30-84</i>
5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>	6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input checked="" type="checkbox"/> Monitor
7 CASING: Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded	Height: Above/Below Surface <i>0</i> ft. Weight _____ lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8 SCREEN: <input type="checkbox"/> Not Installed Type <i>PVC</i> Diameter <i>2" I.D.</i> Slot/Gauze <i>010</i> Length <i>10 ft</i> Set between <i>5</i> ft. and <i>15</i> ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____	
9 STATIC WATER LEVEL: <i>8</i> ft. below land surface <input type="checkbox"/> Flow	
10 PUMPING LEVEL: below land surface _____ ft. after _____ hrs. pumping at _____ G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.	
11 WELL HEAD COMPLETION: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit	
12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>2</i> to <i>4</i> ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____	
13 Nearest source of possible contamination Type _____ Distance _____ ft. Direction _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14 PUMP: <i>N.A.</i> <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons	

15. Remarks, elevation, source of data, etc.
MW-10

16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Earth Sciences Services Corp *1758*

REGISTERED BUSINESS NAME REGISTRATION NO.

Address *PO Box 587 Maumee OH 43537*

Signed *Michael J. G. [Signature]* Date *6/25/85*

AUTHORIZED REPRESENTATIVE

Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

WATER WELL AND PUMP RECORD

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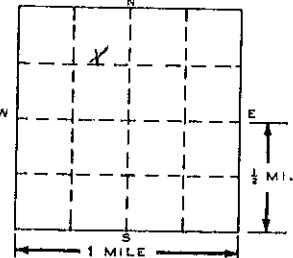
PERMIT NUMBER

1 LOCATION OF WELL			
County <i>Washtenaw</i>	Township Name <i>Ypsilanti</i>	Fraction <i>NE 1/4 NW 1/4 1/4</i>	Section Number <i>12</i>
		Town Number <i>3 N(S)</i>	Range Number <i>7 (EW)</i>

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below



Sketch Map:

3 OWNER OF WELL: *Hydra-Matic Division General Motors Corp.*
Address: *Ypsilanti, Michigan 48197*

Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) *15 ft.* Date of Completion *2-6-85*

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public *Monitor*

7 CASING: Diameter Steel Threaded Welded
 Plastic Height: Above/Below
3 in. to *3* ft. depth Surface *0* ft.
____ in. to ____ ft. depth Weight ____ lbs./ft.
Grouted Drill Hole Diameter
____ in. to ____ ft. depth Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Misc fill</i>	<i>1.5</i>	<i>1.5</i>
<i>med brown sand</i>	<i>3.5</i>	<i>5</i>
<i>med brown/gray fine Sand, fr silt</i>	<i>5</i>	<i>10</i>
<i>gray fine Sand w/ silt</i>	<i>5</i>	<i>15</i>

8 SCREEN: Not Installed
Type *Galvanized* Diameter *3" I.D.*
Slot/Gauze *010* Length *12'*
Set between *3* ft. and *15* ft.
FITTINGS: K-Packer Lead Packer Brainer Check
 Blank above screen ____ ft. Other ____

9 STATIC WATER LEVEL: *6.5* ft. below land surface Flow

10 PUMPING LEVEL: below land surface
____ ft. after ____ hrs. pumping at ____ G.P.M.
____ ft. after ____ hrs. pumping at ____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From ____ to ____ ft.
 Neat cement Bentonite Other ____
No. of bags of cement ____ Additives ____

13 Nearest source of possible contamination
Type ____ Distance ____ ft. Direction ____
Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name ____
Model number ____ HP ____ Volts ____
Length of Drop Pipe ____ ft. capacity ____ G.P.M.
TYPE: Submersible Jet
PRESSURE TANK:
Manufacturer's name ____
Model number ____ Capacity ____ Gallons

15. Remarks, elevation, source of data, etc.
Notes RW-1

16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Earth Sciences Services, Inc *1758*
REGISTERED BUSINESS NAME REGISTRATION NO.
Address *P.O. Box 574 Maumee, OH 43537*
Signed *Michael V. Gyle* Date *6/25/85*
AUTHORIZED REPRESENTATIVE

Authority: Act 368 PA 1978
Penalty: Required Completion of a violation of any provision is a misdemeanor.



