11/2/78

File

PERMIT

P 29044

A 27074

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 3rd

DATE 10/17/78

Donald Parlette IS PERMITTED TO INSTALL X ALTER

ADDRESS 6575 Route 32, Clarksville, Md. 21029 PHONE 286-2140

SUBDIVISION ROAD Route 32 & Route 99 LOT 7

PROPERTY OWNER Mr. and Mrs. Edward Sadler

ADDRESS

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD ____ DEPTH ____ FEET, BOTTOM AREA ____ SQ. FT.

DEEP TRENCH ____ DEPTH ____ FEET, BOTTOM AREA ____ SQ. FT.

SEEPAGE PITS X ABSORBENT SIDE-WALL AREA 125 SQ. FT. sidewall area per bedroom below inlet.

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT ____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA ____ FT. FROM ____ LOT LINE AND ____ FT. FROM ____ LOT LINE AS SEEN WHEN FACING LOT FROM

Locate dry well 84 ft. over from shed towards right property line and 120 ft. towards rear of lot when facing lot from road and on line with back of shed.

PLANS APPROVED BY Charles B. Streaker DATE 11/7/77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

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

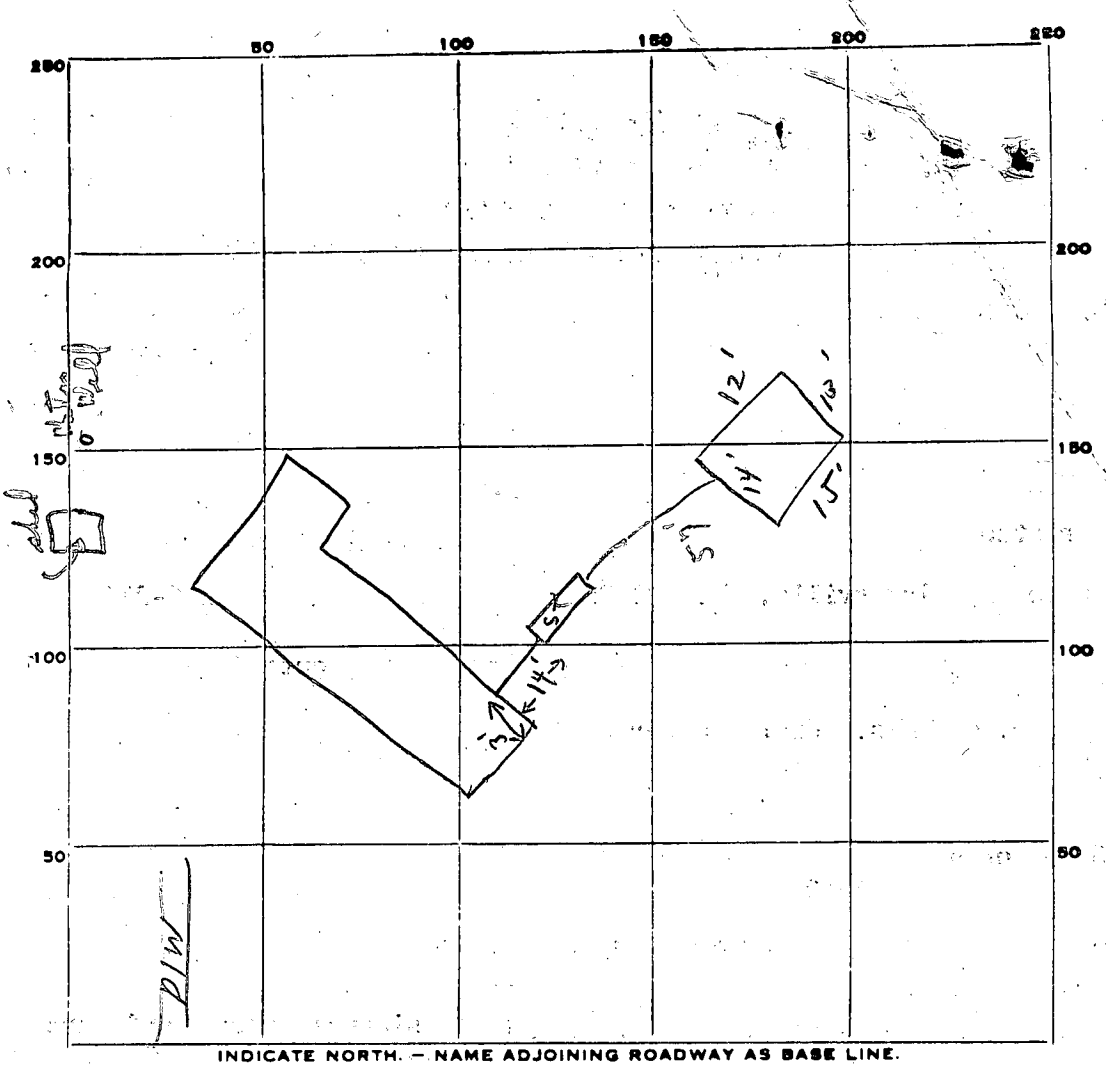
PERMIT VOID AFTER THREE YEARS.

