

2/22/90 1pm
2/22/90 ASAP 4PM

PERMIT

03-309738

P 43330
30459
A 30331

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INSR REQ'D

DATE 2/14/90

DATE SYSTEM APPROVED 2/23/90

BEFORE S.T. INSTALLATION

MR/CW 2/18/90

INSPECTOR M. R. Riffin

INDEXED

Paul Schissler/South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Md. 21157 PHONE 875-4197

SUBDIVISION Wynfield Estates ROAD 2760 Wynfield Road LOT 4

PROPERTY OWNER Walt & Sue Camp

ADDRESS

~~EXCESSIVE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 100% AND ABSORPTION AREA BY 20%~~

~~GRABAGE GRINDER XXXXX YES XXXXXXXXXXXX NO XXXXXXXX~~

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 210 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 - Place the distribution box 195 feet down the left lot line (511.28') and 140 feet off that line as seen when facing the lot from Wynfield Road. Run trenches on contour toward the back lot line. Maintain a minimum of 100 feet from the well.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

Septic installed w/wrong specs, but no sig. impact MR 10/30/91
(30331)

PLANS APPROVED BY Raymond Hodges cm DATE 08/24/89

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS

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

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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 TWO 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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BDG. PERMIT SIGNED

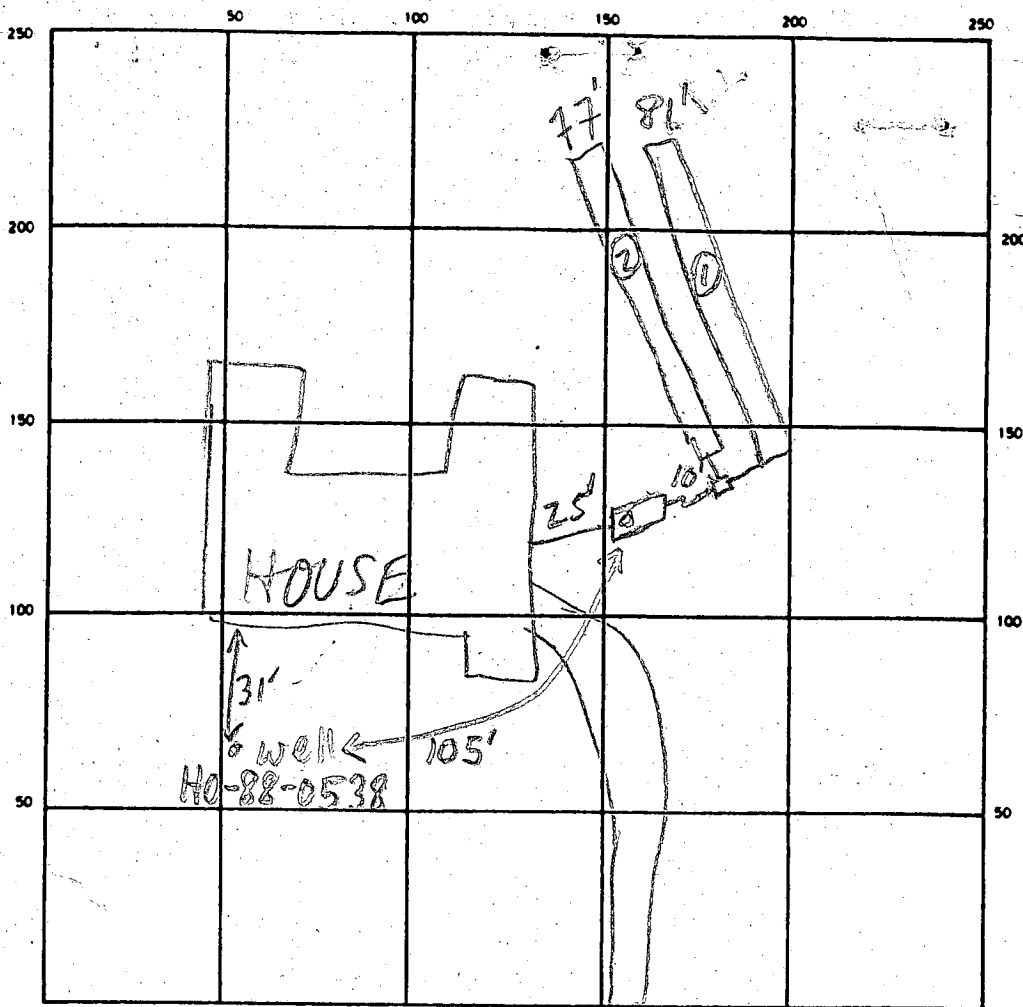
AND RETURNED 4/10/90

Serial # 30450 - read deck

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

30459
A 30331



WYNFIELD RD
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK. LEVEL 1000 GAL-OK CLEANOUTS OK

