

8/9/89

#351723

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

P 44830
A 08332

DATE 8/1/89

DATE SYSTEM APPROVED 8-10-89

INSPECTOR S. Abel

INDEXED

Bud Arnold

IS PERMITTED TO INSTALL ALTER X

ADDRESS _____ PHONE _____

SUBDIVISION King's Manor ROAD 12026 Scaggsville Rd. LOT 1

PROPERTY OWNER Dennis Valentine

ADDRESS FULSON 20759
792-7400

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

PURPOSE of repair is to establish capacity for use of home as a group care facility.

Currently a 3 bedroom home; evaluate both for existing 3 bedroom capacity

and for potential increase to 5 bedrooms.

REPAIR SEPTIC SYSTEM @ 150' OFF EXISTING DRYWELL (Failing)
INLOT 4-4.5' BOTTOM 10-10.5' w/ MIN 6" STONE. 150' of trench
REQUIRED. S. Abel

PLANS APPROVED BY S. Abel DATE 8/3/89

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

BLDG. PERMIT SIGNED

AND RETURNED 10/20/94

Serial #56887 - family room

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

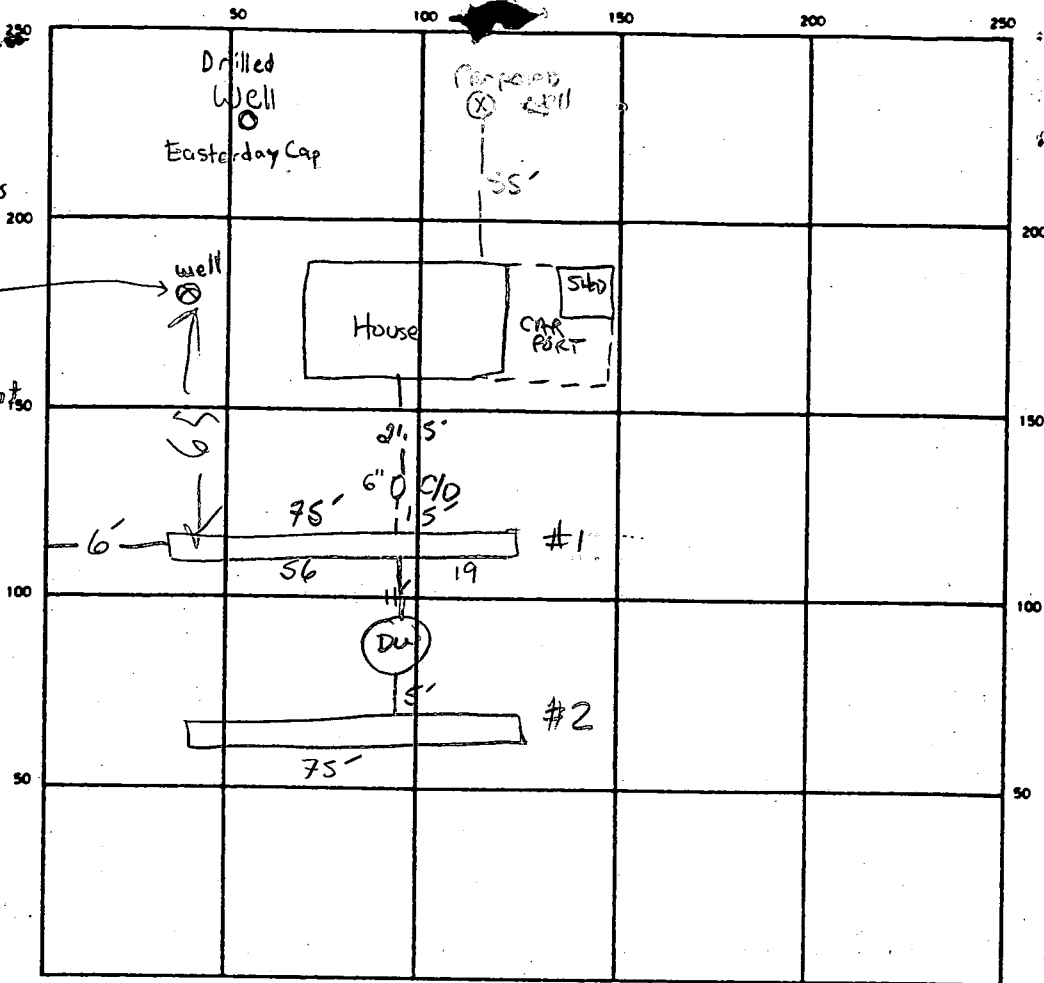
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

44830
08332

No well exists
as of 3/8/01
Sealed by
Easterday
on 10/23/89
hand dug
per abandonment
report.

SRK

150



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
Rt 216

SEPTIC TANK LEVEL EXISTING CLEANOUTS ST EXISTING

DISTRIBUTION BOX LEVEL N/A

DRAIN FIELD/TILE FIELD DEPTH 11.0 ^① ^② FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 ^① ^② FT.

EFFECTIVE GRAVEL DEPTH 6' FT. TOTAL LENGTH 75 ^① ^② 75 ^① ^② TRF 150 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 900 SQ. FT.

DRYWELL INSIDE DIAMETER EXISTING 12 FT. EFFECTIVE DEPTH BELOW INLET EXISTING 6 FT.

ABSORBENT AREA 900 SQ. FT.

