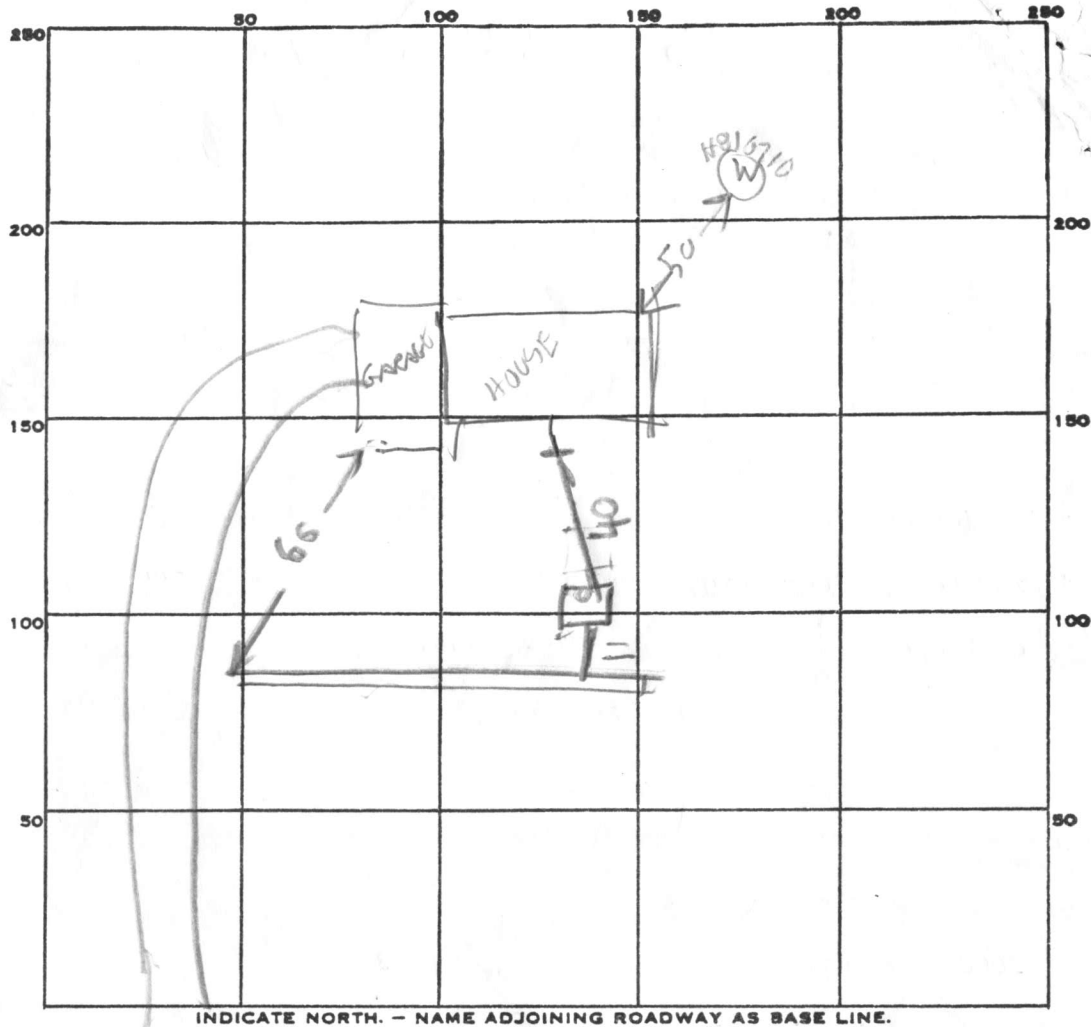


A 24987



PERMIT CARD NO

SEPTIC TANK, LEVEL OK 1000

CLEANOUTS ST NO 7/21/86 OK 7/21/86

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 8 1/2 below original ground FT. TRENCH WIDTH 2 FT.
1-2 FT FILL DIRT

GRAVEL DEPTH 4 1/2 IN. TOTAL LENGTH 106 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 477

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 7/21/86 - 951 AM TANK SET. LOCATION OK RH

7/22/86 - DITCH DUG OK CHECKED SOIL IN DITCH
CLAY BARRIER ONLY 2 1/2 - 3 FT IN SOME SPOTS
DITCH OK AS IS ONLY 8 1/2 FT DEEP EFFECTIVE
AREA IS HIGHER THAN 4 1/2 FT

7/22/86 STONE ADDED. CALL FOR HOUSE HOOLUP

DATE SYSTEM APPROVED 10-8-84 INSPECTOR S. ABEL

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3rd

DATE 12/15/76

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Mr. George W. Slack - Estate of Ethel Slack