DISTRIBUTION BOX. LEVEL OK - BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 8 FT TRENCH WIDTH 2 FT INLET DEPTH 4 FT

EFFECTIVE GRAVEL DEPTH 4 FT TOTAL LENGTH 081 77 FT 158

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 1324 (2) 308 SQ FT

DRYWELL INSIDE DIAMETER — FT EFFECTIVE DEPTH BELOW INLET — FT

ABSORBENT AREA 632 SQ FT

REMARKS 2/22/90 OK TO CONTINUE MR

2/23/90 #1 OK TO CONTINUE DIGGING @ MR

2/23/90 #2 OK TO FINISH & COVER WHEN READY MR

DATE SYSTEM APPROVED

2/23/90

INSPECTOR

M. Riskin

SUBDIVISION: WYNFIELD

LOT NUMBER:

SECT 3^A 30459
LOT 4DRY WELL OR DRY WELL AND TRENCH125 sq. ft./bedroom

	<u>Septic Tank</u>
3 bedroom	1000 gallon
4 bedroom	1250 gallon
5 bedroom	1500 gallon

Minimum Total square Feet

_____Inlet 3 feet below original grade.Bottom maximum depth 10 feet below original grade.Effective area begins at 3 feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench.
No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with 7 feet of stone below distribution pipe.

TRENCHES180 sq. ft./bedroomTrench to be 2 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.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: 213185 = PLACE THE DRY WELL OR START THE
TRENCH AT PERC HOLE (1) WHICH IS LOCATED 200 FT
FROM THE FRONT LOT LINE & 140 FT FROM THE LEFT SIDE
OF THE LOT AS SEEN WHEN FACING THE LOT FROM
WYNFIELD DRIVE RUN THE TRENCH TOWARD PERC HOLE (2)
WHICH IS LOCATED 290 FT FROM THE FRONT LINE
& 90 FT FROM THE LEFT SIDE LINE AS SEEN WHEN
FACING THE LOT FROM WYNFIELD DRIVE RH

PRELIMINARY

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30459

P

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd

DATE 1/9/80

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 Land Associates

ADDRESS 3450 Fort Meade Road, Laurel, Md. 20810

Tom Munz - 792-2242
PHONE Ted Snovell - 265-6543

PROPERTY LOCATION:

SUBDIVISION

WYNFIELD
Hoffman property

LOT NO.

SECT 3
24 LOT 4

ROAD AND DESCRIPTION

Route 144

SIZE OF LOT 3 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 /s/ Ted Snovell for Land Associates

