

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

65-422183

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

P 511057

A49861-M

DISTRICT _____

DATE 10/20/98

DATE SYSTEM APPROVED 8/17/99

INSPECTOR M. Rifkin

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE (410) 79-5674

SUBDIVISION Springdale Estates LOT 11 ROAD 13717 Springdale Drive

PROPERTY OWNER Dale Thompson Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS***MANHOLE CLEANOUT REQUIRED AT SEPTIC TANK***

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 300

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 45 feet off the right lot line and 60 feet off the front lot line as seen when facing the lot from Springdale Drive. Run trenches on contour toward the 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 KM 10.1.98

PLANS APPROVED BY Amy McMillen/Mark Rifkin REVISED _____ DATE 9-28-98

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

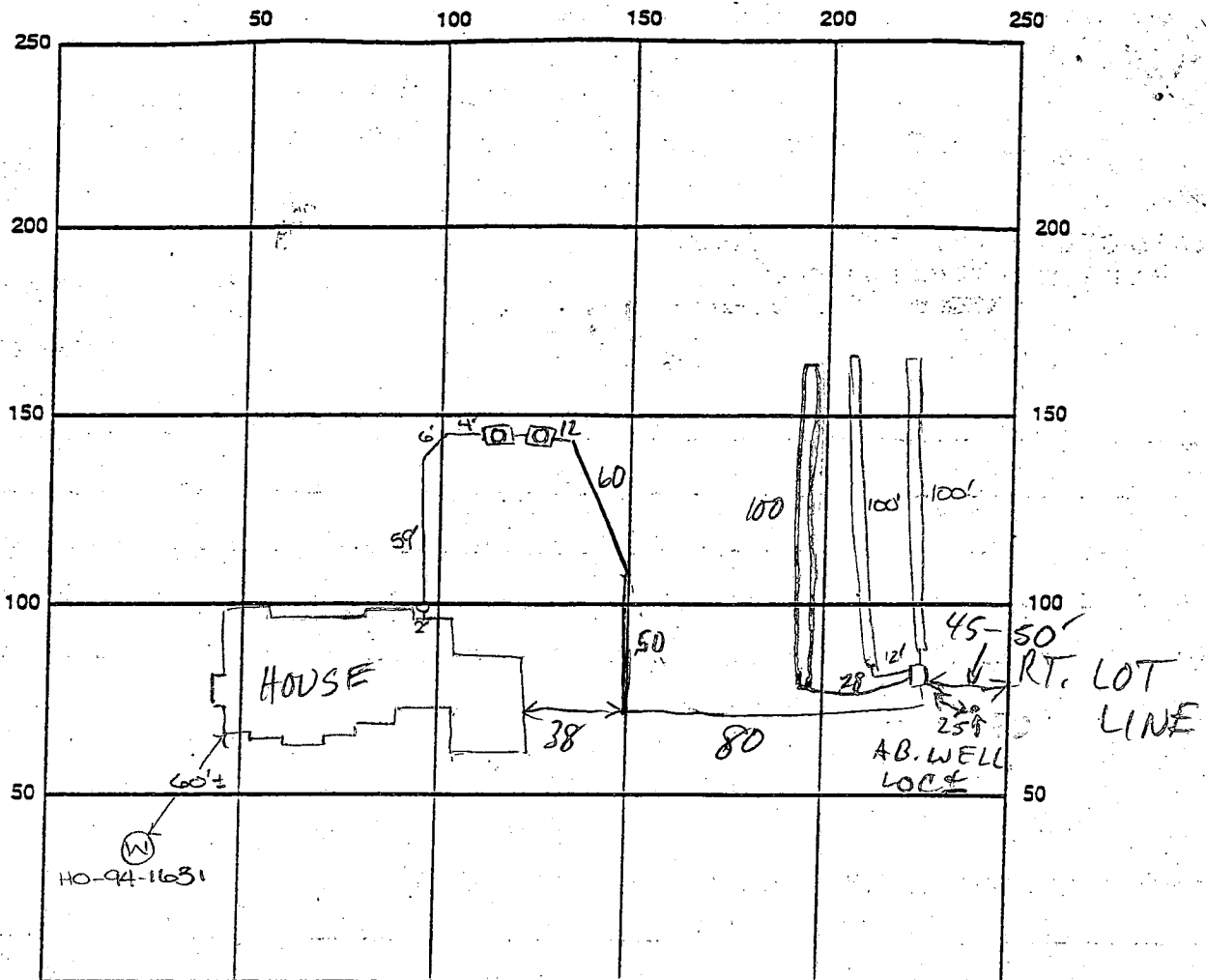
PERMIT VOID AFTER TWO YEARS

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

479861-10



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Springdale Drive

SEPTIC TANK LEVEL OK - 2 x 1500 gal tp cleanouts MH @ EACH TANK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3 x 100 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL / BOTTOM AREA 3 @ 300 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 900 SQ. FT.

REMARKS: 10/28/98 NO WORK TODAY (MR)

12/4/98 OK to cover from house to septic tank and first trench. OK to continue. DKS

12/7/98 OK TO COVER TANKS & TRENCHES; HOLD FOR PUMP INS (MR)

8/13/99 PUMP & ALARM OPERATIONAL; BUT PUMP NOT SEATED ON BLOCK; FOGLE'S TO CALL WHEN RESET. (MR) 8/17/99 FOGLE'S REPORTS PUMP RE-SEATED

DATE SYSTEM APPROVED 8/17/99 INSPECTOR M. Rifkin

LEGEND

Mike E. R. Kim

1902

INVERT ELEV.