REMARKS 8/9/89 OK TO STONE #1 S&B 8/10/89 OK TO COVER #1 + STONE #2 S&B
OK TO COVER ALL WORK, S&B

EXISTING well MUST BE ABANDONED AFTER NEW well dug. S&B

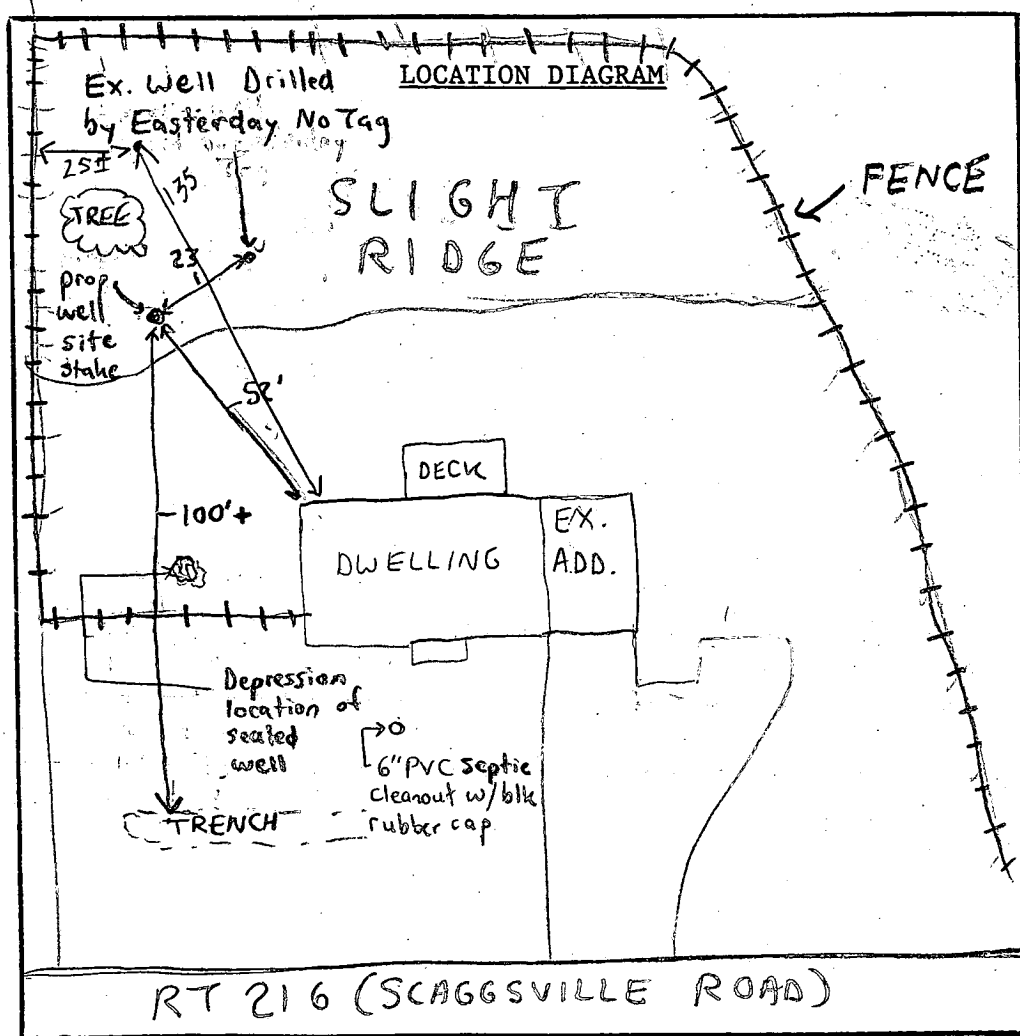
APPLICANT SUBMITTED EVIDENCE OF WELL ABANDONMENT/REPORT PENDING FROM DRILLER 12/19/89
CW

DATE SYSTEM APPROVED 8-10-89 INSPECTOR S. [Signature]

C1 0863		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE 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)		DATE RECEIVED MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 3/29/02		Depth of Well 260 (TO NEAREST FOOT)	
ST/CO USE ONLY		DATE RECEIVED MM DD YY		DATE WELL COMPLETED MM DD YY		PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-3030	
OWNER Brooks		STREET OR RFD 12026 Scaggsville Road		TOWN Fulton		LOT 1	
SUBDIVISION Kings Manor		SECTION		LOT			
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 30 NO. OF POUNDS 300 GALLONS OF WATER 180 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 70 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 ST 6 90 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)		C3 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 30 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 ft. WHEN PUMPING 260 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible	
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 Brown Shale 2 15 Brown Mica 15 80 Gray Mica 80 94 Brown Mica 94 95 Gray Mica 95 99 Brown Mica 99 100 Gray Mica 100 204 opening 204 265 Gray Mica 205 260		PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES OR NO) YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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 LAND SURFACE - below 2 (nearest foot)	
NUMBER OF UNSUCCESSFUL WELLS 0		WELL HYDROFRACTURED YES Y NO N		C2 DEPTH (nearest ft.) H0 88 260 E 8 9 11 15 17 21 A 23 24 26 30 32 36 H 38 39 41 45 47 51 S C 3 R E E N SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to		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) 52' Hume	
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 26.04.04 "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 LIC. NO. 1 M WD 040 DRILLER'S SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MSD 038 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)		MDE 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.	

