

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd & 4th

DATE 5/13/77

INDEXED

Donald Parlette

IS PERMITTED TO INSTALL X ALTER

ADDRESS 6575 Route 32, Clarksville, Md.

PHONE 286-2140

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION

14148

ROAD Rover Mill & Old Rover

MILL

LOT 7

PROPERTY OWNER David Ahlquist

ADDRESS 1012 10th Street, Laurel, Md. 20810

SPECIFICATIONS 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL-360 sq. feet sidewall area below top 4 feet of clay. Dry Well inlet to be no deeper than 4 feet and dry well bottom to be no deeper than 10 feet. Place the dry well 230 feet from the back lot line which is 360.00 feet long and 35 feet from the left side of the lot as seen when facing the lot from Rover Mill Road.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. 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 ACCEPTED.

PLANS APPROVED BY Raymond Hodges

DATE 8/13/74

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

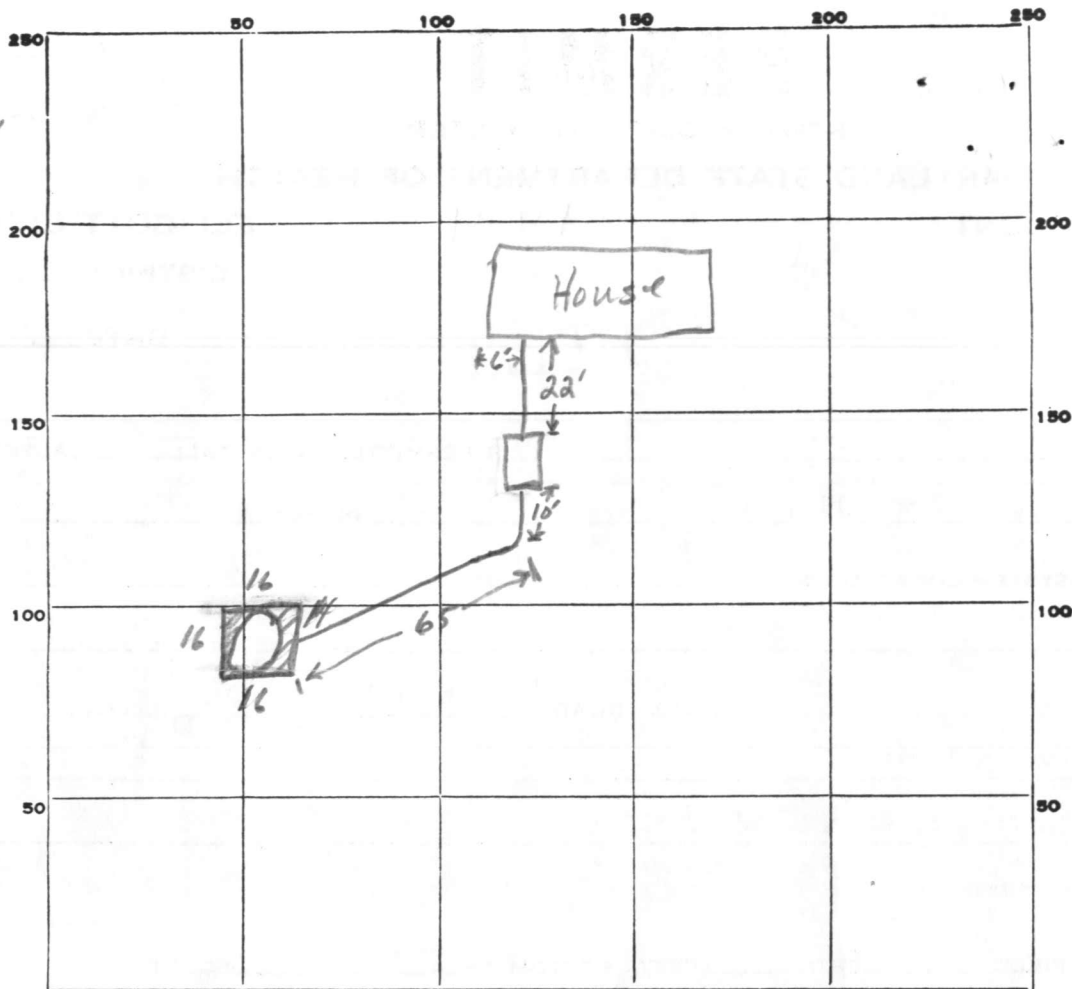
Approved  
8/11/77  
T.S.O.

