11/2/01 Engineer 10:00

12/3/01 Final 10A.m. 5/30/02 Pump Test 11:00

ISSUE DATE: 9/20/2001

APPROVAL DATE: 5/30/02

PERMIT

INDEXED

P 516036

A 58993-H

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

04-364295

Hatfields Equipment IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER:

SUBDIVISION: Cattail Ridge LOT NUMBER: 8

ADDRESS: 15020 Rolling Hills Drive PROPERTY OWNER: ~~MTR Land, Inc.~~ Fred Billig 489-4467

SEPTIC TANK CAPACITY (GALLONS): 1000 (TOP SEAM)

PUMP CHAMBER CAPACITY (GALLONS): 1000 (TOP SEAM)

NUMBER OF BEDROOMS: 3

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 210

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.5 feet below original grade. Bottom maximum depth 6.5 feet below original grade. Effective area begins at 4.5 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Begin trenches 130 feet off the front lot line and 105 feet off the left lot line as seen when facing the lot from Rolling Hills Drive. Run trenches on contour in both directions. or as determined at layout.
NOTES:	TANKS SHOULD BE SET SO AS NOT TO BE IN DRAINAGE CUT AROUND HOUSE. LAYOUT TO DETERMINE BEST TANK PLACEMENT.

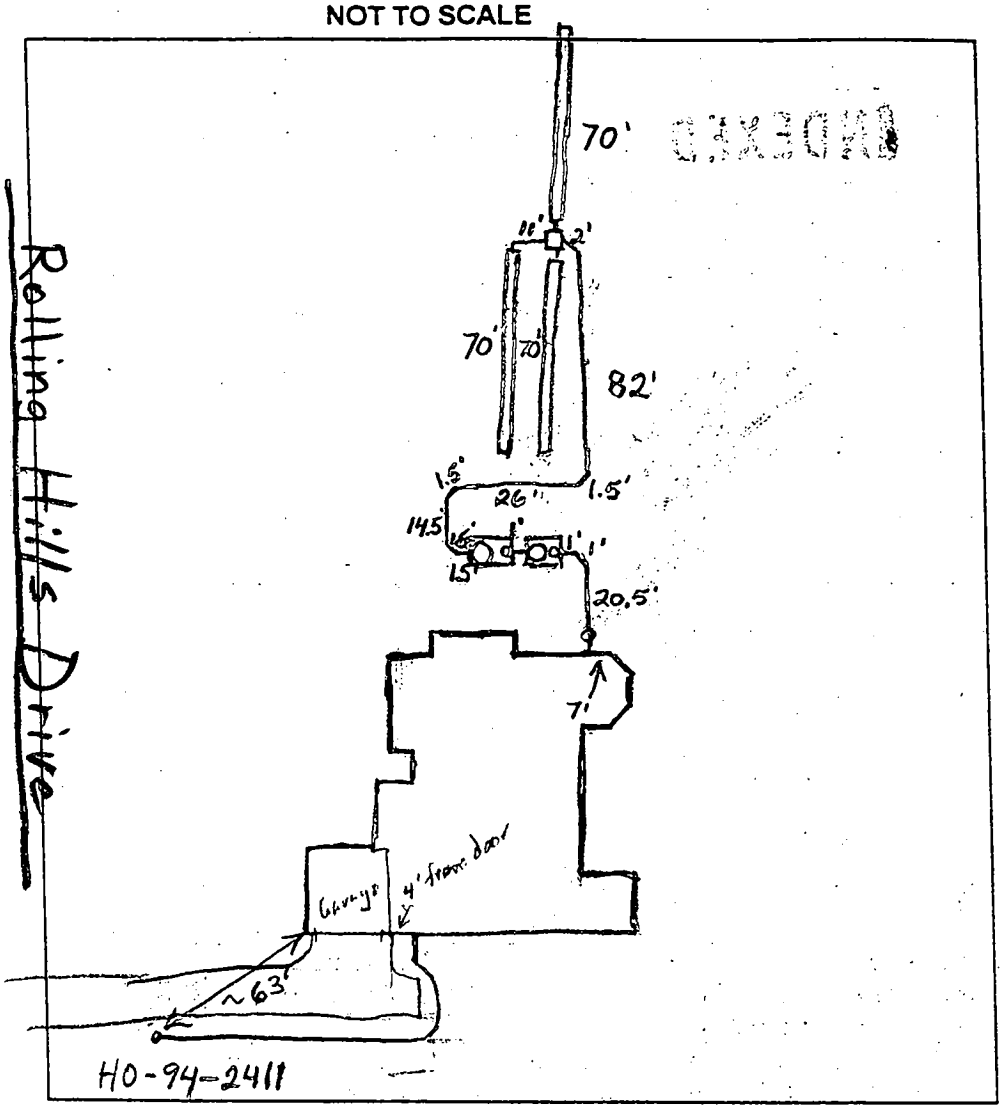
PLANS APPROVED: Amy Mc Millen OK SRM 5/15/01 DATE: 5-11-01

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

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A 58993-H

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3.0'

TRENCH INLET DEPTH 4.5'

TRENCH BOTTOM DEPTH 6.5'

DEPTH OF STONE 2'

NUMBER OF TRENCHES 3

TOTAL TRENCH LENGTH 210

ABSORBENT AREA 630 sq. ft.

