

10/16/85 Late A.M.
10-16-85
approved
S. Abel

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

P 36090

A 30248

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

ELLICOTT CITY

DISTRICT 4th

INDEXED

04-343042

DATE 10/14/85

Arnold Septic Tank Service

IS PERMITTED TO INSTALL X ALTER

ADDRESS Jacobs Road, Mt. Airy, Maryland 21771 PHONE 795-7873

SUBDIVISION Roxbury ROAD 4020 2040 Roxmill Court LOT 19

PROPERTY OWNER Dennis Smith

ADDRESS

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 163 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe. LOCATION: Start first trench at a point 420 feet from the front lot line and 50 feet from the right lot line as seen when facing the property from Split Rail/Roxmill Court. Run trench(s) along level ground toward left lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 10-15-85 OK TO STONE TRENCHES AS EXCAVATED - SANDY SOIL

TRENCH MAY COLLAPSE AS DID TANK HOLE; SAND; APPROXIMATELY 20-25 FEET OF UPPER PERC AREA DISTURBED, EITHER 18" EXCAVATED OR 6" FILLED; MAINTAIN BOTTOM MAX OF 8" BELOW GRADE AND AT LEAST 18" OVER OVER PIPE; TO KEEP AS HIGH AS POSSIBLE W/ TRENCH.

PLANS APPROVED BY C. Williams DATE 8/19/83 S. Abel

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

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

PERMIT VOID AFTER THREE YEARS.

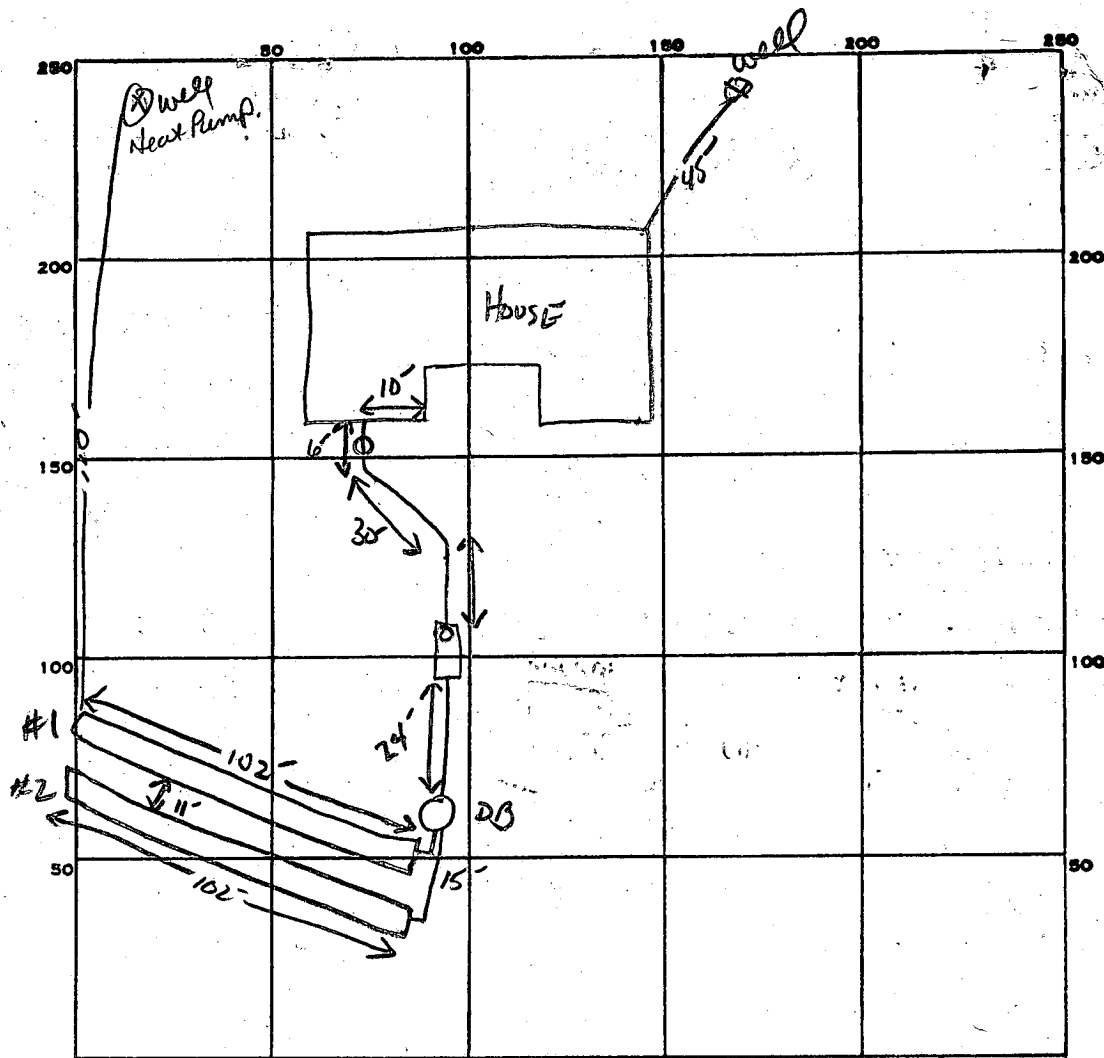
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 30248



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

ROXBOROUGH COURT

PERMIT CARD

SEPTIC TANK, LEVEL 1500 GAL ✓

CLEANOUTS C/O ST 1 IN LINE

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 8' 8' FT. TRENCH WIDTH 2' 2' FT. INLET 4'

GRAVEL DEPTH 4' 4' IN. TOTAL LENGTH 102' 102' FT.

