

# PERMIT

SEWAGE DISPOSAL SYSTEM

25767

23915

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

5th

DISTRICT

5/4/77

DATE

INDEXED

B. & J Construction Company

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 9205 Grant Avenue, Laurel, Md.

PHONE 725-5813

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION ROAD 11940 Route 216, Fulton

LOT

PROPERTY OWNER William James Brannon

Joy McGEE

ADDRESS 8888 Lincoln Street, Savage, Md.

Phone: 725-2954

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 - Dry well to have 180 sq. ft. effective absorbent sidewall area per bedroom below inlet. Inlet to be 3½ to 4 ft. below original grade and maximum depth 11 ft. below original grade. Locate dry well 70 ft., from right property line and 140 ft. from rear property line as seen when facing lot from road. If trench needed leave 5 ft. earth buffer between trench and dry well and run necessary distance to make up total sidewall area called for. CALL FOR INSPECTION OF TRENCH BEFORE PLACING GRAVEL IN TRENCH. NOTE: IN NO CASE IS ANY DRY WELL TO 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.

PLANS APPROVED BY Charles B. Streaker DATE 10/27/76

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.

BUILDING PERMIT SIGNED

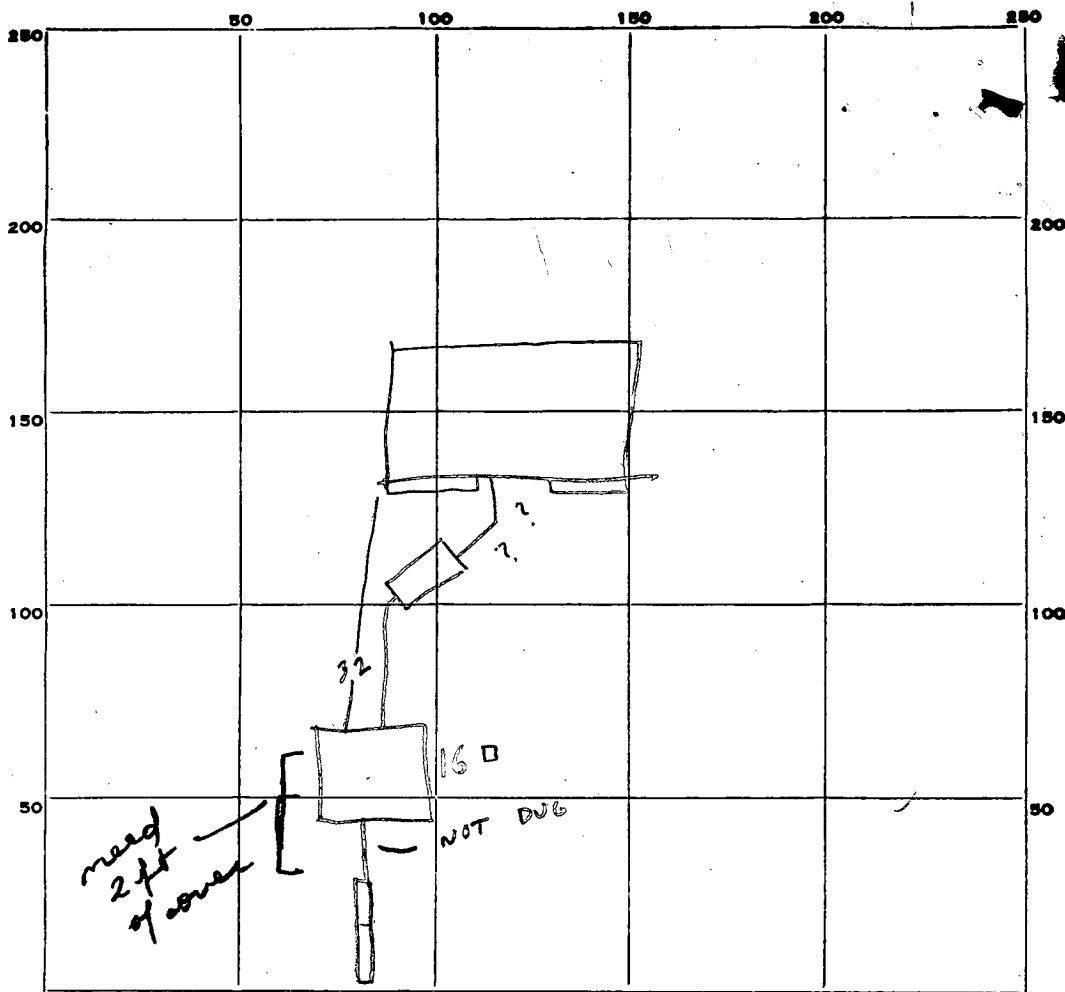
AND RETURNED

1-2405 B0015840 - STORAGE BUILDING

BLDG. PERMIT SIGNED  
AND RETURNED 9/23/84

Serial # 72911

23915



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL \_\_\_\_\_

CLEANOUTS \_\_\_\_\_

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

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH 9 IN. TOTAL LENGTH 25 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 225

SEEPAGE PITS, INSIDE DIAMETER 69 FT. DEPTH BELOW INLET 7.5 FT.

ABSORBENT AREA 480 SQ. FT.