DISTRIBUTION BOX LEVEL Yes

BAFFLE IN DISTRIBUTION BOX 90° On Inlet

SEPTIC TANK DATA

SEPTIC TANK 1000 TS GALLONS

MANHOLE RISER Yes

6 INCH INSPECTION PORT Yes

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS 1000 TS

MANHOLE RISER Yes

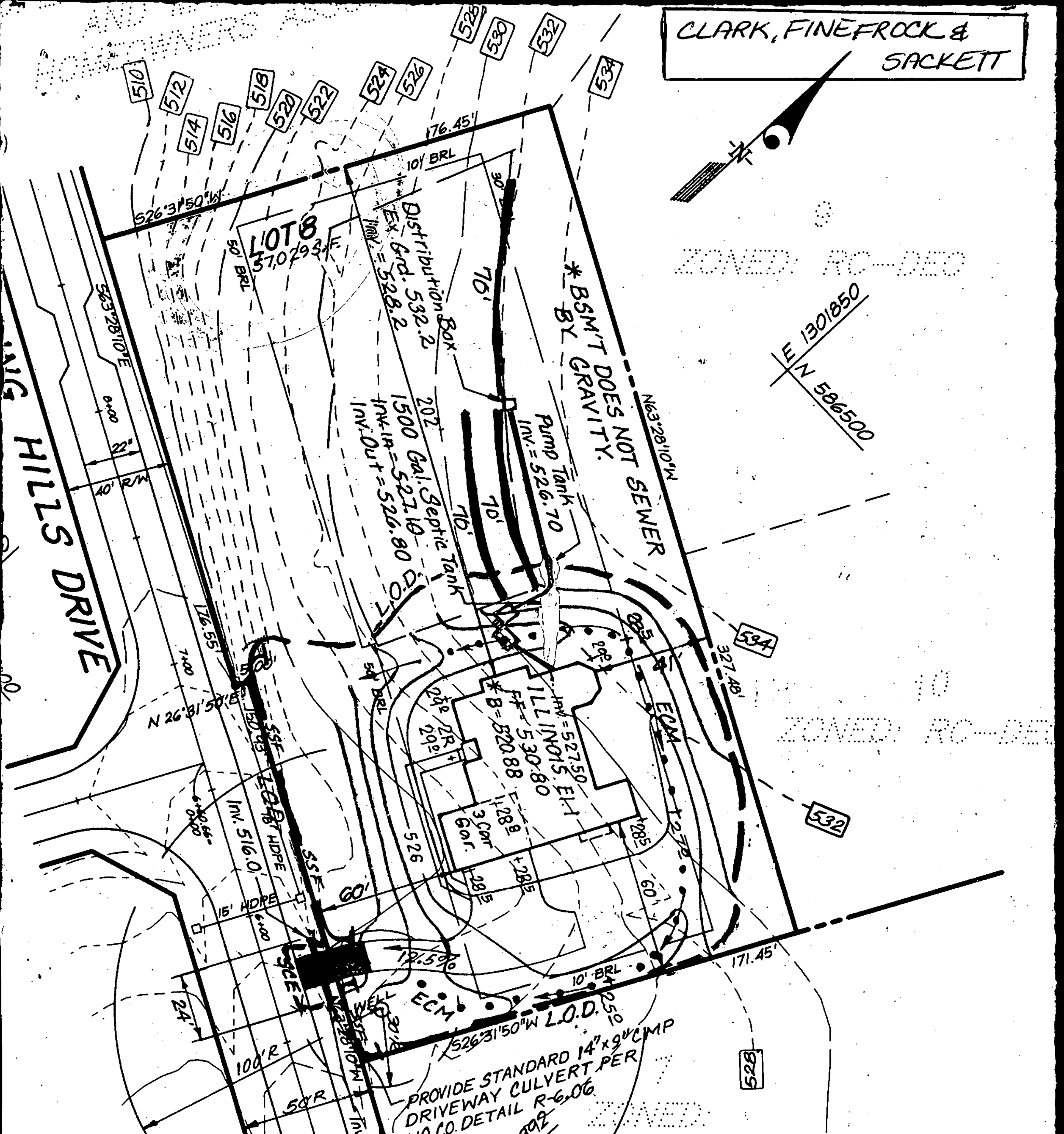
ALARM Functional

PUMP PERFORMANCE TEST OK

PRE-CONSTRUCTION INSPECTION: 11/2/01 O.K. to install tanks next to house or their depth will exceed 3 feet. To seal manhole covers on tanks

INSPECTION COMMENTS: with cement. Any other possible places where water can enter tanks are to be sealed with cement if access isn't required. To run trenches as planned keeping 20' from 25% slopes. (BB) 12/3/01 Need house connection, pump and alarm test. (BB) 12/3/01 House conn complete, needs fan (SO) 5/30/02 Pump & Alarm tests OK (SO)

INSPECTOR _____ DATE SYSTEM APPROVED 5/30/02


CLARK, FINEFROCK & SACKETT
N
ZONED: RC-DEO
ZONED: RC-DEO
LOT 8
37,029 S.F.
Distribution Box
Ex. Grd. 532.2
Inv. = 528.2
1500 Gal. Septic Tank
Inv. In = 527.10
Inv. Out = 526.80
Pump Tank
Inv. = 526.70
*BSM'T DOES NOT SEWER BY GRAVITY.
ILLINOIS EL-1
Inv = 527.50
FF = 530.80
B = 520.88
3 Car Gar.
HILLS DRIVE
40' R/W
22'
10' BRL
50' BRL
L.O.D.
ECM
SSF
S26°31'50"W
N63°28'10"W
S63°28'10"E
N 26°31'50"E
176.45'
176.55'
171.45'
327.48'
E 1301850
N 586500
E 1301992
N 586200
PROVIDE STANDARD 14"x9" CMP DRIVEWAY CULVERT PER HO. CO. DETAIL R-6.06
Inv. 516.0
Inv. 517.6
15' HDPE
100'R
50'R
WELL
12.5%
60'
70'
76'
SCE

Approved Septic System Plan
Howard County Health Department

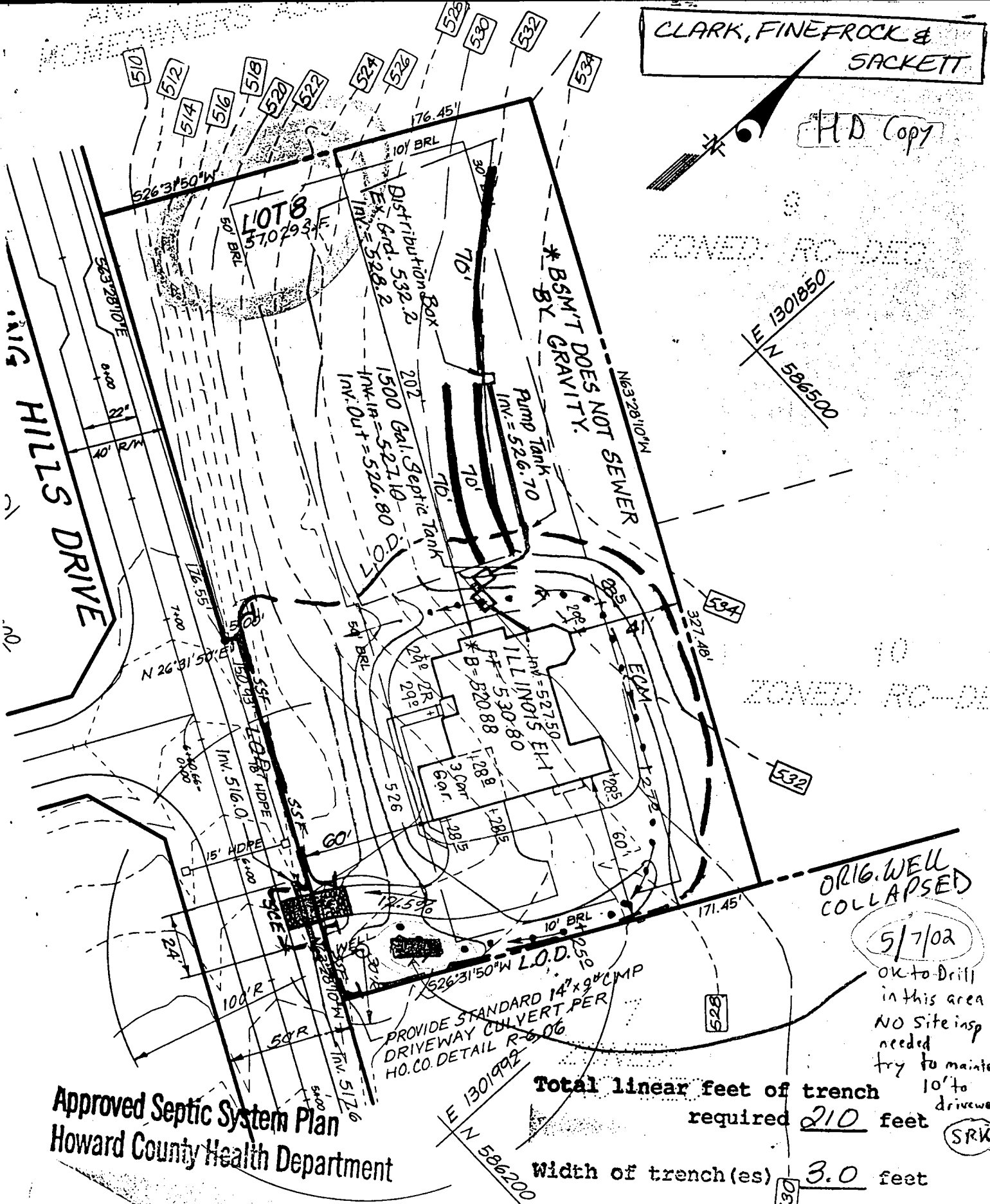
Signature: [signature] Date: 5/11/01

Total linear feet of trench required 210 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 6.5 feet

