

6/6/01
Layout
10:00

6/7/01
Final

AM 04-362632

Matfield's Equipment

PERMIT

SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 515257

A58993-HH

ISSUE DATE 5/23/2001

APPROVAL DATE 6/7/01

INDEXED

IS PERMITTED TO INSTALL X ALTER

ADDRESS 13785 Burntwoods Road, Glenely, MD 21737 PHONE 301-854-6172

SUBDIVISION Cattail Ridge LOT NUMBER 35 ADDRESS 15005 Rolling Hills Drive

PROPERTY OWNER Michael T. Rose Land PROPERTY OWNER'S ADDRESS 13920 Baltimore Blvd.

SEPTIC TANK CAPACITY 1250 GALLONS

PUMP CHAMBER CAPACITY GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES: Trenches to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. 4 feet of stone below distribution box.

LOCATION: Place the distribution box 175' down the left 394.64' lot line and 40' off the same lot line as seen when facing the front of the lot. Run trenches on contour towards the left lot line. 3/1/00 O.V. 50)

PLANS APPROVED Brian Baker DATE 1-31-2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INFORMATIONAL SERVICE

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

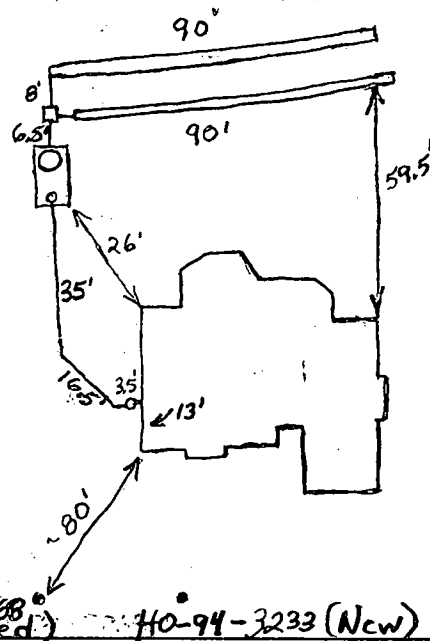
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

BLDG. PERMIT SIGNED
AND RETURNED 5/17/01
600130290
Retaining wall

A 58993-HH

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 2'
TRENCH INLET DEPTH 3.5'
TRENCH BOTTOM DEPTH 7.5'
DEPTH OF STONE 4'
NUMBER OF TRENCHES 2
TOTAL TRENCH LENGTH 180
ABSORBENT AREA 720 sq. ft.
DISTRIBUTION BOX LEVEL Yes
BAFFLE IN DISTRIBUTION BOX Yes

SEPTIC TANK DATA

SEPTIC TANK 1500 TS GALLONS
MANHOLE RISER Yes
6 INCH INSPECTION PORT Yes

PUMP CHAMBER DATA N/A

~~PUMP CHAMBER GALLONS _____~~
~~MANHOLE RISER _____~~
~~ALARM _____~~
~~PUMP PERFORMANCE TEST _____~~

PRE-CONSTRUCTION INSPECTION: Rolling Hills Drive
6/6/01 To install 2-90' trenches towards right.
lot line (BB) 6/7/01 Everything Satisfactory. O.K. to cover. (BB)