APPROVED BY

Raymond Huelga

FOR

Trench or Dry Well

DATE

2/13/85

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

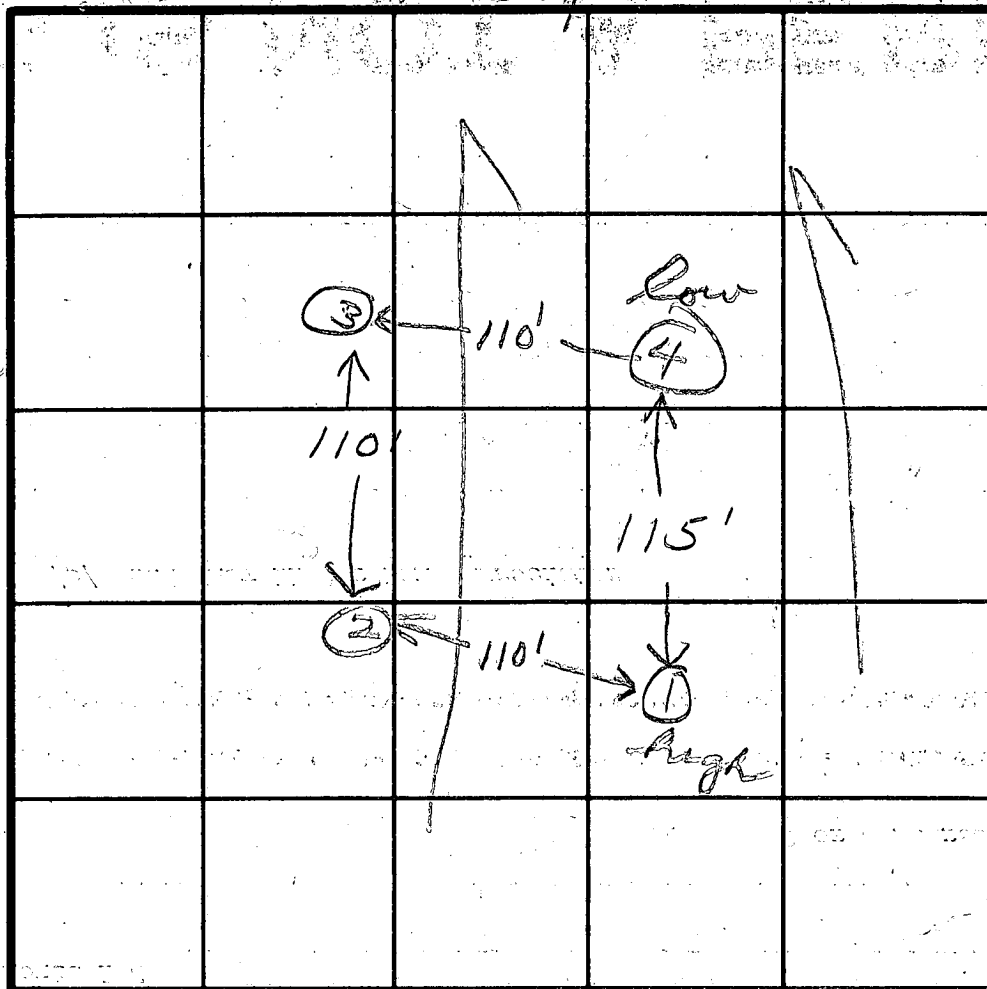
2/12/85 Specs Written R/H

THIS IS NOT A PERMIT

LOT 24

SOIL PROFILE

0-3'
Clay, sand
8-14'
Sandy loam



X-27
180 BR
Inlet 3'
Bot 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/25/80	1S	4	11:29	11:31	11:31	11:33	2
	1D	14	11:29	11:34	11:34	11:45	11
	2S	3	11:35	11:36	11:36	11:38	2
	2D	14	11:35	11:38	11:38	11:44	6
	3S	3	11:43	11:45	11:45	11:49	4
	3D	13	11:43	11:50	11:50	12:05	15
	4S	3	11:46	11:47	11:47	11:48	1
	4D	13	11:46	11:49	11:49	12:03	14

8 MIN AK
3' inlet

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

J. Duszynski

PRELIMINARY

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30459

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd =

DATE 1/9/80

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 Land Associates

ADDRESS 3450 Fort Meade Road, Laurel, Md. 20810

PHONE Tom Munz - 792-2242
Ted Snovell - 265-6543

PROPERTY LOCATION:

WYNTFIELD

SUBDIVISION

Hoffman-property

LOT NO.

24

SECT III

Lot 4

ROAD AND DESCRIPTION

Route 144

SIZE OF LOT 3 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 /s/ Ted Snovell for Land Associates