Depth of stone required below distribution pipe 2.0 feet



Approved Septic System Plan
Howard County Health Department

Total linear feet of trench required 210 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 6.5 feet

Depth of stone required below distribution pipe 2.0 feet

Signature 5/11/01 Date

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

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

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

Company Name: Dunaway Pump Telephone #: 410-781-7051
Address: 10703 Patuxent Dr. Sykesville MD

(Must circle one) (Licensed Plumber) Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Chris Willoughby License# 1992
*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: ROSEMARY Telephone #: 301-953-3110
Subdivision: LATTAIC RIDGE Lot #: 8 Well Tag #: HO-94-0411 ← OLD WELL (ABANDONED & SEALED)
Site Address: 15020 ROLLING HILLS Ellicott MD 21042 NEW WELL IS HO-94-3404

Submersible Pump Data
Make: Dunaway
Model #:
Pump Capacity GPM
Well Yield: 12 GPM

Pitless Adapter
Make: Bohnard
Model#:
Depth: (36" min)
NSF approved:

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

Depth of well encountered at time of pump installation: 400 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required – Must circle one
Safety rope, if used, attached to *inside of* well casing with eye bolt ____

Piping to house
Type: CREST LINE
PSI: 1" (160 psi min)
Depth of supply line: 5' (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: ✓
Approximate length of sleeve: 6' ✓
Sleeve caulked and sealed properly: ✓

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

Chris Willoughby 10-25-01
Signature of company representative responsible for installation date

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

Date Insp. Requested: 12/7/01 AM Date Insp. Approved: 12/7/01 (ED) 5/31/02 (MR)

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

T/C W/ BLDR: NO WPI OBS'D FOR NEW WELL BUT ACCEPTED W/O INSP

MD-215(Rev. 8/00)

C 1 | 15903 | SEQUENCE NO. (MDE USE ONLY)

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

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

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A58593 H

ST/CO USE ONLY
DATE Received MM DD YY

DATE WELL COMPLETED: MM 05 DD 14 YY 02

Depth of Well: 200 (TO NEAREST FOOT)

OK BB SRL 5/29/02

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-3404

OWNER BNS Developers (last name / first name)

STREET OR RFD 8808 Centen Park Dr TOWN Columbia MD

SUBDIVISION CATTAIL RIDGE SECTION — LOT 8

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Top Soil	0	2	
Sandy	2	60	✓
Sand Stone	60	65	
MICKA	65	95	
Sand Stone	95	100	✓
MICKA	100	200	

NUMBER OF UNSUCCESSFUL WELLS: 1

WELL HYDROFRACTURED: yes — no (N)

CIRCLE APPROPRIATE LETTER
- A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
- E ELECTRIC LOG OBTAINED
- P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. M S D [illegible]

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. — — D — — —

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

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

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 22 NO. OF POUNDS 2200

GALLONS OF WATER 132

DEPTH OF GROUT SEAL (to nearest foot) from 0 (TOP) ft. to 30+ (BOTTOM) ft.

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

(ST) STEEL (CO) CONCRETE (PL) PLASTIC (OT) OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
PL	6	78

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	depth (feet) to

SCREEN RECORD
screen type or open hole — insert appropriate code below

(ST) STEEL (BR) BRASS (BRONZE) (PL) PLASTIC (HO) OPEN HOLE (OT) OTHER

EACH SCREEN	DEPTH (nearest ft.)		
1	40	76	200
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

from	to

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

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

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

TELESCOPE CASING | LOG INDICATOR | OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 45 ft.

WHEN PUMPING 65 ft.

TYPE OF PUMP USED (for test)

(A) air (P) piston (T) turbine (C) centrifugal (R) rotary (O) other (describe below) (J) jet (S) submersible

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO): YES (NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

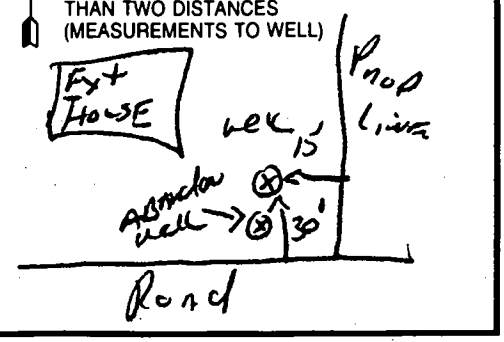
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

(+) above (−) below LAND SURFACE

2 (nearest) foot

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



DENV-CR00

COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 | 5716 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL

NO FEE please print or type

STATE PERMIT NUMBER: HO-94-3404

fill in this form completely

OWNER INFORMATION

Date Received (APA): 05 07 02 (MM DD YY)

BRS Developers LLC
Last Name / Owner / First Name

8808 Centen Park DR. Suite 209
Street or RFD

Columbia MD 21045
Town / State / Zip

DRILLER INFORMATION

Ralph E. Mayne MSD 117
Driller's Name / License No.

Ralph E. Mayne well Drilling
Firm Name

17024 Hardy Rd. Mt Airy MD. 21771
Address

Signature 5/7/02 Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- [I] INDUSTRIAL, COMMERICIAL, DEWATERING
- [P] PUBLIC WATER SUPPLY WELL
- [T] TEST, OBSERVATION, MONITORING
- [G] GEO-THERMAL

APPROXIMATE DEPTH OF WELL: 5 FEET

APPROXIMATE DIAMETER OF WELL: 500 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) | JETTED | Jetted & DRIVEN
(AIR-ROTary) | AIR-PERcussion | ROTARY (Hydraulic Rotary)
CABLE | REVerse-ROTary | DRive-POINT
other

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- (Y) THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- [D] THIS WELL WILL DEEPEN AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER: GAP

PERMIT No. HO-94-3404

B 3 LOCATION OF WELL

Howard
COUNTY

Cattail Ridge
SUBDIVISION

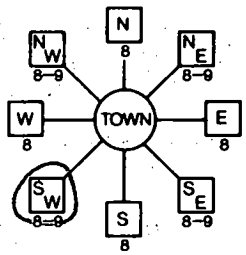
SECTION — LOT 8

Glenwood
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town): I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Rolling Hills DR.
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD: 30 ENTER FT OR MI

TAX MAP: 21 BLK: — PARCEL 3

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A58993H
COUNTY NAME / COUNTY NO.