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.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.**

A 27074

HD - 23



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Yes, at dry well

SEPTIC TANK, LEVEL ok

CLEANOUTS S.T. ok | D.W ok

DISTRIBUTION BOX, LEVEL —

TILE FIELD, DEPTH — FT. TRENCH WIDTH — FT.

GRAVEL DEPTH — IN. TOTAL LENGTH — FT.

NUMBER OF TRENCHES — TOTAL BOTTOM AREA —

SEEPAGE PITS, INSIDE DIAMETER outside measure 54 FT. DEPTH BELOW INLET 9 FT.

ABSORBENT AREA 486 SQ. FT.

REMARKS 11/2/78 Notes dry well in area called for. C.B.

DATE SYSTEM APPROVED 11/2/78 as per above INSPECTOR C. B. Streeter

APPLICATION

A 27074

P ____

Ketterman's digging

11/3/77 9:30 am 1st

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

Septic Tank { 1-3 Bedroom 1000 gallons; 4 Bedroom 1250 gallons

DISTRICT 3rd

DATE 10/17/77

(1) Dry well to have 125 sq ft. effective absorbent sidewall area per bedroom below inlet. Inlet to be no deeper than 3' & maximum depth 12' below original grade. Location 84' from shed towards right property line + 120' towards rear of lot when facing lot from road and (Perc hole 1+2) on line with back of shed. or (4) Dry well/Dry well + trench. If trench used - need: (1) 5' earth buffer between dry well + trench (2) 2 inspections of trench - before + after gravel installed

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. & Mrs. Edward Sadler~~

ADDRESS ____ PHONE ____

PROPERTY LOCATION:

SUBDIVISION ~~(former Slack Estates)~~ LOT NO. ~~7~~

ROAD AND DESCRIPTION ~~corner of Rt. 99 and old Rt. 32~~

SIZE OF LOT 5.000 acres TYPE BLDG. ~~3 or 4~~ 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 *Oler Lee Ketterman*

APPROVED BY *C. B. [signature]* FOR *(4) Dry well; Dry well + trench* (KIND OF SYSTEM) DATE *11/7/77*