B 1 4826 1 2 3 4 5 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO - 94 - 3030 fill in this form completely
Date Received (APA) 8842 8 MM DD YY 13 BROOKS CHARLES 15 Last Name Owner First Name 34 12026 SCAGGSVILLE RD 36 Street or RFD 55 FULTON, MD. 20759 57 Town 70 State 72 Zip 76		B 3 Howard 8 COUNTY King's Manor 23 SUBDIVISION 42 SECTION 44 LOT 46 48 50 Fulton 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78	
DRILLER INFORMATION George F. Easterday MW D 040 Driller's Name 76 License No. 81 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 Address <i>George F. Easterday</i> 12/17/2001 Signature Date		B 4 12026 Scaggsville R. 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 50 37 DISTANCE FROM ROAD Ft. ENTER FT. OR MI 38 39 TAX MAP: 41 BLK: 19 PARCEL: 294	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE 5 (GAL. PER MIN.) 8 500 12 AVERAGE DAILY QUANTITY NEEDED 14 20 (GAL. PER DAY)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard (13) A 44830 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 1/31/2003 43 MM DD YY 48 CO SIGNATURE Brian Baker EXP. DATE 1/31/2003 NORTH GRID 482 000 EAST GRID 820 000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="radio"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="radio"/> PUBLIC WATER SUPPLY WELL <input type="radio"/> TEST, OBSERVATION, MONITORING <input type="radio"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 820 N 4802 000 000	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST		3/29/02 1:30 NO INSP	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY DRIVE-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 18 G3 Penwell School Fulton 216	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input checked="" 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="radio"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 HO - 88 - 0819 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO - 94 - 3030 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

3/8/01. 2:00 1/22/01
OWNER: Charles Brooks - 301-807-1504 cell
Hines / Peters
DATE REQUESTED: 3/8/2001
PHONE #: King's Manor Lot 1
CONTRACTOR: Joe Mayne Well Drilling
ADDRESS: 12026 Scaggsville Rd
WELL TAG #: _____
COUNTY #: _____
PROPOSAL: repl. well requested due to insuff. supply
for ex. adult group home



COMMENTS: 3/8/01-MET DRILLER AT SITE, PROPOSED WELL SITE OK, DRILLER TO
VERIFY W/ OWNERS ABOUT KEEPING EX. WELL, IF SO \$80 TO BE
SENT IN, ALSO REPL. TAG AND NEW CAP SHOULD BE INSTALLED ON EX. WELL

DATE: 3/8/01

INSPECTOR: Steven R. Krieg

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 6-21-07 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any): HO - 88 - 0819

* PERMIT NUMBER OF REPLACEMENT WELL: HO - 94 - 3030

* PERSON ABANDONING WELL: Richard A. Crummett

WELL DRILLERS LICENSE NUMBER: WRO 014

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Charles Brooks

* WELL LOCATION:

COUNTY: ANNAPOLIS

NEAREST TOWN: FULTON

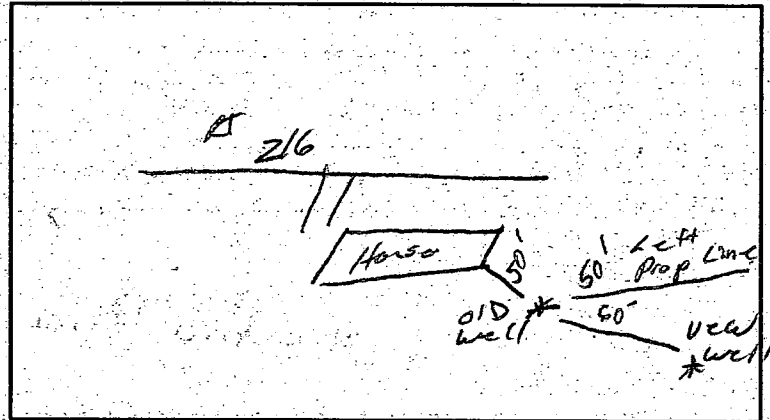
TAX MAP 216 BLOCK 1 PARCEL 1

SUBDIVISION: KINGS MANOR

SECTION: 1 LOT: 1

NEAREST ROAD: 12026 Scaggsville Rd

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:

☒ DRILLED ☐ JETTED
☐ BORED/AUGERED ☐ HAND DUG
☐ OTHER (specify) _____

* USE CODE:

☒ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION ☐ GEOTHERMAL

* TYPE OF CASING:

☒ STEEL ☐ PLASTIC
☐ CONCRETE ☐ OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 400 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 2

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Gravel	400	120
Bentonite	120	2
Gravel	2	0
VOLUME OF MATERIAL USED		
4 Bentonite 3 1/2 Truck Gravel		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

040 MWD/MSD/MGD
CIRCLE ONE

7/3/02 DATE

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE _____

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 Valentine, Dennis

ADDRESS 12026 Seaggsville Rd. PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION King's Manor LOT NO. 1

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ 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 _____