REMARKS \_\_\_\_\_

RAB 15-1-77 OK to continue need 2 ft of  
cover on DW in area indicated

OK TO COVER Sys 1000 - 1/10/74

RECEIVED  
DATE  
TIME

DATE SYSTEM APPROVED

6/3/74

INSPECTOR

1/10/74

23915

22  
64  
9.5  
820  
1105  
21800

# APPLICATION

A 23915

P \_\_\_\_\_

## 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

DISTRICT 5

DATE 9/10/76

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 William Clark

ADDRESS \_\_\_\_\_ PHONE Any questions call:  
Strimel Real Estate  
531-5115

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION Route 216 - intersection of Lime Kiln Road and Route 216 -  
approx. 1/4 mile on right towards Highland after the intersection

SIZE OF LOT 1.023 acres TYPE BLDG. 3  
NUMBER OF BEDROOMS  
(Single Fmly, Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ R. E. Strimel

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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

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

# THIS IS NOT A PERMIT



23915

N 52° 55' 50" W 85'

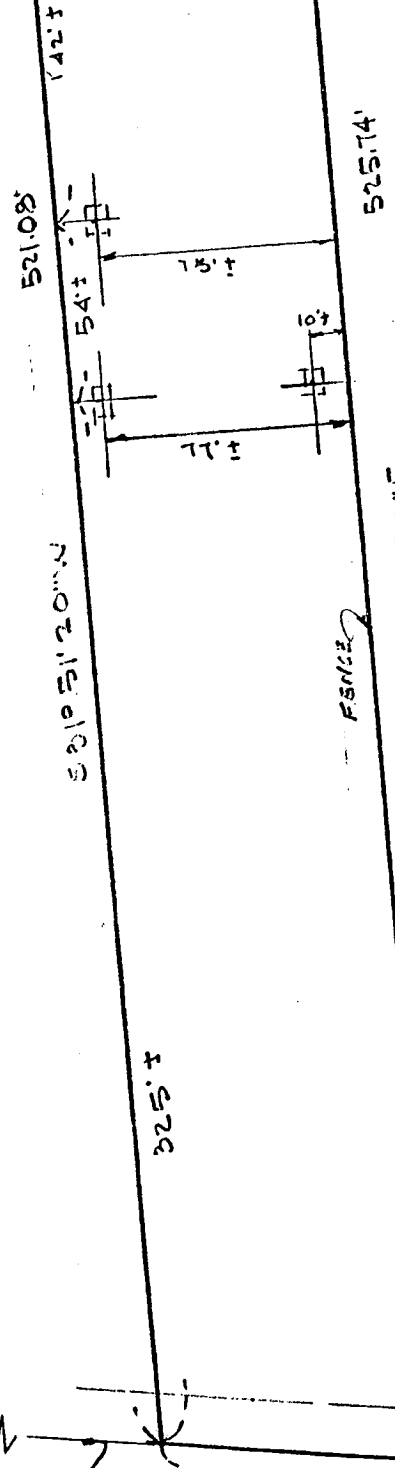
LOCATION PERC HOLES

William R. and Sylvia S. Clark  
Property  
Tax Map 41 P. 98  
5th Election District  
Howard County, Maryland  
Scale 1"=60' Oct. 20, 1976

G.R. MYERS  
200/218  
3.16 AC±

W.M. R. CLARK  
209/568  
1.02 AC±

H.B. PALMER  
449/179  
1 AC±



The lot Shown hereon complies with the minimum ownership and lot area as required by the Maryland State Department of Health and Mental Hygiene.

APPROVED: for private water and private sewage systems.  
HOWARD COUNTY HEALTH DEPARTMENT

*[Signature]*  
COUNTY HEALTH OFFICER

*[Signature]*  
DATE

Field located perc holes from center Route 216 and from fence along property line.

Walter Park Reg. L.S. #5539  
HUDKINS ASSOCIATES  
231 JOSEPH SQUARE  
COLUMBIA, MD 21044

Walter Park

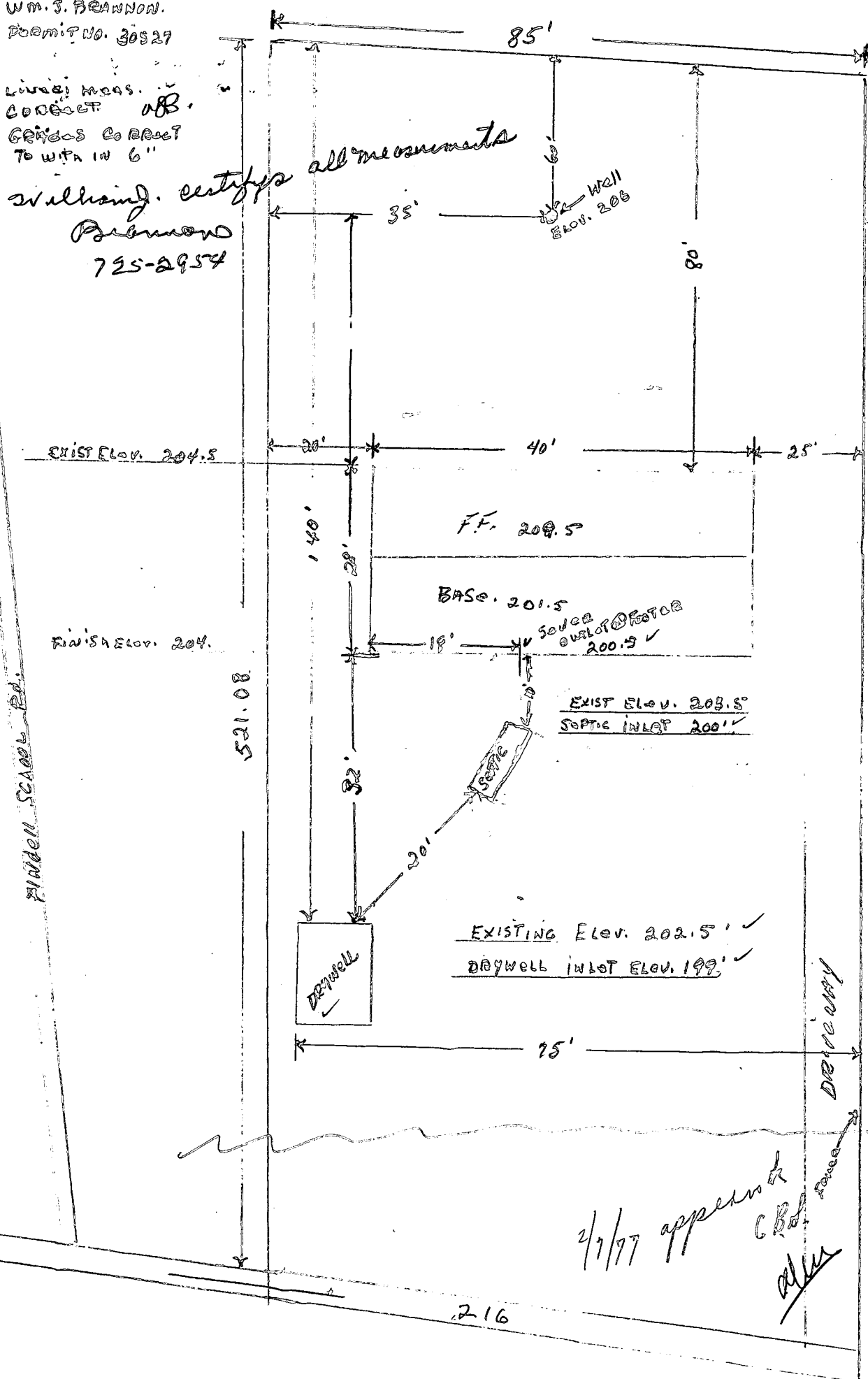
10/21/76

WM. J. BRANNON.  
Permit No. 30827

LINEAL MEAS.  
CORRECT AB.  
GRIDS CORRECT  
TO WITH IN 6"

william J. Brannon  
725-2954  
certifies all measurements

23915

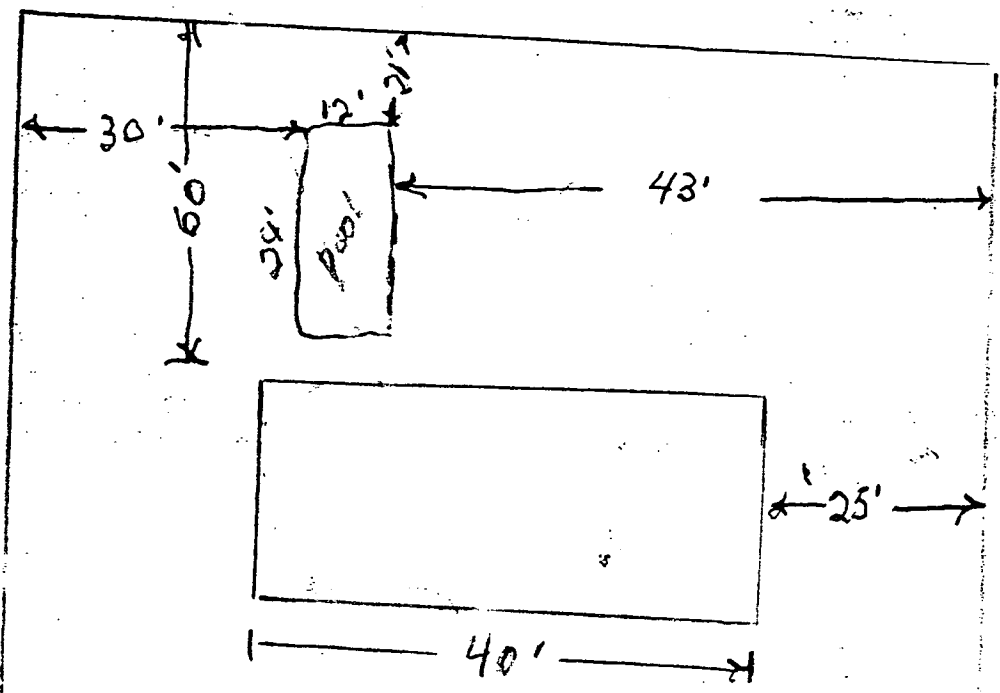


2/7/77 approved  
C.B.B.  
all

FARM LAND

23915

Washed to 27



9-22-8  
well & septic  
located as shown on  
sketch plan  
plot plan. D.W. fig level  
appears 5.5' below grade  
functioning ok. Proposed  
pool has not impact on  
well D.W. or septic area  
recommended approval.  
S. Shurt

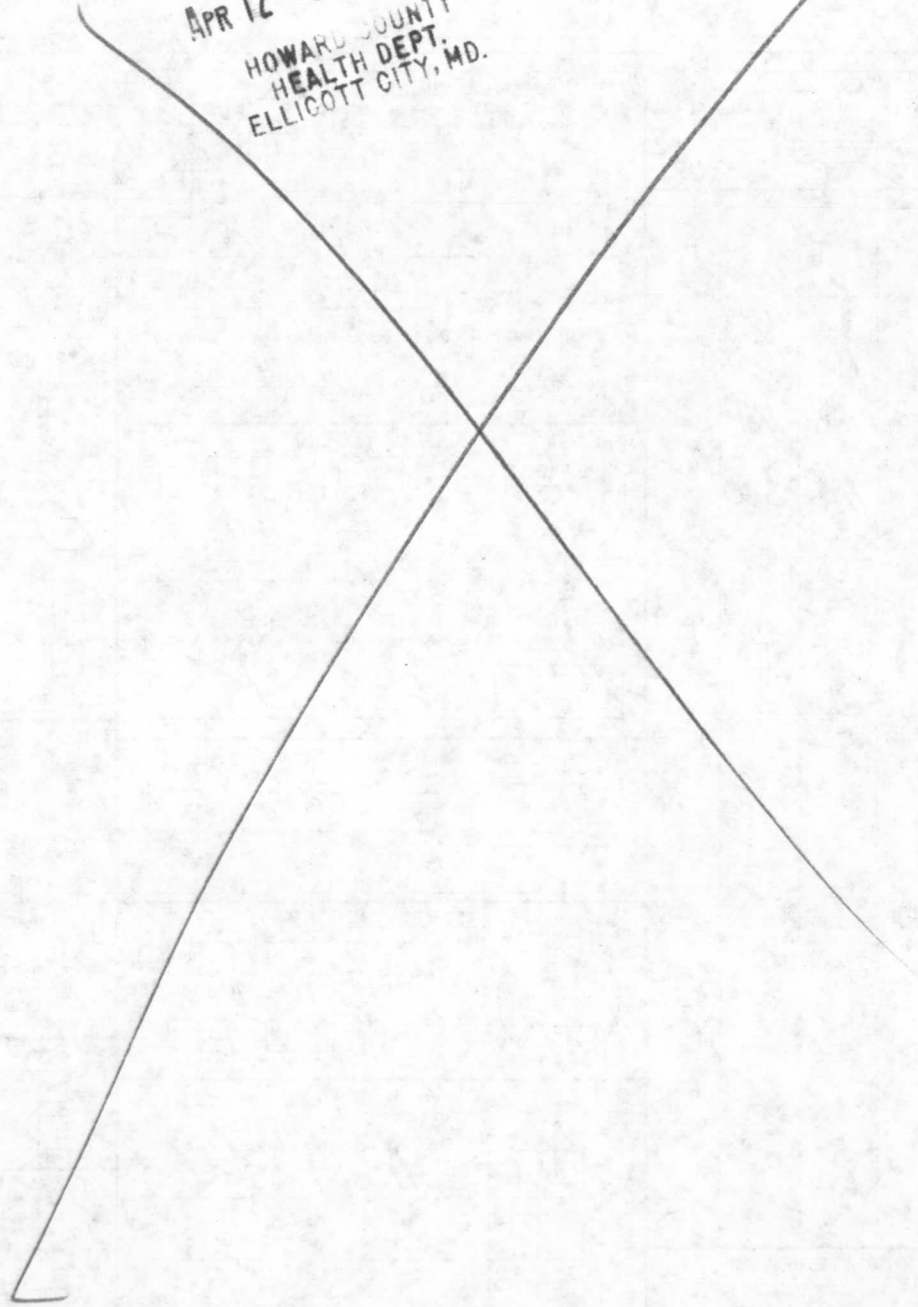
|   |                 |  |   |  |   |
|---|-----------------|--|---|--|---|
| C 1   | 7526            | SEQUENCE NO.<br>(WRA USE ONLY)   | <b>STATE OF MARYLAND</b><br><b>WATER RESOURCES ADMINISTRATION</b><br><b>TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401</b><br><b>WELL COMPLETION REPORT</b> |  | THIS REPORT MUST BE SUBMITTED WITH-<br>IN 30 DAYS AFTER WELL COMPLETION<br>FILL IN THIS FORM COMPLETELY<br>COUNTY NUMBER <b>23915</b> |
| 1 2 3 (SEQ. NO.) 6<br>(THIS NUMBER IS TO BE PUNCHED<br>IN COLS. 3-6 ON ALL CARDS).  |                 | DATE RECEIVED<br>(WRA USE ONLY) <b>2-22-77</b><br>DATE WELL COMPLETED <b>2-22-77</b><br>DEPTH OF WELL <b>360</b><br>22 (TO NEAREST FOOT) 26  |   | PERMIT NO. FROM "PERMIT TO DRILL WELL"<br><b>11-73-1806</b><br>28 29 30 31 32 33 34 35 36 37 |   |
| OWNER <b>B. M. Williams</b>   |                 | LAST NAME <b>Williams</b>  |   | FIRST NAME <b>B. M.</b>  |   |
| STREET OR RFD <b>8303 Lime St.</b>  |                 | POST OFFICE <b>Georgetown, Md.</b>   |   |  |   |
| WELL DESCRIPTION  |                 |  |   |  |   |
| WELL LOG  |                 | GROUTING RECORD  |   |  |   |
| STATE THE KIND OF FORMATIONS PENETRATED, THEIR<br>COLOR, DEPTH, THICKNESS AND IF WATER BEARING  |                 | WELL HAS BEEN GROUTED<br>(CIRCLE APPROPRIATE BOX) <b>Y</b> <b>N</b>  |   |  |   |
| DESCRIPTION<br>(USE ADDITIONAL SHEETS<br>IF NECESSARY)  | FEET<br>FROM TO | TYPE OF GROUTING MATERIAL (CIRCLE BOX)*  |   |  |   |
| Top Soil<br>Shale<br>MICH<br>SAND STONE<br>MICA   | 0 2             | CEMENT <b>C M</b> BENTONITE CLAY <b>B C</b>  |   |  |   |
|   | 2 90            | NO. OF BAGS <b>18</b> NO. OF POUNDS <b>1800</b>  |   |  |   |
|   | 90 100          | GALLONS OF WATER <b>100</b>  |   |  |   |
|   | 100 110         | DEPTH OF GROUT SEAL (TO NEAREST FOOT)  |   |  |   |
|   | 110 360         | FROM <b>0</b> FT. TO <b>40</b> FT.<br>(ENTER 0 IF FROM SURFACE)  |   |  |   |
|   |                 | CASING RECORD  |   |  |   |
|   |                 | CASING TYPES <b>ST</b> <b>CO</b><br>INSERT APPROPRIATE CODE BELOW<br>STEEL CONCRETE<br><b>PL</b> <b>OT</b><br>PLASTIC OTHER  |   |  |   |
|   |                 | MAIN CASING TYPE <b>57</b> NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) <b>6</b> TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) <b>95</b><br>60 61 63 64 66 70   |   |  |   |
|   |                 | OTHER CASING (IF USED)   |   |  |   |
|   |                 | EACH CASING DIAMETER (INCH) DEPTH (FEET) FROM TO<br><div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>  |   |  |   |
|   |                 | SCREEN RECORD  |   |  |   |
|   |                 | SCREEN TYPE OR OPEN HOLE <b>ST</b> <b>BR</b> <b>HO</b><br>INSERT APPROPRIATE CODE BELOW<br>STEEL BRASS OR BRONZE OPEN HOLE<br><b>PL</b> <b>OT</b><br>PLASTIC OTHER   |   |  |   |
|   |                 | C 2 (SEQ. NO.) 6<br>1 2 3 (SEQ. NO.) 6<br>DEPTH (NEAREST WHOLE FOOT) FROM <b>110</b> TO <b>360</b><br>8 9 11 15 17 21<br>23 24 26 30 32 36<br>38 39 41 45 47 51<br>SLOTSIZE 1, 2, 3,   |   |  |   |
| CIRCLE APPROPRIATE BOXES  |                 | DIAMETER OF SCREEN <b>56</b> <b>60</b> (NEAREST INCH)<br>FROM TO<br>GRAVEL PACK<br>IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX <b>68</b> <b>F</b>  |   |  |   |
| I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL<br>CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT<br>TO DRILL WELL", AND THAT INFORMATION CONTAINED<br>IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE<br>TO THE BEST OF MY KNOWLEDGE, INFORMATION AND<br>BELIEF. |                 | WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)<br>T (E.R.O.S.) W Q<br>70 72 74 75 76<br>TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE   |   |  |   |
| DRILLERS NAME <b>H. J. Eastman</b><br>(PLEASE PRINT)<br>SIGNATURE <b>H. J. Eastman</b>  |                 | PUMPING TEST   |   |  |   |
|   |                 | C 3 (SEQ. NO.) 6<br>HOURS PUMPED (TO NEAREST HOUR) <b>3</b><br>8 9<br>PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) <b>1</b><br>11 15<br>METHOD USED TO MEASURE PUMPING RATE <b>Bucket</b>   |   |  |   |
|   |                 | WATER LEVEL: (DISTANCE FROM LAND SURFACE)  |   |  |   |
|   |                 | BEFORE PUMPING <b>17</b> <b>20</b> (NEAREST FOOT)<br>WHEN PUMPING <b>360</b> (NEAREST FOOT)<br>22 25   |   |  |   |
|   |                 | TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)<br>(FOR PUMPING TEST)   |   |  |   |
|   |                 | <b>A</b> AIR <b>P</b> PISTON <b>T</b> TURBINE<br>27 27 27<br><b>C</b> CENTRIFUGAL <b>R</b> ROTARY <b>O</b> OTHER (DESCRIBE BELOW)<br>27 27 27<br><b>J</b> JET <b>S</b> SUBMERSIBLE<br>27 27  |   |  |   |
|   |                 | PUMP INSTALLED   |   |  |   |
|   |                 | TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) <b>29</b><br>DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) <b>Y</b> <b>N</b><br>CAPACITY:<br>GALLONS PER MINUTE (TO NEAREST GALLON) <b>31</b> <b>35</b><br>PUMP HORSE POWER <b>37</b> <b>41</b><br>PUMP COLUMN LENGTH (NEAREST FOOT) <b>43</b> <b>47</b> |   |  |   |
|   |                 | CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)   |   |  |   |
|   |                 | <b>+</b> ABOVE <b>2</b> LAND SURFACE (NEAREST FOOT)<br><b>-</b> BELOW <b>49</b> <b>50</b> <b>51</b>  |   |  |   |
|   |                 | LOCATION OF WELL ON LOT  |   |  |   |
|   |                 | SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS,<br>SEPTIC TANKS, AND/OR OTHER LAND MARKS AND<br>INDICATE NOT LESS THAN TWO DISTANCES<br>(MEASUREMENTS TO WELL).<br><b>positive</b><br><b>30' to well</b>   |   |  |   |



