

4-3-89 cancelled by contractor
4-4-89 10:00 AM
4-5-89 8:30 AM
ASAP

01-185209

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 43889

A 40567

DISTRICT 1st

DATE 3/29/89

4/5/89

DATE SYSTEM APPROVED

INSPECTOR M. Riffkin

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Collins Company, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 7702 Gaither Road, Sykesville, Maryland 21784 PHONE 795-8618

SUBDIVISION Talbot's Last Shift ROAD 5277 Talbots Landing LOT 11B

PROPERTY OWNER James and Charlene Gallon

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 - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 3 1/2 feet of stone below distribution pipe.

LOCATION - Beginning from the right front (232.70/782.82') lot corner, start the first trench 150 feet down the front (232.79') lot line and 85 feet off the front line as seen when facing property from Right-of-way entrance. Run trenches along contour towards the right front lot line (232.79').

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

MAINTAIN MINIMUM 100 FEET FROM WELL TO SEPTIC. OK/CW

PLANS APPROVED BY Bert Nixon DATE 3/15/88

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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

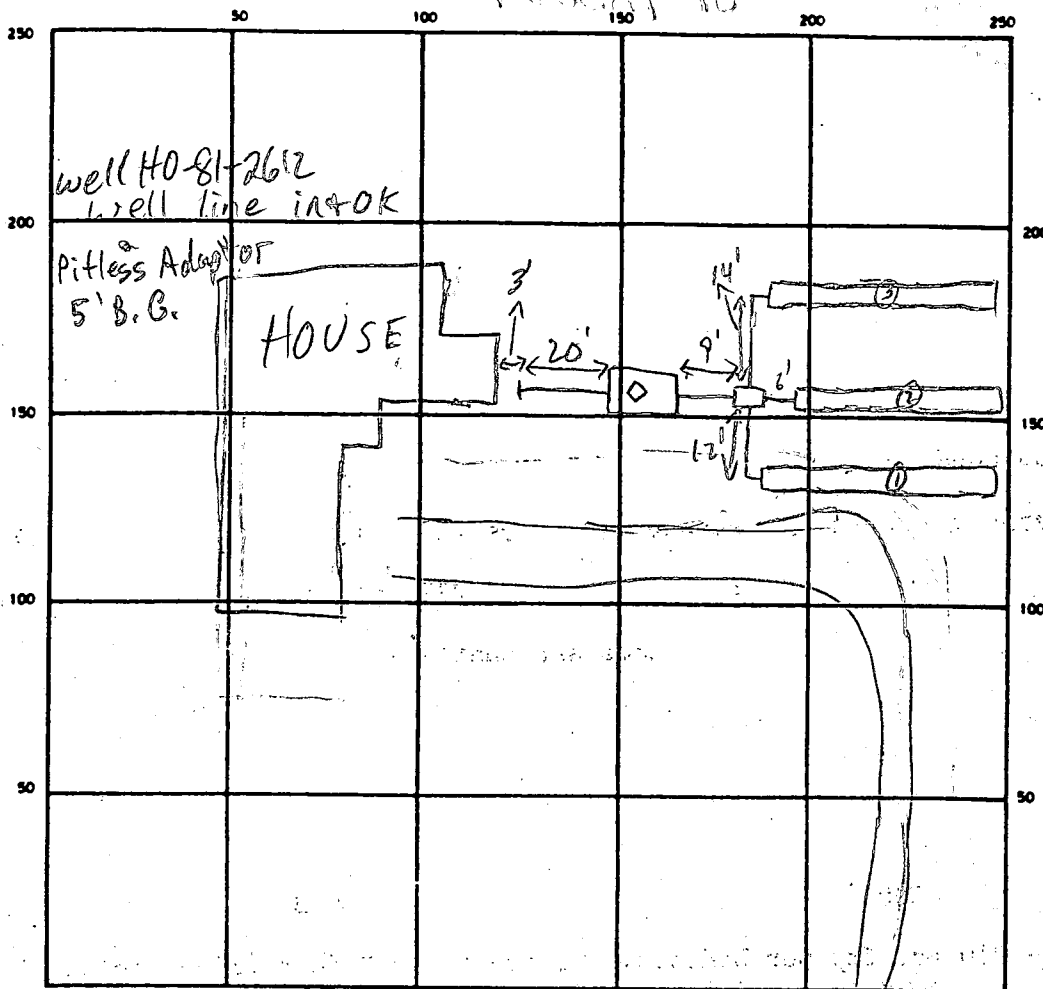
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