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

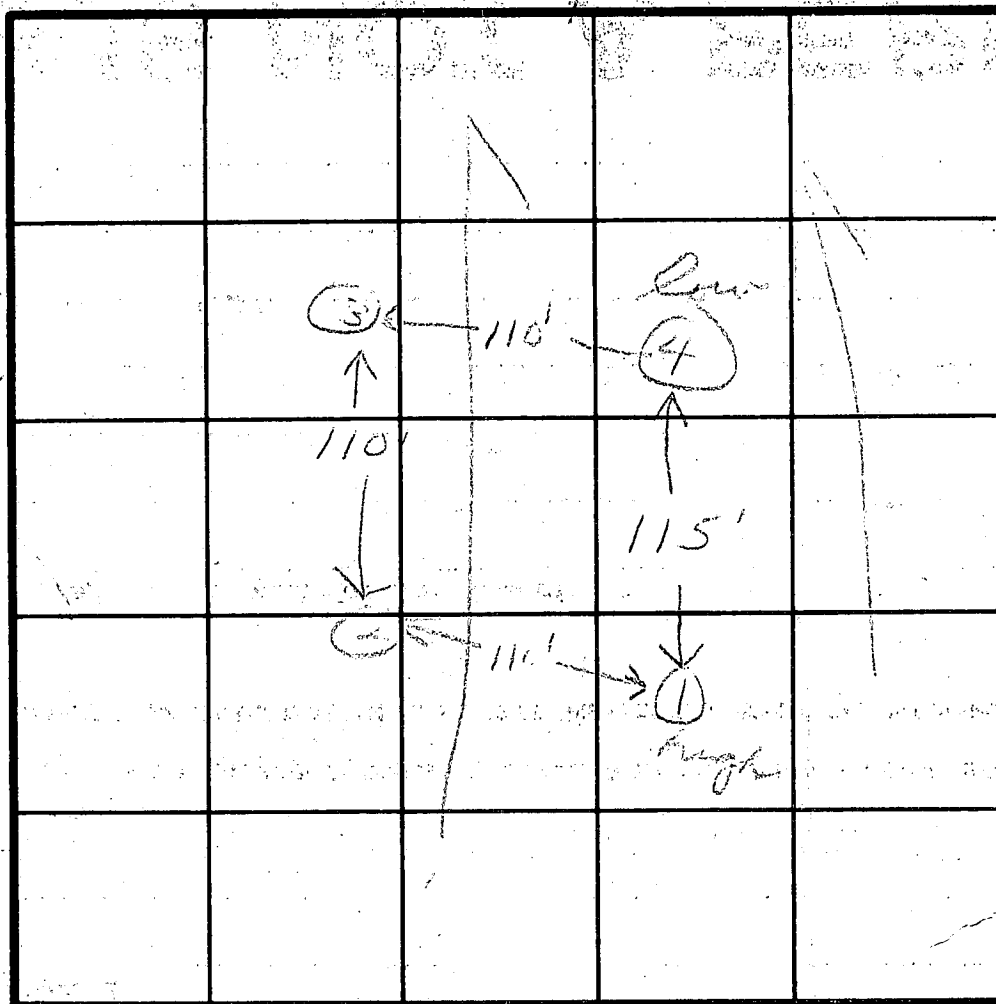
THIS IS NOT A PERMIT

LOT 24

SOIL PROFILE

0

3
dry sand
11'
dry brown



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/25/80	1D	7 14	11:27 11:29	11:31 11:34	11:31 11:34	11:32 11:45	11
	2D	3 14	11:33 11:35	11:36 11:38	11:36 11:38	11:38 11:44	6
	3D	3 13	11:43 11:43	11:45 11:50	11:45 11:50	11:47 12:05	4 15
	4D	3 13	11:46 11:46	11:47 11:49	11:47 12:49	11:48 12:03	1 14

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

J. Duggan

24

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88- 0538
Location of property (road) WYNFIELD ROAD
Subdivision WYNFIELD Lot 4 Block - Plat - Sec. 2
Well Driller JOE MAYNE Owner CAMP, K.W.

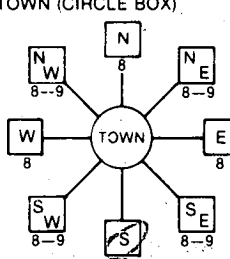

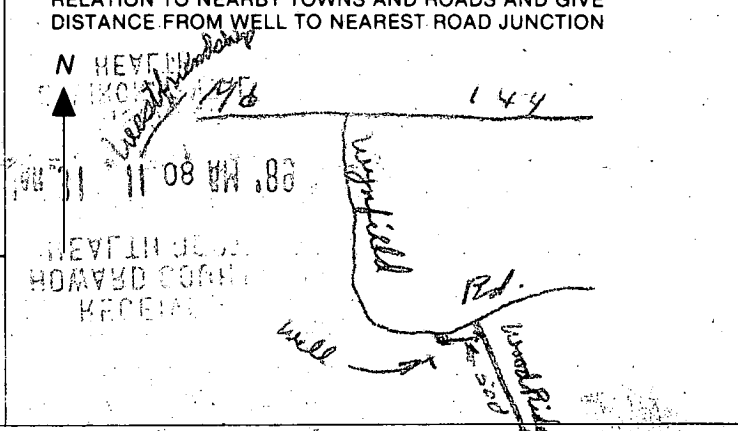
Depth of well 305 ft'
Distance of measuring point (M.P.) above ground 1 ft
Static water level (S.W.L.) below M.P. 30 ft

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 15 G.P.M.
Total time 30 minutes to reach pumping water level 232 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