RECEIVED

APR 12 5 15 PM '77

HOWARD COUNTY  
HEALTH DEPT.  
ELLCOTT CITY, MD.



C 1 9776 SEQUENCE NO. (MDE 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

W 811330

1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED,  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received  
MM DD YY  
8 13

DATE WELL COMPLETED

MM DD YY  
15 6 99

Depth of Well

36 22 500 26  
(TO NEAREST FOOT)PERMIT NO.  
FROM "PERMIT TO DRILL WELL"HO-94-2040  
28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD 11940 last name RT 216 first name JOY TOWN Fulton SUBDIVISION SECTION LOT MAP 41, PAR. 98

## 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

check  
if water  
bearing

Drywell  
Sand 0 36

Gray Mica 36 500

Backfilled  
500- 40 drilling materials  
40- 0 Cement

## GROUTING RECORD

yes no

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

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 46 NO. OF POUNDS 45 46

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.  
(enter 0 if from surface)

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
belowST CO  
STEEL CONCRETEPL OT  
PLASTIC OTHERMAIN  
CASING  
TYPENominal diameter  
of (main) casing  
(nearest inch)Total depth  
of main casing  
(nearest foot)

60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)  
inch from toscreen type  
or open hole

## SCREEN RECORD

(insert  
appropriate  
code  
below)ST BR HO  
STEEL BRASS OPENPL OT  
PLASTIC HOLE

OTHER

C 2

DEPTH (nearest ft.)

1 2

E 1 8 9 11 15 17 21

A 2 23 24 26 30 32 36

C 3 38 39 41 45 47 51

S R E E N

SLOT SIZE 1 2 3

DIAMETER (NEAREST INCH)

56 60

from to

GRAVEL PACK

IF WELL DRILLED

WAS FLOWING WELL

INSERT F IN BOX 68 68

MDE USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG OTHER DATA

CASING INDICATOR

## PUMPING TEST

HOURS PUMPED (nearest hour)

8 9

PUMPING RATE (gal. per min.)