40567



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

TALBOT'S LANDING

SEPTIC TANK LEVEL OK (1500 GAL) CLEANOUTS OK (MANHOLE)
 DISTRIBUTION BOX LEVEL BAFFLE IN
 DRAIN FIELD/TILE FIELD DEPTH 7 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 FT.
 EFFECTIVE GRAVEL DEPTH 3.5 FT. TOTAL LENGTH 072 070 216 FT.
 NUMBER OF TRENCHES 3 ONE SIDEWALL 073 756 SQ. FT.
 DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS 4/4/89 TRENCHES DUG READY FOR STONE MR
4/5/89 TRENCHES ① & ② COMPLETE, TRENCH ③ IN PROCESS
OK TO COVER WHEN READY; HOUSE CONN NOT IN
HOMEOWNER WILL CALL WHEN COMPLETED MR

DATE SYSTEM APPROVED 4/5/89 INSPECTOR M. Rifkin

APPLICATION

WET SEASON

PERCOLATION TESTING

A 40567
P _____

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

DISTRICT _____

DATE 12/2/87

OK TO SCHOL.

2/26/88
perc OK'd pending
approved plan
(B)

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.

X PROPERTY OWNER JAMES & CHARLENE GALLON

ADDRESS 5281 TALBOT'S LANDING PHONE 747-7828
ELLICOTT CITY MD 21043

X PROSPECTIVE BUYER SAME

ADDRESS _____ PHONE _____

X PROPERTY LOCATION: _____

SUBDIVISION TALBOTS LAST SHIFT LOT NO. 11B

ROAD AND DESCRIPTION END OF TALBOTS LANDING ROAD, GO LEFT, PROPERTY
ON LEFT SIDE

TAX MAP 31 PARCEL # P 702

SIZE OF LOT 1.752 ACRES TYPE BLDG _____
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

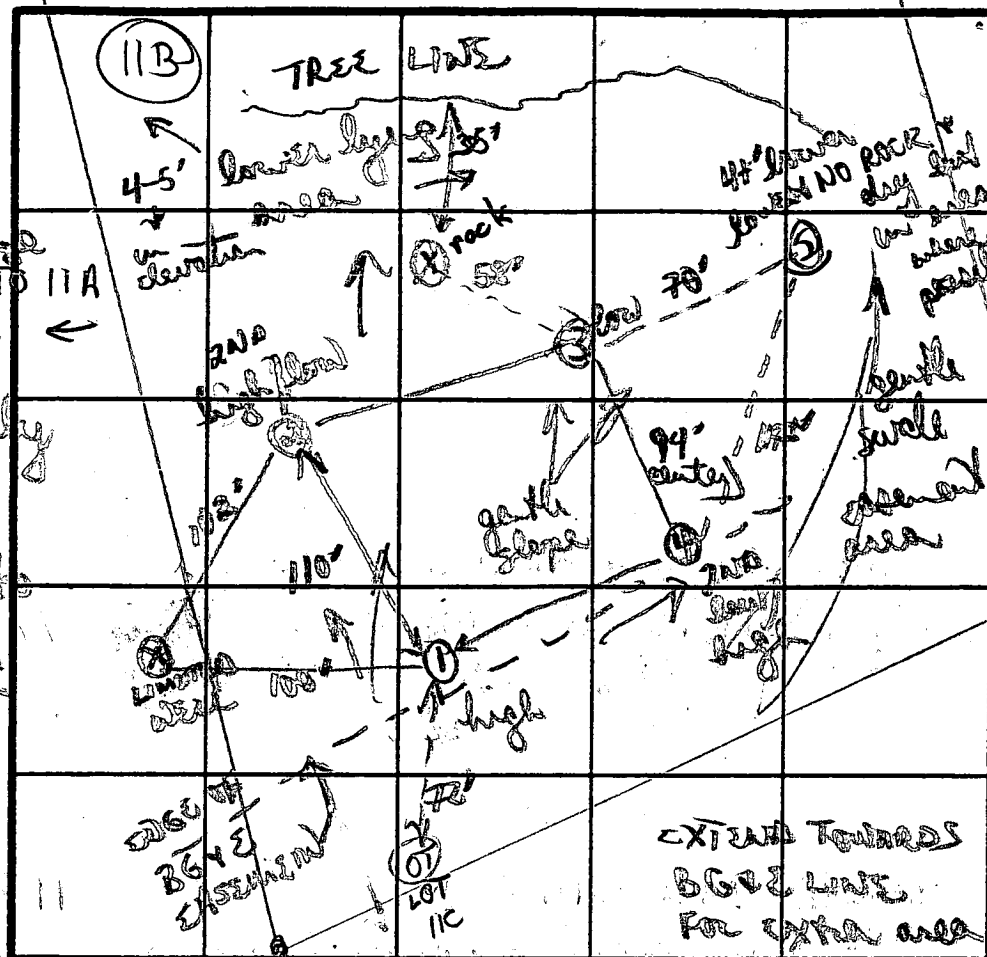
REASONS FOR REJECTION OR HOLDING for field located holes, approved adjustments
to lot lines w/ 11A & 11C & well site.

