

9/20/00  
10/5/00  
11/9/00  
11:00  
Septic Pump  
Final PH

03-308030

**PERMIT**  
**SEWAGE DISPOSAL SYSTEM**  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
410-313-2640

P 514255

A 28667

ISSUE DATE 9/15/2000

APPROVAL DATE 11/9/00

INDEXED

Hatfields Equipment

IS PERMITTED TO INSTALL x ALTER

ADDRESS 13785 Burntwoods Road, Glenelg, MD 21737 PHONE 301-854-6172

SUBDIVISION Sandy Hill Estates LOT NUMBER 5 ADDRESS 2434 Woodstream Court

PROPERTY OWNER Inga Welzenbach PROPERTY OWNER'S ADDRESS 8381 Cherry Lane

SEPTIC TANK CAPACITY 1000 GALLONS Laurel, MD

PUMP CHAMBER CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3 \*\*\* TOP SEAMED TANK AND PUMP PIT REQUIRED \*\*\*

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES: Trenches to be 3 feet wide. Inlet 4.5 feet below original grade. Bottom maximum depth 6.5 feet below original grade. 2 feet of stone below distribution box.

LOCATION: Beginning from the intersection of the 120.00'/321.75' lot lines, place the distribution box 255 feet down the 321.75' lot line and 10 feet off this same lot line. Run trenches along contour towards the rear lot line. 7/24/00 S.K. (BA)

PLANS APPROVED Mark Rifkin DATE 6/13/2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

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

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

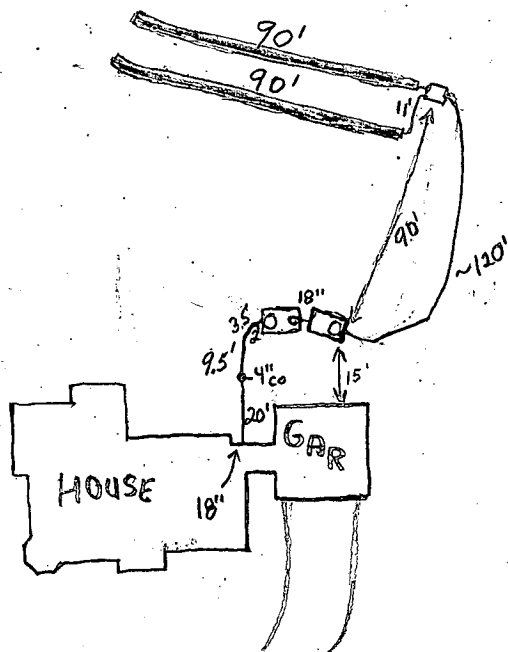
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE  
SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A28667

NOT TO SCALE

Public Water



### TRENCH DATA

TRENCH WIDTH 3.0'  
TRENCH INLET DEPTH 4.5'  
TRENCH BOTTOM DEPTH 6.5'  
DEPTH OF STONE 2.0'  
NUMBER OF TRENCHES 2  
TOTAL TRENCH LENGTH 180'  
ABSORBENT AREA 540 sq. ft.  
DISTRIBUTION BOX LEVEL OK  
BAFFLE IN DISTRIBUTION BOX Yes

### SEPTIC TANK DATA

SEPTIC TANK 1000 TS GALLONS  
MANHOLE RISER Yes  
6 INCH INSPECTION PORT Yes

### PUMP CHAMBER DATA

PUMP CHAMBER  
GALLONS 1000 TS  
MANHOLE RISER Yes  
ALARM OPERATIONAL  
PUMP PERFORMANCE TEST ✓

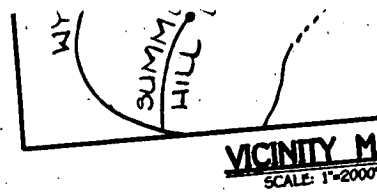
Woodstream Court

PRE-CONSTRUCTION INSPECTION: 9/20/00 layout check confirmed w/  
installer. Corners of SDA staked. DKC

INSPECTION COMMENTS: 10/4/00 House connection made. Tanks set. (BB) 9/5/00 Everything  
satisfactory. O.K. to cover except distribution box. Final approval pending  
pump and alarm operation. (BB) 11/9/00- SYSTEM OPERATIONAL PUMP & ALARM  
OK (SRK)