11 15

METHOD USED TO  
MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20 ft.

WHEN PUMPING 22 25 ft.

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  
(CIRCLE) (YES OR NO)IF DRILLER INSTALLS PUMP, THIS SECTION  
MUST BE COMPLETED FOR ALL WELLS.TYPE OF PUMP INSTALLED  
PLACE (A,C,J,P,R,S,T,O)  
IN BOX 29. 29CAPACITY:  
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

+ above } LAND SURFACE (nearest foot)  
49  
- below } 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)See Attached  
location.

DRILLERS LIC. NO. 1 MSD 024

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 M D

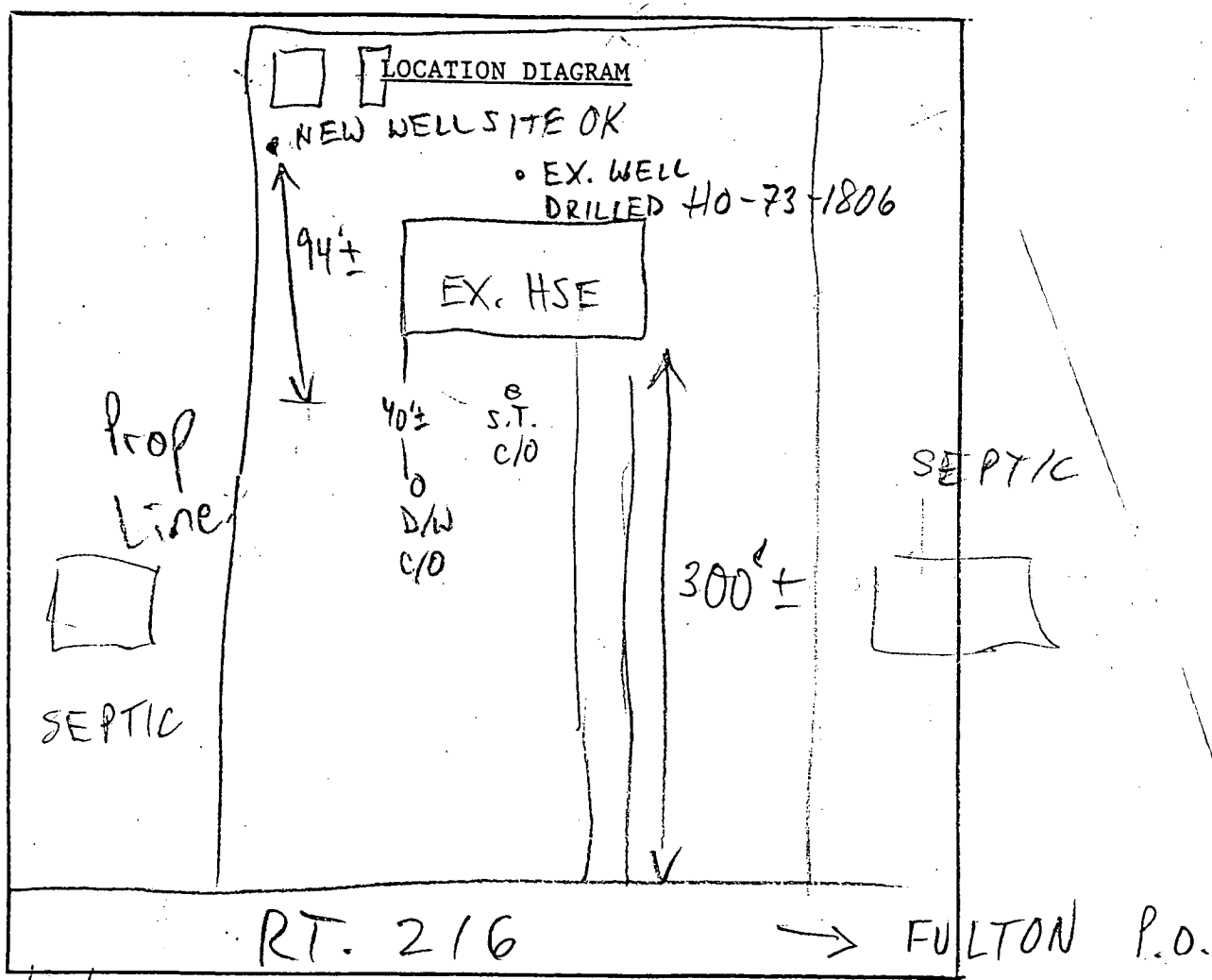
SITE SUPERVISOR (sign. of driller or journeyman  
responsible for sitework if different from permittee)

[illegible][illegible]

12/30/98  
11:00

SITE INSPECTION SHEET

OWNER: Lay McGee 301-776-9588 DATE REQUESTED: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ CONTRACTOR: J. Mayne  
ADDRESS: 11940 Rt. 216 Map 41 WELL TAG #: #0-94-2040  
Fulton 20759 Par 98 COUNTY #: \_\_\_\_\_  
PROPOSAL: repl. well requested due to lack of H<sub>2</sub>O