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737712007

Tax No:	Permit No:	County: Washtenaw	Township: Ypsilanti			
Well ID: 81000007404		Town/Range: 03S 07E	Section: 12	Well Status:	WSSN:	
		Source ID/Well No:				
		Distance and Direction from Road Intersection: 3750' N OF SE CORNER SEC 12, 2850' W OF E SEC 12 LINE				
Elevation: 722 ft.		Well Owner: HYRDA MATIC DIV. GM				
Latitude: 42.2423564587		Well Address: WILLOW RUN YPSILANTI, MI 48197		Owner Address: WILLOW RUN YPSILANTI, MI 48197		
Longitude: -83.5550884308						
Method of Collection: Interpolation-Map						

Drilling Method: Auger/Bored	Well Use: Household	Pump Installed: No
Well Depth: 15.00 ft.	Date Completed: 10/30/1985	Pressure Tank Installed: No
Well Type: Replacement	Height: 0.00 ft. below grade	Pressure Relief Valve Installed: No
Casing Type: PVC plastic		
Casing Joint: Unknown		
Casing Fitting: None		
Diameter: 2.00 in. to 5.00 ft. depth		
Borehole:		

Static Water Level: 7.50 ft. Below Grade	Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
Well Yield Test:		Lithology Unknown Fill	2.00	2.00
		Brown Sand Fine	3.00	5.00
		Brown Sand Medium Fine	2.00	7.00
		Gray Sand Fine W/Silt	4.00	11.00
		Gray Sand Fine W/Silt	2.00	13.00
		Gray Silt	2.00	15.00

Screen Installed: Yes	Filter Packed: No	Geology Remarks:	
Screen Diameter: 3.00 in.	Blank: 0.00 ft. Above		
Screen Material Type:			
Slot Length Set Between			
10.00 10.00 ft. 5.00 ft. and 15.00 ft.			
Fittings: None			
Well Grouted: Yes	Grouting Method: Unknown		
Grouting Material	Bags	Additives	Depth
Bentonite slurry	0.00	None	0.00 ft. to 0.00 ft.
Wellhead Completion: Unknown			

Nearest Source of Possible Contamination:	Drilling Machine Operator Name:
Type	Employment: Unknown
Unknown	
Distance	Contractor Type: Unknown
0 ft.	Reg No: 92-1758
Direction	Business Name:
	Business Address:

Abandoned Well Plugged: No	Water Well Contractor's Certification
Reason Not Plugged:	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.

General Remarks:	Signature of Registered Contractor	Date
Other Remarks:		



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737712019

Tax No:	Permit No:	County: Washtenaw			Township: Ypsilanti		
Well ID: 81000007416		Town/Range: 03S 07E	Section: 12	Well Status:	WSSN:	Source ID/Well No:	
		Distance and Direction from Road Intersection: 2152' N OF C.L. TYLER RD, 1215' E OF C.L. MCGREGOR RD.					
		Well Owner: WAYNE COUNTY AIRPORT DIVISION					
Elevation: 717 ft.		Well Address: WEST FUEL FARM WILLOW RUN AIR.		Owner Address: WILLOW RUN AIRPORT YPSILANTI, MI 48197			
Latitude: 42.2385215651							
Longitude: -83.5477303034							
Method of Collection: Interpolation-Map							

Drilling Method: Auger/Bored	Well Use: Household	Pump Installed: No
Well Depth: 11.00 ft.	Date Completed: 9/13/1986	Pressure Tank Installed: No
Well Type: Replacement	Height: 0.30 ft. above grade	Pressure Relief Valve Installed: No
Casing Type: Unknown		
Casing Joint: Threaded & coupled		
Casing Fitting: None		
Diameter: 2.00 in. to 5.00 ft. depth		
Borehole: 9.00 in. to 4.50 ft. depth		

Static Water Level: 7.90 ft. Below Grade	Formation Description	Thickness	Depth to Bottom
Well Yield Test:			
Yield Test Method: Unknown	Tan Sand	1.00	1.00
	Tan Silt Clay Gravel W/Sand	1.00	2.00
	Yellow Clay & Sand Fine	1.00	3.00
	Yellow Clay & Sand Fine	1.00	4.00
	Clay Very Fine W/Sand	2.00	6.00
	Tan Clay & Sand Very Fine	2.00	8.00
	Gray Clay Silty W/Sand	2.00	10.00
	Sand & Clay Very Fine Silty	3.00	13.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 2.00 in.	Blank: 0.00 ft. Above
Screen Material Type:	
Slot Length Set Between	
7.00 11.00 ft. 5.50 ft. and 11.00 ft.	
Fittings: None	

Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags Additives Depth
Bentonite slurry	0.00 None 0.00 ft. to 0.00 ft.

Wellhead Completion: Other	Geology Remarks:

Nearest Source of Possible Contamination:	Drilling Machine Operator Name:
Type Distance Direction	Employment: Unknown
Chemical/Fertilizer storage 40 ft. North	
	Contractor Type: Unknown Reg No: 47-0666

Abandoned Well Plugged: No	Business Name:
Reason Not Plugged:	Business Address:
	Water Well Contractor's Certification
	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
	Signature of Registered Contractor Date

General Remarks:
Other Remarks: Wellhead Completion:Completion Type Not Known



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737712013

Tax No:	Permit No:	County: Washtenaw		Township: Ypsilanti	
Well ID: 81000007410		Town/Range: 03S 07E	Section: 12	Well Status:	WSSN:
		Distance and Direction from Road Intersection: 3350' N OF SE CORNER OF SEC 12, 2675' W SEC 12 E LINE			
		Well Owner: HYDRA MATIC DIV GM			
Elevation: 722 ft.		Well Address: WILLOW RUN YPSILANTI, MI 48197		Owner Address: WILLOW RUN YPSILANTI, MI 48197	
Latitude: 42.2414656653					
Longitude: -83.5547191401					
Method of Collection: Interpolation-Map					

