

5/16/88 NOW

03-302741

5/17/88 NOW

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

P 41682

A Repair

DISTRICT 3rd

DATE 5/10/88

DATE SYSTEM APPROVED 5/17/88

INSPECTOR C. Williams

INDEXED

Roland Barth

IS PERMITTED TO INSTALL        ALTER X

ADDRESS 9584 Clarksville Pike, Ellicott City, MD PHONE 730-8495

SUBDIVISION        ROAD 2616 Thompson Drive LOT 4

PROPERTY OWNER Tom and Carol Brzezinski

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

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

- 120 sq. ft. per bedroom with existing drywell remaining in service.

PLANS APPROVED BY C. Williams DATE 5/10/88

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 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**

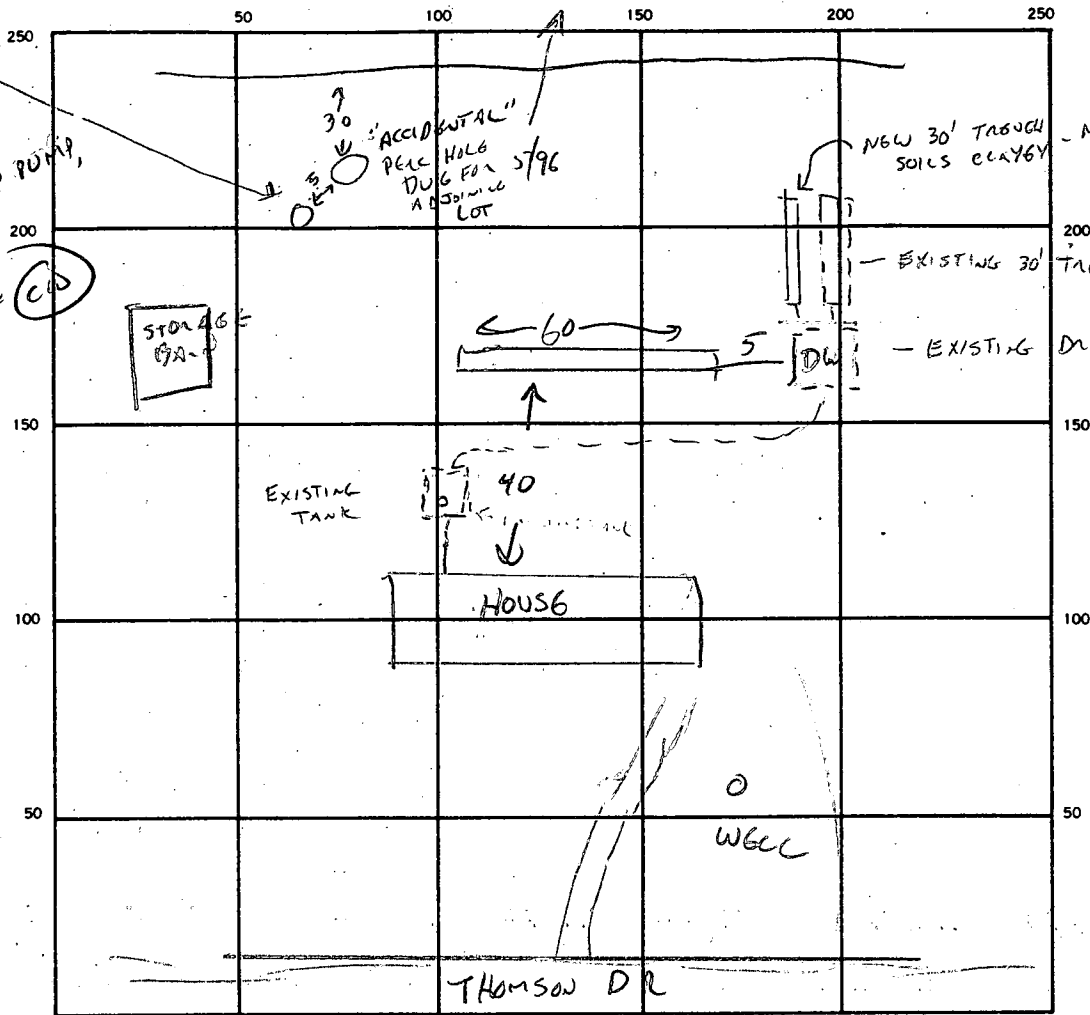
\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