House	410
Septic In	409
Septic Out	408.5
Pump In	408.25
Pump Out	407.75
DIST BIX	425.5

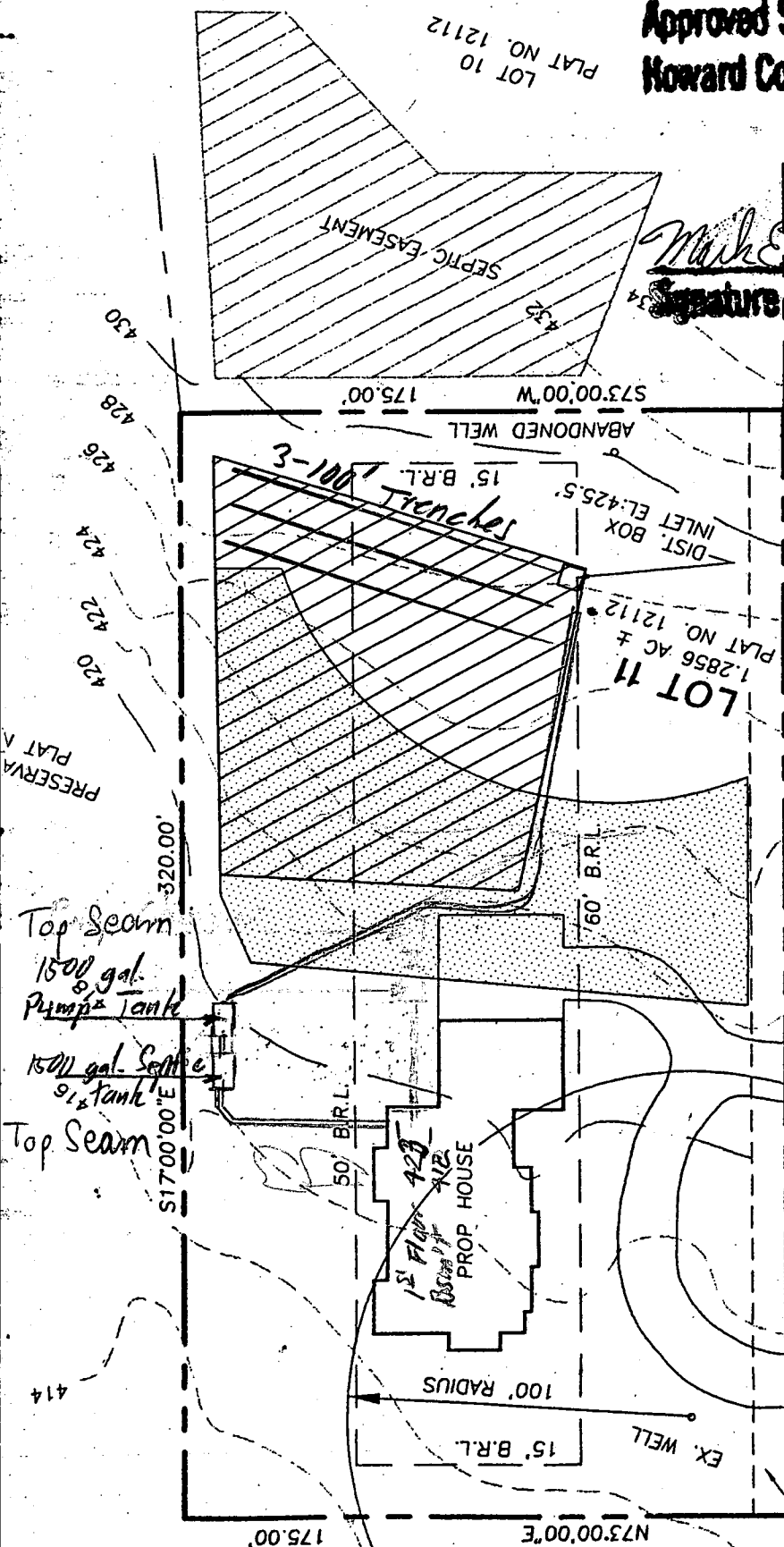
(50' RIGHT-OF-WAY)
MANHOLES
REQ'D AT
EACH TANK
IF MORE
THAN 3' OF
FINISHED
COVER