INSPECTION COMMENTS: _____

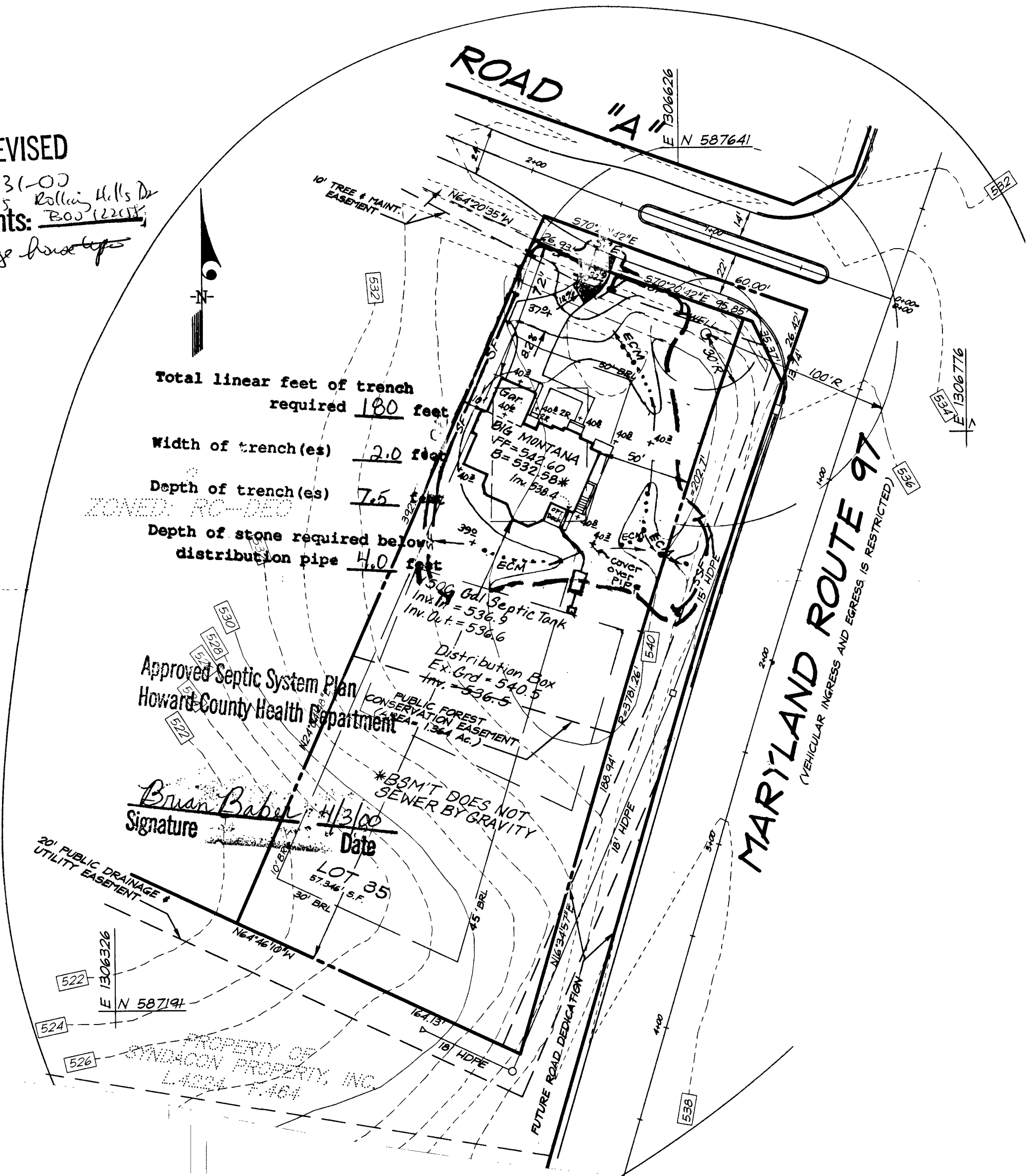
INSPECTOR

B. Baker

DATE SYSTEM APPROVED

6/7/01

REVISED
Date: 3-31-00
1500 S Rolling Hills Dr
Comments: BOJ (22/11)
change house type



Approved Septic System Plan
Howard County Health Department

Brian Baber
Signature
Date: 4/3/00

*BSMT DOES NOT
SEWER BY GRAVITY

PROPERTY OF
STADACON PROPERTY, INC.
L4224 T.464

ROAD "A" E N 587641



Total linear feet of trench required 180 feet

Width of trench(es) 2.0 feet

Depth of trench(es) 7.5 feet

Depth of stone required below distribution pipe 4.0 feet

Revision

Approved Septic System Plan
Howard County Health Department

Brian Babel 4/3/00
Signature Date

LOT 35
57,346 S.F.

20' PUBLIC DRAINAGE & UTILITY EASEMENT

*BSM'T DOES NOT SEWER BY GRAVITY

PUBLIC FOREST CONSERVATION EASEMENT (AREA = 1.364 Ac.)

500 Gal Septic Tank
Inv. In = 536.9
Inv. Out = 536.6

Distribution Box
Ex. Grd = 540.5
Inv. = 536.5

BIG MONTANA
FF = 542.60
B = 532.58*
Inv. 538.4

MARYLAND ROUTE 97
(VEHICULAR INGRESS AND EGRESS IS RESTRICTED)

PROPERTY OF
SYNDA CON PROPERTY, INC.

**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: Willoughby Plumb Telephone #: 410-781-7051
Address: 6203 PATRICK DR
SEKESVILLE, MD

(Must circle one) Licensed Plumber, Licensed Well Driller, Licensed Well Pump Installer
Licenses # and name of individual responsible for the field installation:
Name (Print): Chris Willoughby License # 16992
*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 GUILBERT Telephone #: 301-953-3110
Subdivision: CATTAIL RIDGE Lot #: 35 Well Tag #: HO-94-3233
Site Address: 15005 ROCKING HILLS DR
GLENWATON, MD 21738

Submersible Pump Data
Make: JACOBI 172-1 Pitless Adapter Make: Mermaid Well Cap and Electric Conduit
Model #: _____ Model #: _____ Two piece watertight cap: ☒
Pump Capacity: _____ GPM Depth: 48" (36" min) Screened, vented well cap: ☒
Well Yield: 2 GPM NSF approved: _____ Cap secured to casing: ☒
Depth of well encountered at time of pump installation: 300 (feet) Conduit min 18" B.G.: ☒
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.2.4
Conduit secured to well cap: ☒
Torque wrenches 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: PESTLINE House Connection
PSI: 11 (160 psi min) PVC sleeved to undisturbed soil at wall penetration: ☒
Depth of supply line: 36" (36" min) Approximate length of sleeve: 16
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.

Signature of company representative responsible for installation: Chris Willoughby, Pres date: 9/19/01

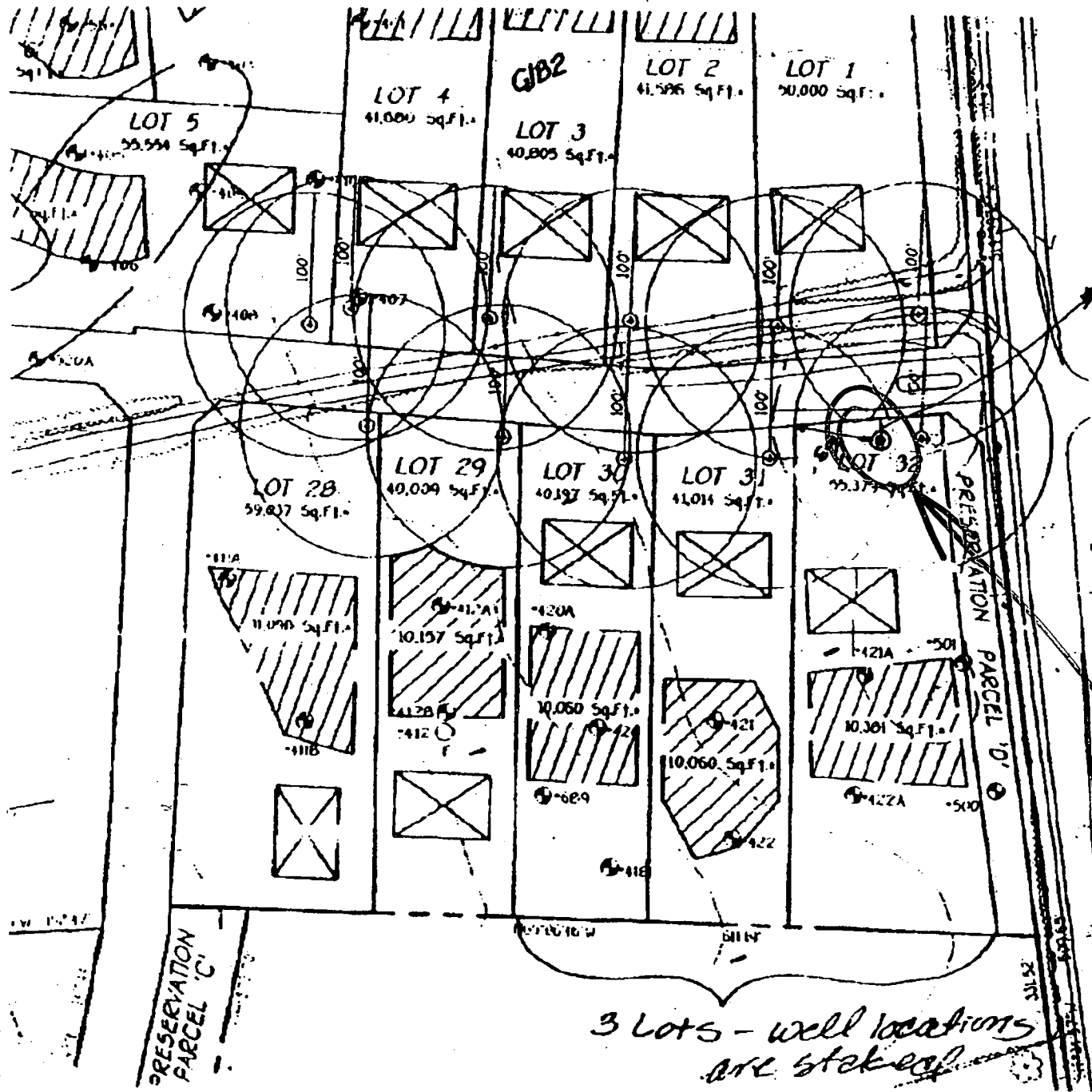
For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 9/24/01 Date Insp. Approved: 11/9/01 BB
Inspection Date: 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 grom observed below pitless adapter

