

7/1/92 3:30
7/2/92 11AM
8/1/92 10:30

PERMIT

PUMPS N66060

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48134

A 40927

DISTRICT 4th

DATE 5/21/92

DATE SYSTEM APPROVED 17 AUG 92

INSPECTOR RJF

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

461-9933 313-2640

INDEXED

#347625

Paul Schissler/South Carroll Backhoe IS PERMITTED TO INSTALL X ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Morgan Station LOT 25 ROAD 895 The Old Station Court

PROPERTY OWNER Trinity Builders

ADDRESS

SEPTIC TANK CAPACITY 1000 GALLONS

PUMP SEPTIC SYSTEM

NUMBER OF BEDROOMS 3

Install: 1000 Gal. Pump Pit
Dual-Alternating Pumps with appropriate controls and alarms

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Effective area area begins at 3 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Beginning from the rear right corner (Intersection of the rear 191.97' and right 215.61' lot lines) place the first trench 55 feet down the right (215.61') lot line and 80 feet off the same lot line as seen when facing the lot from The Old Station Court. Run trenches on contour toward rear lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 5/18/92 RJF

PLANS APPROVED BY Sid Abel/Craig Williams

DATE 4/16/92

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, 90° ELBOWS NOT ACCEPTABLE.

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(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 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 PVA 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

A 40927

received 2/18/88 - 3:07 PM

APPLICATION

PERCOLATION TESTING

A 40927
P _____

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

DISTRICT 4
DATE 2-8-88

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 Hemphill & Associates Trinity Builders - 730-3137

ADDRESS 8307 Main St PHONE 465-5855

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Morgan Station LOT NO. 25 Re-perc

ROAD AND DESCRIPTION Morgan Station Rd 895 Old Station Court

TAX MAP 3 PARCEL # 9+11

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. Mal A. Reio
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-18-88 one-hole of 3 OK - SAVING LOT/Well depends on moving

LOT LINES TO ACHIEVE 10K @ EASEMENT. HOLD FOR VERIFICATION. S.H.

BLDG. PERMIT SIGNED SFD

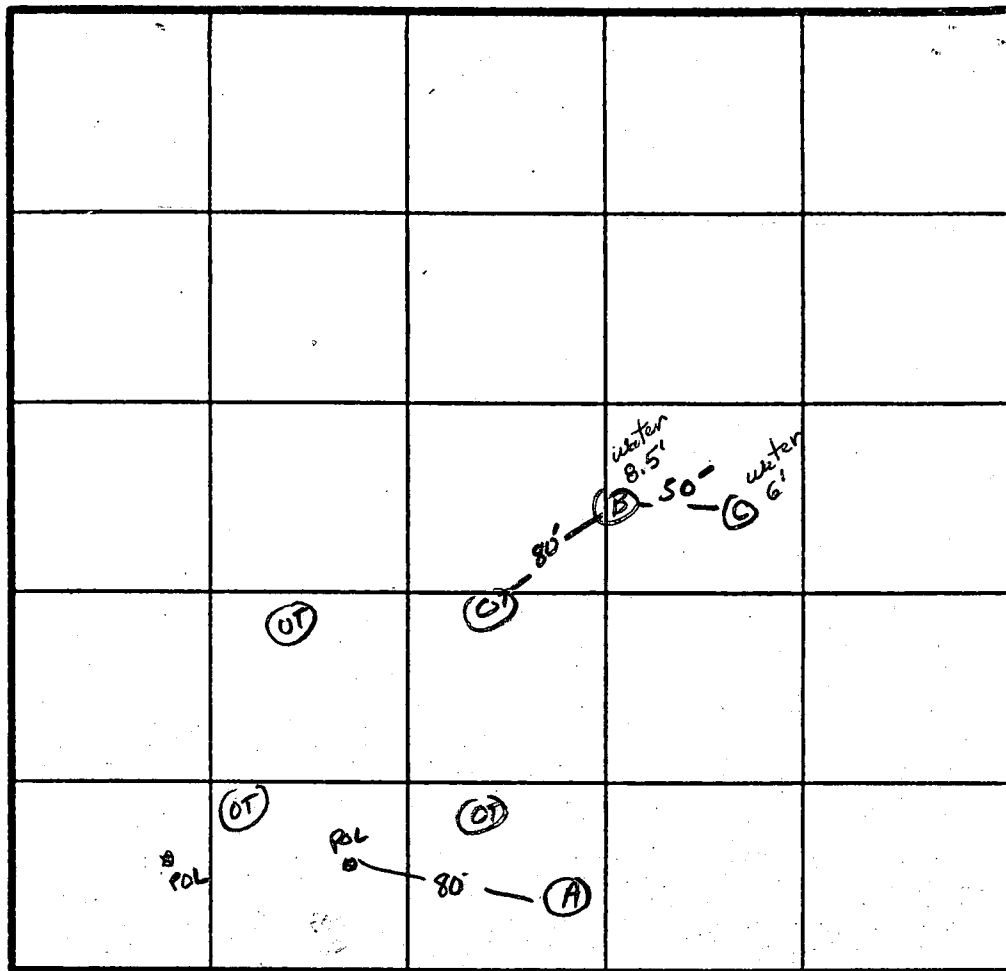
AND RETURNED 2/16/88 3/1/88

THIS IS NOT A PERMIT



SOIL PROFILE

0	AP
10"	Yellow Bt Shaly Silt clay 60% 20-25% FRAG
3'	Yellow Bt silt loam Shaly 30-40%
10.5'	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

MORGAN STATION Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/18/14	A	3' 10.5'	UNIFORM soil below 3'				
	B	H ₂ O AT 8.5'	UNIFORM below 2'				
	C	H ₂ O AT 6.0'					

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

July 7, 1988

Mr. Mark Reich
Howard County Land Services
8307 Main Street
Ellicott City, Maryland 21043

RE: Morgan Station - Lot 25
Well Site/Percolation Site

Dear Mr. Reich:

On February 18, 1988 a percolation test was performed on the above referenced property in an effort to preserve the existing drilled well and improve the house site. The results of the test was unsatisfactory.

No adjustment to the previously approved sewage disposal area is possible.

Due to the above, the existing drilled well cannot be approved because it is within the minimum 100 foot distance separation required by COMAR 10.17.13. This office must require the abandoning of the well (HO-81-2401) on this property.