ADDRESS Route 32

any questions call: Mr.
PHONE 823-3535 Spellman

PROPERTY LOCATION:

SUBDIVISION SLACK PROPERTY

LOT NO. 5B

ROAD AND DESCRIPTION Route 32

SIZE OF LOT 2.66 acres @

TYPE BLDG. 3 or 4r

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Mr. George Slack

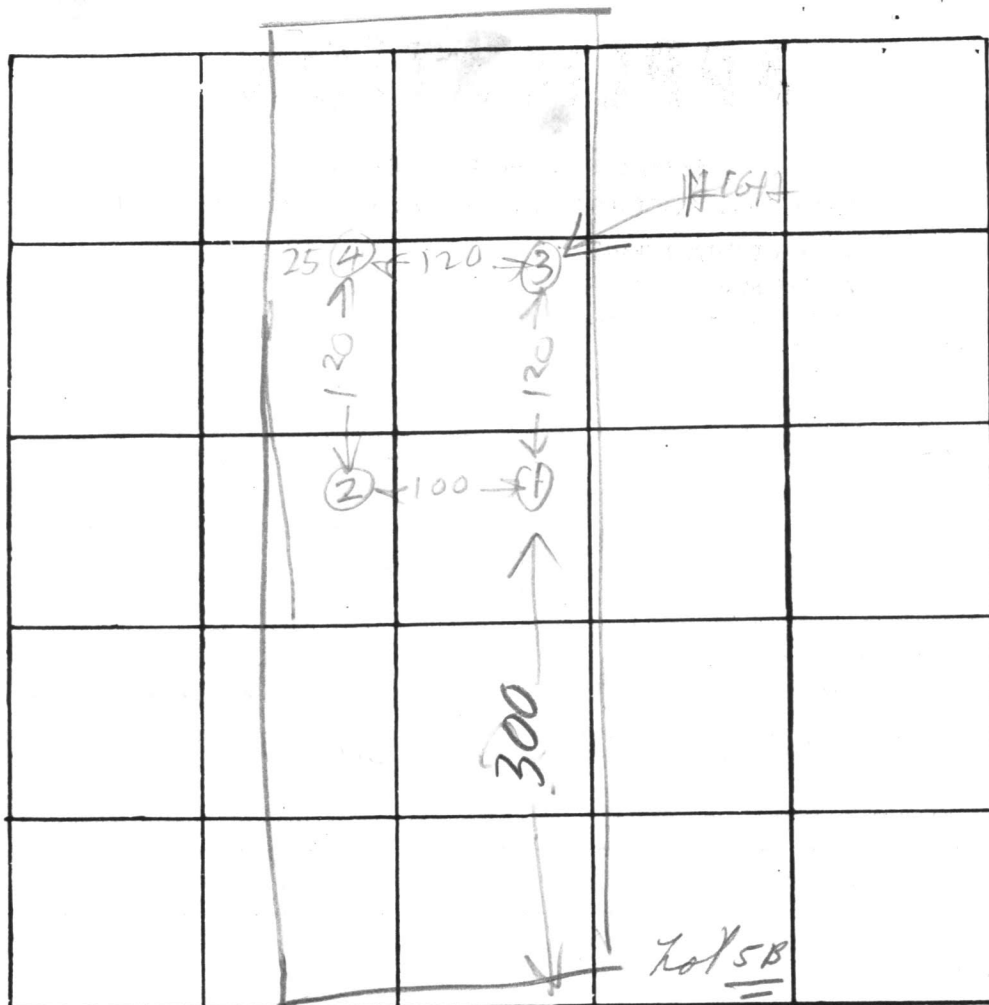
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



AT 32

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/24/77	1D	13	1008	1009	1009	1013	4
	2S	7	1008	1009	1009	1010	1
	2S	4	1010	1011	1011	1015	4
	2D	13	1010	1012	1012	1015	3
	3S	6	1014	1015	1015	1017	2
	3D	13	1014	1015	1015	1017	2
2/24/77	4V	12 1/2	AL	S	A	NID	✓