STATE SIGNATURE _____ INSERT S

DATE ISSUED 05 07 02 Steven R. Krieg 5 07 03
MM DD YY / CO SIGNATURE / EXP. DATE

NORTH GRID 525 000 EAST GRID 790 000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

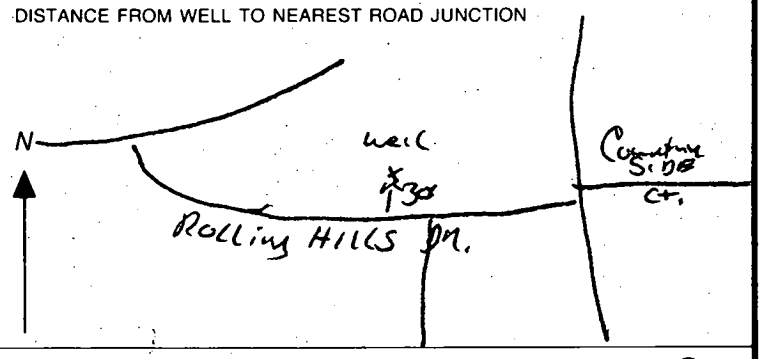
WRITE THE BOX NUMBER FROM THE MAP HERE

E 790

N 525

000
000

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



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

DENV-Permit 97

② COUNTY

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

OK SRK

6/10/02

SUBMIT COPIES OF COMPLETED FORM TO:

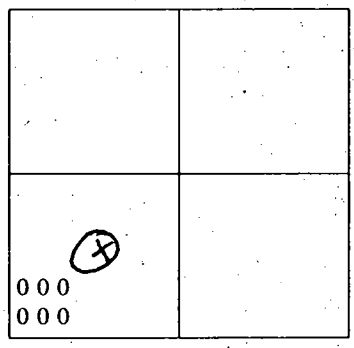
* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
* WELL OWNER
* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: MAY 31 2002 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any): HO-94-2411
* PERMIT NUMBER OF REPLACEMENT WELL: HO-94-3404
* PERSON ABANDONING WELL: Ralph Mayne well Drilling WELL DRILLERS LICENSE NUMBER: 117
  CIRCLE: MWD (MSD) MGD
* OWNER'S NAME: BRS Developers
* WELL LOCATION:

COUNTY: Howard
NEAREST TOWN: GLENWOOD
TAX MAP 21 BLOCK ____ PARCEL 3
SUBDIVISION: CATTAIL RIDGE
SECTION: ____ LOT: 8

MARYLAND GRID COORDINATES
BOX NUMBER E 790 N 520 <---



SHOW WELL LOCATION BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:
  ✓ DRILLED ____ JETTED
  ____ BORED/AUGUERED ____ HAND DUG
  ____ OTHER (specify) ____

* USE CODE:
  ✓ DOMESTIC ____ MUNICIPAL/PUBLIC
  ____ IRRIGATION ____ INDUSTRIAL
  ____ TEST/OBSERVATION

* TYPE OF CASING:
  ✓ STEEL ____ PLASTIC
  ____ CONCRETE ____ OTHER (specify)

* SIZE OF CASING: 6 1/4 INCHES IN DIAMETER
* DEPTH OF WELL: 90 FEET DEEP
* WAS ANY CASING REMOVED? ✓ YES ____ NO
  if yes, length removed, in feet: 4 ft.
* WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Cement	90	0

Ralph S. Mayne — MSD — MWD (MSD) MGD 117 — 5-31-02

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN | LICENSE # | CIRCLE ONE | DATE

DENV 828 JULY 1993

2) COUNTY ENVIRONMENTAL AGENCY

C 1 1947 — SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED ✓

COUNTY NUMBER A 58998 H

ST/CO USE ONLY
DATE Received MM DD YY: 8 13

DATE WELL COMPLETED: MM 10 DD 7 YY 99 (15 20)

Depth of Well: 22 200 26 (TO NEAREST FOOT)

OKALM (SRA) 5/11/01

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-0-2411 (28 29 30 31 32 33 34 35 36 37)

OWNER BRS Developers (last name) (first name)

STREET OR RFD Rolling Hills DR TOWN Glenwood

SUBDIVISION Cattail Ridge SECTION LOT 8

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Top Soil	0	2	
Sandy	2	55	✓
Sand Stone	55	60	
MICKA	60	95	
Sand Stone	95	100	✓
MICKA	100	200	

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: yes [Y] no [N]

CIRCLE APPROPRIATE LETTER
- A — A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
- E — ELECTRIC LOG OBTAINED
- P — TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO.: MSD 116
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: MSD 112
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): yes [Y] (44) no [N] (44)

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT [CM] (45 46) BENTONITE CLAY [BC] (45 46)

NO. OF BAGS 19 NO. OF POUNDS 1900
GALLONS OF WATER 114
DEPTH OF GROUT SEAL (to nearest foot)
from 0 (48 TOP 52) ft. to 30+ (54 BOTTOM 58) ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below:
[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST (60 61)	6 (63 64)	>0 (66 70)

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below:
[ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

C 2

DEPTH (nearest ft.)

EACH SCREEN	1	2
1	40 (8 9)	68 (11 15)	200 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)

	from	to
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		(68)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) (E.R.O.S.) (72) W Q (74 75 76)
TELESCOPE CASING — LOG INDICATOR — OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour): 3 (8 9)

PUMPING RATE (gal. per min.): 12. (11 15)

METHOD USED TO MEASURE PUMPING RATE: Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING: 36 (17 20) ft.

WHEN PUMPING: 42 (22 25) ft.

TYPE OF PUMP USED (for test) (27)
- [A] air
- [P] piston
- [T] turbine
- [C] centrifugal
- [R] rotary
- [O] other (describe below)
- [J] jet
- [S] submersible

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO): YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31 35)

PUMP HORSE POWER (37 41)

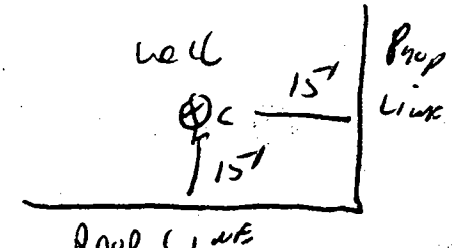
PUMP COLUMN LENGTH (nearest ft.) (43 47)

CASING HEIGHT (circle appropriate box and enter casing height)
- [+] (49) above LAND SURFACE
- [–] (49) below

2 (nearest foot) (50 51)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

N



DENV-CR97

② COUNTY

5/7/02

Well Collapsed

Driller made attempts to remediate, but to no avail.

Well will be sealed. & new well drilled

EMERGENCY/TEMP NO. IF ANY

B 1 1939	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO - 94 - 2411 fill in this form completely

OWNER INFORMATION

Date Received (APA): 08 30 99 (MM DD YY)

Last Name / Owner / First Name: BRS Developer's LLC

Street or RFD: 8808 Centre Park Dr. Suite 209

Town: Columbia State: MD Zip: 21045

DRILLER INFORMATION

Driller's Name: Ralph Mayne License No.: M SD 116

Firm Name: Ralph Mayne well Drilling

Address: 9120 Brown Churchill Mt Airy

Signature: [signature] Date: 8-25-99

LOCATION OF WELL

B 3

COUNTY: Howard

SUBDIVISION: Cattail Ridge

SECTION: — LOT: 8

NEAREST TOWN: Glenwood

MILES FROM TOWN (enter 0 if in town): 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N, NE, E, SE, S, SW (circled), W, NW

NEAR WHAT ROAD: ~~Route~~ Rolling Hills Dr

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

DISTANCE FROM ROAD: 25 ENTER FT OR MI: ft

TAX MAP: 21 BLK: ______ PARCEL: 3

WELL INFORMATION

B 2

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled)
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- I INDUSTRIAL, COMMERICIAL, DEWATERING
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: Howard Co COUNTY NO.: A58993H

STATE SIGNATURE: ______ INSERT S →

DATE ISSUED: 090799 CO SIGNATURE: A McMill EXP. DATE: 090700

NORTH GRID: 525 000 EAST GRID: 790 000

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

9/28/99
Tag # 94-2411
70' casing [illegible]
30' open grout
19 bags cement
BR

WRITE THE BOX NUMBER FROM THE MAP HERE

E 790 000

N 525 000

METHOD OF DRILLING (circle one)