NUMBER OF TRENCHES 2 ONE SIDE TOTAL BOTTOM AREA 816 sq. ft.

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

ABSORBENT AREA 816 SQ. FT.

REMARKS 10-15-85 OK TO START TRENCH AS EXCAVATED - SAND SOIL S. Abel

10-15-85 OK TO COVER TRENCH #1 AND COVER ST TO HOUSE, 1ST TRENCH 10 FEET 15 FEET FROM HIGH PORE HOLE. S. Abel

DATE SYSTEM APPROVED 10-16-85

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, MARYLAND 21043
TELEPHONE: 992-2330

A 30248

P _____

DISTRICT 4th.

DATE 9/28/79

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 J. Garrett Reilly

ADDRESS Roxbury Mills Rd., Glenwood, Md. 21738 PHONE 489-4481

PROPERTY LOCATION:

SUBDIVISION Roxbury LOT NO. 22 new 19

ROAD AND DESCRIPTION Route 97

SIZE OF LOT 3.00 Acres TYPE BLDG. 3 or 4 Bedrooms

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.

SIGNATURE OF APPLICANT E. Smariga /s/

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/9/79 MAKE TEST WATER RH. 10/17/79 MORTES

11/15/79 - NEED PERCS HOLE BETWEEN #'S 2 & 5 and between 2 & 7

12/3/79 DM SAID 1 EXTRA HOLE MUST BE RELOCATED RH

12/5/79 - HOLE BETWEEN HOLE'S #5 & 7. 12/10/79 - VERIFY SQ FOOTAGE

THIS IS NOT A PERMIT

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

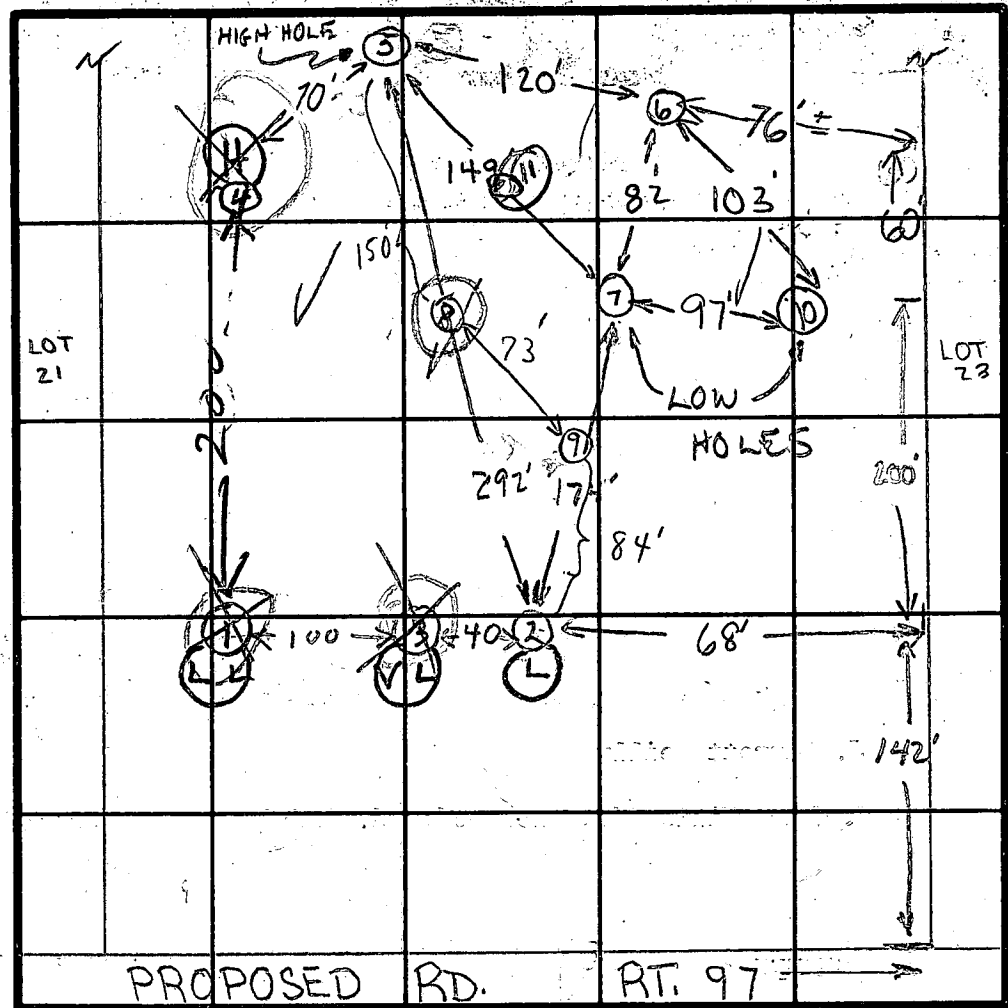
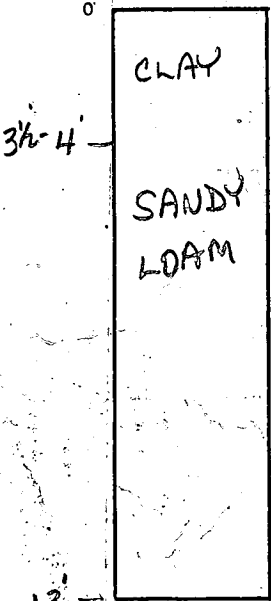
REASONS FOR REJECTION OR HOLDING 10/9/79 MORE TEST WATER RH.