DISCHARGE OBSERVED  
5/96

REINSPECTION  
WITH OWNER  
ON 3/8/98

APPEARS TO BE SUMP PUMP,  
THEY WILL CHECK OUT  
AND DEAL WITH  
AS APPROPRIATE (CWS)



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK, LEVEL EXISTING CLEANOUTS ST & IN LINE & EXISTING

DISTRIBUTION BOX, LEVEL NA

DRAIN FIELD/TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 60 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 360 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 360 ± EXISTING DRYWELL, SQ. FT.

REMARKS 5/16/88 SOIL OK BELOW 5'. PREVIOUSLY TESTED TO 11 1/2', AND 60' TRENCH WITH 6" STING. CW

5/17/88 50' OF TRENCH COMPLETE - FINISH FINAL 10 FT AND COVER ALL WORK. CW

DATE SYSTEM APPROVED 5/17/88 INSPECTOR CW

3/5/80

12/18/79  
be ready around  
12 noon

3/5/80 File approved  
C.B. ✓

P 30398

A 21195

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 12/5/79

Roland Barth

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS

PHONE

SUBDIVISION

ROAD 2616 Thompson Drive

LOT 4

PROPERTY OWNER Steven R. Wolf

ADDRESS 5466 Harpers Farm Road, Columbia, 21044

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ☒ ABSORBENT SIDE-WALL AREA 125 SQ. FT. per bedroom in system.

INLET PIPE 4 FT. BELOW ORIGINAL GRADE, MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT 6 FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 105 FT. FROM rear LOT LINE AND 20 FT. FROM right LOT LINE AS SEEN WHEN  
FACING LOT FROM Thompson Drive.

If trench is used in addition to dry well, a 5 ft. earth buffer is needed between  
dry well and trench. Trench to follow contour of land.

PLANS APPROVED BY Frank Skinner

DATE 10/30/75

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA  
COTTA ACCEPTED.

BLDG. PERMIT SIGNED  
AND RETURNED 4/9/82

Serial # 49838  
Garage

A 21195

\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.



Roland Barth  
**APPLICATION**

A 21195

**SEWAGE DISPOSAL TESTING**

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356

DATE 3/10/75

3 B.R.

4 B.R.

1000 gal. septic tank | 1250 gal septic tank

Drywell to have 125 sq. ft. effective sidewall absorption area per bedroom to begin below the top 6 ft. of non porous soil. Drywell inlet no deeper than 4 ft. below original grade, with maximum depth of drywell no deeper than 12 ft. below original grade. If trench is used in addition to drywell call for inspection of trench before gravel is installed. A five foot earth buffer is required between drywell & trench. Place the drywell 105 ft. from the rear lot line and 20 ft. from the right side line as seen when facing the property from Thompson Drive.

NOTE: If trench is used it must be placed on level ground.

TO: THE COUNTY HEALTH OFFICER, 105 ft. from the rear lot line and 20 ft. from the right side line as seen when facing the property from Thompson Drive

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Ronald F. Sines, et ux

Steven R. Wolf

ADDRESS 5466 Harper's Farm Road  
Columbia, Md. 21044

Any questions call:  
Mr. Rasch, P & J  
465-1635

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 4

ROAD AND DESCRIPTION 2616  
Thompson Drive (almost to end -

SIZE OF LOT 0.98 acres

TYPE BLDG. 3

NUMBER OF BEDROOMS

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

(Single Fmly. Dwllg.)

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

SIGNATURE OF APPLICANT /s/ Ronald F. Sines

✓ APPROVED BY Frank Skinner

FOR Drywell & trench  
(KIND OF SYSTEM)

DATE 10/30/75

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_  
(KIND OF SYSTEM)