COMMENTS: 12/30/98 WELL SITE OK AS SHOWN, EX. WELL TO BE MAINTAINED, CONNECTED W/NEW WELL

DATE: \_\_\_\_\_ INSPECTOR: \_\_\_\_\_

1999 FEB 22 AM 8:58

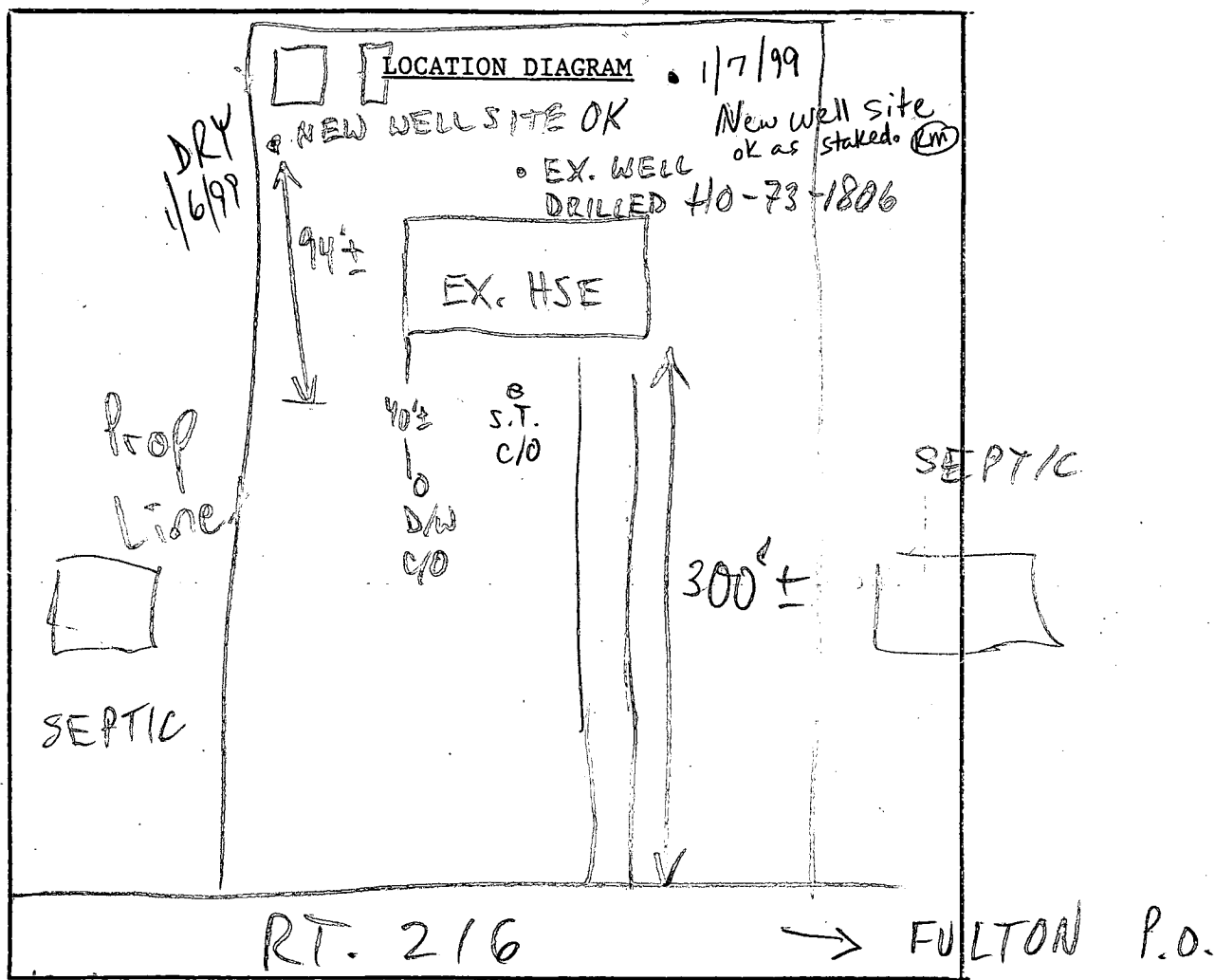
RECEIVED  
HONOLULU COUNTY  
ELIMINATED  
1999 FEB 22 AM 8:58

|  |      |                                       |  |   |
|--|------|---------------------------------------|--|---|
| B 1  | 0363 | SEQUENCE NO.<br>(MDE USE ONLY)        | STATE OF MARYLAND<br>PERMIT TO DRILL WELL<br>please print or type. | STATE PERMIT NUMBER<br><b>HO-94-2040</b><br><small>fill in this form completely</small> |
| Date Received (APA)<br><b>12 30 98</b>   |      | OWNER INFORMATION                     |  |   |
| 8 MM DD YY 13<br><b>Mc Gee</b>   |      | 34<br><b>Joy</b>                      |  |   |
| 15 Last Name   |      | Owner First Name                      |  |   |
| 36 <b>11940 Rt 216</b>   |      | 55                                    |  |   |
| 57 <b>Fulton</b>   |      | 70 State 72 <b>MD</b> 76 <b>20759</b> |  |   |
| DRILLER INFORMATION  |      |                                       |  |   |
| Driller's Name <b>Joseph L. Mayne</b> MS D 24 License No. 81   |      |                                       |  |   |
| Firm Name <b>Joseph L. Mayne well Drilling</b>   |      |                                       |  |   |
| Address <b>5512 Ridge Rd. Mt. Airy Md. 21771</b>   |      |                                       |  |   |
| Signature <b>Joseph L. Mayne</b> Date <b>12/29/98</b>  |      |                                       |  |   |
| B 2 WELL INFORMATION   |      |                                       |  |   |
| 1 2. APPROX. PUMPING RATE (GAL. PER MIN.) <b>500</b>   |      |                                       |  |   |
| AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b>  |      |                                       |  |   |
| USE FOR WATER (CIRCLE APPROPRIATE BOX)   |      |                                       |  |   |
| <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION   |      |                                       |  |   |
| <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  |      |                                       |  |   |
| <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING  |      |                                       |  |   |
| <input type="checkbox"/> PUBLIC WATER SUPPLY WELL  |      |                                       |  |   |
| <input type="checkbox"/> TEST, OBSERVATION, MONITORING   |      |                                       |  |   |
| <input type="checkbox"/> GEO-THERMAL   |      |                                       |  |   |
| APPROXIMATE DEPTH OF WELL <b>30</b> FEET   |      |                                       |  |   |
| APPROXIMATE DIAMETER OF WELL <b>12</b> INCH  |      |                                       |  |   |
| METHOD OF DRILLING (circle one)  |      |                                       |  |   |
| <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN                                |      |                                       |  |   |
| <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)                      |      |                                       |  |   |
| <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT  |      |                                       |  |   |
| other _____  |      |                                       |  |   |
| REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)   |      |                                       |  |   |
| <input 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 checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS |      |                                       |  |   |
| <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL  |      |                                       |  |   |
| PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52  |      |                                       |  |   |
| Not to be filled in by driller (MDE OR COUNTY USE ONLY)  |      |                                       |  |   |
| APPROX. PERMIT NUMBER 54 _____ 63  |      |                                       |  |   |
| PERMIT No. <b>HO-94-2040</b>   |      |                                       |  |   |
| B 3 LOCATION OF WELL   |      |                                       |  |   |
| 8 COUNTY <b>Howard</b> 21  |      |                                       |  |   |
| 23 SUBDIVISION <b>Map 41, Par 98</b> 42  |      |                                       |  |   |
| SECTION <b>44</b> 46 LOT <b>48</b> 50  |      |                                       |  |   |
| 52 NEAREST TOWN <b>Fulton</b> 71   |      |                                       |  |   |