12/3/79 DR. SMARIGA FILED MUST BE REAPPROVED

THIS IS NOT A PERMIT

LOT 22
new 19

HOLE # 5 # 10
SOIL PROFILE



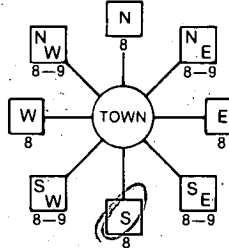

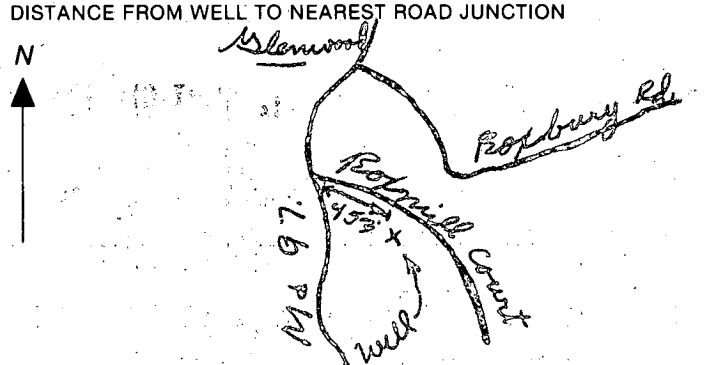
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

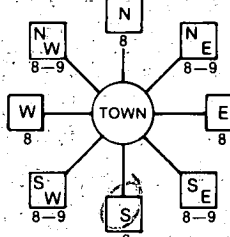
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/9/79	1V	11	TOP 5 FT CLAY	UNDER GROUND WATER 10 FT			
10/17/79	2D	13	1112	1132	1132	1159	27
	2S	5	1154	1159	1159	1106	7
	3V	11	TOP 3 FT CLAY	BOT 8 FT SANDY			
	4V	7	TOP 2 FT CLAY	BOT 5 FT SAND & ROCK			
11/15/79	HIGH 5S	4'	1:32	1:37	1:37	1:41	4
	5D	13'	1:32	1:36	1:36	1:43	7
	6V	12'	SANDY CLAY TO 5' SANDY LOAM	TO 12'			
	7S	4'	1:28	1:31	1:31	1:34	3
	7D	13'	1:28	1:38	1:38	1:38	4
11/16/79	8	3' - 5'	Rock	C.B.W.			
	9	Not deep					
12/3/79	10S	4'	3:16	3:20	3:20	3:25	5
	10D	13'	3:15	3:28	3:28	3:54	26

REMARKS HOLE (2) IS ABOUT 5 FT HIGHER THAN HOLE 3
12/7/79 11V ROCKY AND SANDY LOAM, SMALL ROCK
TYPE OF SOIL

TESTED BY R.H. & R.D. 10/9 R.D. & C.B.S. C.B.W. RD. 1 KETTERMAN
10/17/79 R.H. 11/15/79 11/16/79 12/3/79

9 MIN. AVG.

B 1 3007 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) 5/10/84 9:30 A.M. STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-0520 fill in this form completely
Date Received 041084 OWNER INFORMATION Smith DENNIS 501 WASHBURN AVE BALTIMORE MD 21225		B 3 LOCATION OF WELL HOWARD ROXBURY ESTATES SECTION 44 LOT 19 GLENNWOOD MILES FROM TOWN (enter 0 if in town) 2 1/2 MI
DRILLER INFORMATION Jacob L. Mayne Joseph L. Mayne 5512 Ridge Rd. Mt. Airy, Md. 21771 Jacob L. Mayne 4/11/84		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD Popmill Court ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 585 FT
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME OEP SIGNATURE DATE ISSUED 042584 CO SIGNATURE Frank Shinn NORTH GRID 520000 EAST GRID 0788000
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		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 780 6 N 320 0
APPROXIMATE DEPTH OF WELL 200 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other		LOCATION 22 CASING 1 1/2 AUGER 19 OPEN 5 BAGS CEMENT 5/10/84 CW
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <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 <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (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 (OEP USE ONLY) APPROP. PERMIT NUMBER FORCE FS WRITE INITIALS IN BOX PERMIT No. 40-81-0520		
SPECIAL CONDITIONS		