INSPECTOR: Steven R. Kling

DATE SYSTEM APPROVED 11/9/00

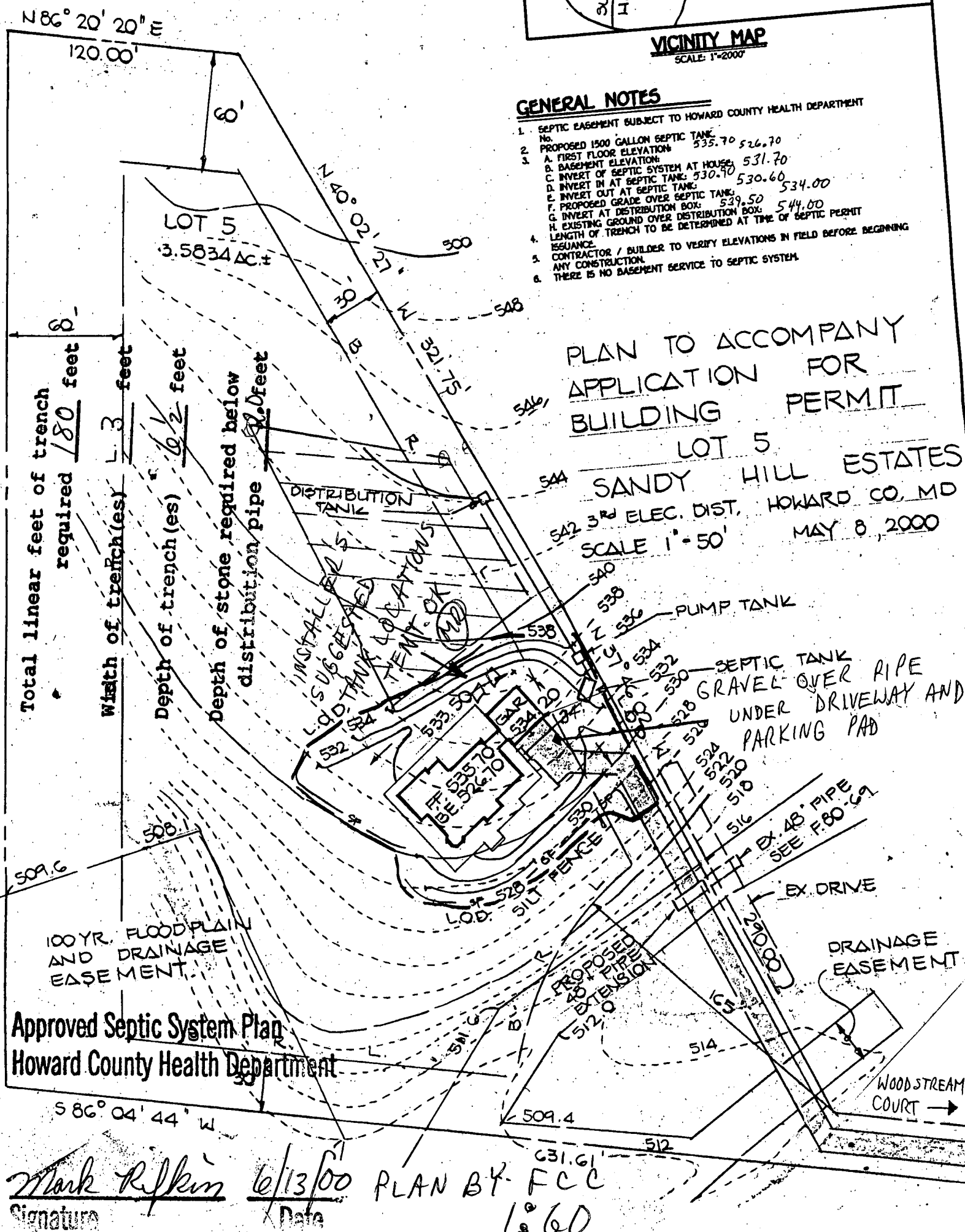


# **GENERAL NOTES**

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT
2. No. PROPOSED 1500 GALLON SEPTIC TANK 535.70 526.70
3. A. FIRST FLOOR ELEVATION 535.70 526.70  
B. BASEMENT ELEVATION 531.70  
C. INVERT OF SEPTIC SYSTEM AT HOUSE 530.70 530.60  
D. INVERT IN AT SEPTIC TANK 530.60  
E. INVERT OUT AT SEPTIC TANK 534.00  
F. PROPOSED GRADE OVER SEPTIC TANK 539.50  
G. INVERT AT DISTRIBUTION BOX 544.00  
H. EXISTING GROUND OVER DISTRIBUTION BOX 544.00  
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION
6. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM

PLAN TO ACCOMPANY  
APPLICATION FOR  
BUILDING PERMIT

LOT 5  
SANDY HILL ESTATES  
542 3RD ELEC. DIST. HOWARD CO, MD  
SCALE 1" = 50'  
MAY 8, 2000



Approved Septic System Plan  
Howard County Health Department

Mark R. R. 6/13/00 PLAN BY FCC  
Signature Date 1:60

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800	<h2 style="margin:0;">HOWARD COUNTY</h2> <h2 style="margin:0;">PERMIT APPLICATION</h2>	<h2 style="margin:0;">PERMIT NUMBER</h2> <div style="font-size: 24px; font-family: cursive;">100024359</div>
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Building Address <u>2434 Woodstream Court</u> <u>Ellicott City, MD 21042-1060</u> Suite/Apt. #: <u>N/A</u> SDP/WP/Petition #: _____ Census Tract: <u>6031</u> Subdivision <u>Sandy Hill Estates</u> Section <u>A/A</u> Area <u>A/A</u> Lot <u>5</u> Tax Map <u>16</u> Parcel <u>392</u> Grid <u>7</u> Zoning <u>RR-1</u> Map Coordinates <u>1146</u> Lot size <u>3.5834</u>	Property Owner's Name <u>Inga S. Welzenbach</u> Address <u>8381 Cherry Lane</u> City <u>Laurel</u> State <u>MD</u> Zip Code <u>20042</u> Home Phone <u>410-279-0739</u> Work Phone <u>301-953-7440</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone <u>Same</u> Fax <u>301-953-7444</u>
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Existing Use <u>Undeveloped</u> Proposed Use <u>Residential Dwelling</u> Estimated Construction Cost \$ <u>100,000.00</u> Description of Work <u>Construction of a single family dwelling, with garage</u>	Contractor Company <u>Owner</u> Contact Person <u>John Wiseman</u> Address <u>8381 Cherry Lane</u> City <u>Laurel</u> State <u>MD</u> Zip Code <u>20707</u> License No. _____ Phone <u>301-953-7440</u> Fax <u>301-953-7444</u>
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Occupant or Tenant <u>Inga S. Welzenbach</u> Contact Name <u>John Wiseman</u> Address <u>8381 Cherry Lane, Laurel, MD 20707</u> City <u>Laurel</u> State <u>MD</u> Zip Code <u>20707</u> Phone <u>410-279-0739</u> Fax <u>301-953-7444</u>	Engineer or Architect Company <u>David E. Wiggins</u> Contact Person <u>Same</u> Address <u>301 Spring Creek Drive</u> City <u>Liberty Hill</u> State <u>TX</u> Zip Code <u>778642</u> Phone <u>410-279-0739</u> Fax <u>301-953-7440</u>
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BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<b>Building Characteristics</b> Height: <u>29'±</u> No. of stories: <u>two</u> Gross area, sq. ft. per floor: flr#1 - <u>1,696</u> flr#2 - <u>479</u> Use group: _____ Construction type: <input checked="" type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame _____ State Certified Modular	<b>Utilities</b> Water Supply: <input checked="" type="checkbox"/> Public _____ Private Sewage Disposal: _____ Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads	<b>Building Characteristics</b> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: <u>38'</u> <u>50'</u> 2nd floor: <u>24'</u> <u>49'</u> Basement: <u>38'</u> <u>50'</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>3</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ _____ State Certified Modular Manufactured Home	<b>Utilities</b> Water Supply: <input checked="" type="checkbox"/> Public _____ Private Sewage Disposal: _____ Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREBY; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