P 25868

A 20436

25868  
20436

Invert @ 4'  
Below inlet 8'



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Rover Mill Rd

PERMIT CARD ☒

SEPTIC TANK, LEVEL 1250 gallons

CLEANOUTS 34 DW  
manhole ☒

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH NP FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, perimeter 62 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 496 SQ. FT.

REMARKS \_\_\_\_\_

DATE SYSTEM APPROVED

8/11/77

INSPECTOR

Thomas S. Gyle

C 1	4476	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION		THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
1 2 3 (SEQ. NO.) 4 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS ON ALL CARDS)			TAWES STATE OFFICE BLDG. ANNAPOLIS, MD. 21401		FILL IN THIS FORM COMPLETELY
DATE RECEIVED (WRA USE ONLY)			DEPTH OF WELL		PERMIT NO. FROM "PERMIT TO DRILL WELL"
4/18/77			75		28 29 30 31 32 33 34 35 36 37
DATE WELL COMPLETED			(TO NEAREST FOOT)		DRILLERS IDENTIFICATION NO.
8-13			22		
OWNER			LAST NAME		FIRST NAME
A. Whist			A. Whist		
STREET OR RFD			1012 - 1st St		POST OFFICE

WELL LOG			GROUTING RECORD			PUMPING TEST		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)			C 3		
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)  SAND 0 9 GRAY SAND STONE 9 75 Well 75 ft deep			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			1 2 3 (SEQ. NO.) 4		
			TYPE OF GROUTING MATERIAL (CIRCLE BOX)			PUMPING TEST		
FEET FROM TO CHECK IF WATER BEARING 0 9 9 75			CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 14 NO. OF POUNDS 1416 GALLONS OF WATER 85 DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 18 FT. (ENTER 0 IF FROM SURFACE)			HOURS PUMPED (TO NEAREST HOUR) 2 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 410 METHOD USED TO MEASURE PUMPING RATE ROTARY WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 15 (NEAREST FOOT) WHEN PUMPING 65 (NEAREST FOOT)		
			CASING RECORD INSERT APPROPRIATE CODE BELOW STEEL <input checked="" type="checkbox"/> CONCRETE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/> MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 21			TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) AIR <input type="checkbox"/> PISTON <input type="checkbox"/> TURBINE <input type="checkbox"/> CENTRIFUGAL <input type="checkbox"/> ROTARY <input checked="" type="checkbox"/> OTHER (DESCRIBE BELOW) JET <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/>		
			OTHER CASING (IF USED) DIAMETER (INCH) DEPTH (FEET) FROM TO			PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 95 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47		
			SCREEN RECORD INSERT APPROPRIATE CODE BELOW STEEL <input checked="" type="checkbox"/> BRASS OR BRONZE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/> C 2			CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) ABOVE <input type="checkbox"/> BELOW <input checked="" type="checkbox"/> LAND SURFACE 1 (NEAREST FOOT)		
			DEPTH (NEAREST WHOLE FOOT) FROM 140 TO 75 8 9 11 15 17 21 23 24 26 30 32 36 38 39 41 45 47 51 SLOT SIZE 1. 2. 3.			LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL). 49 50 51		
CIRCLE APPROPRIATE BOXES <input checked="" type="checkbox"/> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <input type="checkbox"/> ELECTRIC LOG OBTAINED <input type="checkbox"/> TEST WELL CONVERTED TO PRODUCTION WELL			DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO GRAVEL PACK IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 <input type="checkbox"/>			WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) TELESCOPE CASING 70 <input type="checkbox"/> LOG INDICATOR 72 <input type="checkbox"/> OTHER DATA AVAILABLE 74 75 76		
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. DRILLERS NAME RAY KEYSER SIGNATURE A. Ray Keyser								

RECEIVED

APR 22 4 39 PM '77

HOWARD COUNTY  
HEALTH DEPT.  
ELLICOTT CITY, MD.