B 1 7192 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-1150 fill in this form completely
Date Received <u>10/17/85</u> OWNER INFORMATION 8 COUNTY 13 15 Last Name 34 36 Street or RFD 55 57 Town 70 State 72 Zip 76	LOCATION OF WELL 1 2 8 COUNTY 21 23 SUBDIVISION 42 SECTION 44 46 LOT 19 48 50 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 73 76 77 78	
DRILLER INFORMATION Driller's Name <u>J. Daniel Easterday</u> 77 License No. 80 Firm Name <u>3 Brown Church Rd. Mt Airy</u> Address <u>J. Daniel Easterday</u> Signature <u>8-2-85</u> Date	B 3 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W 32 E SOUTH S 34 570 37 DISTANCE FROM ROAD ENTER FT or MI 7 38 39	
B 2 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 10 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 1000 14 20	USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input checked="" type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT) <u>Heat Pump</u>	
APPROXIMATE DEPTH OF WELL 200 24 28 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) 30 BORED (or Augered) 37 JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary Drive-POINT other		
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <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 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER 4085 GAP 004 54 68 FORCE 54 WRITE INITIALS IN BOX PERMIT NO. 40-81-1150 70 71 72 73 74 75 76 77 78 79		
SPECIAL CONDITIONS HEALTH		

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A-30298 COUNTY NO.
 OEP SIGNATURE Schey rick STATE HEALTH INSERT S
 DATE ISSUED 08/20/85 CO SIGNATURE 8/20/85 EXP. DATE
 NORTH GRID 519000 EAST GRID 0785000
 43 50 55 57 63

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 780 5
 N 10 9
 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.

RT 97
Greenwood
Parville
well

HO 811150

Water Resources Administration
Water Supply Section
Tawes Office Building
Annapolis, Maryland 21401

APPLICATION FOR A PERMIT TO APPROPRIATE AND USE WATERS OF THE STATE

☐ Surface Water ☒ Groundwater ☐ New Application ☐ Change in Existing Permit

Number H0856004

APPLICATION

Denise & Dennis Smith
(Owner's Name)

992-8718

(Telephone Number)

4080 Roxmill Ct. Brookville Md.

20833

(Owner's Address)

(Street)

(Town)

(State)

(Zip Code)

WITHDRAWAL

GROUNDWATER

Appropriate and use a yearly average of

4000 gallons per day,
[total annual use ÷ 365 days]
and 6,000 gallons
[highest total monthly use ÷ days in month]

for the average day of the maximum month, from

1 well(s) having a diameter of

(number)

6 inches, and a depth of

(estimate)

200 ft.

(estimate)

SURFACE WATER

Appropriate and use a yearly average of

RECEIVED gallons per
[total annual use ÷ 365 days]

day, and a maximum use of

SEP 26 1985
gallons in any one day, from:

WATER RESOURCES ADMIN.
WATER SUPPLY DIVISION

[exact location of withdrawal]

PROJECT LOCATION

Lot 19 Sec I Roxbury 4080 Roxmill Ct. Brookville Md.

(Location - be specific)

County Howard

Subdivision or town Roxbury

Phone number 992-8718

Name and type of business Heat Pump

ALL APPLICATIONS MUST INCLUDE A COPY OF LOCATION MAP SHOWING THE PROJECT SITE

PURPOSE

The water will be used for:

- ☐ Community Water Supply
- ☐ Non-Potable supply (sanitary uses, not for drinking water)
- ☐ Potable Supply (drinking water, etc.)
- ☐ Cooling Water
- ☐ Irrigation
- ☐ Process Water
- ☒ Other Heat pump

(explain)

WASTEWATER TREATMENT AND DISPOSAL

- ☐ Public Sewer _____
[name of system]
- ☐ Groundwater
 - ☐ Subsurface (tilefield, seepage pit, etc.)
 - ☐ Spray Irrigation
 - ☒ Other, explain recharge well
- ☐ Surface Water _____
[name of stream]

Discharge Permit # _____

or applied for _____

SIGNATURE

Please sign here

Daniel Easterday
(signature)

Daniel Easterday applicant
(please print name, title, and date here)

8-2-85

THIS APPLICATION WILL NOT
BE PROCESSED

WITHOUT A SIGNATURE
AND A LOCATION MAP

REVIEW BY COUNTY HEALTH DEPARTMENT OR DESIGNATED AGENCY

THIS SECTION NOT TO BE COMPLETED BY APPLICANT

Is this Project consistent with the County Water and Sewerage Plan and local planning and zoning?

☐ YES ☐ NO, explain _____

Signature of county
representative

Craig Wilkins
(signature)

DIRECTOR OF WATER SEWERAGE PROGRAM
(title)

(date)

ROXBURY 19 BOX MILL CT

See other sheet

FILE WELL GROUT

DATE REPORTED 10/17/85

PROPERTY OWNER

PHONE NO.

P. O. ADDRESS

DIRECTIONS TO PROPERTY

INFORMANT

10/17/85 1200 After Calling
Office I returned to site at 1200
W 3 already grouted 6 bags 24 ft casing
RH already plugged with cement 2 bags

W11 = observed grout 20 ft

CONDITION FOUND:

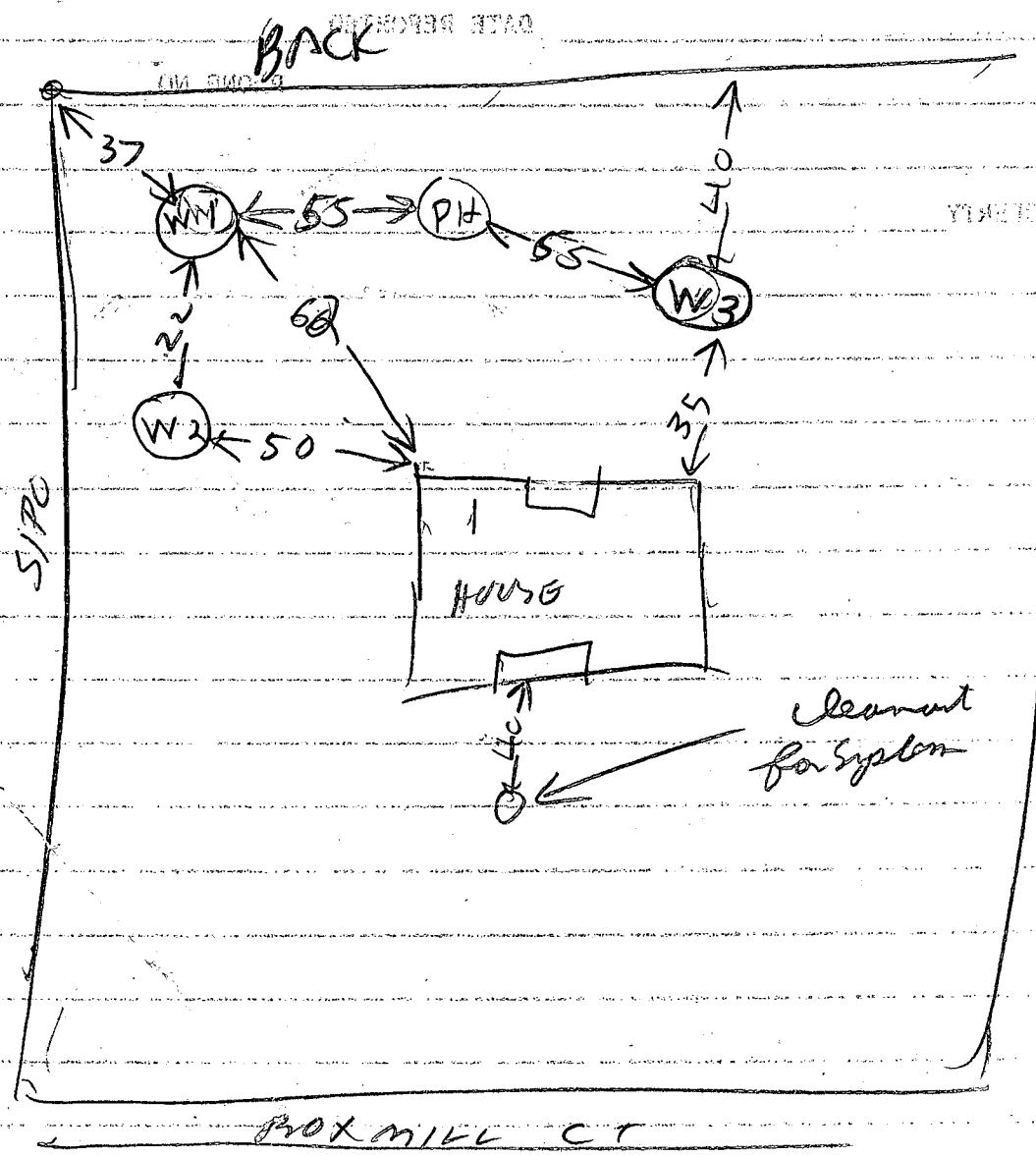
- ① Location 01' see other sheet
- ② 20 FT casing 2 1/2 FT out of grout
- ③ 13 FT depth open hole measured with a string
- ④ 10 FT long pipe jacked down well

ACTION TAKEN:

- ⑤ 5 Bags used
- ⑥ Well OK

FINAL DISPOSITION:

ROXBURY Lot 19
 Roxmill CT W Well
 H081 1150



10/17/85
 1025 - 1105 AM
 NO SHOW

(W1) = LF EASTER DAY TAG H0811150

NOT GROUTED 13.5 FT OPEN HOLE

(W2) = 20E MAYNE TAG H0810520

PROBABLY GROUTED

(DH) = DRY HOLE 22 FT deep

(W3) = LF EASTER DAY NOTAG

NOT GROUTED 25 FT OPEN HOLE

NO one showed R. Hodges Called office
 Rescheduled same day See other sheet

FILE _____ DATE REPORTED _____

PROPERTY OWNER _____ PHONE NO. _____

P. O. ADDRESS _____

DIRECTIONS TO PROPERTY _____

INFORMANT _____

CONDITION FOUND: _____

ACTION TAKEN: _____

FINAL DISPOSITION: _____

DATE Received

DATE WELL COMPLETED
101885

Depth of Well
22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
40-81-1150

OWNER
SMITH DENNIS
STREET OR RFD RORRILL COURT first name TOWN Glenwood
SUBDIVISION RORRILL SECTION LOT 19

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
Topsoil	0	1
brown mica schist	1	10
GRAY mica	10	30
brown mica schist	30	45
GRAY mica	45	80
brown mica schist	80	90
GRAY mica	90	180
GRAY mica w/Flint	180	200

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)
Y N
44 44

TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
45 46 45 46

NO. OF BAGS 5 NO. OF POUNDS 300

GALLONS OF WATER 25

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 13 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)
J 6 20
60 61 63 64 66 70

OTHER CASING (if used)
EACH CASING diameter depth (feet) from to
30

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 7

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface) BEFORE PUMPING 50

WHEN PUMPING 200

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 below LAND SURFACE (nearest foot) 50 51