Cassell
Testing
Reports Bolts
O.K.
Missing on
9/24/01

C1 0697		SEQUENCE NO: (MDE USE ONLY)		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. 4	
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						COUNTY NUMBER 13 A58993 HH	
ST/CO USE ONLY DATE RECEIVED MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 09 14 01		Depth of Well 22 300 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" 9/26/01 OK HO - 94 - 3233	
OWNER Rosemark Custom Homes		STREET OR RFD 15005 Rolling Hills Dr		TOWN Glenwood		LOT 35	
SUBDIVISION Cattail Ridge		SECTION		LOT			
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle appropriate box) Y N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 18 NO. OF POUNDS 1692 GALLONS OF WATER 108 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 63 ft. (enter 0 if from surface)		C3 PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2 METHOD USED TO MEASURE PUMPING RATE WATCH - BUCKET WATER LEVEL (distance from land surface) BEFORE PUMPING 40' ft. WHEN PUMPING 170' 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			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 63 60 61 63 64 66 70		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) + above 1 (nearest foot) - below 50 51			
DESCRIPTION (Use additional sheets if needed)		OTHER CASING (if used) EACH CASING diameter inch depth (feet) from to PL 5 63 83		SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER		C2 DEPTH (nearest ft.) 10 83 300 E 1 8 9 11 15 17 21 A 2 23 24 26 30 32 36 C 3 38 39 41 45 47 51 S R E E N SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68	
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED Y 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		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) 18' 63'	
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 40355 DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. M D		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)							

B 1 03505 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-94-3233 <small>fill in this form completely</small>
Date Received (APA) <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>		B 3 3 LOCATION OF WELL <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Howard </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Cattail Ridge </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Glenwood </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> 2 MI </div>	
OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Rosemark Custom Homes </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> 13920 Baltimore Blvd </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Laurel MD 20707 </div>		B 4 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) <div style="text-align: center;"> </div>	
DRILLER INFORMATION <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Michael Barkow </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> 355 </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> 522 Underwood Lane Bel Air, MD </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> Michael Barkow 9/14/01 </div>		Rolling Hills Drive <div style="text-align: center;"> </div>	
B 2 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	
APPROXIMATE DEPTH OF WELL 250 FEET APPROXIMATE DIAMETER OF WELL 6 INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Howard (13) A58993HH </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> 09/11/01 Brian Baker 09/11/2002 </div> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> NORTH GRID 525000 EAST GRID 790000 </div>	
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="radio"/> JETTED <input type="radio"/> Jettied & DRIVEN <input type="radio"/> AIR-ROTARY <input type="radio"/> AIR-PERCussion <input checked="" type="radio"/> ROTARY (Hydraulic Rotary) <input type="radio"/> CABLE <input type="radio"/> REVERSE-ROTARY <input type="radio"/> Drive-POINT <input type="radio"/> other _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 5px; margin: 5px;"> 790 525 </div>	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input checked="" type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) H0-94-2068		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="text-align: center;"> </div>	
Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER G A P FORCE H0-94-3233 PERMIT No. H0-94-3233			
SPECIAL CONDITIONS			



18.000
100.000
100.000

1/20/99
Well site staked
by a licensed
surveyor

9/12/01
Replacement
Well Location

O.K. as shown

01-08-09 MED 11:48 FAX 14108612820

SCRIVENER INC

0001

(BA)

RT. 97

STONE PIERS
WOOD FENCING

CONTRACTOR:

ROSEMARK DESIGNBUILD, LLC.
13920 BALTIMORE BLVD.
LAUREL, MD. 20707
MBR #510

LOT 35

FOREST CONSERVATION EASEMENT

#15005

OW

ROLLING HILLS DR.