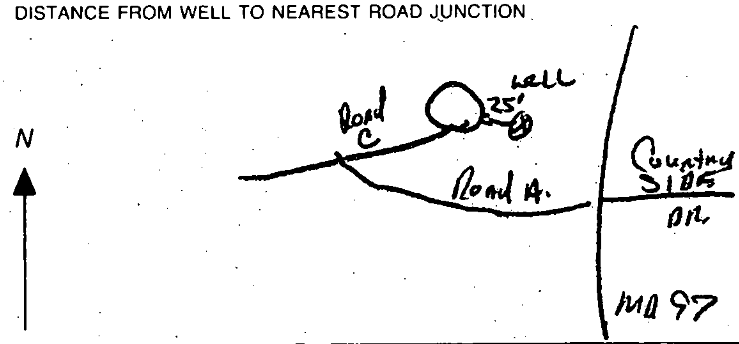
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary (circled) AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary DRive-POINT
other ______

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled)
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEN AN EXISTING WELL

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

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



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

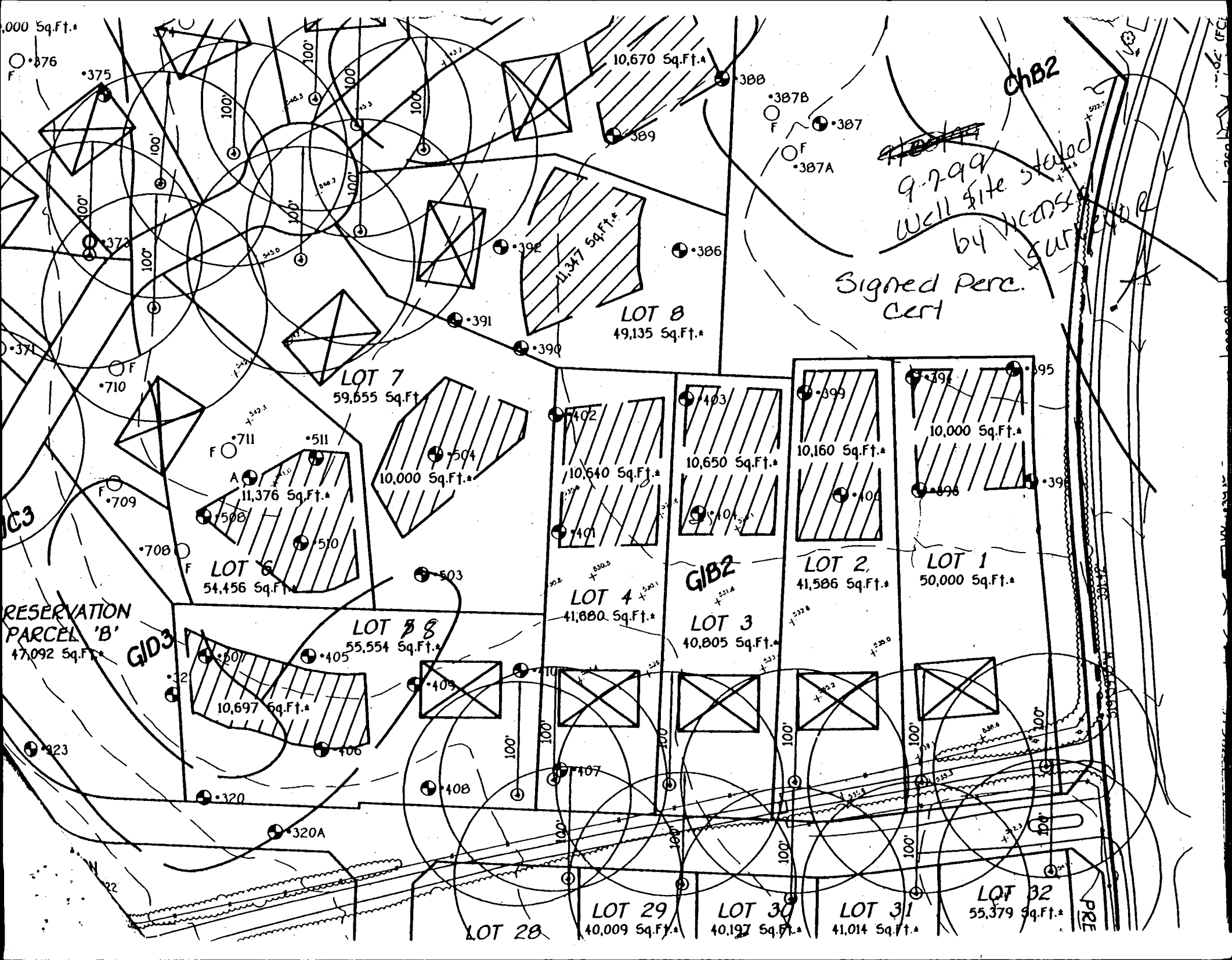
APPROP. PERMIT NUMBER: GAP

PERMIT No. HO - 94 - 2411

SPECIAL CONDITIONS

NOTE • APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED •

DENV-Permit 97 ② COUNTY


10,670 Sq.Ft.±
CHB2
9-7-99
well site staked
by licensed surveyor
Signed Perc.
Cert
11,347 Sq.Ft.±
LOT 8
49,135 Sq.Ft.±
LOT 7
59,655 Sq.Ft.±
10,000 Sq.Ft.±
11,376 Sq.Ft.±
LOT 6
54,456 Sq.Ft.±
10,640 Sq.Ft.±
10,650 Sq.Ft.±
10,160 Sq.Ft.±
10,000 Sq.Ft.±
LOT 4
41,680 Sq.Ft.±
LOT 3
40,805 Sq.Ft.±
LOT 2
41,586 Sq.Ft.±
LOT 1
50,000 Sq.Ft.±
GIB2
GID3
RESERVATION
PARCEL 'B'
47,092 Sq.Ft.±
LOT B
55,554 Sq.Ft.±
10,697 Sq.Ft.±
LOT 28
LOT 29
40,009 Sq.Ft.±
LOT 30
40,197 Sq.Ft.±
LOT 31
41,014 Sq.Ft.±
LOT 32
55,379 Sq.Ft.±

APPLICATION

PERCOLATION TESTING

A 58993

P _____

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

DISTRICT _____

DATE 9-25-97

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER J. Thomas Sachse

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER c/o LDMD

ADDRESS 10365 Gilroy Rd Suite 215 PHONE 410-740-2102
Columbia, MD 21044

PROPERTY LOCATION:

SUBDIVISION Hearn Rei' LOT NO. Lot 88

ROAD AND DESCRIPTION Rte 97

TAX MAP 21 PARCEL # ~~139~~ 3

SIZE OF LOT 1 acre TYPE BLDG. SFD (38 LOTS)
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

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

THIS IS NOT A PERMIT

HD-216 (3/92)

LOT 1

COUNTY #

SOIL PROFILE

406

0'
orange brown SiCILm
3.0
red brn SiLm
6.0
lgt red tan SiSaLm 15% saprolite Rx mix
12.5