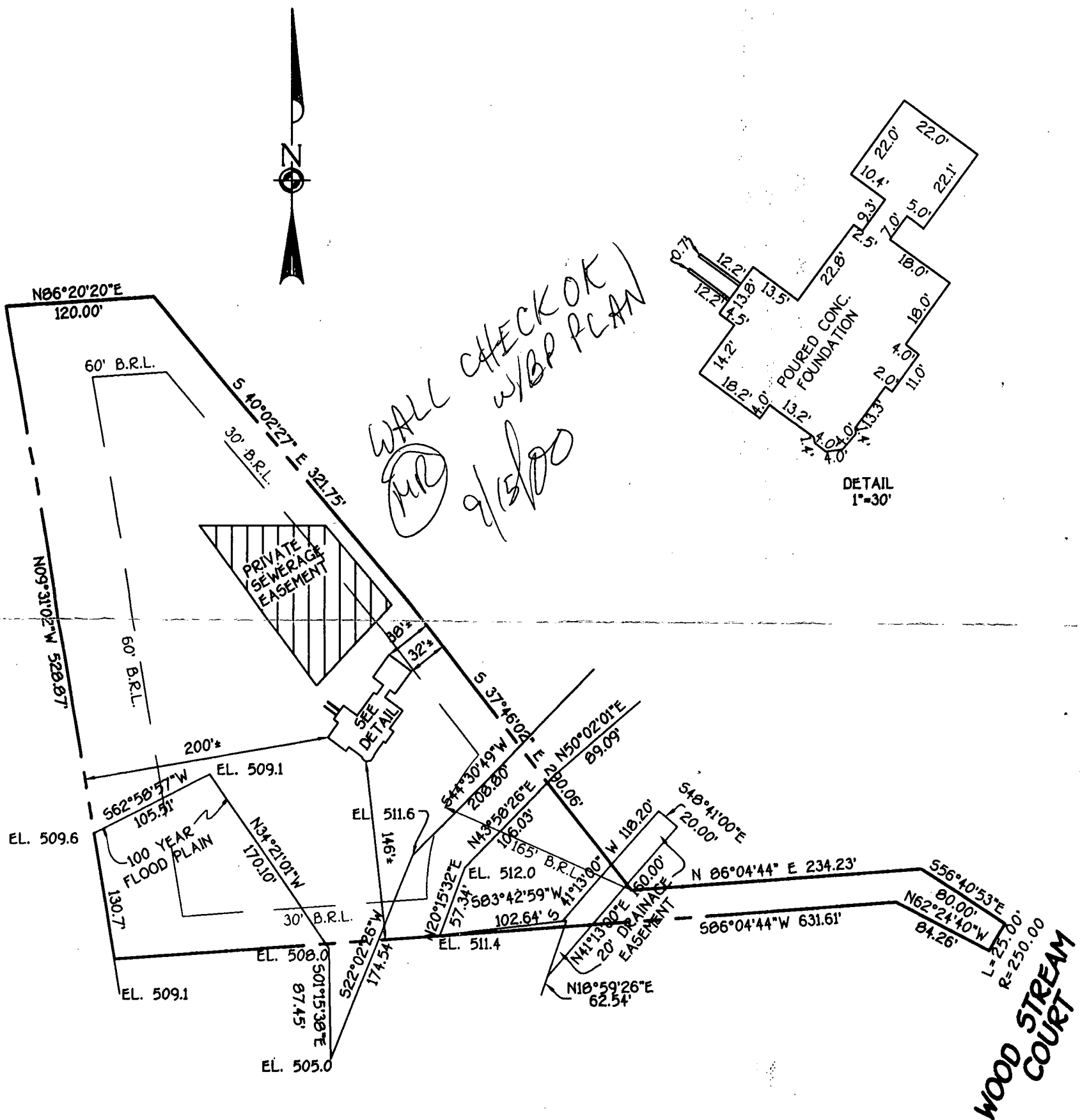
<u>Inga S. Welzenbach</u> Applicant's Signature <span style="float: right;">Owner/Builder</span>	<u>Inga S. Welzenbach</u> Print Name <span style="float: right;">Date <u>5/22/00</u></span>
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Title/Company \_\_\_\_\_  
 Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

<b>AGENCY</b> Land Development, DPZ State Highways Building Official Dev. Engineering, DPZ Health Fire Protection Sediment Control approval required prior to issuance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>	<b>DATE</b> <u>6/13/00</u> <b>SIGNATURE APPROVAL</b> <u>Mark R. Rappin</u> <b>DPZ SETBACK INFORMATION</b> Front: <u>11' 0" Min</u> Rear: <u>10' 0" Min</u> Side: <u>3' 0" Min</u> Side St.: <u>N/A</u> All minimum setbacks met? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Lot Coverage for New Town Zone SDP/Red-line approval date _____	<b>PROPERTY ID#</b> <u>46355</u> Filing fee \$ <u>25</u> Permit fee \$ _____ Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ _____ Balance due \$ _____ Check # <u>1067</u> Validation # <u>31734</u> Accepted by <u>[Signature]</u>
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GENERAL NOTES:

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0016 B, EFFECTIVE DATE: DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1' PLUS OR MINUS (±).