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

HOLD PENDING FURTHER TESTS ____ DATE ____

REASONS FOR REJECTION OR HOLDING ____

BLDG. PERMIT SIGNED AND RETURNED *3/31/78*
serial # 35226

THIS IS NOT A PERMIT

INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE

Soil Profile

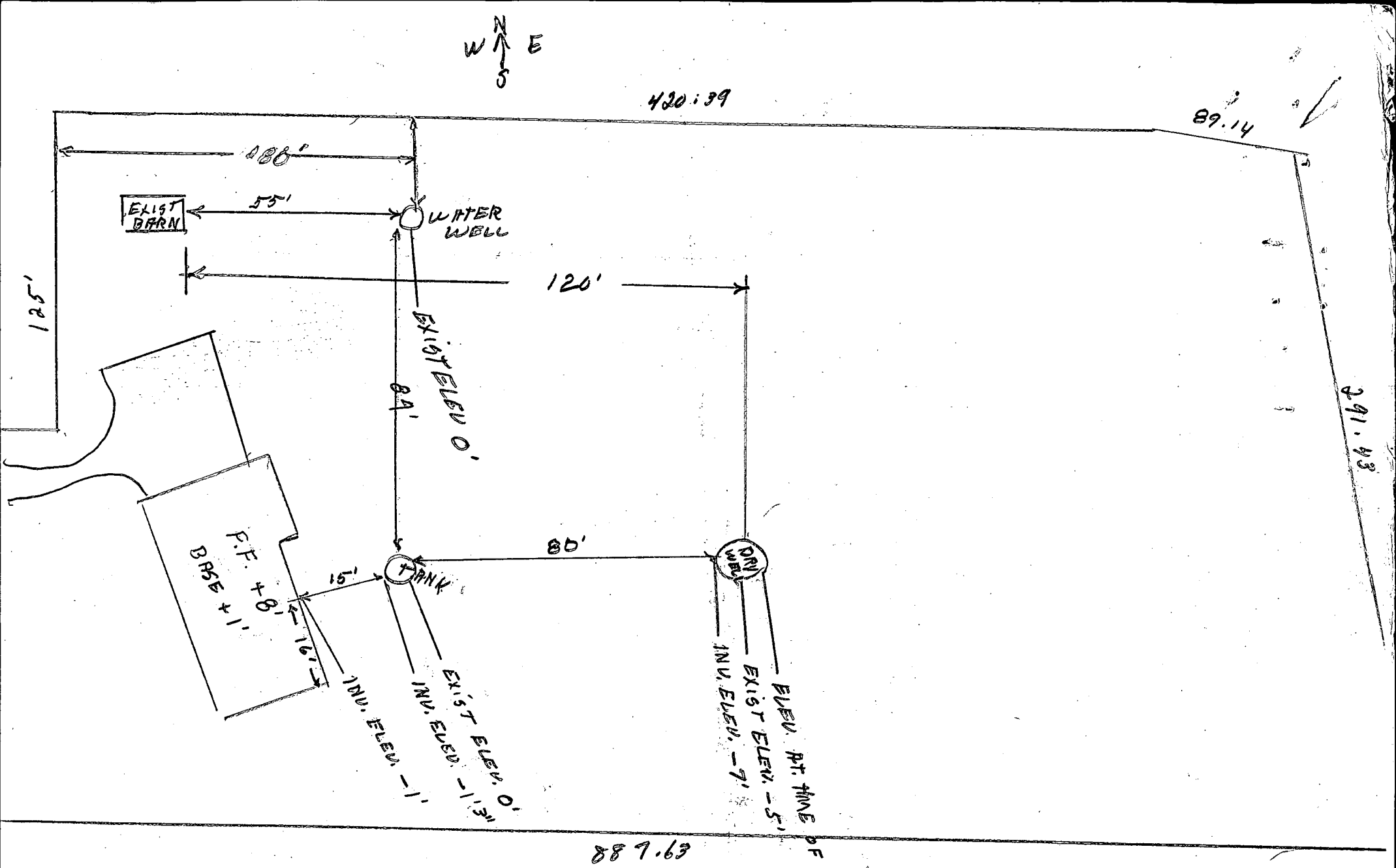
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/3/77	1		:	:	:	:	
	2		:	:	:	:	
	3	(See attached yellow sheet)	:	:	:	:	
	4		:	:	:	:	
	5		:	:	:	:	
	6		:	:	:	:	
	7		Vacant				