In a effort to preserve the buildable status of the lot this office is suggesting the creation of a well easement for this lot. Please let us know if you wish to proceed with the establishment of an easement for this lot.

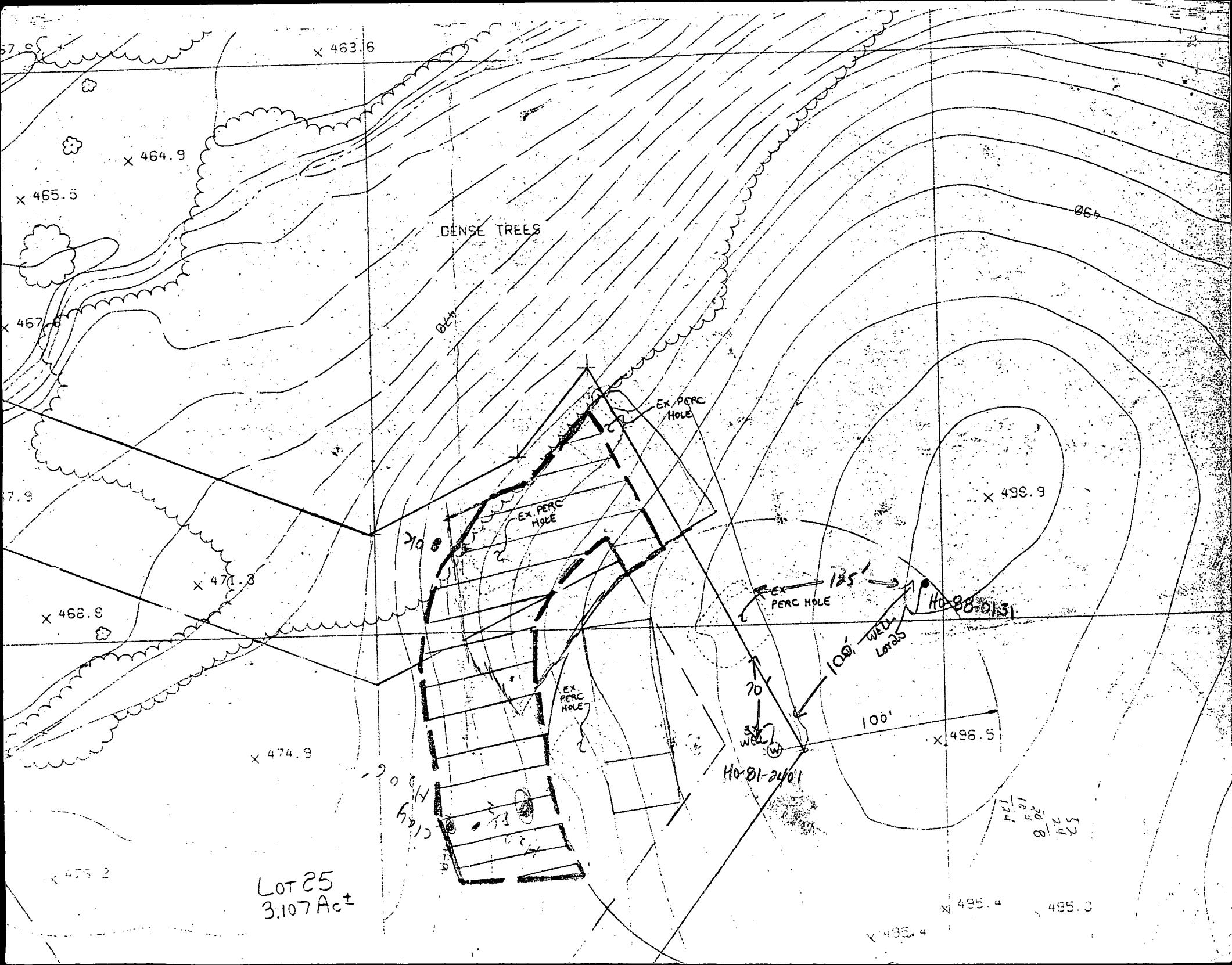
If you should have any other questions, please feel free to contact me at the above address or by calling 461-9933.

Very truly yours,

A handwritten signature in cursive script that reads "Craig Williams".

Craig Williams, Director
Water and Sewerage Program

CW:JR



APPLICATION

PERCOLATION TESTING

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

DISTRICT

DATE

A

P

38733

4

12/17/86

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

Roy W. Crum + Wife

ADDRESS

791 Morgan Station Rd

PHONE

489-4995

PROSPECTIVE BUYER

Hemphill Partnership

ADDRESS

10176 Baltimore National Pike Suite 210

PHONE

465-5855

PROPERTY LOCATION:

SUBDIVISION

Morgan Station (~~Crum Property~~)

LOT NO.

38

ROAD AND DESCRIPTION

E/S Morgan Station Rd north of Old Frederick Rd

TAX MAP

3

PARCEL #

9

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.

Mal S. Heil

(SIGNATURE OF APPLICANT)