DATE \_\_\_\_\_

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

DATE \_\_\_\_\_

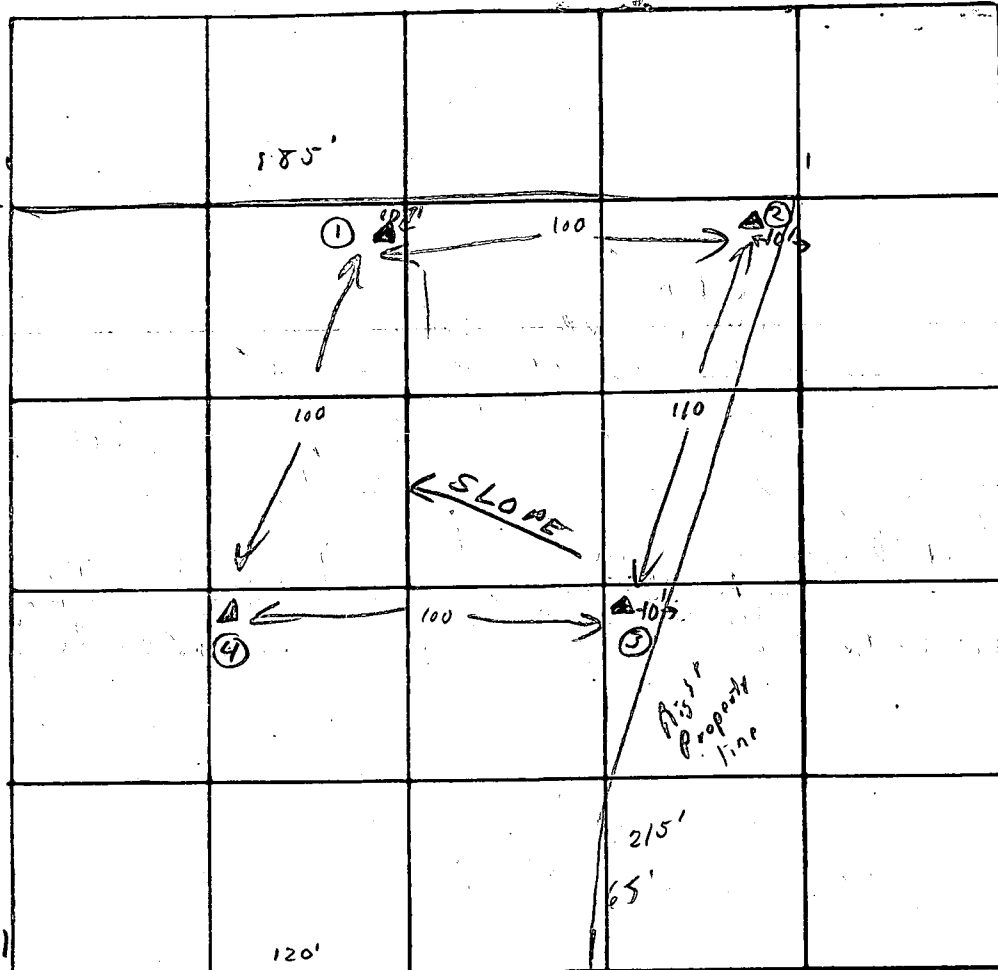
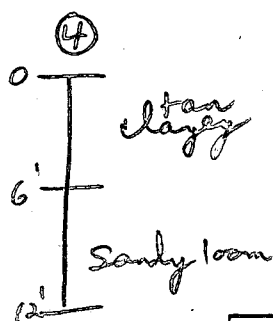
REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

BLDG. PERMIT SIGNED

AND RETURNED 11/11/79

serial 40580

**THIS IS NOT A PERMIT**



Thompson du

| DATE    | TEST NO.   | DEPTH   | PRE-WET |                              | TEST - 1" DROP |        | TIME   |
|---------|------------|---------|---------|------------------------------|----------------|--------|--------|
|         |            |         | START   | STOP                         | START          | STOP   |        |
| 3/13-25 | (1) 5 low  | 4'      | 12:06   | 12:33                        | 12:33          | pulled | neg    |
|         | 1 d        | 12'     | 12:11   | 12:12                        | 12:12          | 12:14  | 2 min  |
|         | 2 a        | 5'      | 12:00   | 12:07                        | 12:07          | 12:27  | 20 min |
|         | 2 b        | 12'     | 12:01   | 12:02                        | 12:02          | 12:03  | 1 min  |
|         | (3) 5 high | 5'      | 11:44   | 12:19                        | 12:19          | pulled | neg    |
|         | 3 d        | 12 1/2' | 11:47   | 11:49                        | 11:49          | 11:52  | 3 min  |
|         | 4          | 12 1/2' | Visual  | clay to 6' sandy brown below |                |        |        |
|         | 1 c        | 13 1/2' | Visual  | some silt at 12'             |                |        |        |
|         | 1 d        | 6'      | 1:41    | 1:42                         | 1:42           | 1:44   | 2 min  |
|         | 3 c        | 6 1/2'  | 1:45    | 1:46                         | 1:46           | 1:48   | 2 min  |