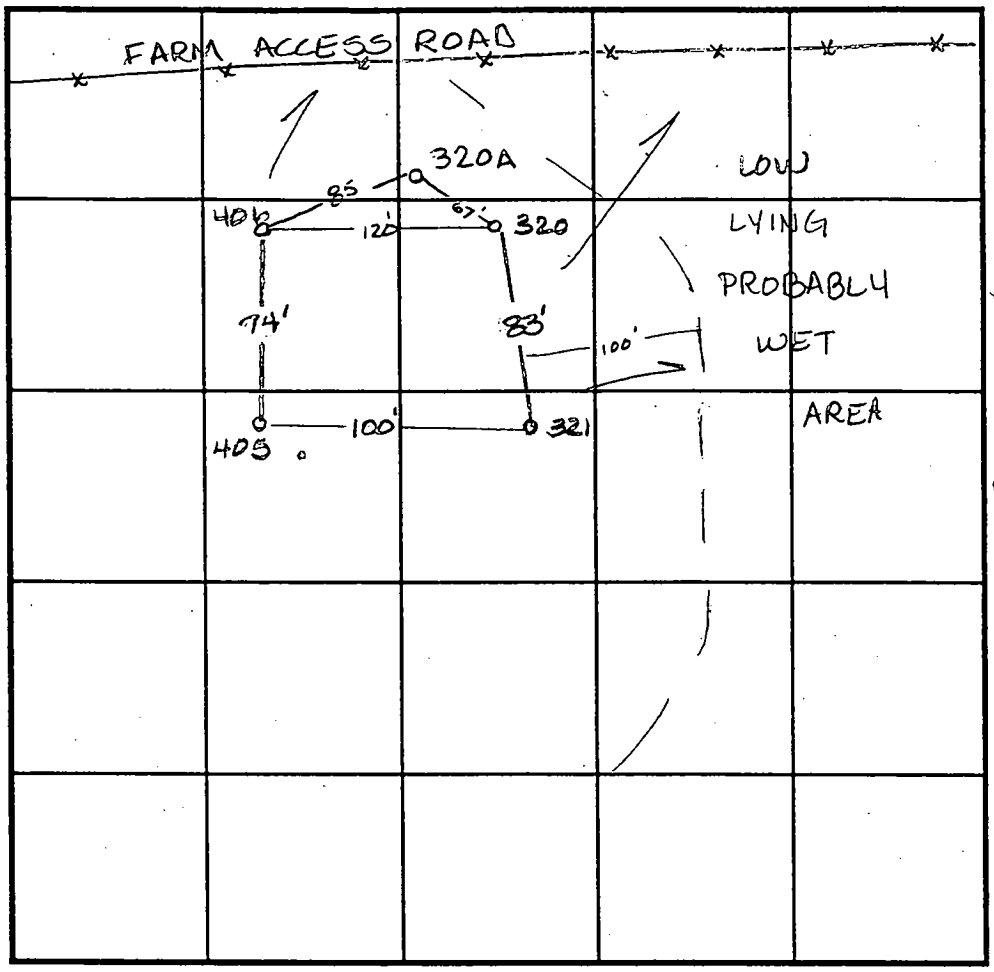
405

dark red brn SiCILm
4.0
dark brn SaLm 20% Rx very dark-black Rx channels w/ Fe deposits
12.5

320

320-A

red brn SiCILm
4.0
red brn SiLm packets of decayed feldspar
6.0
lgt tan or. SiSaLm possible mottling
10.5



SOIL PROFILE

321

0'
dark red brn SiCILm
5.0
lgt tan grey SaLm 20% Rx
8.5
>50% Rx grey
11.0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME	
11-3-97	406	4.0 / V12.5	11:45	11:51	11:51	12:20	29 min	
		6.5 / V12.5	11:35[15]	11:44	11:44	11:50	6 min	
	320-A	4.0 / V12.0	11:30	11:31	11:31	11:44	13 min	
	405	4.5 / V12.5	11:56	12:00	12:00	12:15	15 min	
	320	4.0 / V12.0	12:15	12:18[30]	12:18[30]	12:21[30]	3 min	WET
	321	4.0 / V11.0	11:51	11:59	11:59	12:14	15 min	

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillen ALSO PRESENT D. Rewwer

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A 58993

P _____

DISTRICT _____

DATE 9-25-97

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

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER J. Thomas Sachse

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER c/o LDAD

ADDRESS 10365 Wilkinson Blvd Suite 205 PHONE 410-740-2102
Columbia, MD 21044

PROPERTY LOCATION:

SUBDIVISION Hap Rei LOT NO. 8

ROAD AND DESCRIPTION Rte 97

TAX MAP 21 PARCEL # ~~137~~ 3

SIZE OF LOT 1 acre TYPE BLDG. SFD (38 LOTS)
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

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

THIS IS NOT A PERMIT

HD-216 (3/92)

LOT 34

COUNTY #

SOIL PROFILE

410

0' red or. SiClLm

4.0 vein of 30% lg. Rx frags

5.0 beigh brn SiSaLm micaceous 10% Rx frags

13.5

407 408

lgt red brn SiClLm

3.0

lgt orange beigh SiSaLm <5% Rx some grey mottles on top of pile - where in profile?

12.5

409

dark red SiClLm

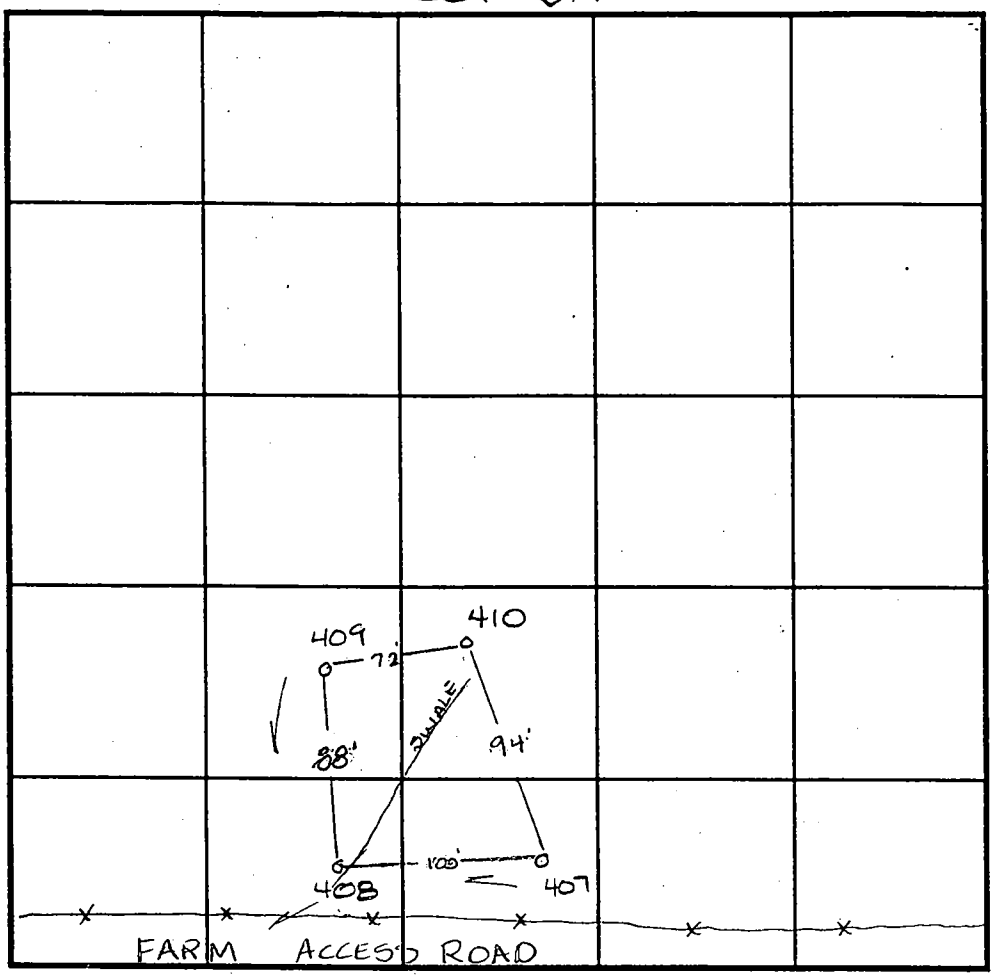
3.5

red brn SiLm

5.5

lgt tan SiSaLm micaceous <5% Rx

12.0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0'