BDDG. PERMIT SIGNATURE
AND RETURNED OK 30 11/21/88
BP 17735 (B)

THIS IS NOT A PERMIT

SOIL PROFILE

0' Brown/orange
red
clumpy clay
cluster
light by gravelly
4'
to orange
gradually to
on gritty
silty mic
loam
12'D



5
orange clay
to grey orange
to dark
grey brown
silty mic
loam w/
10-15% small
red frag
4-8'
back to
loam
12'D
4

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

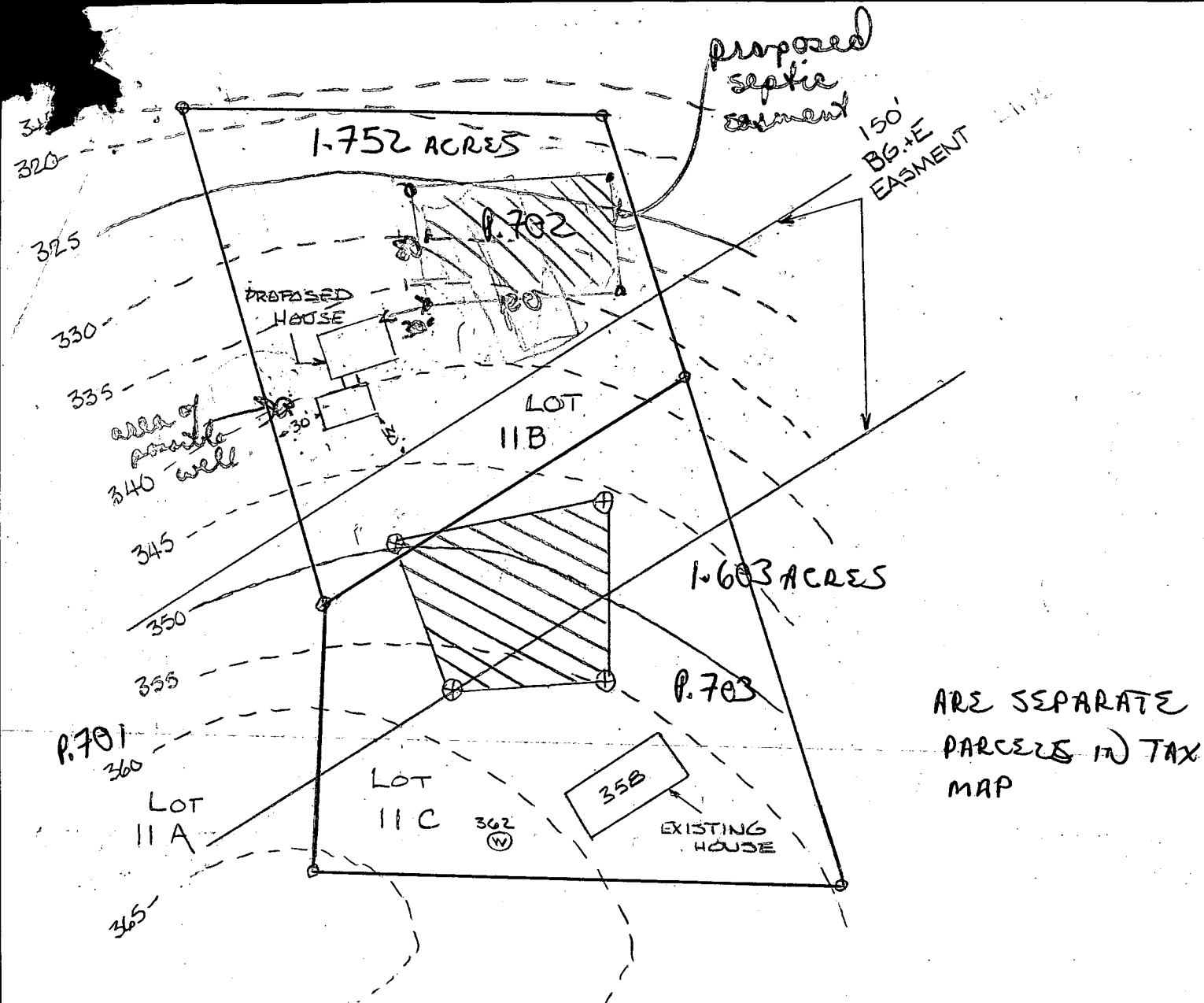
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
26/2/22	1	4' 5"	101	113	113	130	17min
		12'D	bottom (see profile)				
	2	3 1/2'	106	112	112	120	8min
		10 1/2'D	bottom (hard) see profile				
	3	3 1/2'	114	122	122	134	12min
		10'D	hard bottom (see profile)				
	x	staked	digging rock 4' getting hard				
	4	4' 5"	143	148	148	158	10min
		12'D	bottom (see profile)				
	5	VISUAL ONLY	12'D GOOD SOILS 3 1/2-4' 6"				