Total linear feet of trench required 300 feet

Width of trench(es) 3 feet

Depth of trench(es) 51 feet

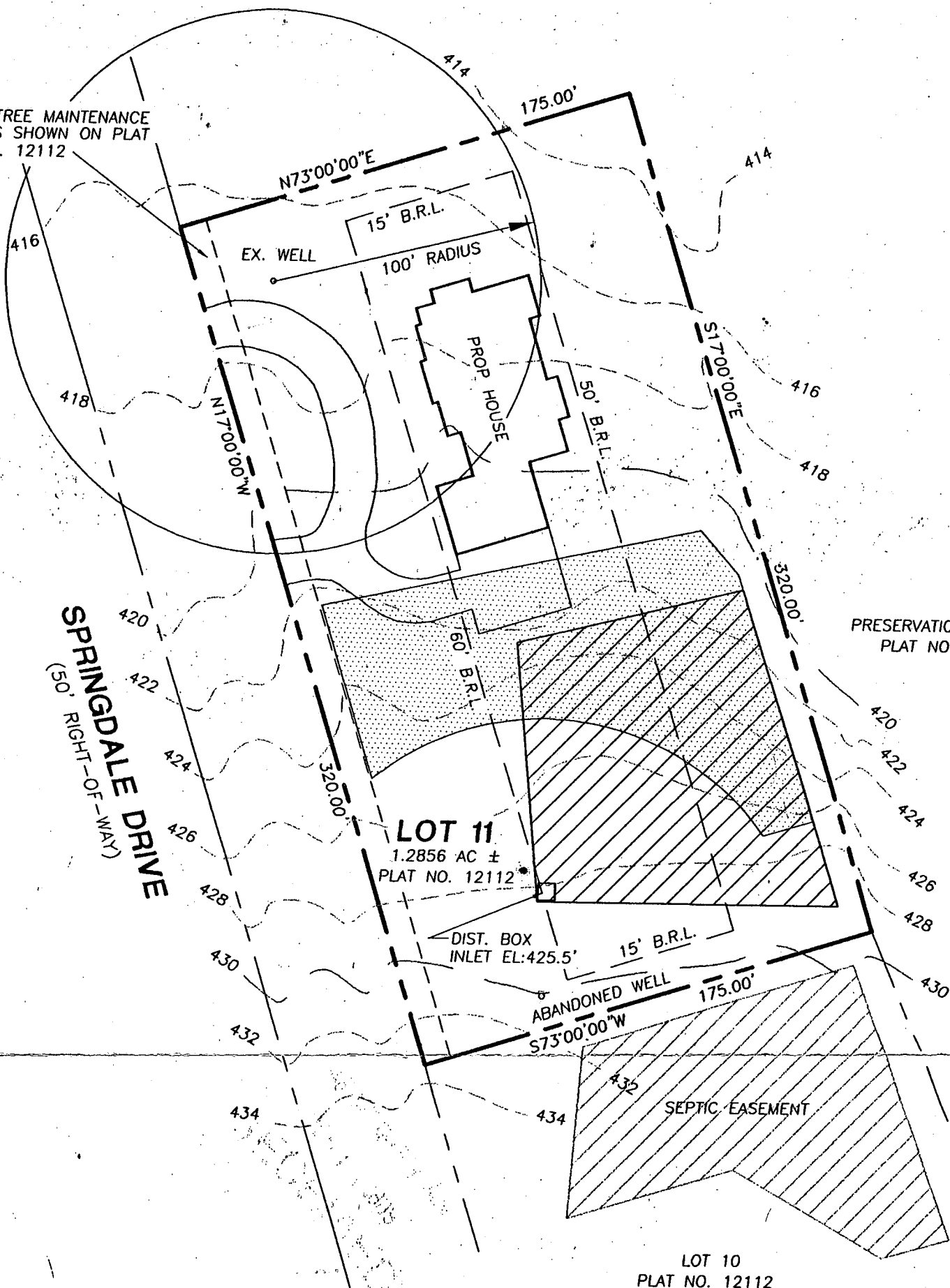
Depth of stone required below:
distribution pipe 2 feet



PRESERVATION PARCEL A
PLAT NO. 12112

MD. STATE GRID MERIDIAN

10' PUBLIC TREE MAINTENANCE
EASEMENT AS SHOWN ON PLAT
NO. 12112



LEGEND

- EXISTING SEPTIC EASEMENT AREA ON LOT 11 AS SHOWN ON PLAT NO. 12112
- NEW SEPTIC EASEMENT AREA FOR LOT 11.

NOTE: 1. THE CONTOURS AND ELEVATIONS SHOWN HEREON ARE BASED ON CLIENT SUPPLIED TOPOGRAPHY.
2. THE PROPERTY LINES SHOWN HEREON ARE BASED ON A PLAT ENTITLED 'SPRINGDALE ESTATES LOTS 1-18 AND PRESERVATION PARCELS A&B AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY MARYLAND AS PLAT NO. 12112
3. ALL EXISTING WELLS AND SEPTIC EASEMENTS WITHIN 100' OF PROPERTY BOUNDARIES HAVE BEEN SHOWN.

THIS AREA DESIGNATES A MINIMUM 10,000 SQ FT PRIVATE SEWAGE EASEMENT REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL, IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED AND SHOWN AS

PERCOLATION AREAS AND WATER WELLS WITHIN 100 FEET OF PROPERTY LINES ARE SHOWN ON THIS PLAT.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS

Joyce M. Boyd
COUNTY HEALTH OFFICER *JIR* DATE *9/28/98*



RECORD REFERENCES

TAX MAP : 34
PARCEL : 60
PLAT NO./FOLIO : 12112

SCALE : 1"=50'
DATE : 9-14-98

**PERCOLATION TEST
PLAT
SPRINGDALE ESTATES**

LOT 11
5TH ELECTION DISTRICT
HOWARD COUNTY
MARYLAND

**VOGEL &
ASSOCIATES**
ENGINEERS • SURVEYORS • PLANNERS

3691 Park Avenue, Suite 101 • Ellicott City, Maryland 21043
Tel 410.461.5828 Fax 410.465.3966

APPLICATION

PERCOLATION TESTING

A 49861M

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT 5

DATE 2/1/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Thomas & Mary Knight Dale Robinson Builders
Highland Development Corporation

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 410-531-5539

AGENT OR PROSPECTIVE BUYER Richard Demmitt

ADDRESS P.O. Box 208 Clarksville Md. 21029 PHONE 410-531-5539

PROPERTY LOCATION:

SUBDIVISION Springdale Estates LOT NO. 20 (~~Twenty~~) 11 on percent

ROAD AND DESCRIPTION Brighton Dam Rd. on south side, 1 1/4 mile
west of Highland Rd.

TAX MAP 34 PARCEL # 60

SIZE OF LOT 20 25 acres + TYPE BLDG. _____
BLDG. PERMIT SIGNED AND RETURNED 7/25/95
Serial # 60759-SFD
S.F.D. 4800
(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.