B 1	2292	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	STATE PERMIT NUMBER HC-88-0538
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		please print or type		
Date Received (APA) 040589		LOCATION OF WELL 8 COUNTY HOWARD 23 SUBDIVISION WYNFIELD SECTION 2 LOT 4 52 NEAREST TOWN WESTFRIENDSHIP MILES FROM TOWN (enter 0 if in town) 1 M I		
OWNER INFORMATION 15 Last Name CAMP Owner First Name K. D. 36 Street or RFD 3460 ROSEMARY LANE 57 Town ELLICOTT CITY State MD Zip 21043		DRILLER INFORMATION Driller's Name Joseph R. Wayne 77 License No. 238 Firm Name Joseph R. Wayne Well Drilling Address 5512 Ridge Rd. Mt. Airy Md. 21771 Signature Joseph R. Wayne Date 3/30/89		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 90 ENTER FT or MI FT		
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)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A# 30331 COUNTY NO. STATE SIGNATURE _____ INSERT S _____ DATE ISSUED 041089 x C.W./C.B. 10/10/89 NORTH GRID 530000 EAST GRID 0815000		
APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH		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 810 S N 530 0		
METHOD OF DRILLING (circle one) BORED (or Augered) <u> </u> JETTED <u> </u> Jetted & DRIVEN <u> </u> 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other _____		4-21-89 9:30 60ft casing 45ft open hole 1ft above ground 10+ bags cement location ok*		
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 DEEPEN 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 _____ GAP _____ FORCE CW WRITE INITIALS IN BOX PERMIT NO. HC-88-0538 SPECIAL CONDITIONS _____				

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

TO: SHANA BERGER & HANE

8726 TOWN & COUNTRY BLVD

FROM: ELLICOTT CITY MD 21043

DATE: 14 AUG 89

WYNFIELD ESTATES
LOT 4

2700 WYNFIELD RD

This office has received your building permit # 28582.
We are unable to approve your permit for the following reason(s):

☐ No septic elevations/site plans provided (example and septic specification enclosed).

☐ Incorrect septic specs. (See enclosure.)

☐ No invert elevation at _____.

☐ No existing grade at _____.

☐ No elevation at well.

☐ Invert at trench(s) incorrect. (See enclosed.)

☐ House too small.

☐ House to _____ less than _____ feet.

☒ Well to SEPTIC TANK less than 100 feet.

☐ Sewage easement location incorrect.

☐ No well on property.

☐ Other: _____

If you should have any question, please call RAYMOND HODGES
or _____ at 461-9933.

HD-210

9/5/89 Revised
Plans OK B/H

2-1-90
12 noon

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer George Easterday

Telephone 831-5170

License Number MWV 269

Certified Well Pump Installer ☒

Well Driller ☐

Registered Plumber ☐

Name of Property Owner McDonough Bldrs

Telephone 381-5544

Subdivision Wynfield Estates Lot # 4

Well Tag # HO-88-0538

Site Address 2760 Wynfield Road

Pump

1. Type

- a. Deep well jet _____
b. Shallow well jet _____
c. Submersible ☒

2. Make Gould

3. Model # SES 05422

4. Capacity 5-10 GPM

5. Pump exceeds well capacity Yes ☐ No ☒

6. If Yes, is low pressure cutoff switch installed? Yes _____ No ☒

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☒ Cable guards _____ Other _____