orange/brown
gritty clay
loam
2'
to mix mostly
tan/orange
gritty silty
loam
8+''
to grey white
shist mix
hard 10 1/2'

Brown/orange
gritty clay
loam
4'
to
palely
orange
brown
gritty
silty
clay
mix
12'D

3
brown/orange
cluster clay
3 1/2'
to brown or
silty loam
w/ 15+% red
lsc shist frags
8 1/2' hard

lot lines for BVA may need adjusting to accom
modate well etc. Libeuse edge of pine field
for 11C or 11B. Adjustment needed
TESTED BY B Nylon ALSO PRESENT Norman Collins, Charlene



(ALSO 5017 ILLCHESTER)

5281

TALBOTS LAST SHIFT

MAP 31. Q22 P 705, P.702

B 1	7054	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-81-2612 fill in this form completely
(THIS NUMBER IS TO BE PUNCHED IN COLS. 36 ON ALL CARDS)				
Date Received (APA) 033088		LOCATION OF WELL HOWARD COUNTY TALBOT LAST SHIF SUBDIVISION SECTION E LOT H18 P.702 ELLICOTT CITY NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI		
OWNER INFORMATION GALLON JAMES Last Name Owner First Name 5251 TALBOT LA Street or RFD ELLICOTT CITY MD 21043 Town State Zip		DRILLER INFORMATION RALPH MAYNE Driller's Name 273 License No. RALPH MAYNE WELL DRILLING Firm Name 9120 Spring Church Rd. N.H. Ave Address Ralph Mayne Signature 3/1/88 Date		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 		
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING LIVESTOCK WATERING & AGRICULTURAL IRRIGATION ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A40567 COUNTY NO. STATE SIGNATURE R. Nilon DATE ISSUED 031588 EXP. DATE 09/15/88 NORTH GRID 506000 EAST GRID 3865000		
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		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 		
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) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		
APPROX. PERMIT NUMBER _____ GAP _____ FORCE RA INITIALS PERMIT NO. HO-81-2612 SPECIAL CONDITIONS 242-2828		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.
MAR 28 9 10 AM '88

- ① 22 ft pep
- ② 19 ft open hws
- ③ 5 Bags
- ④ Well already Greater Get
information from Frank
- ⑤ Well Location is 014 per Plan

4/1/88 7:15 AM
Hodge
RECEIVED
HOWARD COUNTY
HEALTH DEPT.
MAR 28 4 36 PM '88

C1 7723 SEQUENCE NO. (OEP USE ONLY)

1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)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 40567

DATE Received

DATE WELL COMPLETED

8 13

041388

Depth of Well

22 16 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

40-81-2612

OWNER

GALLEN

CHARLES

STREET OR RFD

TALBOTS LANDING ROAD

TOWN

ELLICOTT CITY

SUBDIVISION

TALBOTS LAST SHIFT

SECTION

LOT

11B

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
bearing

Top Soil 0 12

Sandy 2 11

Sand Stone 11 24

MICKA 24 45

Sand Stone 45 50

MICKA 50 165

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM
45 46BENTONITE CLAY BC
45 46

NO. OF BAGS 5 NO. OF POUNDS 500

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 0 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

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

60 61 63 64 66 67 70

E
A
H
C
A
S
I
N
GOTHER CASING (if used)
diameter depth (feet)
inch from to

35 36 38 39 41 42 44 45 47 48 50 51

screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C 2

DEPTH (nearest ft.)
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 51SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 57 58 59 60 61 62 63 64 65 66 67 68GRAVEL 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.) W Q
70 71 72 73 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 9

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 13

WHEN PUMPING 13

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: 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 and enter casing height)

+ above } LAND SURFACE (nearest foot)
- below } 2 (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)PROP LANE
150'
75' wellCIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 10.12.13, "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

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

HEALTH