| MILES FROM TOWN (enter 0 if in town) <b>1/2</b> 73 M 76 77 78  |      |                                       |  |   |
| B 4  |      |                                       |  |   |
| 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)   |      |                                       |  |   |
| ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)   |      |                                       |  |   |
| NEAR WHAT ROAD <b>11940 Rt. 216</b> 30   |      |                                       |  |   |
| ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)   |      |                                       |  |   |
| DISTANCE FROM ROAD <b>300</b> FT 34 37   |      |                                       |  |   |
| ENTER FT OR MI <b>FT</b> 38 39   |      |                                       |  |   |
| TAX MAP: <b>41</b> BLK: <b>19</b> PARCEL <b>98</b>   |      |                                       |  |   |
| NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  |      |                                       |  |   |
| COUNTY NAME <b>Howard</b> COUNTY NO. <b>6511330</b>  |      |                                       |  |   |
| STATE SIGNATURE <b>Mark E. Rikkin</b> INSERT S <b>S</b>  |      |                                       |  |   |
| DATE ISSUED <b>12 30 98</b> EXP. DATE <b>12/30/99</b>  |      |                                       |  |   |
| 43 MM DD YY 48 CO SIGNATURE <b>Mark E. Rikkin</b> EXP. DATE  |      |                                       |  |   |
| NORTH GRID <b>482</b> 000 EAST GRID <b>0821</b> 000  |      |                                       |  |   |
| 50 55 57 63  |      |                                       |  |   |
| SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X   |      |                                       |  |   |
| SOURCES OF DRILLING WATER  |      |                                       |  |   |
| 1. <b>well</b>   |      |                                       |  |   |
| 2.   |      |                                       |  |   |
| 3.   |      |                                       |  |   |
| WRITE THE BOX NUMBER FROM THE MAP HERE   |      |                                       |  |   |
| E <b>8201</b>  |      |                                       |  |   |
| N <b>4802</b>  |      |                                       |  |   |
| DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION                        |      |                                       |  |   |
|  |      |                                       |  |   |
| SPECIAL CONDITIONS   |      |                                       |  |   |
| NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -   |      |                                       |  |   |

12/30/98  
U=00  
1/7/99 10:20

SITE INSPECTION SHEET

OWNER: Jay McGee 301-776-9588 DATE REQUESTED: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ CONTRACTOR: J. Mayne  
ADDRESS: 11940 Rt. 216 Map 41 WELL TAG #: H0-94-2040  
Fulton 20759 Par 98 COUNTY #: \_\_\_\_\_  
PROPOSAL: repl. well requested due to lack of H<sub>2</sub>O



COMMENTS: 12/30/98 WELL SITE OK AS SHOWN, EX. WELL TO BE MAINTAINED, CONNECTED W/NEW WELL (MR)  
1/7/99 New well site needed due to dry hole on originally approved site, new site ok as shown (Km)

DATE: \_\_\_\_\_ INSPECTOR: \_\_\_\_\_

To: John Boris

1-18-05

Howard County Environmental Health and Safety  
7178 Columbia Gateway Drive  
Columbia Maryland.

From: Larry D. McGee  
11940 Scaggsville Rd  
Fulton Md. 20759

Mr Boris,

I am building a storage building which , due to the size limitations and setback requirements, will be 26 feet from my well. My well is currently only 20 from my home. There will be no chemicals of any kind stored in this storage building. I respectfully request a variance from the 30 foot standard requirement, to allow my pole barn to be 26 feet from my existing well. I have attached an improved Drawing showing well and septic, more closely to scale.

Thanks for your consideration,

A handwritten signature in black ink, appearing to read "Larry D McGee". The signature is fluid and cursive, with the first name "Larry" and last name "McGee" clearly distinguishable.

Larry D McGee



N 31° 05' 10" W

N 31° 05' 10" E

Proposed  
new  
24 x 36  
Storage

Measurements  
correct  
1-24-05

26'

Well Elev 206

Deck 20'

40  
SPLIT FORCE  
DWG

CS

CS

10'

Septic elev 203.5

20'

199 elev

Drywell

32'

REVISED plan  
OK

Scale: 1" = 20'

Larry McBee  
11940 Scaggsville Rd  
Fulton Md 20759

H-18-05 BOD 151800  
JB - Looks for  
good sig.  
(KD)

↓ to RT  
216  
400'