Richard Demmitt
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

49861 M

COUNTY #

SOIL PROFILE

Lot 20 1 min @ 4' 2 min @ 4 1/2'

0' FILL
2' red org
sa cl lm
3' red yel
sa lm
15% flagstone
frags
12-13 soil moist
15 silty

A

FILL

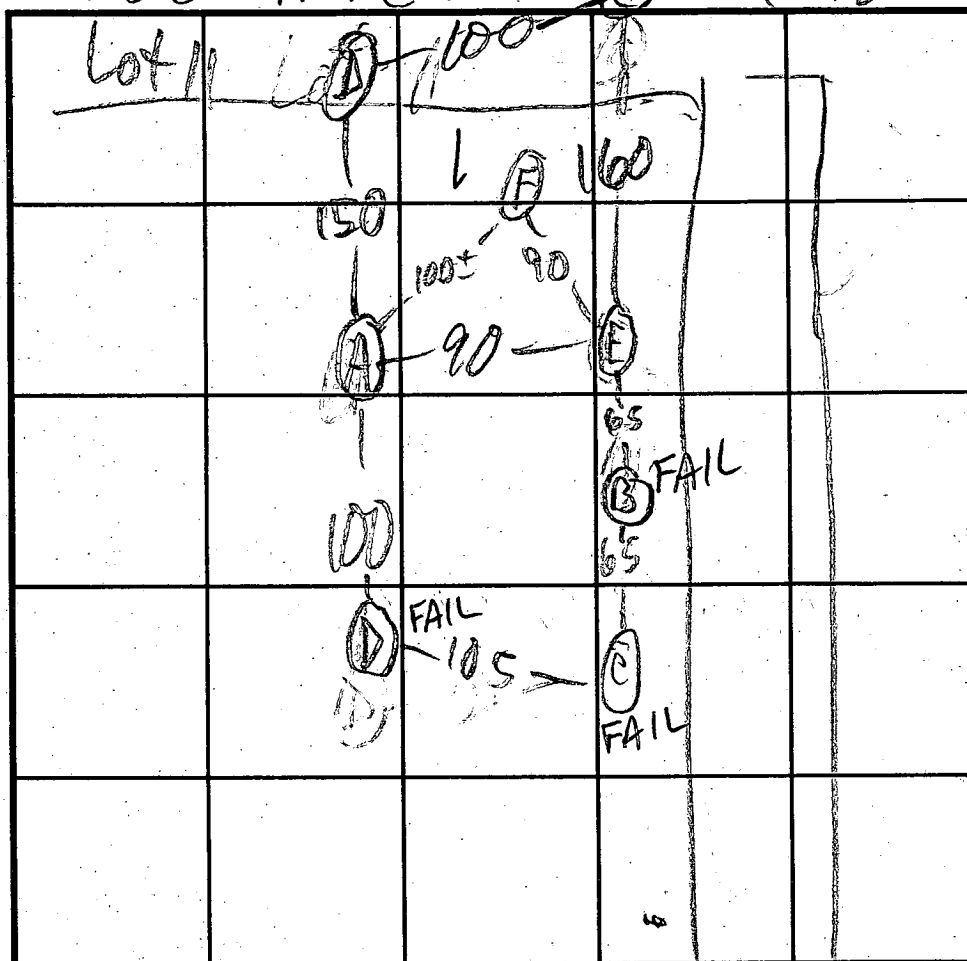
1' red
sa mica
loam
4' brn
si sa
lm
<5%
frags

D

FILL

1' red brn
sa cl lm
3' brn
sa lm
10% frags

9' WATER
10'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' FILL
1 1/2' org brn
sa cl lm
3' brn red
sa mica lm
<5%
frags
12 1/2' WATER

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/11/94	A S	3' 9"	10:59			20 sec	FAST
	A S	3' 9"	10:59			20 sec	FAST
	A S	4	11:02			20 sec	FAST
	B S	5	11:04	11:05	11:05	11:13	8
	B S	5	10:14	10:17	10:17	10:26	9
	B V	15	moist	@ 12:13		FAIL	
	C S	4	10:30	10:32	10:32	10:38	16
	C V	13	H ₂ O - @ 8'			FAIL	
	D S	4	10:39	10:43	10:43	STOPPED	
	D V	10'	H ₂ O - @ 9'			FAIL	
	A M	5 1/2	10:59	11:03	11:03	11:11	8
	A V	11 1/2					
	E S	4	11:09	11:14	11:14	11:20	6

REMARKS

E V 12 1/2 H₂O @ 12 1/2

TYPE OF SOIL

F V 11 sim to E 5% blocky frags

TESTED BY

M. Rifkin HOLES A-D PER PLAN

ALSO PRESENT Allen Demmitt

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

A-E-F + C D Lot 11

TRENCH WIDTH

3

INLET DEPTH

3

MAXIMUM BOTTOM DEPTH

5

SQ. FT./BEDROOM

180

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 11

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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0'

GRAVEL
FILL

2'3"