FIRST FLOOR ELEVATION 536.3'  
EL. 509.1 = 100 YEAR FLOOD PLAIN ELEVATION

LOT 5  
SANDY HILL ESTATES  
3RD ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
PLAT REF. 4646

FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
(410) 461 - 2855



PROFESSIONAL LAND SURVEYOR  
REG. #10763  
DATE 7/29/00

HOUSE LOCATION  
DRAWING

FOUNDATION LOCATION: 7/29/00  
FINAL LOCATION:  
BOUNDARY SURVEY:

SCALE: 1"=100'  
DATE: 7/31/00  
DRAWN BY: T.P.F.  
CHECKED BY: C.C.  
PROJECT No.: 71183

# APPLICATION

5

## 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

Septic Tank 3 bedroom - 1000 gal  
- 1250 gal

A 28667

P

ALSO INCL.  
A29550  
3rd LOT 11, NO TESTS

DISTRICT

DATE 8/9/78

Must be updated  
NEED TO BE  
UPDATED

Tile field - 125 sq ft bottom area  
per bedroom installed at depth of  
4 ft below existing grade with 1/2" of stone under pipe  
Place tile field in area between 225 x 250 ft from  
rear lot line between 180 ft & 200 ft from right side no sewer under  
young from the front.  
# See plat  
Trenches to follow contour of ground:

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 Sandy Hill Properties

ADDRESS

PHONE Mrs. Trager - 992-7100

PROPERTY LOCATION:

SUBDIVISION Sandy Hill Estates

LOT NO.

11 - New lot 5

ROAD AND DESCRIPTION Sand Hill Road

SIZE OF LOT 3 acresTYPE 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/ Rose Trager

APPROVED BY

S. Keller

FOR

Dequell / TRACER

DATE

27 Oct 78

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

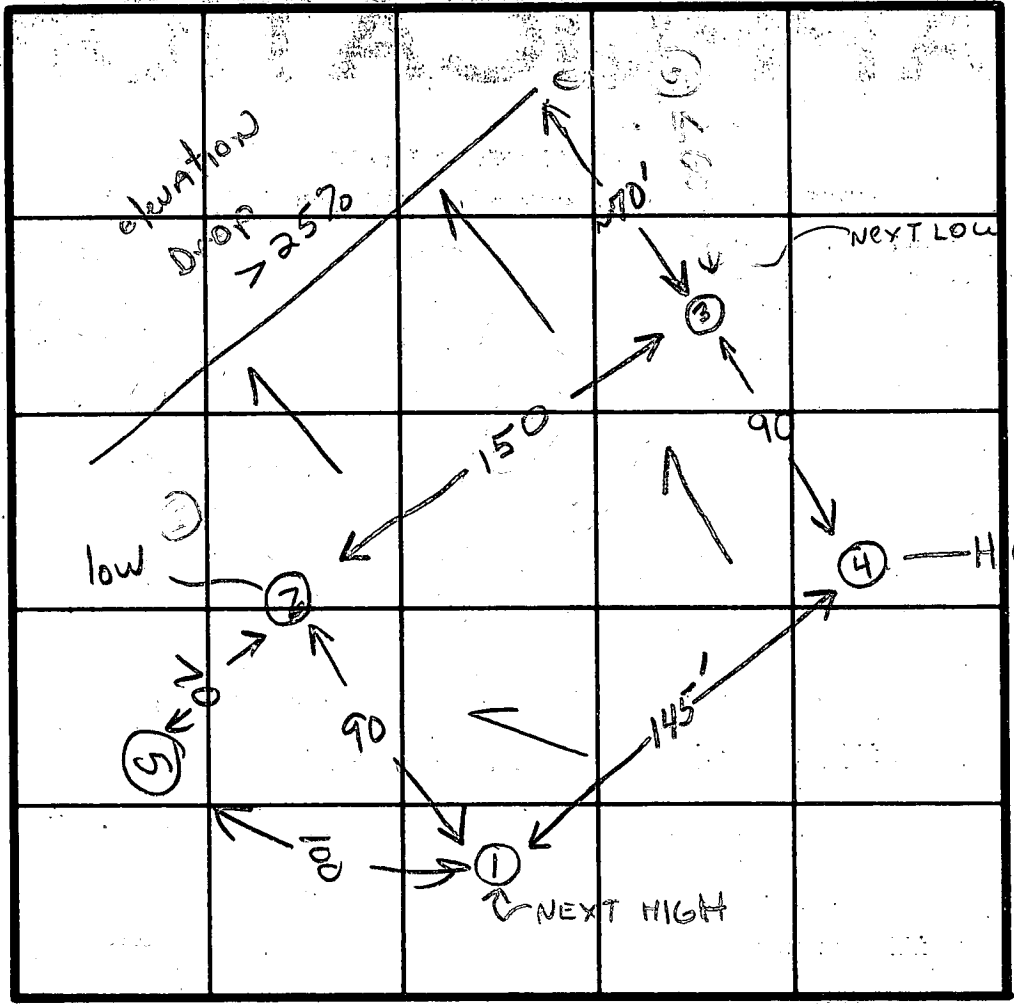
REASONS FOR REJECTION OR HOLDING

# THIS IS NOT A PERMIT

11 (5)