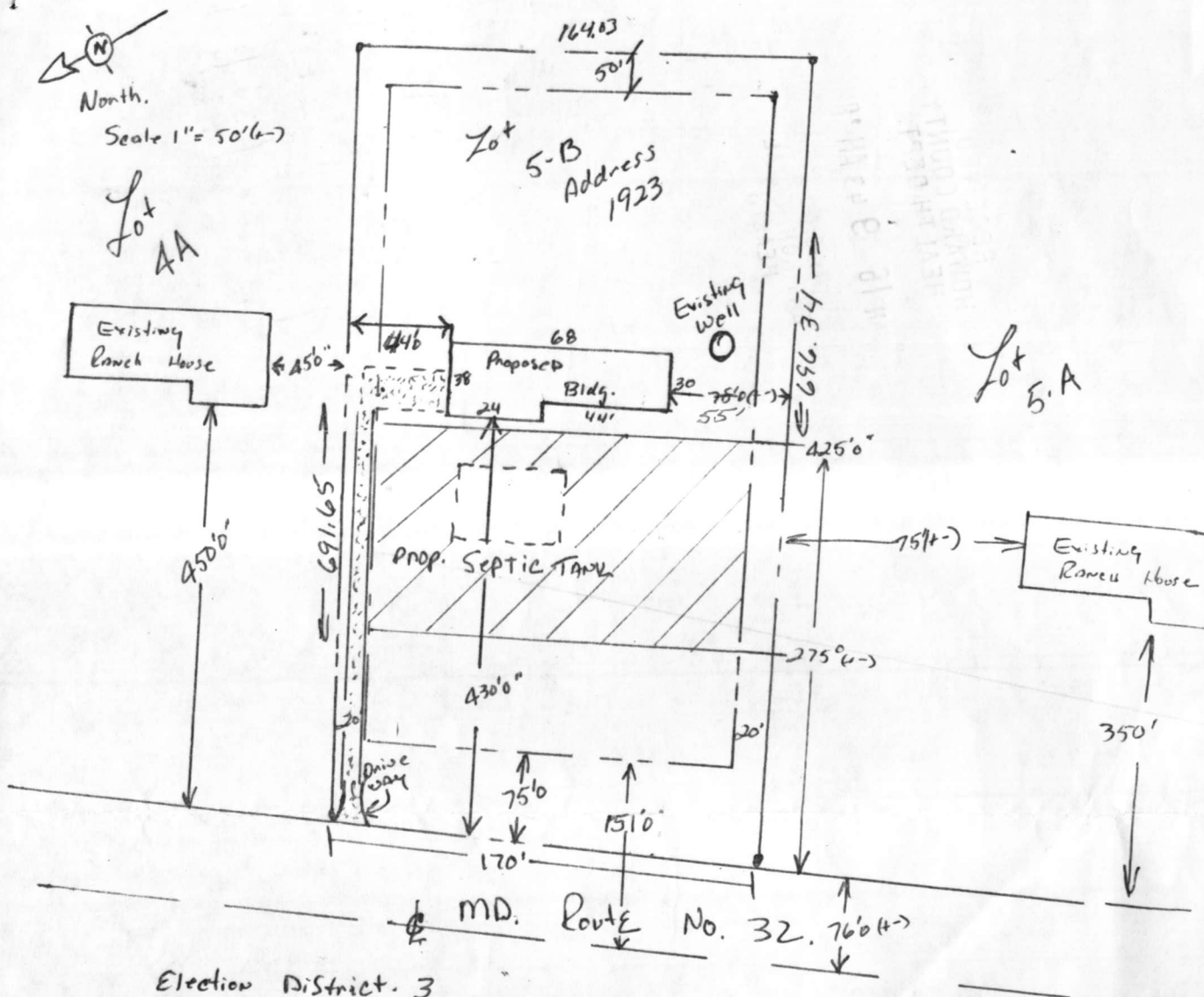
REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