C1 4679 SEQUENCE NO. (DENV USE ONLY)  
1 2 3 6  
(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

9-13-2013

ST/CO USE ONLY  
DATE Received

DATE WELL COMPLETED

Depth of Well

OK MR  
3/6/92

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
40-88-3018

OWNER DAVID E. DAVID last name first name  
STREET OR RFD 14148 ROVER MILL ROAD TOWN WEST FRIENDSHIP, MD.  
SUBDIVISION SECTION LOT

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

SAND Stone 0 36

Gray Mica Rock 36 165 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

yes  
Y N  
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 15 NO. OF POUNDS 1410

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 39 ft.  
48 TOP 52 54 BOTTOM 58  
(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)

ST 6 40  
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)  
inch from to

EACH  
CASING

screen type  
or open hole

insert  
appropriate  
code  
below

SCREEN RECORD

ST BR HO  
STEEL BRASS OPEN  
PL BRONZE HOLE  
PLASTIC OTHER

C2

DEPTH (nearest ft.)  
1 2  
1 10 39 165  
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)

from to

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

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

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

METHOD USED TO MEASURE PUMPING RATE air

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42

WHEN PUMPING 130

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 (CIRCLE) (YES or NO) 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:

CAPACITY:  
GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE  
- below } (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 26.04.04 "WELL CONSTRUCTION"  
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE  
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE-  
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF  
MY KNOWLEDGE.

DRILLERS IDENT. NO. 238

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

92 JAN 10 PM 12:16

RECORDED

## APPLICATION

A 20436

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

## STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICESP. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356DISTRICT 3rd & 4thDATE 7/30/74

*need more bottom - must have 10' deep of it must have 15' hole below inlet*

Dry Well - 360 sq ft. 2' sidewalk area below top 4' clay 3BR  
480 sq ft sidewalk area below inlet top 4' clay 3BR  
Dry Well Inlet to be no deeper than 4' F  
and Dry Well bottom to be no deeper than 10' F  
Place the dry well 230' F from the back lot line which is 360.00' F long

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 Ruth ThompsonADDRESS the lot from Rover Mill RdAny questions call Mr. Bernard  
Rome, 465-7700PROPERTY LOCATION: 1012 10th St  
LAUREL, MD 20810PHONE 725-4084

SUBDIVISION \_\_\_\_\_

LOT NO. 7ROAD AND DESCRIPTION Rover Mill & Old Rover Mill RoadSIZE OF LOT 5.005 acresTYPE BLDG. (3) or (4) bedrooms

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/ James Brittingham

BLDG. PERMIT SIGNED

AND RETURNED 4/19/77Serial No. 31183APPROVED BY Raymond HodgesFOR Dry Well

(KIND OF SYSTEM)

DATE 8/13/74

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

(KIND OF SYSTEM)