Loam Below clay

REMARKS See attached sheet

TYPE OF SOIL Open field

TESTED BY C. B ALSO PRESENT: Kellerman + Sons

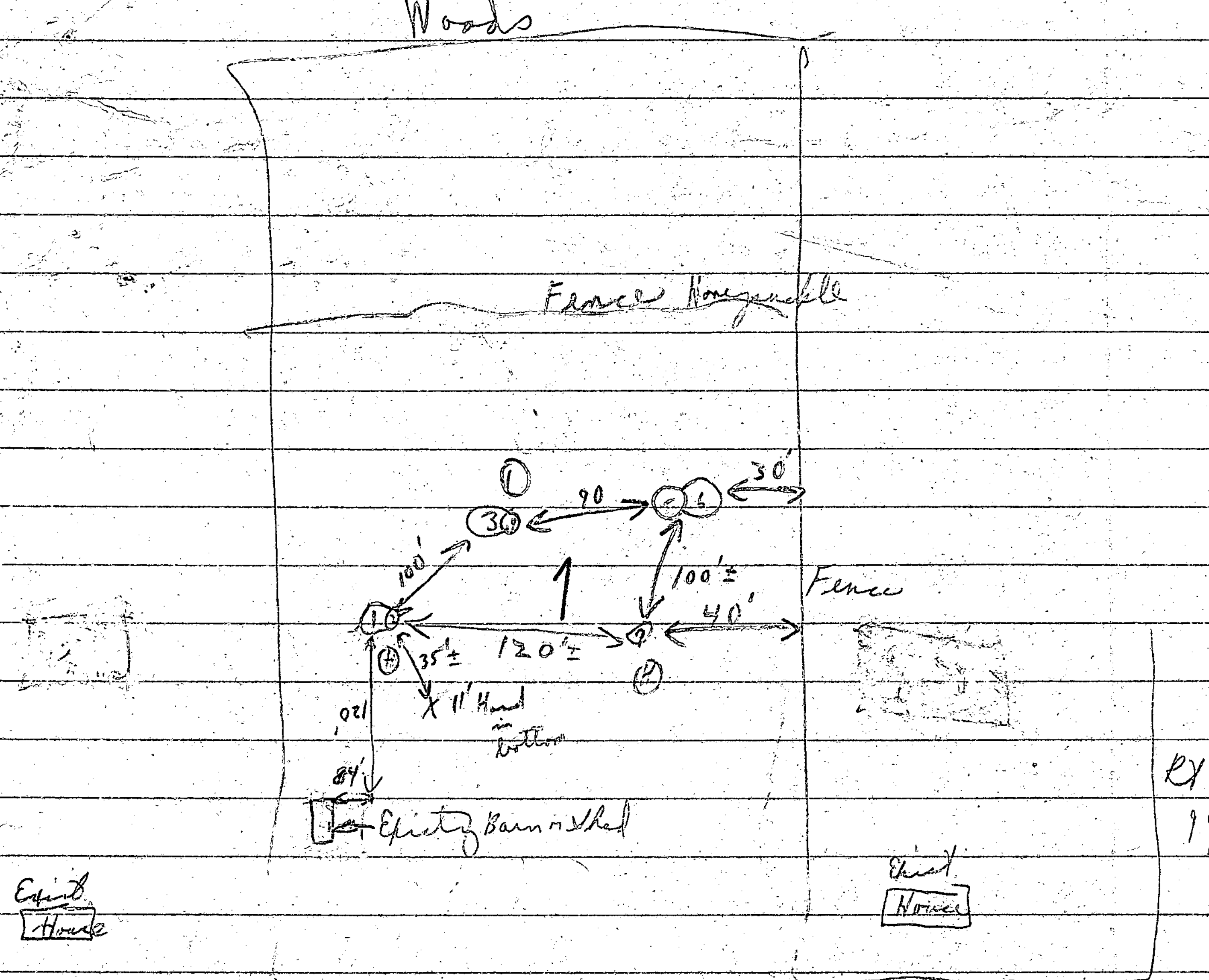


I CERTIFY THE ABOVE MEASUREMENTS & ELEV. ARE CORRECT FOR THIS PROPERTY

EWP. SADLER RT 32 #99

H. Shipley Buelmear

(See next page for spells.) 11/3/77



← Old RT 32 →		start 1st	start 2nd	Finish	
11/3/77 (H) 1	2½'	10:12	10:14	10:16	2 m
(H) 2	13'	10:12	10:16	10:27	11 m
Room (L) 3	3'	10:02	10:04	10:08	4 m
& Mica 4	13'	10:02	10:04	10:10	6 m
Below (L) 5	3'	10:35	10:38	10:48	10 m
Clay 6	13'	10:36	10:38	10:45	7 m
(H) 7	12½	Visual similar to others			

4½ - 12½

New RT 32
125 off effect
Jann
6 | 40

Misty

also 1 other person
Oland Ketterman
+ son present

Hold for new pl

DNR-131 (7-77) EMERGENCY NO. (If any) –

B 1 5859 SEQUENCE NO. (WRA USE ONLY) 27074

1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 4-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER HO-73-2237

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) 2/24/78 9:30a.m.

OWNER Shirley Beachman Contractor 796-1074
COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD 7710 Fidler Rd. Owner - Edward Sadler
COL 36 COL. 55

POST-OFFICE Hanover, Md.
COL 57 COL. 76

8-13

B 1 CONTINUED (SEQ. NO.)

DRILLER INFORMATION

DATE 1/11/78 LICENSE NUMBER 42 (77–80)

J. C. Culley
FIRST NAME DRILLER LAST NAME

SIGNATURE

B 2 (SEQ. NO.)

WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 (8–12)

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600 (14–20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

22
- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- F FARMING, AGRICULTURE, IRRIGATION
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
- M MUNICIPAL WATER SUPPLY
- P PRIVATE WATER COMPANY
- T TEST

} MUST HAVE STATE HEALTH DEPT. APPROVAL

APPROXIMATE DEPTH OF WELL 130 FEET (24–28)

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE)

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

39
- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) (41–52)

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

APPROPRIATION PERMIT NUMBER G A P (54–63) ENGINEER REVIEW DISTRICT NO. (65)

FORCE WRITE INITIALS IN BOX (67 68)

CONDITIONS A E N S G W Q C L U (70–79)

B 4 CONTINUED (SEQ. NO.)

HEALTH DEPARTMENT APPROVAL

41 S STATE HEALTH (CIRCLE BOX)

Howard W27451
COUNTY NAME COUNTY NO.

DATE MO. 1 DAY 7 YR. 8 (43–48)

APPROVED BY: Fred Frommeit, Sanitarian

B 5 (SEQ. NO.) SPECIAL CONDITIONS 8-69 (WRA USE ONLY)

Need better directions

HEALTH

B 3 (SEQ. NO.)

LOCATION OF WELL

COUNTY Howard (8–21) (DO NOT ABBREVIATE COUNTY NAME)

SUBDIVISION (23–42)

SECTION (44–46) LOT (48–50)

NEAREST TOWN Lyndenville (52–71)

MILES FROM TOWN (ENTER 0 IF IN TOWN) 3 (73–76) M F

B 4 (SEQ. NO.)

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

N NORTH E EAST NE NORTHEAST SE SOUTHEAST

S SOUTH W WEST NW NORTHWEST SW SOUTHWEST

8 8 8 9 8 9

NEAR WHAT ROAD at 32 (11)

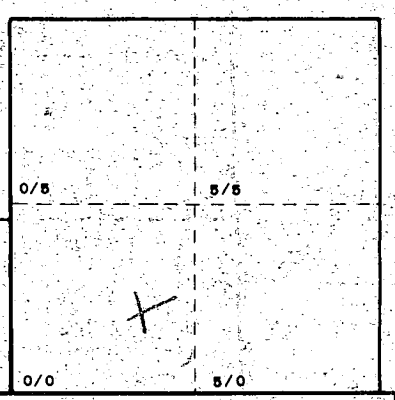
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N (32) SOUTH S (32) EAST E (32) WEST W (32) (30)

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 100 (34–37) F T M I (38 39)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS. WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

N ↑ 60 Ft. Casing (9 Ft. Casing above Ground)
38 Ft open hole
couldn't get any further than 39 Ft
– 12 Bags Cement to Grout
OK
2/24 OMB. at 32
also present D. O'Neal.
checked with D. Wine by Phone. Said Okay

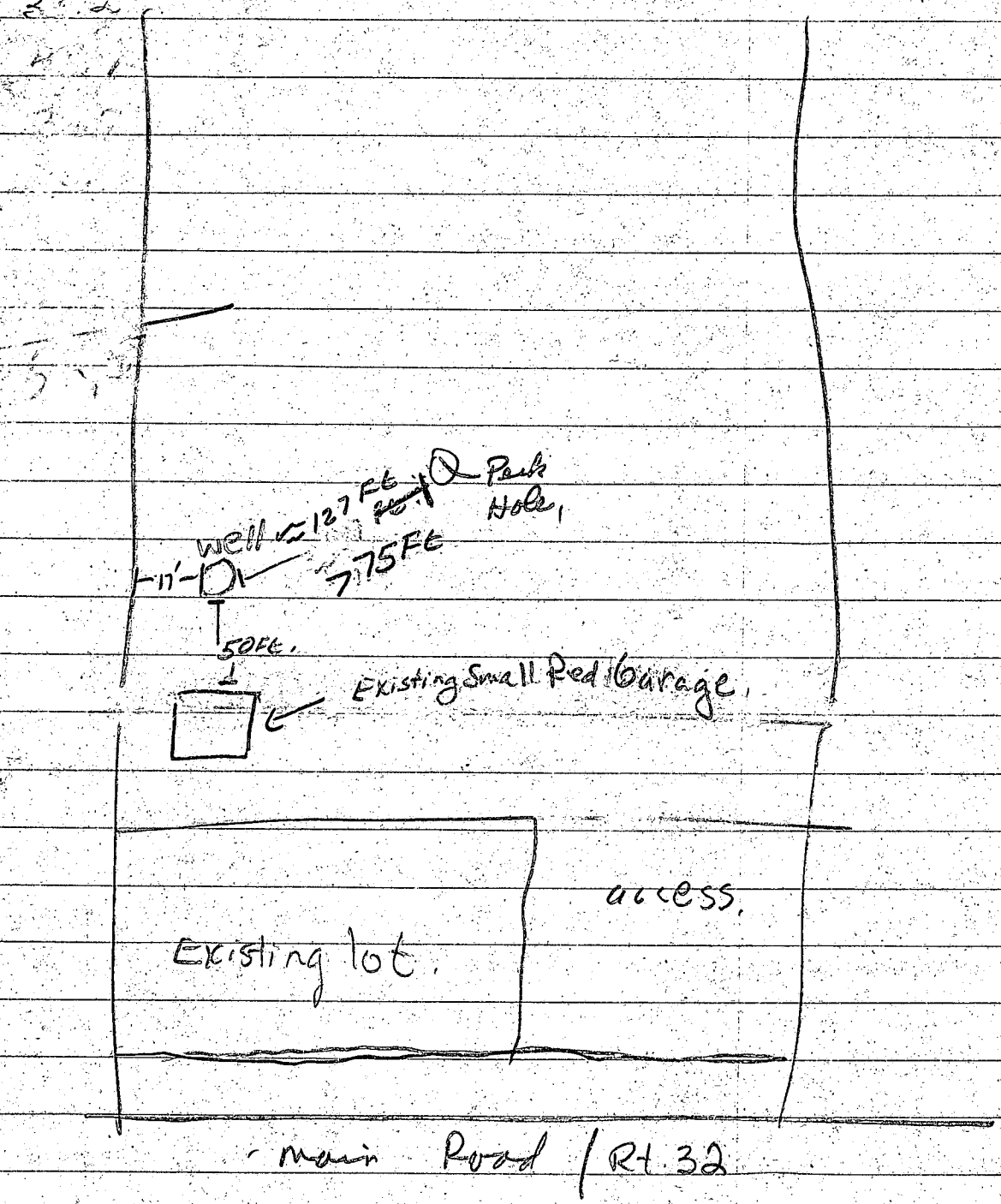
BOX NUMBER E 8 N 4



NORTH COORDINATE 4 0 0 5 (50–55)