5 min avg  
inlet 6'

REMARKS

### TYPE OF SOIL

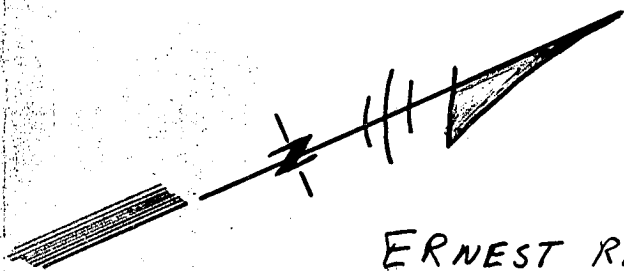
**TESTED BY**

clay barrier to 4' sandy loam below.

D. O'N & F.S.

**ALSO PRESENT:**

Barth &amp; Co.



ERNEST R. SINES

LOT 3  
1.543 ACRES ±

NON-BUILDABLE  
UNTIL APPROVED BY THE  
HOWARD COUNTY  
HEALTH OFFICER

FRANK D. SELBY  
528/100

LOT 2  
1.768  
ACRES ±

JOSEPH N. SHELBY  
370/509

EXISTING  
HOUSE

LOT 4

LOT 1  
0.927 ACRES

DICK HALL

EXISTING  
HOUSE

1250 GAL. SEPTIC TANK  
TOP = 488'  
INV. = 486.5'

FF. = 496.5'  
B. = 487.5'

WELL  
TOP = 490.5'

LAND DEDICATED TO  
HOWARD COUNTY,  
MARYLAND FOR  
ROAD USE

4" x 4" CONCRETE  
MONUMENT

BUILDING  
RESTRICTION  
LINE

RIGHT OF WAY LOT 3

RIGHT OF WAY LOT 2

90' BUILDING  
RESTRICTION LINE

THOMPSON DRIVE

← TO OLD NATIONAL PIKE 144  
APPROX. 1500'

OWNER: STEVEN R. WOIF  
5466 HARPERS FARM RD.  
COLUMBIA MD. APT. B-2  
PHONE: 730-3879 HOME  
937-4171 WORK

LOT 4 2616 THOMPSON DRIVE  
ZONE R ELEC. DIST. 3 RD

490

I CERTIFY THE ABOVE MEASEMENTS AND  
AND ELEVATIONS ARE ACTUAL + CORRECT FOR  
THIS PROPERTY

SIGN: *Steve R. Woif*

SCALE 1" = 50'