BLOG. PERMIT SIGNED

AND RETURNED 8/10/89

Serial # 28992
Issued for the elderly

HD-216

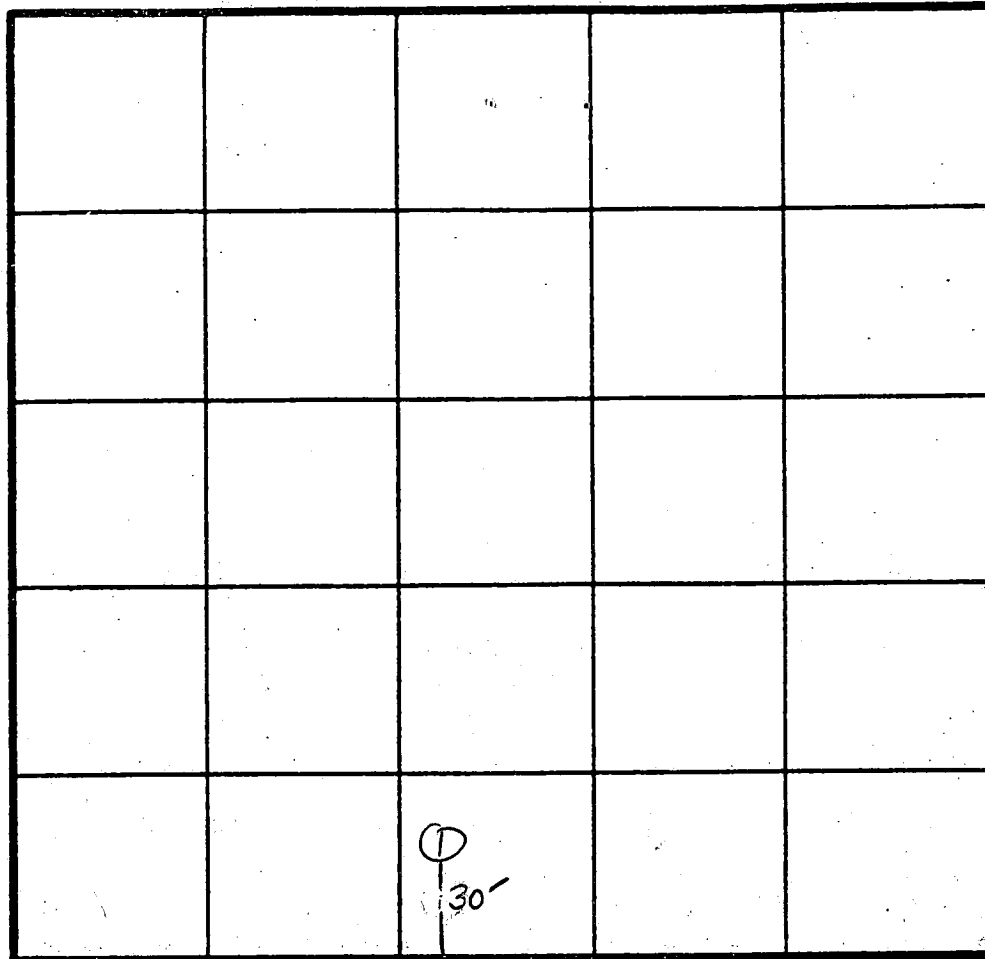
THIS IS NOT A PERMIT

①

SOIL PROFILE

0'	A-1-3
3'	RED. BROWN Silty clay Loam <10% Frags
3.5'	Red Br. Highly micaceous Silt loam 15-25% Frags
	▽

→ 15'-
WATER



Repair
OFF DRYWELL
150 #1 BR
INLET 4"
BOTTOM 10"
6" STONE
INSTALL
150' OF NEW
TRENCH

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Scaggsville Rd. (Rt 216)

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/9/89	IS	4"	8:35	8:38	8:38	8:45	7 MIN
	IM	11"	8:36	8:45	8:45	9:05	20 MIN
	IV	15"	As profiled H ₂ O AT 15"				

REMARKS

TYPE OF SOIL

TESTED BY

S. Abel

ALSO PRESENT

Arnold Bookhol
Valentine

10/27/64

10/1/64

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 9/10/64

INDEXED

Elwood Scaggs

IS PERMITTED TO INSTALL X ALTER

ADDRESS Laurel, Maryland

PHONE PA 5-0324

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Kings Manor

ROAD Rt. 216

LOT 1

PROPERTY OWNER Philip M. Brown

ADDRESS 1020 New 29, Laurel, Maryland

SPECIFICATIONS 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 300 sq. ft. side wall area below the inlets.

Place the dry well 25 ft. to 45 ft. from the front lot line and 58 ft. to 78 ft. from the left side of the lot as seen when facing the lot from Route 216.

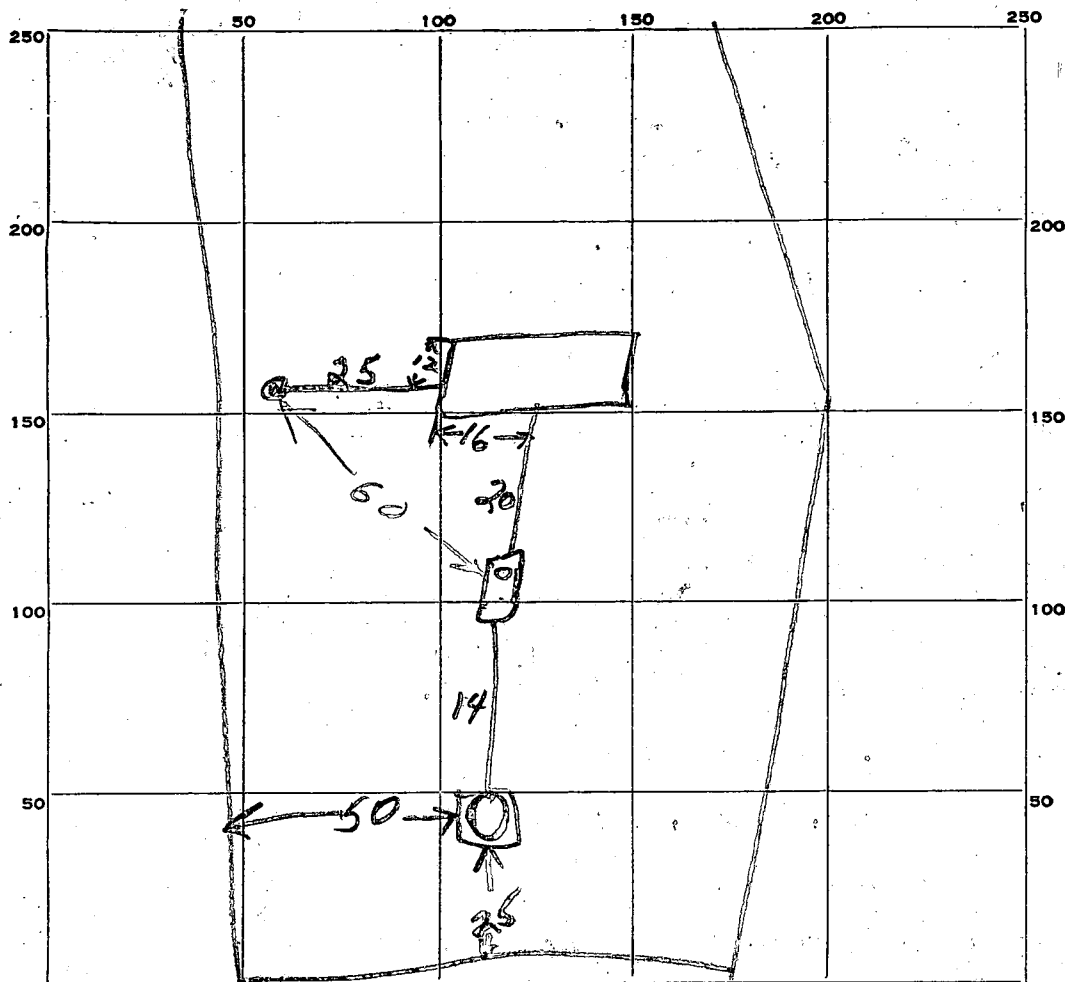
PLANS APPROVED BY Raymond Hodges

DATE 5/12/64

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 08332



207.40²
00

PERMIT CARD _____

SEPTIC TANK, LEVEL Concrete at 750 1/2 ft below grade CLEANOUTS Not long enough

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 10 FT.

ABSORBENT AREA 362 SQ. FT.

REMARKS 6 inches to 1 ft of gravel around dry well

Dry well inlet 3 ft below grade
1 Oct 64 Put Cleanouts to grade on both Tank & Dry Well
and Call for Reinspection. OK to Cover Rest of system
16 Oct 64 Cleanouts not installed but system open
10/27/64 - Cleanouts in - R.F.

DATE SYSTEM APPROVED 10/27/64 INSPECTOR R.F. Hatcher

APPLICATION

A 08332

SEWAGE DISPOSAL TESTING

P

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

750 Gallon Tank

ELLICOTT CITY

DISTRICT 5

DATE 4/27/64

Dry Well - 300 sq ft sidewalk
area below the inlet

Place the dry well 25 ft to 45 ft from
the front lot line and 15 ft to 20 ft
from the left side of the lot as seen
when viewing the lot from
Route 216

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Philip M. Brown

ADDRESS 1020 New 29, Laurel, Maryland

PHONE 535-0946

PROPERTY LOCATION:

SUBDIVISION Kings Manor

LOT NO. 1

ROAD AND DESCRIPTION

Highland - Laurel, Md. #216

Route 216 near Pinckell School Road

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT 40,000

TYPE BLDG.

NUMBER OF BEDROOMS 3

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT

Philip M. Brown

APPROVED BY

Raymond Hodge

FOR

(KIND OF SYSTEM)

DATE

12 MAY 64

REJECTED BY

FOR

(KIND OF SYSTEM)

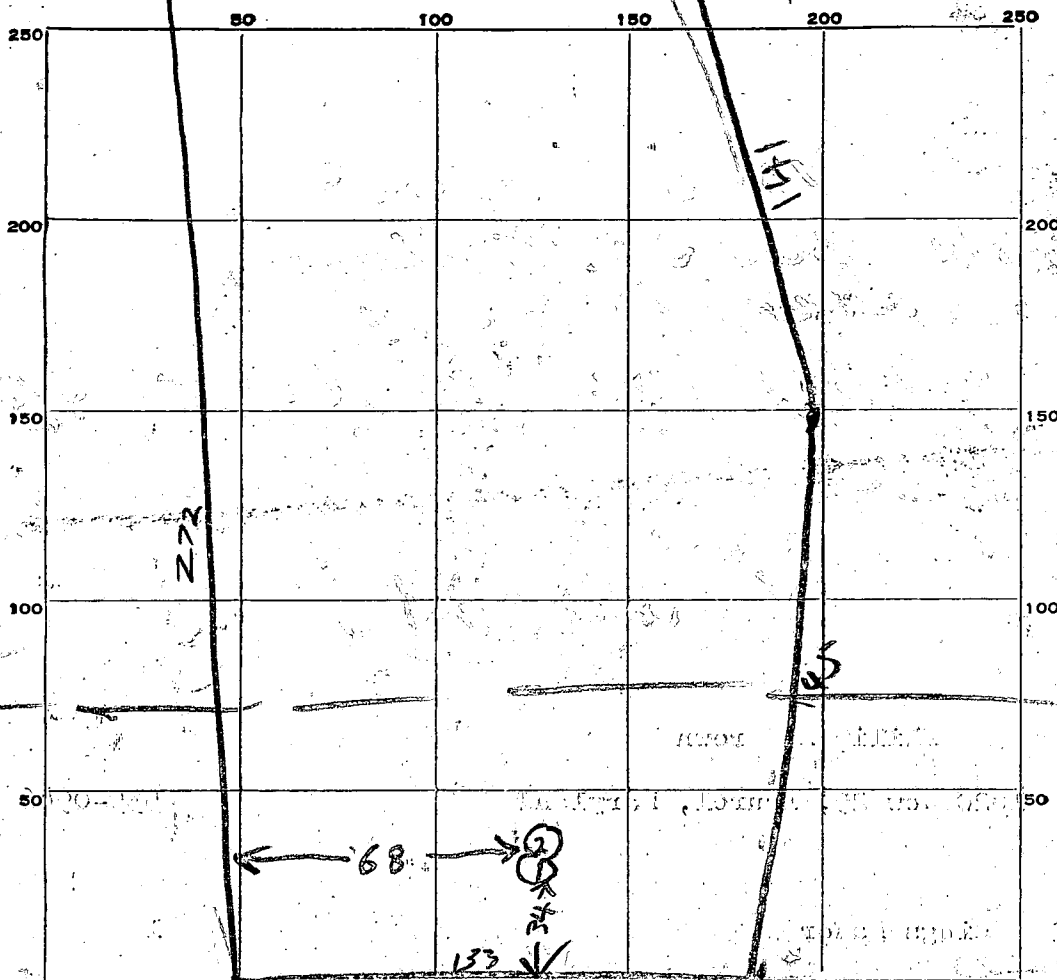
DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HIGHLAND RD