40' old from 410

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11-3-97	410	4.5 / V13.5	11:15	11:16	11:16	11:18	2min
	407	4.5 / V12.5	11:13 30	11:30	11:30	11:48	18min
		7.5 / V12.5	11:12 30	11:16 30	11:16 30	11:24	7½min
	408	Visual	- see profile -		clay at	4.0 —	wet
	409	4.0 / V12.0	11:20 30	11:24	11:24	11:30	6min

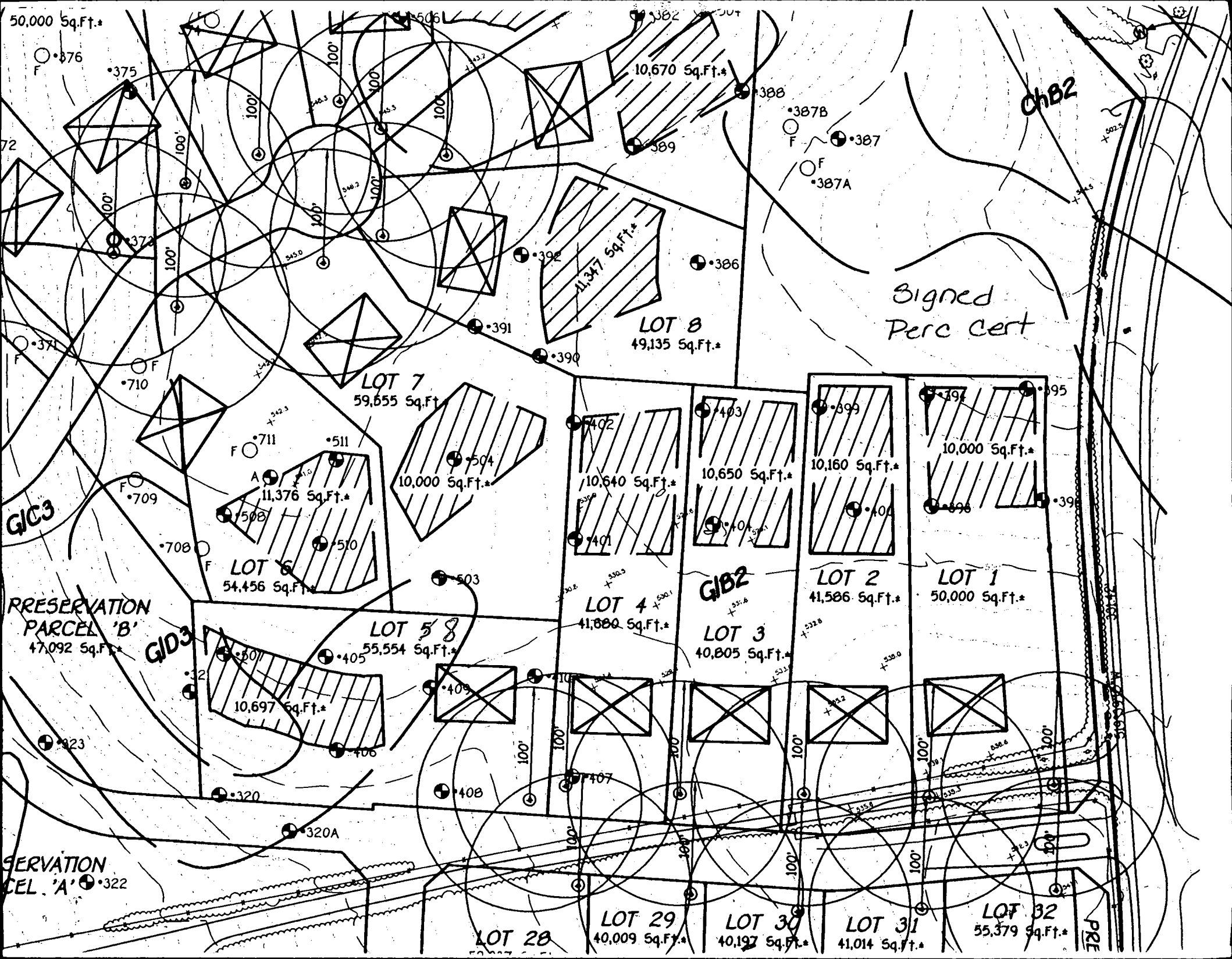
REMARKS Hold for wet

TYPE OF SOIL

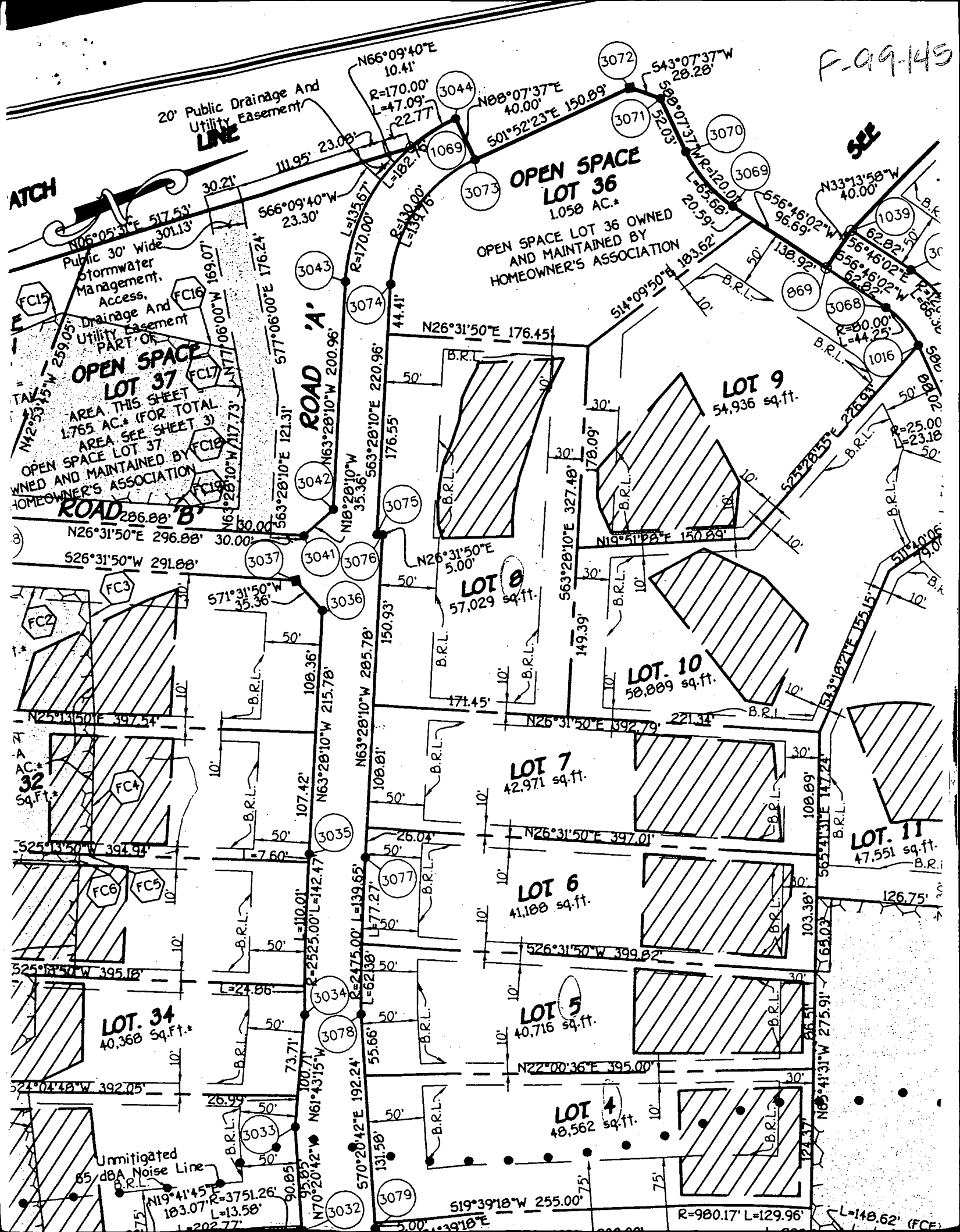
TESTED BY Amy McMillen ALSO PRESENT D. Reuwer