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                         |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------|--|
| B 1<br>0596<br>1 2 3 (SEQ. NO.) 6<br>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <b>STATE OF MARYLAND</b><br><b>WATER RESOURCES ADMINISTRATION</b><br><b>TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401</b><br><b>APPLICATION FOR PERMIT TO DRILL WELL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | WRA PERMIT NUMBER<br><b>HO-73-3325</b><br>FILL IN THIS FORM COMPLETELY. |  |
| DATE RECEIVED (WRA USE ONLY)<br><b>6/29/79</b><br><b>9:30 AM</b><br><b>2nd</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | OWNER: <b>Wool</b><br>COL 15 LAST NAME: <b>Wool</b><br>COL 36 FIRST NAME: <b>Steven</b><br>COL 34<br>STREET OR RFD: <b>5466 Harrison Rd-</b><br>COL 36 COL 55<br>POST OFFICE: <b>Columbia Md-</b><br>COL 57 <b>21044</b><br>COL 76                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                         |  |
| B 1 CONTINUED<br>1 2 3 (SEQ. NO.) 6<br>DATE: <b>June 11, 1979</b><br>LICENSE NUMBER: <b>238</b><br>77 80<br>FIRST NAME: <b>Joseph L. Mayne</b><br>DRILLER LAST NAME: <b>Mayne</b><br>SIGNATURE: <i>Joseph L. Mayne</i>                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | B 3 LOCATION OF WELL<br>1 2 3 (SEQ. NO.) 6<br>COUNTY: <b>Howard</b><br>8 (DO NOT ABBREVIATE COUNTY NAME) 21<br>SUBDIVISION: <b>23</b><br>29 42<br>SECTION: <b>44</b> LOT: <b>4</b><br>44 46 48 50<br>NEAREST TOWN: <b>Manfield</b><br>52 71<br>MILES FROM TOWN (ENTER 0 IF IN TOWN): <b>1</b><br>73 76 77 78                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                         |  |
| B 2 WELL INFORMATION<br>1 2 3 (SEQ. NO.) 6<br>MAXIMUM PUMPING RATE (GALLONS PER MINUTE): <b>5</b><br>8 12<br>AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): <b>750</b><br>14 20<br>USE FOR WATER (CIRCLE APPROPRIATE BOX)<br><input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)<br><input type="checkbox"/> F FARMING, AGRICULTURE, IRRIGATION<br><input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.<br><input type="checkbox"/> M MUNICIPAL WATER SUPPLY<br><input type="checkbox"/> P PRIVATE WATER COMPANY<br><input type="checkbox"/> T TEST<br>MUST HAVE STATE HEALTH DEPT. APPROVAL |  | B 4 DIRECTION FROM TOWN<br>(CIRCLE APPROPRIATE BOX)<br>1 2 3 (SEQ. NO.) 6<br><input checked="" type="checkbox"/> N NORTH <input type="checkbox"/> E EAST <input type="checkbox"/> NE NORTHEAST <input type="checkbox"/> SE SOUTHEAST<br><input type="checkbox"/> S SOUTH <input type="checkbox"/> W WEST <input type="checkbox"/> NW NORTHWEST <input type="checkbox"/> SW SOUTHWEST<br>NEAR WHAT ROAD: <b>Thompson Drive</b><br>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): <input checked="" type="checkbox"/> N NORTH <input type="checkbox"/> S SOUTH <input type="checkbox"/> E EAST <input type="checkbox"/> W WEST<br>11 30<br>32 32 32 32<br>DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): <b>50</b><br>34 37 38 39 |  |                                                                         |  |
| APPROXIMATE DEPTH OF WELL: <b>180</b> FEET<br>24 26<br>APPROXIMATE DIAMETER OF WELL: <b>6</b> (NEAREST INCH)<br>METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)<br><input checked="" type="checkbox"/> BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN<br>30-37 <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC ROTARY)<br><input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT<br>OTHER (DESCRIBE):                                                                     |  | DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW. AND GIVE DISTANCE FROM WELL TO NEAREST ROAD, JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.<br><div style="text-align: center;"> </div>                                                                                                                                                                                                                                                                                                                                                  |  |                                                                         |  |
| REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)<br><input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL<br><input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED<br><input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY<br><input type="checkbox"/> D THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEANED (IF AVAILABLE):<br>41 52                                                                                                                                                                    |  | NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)<br>APPROPRIATION PERMIT NUMBER: <b>54</b><br>63<br>FORCE: <b>67</b> WRITE INITIALS IN BOX: <b>68</b><br>CONDITIONS: <b>70 71 72 73 74 75 76 77 78 79</b><br>ENGINEER REVIEW DISTRICT NO.: <b>W21195</b><br>65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                         |  |
| B 4 CONTINUED<br>1 2 3 (SEQ. NO.) 6<br>41 <input checked="" type="checkbox"/> S STATE HEALTH DEPT. APPROVAL<br>COUNTY NAME: <b>Howard</b> COUNTY NO.: <b>W21195</b><br>MO. DAY YR.: <b>6 29 79</b><br>DATE: <b>6 29 79</b><br>43 48 <b>Donald W. Monaghan, Sanitaria</b>                                                                                                                                                                                                                                                                                                                                                                                 |  | BOX NUMBER: <b>850</b><br>N: <b>530</b><br>NORTH COORDINATE: <b>50 51 52 53 54 55</b><br>EAST COORDINATE: <b>57 58 59 60 61 62 63</b><br>ELEVATION AT WELL HEAD (FEET): <b>65 66 67 68</b><br>0/0 5/0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                         |  |
| B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)<br>1 2 3 (SEQ. NO.) 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | HEALTH DEPARTMENT APPROVAL<br>APPROVED BY: <b>Donald W. Monaghan, Sanitaria</b><br>43 48                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                         |  |