Drilling Method: Auger/Bored	Well Use: Household	Pump Installed: No
Well Depth: 15.00 ft.	Well Type: Replacement	Pressure Tank Installed: No
Well Type: Replacement	Date Completed: 2/8/1985	Pressure Relief Valve Installed: No
Casing Type: PVC plastic	Height: 0.00 ft. below grade	
Casing Joint: Threaded & coupled		
Casing Fitting: None		
Diameter: 2.00 in. to 5.00 ft. depth		
Borehole:		

Static Water Level: 7.00 ft. Below Grade	Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
Well Yield Test:		Lithology Unknown Fill	2.00	2.00
		Brown Sand Fine To Medium	3.00	5.00
		Brown Sand & Silt Medium	5.00	10.00
		Gray Sand Fine W/Silt	5.00	15.00

Screen Installed: Yes	Filter Packed: No	Geology Remarks:	
Screen Diameter: 2.10 in.	Blank: 0.00 ft. Above		
Screen Material Type:			
Slot	Length		
10.00	10.00 ft.		
	Set Between		
	5.00 ft. and 15.00 ft.		
Fittings: None			

Well Grouted: Yes	Grouting Method: Unknown	Drilling Machine Operator Name:		
Grouting Material	Bags	Additives	Depth	Employment: Unknown
Bentonite slurry	0.00	None	0.00 ft. to 0.00 ft.	
Wellhead Completion: Unknown		Contractor Type: Unknown	Reg No: 92-1758	
		Business Name:		
		Business Address:		

Nearest Source of Possible Contamination:	Direction	Water Well Contractor's Certification	
Type	Distance	This well was drilled under my supervision and this report is true to the best of my knowledge and belief.	
Unknown	0 ft.	Signature of Registered Contractor	Date
Abandoned Well Plugged: No			
Reason Not Plugged:			

General Remarks:
Other Remarks:



Water Well And Pump Record



Completion is required under authority of Part 127 Act 368 PA 1978.

Failure to comply is a misdemeanor.

Import ID: 81737712009

Tax No:	Permit No:	County: Washtenaw		Township: Ypsilanti	
Well ID: 81000007406 Elevation: 722 ft. Latitude: 42.2432633872 Longitude: -83.5546229047 Method of Collection: Interpolation-Map		Town/Range: 03S 07E	Section: 12	Well Status:	WSSN:
		Source ID/Well No:			
		Distance and Direction from Road Intersection: 4000' N OF SE CORNER SEC 12, 2800' W OF SEC 12 E LINE			
		Well Owner: HYDRA MATIC DIV. GM			
		Well Address: WILLOW RUN YPSILANTI, MI 48197		Owner Address: WILLOW RUN YPSILANTI, MI 48197	

Drilling Method: Auger/Bored	Well Use: Household	Pump Installed: No
Well Depth: 15.00 ft.	Date Completed: 10/30/1984	Pressure Tank Installed: No
Well Type: Replacement	Height: 0.00 ft. below grade	Pressure Relief Valve Installed: No
Casing Type: PVC plastic		
Casing Joint: Unknown		
Casing Fitting: None		
Diameter: 2.00 in. to 5.00 ft. depth		
Borehole:		

Static Water Level: 8.00 ft. Below Grade Well Yield Test:	Yield Test Method: Unknown	Formation Description	Thickness	Depth to Bottom
		Brown Clay Silty	2.00	2.00
		Brown Sand Medium Fine	3.00	5.00
		Gray Sand Fine	2.00	7.00
		Gray Sand & Silt Fine	6.00	13.00
		Gray Silt	2.00	15.00

Screen Installed: Yes	Filter Packed: No
Screen Diameter: 2.10 in.	Blank: 0.00 ft. Above
Screen Material Type:	
Slot	Length
10.00	10.00 ft.
Set Between	
5.00 ft. and 15.00 ft.	
Fittings: None	
Well Grouted: Yes	Grouting Method: Unknown
Grouting Material	Bags
Bentonite slurry	0.00
Additives	Depth
None	0.00 ft. to 0.00 ft.
Wellhead Completion: Unknown	

Nearest Source of Possible Contamination:	Drilling Machine Operator Name:
Type	Employment: Unknown
Unknown	
Distance	Contractor Type: Unknown
0 ft.	Reg No: 92-1758
Direction	Business Name:
	Business Address:

Abandoned Well Plugged: No	Water Well Contractor's Certification This well was drilled under my supervision and this report is true to the best of my knowledge and belief.
Reason Not Plugged:	
	Signature of Registered Contractor
	Date

General Remarks:
Other Remarks: