

2/22/88 AM

04 - 330 730

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

P 40747

A 38777

DISTRICT 4th

DATE 1/4/88

DATE SYSTEM APPROVED 2-22-88

INSPECTOR S. Abel

Arnold Septic Services, Inc.

IS PERMITTED TO INSTALL X ALTER       

ADDRESS P. O. Box 15, Woodbine, Maryland 21797 PHONE 795-7873

SUBDIVISION Veatch Property ROAD 2147 Route 94 LOT 1

PROPERTY OWNER John T. Ridgley

ADDRESS       

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES        NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - <sup>180</sup>~~187~~ sq. ft. per bedroom. Trench to be <sup>3</sup>~~2~~ feet wide. Inlet <sup>3</sup>~~3 1/2~~ feet below original grade. Bottom maximum depth ~~5 1/2~~ feet below original grade. Effective area begins at ~~3 1/2~~ feet below original grade. ~~5 1/2~~ feet of stone below distribution pipe.

LOCATION - Beginning from the right front lot corner, place the 1st trench <sup>100</sup>~~100 1/2~~ feet down the right lot line and 25 feet off the right line as seen when facing property from Route 94. Run trenches along contour towards the left lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *ok/cw*

PLANS APPROVED BY B. Nixon DATE 3/23/87

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

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

NOTE: IF DEEP TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

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

PERMIT VOID AFTER TWO 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 OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 38777



MD. RT. 94

25' USE-IN - COMMON EASEMENT  
FOR INGRESS AND EGRESS  
TO MD. ROUTE 94 FOR  
LOTS #1 AND 2

ORIGINAL ELEV  
AT TIME OF  
PERC. 630.0

ELEV.  
(H)

ELEV.  
(G)

SEPTIC  
TANK

ELEV  
(F)

CL. DAT  
75'

WELL  
SITE

CL. AT HOUSE  
ELEV (E)

GARAGE  
ELEV-C

HOUSE

LOT #1  
3.000 Ac $\pm$

SEPTIC ELEV. SCHED.

(A) 2ND FLOOR ELEV.	646.83 ✓
(B) 1ST FLOOR ELEV.	638.60 ✓
(C) GARAGE FLOOR ELEV.	636.00 ✓
(D) BASEMENT FLOOR ELEV.	629.17 ✓
(E) OUTLET FROM FOUNDATION	631.50 ✓
(F) INLET OF SEPTIC TANK	628.35 ✓
(G) OUTLET OF SEPTIC TANK	628.10 ✓
(H) INLET OF DRAIN FIELDS	626.00
	626.50 ✓

SCALE 1" = 50'

FOR DEPOSIT ONLY  
HOWARD COUNTY HEALTH DEPARTMENT  
10-103516-02

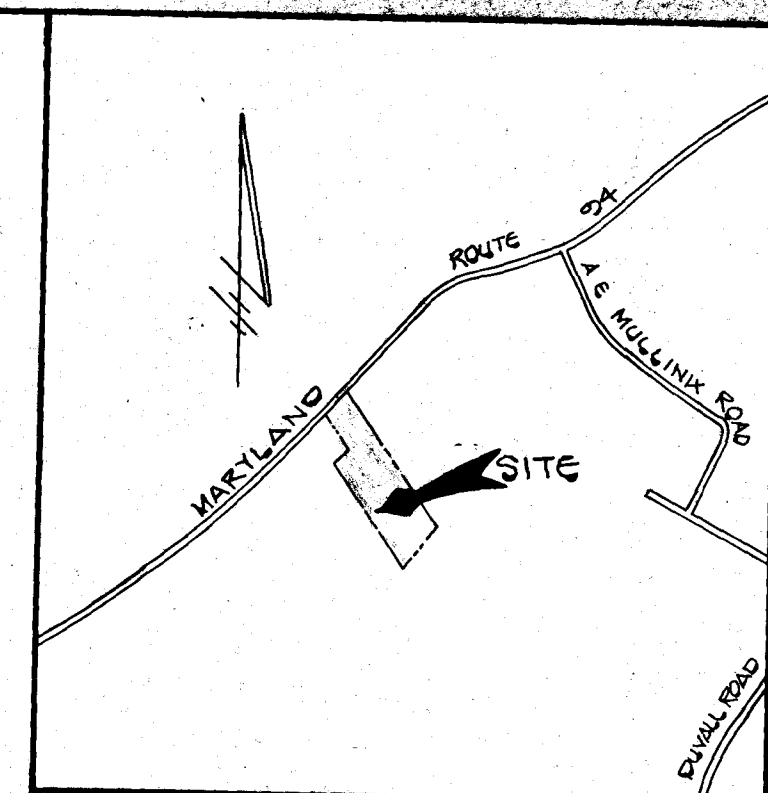
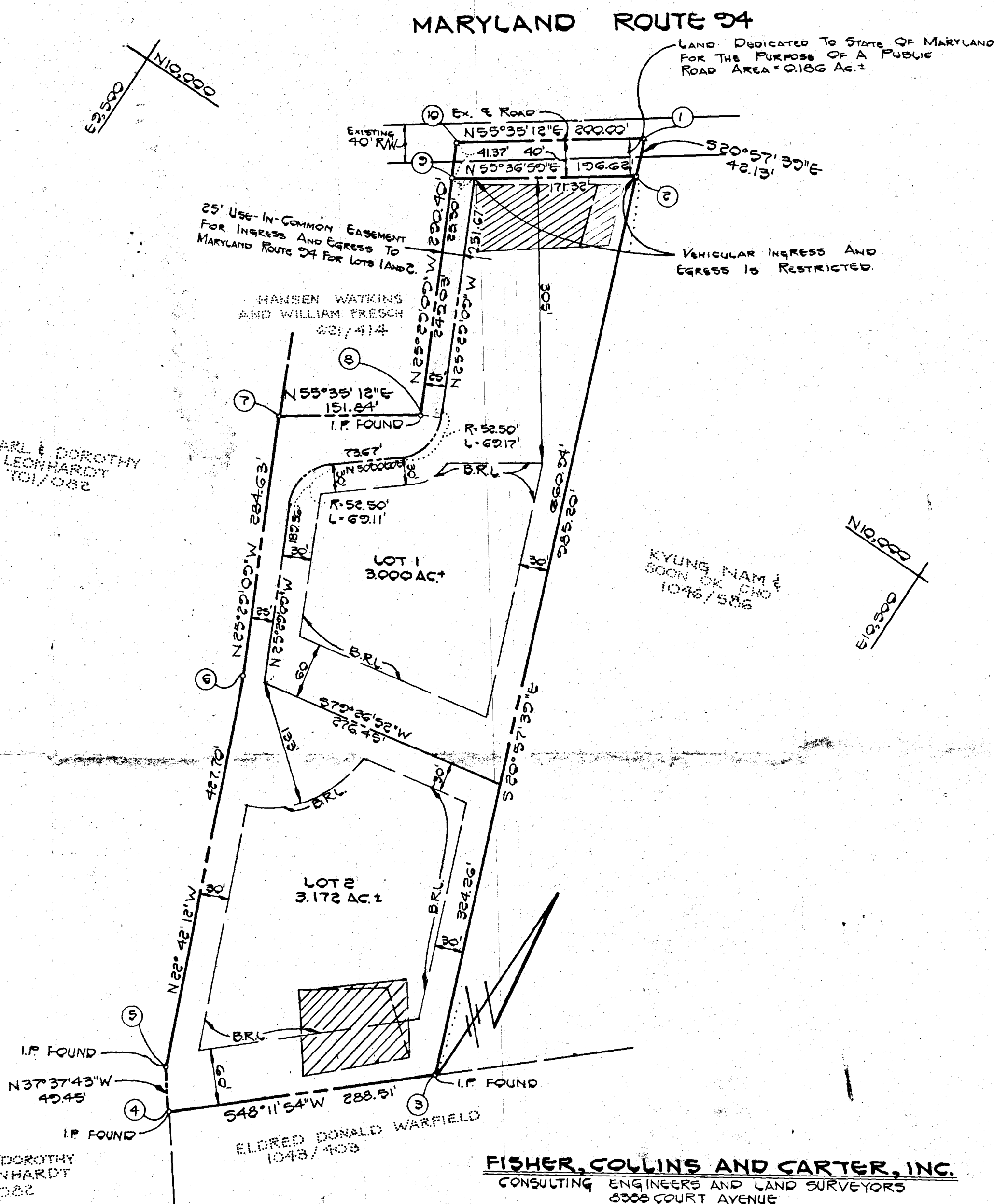
4/27/87  
elevations only  
S.H.W.

4/27/87  
Changes noted on this  
plat sent to Mrs. Fiddley  
S.H.W.

BLDG. PERMIT. SIGNED  
AND RETURNED 4-27-87  
BP#11443  
LOT # 2  
S.H.W.

COORDINATE TABLE		
NO.	NORTH	EAST
1	10223.51	9993.87
2	10184.18	10008.94
3	9264.18	10361.37
4	9071.87	10146.30
5	9111.04	10116.11
6	9505.59	9951.03
7	9762.53	9828.56
8	9848.34	9953.83
9	10073.14	9846.67
10	10110.48	9828.87

NOTE: FOR FLAG OR PIPE STEM LOTS, REFUSE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE TO BE PROVIDED AT THE JUNCTION OF FLAG OR PIPE STEM AND THE ROAD R/W AND NOT ONTO THE FLAG OR PIPE STEM DRIVEWAY.



VICINITY MAP  
SCALE: 1"=1200'

# NOTES:

- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.
- SUBJECT PROPERTY ZONED "R" PER 8/2/85 COMPREHENSIVE ZONING PLAN.
- THIS PLAN IS SUBJECT TO VP-87-69.
- THE COORDINATES SHOWN HEREON ARE BASED ON ASSUMED DATUM.
- B.R.L. - DENOTES BUILDING RESTRICTION LINE.
- PROPERTY SHOWN IS LOCATED ON TAX MAP NO. 7, PARCEL NO. 358.
- DECLARATION OF MAINTENANCE AGREEMENT RECORDED IN LIBER 1636, FOLIO 543.

F-87-144

RECORDED FILE 7191  
ON 5-13-87

## AREA TABULATION

TOTAL NUMBER OF LOTS TO BE RECORDED	2
TOTAL AREA OF BUILDABLE LOTS	6.172 AC ±
TOTAL AREA OF ROAD DEDICATION TO BE RECORDED	0.106 AC ±
TOTAL AREA OF SUBDIVISION TO BE RECORDED	6.358 AC ±

KARL & DOROTHY  
C. LEONHARDT  
701/082

FISHER, COLLINS AND CARTER, INC.  
CONSULTING ENGINEERS AND LAND SURVEYORS  
8008 COURT AVENUE  
ELICOTT CITY, MARYLAND 21043  
TELE: (301) 461-2855

OWNER AND DEVELOPER  
CARMAN ASSOCIATES  
P.O. BOX 122  
ELICOTT CITY, MARYLAND 21043

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.

*James J. H. Harris* 4-27-87  
HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING  
*James J. H. Harris* 5-28-87  
DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS, AND PUBLIC ROADS.  
HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.  
*Shirley F. Nemej* 5-11-87  
DIRECTOR DATE

## OWNER'S CERTIFICATE:

WE, CARMAN ASSOCIATES, A MARYLAND GENERAL PARTNERSHIP, OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THE FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, STORM DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES IN AND UNDER ALL ROAD OR STREET RIGHTS-OF-WAY AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THEIR CONSTRUCTION, REPAIR AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERECTED ON OR OVER THE SAID EASEMENTS AND RIGHTS-OF-WAY. WITNESS OUR HANDS THIS 10th DAY OF MARCH 1987

*Ronald B. Carter*  
RONALD B. CARTER - GENERAL PARTNER  
*Philip M. Anglitz*  
PHILIP M. ANGLITZ - GENERAL PARTNER

*Donna F. Bidon*  
WITNESS  
*Donna F. Bidon*  
WITNESS

## SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A SUBDIVISION OF ALL OF THE LANDS CONVEYED BY RICHARD N. VEACH AND MARY KATHERINE VEACH, HIS WIFE, TO CARMAN ASSOCIATES, A MARYLAND GENERAL PARTNERSHIP, BY DEED DATED DECEMBER 17, 1986 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER C.M.P. 1589 AT FOLIO 421 AND THAT ALL MONUMENTS ARE IN PLACE OR SHALL BE IN PLACE PRIOR TO THE ACCEPTANCE OF THE STREETS IN THE SUBDIVISION BY HOWARD COUNTY, MARYLAND AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

*Charles J. Grovo, Sr.*  
CHARLES J. GROVO, SR., L.S. #10763  
DATE

## GREEN ACRES

SIGNED LOTS 1 AND 2. FILE COPY  
TAX MAP 7 PARCEL 358

ZONING R  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE: 1"=100'  
MARCH 3, 1987

<b>B 1</b> <span style="font-size: 2em; font-weight: bold;">7613</span> SEQUENCE NO. (OEP USE ONLY) <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER <span style="font-size: 1.5em; font-weight: bold;">40-81-1988</span> <small>fill in this form completely</small>
<b>Date Received</b> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <b>OWNER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>8</span> <span>13</span> </div> <div style="display: flex; justify-content: space-between;"> <span>15</span> <span>34</span> </div> <div style="display: flex; justify-content: space-between;"> <span>36</span> <span>55</span> </div> <div style="display: flex; justify-content: space-between;"> <span>57</span> <span>76</span> </div> </div>	<b>B 3</b> <b>LOCATION OF WELL</b> <span style="font-size: 1.2em;">\$40.00</span> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>1</span> <span>21</span> </div> <div style="display: flex; justify-content: space-between;"> <span>23</span> <span>42</span> </div> <div style="display: flex; justify-content: space-between;"> <span>44</span> <span>50</span> </div> <div style="display: flex; justify-content: space-between;"> <span>52</span> <span>71</span> </div> </div>	<b>DRILLER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; margin: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>1</span> <span>40</span> </div> <div style="display: flex; justify-content: space-between;"> <span>15</span> <span>34</span> </div> <div style="display: flex; justify-content: space-between;"> <span>36</span> <span>55</span> </div> <div style="display: flex; justify-content: space-between;"> <span>57</span> <span>76</span> </div> </div>
<b>B 2</b> <b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <span style="font-size: 1.2em;">5</span> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <span style="font-size: 1.2em;">500</span>	<b>B 4</b> <b>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</b> 	<b>NEAR WHAT ROAD</b> <span style="font-size: 1.2em;">Florence Rd</span> <b>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</b> 
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	<b>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</b> <div style="display: flex; justify-content: space-between;"> <div> <b>COUNTY NAME</b> <span style="font-size: 1.2em;">HOWARD</span>  <b>OEP SIGNATURE</b> <span style="font-size: 1.2em;">B. Wilson</span>  <b>DATE ISSUED</b> <span style="font-size: 1.2em;">03/20/87</span> </div> <div> <b>COUNTY NO.</b>  <b>STATE HEALTH INSERT S</b>  <b>EXP. DATE</b> <span style="font-size: 1.2em;">09/20/87</span> </div> </div>	
APPROXIMATE DEPTH OF WELL <span style="font-size: 1.2em;">200</span> FEET APPROXIMATE DIAMETER OF WELL <span style="font-size: 1.2em;">6</span> INCH	<b>SHOW MAJOR FEATURES OF BOX &amp; LOCATE WELL WITH AN X</b> <b>SOURCES OF DRILLING WATER</b> 1. 2. 3. <b>WRITE THE BOX NUMBER FROM THE MAP HERE</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px;">             E <span style="font-size: 1.2em;">712</span>              N <span style="font-size: 1.2em;">541</span> </div> <div style="text-align: right;">             000 000           </div> </div>	
<b>METHOD OF DRILLING (circle one)</b> <div style="display: flex; justify-content: space-between;"> <div> <b>BORED (or Augered)</b>  <input checked="" type="checkbox"/> AIR-ROTARY  <input type="checkbox"/> CABLE         </div> <div> <b>JETTED</b>  <input type="checkbox"/> AIR-PERCussion  <input type="checkbox"/> REVERSE-ROTARY         </div> <div> <b>Jetted &amp; DRIVEN</b>  <input type="checkbox"/> ROTARY (Hydraulic Rotary)  <input type="checkbox"/> Drive-POINT         </div> </div>	<b>REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)</b> <input checked="" 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 type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <span style="font-size: 1.2em;">41</span>	
<b>Not to be filled in by driller (OEP USE ONLY)</b> APPROP. PERMIT NUMBER <span style="font-size: 1.2em;">GAP</span> FORCE <span style="font-size: 1.2em;">BA</span> WRITE INITIALS IN BOX PERMIT NO. <span style="font-size: 1.2em;">40-81-1988</span> SPECIAL CONDITIONS		

<b>C1</b> 2319 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. <small>(OEP USE ONLY)</small>	<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. COUNTY NUMBER <b>A 38777-W</b>																																																		
DATE Received <span style="border: 1px solid black; padding: 2px;">033187</span>		PERMIT NO. <span style="border: 1px solid black; padding: 2px;">110481-1988</span>																																																			
DATE WELL COMPLETED <span style="border: 1px solid black; padding: 2px;">033187</span>		FROM "PERMIT TO DRILL WELL" <span style="border: 1px solid black; padding: 2px;">110481-1988</span>																																																			
OWNER <b>INDIGELY</b> STREET OR RFD <b>RT 94</b> SUBDIVISION <b>VIACH PROP MAP 7 P.35</b> SECTION <b>1</b> LOT <b>1</b>		Depth of Well <span style="border: 1px solid black; padding: 2px;">160</span> (TO NEAREST FOOT)																																																			
<b>WELL LOG</b> Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle Appropriate Box) <span style="border: 1px solid black; padding: 2px;">Y</span> <span style="border: 1px solid black; padding: 2px;">N</span> TYPE OF GROUTING MATERIAL CEMENT <span style="border: 1px solid black; padding: 2px;">CM</span> BENTONITE CLAY <span style="border: 1px solid black; padding: 2px;">BC</span> NO. OF BAGS <span style="border: 1px solid black; padding: 2px;">6</span> NO. OF POUNDS <span style="border: 1px solid black; padding: 2px;">600</span> GALLONS OF WATER <span style="border: 1px solid black; padding: 2px;">30</span> DEPTH OF GROUT SEAL (to nearest foot) from <span style="border: 1px solid black; padding: 2px;">0</span> ft. to <span style="border: 1px solid black; padding: 2px;">18</span> ft. (enter 0 if from surface)																																																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">Check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr><td>Top Soil</td><td>0</td><td>2</td><td></td></tr> <tr><td>B. Shale</td><td>2</td><td>10</td><td></td></tr> <tr><td>Tan Slate</td><td>10</td><td>58</td><td></td></tr> <tr><td>B. slate</td><td>58</td><td>61</td><td>✓</td></tr> <tr><td>Tan slate</td><td>61</td><td>70</td><td></td></tr> <tr><td>B. slate</td><td>70</td><td>71</td><td>✓</td></tr> <tr><td>Tan slate</td><td>71</td><td>82</td><td></td></tr> <tr><td>B. slate</td><td>82</td><td>84</td><td></td></tr> <tr><td>Tan slate</td><td>84</td><td>100</td><td></td></tr> <tr><td>B. slate</td><td>100</td><td>160</td><td></td></tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing	FROM	TO	Top Soil	0	2		B. Shale	2	10		Tan Slate	10	58		B. slate	58	61	✓	Tan slate	61	70		B. slate	70	71	✓	Tan slate	71	82		B. slate	82	84		Tan slate	84	100		B. slate	100	160		<b>CASING RECORD</b> casing types insert appropriate code below <table style="width: 100%;"> <tr> <td><span style="border: 1px solid black; padding: 2px;">ST</span> STEEL</td> <td><span style="border: 1px solid black; padding: 2px;">CO</span> CONCRETE</td> </tr> <tr> <td><span style="border: 1px solid black; padding: 2px;">PL</span> PLASTIC</td> <td><span style="border: 1px solid black; padding: 2px;">OT</span> OTHER</td> </tr> </table> MAIN CASING TYPE <span style="border: 1px solid black; padding: 2px;">ST</span> Nominal diameter top (main) casing (nearest inch) <span style="border: 1px solid black; padding: 2px;">6</span> Total depth of main casing (nearest foot) <span style="border: 1px solid black; padding: 2px;">24</span> OTHER CASING (if used) diameter inch <span style="border: 1px solid black; padding: 2px;"></span> depth (feet) from <span style="border: 1px solid black; padding: 2px;"></span> to <span style="border: 1px solid black; padding: 2px;"></span>		<span style="border: 1px solid black; padding: 2px;">ST</span> STEEL	<span style="border: 1px solid black; padding: 2px;">CO</span> CONCRETE	<span style="border: 1px solid black; padding: 2px;">PL</span> PLASTIC	<span style="border: 1px solid black; padding: 2px;">OT</span> OTHER
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<b>SCREEN RECORD</b> screen type or open hole insert appropriate code below <table style="width: 100%;"> <tr> <td><span style="border: 1px solid black; padding: 2px;">ST</span> STEEL</td> <td><span style="border: 1px solid black; padding: 2px;">BR</span> BRASS</td> <td><span style="border: 1px solid black; padding: 2px;">HO</span> OPEN HOLE</td> </tr> <tr> <td><span style="border: 1px solid black; padding: 2px;">PL</span> PLASTIC</td> <td><span style="border: 1px solid black; padding: 2px;">OT</span> OTHER</td> <td></td> </tr> </table> DEPTH (nearest ft.) <table style="width: 100%;"> <tr> <td><span style="border: 1px solid black; padding: 2px;">110</span></td> <td><span style="border: 1px solid black; padding: 2px;">19</span></td> <td><span style="border: 1px solid black; padding: 2px;">160</span></td> </tr> </table> SLOT SIZE 1 <span style="border: 1px solid black; padding: 2px;"></span> 2 <span style="border: 1px solid black; padding: 2px;"></span> 3 <span style="border: 1px solid black; padding: 2px;"></span> DIAMETER OF SCREEN <span style="border: 1px solid black; padding: 2px;"></span> (NEAREST INCH)		<span style="border: 1px solid black; padding: 2px;">ST</span> STEEL	<span style="border: 1px solid black; padding: 2px;">BR</span> BRASS	<span style="border: 1px solid black; padding: 2px;">HO</span> OPEN HOLE	<span style="border: 1px solid black; padding: 2px;">PL</span> PLASTIC	<span style="border: 1px solid black; padding: 2px;">OT</span> OTHER		<span style="border: 1px solid black; padding: 2px;">110</span>	<span style="border: 1px solid black; padding: 2px;">19</span>	<span style="border: 1px solid black; padding: 2px;">160</span>	<b>PUMPING TEST</b> HOURS PUMPED (nearest hour) <span style="border: 1px solid black; padding: 2px;">3</span> PUMPING RATE (gal. per min. to nearest gal.) <span style="border: 1px solid black; padding: 2px;">12</span> METHOD USED TO MEASURE PUMPING RATE <span style="border: 1px solid black; padding: 2px;">Bucket</span> WATER LEVEL (distance from land surface) BEFORE PUMPING <span style="border: 1px solid black; padding: 2px;">36</span> WHEN PUMPING <span style="border: 1px solid black; padding: 2px;">50</span> TYPE OF PUMP USED (for test) <span style="border: 1px solid black; padding: 2px;">A</span> air <span style="border: 1px solid black; padding: 2px;">P</span> piston <span style="border: 1px solid black; padding: 2px;">T</span> turbine <span style="border: 1px solid black; padding: 2px;">C</span> centrifugal <span style="border: 1px solid black; padding: 2px;">R</span> rotary <span style="border: 1px solid black; padding: 2px;">O</span> other (describe below) <span style="border: 1px solid black; padding: 2px;">J</span> jet <span style="border: 1px solid black; padding: 2px;">S</span> submersible																																										
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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 10.17.03 "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.		<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: <span style="border: 1px solid black; padding: 2px;">S</span> CAPACITY: GALLONS PER MINUTE (to nearest gallon) <span style="border: 1px solid black; padding: 2px;">31</span> PUMP HORSE POWER <span style="border: 1px solid black; padding: 2px;">37</span> PUMP COLUMN LENGTH (nearest ft.) <span style="border: 1px solid black; padding: 2px;">43</span> CASING HEIGHT (circle appropriate box and enter casing height) <span style="border: 1px solid black; padding: 2px;">+</span> above <span style="border: 1px solid black; padding: 2px;">-</span> below LAND SURFACE <span style="border: 1px solid black; padding: 2px;">1</span> (nearest foot)																																																			
DRILLERS IDENT. NO. <b>40</b> DRILLER SIGNATURE <b>George F. Easterday</b> SIGNATURE ON APPLICATION <b>George F. Easterday</b>		<b>LOCATION OF WELL ON LOT</b> SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) 70' to well 100' to road																																																			
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T <span style="border: 1px solid black; padding: 2px;"></span> (E.R.O.S.) <span style="border: 1px solid black; padding: 2px;"></span> WQ <span style="border: 1px solid black; padding: 2px;"></span> TELESCOPE CASING <span style="border: 1px solid black; padding: 2px;"></span> LOG INDICATOR <span style="border: 1px solid black; padding: 2px;"></span> OTHER DATA <span style="border: 1px solid black; padding: 2px;"></span>		GRAVEL PACK <span style="border: 1px solid black; padding: 2px;"></span> to <span style="border: 1px solid black; padding: 2px;"></span> IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <span style="border: 1px solid black; padding: 2px;"></span>																																																			