C 1 9219

SEQUENCE NO.  
(WRA USE ONLY)1 2 3 (SEQ. NO.) 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS 350 ON ALL CARDS)STATE OF MARYLAND  
WATER RESOURCES ADMINISTRATION  
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401  
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY  
NUMBERDATE RECEIVED  
(WRA USE ONLY)

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE WELL COMPLETED

22 (TO NEAREST FOOT) 26

40-73-3324

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 298

OWNER

LAST NAME

FIRST NAME

STREET OR RFD

POST OFFICE

## WELL DESCRIPTION

## WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

## GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT BENTONITE CLAY

NO. OF BAGS 10 NO. OF POUNDS 940

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 48 FT. TO 54 FT.

(ENTER 0 IF FROM SURFACE)

## CASING RECORD

CIRCUIT APPROPRIATE CODE BELOW

STEEL CONCRETE

PLASTIC OTHER

MAIN CASING TYPE

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

5 6 42

60 61 63 64 66 70

## OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET)

FROM TO

EACH CASING

SCREEN TYPE OR OPEN HOLE

(INSERT APPROPRIATE CODE BELOW)

STEEL BRASS OR BRONZE OPEN HOLE

PLASTIC OTHER

## SCREEN RECORD

(INSERT APPROPRIATE CODE BELOW)

STEEL BRASS OR BRONZE OPEN HOLE

PLASTIC OTHER

C 2

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)

FROM TO

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 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX)

WRA 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 AVAILABLE

C 3

1 2 3 (SEQ. NO.) 6

## PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR)

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A AIR P PISTON T TURBINE

C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)