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. 41

DRILLERS SIGNATURE Robert K. Newman

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

C 2

DEPTH (nearest ft.)
H O 19 200
8 9 11 15 17 21
23 24 26 30 32 36
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.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

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)

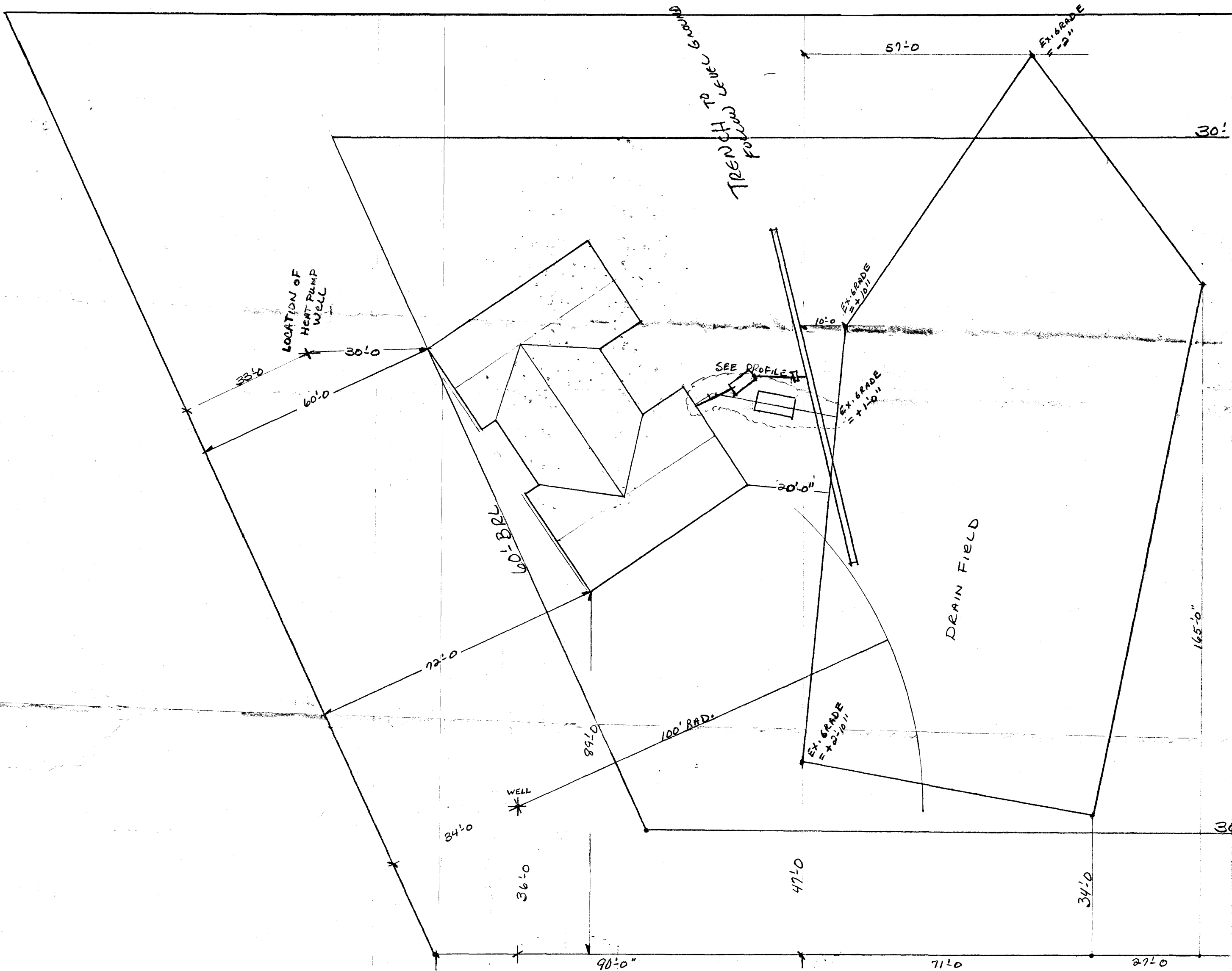
near lot line

well

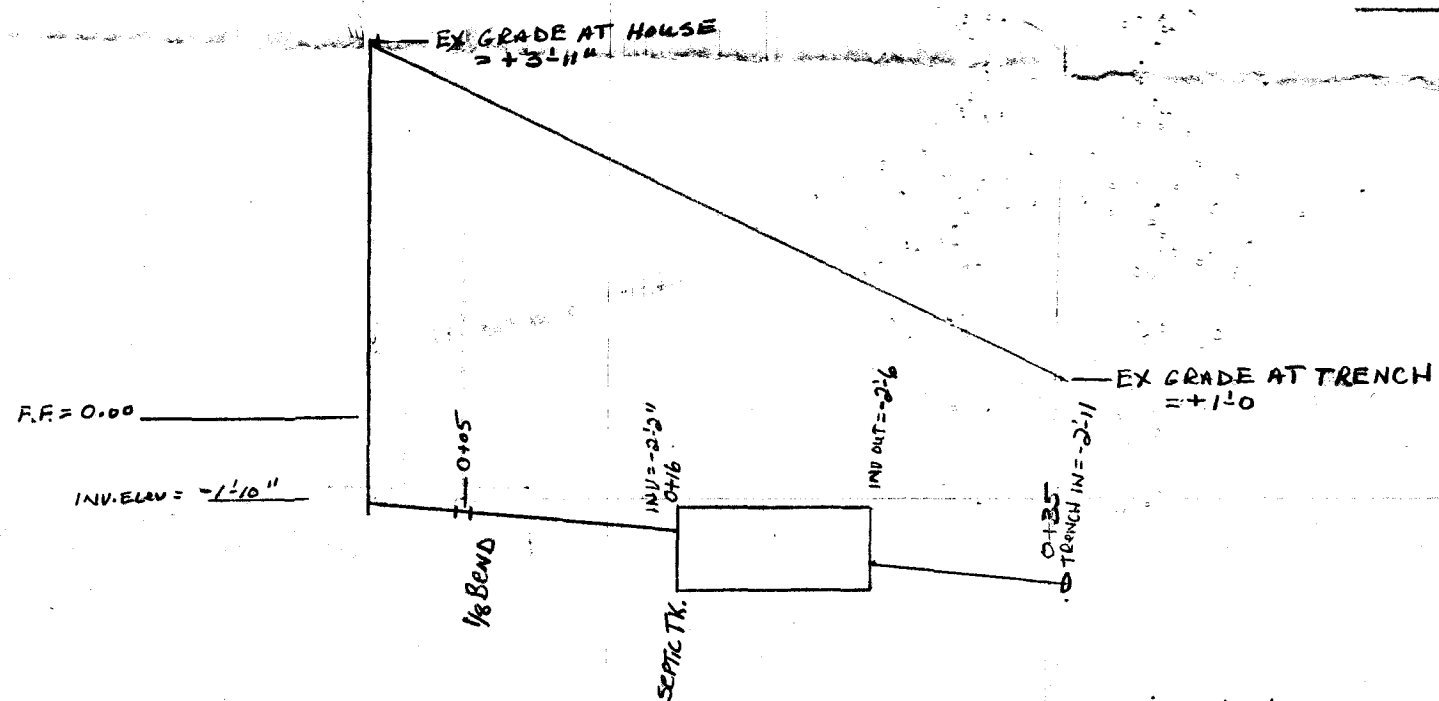
DENNIS & DONNA SMITH
501 WASHBURN AVE
BALTO, MD 21225
301) 355-6091

JOHN A. COULTY
HEALTH DEPT.
FEB 11 10 18 AM '81
DIVISION OF
ENVIRONMENTAL
HEALTH

16X15X86X100



SITE PLAN SCALE - 1" = 20'-0"



PROFILE @ SEPTIC SYSTEM DRAIN SCALE = HORIZ 1" = 10'-0" VERT 1/8" = 1'-0"

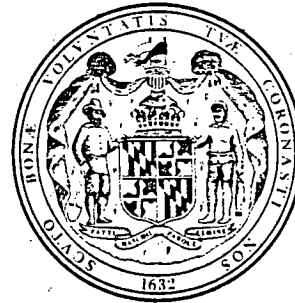
DENNIS & DONNA SMITH
SITE PLAN
LOT 17 ROXBURY
W-681-8750

STATE OF MARYLAND
DEPARTMENT OF THE ENVIRONMENT
WATER MANAGEMENT ADMINISTRATION

WATER APPROPRIATION AND USE PERMIT

PERMIT NUMBER: HO85G004(02)