org
clayey
silt

6-7

fine
tan
sa mica
lm

11

①

1 1/2

FILL

little
or no
cl layer
br
sa si lm

6+

tan
gray
fine
sa lm

12

②

FILL

org red
sa cl lm

5

brn
si mica
lm
5% frags

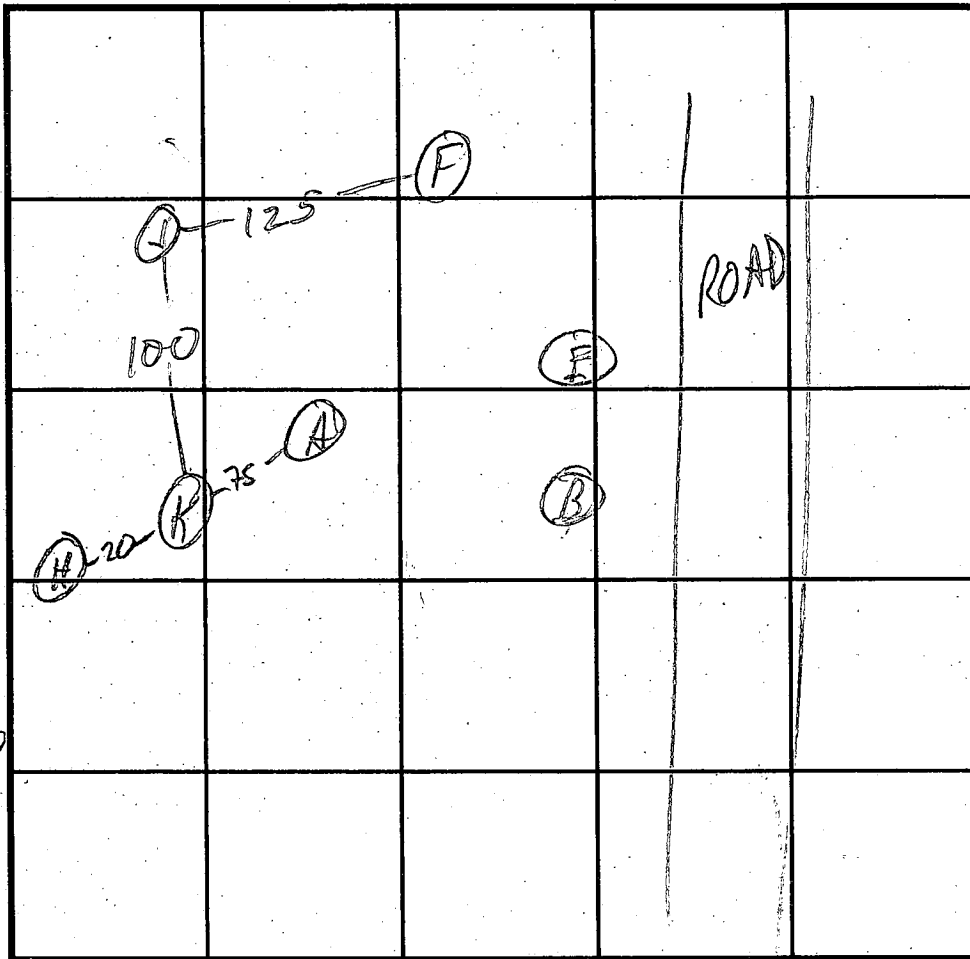
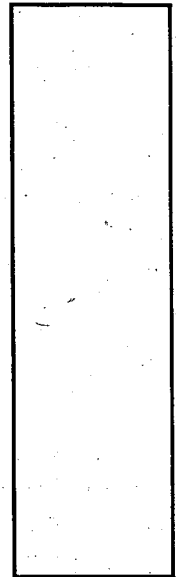
11'3"

11 1/2

WATER

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/2/94	11K S	4'3"	10:22	10:28	10:28	10:41	13 EST
	11K V	11					
	11J S	4'8"	10:31	10:32	10:32	10:33	1
	11J V	12					
2/1/95	H V	11 1/2	H ₂ O	@ 11'3"		6 HRS	

REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT R. D. J. Allen

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

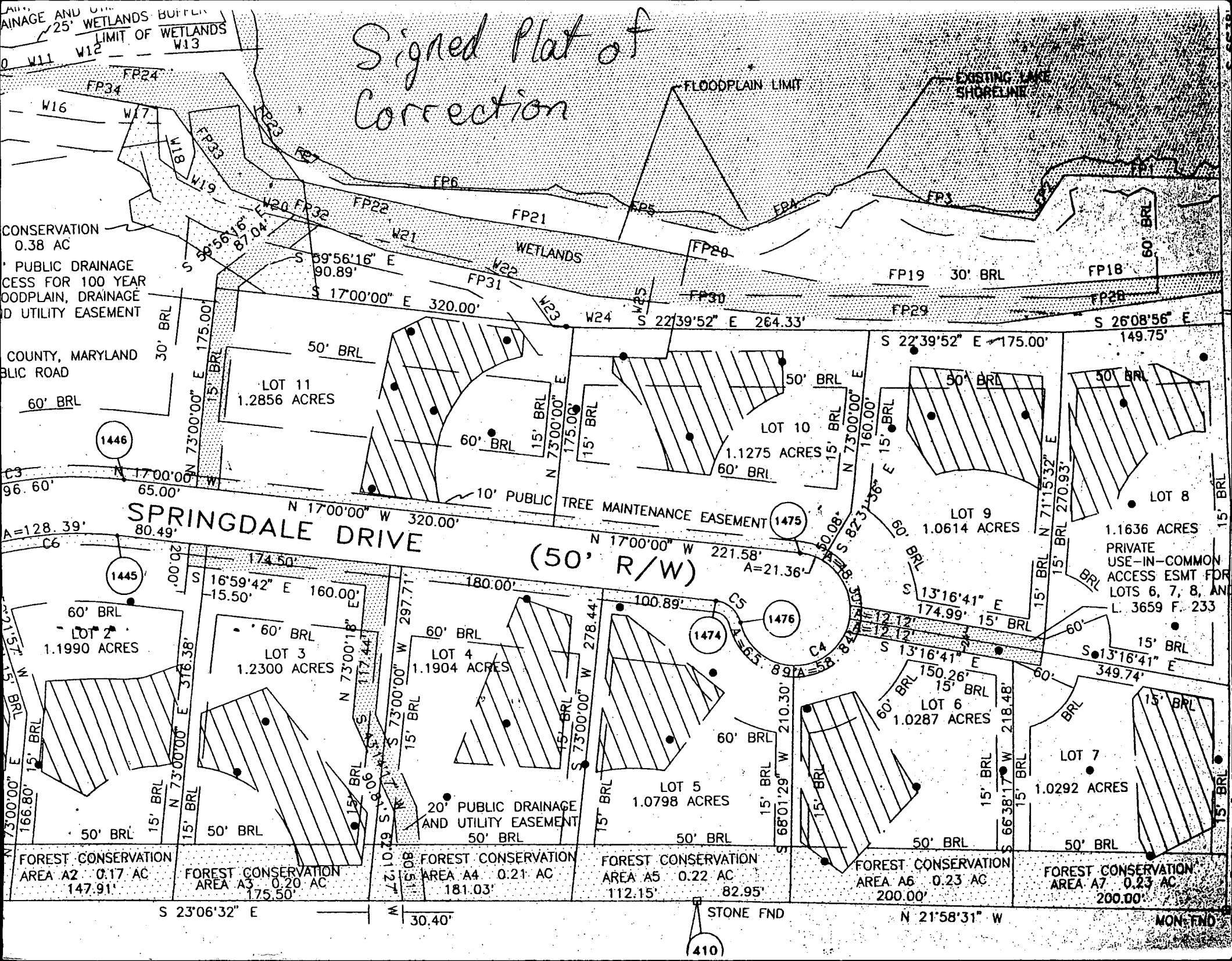
TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

Signed Plat of Correction



SEQUENCE NO. (WIDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY
PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.