C12319

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 38777-W

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

10-481-1988

DATE Received

DATE WELL COMPLETED

Depth of Well

2216026

(TO NEAREST FOOT)

OWNER

STREET OR RFD

SUBDIVISION

VEACH PROP MAP 7 P.358

SECTION

LOT

1

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
Top Soil	0	2
Bk Shale	2	10
Tan Slate	10	58
Bk slate	58	61
Tan Slate	61	70
Bk slate	70	71
Tan slate	71	82
Bk slate	82	84
Tan slate	84	100
Bk slate	100	160

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

yesno

Y44N44

TYPE OF GROUTING MATERIAL

CEMENTCM

BENTONITE CLAYBC

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from

ft. to

ft.

(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STCO

STEELCONCRETE

PLOT

PLASTICOTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

ST

6

20

606163646670

OTHER CASING (if used)

diameter inch

depth (feet) from to

EACH CASING

SCREEN RECORD

screen type or open hole

insert appropriate code below

STBRHO

STEELBRASSOPEN HOLE

PLPL

PLASTICOTHER

DEPTH (nearest ft.)

EACH SCREEN

1H019160

8911151721

2

232426303236

3

383941454751

SLOT SIZE 123

DIAMETER OF SCREEN

(NEAREST INCH)

5660

from to

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 10.17.15 "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.

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

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

7072747576

TELESCOPE CASING LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

89

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

1115

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

1720

WHEN PUMPING

2225

TYPE OF PUMP USED (for test)

Aair

Ppiston

Tturbine

Ccentrifugal

Rrotary

Oother (describe below)

Jjet

Ssubmersible

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)

3135

PUMP HORSE POWER

3741

PUMP COLUMN LENGTH (nearest ft.)

4347

CASING HEIGHT (circle appropriate box and enter casing height)

+above

LAND SURFACE

-below

(nearest foot)

5051

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)

Lot 60 x 110

Well

20'

200'

Road

3-31-87  
12:30

Review 1-11-88 OK COPY OF COMP. REPORT  
original is 1st submission  
S.A.W.  
~~COPY MISSING~~ (DATE OF ~~Comp~~)

~~COM. MISSING~~ (D) DATE OF ~~COM. P.~~

Depth of well 160 126 Pm  
Distance of measuring point (M.P.) above ground \_\_\_\_\_  
Static water level (S.W.L.) below M.P. 36 feet

Time pump started 1:15 Pumping rate 12 gpm  
Total time 15 to reach pumping water level 49 ft. below M.P.

[illegible]



4/14/88 - NTH.

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒  
Replacement ☐

Receipt # 41513  
Date 4/13/88

Name of Installer ROBERT L. FEEDER CO., INC.