DATE \_\_\_\_\_

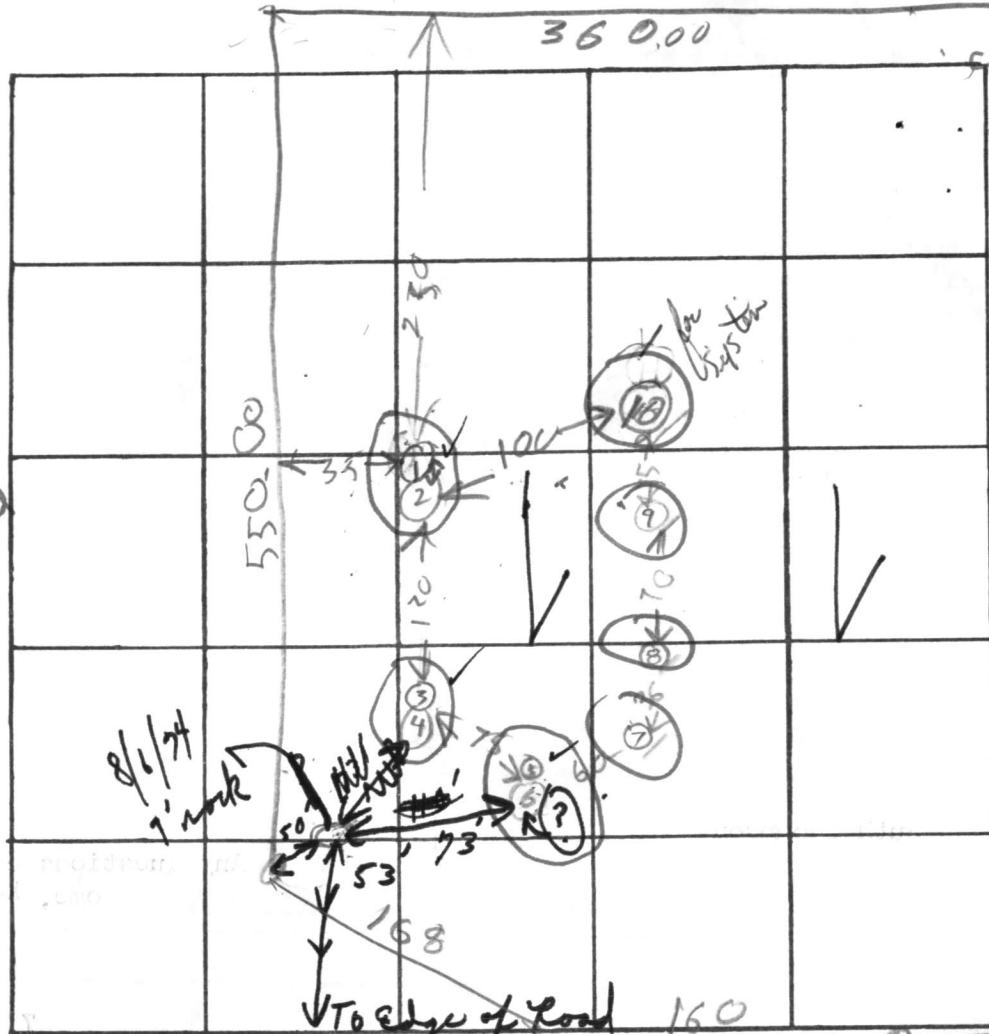
HOLD PENDING FURTHER TESTS \_\_\_\_\_

DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

THIS IS NOT A PERMIT

① 11' dep  
② Total



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

BOVER MILL RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/27/74	①	9 1/2	247	249	249	251	2
	②	5	255	256	256	257	1
	③	11	320	321	321	324	3
	④	3 1/2	323	327	327	335	8
	⑤	12 1/2	336	338	338	340	2
	⑥	6	336	338	338	342	4
	⑦	⑩	TOP 3 FT CLAY ROCK BOT	DRY	DRY	DRY	
	⑧	⑧	TOP 2 FT CLAY MID 6 FT SAND ROCK BOT	DRY	DRY	DRY	
	⑨	⑩	TOP 3 FT CLAY MID 7 FT SAND ROCK BOT	DRY	DRY	DRY	
7/31/74	⑩	10	TOP 4 FT CLAY MID 6 FT SAND ROCK BOT	DRY	DRY	DRY	