EFFECTIVE DATE: JANUARY 1, 1998
EXPIRATION DATE: JANUARY 1, 2010
FIRST APPROPRIATION: DECEMBER 1, 1985



DENNIS R. & DONNA J. SMITH

HEREINAFTER REFERRED TO AS THE "PERMITTEE", IS AUTHORIZED BY THE WATER MANAGEMENT ADMINISTRATION, HEREINAFTER REFERRED TO AS THE "ADMINISTRATION" PURSUANT TO THE PROVISIONS OF TITLE 5 OF THE ENVIRONMENT ARTICLE, ANNOTATED CODE OF MARYLAND (1996 REPLACEMENT VOLUME) AS AMENDED, TO APPROPRIATE AND USE WATERS OF THE STATE SUBJECT TO THE FOLLOWING CONDITIONS:

1. ALLOCATION - THE WATER WITHDRAWAL GRANTED BY THIS PERMIT IS LIMITED TO:
A DAILY AVERAGE OF 4,000 GALLONS ON A YEARLY BASIS AND
A DAILY AVERAGE OF 6,000 GALLONS FOR THE MONTH OF MAXIMUM USE.
2. USE - THE WATER IS TO BE USED FOR A RESIDENTIAL GROUNDWATER HEAT PUMP SYSTEM.
3. SOURCE - THE WATER SHALL BE TAKEN FROM ONE WELL AND RETURNED IN ONE WELL TO THE BOULDER GNEISS OF THE WISSAHICKON FORMATION.
4. LOCATION - THE POINT(S) OF WITHDRAWAL SHALL BE LOCATED AT 4020 ROXMILL COURT, 0.1 MILE EAST OF MD ROUTE 97, ROXBURY, HOWARD COUNTY, MARYLAND.