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

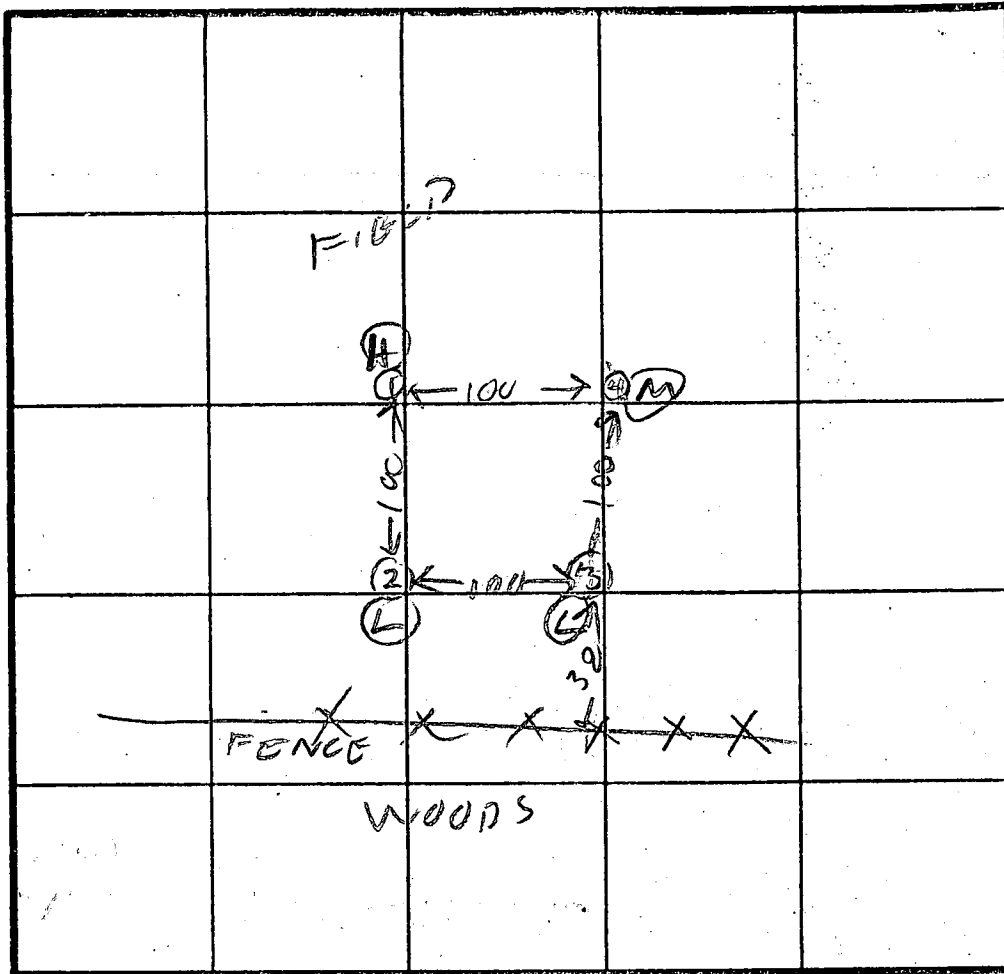
DATE

REASONS FOR REJECTION OR HOLDING

5/11/87 Per OK Hold for Per R/H

THIS IS NOT A PERMIT

①
SOIL PROFILE
0
BROWN CLAY
3
LIGHT BROWN SAND LOAM
50% SAPROLITE
11.5



HOLE
ELEVATION
(1) = HIGH
(2) = MEDIUM
(3) = LOW

X Perc 7min
180 x 180
Inlet 3"

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/1/07	13	3	1042	1051	1051	1057	6
11/1/07	14	8	1042	1045	1045	1053	8
11/1/07	15	12.5	074				
	25	3.5	1048	1054	1054	1100	6
	26	10.5	074				
	35	4.6	1058	1100	1100	1106	6
	36	11.5	074				
	40	11	01				

REMARKS: Lotliner & Perc Area changed from original
Test Per A
TYPE OF SOIL: R/H
TESTED BY: R/H
ALSO PRESENT: DAVE

②
BROWN CLAY
BROWN PURPLE SAND LOAM
10.5
③
CLAY
BROWN SAND LOAM
150% SAPROLITE
11.5
④
BROWN CLAY
PINK BROWN SAND LOAM
EH-12
11

Office of Environmental Programs

WELL ABANDONMENT REPORT

Date 7/9/92

Permit Number of abandoned well (if any)

40-81-2401

Driller's Name MANING, RALPH
Last FirstOwner's Name TRINITY BUILDINGS
Last First

Well Location:

County _____
Subdivision MORGAN STATE
Section _____ Lot 25
Nearest Town _____
Maryland Grid Location _____

Box Number

E
N

0789

553

7/8/92 OK TO BEGIN FILLING
WELL WITH BRICK MASON'S
SAND, C.W.

BUILDER PERFORMING ABANDONMENT.

0/5	5/5
0/0	5/5

Show well location by (x)
within box

Type of Well

- ☒ Drilled
☐ Jetted
☐ Bored or Augered
☐ Other, specify:

Depth of Well 205' Feet

Type of Casing

- ☐ Steel
☒ Plastic
☐ Concrete
☐ Other, specify:

Size of Casing 6 inchesWas any case removed ☒ Yes ☐ No
if yes amount removed 2 1/2' ± (feet)Was casing ripped or perforated ☐ Yes ☒ No

Log of Sealing Material

Material	Feet	
	From	To
Cement (no pipe) Below grade	0'	(-) 32"
Cement in pipe	(-) 32"	(-) 6'
(Sand-only Brick Mason Type)	(-) 6'	(-) 36' +
{ Per Mr. Clarence Seal @ site → 7/9/92 C.B.S. } (Well abandoned + sealed No tag received 7/9/92 C.B.S.)		

Driller

License #

C1 2008 SEQUENCE NO. (OEP USE ONLY)
1 2 3 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 TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER A38733

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

11/18/87

295 26
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37
HO-81-2401

OWNER:

ASSOCIATES

H SMPHILL

STREET OR RFD

MORGAN STATION ROAD

TOWN

WOODBINE

SUBDIVISION

MORGAN STATION

SECTION

LOT

25

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 40 close (ok)

Sand Stone 40 45 ✓

Micka 45 105

Sand Stone 105 110 ✓

Micka 110 205

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM

BENTONITE CLAY BC

NO. OF BAGS 10

NO. OF POUNDS 1000

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 48 TOP 52 ft. to 35 54 BOTTOM 58 ft.
(enter 0 if from surface)

casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)

PL 6 40 70

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OT OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

1 40 38 205
8 9 11 13 15 17 21
23 24 26 28 30 32 36
38 39 41 43 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

OEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

WQ

70
TELESCOPE
CASING

72
LOG
INDICATOR

74 75 76
OTHER DATA

C3

1

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 40

WHEN PUMPING 40

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:

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
- 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)

2001 E 151 20 2100

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

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 7393 SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
PERMIT TO DRILL WELL

OEP PERMIT NUMBER

MD-81-2401

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

please print or type

fill in this form completely

Date Received

10/29/87

OWNER INFORMATION

MEMPHIS E ASSOC

8307 MAIN STREET

ELLICOTT CITY MD 21043

DRILLER INFORMATION

Ralph Mayne 273

Ralph Mayne (well driller)