SOIL PROFILE

0'	CLAYEY LOAM
2-3	SANDY LOAM with weathered shale (small amt)
11-12	HARD PACKED



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
SANDHILL RD

(WEATHERED)  
HARD SHALY  
BOTTOM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/10/78	1S	4'	1157	1159	1159	1202	3
	1D	13'	1156	1203	1203	1207	4
	2S	3 1/2	141	142	142	143	1
	2D-LOW	12	140	144	144	148	4
	3S	3	210	212	212	216	4
	3D T	10	204	207	207	216	9
	4S	3	246	247	247	248	1
	4D-HIGH	12	235	237	237	240	3
7/86	5	3/8	VISUAL	LOAM	3-12'		
		12	HARD	BOTTOM	AT 12'		
	PENC'D TO CHANGE PENC AREA TO AROUND LOWER WELL SITE.						
	ON LOT 4 & 5. WELL ON LOT 4 TURNED OUT DRY,						

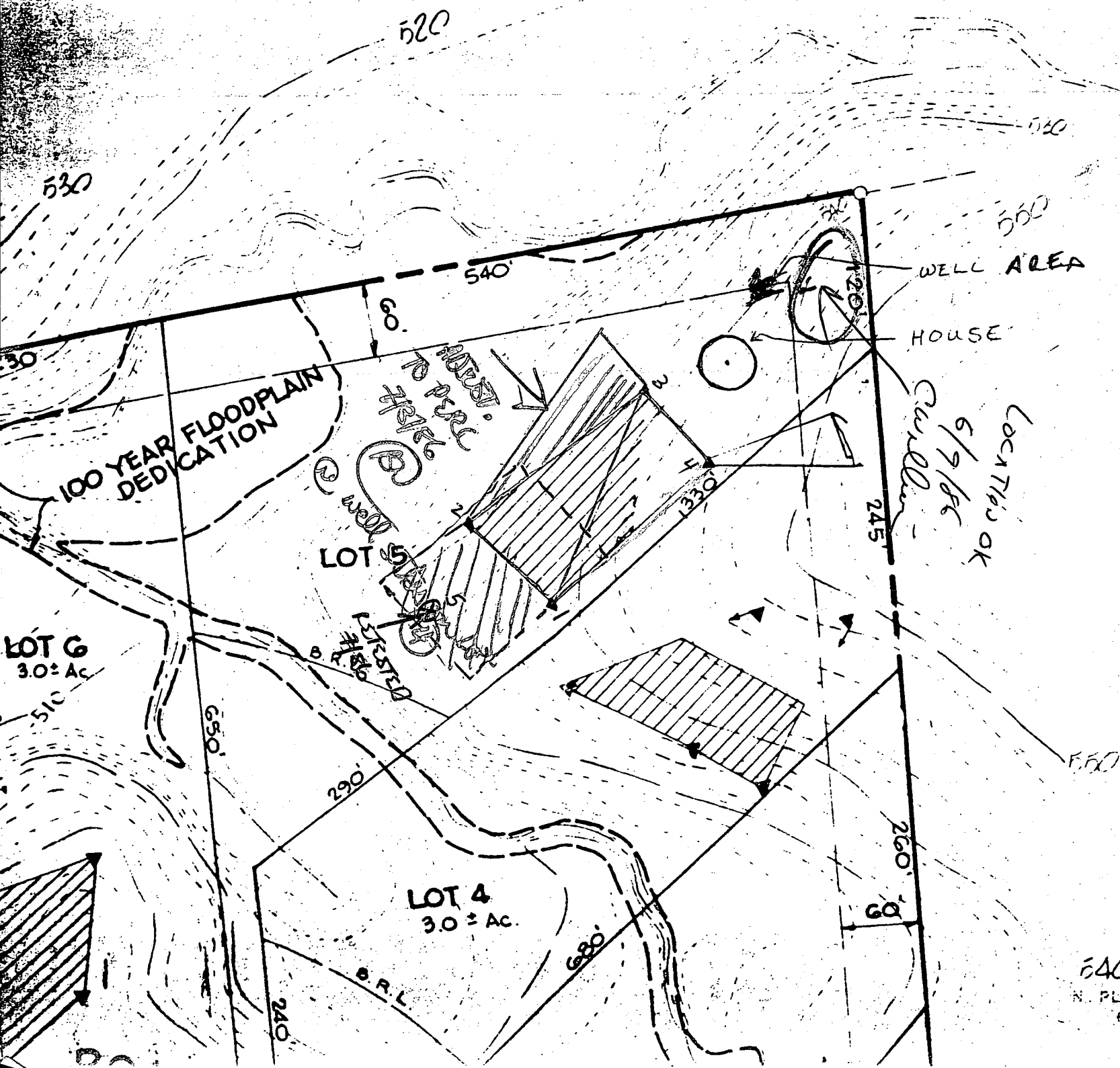
Avg = 3.6  
Wet 3 1/2  
max 10 1/2

REMARKS Heavy woods/underbrush  
WELL AT ADJACENT LOCATION ON THIS LOT NOT ATTEMPTED.  
7/86 C. Waller

TYPE OF SOIL see profile

TESTED BY (GLK)