TO ROUTE 29

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12 MAY 84	1	8	944	949	949	956	7
11	2	4	946	953	953	1002	9

SOIL AUGER FINDING

TESTED BY

Raymond Hodges

REMARKS

ALSO PRESENT

Edward Suggs

LOT NO.

1

1 0067 SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

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

COUNTY
NUMBER A = 24027

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

ST/CO USE ONLY
DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 26
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER WILSON TIME DEARLY'S first name
STREET OR RFD 12011 SAGEHILL DRIVE TOWN FULTON
SUBDIVISION RT 2116 SECTION 1 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 Check if water bearing

Topsoil	0	2	
Shalestone	2	35	
Br. mica	35	75	✓
Gray mica	75	115	
Tan mica	115	118	✓
Gray mica	118	250	
Tan mica	250	252	
Gray mica	252	400	

GROUTING RECORD

WELL HAS BEEN GROUTED: (Circle Appropriate Box)

yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC
45 46 45 46

NO. OF BAGS 2 NO. OF POUNDS 2

GALLONS OF WATER 110

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 71 ft.
48 TOP 52 54 BOTTOM 58
(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)

ST 1 71
60 61 63 64 66 70

OTHER CASING (if used)

diameter inch depth (feet) from to

EACH CASING

SCREEN RECORD

screen type or open hole insert appropriate code below

ST BR HO
STEEL BRASS OPEN HOLE
PL OT
PLASTIC OTHER

C2

1	2	DEPTH (nearest ft.)
1	<u>H0</u>	<u>79</u>
2		<u>400</u>
3		
4		
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6		
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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.) W Q
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 11 15

METHOD USED TO MEASURE PUMPING RATE 1

WATER LEVEL (distance from land surface)

BEFORE PUMPING 17 20

WHEN PUMPING 22 25

TYPE OF PUMP USED (for test)

A air P piston T turbine
27 27 27
C centrifugal R rotary O other (describe below)
27 27 27
J jet S submersible
27 27

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

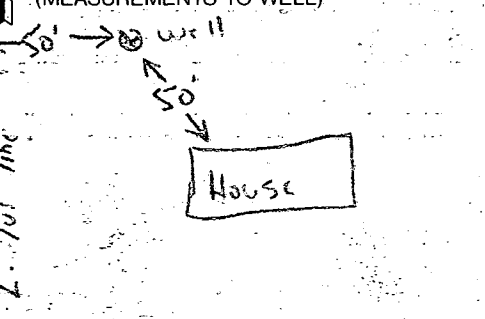
PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above LAND SURFACE (nearest foot)
- below 2 (nearest foot)
49 50 51

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)



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 26.04.04 "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. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

WELL ABANDONMENT REPORT

Date: 10-23-89

WELL NUMBER OF ABANDONED WELL (if any)

--	--	--	--	--	--	--	--	--	--

OWNER'S NAME Easterday, David L.
LAST FIRSTOWNER'S NAME Valentine, Dennis
LAST FIRST

WELL LOCATION:

COUNTY: HowardSUBDIVISION: King's ManorSECTION: LOT: 1NEAREST TOWN: FultonADDRESS: 12026 Scaggsville Rd

MARYLAND GRID LOCATION:

E	<u>821</u>
N	<u>482</u>

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

SHOW WELL LOCATION BY (X)
WITHIN BOX

TYPE OF WELL

☐ DRILLED☐ JETTED☐ BORED OR AUGERED☒ OTHER, SPECIFY Hand dugDEPTH OF WELL 30 FT.

TYPE OF CASING

☐ STEEL☐ PLASTIC☐ CONCRETE☐ OTHER, SPECIFYSIZE OF CASING 3.6 IN.WAS ANY CASING REMOVED ☒ YES ☐ NOIF YES, AMOUNT REMOVED 3 FT.WAS CASING RIPPED OR PERFORATED ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Rock Cuttings	30	10
Cement	10	7
Fill dirt	7	0

DRILLER

[Signature]