9120 Brown Church Rd Mt Airy

Ralph Mayne 10/29/87

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED
(GAL. PER DAY) 500

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)

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

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) 41

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

APPROX. PERMIT NUMBER 54 GAP 63

FORCE 68 WRITE INITIALS PERMIT NO. MD-81-2401

SPECIAL CONDITIONS 465-5855 NEEDED FOR PRELIM PLAT APPROVAL

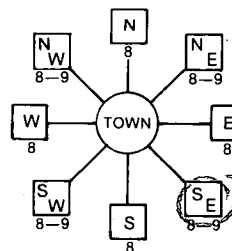
LOCATION OF WELL

HOWARD 8 COUNTY MORGAN 21
THE SOUTHERN STATION

SECTION 44 46 LOT 25 48 50

WOODBRIDGE 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

B 4
DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)

MORGAN STATION RD. 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)

NORTH N

WEST W

EAST E

SOUTH S

34 3100 37
DISTANCE FROM ROAD

ENTER FT or MI FT 38 39

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A38733 COUNTY NO.

OEP SIGNATURE DATE ISSUED 11/19/87 R. Wilson 05/10/88 EXP. DATE

NORTH GRID 553000 EAST GRID 0789000

SHOW MAJOR FEATURES OF
BOX & LOCATE WELL
WITH AN X

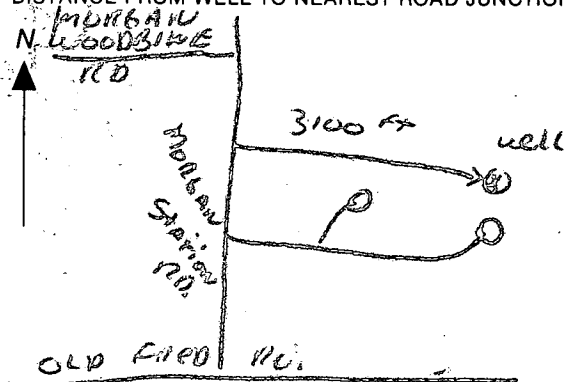
SOURCES OF DRILLING WATER

- well
-
-

WRITE THE BOX NUMBER
FROM THE MAP HERE

E 2809

N 5503

000
000DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN
RELATION TO NEARBY TOWNS AND ROADS AND GIVE
DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

C1	0632	SEQUENCE NO. (DENY 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.
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER A. 30733		

DATE Received [] [] [] [] [] [] 8 13	DATE WELL COMPLETED 090688 15 20	Depth of Well 22 205 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0131 28 29 30 31 32 33 34 35 36 37
OWNER: Rice last name MARK first name			
STREET OR RFD THE OLD STATION RD.		TOWN WOODBINE	
SUBDIVISION MORGAN STATION		SECTION 25	

WELL LOG Not required for driven wells.		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	Check if water bearing
Top Soil	0 2	
Sandy	2 30	
Sand Stone	30 35	
MICKA	35 40	
Sand Stone	40 45	✓
MICKA	45 80	
Sand Stone	80 85	✓
MICKA	85 205	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
yes (Y)	no (N)
TYPE OF GROUTING MATERIAL	
CEMENT (CM)	BENTONITE CLAY (BC)
NO. OF BAGS 9	NO. OF POUNDS 900
GALLONS OF WATER 54	
DEPTH OF GROUT SEAL (to nearest foot)	
from (C) ft. to 40 ft.	
(enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below	ST CO	
	STEEL CONCRETE	
	PL OT	
	PLASTIC OTHER	
MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
PL	6	42
60 61	63 64	66 67 68 69 70

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

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

C2	DEPTH (nearest ft.)
1 H 2 O	41 205
3 1 4 1 5 1 6 1 7 1 8 1 9 1 10 1 11 1 12 1 13 1 14 1 15 1 16 1 17 1 18 1 19 1 20 1 21 1 22 1 23 1 24 1 25 1 26 1 27 1 28 1 29 1 30 1 31 1 32 1 33 1 34 1 35 1 36 1 37 1 38 1 39 1 40 1 41 1 42 1 43 1 44 1 45 1 46 1 47 1 48 1 49 1 50 1 51 1	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56 60	

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. **223**
Kath Mayne

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

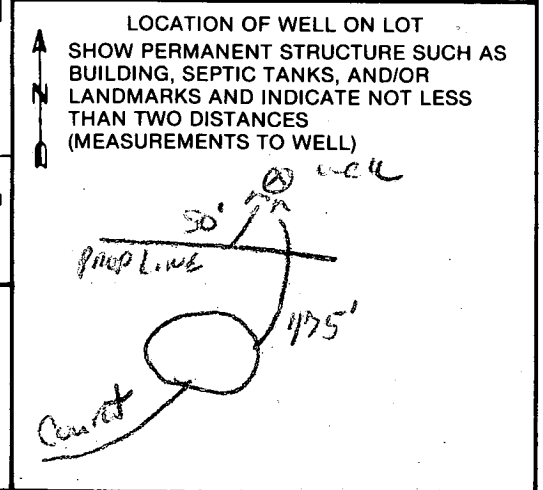
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

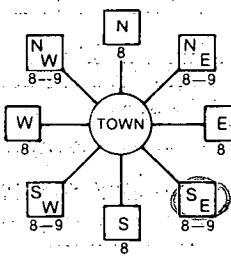
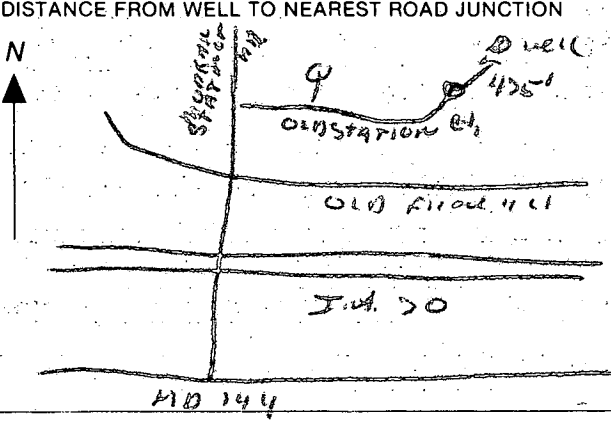
GRAVEL PACK	from to
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68	68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T (E.R.O.S.)	WQ
70 70	74 75 76
TELESCOPE CASING	LOG INDICATOR
	OTHER DATA