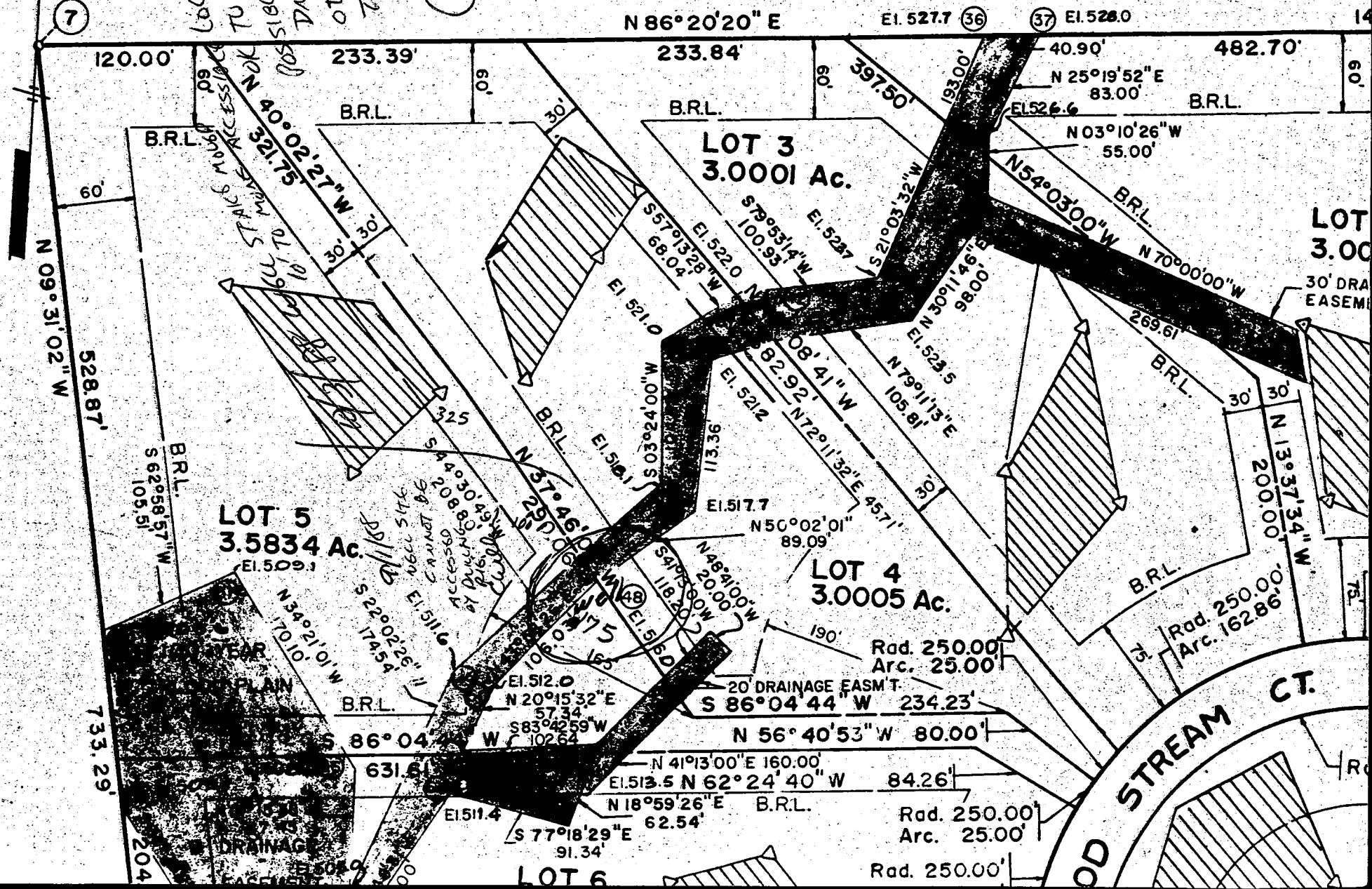
ALSO PRESENT R. T. Carr







Camille



C1 2176  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO.  
(OEP 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.

COUNTY  
NUMBER A 28667

DATE Received  
8 13

DATE WELL COMPLETED  
15 20  
03/16/88

Depth of Well  
22 26  
365  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
28 29 30 31 32 33 34 35 36 37  
AC-81-2566

OWNER PEELE, DONALD  
last name first name  
STREET OR RFD WOODSTREAM COURT TOWN WEST FRIENDSHIP  
SUBDIVISION SANDY HILL ESTATES SECTION LOT 5

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

Log well 365' 0 62  
Sand  
62 365  
Only Mieg  
Rock  
Fill down in with  
cement + drilling  
materials.

GROUTING RECORD  
WELL HAS BEEN GROUTED  
(Circle Appropriate Box)  
TYPE OF GROUTING MATERIAL  
CEMENT CM BENTONITE CLAY BC  
NO. OF BAGS 5 NO. OF POUNDS 410  
GALLONS OF WATER 30  
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 Nominal diameter Total depth  
CASING top (main) casing of main casing  
TYPE (nearest inch) (nearest foot)  
60 61 63 64 66 67 70

OTHER CASING (if used)  
diameter depth  
inch from to  
116 4/29

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

C2  
1 2  
EACH DEPTH (nearest ft.)  
1 8 9 11 15 17 21  
2 23 24 26 30 32 36  
3 38 39 41 45 47 51  
SCREEN

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

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 LOG OTHER DATA  
CASING INDICATOR

C3  
1 2  
PUMPING TEST  
HOURS PUMPED (nearest hour) 8 9  
PUMPING RATE (gal. per min.  
to nearest gal.) 11 15  
METHOD USED TO  
MEASURE PUMPING RATE  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING 17 20  
WHEN PUMPING 22 25  
TYPE OF PUMP USED (for test)  
A air P piston T turbine  
G centrifugal R rotary O other  
J jet S submersible  
(describe below)

PUMP INSTALLED  
DRILLER WILL INSTALL PUMP YES NO  
(CIRCLE) (YES OR 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 31 35  
(to nearest gallon)  
PUMP HORSE POWER 37 41  
PUMP COLUMN LENGTH 43 47  
(nearest ft.)  
CASING HEIGHT (circle appropriate box  
and enter casing height)  
+ above } LAND SURFACE (nearest  
- below } 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)  
N  
Diagram showing well location on lot with distances to structures.