EXOCIC
SLACIC



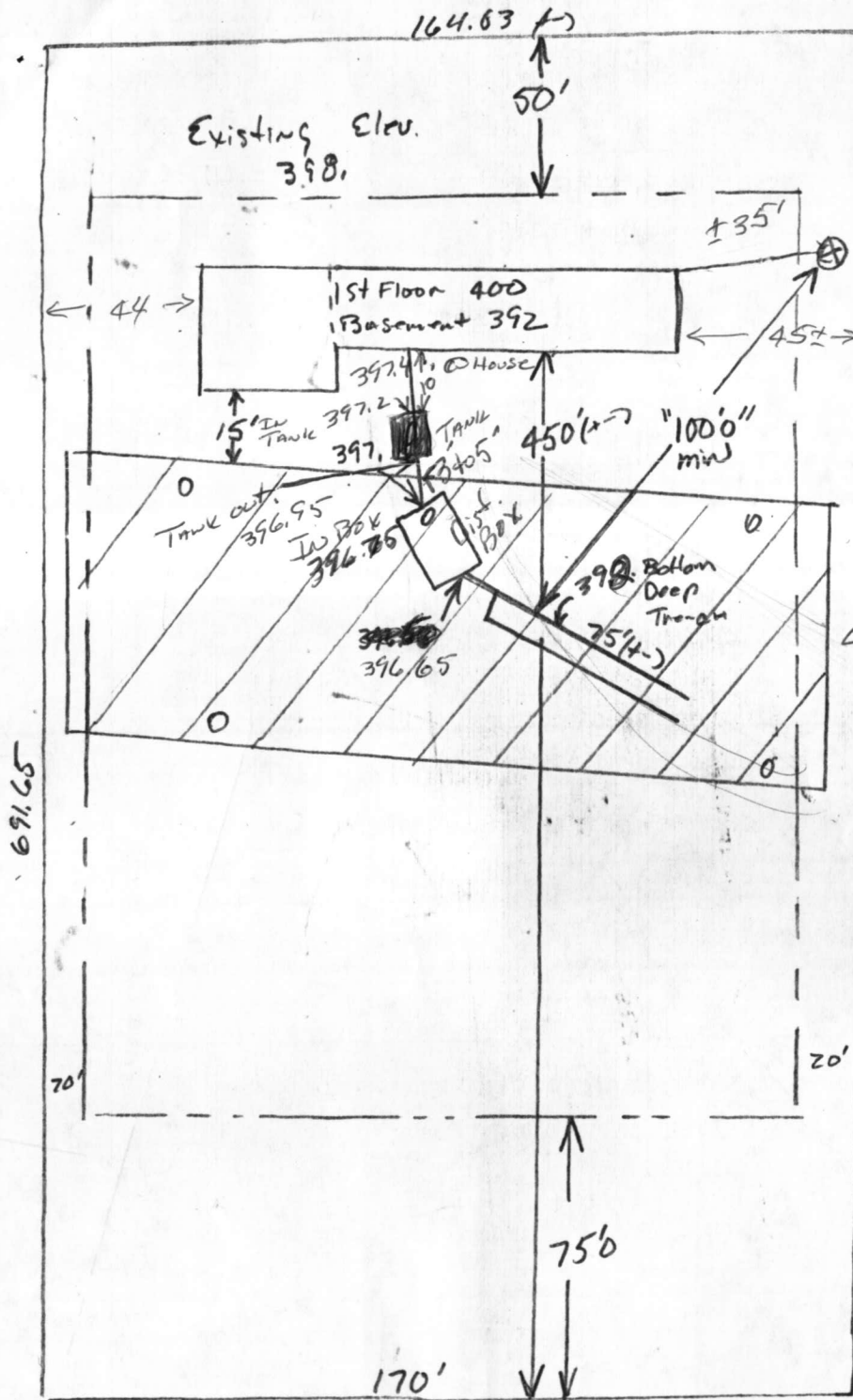
LOCATED IN RECORDED SUBDIVISION (NO)
 LOT# 5-B Block # _____ TAX Map 9115 Deed Ref. 672-11

ZONING - Residential SF Home.

AVAILABILITY OF PUBLIC WATER & SEWER
 WATER (NO) Sewer (NO)

Lot # 5-B MD Rt 32

B.P. # 68508



~~Fee~~
Norman Schaefer

Existing Well

788-8244

Existing Grade at trench
401.0

Rev.
11/30/86
MPS

well HO-81-0710
10 PPM - Nitrate Nitrogen

formerly Thresea Slack
Hargett

↑ MD. Rt. 32

1923

2 LANE Highway.

I certify ABOVE measurements & elevations ARE
Actual & correct for this property
Michael P. Shaw
TIA SHAW Builders
788-8244

C1 9481 SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

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

COUNTY NUMBER A24987

DATE Received
8 13

DATE WELL COMPLETED
012985

Depth of Well
22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-81-0710
28 29 30 31 32 33 34 35 36 37

OWNER Schafer Norman
last name first name
STREET OR RFD Md. Rte. 32 TOWN West Friendship
SUBDIVISION Slacks Corner SECTION LOT 5-B

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 TO Check if water bearing

Top Soil	0	2	
Sandy	2	50	✓
Sand Stone	50	60	
Micka	60	80	
Sand Stone	80	85	✓
Micka	85	200	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC
45 46 45 46

NO. OF BAGS NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 48 52 ft. to 54 58 ft.
(enter 0 if from surface)

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

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

OTHER CASING (if used) diameter inch depth (feet) from to
EACH CASING

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

DEPTH (nearest ft.)
H0 37 200
EACH SCREEN
1 8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51

SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60

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

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

T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 8 9 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 35 20

WHEN PUMPING 60 25

TYPE OF PUMP USED (for test)

A air P piston T turbine
27 27 27
C centrifugal R rotary O other (describe below)
27 27 27
J jet S submersible
27 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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 } LAND SURFACE
49
- below } (nearest foot)
49 50 51

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)

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 10.17.13 "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 IDENT. NO. 233
Nafih Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Nafih E. Mayne

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