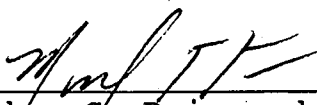
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5. RIGHT OF ENTRY - THE PERMITTEE SHALL ALLOW AUTHORIZED REPRESENTATIVES OF THE ADMINISTRATION ACCESS TO THE PERMITTEE'S FACILITY TO CONDUCT INSPECTIONS AND EVALUATIONS NECESSARY TO ASSURE COMPLIANCE WITH THE CONDITIONS OF THIS PERMIT. THE PERMITTEE SHALL PROVIDE SUCH ASSISTANCE AS MAY BE NECESSARY TO EFFECTIVELY AND SAFELY CONDUCT SUCH INSPECTIONS AND EVALUATIONS.
6. PERMIT REVIEW - THE PERMITTEE WILL BE QUERIED EVERY THREE YEARS (TRIENNIAL REVIEW) REGARDING WATER USE UNDER THE TERMS AND CONDITIONS OF THIS PERMIT. FAILURE TO RETURN THE TRIENNIAL REVIEW QUERY WILL RESULT IN SUSPENSION OR REVOCATION OF THIS PERMIT.
7. PERMIT RENEWAL - THIS PERMIT WILL EXPIRE ON THE DATE INDICATED ON THE FIRST PAGE OF THIS PERMIT. IN ORDER TO RENEW THE PERMIT THE PERMITTEE SHALL FILE A RENEWAL APPLICATION WITH THE ADMINISTRATION NO LATER THAN 45 DAYS PRIOR TO THE EXPIRATION.
8. PERMIT SUSPENSION OR REVOCATION - THIS PERMIT MAY BE SUSPENDED OR REVOKED BY THE ADMINISTRATION UPON VIOLATION OF THE CONDITIONS OF THIS PERMIT, OR UPON VIOLATION OF ANY REGULATION PROMULGATED PURSUANT TO TITLE 5 OF THE ENVIRONMENT ARTICLE, ANNOTATED CODE OF MARYLAND (1996 REPLACEMENT VOLUME) AS AMENDED.
9. CHANGE OF OPERATIONS - ANY ANTICIPATED CHANGE IN APPROPRIATION WHICH MAY RESULT IN A NEW OR DIFFERENT USE, QUANTITY, SOURCE, OR PLACE OF USE OF WATER SHALL BE REPORTED TO THE ADMINISTRATION BY THE PERMITTEE BY SUBMISSION OF A NEW APPLICATION.
10. ADDITIONAL PERMIT CONDITIONS - THE ADMINISTRATION MAY AT ANYTIME (INCLUDING TRIENNIAL PERMIT REVIEW OR WHEN A CHANGE APPLICATION IS SUBMITTED) REVISE ANY CONDITION OF THIS PERMIT OR ADD ADDITIONAL CONDITIONS CONCERNING THE CHARACTER, AMOUNT, MEANS AND MANNER OF THE APPROPRIATION OR USE, WHICH MAY BE NECESSARY TO PROPERLY PROTECT, CONTROL AND MANAGE THE WATER RESOURCES OF THE STATE. CONDITION REVISIONS AND ADDITIONS WILL BE ACCOMPLISHED BY ISSUANCE OF A REVISED PERMIT.

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11. NON-TRANSFERRABLE - THIS PERMIT IS NON-TRANSFERRABLE. A NEW OWNER MAY ACQUIRE AUTHORIZATION TO CONTINUE THIS APPROPRIATION BY FILING A NEW APPLICATION WITH THE ADMINISTRATION. AUTHORIZATION WILL BE ACCOMPLISHED BY ISSUANCE OF A NEW PERMIT.
12. RETURN TO AQUIFER - THE WATER WITHDRAWN AND USED FOR GROUNDWATER HEAT PUMP OR HEAT EXCHANGE PURPOSES SHALL BE RETURNED TO THE AQUIFER FROM WHICH IT IS WITHDRAWN.
13. WATER LEVEL MEASUREMENTS - FOR ALL THE APPLICANT'S WELLS FOUR (4) INCHES IN DIAMETER OR LARGER, PUMPING EQUIPMENT SHALL BE INSTALLED SO THAT WATER LEVELS CAN BE MEASURED DURING PUMPING AND NONPUMPING PERIODS WITHOUT DISMANTLING ANY EQUIPMENT. ANY OPENING FOR TAPE MEASUREMENTS OF WATER LEVELS SHALL HAVE A MINIMUM INSIDE DIAMETER OF 0.5 INCHES AND BE SEALED BY A REMOVABLE CAP OR PLUG. THE PERMITTEE SHALL PROVIDE A TAP FOR TAKING RAW WATER SAMPLES BEFORE WATER ENTERS A TREATMENT FACILITY, PRESSURE TANK, OR STORAGE TANK.
14. PERMIT SUPERSESSION - THIS PERMIT HAS BEEN REVIEWED AND REVISED AND SUPERSEDES THE APPROPRIATION AND USE GRANTED BY THE FOLLOWING PRIOR PERMIT ISSUED TO:
DENNIS SMITH AND SMITH DENNA ON DECEMBER 1, 1985
(HO85G004(01))

BY AUTHORITY OF THE DIRECTOR
WATER MANAGEMENT ADMINISTRATION

 1-16-98
Matthew G. Pajerowski, Chief
WATER RIGHTS DIVISION