Motor

1. Horsepower 1/2

2. RPM 3200

3. Voltage _____

a. 110 _____

b. 220 ☒

Pitless Adapter

1. Make Martinson

2. Model # B 10X

3. Depth 42 in

Tank

1. Capacity 82 gal

2. Pressure relief valve? yes

Piping

1. Type Polybutelane

2. Size 1 in

3. NSF and/or BOCA Code approved ☒

4. Depth of supply line 42 in

Well data

1. Depth 305 ft.

2. Yield 5 GPM

3. Static water level 12 ft.

4. Will water supply be disinfected by installer? ☒

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

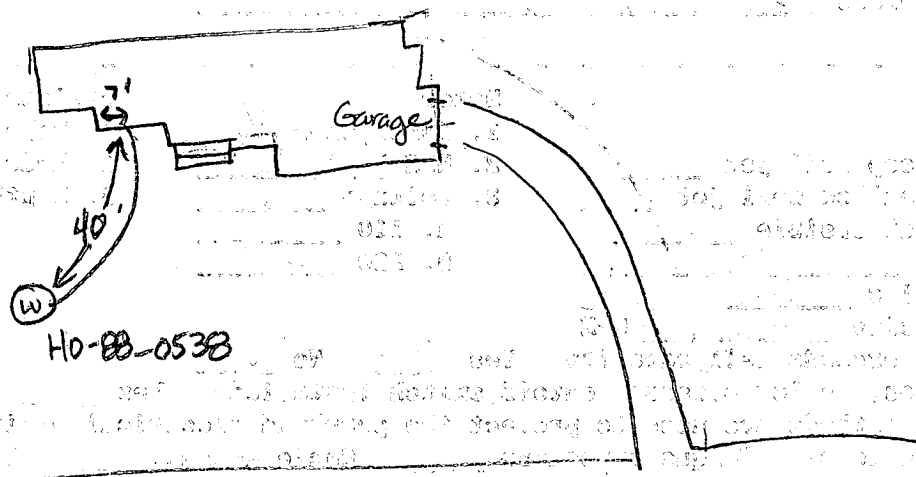
Signature of Applicant: Geo. Easterday

Date: 2-1-90

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

7161
2-1-90
32

Jane R, 2-1-90
Easterday needs
to send in \$10.00
WPI fee. He
filled out form
in field. LN
(SEE NEXT SHEET) Carey