COUNTY
NUMBER **149861 M**

ST/CO USE ONLY
DATE Received
MM DD YY
8 -13

DATE WELL COMPLETED
MM DD YY
15 3 98

Depth of Well
22 **440** 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
160-94-1631

OWNER **THOMPSON DALE**
last name first name
STREET OR RFD **SPRINGDALE DRIVE** TOWN **CLARKSVILLE**
SUBDIVISION **SPRINGDALE ESTATES** SECTION **11** LOT **11**

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	
Sand	0	45	
Limestone	45	440	✓

GROUTING RECORD (yes) (no)
Y **N**

WELL HAS BEEN GROUTED.
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **22** NO. OF POUNDS **2068**

GALLONS OF WATER **132**

DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **45** ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch!) **6** Total depth of main casing (nearest foot) **51**

OTHER CASING (if used)

diameter depth (feet)
inch from to

SCREEN RECORD

screen type or open hole

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

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** **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**

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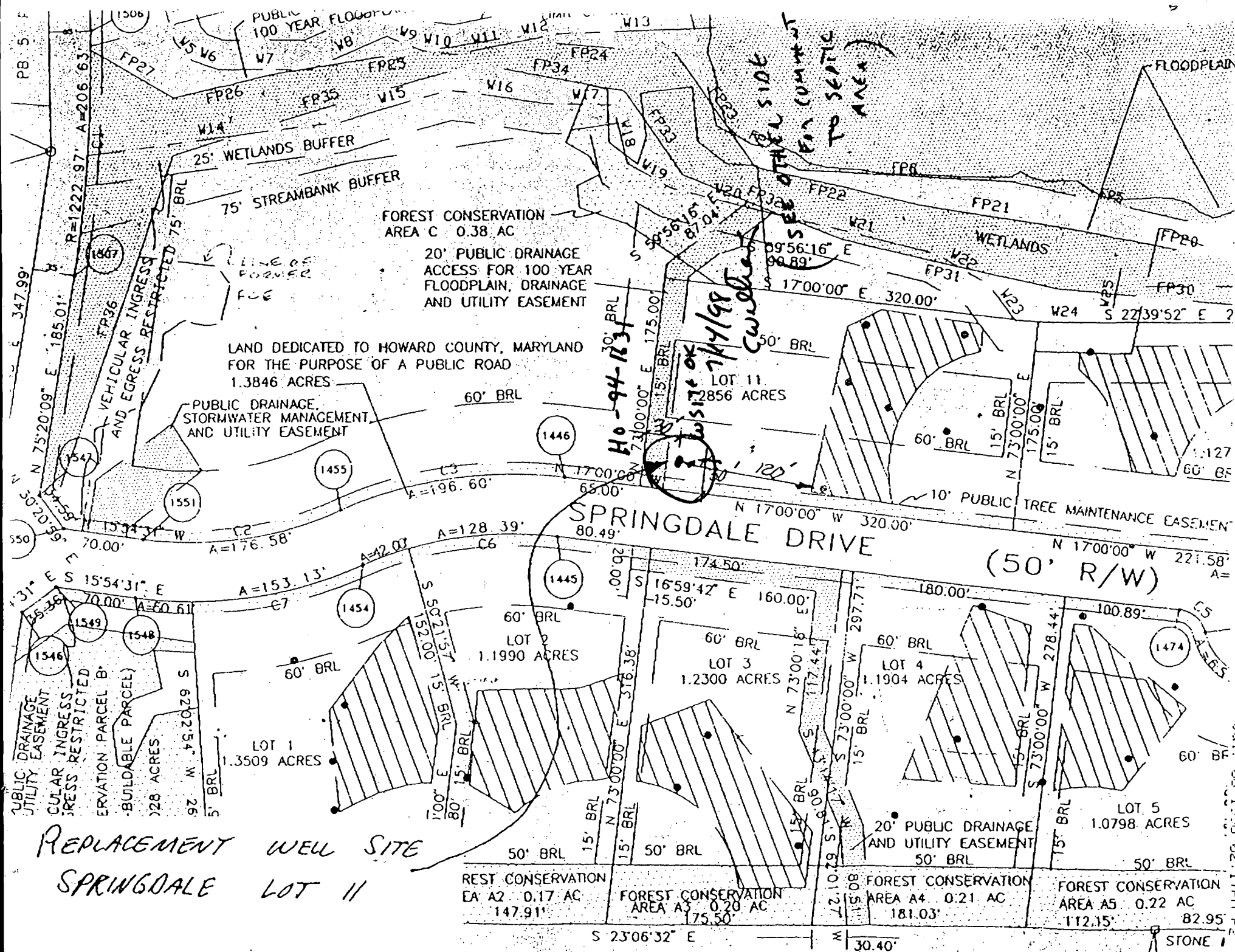
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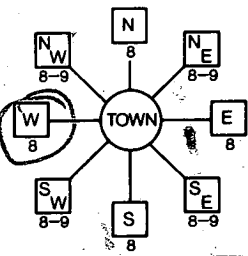
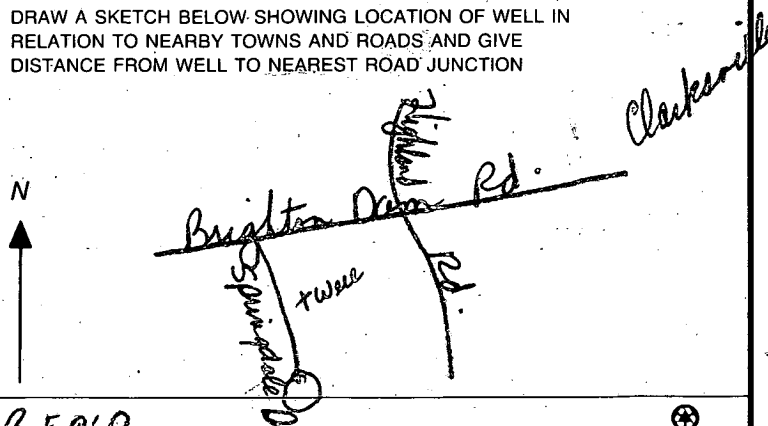
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JUL 09 1998
HARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