BP# 00130702
6/6/01
Stone piers
and fence O.K.
(BB)

SCALE 1"=50'

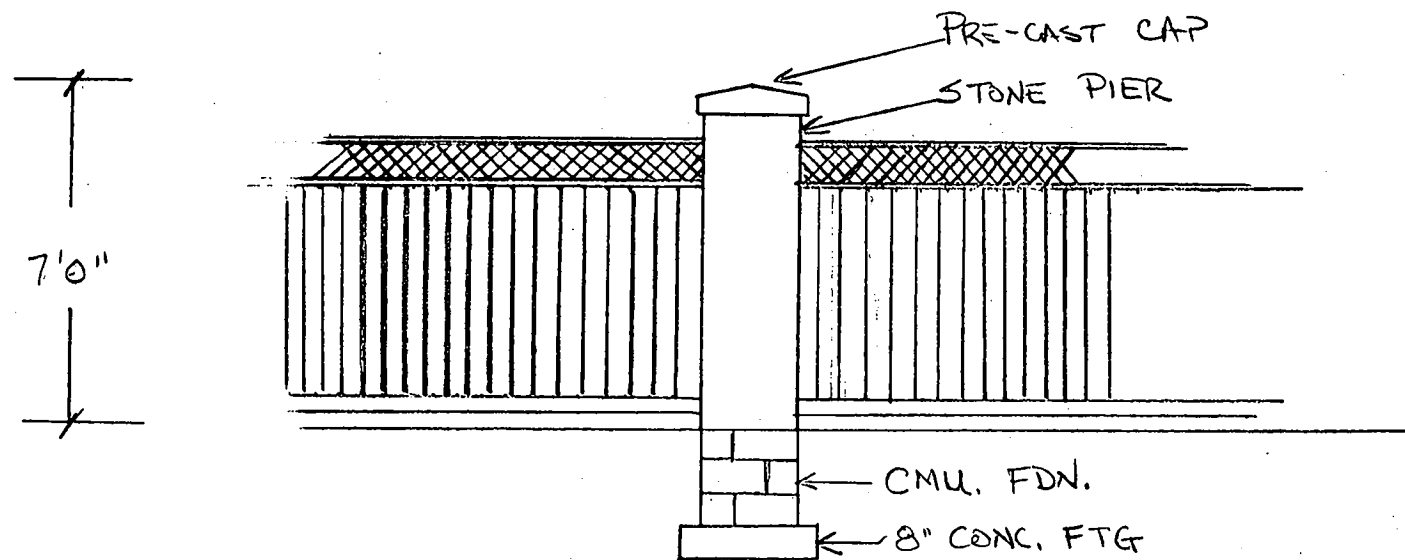
SITE PLAN

ROSEMARK DESIGN/BUILD, LLC

13920 BALTIMORE BLVD.

LAUREL, MD. 20707

MBR #510



FENCE DETAIL

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

WATER WELL ABANDONMENT-SEALING REPORT FORM 10/01 OK

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: 9/13/01 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

HO - 94 - 2068

* PERMIT NUMBER OF REPLACEMENT WELL

HO - 94 - 3233

* PERSON ABANDONING WELL: C. Eddy

WELL DRILLERS LICENSE NUMBER: 355

CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Rosemark Custom Homes

* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: Glenwood

TAX MAP 21 BLOCK 3 PARCEL 228

SUBDIVISION: Cattail Ridge

SECTION: LOT: 35

NEAREST ROAD: 15005 Rolling Hills Dr.

MARYLAND GRID COORDINATES

E 790

BOX NUMBER

N 525

(X)	
000	000

SHOW WELL LOCATION
BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

- ☒ DRILLED ☐ JETTED
- ☐ BORED/AUGURED ☐ 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 INCHES IN DIAMETER

* DEPTH OF WELL: 200 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 2

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Bentonite Clay Hole Plug	1'	200'
40 Bags 2,000 LBS		

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE # 355

CIRCLE ONE MWD / MSD / MGD

DATE 9/14/01

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: Willoughby Plumb Telephone #: 410-781-7051
Address: 6203 MARION DR
Signetville, Md
21784

(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# 6992

*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 DUNDEL Telephone #: 301-953-3110
Subdivision: CATTAIL RIDGE Lot #: 35 Well Tag #: HO-94-2068
Site Address: 15005 ROLLING HILLS
GLENWOOD MD 21738

Submersible Pump Data

Make: JALUZZI

Model #: _____

Pump Capacity _____ GPM

Well Yield: 12 GPM

Depth of well encountered at time of pump installation: 200 (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 ✓

Pitless Adapter

Make: Harvard

Model#: _____

Depth: 48" (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: ✓

Piping to house

Type: CRESTLINE

PSI: 1" (160 psi min)

Depth of supply line: ✓ (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.

Signature of company representative responsible for installation: Chris Willoughby

date: 6/4/01

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

Date Insp. Requested: _____ Date Insp. Approved: _____
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 _____

If well cannot
be re-grouted, new
well will have
to be
drilled.

6/7/01
Powdery Bluish
Gray cuttings?
Around Casing
surrounding whole
Area That was
Dug Up for
Pitless
(BB)



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer
June 15, 2001

Barlow's Well Drilling
912 Fawn Court
Joppa, MD 21085

RE: Cattail Ridge – Lot 35
15005 Rolling Hills Drive
Well Permit: HO - 94 - 2068

Dear Sir or Madam:

On June 7, 2001 during the installation of a well pump on lot 35 at the Cattail Ridge subdivision, it was observed that the annular space around the lot's well appeared to contain well cuttings instead of grouting material. Further investigation on June 12, 2001 by Dave Kerr and Eric Dougherty from the Maryland Department of the Environment confirmed that the casing was surrounded by what appeared to be cuttings from approximately 3 feet to a depth of 17.5 feet below the original grade. According to COMAR 26.04.07, the grout filling the annular space surrounding the casing shall consist of cement or a cement and bentonite mixture. COMAR also states that if the well cannot be grouted properly, then the well shall be abandoned and sealed.

This is to advise you that the above referenced well must be sealed entirely with cement, or redrilled and regouted. Regardless of the option chosen, another well yield test must be done. The yield test, grout, and possible well sealing will have to be done at a time that is convenient for and with the Health Department's supervision. **You must call (410) 313-2640 at least 24 hours in advance to schedule these inspections.**

Please be advised that this letter, a copy of the inspection notes and well completion report, and a sample of your "grout" are being submitted to the State Board of Well Drillers.

