

WELL ABANDONMENT REPORT

DATE MARCH 21, 1990

PERMIT NUMBER OF ABANDONED WELL (If any)

U	N	-	K	N	-	O	W	N
---	---	---	---	---	---	---	---	---

UNKNOWN

DRILLER: HUBER MICHAEL
(Last Name) (First Name)

OWNER: BALTIMORE GAS AND ELECTRIC
(Last Name) (First Name)

WELL LOCATION:

County HOWARD

Subdivision _____

Section	Lot
---------	-----

Nearest Town CLARKSVILLE

Maryland Grid Location

State Grid Number

E
N

800,000

500,000

TYPE OF WELL:

Drilled

Jetted

X Bored or Augered

Other, specify _____

DEPTH OF WELL: 320 Feet

TYPE OF CASING:

Steel

Plastic

Concrete

Other, specify OPEN HOLE

SIZE OF CASING: 8" Inches

Was any casing removed? Yes X No

If Yes, amount removed: _____ Feet

Was casing ripped or perforated? Yes No

	X
0/5	5/5
0/0	5/0

Show Well Location by (X)
Within Box

LOG OF SEALING MATERIAL

Material	Feet	
	From	To
BENTONITE CEMENT SLURRY	0	320

DRILLER

(Signature)

LICENSE #

326

OFFICE OF PLANNING & ZONING

FINAL PLAT/ORIGINAL

SIGNATURE APPROVAL

File No. F-89-01

Talbot Property
(Name)

This form is for the processing of final plat originals for signature approvals. If it is found necessary for any corrections or additions to be made on the original, the corrections needed must be stated and forwarded to the next agency, minus the signature, and then returned to the Office of Planning and Zoning for processing. All or any revisions required to the final plat original will be compiled and forwarded to the owner to enable the owner's engineer to make the revisions at one time or to contact the appropriate County agency on questions concerning such revisions.

OPZ

Date Received

Date Forwarded

Sunny Sheulbrook
Reviewing Agent

9-3-88

9-3-88

Rejected For: _____

DPW/HEALTH

Date In

Date Forwarded

T. J. J. J.
Reviewing Agent

9-7

9-22-88

Rejected For: Original 2

HEALTH/DPW

Date In

Date Forwarded

Reviewing Agent

Rejected For: _____

OPZ

Date Received

Owner/Engineer
Notified

Reviewing Agent

Actions or Revisions Needed: _____

TALBOT PROPERTYSec. 1

<u>LOT #</u>	<u>X PERC (MIN)</u>	<u>IN LOT (FE)</u>	<u>BOTTOM</u>
1	3 min	3.0	8
2	4 min	3.0	7
3	9 min	3.5	8
4	7 min	4	8

Sec. UK

1	6 min	4.5	8.0
2	4 min	3.0	8.0
3	7 min	4.0	8.0
4	8 min	3.0	7.0
5	16 min	4.0	8.0
6	16 min	4.0	8.0
7	4 min	3.0	8.0
8	5 min	3.0	8.0
9	9 min	4.0	8.0
10	5 min	4.0	8.0
11	5 min	4.0	8.0
12	5 min	3.0	8.0
13	3 min	3.0	8.0
14	9 min	4.0	8.0
15	5 min	3.0	4.5
16	11 min	3.5	5.5

FISHER COLLINS & CARTER, INC.

8388 Court Avenue
ELLICOTT CITY, MD 21043

(301) 461-2855

LETTER OF TRANSMITTAL

TO HOWARD COUNTY HEALTH DEPARTMENT
COURT HOUSE SQUARE
ELLICOTT CITY MARYLAND 21043

DATE <u>OCTOBER 22, 1987</u>	JOB NO.
ATTENTION <u>SIO</u>	
RE: <u>TALBOTT PROPERTY</u>	

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via _____ the following items:

- ☐ Shop drawings ☒ Prints ☐ Plans ☐ Samples ☐ Specifications
☒ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION
<u>1</u>			<u>ORIGINAL PLAN FOR APPROVAL</u>

Sent for signature

THESE ARE TRANSMITTED as checked below:

- ☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☒ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☒ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 19 _____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS _____

COPY TO FILE _____

SIGNED: _____

Charles C. Cook

APPLICATION

PERCOLATION TESTING

A 40236

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 574

DATE 10/5

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 Smith Roberts & Assoc

ADDRESS 8307 Main St Ellicott City PHONE 465-5855

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Talbott Property Sec I LOT NO. 4 8 REVISED FINAL

ROAD AND DESCRIPTION Ten Oaks Rd

TAX MAP 28 PARCEL # 46 B

SIZE OF LOT 3 acres TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Mulder
(SIGNATURE OF APPLICANT)

APPROVED BY Jane E. Hadean FOR Deep trenches DATE 8-18-88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/8/87 - PERC OK HOLD FOR PLAT R12

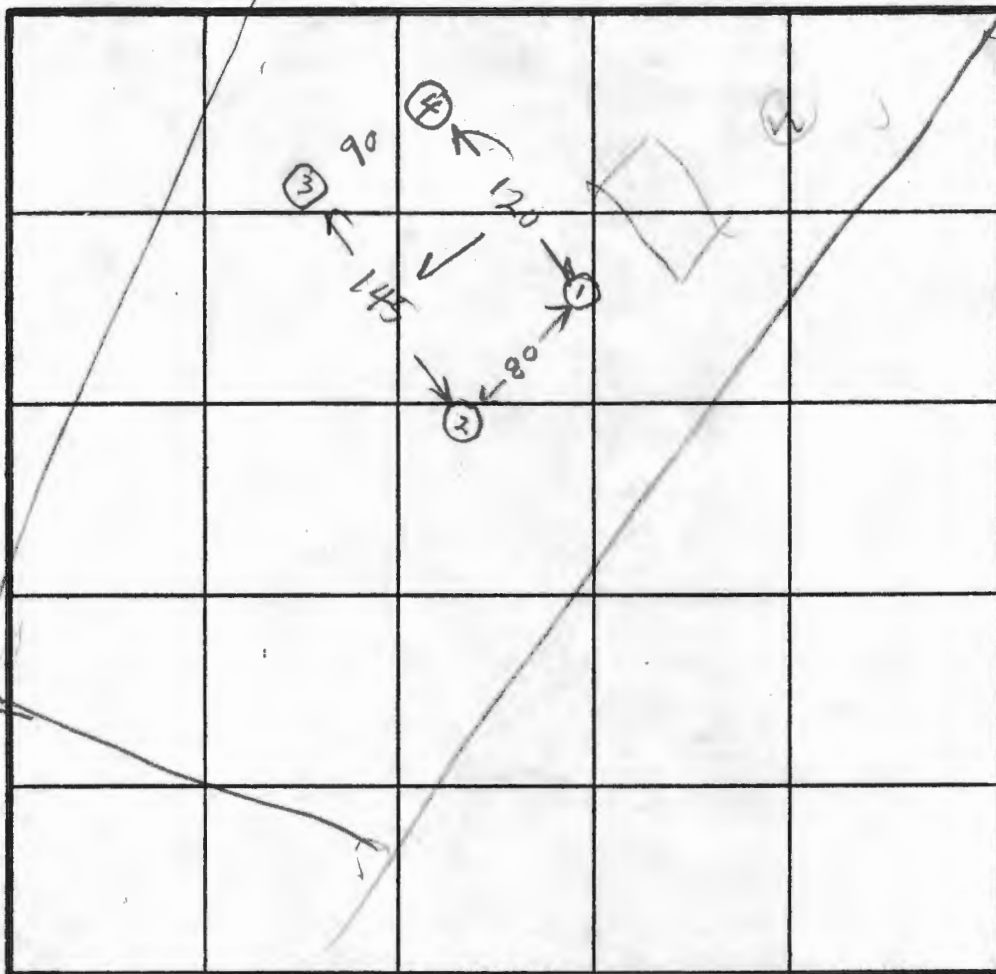
THIS IS NOT A PERMIT

Lot 4

SOIL PROFILE

BROWN CLAY

BROWN & GRAY SAND MILK LOAM



HOLE ELEVATION

①④ = HIGH

②③ LOW

X PARC

7min

INLET 4' ✓

BOTTOM 8' ✓

170 #/BR ✓

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/8/07	1B	8	1056	1057	1057	1058	15min
	1S	4	1057	1106	1106	1121	
	1V	12.5	OK				
	2S	4	1103	1107	1107	1111	4
	2V	11.5	OK				
	3S	4.5	1114	1117	1117	1125	8.
	3V	12.5	OK				
	4V	12	OK				

REMARKS

Pers Hole dug slightly different from Survey Plat
See Plot

TYPE OF SOIL

TESTED BY

B. HODGES

ALSO PRESENT

DAVE

OK BOTTOM MAN

BROWN CLAY
BROWN ORANGE SAND LOAM

BROWN CLAY

BROWN SAND CLAY FEW ROCKS

BROWN CLAY

BROWN MILK SAND LOAM

C1 0642 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.

COUNTY
NUMBER A40236

DATE Received
8 13

DATE WELL COMPLETED
09 22 88
15 20

Depth of Well
22 325 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-88-0137
28 29 30 31 32 33 34 35 36 37

OWNER Capland Construction
STREET OR RFD Ten Oaks Road first name Dan TOWN Dartmouth
SUBDIVISION Talbot Property SECTION 1 LOT B

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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	30	✓
Sand Stone	30	35	
MICKA	35	50	
Sand Stone	50	55	✓
MICKA	55	325	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) ☒ Y ☐ N
TYPE OF GROUTING MATERIAL
CEMENT ☒ CM BENTONITE CLAY ☐ BC
NO. OF BAGS 7 NO. OF POUNDS 200
GALLONS OF WATER 54
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 36 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL ☐ ST CONCRETE ☐ CO
PLASTIC ☐ PL OTHER ☐ OT
MAIN CASING TYPE ☐ PL Nominal diameter top (main) casing (nearest inch) 4 Total depth of main casing (nearest foot) 48

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

SCREEN RECORD
screen type or open hole Insert appropriate code below
STEEL ☐ ST BRASS ☐ BR OPEN HOLE ☐ HO
BRONZE ☐ PL PLASTIC ☐ PL OTHER ☐ OT

DEPTH (nearest ft.)
1 40 2 46 3 325
EACH SCREEN 1 2 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

SLOT SIZE 1 2 3
DIAMETER OF SCREEN 56 (NEAREST INCH) 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.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 4
PUMPING RATE (gal. per min. to nearest gal.) 2
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 20
WHEN PUMPING 160
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: 28
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 } LAND SURFACE (nearest foot) 2
☐ - below }

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)
well 100'
40'
100'

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. 273
Ruth Noyce
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

B 1	3500	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HD-88-0137 fill in this form completely
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) Date Received (APA) 081588 OWNER INFORMATION 15 Last Name Owner First Name 34 Capitamo Const. 36 Street or RFD 55 4280 Ten Oaks Rd 57 Town 70 State 72 Zip 76 Dayton MD 21036 B 3 LOCATION OF WELL 8 COUNTY 21 Howard 23 SUBDIVISION 42 Talbot Prop SECTION 44 46 LOT 48 50 1-008 52 NEAREST TOWN 71 Dayton MILES FROM TOWN (enter 0 if in town) 73 76 77 78 1 MI				
DRILLER INFORMATION Driller's Name 77 License No. 80 Ralph Mayne 253 Firm Name Ralph Mayne Well Drilling Address 9120 Kenna Church Rd. NHAing Signature Ralph Mayne Date 8/14/88 B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 11 NEAR WHAT ROAD 36 Ten Oaks Rd. 34 37 400 DISTANCE FROM ROAD ENTER FT or MI 38 39 FT				
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20 500 USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL 24 28 FEET 150 APPROXIMATE DIAMETER OF WELL NEAREST INCH 6" METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN 30 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT other _____				
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) ☒ 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 DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52 HD-88-0137 Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER 54 63 G A P FORCE 67 68 WRITE INITIALS IN BOX PERMIT No. 70 71 72 73 74 75 76 77 78 79 N HD-88-0137 SPECIAL CONDITIONS				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A 40236 STATE SIGNATURE _____ INSERT S 41 DATE ISSUED 081888 June C. Anderson 2-15-88 43 48 50 55 57 63 NORTH GRID 507000 EAST GRID 0806000 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 8046 N 5047 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION				

Page 1 of 1
Date Sept 22, 1988

Review OK 2/13/89 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0137
Location of property (road) Ten Oaks Road
Subdivision Talbot Property Lot 8 Block 1 Plat 1 Sec. 1
Well Driller Ralph Mayne Owner Capitano Construction
Depth of well 325'
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 20 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 10 G.P.M
Total time 1 hr to reach pumping water level 160 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:30	160 ft	43 Sec		1 1/2 +
9:45	160 ft	43 Sec		1 1/2 +
10:00	160 ft	43 Sec		1 1/2 +
10:15	160 ft	43 Sec		1 1/2 +
10:30	160 ft	43 Sec		1 1/2 +
10:45	160 ft	43 Sec		1 1/2 +
11:00	160 ft	43 Sec		1 1/2 +
11:15	160 ft	43 Sec		1 1/2 +
11:30	160 ft	43 Sec		1 1/2 +
11:45	160 ft	43 Sec		1 1/2 +
12:00	160 ft	43 Sec		1 1/2 +
12:15	160 ft	43 Sec		1 1/2 +
12:30	160 ft	43 Sec		1 1/2 +
12:45	160 ft	43 Sec		1 1/2 +
1:00	160 ft	43 Sec		1 1/2 +
1:15	160 ft	43 Sec		1 1/2 +
1:30	160 ft	43 Sec		1 1/2 +
1:45	160 ft	43 Sec		1 1/2 +
2:00	160 ft	43 Sec		1 1/2 +
2:15	160 ft	43 Sec		1 1/2 +
2:30	160 ft	43 Sec		1 1/2 +
2:45	160 ft	43 Sec		1 1/2 +
3:00	160 ft	43 Sec		1 1/2 +
3:15	160 ft	43 Sec		1 1/2 +
3:30	160 ft	43 Sec		1 1/2 +

HD-224

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Laboratories Administration
201 W. Preston St.
P.O. Box 2355, Baltimore, Maryland 21203
J. Mehsen Joseph, Ph.D., Director

COOL 075 522 8
Lab No. _____

WATER ANALYSIS

Bottle Number: H-1653 Name: LOT #8 CAPITANO LONS. TALCOTT PROPERTY County: HOWARD

Source of Sample: TEN OAKS ROAD Street CLARKSVILLE Town or City Collector: C.B. STRECKER

Sample Type (Circle): Community Source Non-Community Distribution Private MCL Emergency Recheck Routine

Remarks: HO-88-137

County: 13 Plant No. 1 Sampling Station 1 Date Collected 092188 Time 1007 Acid - Iced ✓

Field Data: pH* 1 Chlorine Residual Free 1 Total 1 Specific Conductance 1

✓	ANALYSIS	CODE	RESULTS	✓	ANALYSIS	CODE	RESULTS
	pH*	00403			Arsenic	01002	
	Alkalinity (Total)	00410			Barium	01007	
	pH*, Ca CO ₃ SAT.	70311			Cadmium	01027	
	Alkalinity, Ca CO ₃ SAT.	74023			Chromium	01034	
	Hardness	00900			Lead	01051	
	Ammonia-N	00608			Mercury	71900	
✓	Nitrate-Nitrate N	00630			Selenium	01147	
	Nitrite N	00615			Silver	01077	
	MBAS	38260					
	Chloride	00940			Aluminum	01105	
	Fluoride	00951			Calcium	00916	
	Color*	00081			Copper	01042	
	Turbidity*	00076			Iron	01045	
	Conductance*, SPEC	00095			Magnesium	00927	
	Sulfate	00945			Manganese	01055	
	Total Solids	00500			Nickel	01067	
	Dissolved Solids	70300			Potassium	00937	
					Sodium	00929	
					Zinc	01092	

*Results reported in units, all others in milligrams per liter (ppm)

Date Received _____ Date Reported SEP 27 1988 Chemist E. B. Pay

COUNTY ROAD

VEHICULAR
INGRESS AND EGRESS
IS RESTRICTED

OAKS

AREA TO BE
DEDICATED TO
HOWARD COUNTY,
MARYLAND FOR
THE PURPOSE OF A
PUBLIC ROAD

25' EASEMENT FOR
INGRESS, EGRESS
AND UTILITIES

PROP. 16' WIDE
PRIVATE ENTH
TO LOTS 4

25' EASEMENT
INGRESS
EGRESS TO

LOT 4
3.00 AC.

LOT 3
3.00 AC.

WOOD
LINES

PROPOSED
ROAD
120' / 62'

WILL CARRIAGE
WAY
1/11/90
1/11/90
1/11/90

R=11660.16

1"=100'

SUBDIVISION:

Talbot Property Sec I
Ten Oaks Road

A 40236
LOT NUMBER: 8

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ 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 _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom

Trench 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 absorbent sidewall area by 22%.

LOCATION: Beginning at the front right lot corner place the distribution box 300 feet down the right (575') lot line and 105 feet off the right (575') lot line as seen when facing the property from Ten Oaks Rd. Run the trenches on contour toward the left (200') lot line. 8-1898 JEN

APPLICATION

PERCOLATION TESTING

A 40234

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5TH

DATE 10/5

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 Smith Roberts & Assoc.

ADDRESS 8307 Main St Ellicott City PHONE 465-5855

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Talbot Property Sec I LOT NO. 7

ROAD AND DESCRIPTION Ten Oaks Rd

TAX MAP 28 PARCEL # 46 B

SIZE OF LOT 3 acres TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Mulder
(SIGNATURE OF APPLICANT)

APPROVED BY Jane E. Hadeau FOR Deep trenches DATE 8-18-88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/8/87 PERC OK / hold for Permit RH

THIS IS NOT A PERMIT

SOIL PROFILE

3000
CHAY

PINK
BROWN
SAND
WARM

12

(2)

BROWN
CLAY

PINK
BRUNT
SAND
LOW

21

(3)

BROWN
CLAY

PINK
ORANGE
BROWN
SAND
WORM

25

④

CLAY

EH-12-1079
PINK
ORANGE
Brown
SMD
LAB?

主



$\bar{x}$ perc
4 min

INLET 3'

BOTTOM 7-

160 ∇ 1BR-

Hole
Elevations

③ ④ High

①② Low

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

TEN ON 123 82

[illegible]

REMARKS

Holm Dugger Surveyor Plat See Plat

TYPE OF SOIL

R Han GES

ALSO PRESENT

MARK HAVE PUT

OLEN

TO: BGE,
PUBLIC AFFAIRS OFFICE

PLEASE CONTACT THIS OFFICE TO DISCUSS
YOUR PLANS FOR ~~THE~~ THE ABOVE REFERENCED WELLS.

YOU WILL RECALL THAT EARLIER THIS YEAR
WE HAD AN INCIDENT INVOLVING DAMAGES TO
THE CASING OF ONE OF THE WELLS ON THE PROPERTY.
THESE WELLS WERE DRILLED WHEN THE PROPERTY
WAS PROPOSED ~~FOR~~^{AS} RESIDENTIAL BUILDING LOTS. YOUR
CURRENT USE OF THE PROPERTY MAY MAKE ANY OR
ALL THESE WELLS UNNECESSARY.

WELLS WHICH ARE NOT PLANNED FOR SERVICE ~~ARE~~ SHOULD
~~NOT BE~~ ABANDONED AND SEALED ~~SO THAT~~ RATHER
THAN LEFT STANDING IN ORDER THAT POTENTIAL
SAFETY AND CONTAMINATION RISKS DO NOT DEVELOP.

PLEASE CONTACT ME AT YOUR EARLIEST
CONVENIENCE TO DISCUSS THIS MATTER.

Yt
CLW

JANE - I NEED TO 6/14
FIGURE OUT ADDRESS66
ON THIS ONE.

DIDNT WANT TO HOLD
IT ON MY DESK.

RETURN TO ME
IN A "DAY OR TWO"

Cg.

C.W.

- Called Tony Capitano for B9+E
address on 6/15/90-
- Am waiting for a return call.
on 6/15/90.

B 1 3502 SEQUENCE NO.
(DP. USE ONLY)STATE OF MARYLAND
PERMIT TO DRILL WELL

STATE PERMIT NUMBER

H0-88-0135
fill in this form completely

please print or type

Date Received (APA)

001588

OWNER INFORMATION

15 Last Name 8 CAPITANO 13 Owner 34 COAST
36 4280 TEN OAKS RD 55
57 DAYTON 70 State 72 MD 74 Zip 76 21036

DRILLER INFORMATION

Driller's Name 77 License No. 80 Ralph MAYNE 253
Firm Name Ralph MAYNE WELL DRILLING
Address 9126 Brown Church Rd. Mt Airy
Signature Ralph Mayne 8/1/88 Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
☐ P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
☐ T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
☒ AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY Drive-POINT
 other

REPLACEMENT OR DEEPEMED WELLS
(CIRCLE APPROPRIATE BOX)

- ☒ 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 DEEPMEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

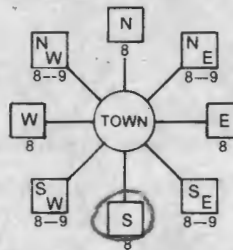
FORCE IN INITIALS PERMIT No. H0-88-0135

SPECIAL CONDITIONS

LOCATION OF WELL

8 COUNTY H0-88-0135
 23 SUBDIVISION TALBOTT AND P.
 SECTION I LOT 006
 52 NEAREST TOWN DAYTON
 MILES FROM TOWN (enter 0 if in town) 1 MI

4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD Ten OAKS RD.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 325 37 DISTANCE FROM ROAD
 ENTER FT or MI FY

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME Howard COUNTY NO. A40234
 STATE SIGNATURE DATE ISSUED June 2, 1988
 NORTH GRID 500000 EAST GRID 0906000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

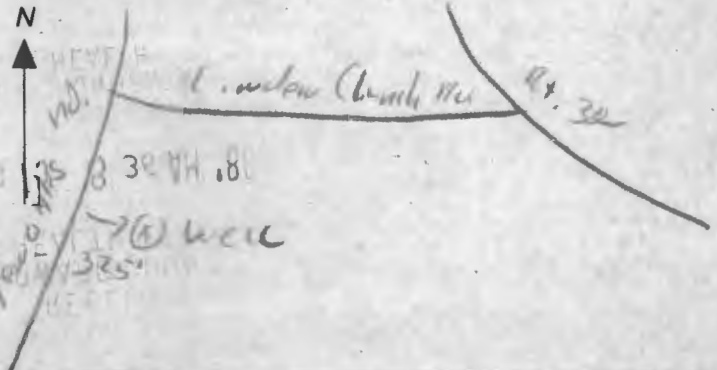
SOURCES OF DRILLING WATER

- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

800
 5008

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



COUNTY

Well Permit No. HO - 88-0135
Location of property (road) Ten Oaks Road
Subdivision Talbot Property Lot 6 Block Plat Sec. 1
Well Driller Ralph Mayne Owner Capitano Construction

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

Time pump started _____ Pumping rate _____
Total time _____ to reach pumping water level _____ ft. below M.P.

[illegible]

SUBDIVISION:

Talbot Property Sec I
Ten Oaks Road

A 40234

LOT NUMBER:

6 Revised final
(old lot 2)

DRY WELL OR DRY WELL AND TRENCH

sq. ft./bedroom

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

Minimum Total Square Feet

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ 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 _____ feet of stone below distribution pipe.

TRENCHES

Trench to be 2 wide

Inlet 3 feet below original grade.

Bottom maximum depth 7 feet below original grade.

Effective area begins at 3 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 absorbent sidewall area by 22%.

LOCATION: Beginning at the front left lot corner place the distribution box 140 feet down the left (490') lot line and 80 feet off the left (490') lot line as seen when facing the property from Ten Oaks Road. Run the trenches on contour toward the right (175'/205') and left (490') lot lines. B-18-88 JEN

WELL ABANDONMENT REPORT

DATE MARCH 21, 1990

PERMIT NUMBER OF ABANDONED WELL (If any)

U N - K N - O W N

UNKNOWN

DRILLER:

HUBER

MICHAEL

(Last Name)

(First Name)

HO-88-0135

OWNER:

BALTIMORE GAS AND ELECTRIC

(Last Name)

(First Name)

WELL LOCATION:

County HOWARD

Subdivision

Section

Lot

Nearest Town CLARKSVILLE

Maryland Grid Location

State Grid Number

E
N

800,000

500,000

0/5	X 5/5
0/0	5/0

Show Well Location by (X)
Within Box

TYPE OF WELL:

☐ Drilled

☐ Jetted

☒ Bored or Augered

☐ Other, specify

DEPTH OF WELL: 320 Feet

TYPE OF CASING:

☐ Steel

☐ Plastic

☐ Concrete

☐ Other, specify OPEN HOLE

SIZE OF CASING: 8" Inches

Was any casing removed? ☐ Yes ☒ No

If Yes, amount removed: Feet

Was casing ripped or perforated? ☐ Yes ☐ No

LOG OF SEALING MATERIAL

Material	Feet	
	From	To
BENTONITE CEMENT SLURRY	0	320

DRILLER

Michael D. Huber
(Signature)

LICENSE #

326

REGION _____

AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health
BUREAU OF ENVIRONMENTAL HEALTH

RECORD OF INVESTIGATION

DISPOSITION	DATE

LOCATION TALBOTT PROPERTY - TEN OAKS RD B.G.E. SUBSTATION ZIP _____

OWNER ☐ OCCUPANT ☐ ADDRESS _____ PHONE _____

COMPLAINANT BOB BITTNER ADDRESS _____ PHONE H 531-5255 W 386-0464

REASON FOR INVESTIGATION B.G.E. JOHN MILLER 977-2242 PUBLIC AFFAIRS - 234-5669 SWITCH BOARD

MR BITTNER OBSERVED 4 BROKEN CASINGS OF WATER WELLS ON THIS
PROPERTY - WELLS NOT ABANDONED. CODES _____

RECEIVED BY CWILLIAMS DATE 3/9/90 ASSIGNED TO _____ DATE _____

DATE OF INVESTIGATION _____ TIME _____ WEATHER _____

REPORT MR MILLER NOT IN 3/9/90; CALL BACK 12TH

BOB BITTNER REPORTS -

HO-88-0142 INTACT

1 NEAR SUBSTATION - CASING BROKEN 400' OPEN

CAPITANO INDICATES 3 WELLS ON PROPERTY

3/12/90 CONVERSATION WITH JOHN MILLER REGARDING THE WELL.
HE AGREED TO LOOK INTO IT AND REPORT BACK.

3/13/90 JOHN MILLER CONFIRMED THE PRESENCE OF THE
DAMAGED WELL. OBTAINED COPIES OF WELL REPORTS FROM THIS OFFICE.

3/14/90 DISCUSSED WELL ABANDONMENT PROCESS, STRESSED
NEED FOR IMMEDIATE PROTECTION OF WELL WHILE ARRANGEMENTS
FOR ABANDONMENT WERE MADE.

3/19/90 J. MILLER INDICATES WELL IS SAFELY COVERED, IS MAKING
ARRANGEMENTS WITH WELL DRILLER FOR ABANDONMENT.

3/23/90 REPORT FROM SITE ENGINEER, WELL CAPED 3/24 BY DRILLER

DATE SUBMITTED _____ SANITARIAN _____

WD-172

3/29/90 ABANDONMENT REPORT RECEIVED -

MATTER RESOLVED

CWILLIAMS



CHARLES CENTER • P.O. BOX 1475 • BALTIMORE, MARYLAND 21203

March 22, 1990

Mr. Craig Williams
Howard County Health Department
3525 H Ellicott Mills Drive
Ellicott City, MD 21043

Dear Mr. Williams:

As a result of our telephone conversation on Tuesday, March 20, I have made arrangements to have the well at our Ten Oaks property, Linden Church Lane and Ten Oaks Road, properly capped by a certified well-driller. The well had been temporarily covered with plywood, anchored to the ground with steel rods at 10:00 A.M. on Thursday, March 15. Yesterday, March 21, the driller completed his work, and I have been assured that the well is in full compliance with your regulations.