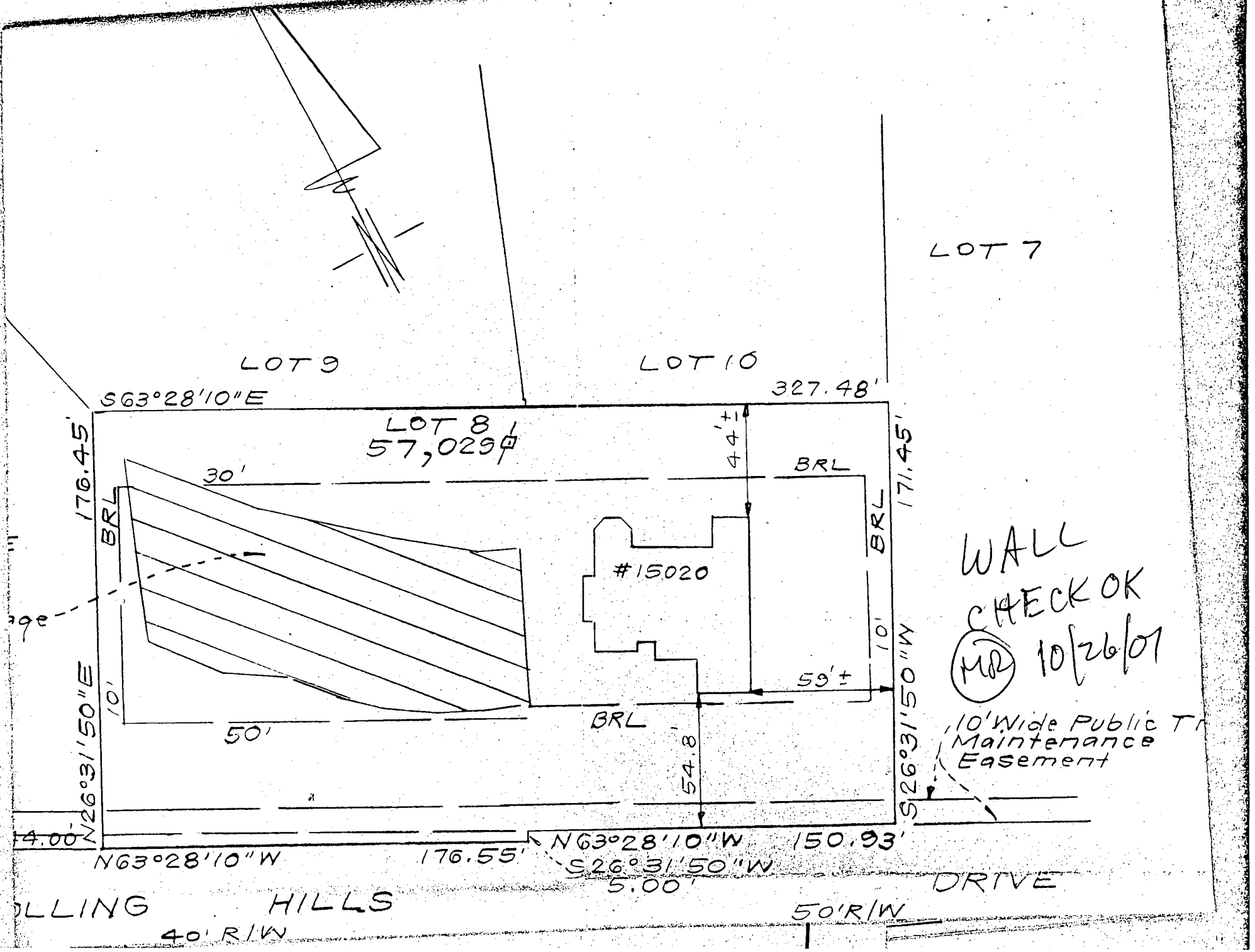
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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


50,000 Sq.Ft.±
10,670 Sq.Ft.±
11,347 Sq.Ft.±
LOT 8
49,135 Sq.Ft.±
Signed
Perc Cert
LOT 7
59,655 Sq.Ft.
10,000 Sq.Ft.±
11,376 Sq.Ft.±
10,640 Sq.Ft.±
10,650 Sq.Ft.±
10,160 Sq.Ft.±
10,000 Sq.Ft.±
GIC3
LOT 6
54,456 Sq.Ft.±
PRESERVATION
PARCEL 'B'
47,092 Sq.Ft.±
GID3
LOT 5
55,554 Sq.Ft.±
10,697 Sq.Ft.±
LOT 4
41,880 Sq.Ft.±
GIB2
LOT 3
40,805 Sq.Ft.±
LOT 2
41,586 Sq.Ft.±
LOT 1
50,000 Sq.Ft.±
ChB2
LOT 28
LOT 29
40,009 Sq.Ft.±
LOT 30
40,197 Sq.Ft.±
LOT 31
41,014 Sq.Ft.±
LOT 32
55,379 Sq.Ft.±
SERVATION
CEL 'A'

F-99-145


OPEN SPACE LOT 36
1.058 AC.±
OPEN SPACE LOT 36 OWNED AND MAINTAINED BY HOMEOWNER'S ASSOCIATION
OPEN SPACE LOT 37
AREA THIS SHEET 1.765 AC.± (FOR TOTAL AREA SEE SHEET 3)
OPEN SPACE LOT 37 OWNED AND MAINTAINED BY HOMEOWNER'S ASSOCIATION
20' Public Drainage And Utility Easement
Public 30' Wide Stormwater Management, Access, Drainage And Utility Easement
PART OF
ROAD 'A'
ROAD 'B'
LOT 9 54,936 sq.ft.
LOT 8 57,029 sq.ft.
LOT 10 58,889 sq.ft.
LOT 7 42,971 sq.ft.
LOT 6 41,188 sq.ft.
LOT 5 40,716 sq.ft.
LOT 4 48,562 sq.ft.
LOT 11 47,551 sq.ft.
LOT 34 40,368 Sq.Ft.±
32 Sq.Ft.±
Unmitigated 65 dBA Noise Line
SEE
FC1
FC2
FC3
FC4
FC5
FC6
FC15
FC16
FC17
FC18
FC19


LOT 7
LOT 9
LOT 10
S63°28'10"E
327.48'
LOT 8
57,029 ☐'
176.45'
171.45'
30'
BRL
BRL
BRL
44'±
#15020
10'
10'
59'±
50'
BRL
54.8
N26°31'50"E
S26°31'50"W
4.00'
N63°28'10"W
176.55'
N63°28'10"W
150.93'
S26°31'50"W
5.00'
WALL
CHECK OK
MP 10/26/01
10' Wide Public
Maintenance
Easement
DRIVE
LLING HILLS
40' R/W
50' R/W