Sincerely,

Brian Baker

Brian Baker, R.S.

Well and Septic Program

cc: Rosemark Custom Homes
Maryland State Board of Well Drillers
File

C17060

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.

1236

DATE RECEIVED
MMDDYY
813

DATE WELL COMPLETED
MMDDYY
020199

DEPTH OF WELL
2220026
(TO NEAREST FOOT)

COUNTY
NUMBER
A58993-HH

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-2068

28293031323334353637

OWNER
CATTAIL OVERLOOK INC.
STREET OR RFD
8808 CATTAIL DRIVE
SUBDIVISION
CATTAIL ESTATE SECTION
TOWN
COLUMBIA
LOT
21045
32

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		check if water bearing
	FROM	TO	
ORANGE SILTY SOIL	0	30'	
TAN SILTY SOIL	30'	53'	
SOFT TAN WEATHERED ROCK	53'	60'	
MED. HARD GRAY ROCK	60'	200'	
		85	
		110	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT
BENTONITE CLAY

NO. OF BAGS
NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from
ft. to
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STEEL
CONCRETE
PLASTIC
OTHER

MAIN CASING
TYPE

Nominal diameter
top (main) casing
(nearest inch)

Total depth
of main casing
(nearest foot)

OTHER CASING (if used)

depth (feet)
from
to

SCREEN RECORD

screen type
or open hole

STEEL
BRASS
BRONZE
PLASTIC
OTHER

insert
appropriate
code
below

DEPTH (nearest ft.)

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED

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.

DRILLER'S LIC. NO. 1

DRILLER'S SIGNATURE

LIC. NO. 1

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

DEPTH (nearest ft.)

SLOT SIZE 1 2 3

DIAMETER
OF SCREEN

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

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

TELESCOPE
CASING

LOG
INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.)

METHOD USED TO
MEASURE PUMPING RATE

WATER
BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED (for test)

A air
P piston
T turbine
C centrifugal
R rotary
J jet
S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP
(CIRCLE) (YES or 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.)

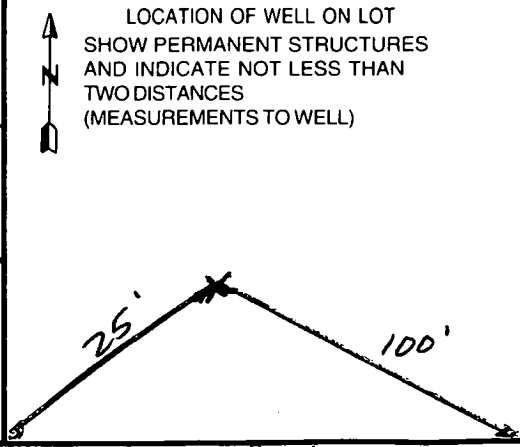
CASING HEIGHT (circle appropriate box
and enter casing height)