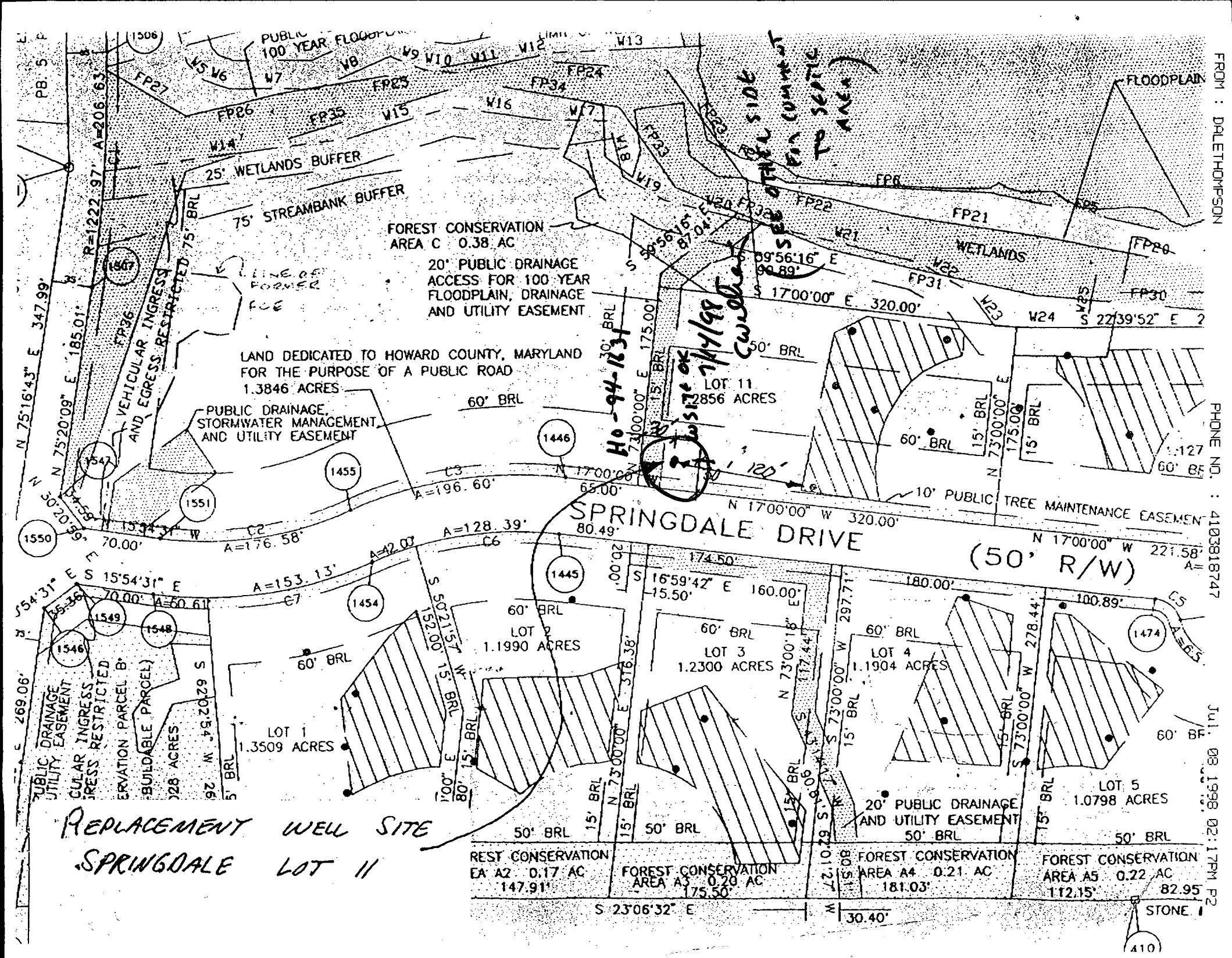
LOT 11 WELL SITE (REPLACEMENT)
OK ~~at~~ LOW CORNER OF LOT,
CONTINGENT UPON ADJUSTMENT
OF SEPTIC AREA AS FAR TO
REAR OF LOT AS POSSIBLE.
D KELL & D THOMPSON PRESENT.