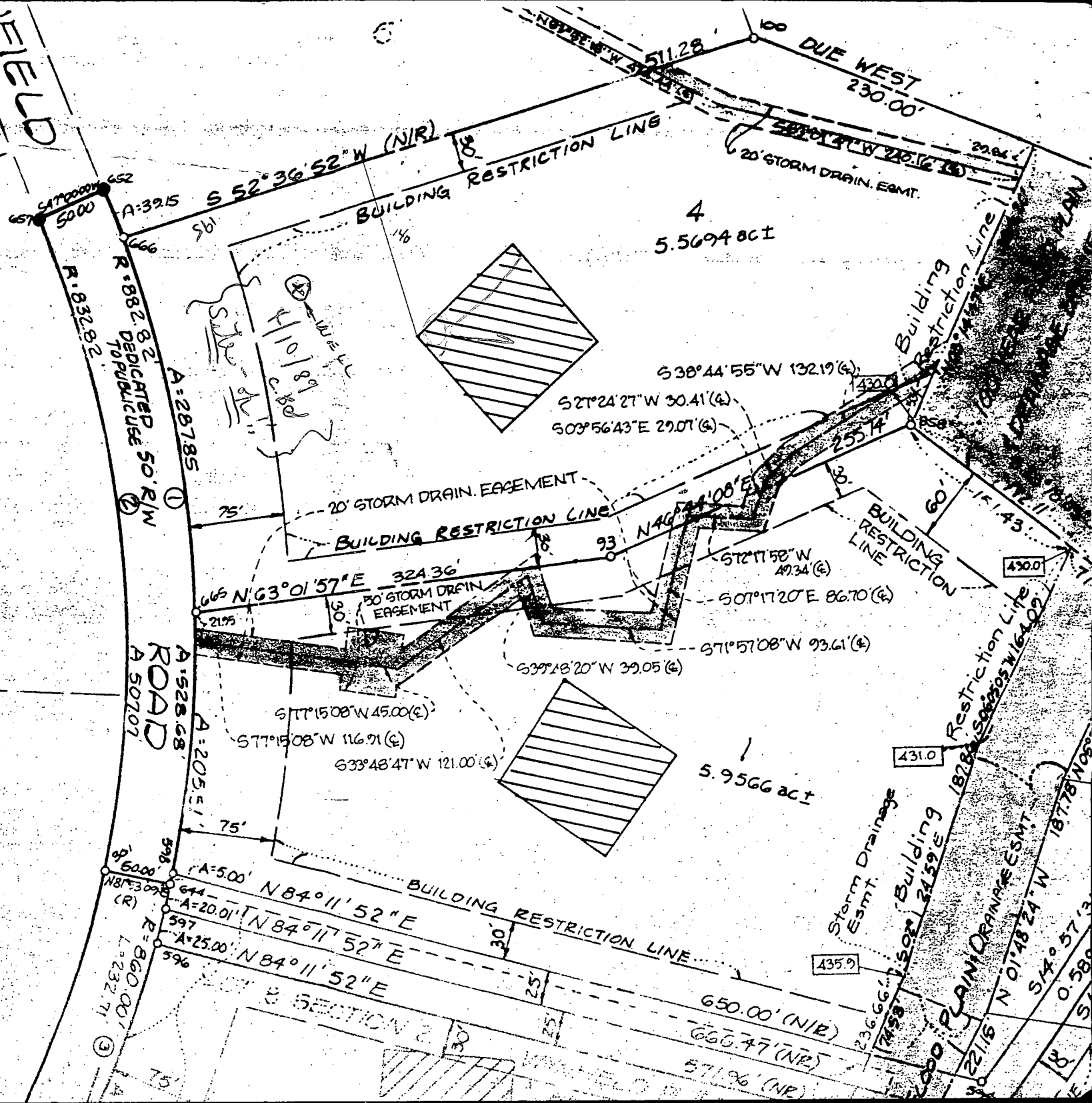


Wynfield Road

Pitless adaptor at 50 inches below grade. Well line at
50 inches below grade. Ground line not attached yet.
House connection ok. Pump tank installed
w/ relief valve. JE Madeau 2-1-90

07-10-68 5:05 PM

FIELD



RECEIVED
HOWARD COUNTY
HEALTH DEPT
MAR 31 11 08 AM '89
DIVISION OF
ENVIRONMENTAL
HEALTH

W. K. CAMP
3460 ROSEMARY LN.
ELLICOTT CITY MD
531-3519 21043

C1 2389	SEQUENCE NO. (DENV USE ONLY)	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER # 30331	PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-98-0C3A
DATE Received 8 13	DATE WELL COMPLETED 8/9/89	Depth of Well 22 305 26 (TO NEAREST FOOT)	

OWNER CAMP	last name WYNNE	first name ELD	TOWN WEST FRIENDSHIP
STREET OR RFD	SUBDIVISION WYNNE		SECTION 4

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
SANDSTONE GRAY MISH ROCK	0 54 54 305	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT CM	BENTONITE CLAY BC
NO. OF BAGS 10	NO. OF POUNDS 740
GALLONS OF WATER 66	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 45 ft.	

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) 4	Total depth of main casing (nearest foot) 60

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

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.)	
11 59 205	
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

C3		
PUMPING TEST		
HOURS PUMPED (nearest hour) 3		
PUMPING RATE (gal. per min. to nearest gal.) 5		
METHOD USED TO MEASURE PUMPING RATE Flowit		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING 48		
WHEN PUMPING 232		
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 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 1 (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)	
	

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. 258	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

COUNTY

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0538
Location of property (road) WYNFIELD ROAD
Subdivision WYNFIELD Lot 4 Block - Plat - Sec. 2
Well Driller JOE MAYNE Owner CAMP, K.W.

Depth of well 305'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 38'

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 15 G.P.M.
Total time 30 min. to reach pumping water level 232 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

SEPTIC SYSTEM DATA

INVERT C HOUSE : 484.5 @ 2.0%

SEPTIC TANK

EX. GRADE :	488.0
FIN. GRADE :	489.0
INV. IN	483.50
INV. OUT	483.60

DISTRIBUTION BOX

EX. GRADE :	485.10
FIN. GRADE :	489.0
INV. IN	482.10
INV. OUT	482.10

TRENCHES (# & LENGTH TO BE DETERMINED BY HOWARD CO. HEALTH DEPT.)

	#1	#2
EX GRADE	486.0	483.8
FIN. GRADE	485.0	483.8
INV. IN.	482.0	480.80

TOPOGRAPHIC SURVEY & SITE PLAN

LOT 4

WYNFIELD

3RD ELECTION DISTRICT

SCALE : 1" = 30'

DATE : JULY 11, 1989

9/5/89
 PLANS O.K.
 B.H.

INVOICE NO.
T 1487

Permit
28582

CERTIFICATE OF ANALYSIS
WATER TESTING LABORATORIES OF MARYLAND, INC. *U-10*
Annapolis — Timonium — Severna Park — Elkton
TOLL FREE: 1-800-635-0645

ANNAPOLIS: (301) 269-7755
BELAIR: (301) 838-8411
ELKTON: (301) 398-2413
SEVERNA PARK: (301) 647-7737
TIMONIUM: (301) 628-2855
WESTMINISTER: (301) 876-2035

FIELD RECORD

Sample Source *Lawnory Sink*

2760 WYNFIELD RD.

W. FRIENDSHIP YRD.

McDonough BUILDERS

Well No. *H0-88-0538*

This Sample Was Taken From a Tap On The
Property by Water Testing Laboratories of
Maryland, Inc.