LAND SURFACE

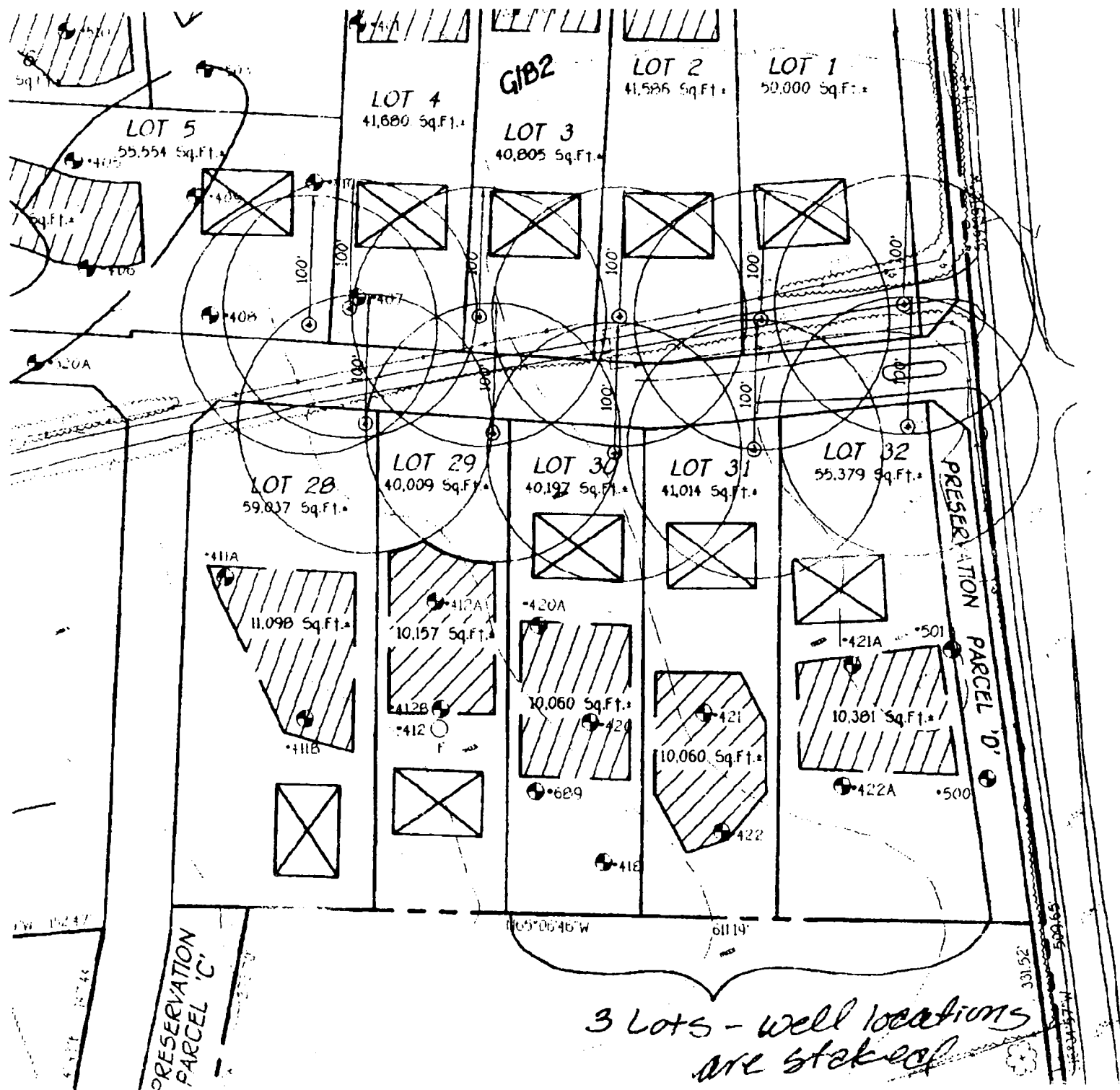
below

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)



B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block;">5127</div>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <div style="font-size: 1.2em; font-weight: bold;">HO-94-2068</div> <small>fill in this form completely</small>
Date Received (APA) <div style="font-size: 1.2em; font-weight: bold;">01/13/98</div> <small>8 MM DD YY 13</small>		B 3 LOCATION OF WELL <div style="font-size: 1.2em; font-weight: bold;">Howard</div> <small>8 COUNTY 21</small>	
OWNER INFORMATION <div style="font-size: 1.2em; font-weight: bold;">CatTail Overlook Inc</div> <small>15 Last Name Owner First Name 34</small>		<div style="font-size: 1.2em; font-weight: bold;">CatTail Ridge</div> <small>23 SUBDIVISION 42</small>	
<div style="font-size: 1.2em; font-weight: bold;">3808 Centie Park Dr. Suite 209</div> <small>36 Street or RFD 55</small>		<div style="font-size: 1.2em; font-weight: bold;">Glenwood</div> <small>52 NEAREST TOWN 71</small>	
<div style="font-size: 1.2em; font-weight: bold;">Columbia Md 21045</div> <small>57 Town 70 State 72 Zip 76</small>		<div style="font-size: 1.2em; font-weight: bold;">2</div> <small>73 76 77 78</small>	
DRILLER INFORMATION <div style="font-size: 1.2em; font-weight: bold;">Michael Barlow MWD 355</div> <small>Driller's Name 76 License No. 81</small>		B 4 <small>1 2</small>	
<div style="font-size: 1.2em; font-weight: bold;">Michael Barlow Well Drilling</div> <small>Firm Name</small>		<div style="font-size: 1.2em; font-weight: bold;">Roxbury Mill</div> <small>11 NEAR WHAT ROAD 30</small>	
<div style="font-size: 1.2em; font-weight: bold;">912 Fawn Ct. Joppo 21085</div> <small>Address</small>		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	
<div style="font-size: 1.2em; font-weight: bold;">[Signature]</div> <small>Signature</small>		<div style="font-size: 1.2em; font-weight: bold;">60</div> <small>34 37</small>	
<div style="font-size: 1.2em; font-weight: bold;">1-6-98</div> <small>Date</small>		DISTANCE FROM ROAD <small>ENTER FT OR MI 38 39</small>	
B 2 WELL INFORMATION <small>1 2</small>		TAX MAP: _____ BLK: _____ PARCEL: _____	
<div style="font-size: 1.2em; font-weight: bold;">5</div> <small>APPROX. PUMPING RATE (GAL. PER MIN.)</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
<div style="font-size: 1.2em; font-weight: bold;">500</div> <small>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)</small>		<div style="font-size: 1.2em; font-weight: bold;">Howard Co</div> <small>COUNTY NAME</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX)		<div style="font-size: 1.2em; font-weight: bold;">A58993H.H</div> <small>COUNTY NO.</small>	
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		<div style="font-size: 1.2em; font-weight: bold;">1/20/98</div> <small>DATE ISSUED</small>	
APPROXIMATE DEPTH OF WELL <div style="font-size: 1.2em; font-weight: bold;">200</div> FEET <small>24 28</small>		<div style="font-size: 1.2em; font-weight: bold;">A McMillan</div> <small>CO SIGNATURE</small>	
APPROXIMATE DIAMETER OF WELL <div style="font-size: 1.2em; font-weight: bold;">6</div> INCH <small>NEAREST INCH</small>		<div style="font-size: 1.2em; font-weight: bold;">1/20/00</div> <small>EXP. DATE</small>	
METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT <small>other</small>		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. 2. 3.	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)		WRITE THE BOX NUMBER FROM THE MAP HERE <div style="font-size: 1.2em; font-weight: bold;">790</div> <div style="font-size: 1.2em; font-weight: bold;">520</div>	
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="font-size: 1.2em; font-weight: bold;">2/1/99</div> <div style="font-size: 1.2em; font-weight: bold;">Grout</div> <div style="font-size: 1.2em; font-weight: bold;">Grout not started @ time of MSP</div> <div style="font-size: 1.2em; font-weight: bold;">AW</div>	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52 _____		Not to be filled in by driller (MDE OR COUNTY USE ONLY)	
APPROP. PERMIT NUMBER 54 _____ 63 _____ PERMIT No. <div style="font-size: 1.2em; font-weight: bold;">HO 94 2068</div> <small>70 71 72 73 74 75 76 77 78 79</small>		SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>	



ROLLING HILLS DRIVE

CATTAIL RIDGE
ROSEMARK

5/25/00 PWD

ADVISED OF 10' DECK
LEAKER SEPARATION
MINIMUM DECK, SHE WILL
TO DESIGN
REDESIGN
DECK TO BE
TO MEET 10'
MINIMUM
NO NEED
NO SETBACK
FOR ADJUSTMENT

AREA TO BE
ABANDONED
(740 \$)

LOT 35
54,336.15

AREA TO BE
ADDED
(750 \$)