C3	PUMPING TEST	
HOURS PUMPED (nearest hour) 3		
PUMPING RATE (gal. per min. to nearest gal.) 10		
METHOD USED TO MEASURE PUMPING RATE Bucket		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING 45		
WHEN PUMPING 45		
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: 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	31 35
PUMP HORSE POWER	37 41
PUMP COLUMN LENGTH (nearest ft.)	43 47
CASING HEIGHT (circle appropriate box and enter casing height)	+ above 49
- below 49	LAND SURFACE 1 (nearest foot) 50 51



B 1 3611 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-88-0131 <small>fill in this form completely</small>
Date Received (APA) 08/18/88		B 3 LOCATION OF WELL 8 COUNTY HOWARD 23 SUBDIVISION MOOREHEAD STATION SECTION 11 LOT 25 52 NEAREST TOWN WOODBINE MILES FROM TOWN (enter 0 if in town) 2 M I.	
OWNER INFORMATION 15 Last Name REICH Owner First Name MARK 36 Street or RFD 8367 MAIN STREET 57 Town ELLICOTT State MD Zip 21042		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD THE OLD STATION CT. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="radio"/> WEST <input type="radio"/> EAST <input type="radio"/> SOUTH <input type="radio"/> 34 425 37 DISTANCE FROM ROAD ENTER FT or MI FT.	
DRILLER INFORMATION Driller's Name Malik Mayne 77 License No. 0223 Firm Name Malik Mayne Well Drilling Address 5100 Church Rd. Mt Airy Signature Malik Mayne Date 7/30/88		B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A-38753 STATE SIGNATURE _____ INSERT S _____ DATE ISSUED 08/17/88 CO SIGNATURE S. Nadeau EXP. DATE 02-16-89 NORTH GRID 553000 EAST GRID 0289000	
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 E 2849 N 5503	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> JETTED <input type="radio"/> Jetted & DRIVEN <input type="radio"/> 30 AIR-ROTARY <input checked="" type="radio"/> AIR-PERCussion <input type="radio"/> ROTARY (Hydraulic Rotary) <input type="radio"/> 37 CABLE <input type="radio"/> REVERSE-ROTARY <input type="radio"/> DRIVE-POINT <input type="radio"/> other _____		9-6-88 10:20am Unable to observe ground 42 ft casing 9 bags cement 40 ft open hole 1 ft above ground Location ok SE Nadeau	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY)			
APPROX. PERMIT NUMBER _____ GAP _____			
FORCE 1 WRITE INITIALS IN BOX 1 PERMIT NO. 40-88-0131			
SPECIAL CONDITIONS			

9/7/88
Approved
Final Plat
Copy

SHEET 4 OF 6
120.00'
300.00'