SIGNATURE

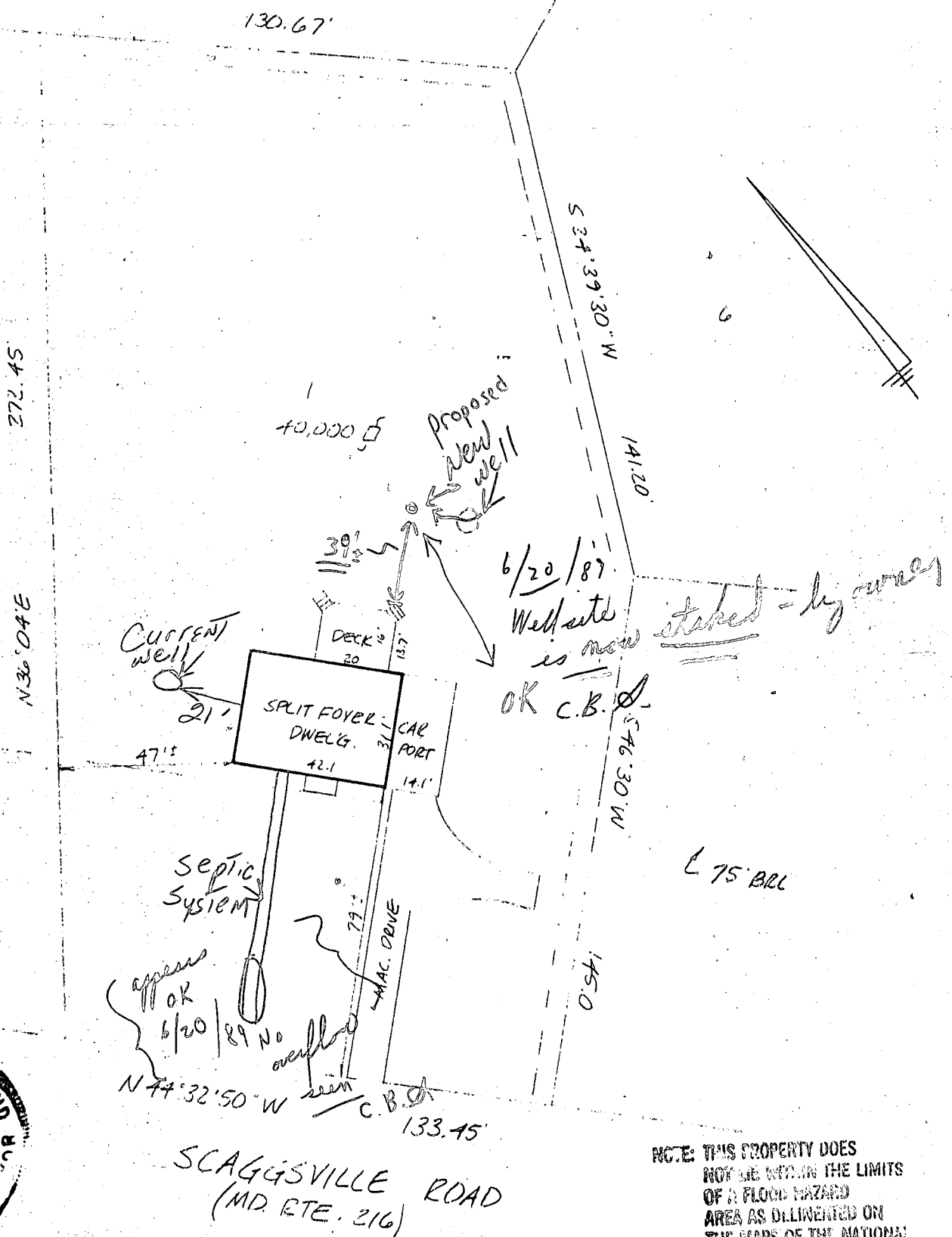
LICENSE #

481

LANDTECH ASSOCIATES INC.
1410 CRAIN HIGHWAY N.W. SUITE 7B
GLEN BURNIE, MARYLAND 21061
(301) 768-2121

4

5



NOTE: No title report furnished.

CERTIFICATION: This is to certify that the improvements indicated hereon are located as shown. This is not a property line survey and should not be used as such.

Braden A. Rogers

BRADEN A. ROGERS — PROP. L.S. MD. LIC. NO. 119

LIBER _____ FOLIO _____

LOT _____ BLOCK _____ SECT. _____ PLAT _____

PLAT ENTITLED KINGS MANOR

RECORDED IN HOWARD COUNTY MD.