Construction Satisfactory ☒
Unsatisfactory ☐
Not Determined ☐

Bottle No. *1487* Collector *J. Schubert 89-039-m*

Bacteriological analysis of this sample indicates the water is safe for human consumption.

community ☐
non-community ☐
private ☒

Date *4-19-90*

Time *10:45*

Iced yes ☒
no ☐

pH *6.8*

Free Cl *0*

Total Cl *0*

County *How*

LABORATORY RECORD

Presumptive Bacteriological Test

ml. of Sample	10ml.
Gas, 24 hours	---
Gas, 48 hours	---

Confirmed Bacteriological Test

ml. of Sample	10ml.
Coliforms	
Fecal Coliforms	

N(NO ₃) (mg/l)	Sand	Turbidity (NTU)	(mg/l)	(mg/l)	(mg/l)	Coliforms/100ml.	
						Fecal	Total
0.23	NONE	5.8					

Date
Received: *4-20-90 9am*
Examined: *4-20-90 9am*
Reported: *4-22-90 9am*

J. Schubert
Analyst

Thiosulfate Present ☐
Absent ☐

PLEASE DETACH THIS PART AND MAIL WITH REMITTANCE TO:

WATER TESTING LABS
POST OFFICE BOX 463
TIMONIUM, MARYLAND 21093

INVOICE NO.
T 1487

DATE: *4-19-90*

ANNAPOLIS: (301) 269-7755
BELAIR: (301) 838-8411
ELKTON: (301) 398-2413
SEVERNA PARK: (301) 647-7737
TIMONIUM: (301) 628-2855
WESTMINISTER: (301) 876-2035

ATTN: *Cathy*

McDonough Builders
6310 Stevens Forest RD Suite 104
Columbia, Md. 21046

AMOUNT

For analytical work reported above	<i>55⁰⁰</i>
TOTAL DUE	<i>55⁰⁰</i>

INVOICE NO.

T

1487

OP

28582

CERTIFICATE OF ANALYSIS

WATER TESTING LABORATORIES OF MARYLAND, INC.

Annapolis - Timonium - Severna Park - Elkton

TOLL FREE: 1-800-635-0645

ANNAPOLIS: (301) 269-7755

BELAIR: (301) 838-8411

ELKTON: (301) 398-2413

SEVERNA PARK: (301) 647-7737

TIMONIUM: (301) 628-2855

WESTMINISTER: (301) 876-2035

FIELD RECORD

Sample Source: LAUNDRY SINK2760 WYNFIELD RD.W. FRIENDSHIP MD.McDonough BUILDERSWell No. HO-88-0538This Sample Was Taken From a Tap On The
Property by Water Testing Laboratories of
Maryland, Inc.

Construction

Satisfactory ☒Unsatisfactory ☐Not Determined ☐Bottle No. 1487Collector J. Bulhart 89-039-mBacteriological analysis of this sample indicates the water is safe for human consumption.community ☐
non-community ☐
private ☒Date 4-19-90Time 10:45Iced ☐ yes ☒ no ☐pH 6.8Free Cl 0Total Cl 0County How

LABORATORY RECORD

Presumptive Bacteriological Test

ml. of Sample	10ml.
Gas, 24 hours	---
Gas, 48 hours	---

Confirmed Bacteriological Test

ml. of Sample	10ml.
Coliforms	
Fecal Coliforms	

N(NO ₃) (mg/l)	Sand	Turbidity (NTU)	(mg/l)	(mg/l)	(mg/l)	Coliforms/100ml. Fecal	Total
0.23	NONE	5.8					

Date

Received: 4-20-90Examined: 4-20-90Reported: 4-22-90

Analyst

Thiosulfate Present ☐
Absent ☐WATER TESTING LABS
POST OFFICE BOX 463
TIMONIUM, MARYLAND 21093

INVOICE NO.

T 1487

DATE:

4-19-90

ANNAPOLIS: (301) 269-7755

BELAIR: (301) 838-8411

ELKTON: (301) 398-2413

SEVERNA PARK: (301) 647-7737

TIMONIUM: (301) 628-2855

WESTMINISTER: (301) 876-2035

AMOUNT

For analytical work
reported above55⁰⁰

TOTAL DUE	55 ⁰⁰