Telephone 781-4655

License Number \_\_\_\_\_

Certified Well Pump Installer ☒ Well Driller \_\_\_\_\_ Registered Plumber ☒

Name of Property Owner JAY RIDGELY

Telephone 854-6004

Subdivision GREEN ACRES Lot # 1

Well Tag # HO-81-1988

Site Address 2147 ROUTE 94

Pump

1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible ☒
2. Make GRISWOLD-DEMING
3. Model # 3ALN
4. Capacity 8 GPM
5. Pump exceeds well capacity Yes \_\_\_\_\_ No ☒
6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards ☒ Other \_\_\_\_\_

Motor

1. Horsepower 1/2
2. RPM 3450
3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 ☒

Pitless Adapter

1. Make MERCILO
2. Model # MB-10
3. Depth 42" +

Tank

1. Capacity CAPTIVE AIR  
WX-202
2. Pressure relief valve? YES

Piping

1. Type POLY.
2. Size 1"
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 42" +

Well data

1. Depth 160 ft.
2. Yield 12 GPM
3. Static water level 35 ft.
4. Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

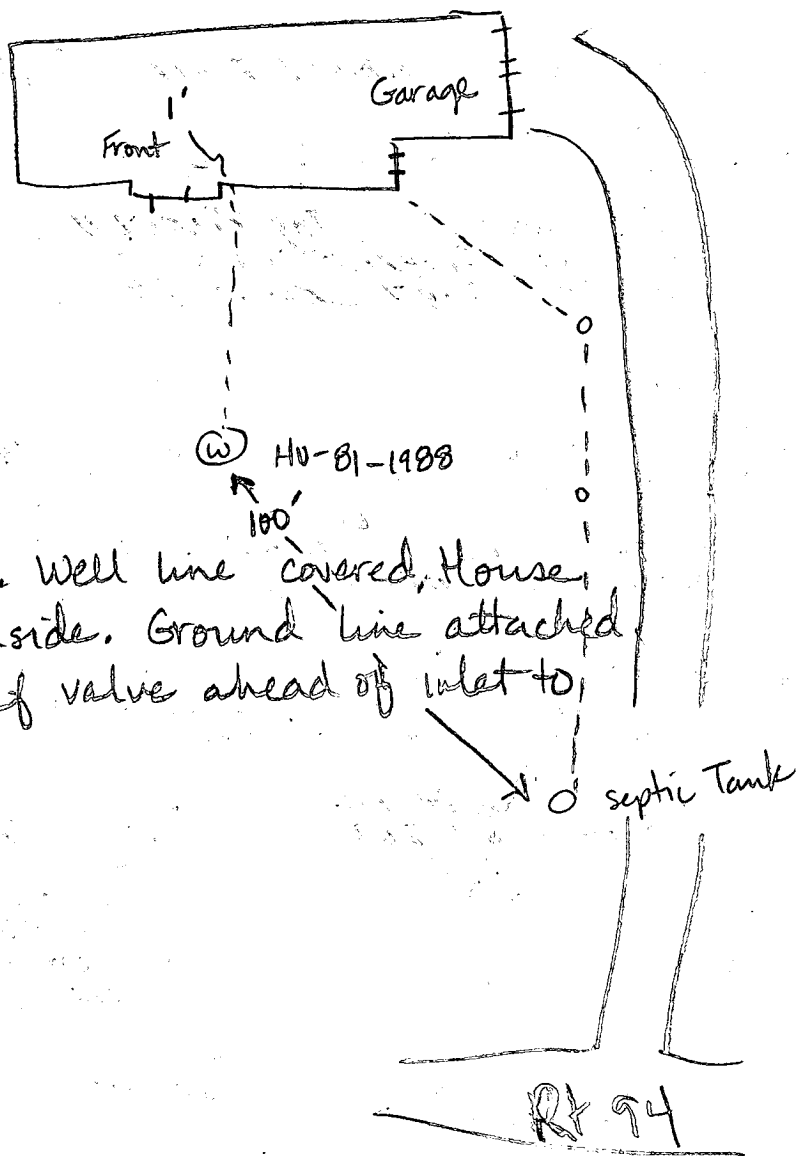
All information given above is true to the best of my knowledge.

Signature of Applicant: Robert L. Feeder R.L.F. Co., Inc.

Date: 4/13/88

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

27



4-14-88

Pitless adaptor at 38 inches. Well line covered. House connection covered but ~~on~~ inside. Ground line attached. Pump tank installed. Relief valve ahead of inlet to tank. JE Nadeau