Once a determination has been made at a pending Board of Appeals hearing on May 22, 1990 regarding the possible use of the area on which the well is located for the construction of an electrical substation, a decision will be made with regards to possible abandonment of this well. Should we decide to abandon the well, I will advise you of this decision and contract a certified well-driller to do the necessary work to meet your regulations.

Should you need to discuss this issue further, please contact me at 234-5761.

James C. Burke
Lead Engineer
Substation Engineering



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

January 10, 1991

Reply to:

Mr. James C. Burke, Lead Engineer - 281-3600 - *Begun 13/6*
Substation Engineering
Department 37
Baltimore Gas & Electric Company
P. O. Box 1475
Baltimore, Maryland 21203

RE: Well Abandonment Status
Well Tag Permit Number: HO-88-0135
Talbot Property
Baltimore Gas & Electric Company
Ten Oaks Substation

Dear Mr. Burke:

The enclosed well abandonment report has been filed in this office in response to a request for corrective action regarding a damaged well casing on the above referenced property. Now that this issue has been resolved, the status of the three other drilled wells on the property should be considered.

Our understanding is that the well casing (tag number: HO-88-0135) was damaged by a construction vehicle because no one was aware of its location. It is suggested that steps be taken to ensure that the other drilled wells on the property do not suffer the same fate.

If there are no plans to put any of the remaining wells into service, one approach would be to have them abandoned and sealed. On the other hand, there may be some advantage to maintaining one or more of these wells for potential future use. In that case, it is suggested that some form of protection such as fencing be considered so these wells are not inadvertently damaged.

If you have any questions relative to this matter, please call me at 461-9933.

Very truly yours,

Craig Williams, Director
Water and Sewerage Program

CW:jr

Enclosure

HARDIN-HUBER, INC.
6720 Ft. Smallwood Road
Baltimore, Maryland 21226
(301) 789-5020