*BMT DOES NOT
SEWER BY GRAVITY

Distribution Box
EXCHG = 540.5
INV. = 536.50

DECK

MODEL
HOUSE

PORCH

1500 Gal Sep TK
INV IN 536.8
INV OUT 536.6

MARYLAND ROUTE 97

(VEHICULAR INGRESS AND EGRESS IS RESTRICTED)

FRONT BNL 75/50
REAR BNL 75/50
SIDE BNL 11/10
BMT. YES AND

HO. CO. HEALTH
ATTN MARK R.
CATTAIL RIDGE LOT 35

PLEASE REVIEW FOR
POSSIBLE SEPTIC
EASEMENT ADJUSTMENT

THANKS
JOEY @ CFS

1306776
587491

BIG MONTANA
FF: 542.6

5/19/01
B00130290
shown retaining
wall location
OR drill

+408

+40E

PRECAST CONC. SIGN PANEL
(RECESSED IN CURVE OF WALL)
+45°

WELL

FOREGROUND PLANTER

18" HT. STONE WALL

STONE
RETAINING
WALL

EX. PINE
(RELOCATE)

EX. PINE
(RELOCATE)

EX. ASH
(RELOCATE)

EX. PINE
(RELOCATE)

EX. PINE

EX. ASH

EX. PINE

ROLLING

536

POLE

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 Scribner (Michael J. Rose Land)

ADDRESS 13920 BALTIMORE BOULEVARD
LAUREL MD 20707 (W) 301-953-3113

AGENT OR PROSPECTIVE BUYER c/o L D & D

ADDRESS 10805 Hickory Ridge Suite 205
Columbia, MD 21041 PHONE 410-740-2102

PROPERTY LOCATION:

SUBDIVISION Han Rei LOT NO. 30 thru 32

ROAD AND DESCRIPTION Rte 97
(3438 Roxbury Mills Road)

PDG. PERMIT SIGNED
AND RETURNED 1/31/2000
Serial # B00122158

TAX MAP 21 PARCEL # 1379 3

SIZE OF LOT 1 acre TYPE BLDG. SFD (38 LOTS) - 4 BRMS
(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