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. 238  
Joe J. Mays

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

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

C1 00578

SEQUENCE NO.  
(OEP USE ONLY)STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.COUNTY  
NUMBER A 28667

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

8 13

07/17/86

22 250 26  
(TO NEAREST FOOT)

140-87-1551

OWNER TRUMMER, RAY  
last name first name  
STREET OR RFD WOODSTREAM CT TOWN WEST FRIENDSHIP  
SUBDIVISION SANDY HILL ESTATES SECTION 5 LOT 5

## WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS  
PENETRATED, THEIR COLOR, DEPTH,  
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use  
additional sheets if needed)FEET  
FROM TOCheck  
if water  
bearingOVERBURDEN 0 5  
SHALE 5 45  
GRAY ROCK 45 250  
DRY

(BACK FILLED)

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)yes no  
Y N

TYPE OF GROUTING MATERIAL

CEMENT CM

BENTONITE CLAY BC

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  
types  
insert  
appropriate  
code  
below

## CASING RECORD

ST CO  
STEEL CONCRETE  
PL OT  
PLASTIC OTHERMAIN CASING Nominal diameter Total depth  
TYPE top (main) casing of main casing  
(nearest inch) (nearest foot)

60 61 63 64 66 70

EACH  
CASING

## OTHER CASING (if used)

diameter depth (feet)  
inch from to

60 61 63 64 66 70

screen type  
or open hole

## SCREEN RECORD

insert  
appropriate  
code  
belowST BR HO  
STEEL BRASS OPEN  
PL BRONZE HOLE  
PLASTIC OTHER

C2

EACH  
SCREEN

DEPTH (nearest ft.)

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)

GRAVEL PACK  
IF WELL DRILLED WAS  
FLOWING WELL INSERT  
F IN BOX 68OEP USE ONLY  
(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

WQ

70  
TELESCOPE  
CASING72  
LOG  
INDICATOR74 75 76  
OTHER DATA

C3

1 2

## PUMPING TEST

HOURS PUMPED (nearest hour)

PUMPING RATE (gal. per min.  
to nearest gal.)METHOD USED TO  
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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  
(CIRCLE) (YES or 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

- below

LAND SURFACE

(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)

(BACK FILLED)

MAS FAILING

IF A PERC HOLE

SHOWN IN RED

IS SATISFACTORY

(ALTHOUGH THIS IS

LESS LIKELY TO BE

SATISFACTORY THAN

PROPOSAL 1)