EAST COORDINATE 1 1 0 5 (57–63)

ELEVATION AT WELL HEAD (FEET) (65–68)


Park
Hole,
well
~127 FT
~75FT
11'
50FT.
Existing Small Red Garage.
access.
Existing lot.
Main Road / Rt 32

DNR-214 (7-77)

C | 1 | 5460 — SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 8-13 15 20

DATE WELL COMPLETED: 2/24/78

DEPTH OF WELL: 120 (TO NEAREST FOOT) 22 26

PERMIT NO. FROM "PERMIT TO DRILL WELL": #10-73-2537 (28 29 30 31 32 33 34 35 36 37)

DRILLERS IDENTIFICATION NO. 42

OWNER: SIXEY BERMEAD CONT
LAST NAME FIRST NAME

STREET OR RFD: 7710 Ridge Rd POST OFFICE: HANOVER, MD.

WELL DESCRIPTION

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	FEET TO	CHECK IF WATER BEARING
TOP SOIL	0	2	
SHALE	2	8	
SAND STONE	8	55	
BROWN SLATE	55	65	✓
MICA	65	120	✓

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX): YES [Y] (44) NO [N] (44)

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [C M] (45 46) BENTONITE CLAY [B C] (45 46)

NO. OF BAGS 12 NO. OF POUNDS 1200

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. (48 52) TO 38 FT. (54 58)

(ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [C O] CONCRETE [P L] PLASTIC [O T] OTHER

MAIN CASING TYPE	NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)	TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
S T (60 61)	6 (63 64)	60 (66 70)

OTHER CASING (IF USED)

EACH CASING

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE — INSERT APPROPRIATE CODE BELOW

[S T] STEEL [B R] BRASS OR BRONZE [H O] OPEN HOLE [P L] PLASTIC [O T] OTHER

C | 2 (1 2 3 SEQ. NO. 6)

DEPTH (NEAREST WHOLE FOOT)

EACH SCREEN

		FROM	TO
1	H O (8 9)	55 (11 15)	120 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1. ____ 2. ____ 3. ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)

GRAVEL PACK FROM ____ TO ____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 [F]

CIRCLE APPROPRIATE BOXES

[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 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 (PLEASE PRINT) L. F. EASTERDAY

SIGNATURE L. F. Easterday

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

T (70) TELESCOPE CASING

(E.R.O.S.) (72) LOG INDICATOR

W Q (74 75 76) OTHER DATA AVAILABLE.

C | 3 (1 2 3 SEQ. NO. 6)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2 (8 9)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 12 (11 15)

METHOD USED TO MEASURE PUMPING RATE: BUCKET

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 35 (17 20) (NEAREST FOOT)

WHEN PUMPING 120 (22 25) (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

[A] AIR (27) [P] PISTON (27) [T] TURBINE (27)

[C] CENTRIFUGAL (27) [R] ROTARY (27) [O] OTHER (DESCRIBE BELOW) (27)

[J] JET (27) [S] SUBMERSIBLE (27)

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX — SEE ABOVE: A, C, J, P, R, S, T, O) (29)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) (31 35)

PUMP HORSE POWER (37 41)

PUMP COLUMN LENGTH (NEAREST FOOT) (43 47)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

[+] ABOVE / [−] BELOW LAND SURFACE 2 (49 50 51) (NEAREST FOOT)

LOCATION OF WELL ON LOT

N — SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

well X 100'

100'

HEALTH