J JET S SUBMERSIBLE

## PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX, AND ENTER CASING HEIGHT)

+ ABOVE - BELOW

LAND SURFACE (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

N

E

S

W

NE

NW

SE

SW

E

S

W

NE

NW

SE

SW

E

S

W

NE

NW

SE

SW

E

S

W

NE

NW

SE

SW

E

S

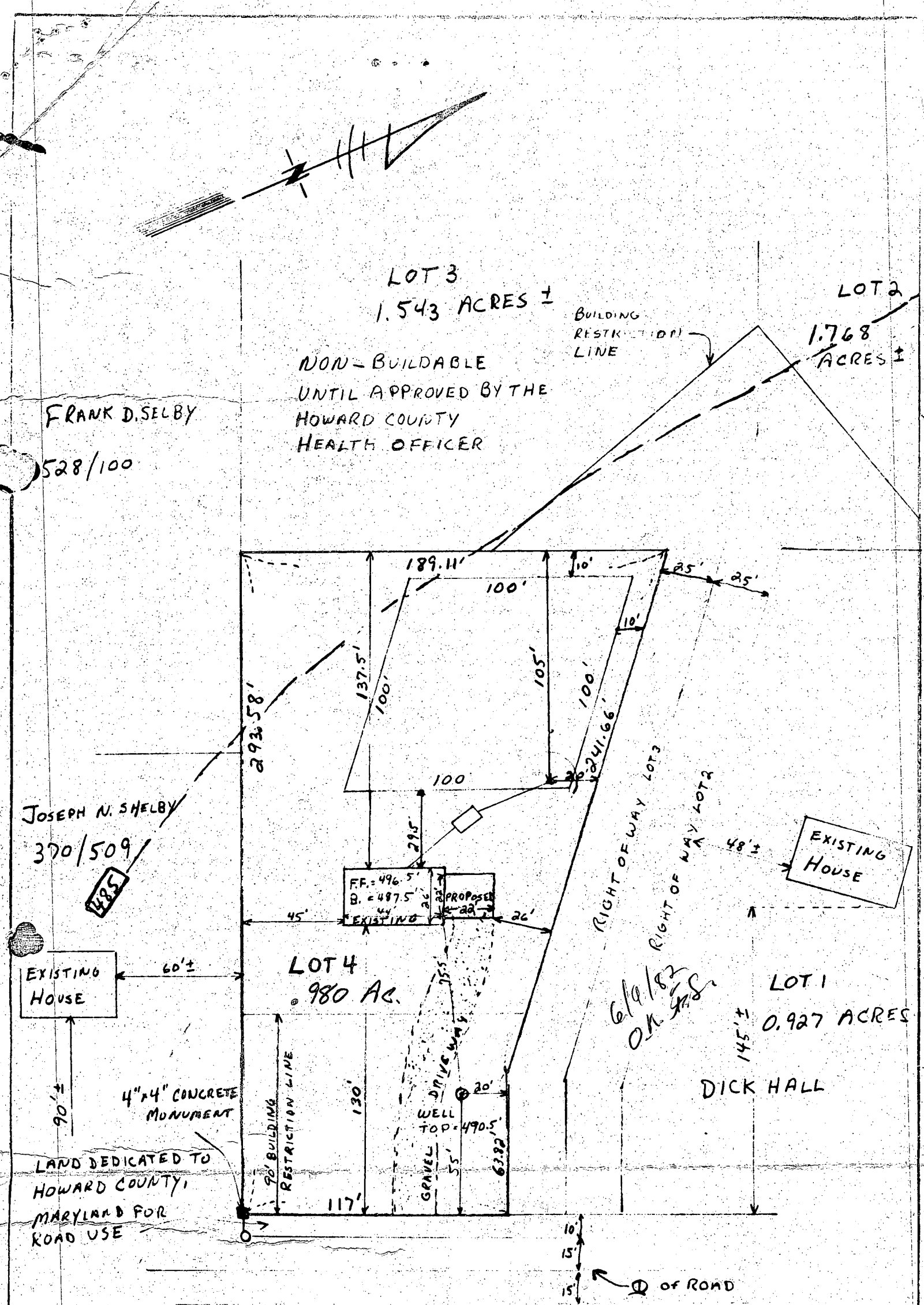
W

NE

NW

SE

SW



← TO OLD NATIONAL PIKE 144  
APPROX. 1500'

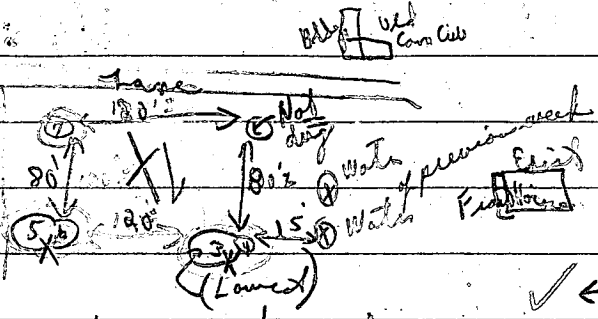
THOMPSON DRIVE

Steven + MARY WOLF  
2616 Thompson Dr.  
MARIOTTSVILLE, MD  
PHONE: 442-1429 HOME

I CERTIFY THE ABOVE MEASEMENTS AND  
AND ELEVATIONS ARE ACTUAL + CORRECT FOR  
THIS PROPERTY  
SIGN: *Steven Wolf*  
LOT 4 2616 Thompson Drive  
ZONE R ELEC. DIST. 3RD  
SCALE 1" = 50'

1721 A.M. 2/15/78

Revised Test # ~~3~~ 33  
close to entrance  
road to office  
building



✓ ← (Tests of 2/16/78 in this area)

| Soil Profile | 1st      | 2nd                                        | Final                              |
|--------------|----------|--------------------------------------------|------------------------------------|
| Below snow   | 2        |                                            |                                    |
| clayish      | ③ 3'     | 10:20                                      | 1/4" X                             |
| clay         | ④ 2 1/2' | 10:21                                      | at 10:53 1/8" X                    |
|              | ⑤ 1 1/2' | 10:56                                      | (11:26-11:29) little or no pebbles |
|              | ⑥ 8'     | 10:57                                      | X X X                              |
|              | ⑦        | [ 9' clayish transition to (5+6) + (3+4) ] |                                    |

(Tested in open <sup>mostly</sup> clayish soil)  
C.B.S.

Note snow depth on lot hard to determine  
(C.B.S. Tested)  
Fyocke men present  
← Rick + assistant

Field copy