PROPERTY OF
RUTH E. FEITAG
1955/371

LOT 26
3.010 AC.±

LOT 25
3.107 AC.±

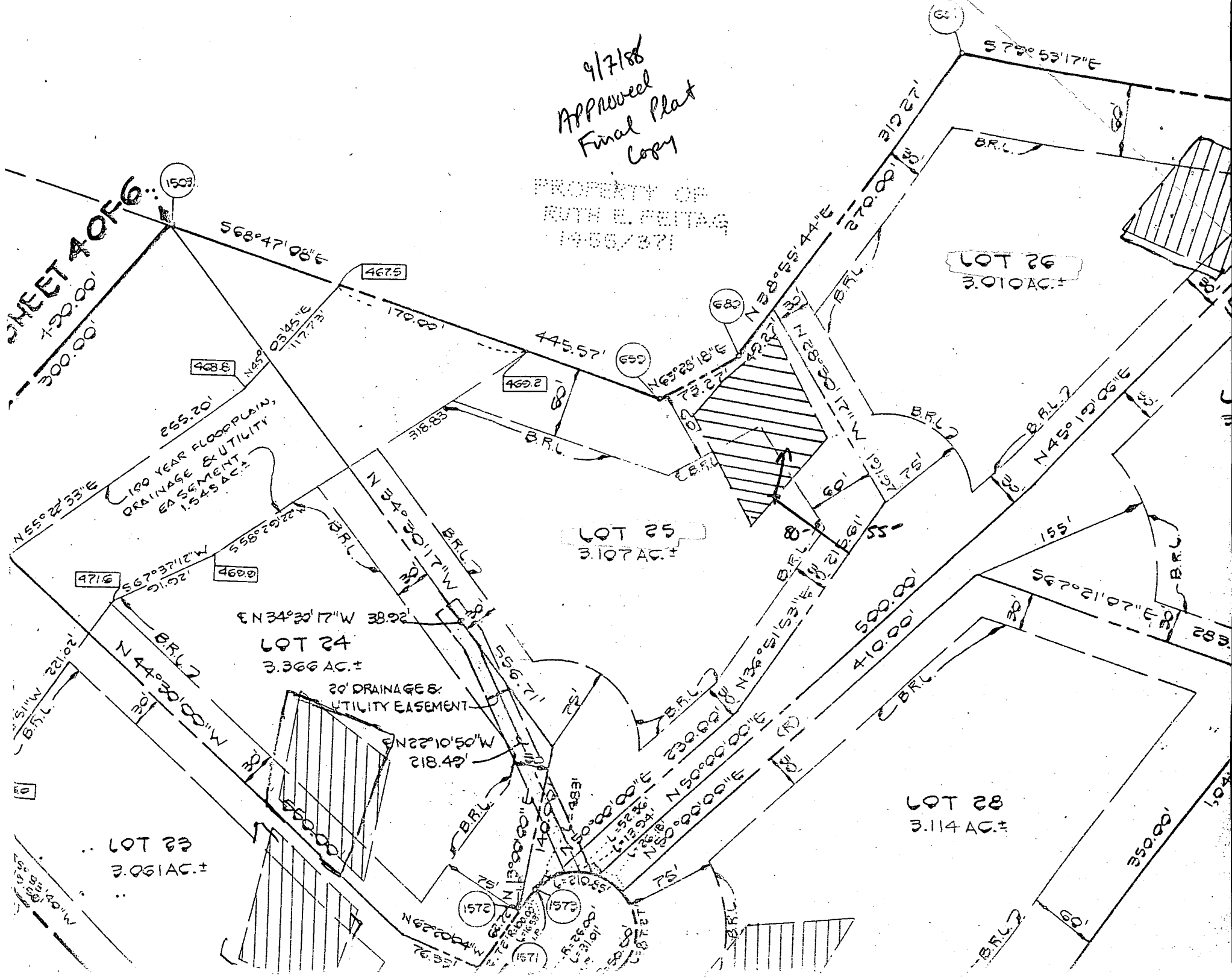
LOT 24
3.366 AC.±

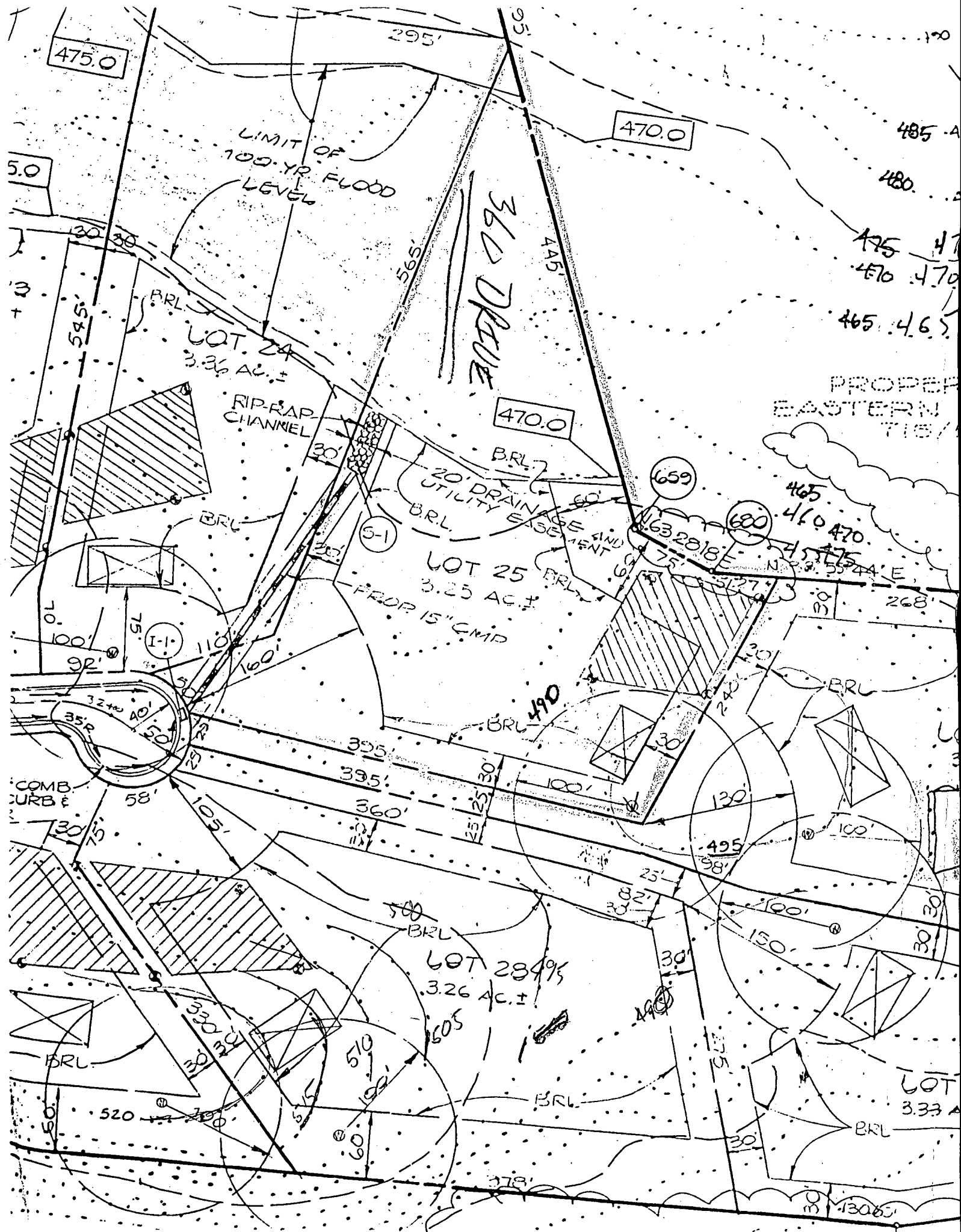
LOT 28
3.114 AC.±

LOT 23
3.061 AC.±

190 YEAR FLOODPLAIN,
DRAINAGE & UTILITY
EASEMENT
1.545 AC.±

20' DRAINAGE &
UTILITY EASEMENT

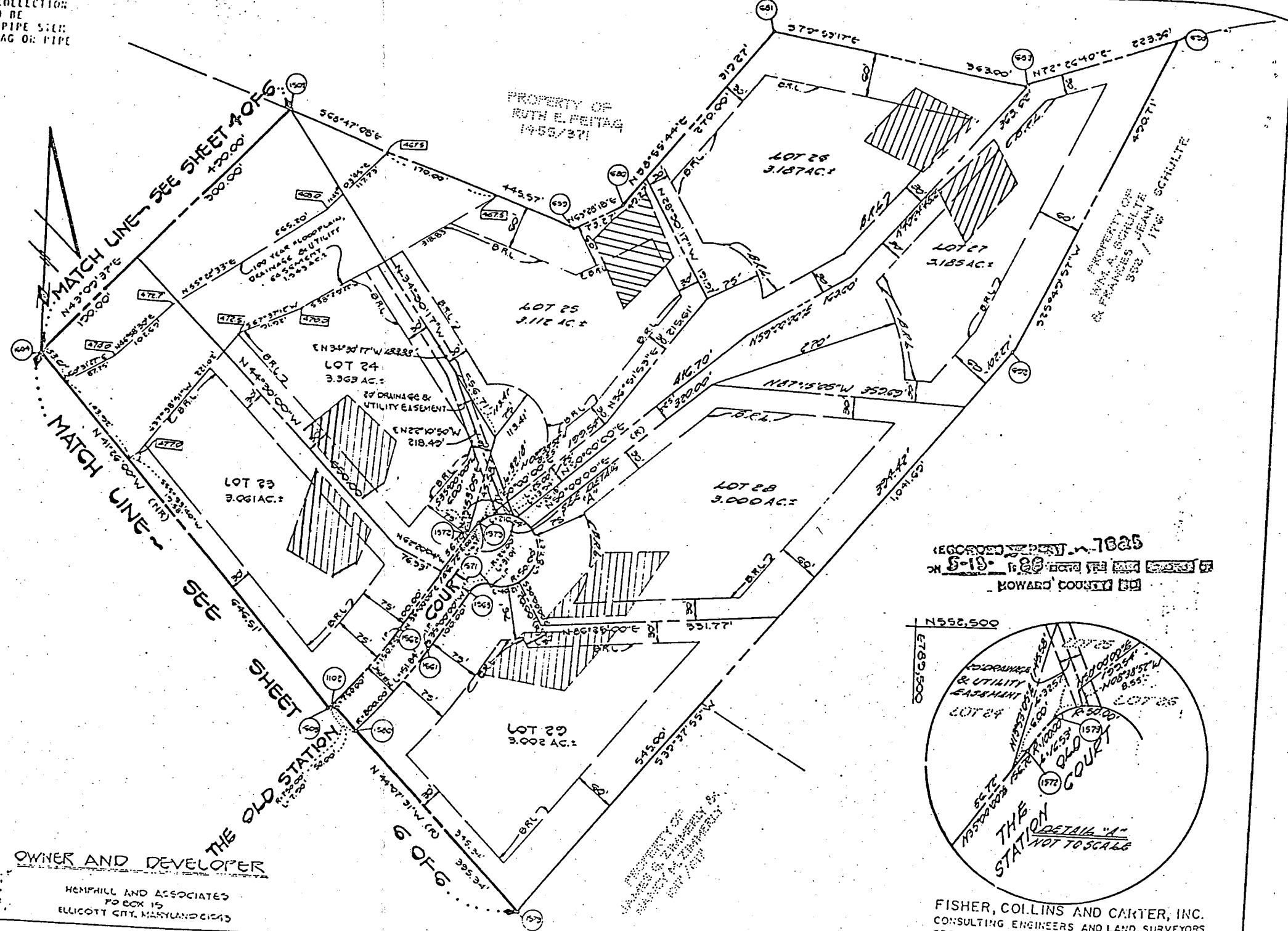




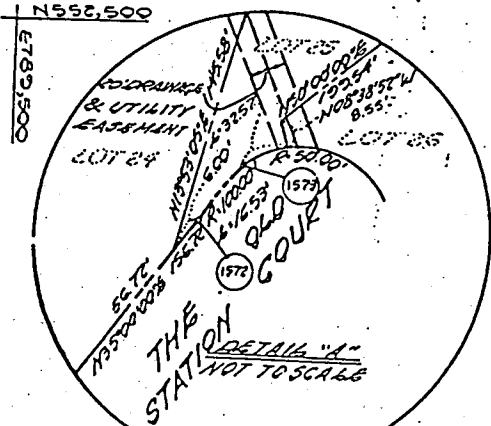
FOR FLAG OR PIPE STEEL LOTS, REFUSE COLLECTION
SHOW REMOVAL AND ROAD MAINTENANCE TO BE
PROVIDED AT THE JUNCTION OF FLAG OR PIPE STEEL
AND THE ROAD R/W AND NOT ON THE FLAG OR PIPE
STEEL DRIVEWAY.

N 553.000
E 768.000

N 552.500
E 768.000



RECORDED DEED - 1825
ON 5-19-1988 BY HOWARD COUNTY



AREA TABULATION FOR SHEET 5

TOTAL NUMBER OF BUILDABLE LOTS TO BE RECORDED...	7
TOTAL NUMBER OF OPEN SPACE LOTS TO BE RECORDED...	0
TOTAL NUMBER OF LOTS TO BE RECORDED...	7
TOTAL AREA OF BUILDABLE LOTS TO BE RECORDED...	71.910 AC.
TOTAL AREA OF OPEN SPACE TO BE RECORDED...	0.000 AC.
TOTAL AREA OF ROADWAY TO BE RECORDED...	0.503 AC.
TOTAL AREA OF 100 YEAR FLOODPLAIN TO BE RECORDED...	1.543 AC.
TOTAL AREA TO BE RECORDED...	77.413 AC.