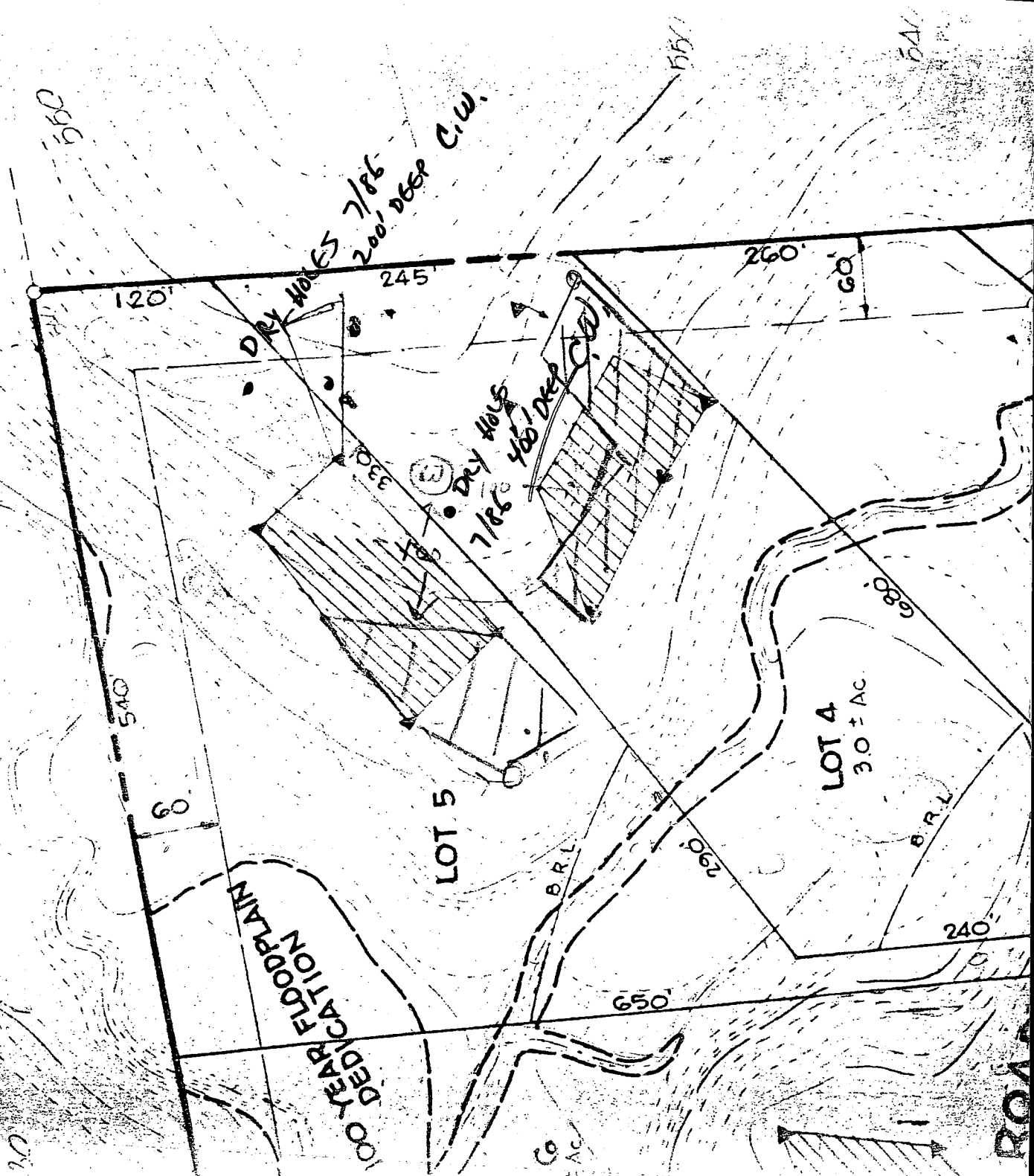
A WELL COULD BE

ATTEMPTED AS MUCH

AS 160' FROM THE

Rear LOT LINE.

7/3/86 C.Will



<b>C1</b> 5234		SEQUENCE NO. (OEP USE ONLY)		<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> 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 <b>A-28667</b>	
DATE RECEIVED 8    13		DATE WELL COMPLETED 15    20		Depth of Well 22    26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" <b>10-81-1651</b> 28 29 30 31 32 33 34 35 36 37	
OWNER <b>YAO</b> last name		<b>MICHAEL</b> first name		TOWN <b>WEST FRIENDSHIP</b>			
STREET OR RFD <b>WOODSTREAM CT.</b>		SUBDIVISION <b>SANDY HILL ESTATES</b>		SECTION		LOT <b>5</b>	
<b>WELL LOG</b> Not required for driven wells		<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle Appropriate Box) yes <b>Y</b> no <b>N</b> 44 44 TYPE OF GROUTING MATERIAL CEMENT <b>CM</b> BENTONITE CLAY <b>BC</b> 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)		<b>C 3</b> 1 2 <b>PUMPING TEST</b> HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min. to nearest gal.) 11 15 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING 17 20 WHEN PUMPING 22 25 TYPE OF PUMP USED (for test) <b>A</b> air <b>P</b> piston <b>T</b> turbine 27 27 27 <b>C</b> centrifugal <b>R</b> rotary <b>O</b> other (describe below) 27 27 27 <b>J</b> jet <b>S</b> submersible 27 27			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		<b>CASING RECORD</b> casing types insert appropriate code below <b>ST</b> <b>CO</b> STEEL CONCRETE <b>PL</b> <b>OT</b> PLASTIC OTHER MAIN CASING TYPE Nominal diameter. Total depth top (main) casing of main casing (nearest inch) (nearest foot) 60 61 63 64 66 70		<b>PUMP INSTALLED</b> DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES OR 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) <b>+</b> above } LAND SURFACE 49 } (nearest foot) <b>-</b> below } 50 51			
DESCRIPTION (Use additional sheets if needed) FEET FROM TO Check if water bearing		<b>OTHER CASING (if used)</b> EACH CASING diameter depth (feet) from to 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100		<b>SCREEN RECORD</b> screen type or open hole insert appropriate code below <b>ST</b> <b>BR</b> <b>HO</b> STEEL BRASS OPEN HOLE <b>PL</b> <b>OT</b> PLASTIC OTHER <b>C 2</b> 1 2 EACH SCREEN DEPTH (nearest ft.) 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 56 60 (NEAREST INCH) from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68			
CIRCLE APPROPRIATE LETTER <b>A</b> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <b>E</b> ELECTRIC LOG OBTAINED <b>P</b> 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.		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			
DRILLERS IDENT. NO. <b>120</b>		DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)			

November 1, 1988

Donald Pfeiffer  
309 B  
Sun Shine Place  
Baltimore, MD 21228  
744-6702

Mr. Craig Williams  
HOWARD COUNTY DEPARTMENT  
OF HEALTH  
3525 Ellicott Mills Drive  
Suite H  
Ellicott City, MD 21043

RE: LOT 5 - WOOD STREAM COURT, SANDY HILL ESTATES

Dear Mr. Williams:

As you are aware, I have been experiencing some difficulty in finding a suitable location for my second attempt at drilling a well on LOT 5 WOOD STREAM COURT. You declined my first choice stating that it was too close to the drain field, therefore, I chose another location.

This new site, however, is on the property line approximately two feet into where my roadway would be located. This now presents me with a new problem. I have spoken with the owner of LOT 4, Mr. Thomas Miller, and we have arrived at a mutual agreement. Mr. Miller will allow me to branch off of his roadway in exchange an agreed upon sum. This will eliminate the need for two completely separate roadways. If in the future Mr. Miller decides not to honor this agreement, it will be necessary for me to re-route my roadway around the well and bring in dirt to fill the area.

I am eager to settle this matter as quickly and effortlessly as possible for all parties concerned. I hope that this letter will help to clear this matter. If you have any questions or suggestions, please contact me as soon as possible.

Thank you,



Donald Pfeiffer

DP/lam