PLAT BOOK 9 FOLIO 52

12026 SCAGGSVILLE RD. (MD. 216)

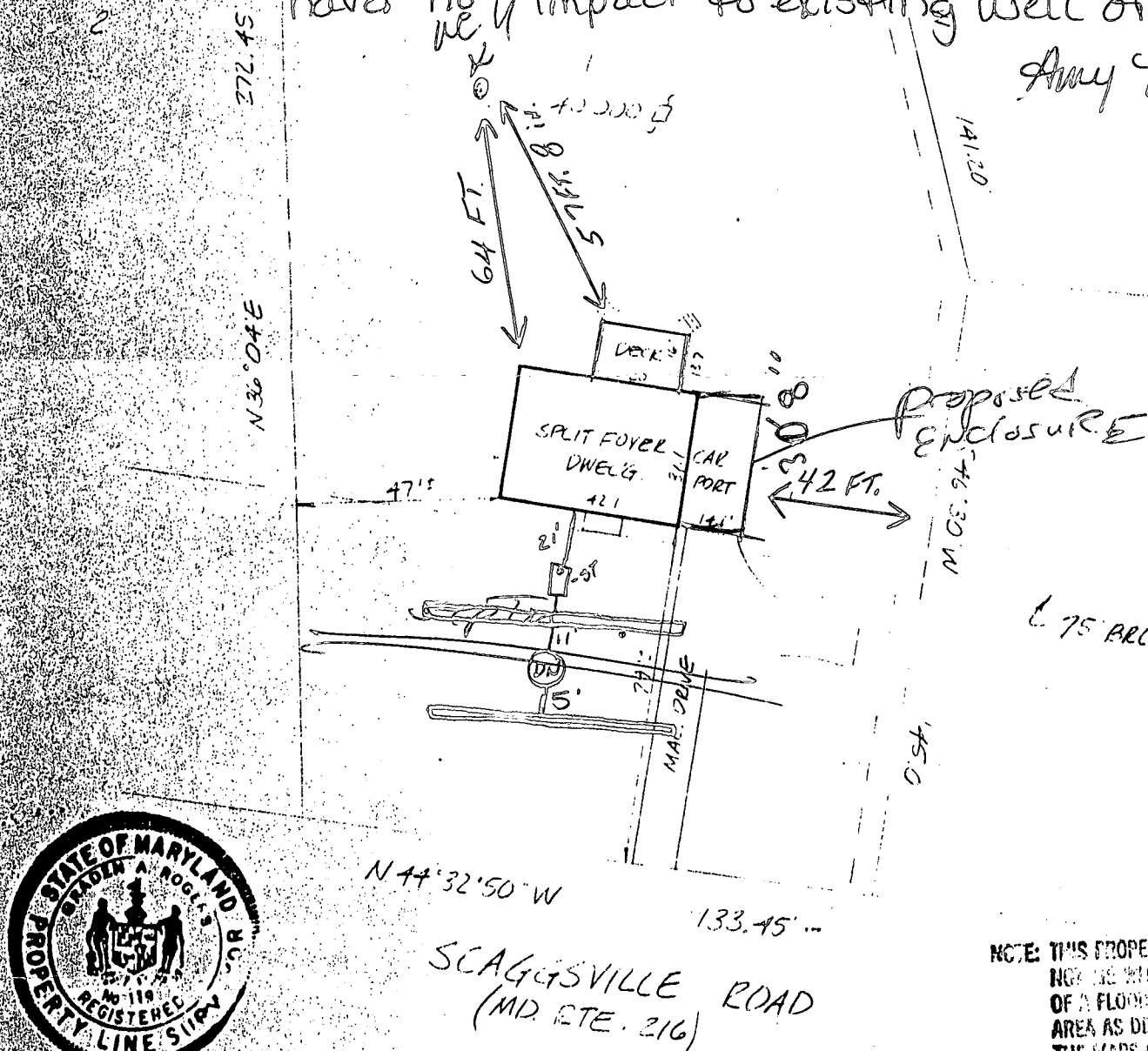
SCALE 1" = 40' CASE NO. C8812047
DATE 1-12, 1989 JOB NO. C89001

L. IDTECH ASSOCIATES IN
1410 CRAIN HIGHWAY N.W. SUITE 7B
GLEN BURNIE, MARYLAND 21001
(301) 768-2121

DV's copy

10-25-94
BP 56887- garage to be converted to 2 bedroom
addition- ammendment sent in by owners - use
to be changed to a family room addition -
(see attached copy). Proposed addition will
have no impact to existing well or septic

Amy McMill



NOTE: THIS PROPERTY DOES
NOT LIE WITHIN THE LIMITS
OF A FLOOD HAZARD
AREA AS DELINEATED ON
THE MAPS OF THE NATIONAL
FLOOD INSURANCE PROGRAM



N 44° 32' 50\"

SCAGGSVILLE ROAD
(MD RTE. 216)

NOTE: No title report furnished.

CERTIFICATION: This is to certify that the improvements in-
dicated hereon are located as shown. This is not a property
line survey and should not be used as such.

Graden A. Rogers

GRADEN A. ROGERS — PROP. L.S. MD. LIC. NO. 119

LIBER _____ FOLIO _____

LOT _____ BLOCK _____ SECT. _____ PLAT _____

PLAT ENTITLED KING'S MANOE

RECORDED IN HOWARD COUNTY MD.

PLAT BOOK 9 FOLIO 52

12026 SCAGGSVILLE RD. (MD. 216)

SCALE 1" = 40' CASE NO. C8812047
DATE 1-12, 1997 JOB NO. C89001

Amey
Avis Corbin
Dept. of Inspections
licenses & Permits
3430 Court House Rd.
Ellicott City, MD 21043

Health-Dept
LOCATION
F 01
File Copy
October 14th, 1994

FAX # 410-313-3298

Dennis Valentine - License/Permit No. 56887
12026 Scaggsville Rd.
Fulton, MD 20759

To Whom It May Concern: I applied for a building permit on October 13th, 1994, and indicated that the proposed use for my garage was to be enclosed and utilized as 2 bedrooms and a bathroom. After reviewing my proposed plan I have decided to use this space for a proposed family room. Please change my application to reflect this change. Thank you for your cooperation.

Sincerely,

Dennis Valentine
Dennis Valentine

Craig Williams
Director, Water & Sewage
Bur. of Environmental Health
3525 Ellicott Mills Dr.
H
Ellicott City, Md. 21043

November 1st, 1989

Dennis Valentine
Countryside
12026 Scaggsville Rd.
Fulton Md. 20759

I am applying to the Maryland Office on Aging under Section 11. Chapter 14.11.07, Article 70B of the Annotated Code of Maryland for a certificate to operate a Senior Assisted Housing Group Home. That facility will be located at: 12026 Scaggsville Road, Fulton Md. 20759

The house contains 6 bedrooms and the intended occupancy at this time will be 8 people.

I need a letter of opinion from your office stating that the water and/or sewer facilities at the above property are sufficient for the number of people stated above.

Sincerely,


Dennis Valentine

EASTON DAY 10/23/89
ABANDONED
MR
per
Easterday

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
DIVISION OF
ENVIRONMENTAL
HEALTH
NOV 3 9 11 AM '89