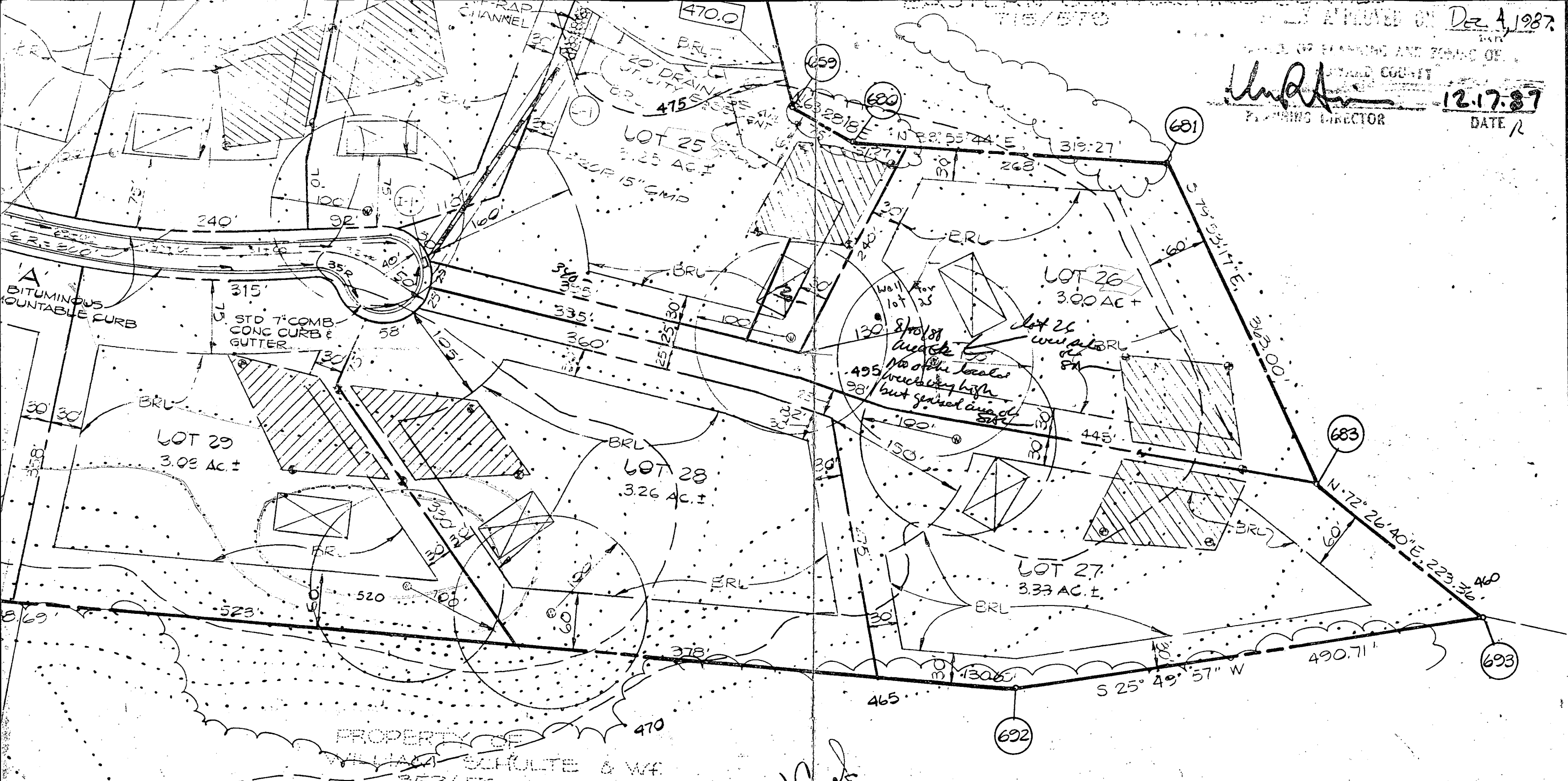
OWNER AND DEVELOPER
HEMPHILL AND ASSOCIATES
PO BOX 19
ELLICOTT CITY, MARYLAND 21043

APPROVED FOR RECORD BY THE BOARD OF PUBLIC WORKS, HOWARD COUNTY HEALTH DEPARTMENT.
John Byr 4-28-88
James R. Smith 5/10/88
APPROVED FOR RECORD BY THE BOARD OF PUBLIC WORKS, HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.
James R. Smith 5/12/88

SURVEYOR'S CERTIFICATE
I HEREBY CERTIFY THAT THE PLAT SHOWN HEREON IS CORRECT: THAT IT IS A SUBDIVISION OF PART OF THE LANDS CONVEYED BY ROY W. CRUM, SR. AND PATRIKIE H. CRUM, HIS WIFE, TO HEMPHILL AND ASSOCIATES, BY DEED DATED AUGUST 31, 1987 AND RECORDED AMONG THE RECORDS OF HOWARD COUNTY, MARYLAND IN C.M.P. BOOK 1121 AT FOLIO 166, AND ALSO THAT IT IS A RESUBDIVISION OF LOT 73, AS SHOWN ON A PLAT ENTERED "THE SOUTHERN STATION" AND RECORDED AMONG THE SAID LANDS RECORDS AS PLAT C.M.P. NO. 734 THRU 734H, AND THAT ALL MONUMENTS ARE IN PLACE OR WILL BE IN PLACE PRIOR TO ACQUISITION OF THE LOTS IN THE SUBDIVISION BY HOWARD COUNTY AS SHOWN IN ACCORDANCE WITH THE ASSOCIATED CODE OF MARYLAND, AS AMENDED.
James R. Smith 3/2/88

FISHER, COLLINS AND CARTER, INC.
CONSULTING ENGINEERS AND LAND SURVEYORS
8399 COURT AVENUE
ELLICOTT CITY, MARYLAND 21043
TELEPHONE: (301) 461-2855

MORGAN STATION
LOTS 5-42
(A RESUBDIVISION OF LOT 3
THE SOUTHERN STATION.)
TAX MAP 3
P/O TAX MAP PARCELS 3 & 11
ZONING R
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' APPROXIMATE
SHEET 5 OF 6



APPROVED ON Dec 4, 1987
PLANNING AND ZONING DEPT.
HOWARD COUNTY
Charles
PLANNING DIRECTOR
DATE 12.17.87

PRELIMINARY PLAN
MORGAN STATION

A RESUBDIVISION OF LOT 3
THE SOUTHERN STATION
LOTS 5-42
4th ELECTION DISTRICT

OWNER & DEVELOPER

HEMPHILL ASSOCIATES
PO. BOX 15
ELLIGOTT CITY, MARYLAND 21043

HOWARD COUNTY, MARYLAND
TAX MAP 3
SCALE: 1"=100'

PARCEL 9 & 11
NOVEMBER 23, 1987

S-88-06
SHEET 2 OF 2

P88-25

HOWARD COUNTY LAND SERVICES, INC.

8307 Main Street • Ellicott City, MD 21043 • 301-465-5855

Donald R. Reuwer, Jr.
PRESIDENT

Q. L. Ballard
SENIOR VICE PRESIDENT
DIRECTOR OF CONSTRUCTION

July 11, 1988

Mr. Ralph Mayne
9120 Brown Church Road
Mt. Airy, Maryland 21771

RE: Morgan Station, Lot 25

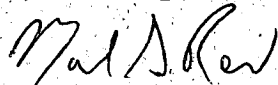
Dear Ralph:

Please make application for a well on Lot 25 at Morgan Station. You will notice when looking at the enclosed plat that the well for Lot 25 is actually located on Lot 26. We will be getting an easement from Lot 26.

Enclosed you will find two plats and a check in the amount of \$30.00 for the well application.

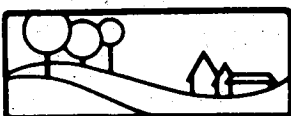
If you have any questions, please do not hesitate to contact me.

Sincerely,



Mark S. Reich
Project Manager

MSR/bc
Enclosures



A Land Development Company

SPECIALIZING IN RESIDENTIAL & COMMERCIAL LAND DEVELOPMENT IN HOWARD COUNTY