LOT 40

COUNTY #

SOIL PROFILE

421 422

1g + ycl.
orange
SiClm
20%
Rx frags

pink
SiClm
20%
Rx
frags

420-A
418 420

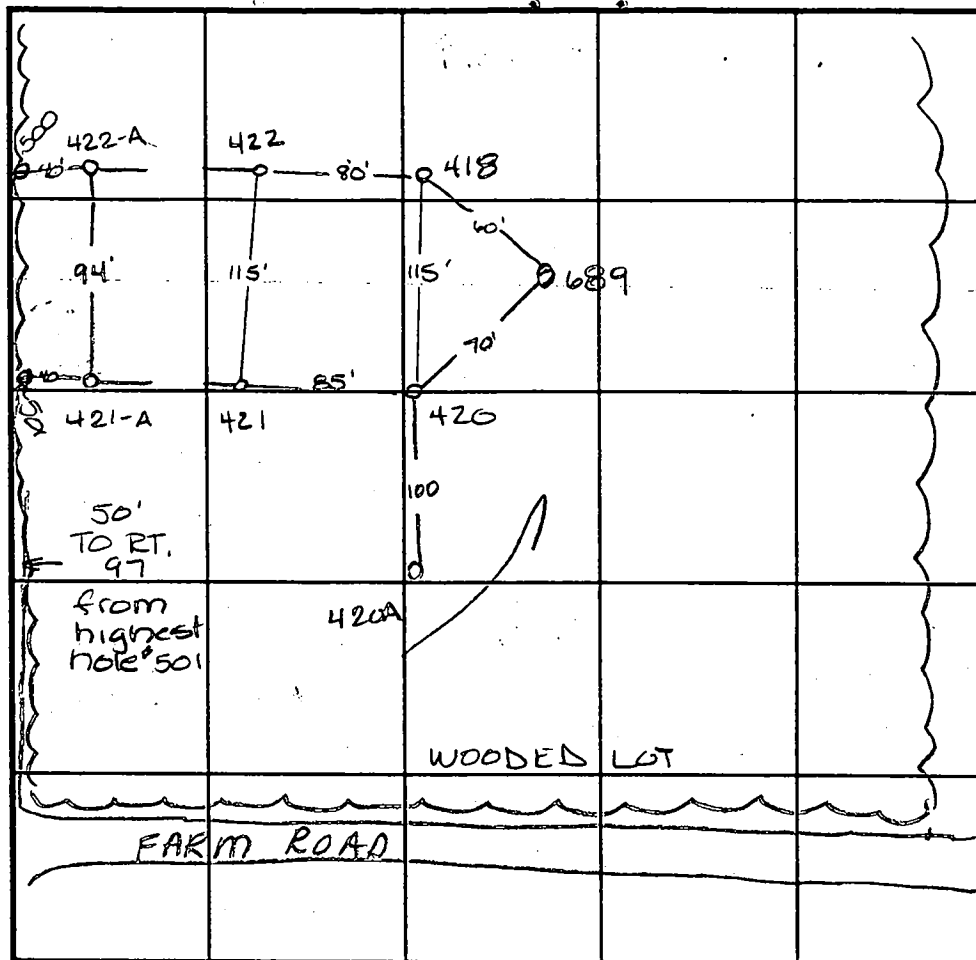
yellow
brn
SiClm

pink
SiClm
<5%
Rx
frags

421-A
orange
brown
SiClm

orange
brn
SiSalm

1g + brgh
Salm
25%
Rx



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

422-A

dark
red pink
SiSalm

pink
SiSalm
15-20%
Rx
frags

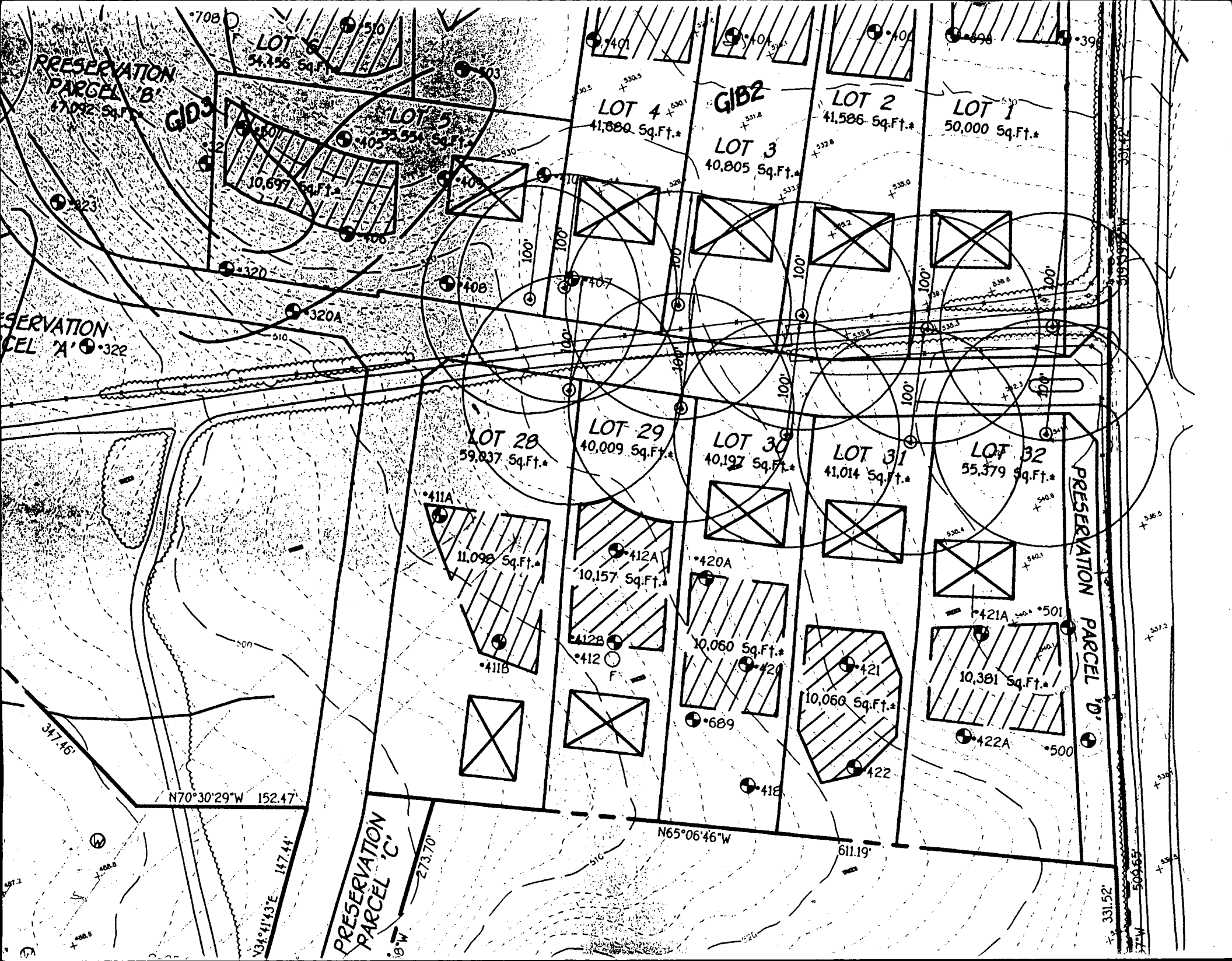
500, 501
dark red
SiClm

1g + pink
powdery
SiClm
<5%
Rx

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-4-97	421	3.5 V12.0	10:27 ⁴⁵	10:32	10:32	10:37	5min
		7.0 V12.0	10:26 ¹⁵	10:29	10:29	10:32	3min
	422	3.5 V11.5	10:30 ³⁰	10:35	10:35	10:39	4min
	418	5.0 V11.0	11:42 ³⁰	11:43 ³⁰	11:43 ³⁰	11:46	2 1/2 min
	420	Visual	to 12.0 - see profile				OK
	421A	4.0 V12.0	11:22	11:23 ³⁰	11:23 ³⁰	11:28	4 1/2 min
	422A	3.5 V12.0	11:26 ³⁰	11:29 ³⁰	11:29 ³⁰	11:35	5 1/2 min
	420A	3.5 V10.0	11:52	11:55	11:55	12:00	5min
2-9-98	500	Visual	to 12.0 - see profile				OK
	501	4.5 V12.5	11:36 ³⁰	11:39	11:39	11:44	5min

6-1-98 689 Visual OK see profile
REMARKS Measurements between holes from plat - heavily wooded lot

TYPE OF SOIL _____
TESTED BY Amy McMillen ALSO PRESENT Don Rewwer
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



Private Use
Easement Across
Through 3 For The Use
Benefit Of Lots 1 Through 3

SYNDACON PROPERTY, INC.
L4228 F.461

R=2500.00' L=285.96'

L=103.01'

L=34.07'

64.43'

26.93'

90.85'

570°20'42"E
70.00'

519°39'18"W
46.42'

Land Dedicate
For The P.

R=3741.26'
L=13.54'

LOT 3
45,659 Sq.Ft.±

LOT 2
43,566 Sq.Ft.±

LOT 1
57,346 Sq.Ft.±

Unmitigated
65 dBA Noise Line

ROUTE 97
MARYLAND

MINOR ARTERIAL
(S.R.C. PLAT No. 9595)

N64°46'10"W

373.46'

164.13'

516°34'57"W

188.95'

R=3781.26'
L=202.77'

N70°20'42"W 5.00'

N25°22'23"W 35.37'

N70°33'08"W 10.00'

525°13'50"W

N24°04'48"E

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

390.17'

390.82'

410.18'

404.53'

30'

106.33'

30'

75'

75'

75'

75'

75'

40'

Existing
30' R/W

40'

45'

45'

PROPERTY OF
SYNDACON PROPERTY, INC.
L4228 F.461

F.99.21

N 585500
178460.7587

L4228 F.461