DATE March 26, 1990

TO

SUBJECT WELL ABANDONMENT

HOWARD COUNTY HEALTH DEPARTMENT

3525 ELLICOTT MILLS ROAD

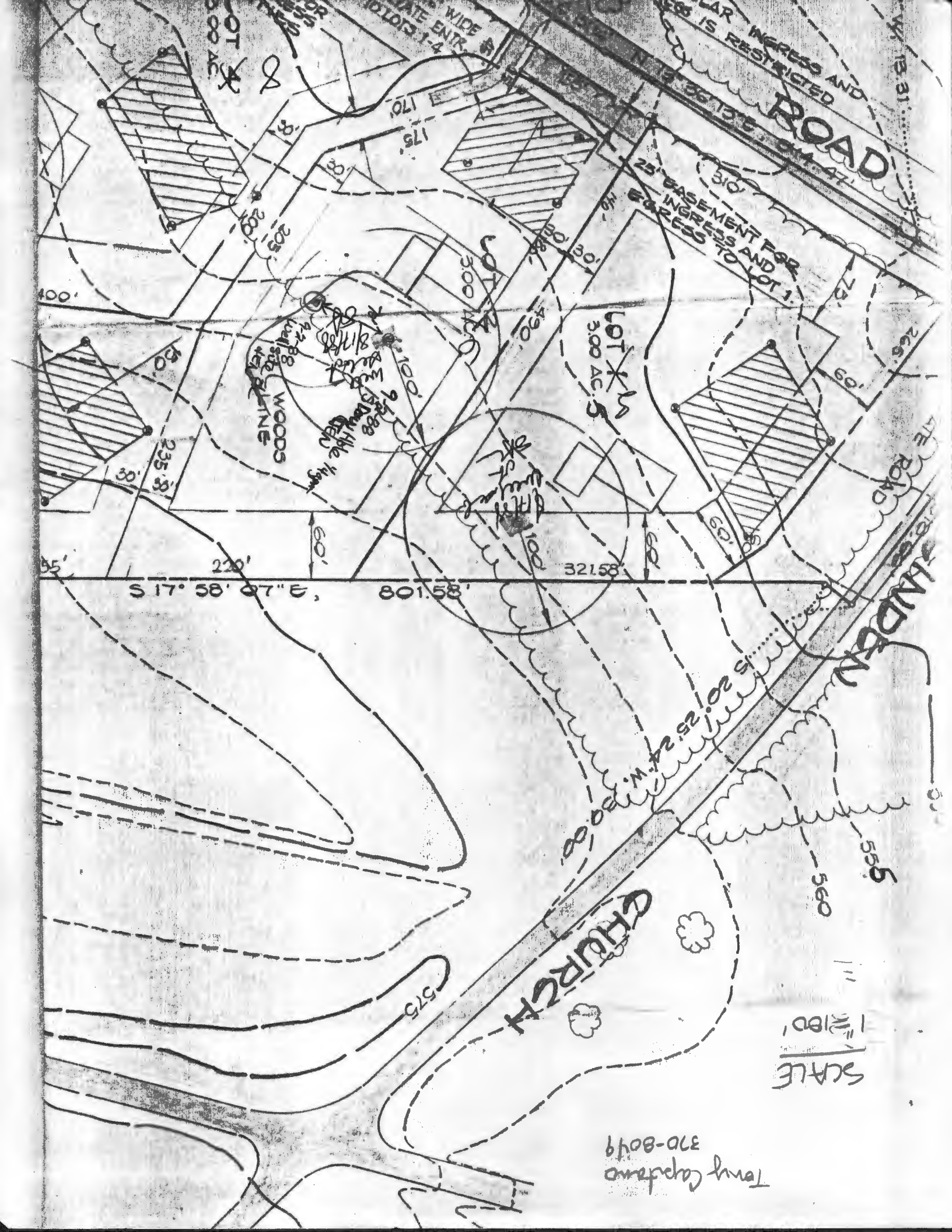
ELLICOTT CITY, MD 21043

ENCLOSED IS A WELL ABANDONMENT REPORT FOR A PROEJCT FOR BG&E.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT ME.

SIGNED DONNA DAY

PLEASE REPLY ☐ NO REPLY NECESSARY



File No. DP 90196DPZ - ROUTE 5 STATION

(Name)

DEPARTMENT OF PLANNING AND ZONING
ROAD CONSTRUCTION DRAWINGS OR SDP/ORIGINAL
SIGNATURE APPROVAL

This form is for the processing of originals for signature approvals. If it is found necessary for any corrections or additions to be made on the original, the corrections needed must be stated and forwarded to the Department of Planning and Zoning for processing, minus the signature. All or any revisions required to the original will be compiled and forwarded to the owner to enable the owner's engineer to make the revisions at one time or to contact the appropriate County agency on questions concerning such revisions.

DPZDate ReceivedDate ForwardedC. Mendenhall7-20-907-23-90

Reviewing Agent

Rejected For: _____

SCSDate ReceivedDate ForwardedJohn P. Peterson7/23/907/27/90

Reviewing Agent

Rejected For: _____

DPW/HEALTHDate ReceivedDate ForwardedL. L. L. L.7-318-7-90

Reviewing Agent

Rejected For: Orig. 7 no facilities req'd.DILPDate ReceivedDate Forwarded

Reviewing Agent

Rejected For: _____

HEALTH/DPW/CHIEF, DCP&LDDate ReceivedDate Forwarded

Reviewing Agent

Rejected For: _____

1236C

Real Property Data Search (w4)

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption		View GroundRent Registration	
Tax Exempt:		Special Tax Recapture:			
Exempt Class:		NONE			
Account Identifier:		District - 05 Account Number - 408121			
Owner Information					
Owner Name:		BALTIMORE GAS AND ELECTRIC CO ATTN TAX ACCOUNTING		Use:	RESIDENTIAL
				Principal Residence:	NO
Mailing Address:		PO BOX 1475 BALTIMORE MD 21203-1475		Deed Reference:	/01943/ 00094
Location & Structure Information					
Premises Address:		TEN OAKS RD CLARKSVILLE 21029-0000		Legal Description:	LOT 5 1.3138 A. TEN OAKS RD TALBOTT PROPERTY
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:
0028	0015	0046		0000	
					Block:
					5
					Lot:
					5
					Assessment Year:
					2017
					Plat No:
					8214
					Plat Ref:
Special Tax Areas:		Town:		NONE	
		Ad Valorem:		100	
		Tax Class:			
Primary Structure Built	Above Grade Living Area	Finished Basement Area	Property Land Area	County Use	
			1.3138 AC		
Stories	Basement	Type	Exterior	Full/Half Bath	Garage
					Last Major Renovation
Value Information					
Base Value		Value		Phase-in Assessments	
		As of		As of	
		01/01/2017		07/01/2018	
				As of	
				07/01/2019	
Land:	0	0			
Improvements	0	0			
Total:	0	0		0	0
Preferential Land:	0				0
Transfer Information					
Seller: EAGLE POINT LANDING PARTNERSHIP		Date: 01/12/1989		Price: \$460,000	
Type: NON-ARMS LENGTH OTHER		Deed1: /01943/ 00094		Deed2:	
Seller:		Date:		Price:	
Type:		Deed1:		Deed2:	
Seller:		Date:		Price:	
Type:		Deed1:		Deed2:	
Exemption Information					
Partial Exempt Assessments:	Class	07/01/2018		07/01/2019	
County:	000	0.00			
State:	000	0.00			
Municipal:	000	0.00 0.00		0.00 0.00	
Tax Exempt:		Special Tax Recapture:			
Exempt Class:		NONE			
Homestead Application Information					