HIGH USE FOR 12W

NEXT LOWEST

LOWEST

SAME AS ⑤⑥

SAME AS ⑤⑥

MEDIUM

SAME AS ①②

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

Use #10 for system higher per field observation

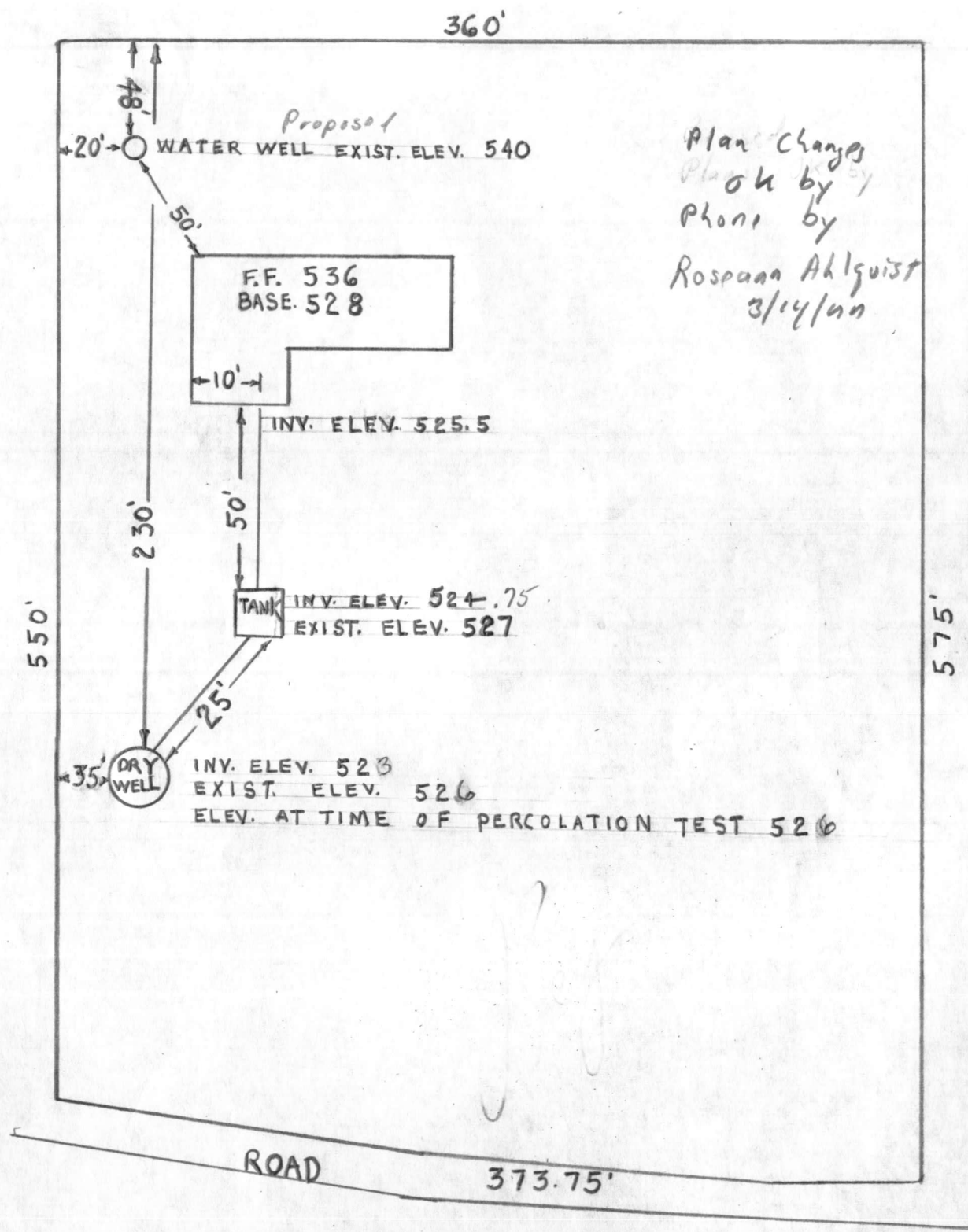
sand/rock & clay

R. Hodger

Jim Brittingham

CB





Lot 7

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL + CORRECT FOR THIS PROPERTY.

David E. Ahlquist

725 4084

REVISED PLANS OK  
3/16/77

R. J. HODGES