7/14/98

(CW)

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH
1998 AU - 6 PM 3:09

B 1 3622 1 2 3 *6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-1631 70 fill in this form completely 79
Date Received (APA) OWNER INFORMATION 8 MM DD YY 13 Thompson Dale 15 Last Name Owner First Name 34 10005 Old Columbia Rd. 36 Street or RFD 55 Columbia Md. 21046 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL 8 COUNTY 21 Howard Springdale Estates 23 SUBDIVISION 42 SECTION 11 LOT 11 44 46 48 50 Clarksville 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 4 73 M I 76 77 78	
DRILLER INFORMATION Joseph L. Mayne M SD 024 Driller's Name 76 License No. 81 Joseph L. Mayne Well Drilling Firm Name 5512 Ridge Rd. Mt. Airy 21771 Address Joseph L. Mayne 7/8/98 Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) Springdale Drive 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 30 37 DISTANCE FROM ROAD 30 ENTER FT OR MI FT 38 39 TAX MAP: _____ BLK: _____ PARCEL: _____	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A49861 M COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S → AW DATE ISSUED 071598 7/14/99 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 496 000 EAST GRID 0804 000 50 55 57 63	
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 APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		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 8004 N 4906 000 000	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) ☒ JETTED ☐ Jetted & DRIVEN ☐ 30 AIR-ROTARY 37 CABLE AIR-PERCussion ☐ ROTARY (Hydraulic Rotary) ☐ Drive-POINT ☐ REVerse-ROTary ☐ 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) HO-94-0334 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  DISTANCE FROM WELL TO NEAREST ROAD JUNCTION _____	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 54 G A P 63 FORCE CW INITIALS HO-94-1631 PERMIT No. 70 71 72 73 74 75 76 77 78 79 67 68			
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - YIELD TEST REQ'D.			



RECEIVED
JUL 09 1998
WARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

LOT 11 WELL SITE (REPLACEMENT)
OK ~~at~~ LOW CORNER OF LOT,
CONTINGENT UPON ADJUSTMENT
OF SEPTIC AREA AS FAR TO
REAR OF LOT AS POSSIBLE.
D KERN & D THOMPSON PRESENT.

7/19/98

(CW)

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-N Ellicott Mills Drive
Ellicott City, MD 21043
410-9683

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer Willoughby Plumbing

Telephone 410-781-7051

Liscense Number #6992

Certified Well Pump Installer _____

Well Driller _____

Registered Plumber ☒

Name of Property Owner JANE THOMPSON BLADES

Telephone 410-995-6731

Subdivision SPRINGDALE

Lot # 11

Well Tag # 10-99-16-31

Site Address 13700 SPRINGDALE DR.

CHARLEVILLE, MD 21029

Pump

Motor

Pitless Adapter

1. Type

a. Deep well jet _____

b. Shallow well jet _____

c. Submersible ☒

1. Horsepower _____

2. RPM _____

3. Voltage _____

a. 110 _____

b. 220 ☒

1. Make WELVARD

2. Model # _____

3. Depth 4

2. Make _____

3. Model # _____

4. Capacity 7 GPM

5. Pump exceeds well capacity Yes _____ No ☒

6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____

7. What methods are used to protect the pump and electrical wiring from

vibrations? Torque arrestors ☒

Cable guards ☒

Other TAPS

Tank

1. Capacity 40 gal

2. Pressure relief

valve? yes

Piping

1. Type CRESTLINE

2. Size 1"

3. NSF and/or BOCA

Code approved yes

4. Depth of supply

line 4 ft

Well data

1. Depth 440 ft.

2. Yield 4 GPM

3. Static water

level _____ ft.

4. Will water supply

be affected by

installer? no

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

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

Signature of Applicant: Chris Willoughby

Date: 5-2-99

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

40-213

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: 8/3/98 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: Joseph L. Mayne

WELL DRILLERS LICENSE NUMBER: 024

* OWNER'S NAME: Dale Thompson Builders

CIRCLE: MWD/MSD/MGD

* WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: Clarksville

TAX MAP BLOCK PARCEL

SUBDIVISION: Springdale Est.

SECTION: LOT: 11

NEAREST ROAD: Springdale Dr.

MARYLAND GRID COORDINATES

E 800

BOX NUMBER

N 490

	X
000	000

SHOW WELL LOCATION
BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

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

* USE CODE:

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

* TYPE OF CASING:

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

* SIZE OF CASING: 6 5/8 INCHES IN DIAMETER

* DEPTH OF WELL: 400 FEET DEEP

* WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 4

* WAS CASING RIPPED OR PERFORATED? ☐ YES ☒ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement	0	51
Washed gravel	51	400

SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE #

MWD/MSD/MGD
CIRCLE ONE

DATE

C1 3528

SEQUENCE NO.
(DENV USE ONLY)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 49861 M

ST/CO USE ONLY
DATE Received

032395

DATE WELL COMPLETED

031495

Depth of Well

22 400 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

HQ-94-0334

OWNER

last name

Demmitt

first name

Richard

STREET OR RFD

Springdale Dr

TOWN

clarksville

SUBDIVISION

Springdale

SECTION

LOT 11

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

Check
if water
bearing

FROM

TO

SAND

0

48

GRAY MICH
ROCK

48

400

GROUTING RECORD

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

TYPE OF GROUTING MATERIAL

CEMENT CM 45 46

BENTONITE CLAY BC 45 46

NO. OF BAGS 15

NO. OF POUNDS 1410

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 39 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

ST 60 61

6 63 64

52 66 70

OTHER CASING (if used)

diameter inch depth (feet) from to

E
A
C
H
C
A
S
I
N
Gscreen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
OTHERIN HARD ROCK AREAS, IDENTIFY SPECIFICALLY
WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED

yes
Yno
N

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
WELLI 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 PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO.

24

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

MDE USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

W Q

TELESCOPE

LOG

OTHER DATA

CASING

INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour)

6 8 9

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

106 11 15

METHOD USED TO
MEASURE PUMPING RATE

Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

25 17 20

WHEN PUMPING

33 22 25

TYPE OF PUMP USED (for test)

A air 27

P piston 27

T turbine 27

C centrifugal 27

R rotary 27

O other (describe below) 27

J jet 27

S submersible 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

YES (NO)

(CIRCLE) (YES or NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS

EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O)

IN BOX - SEE ABOVE:

CAPACITY:

GALLONS PER MINUTE

(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH

(nearest ft.)

CASING HEIGHT (circle appropriate box
and enter casing height)

+ above

- below

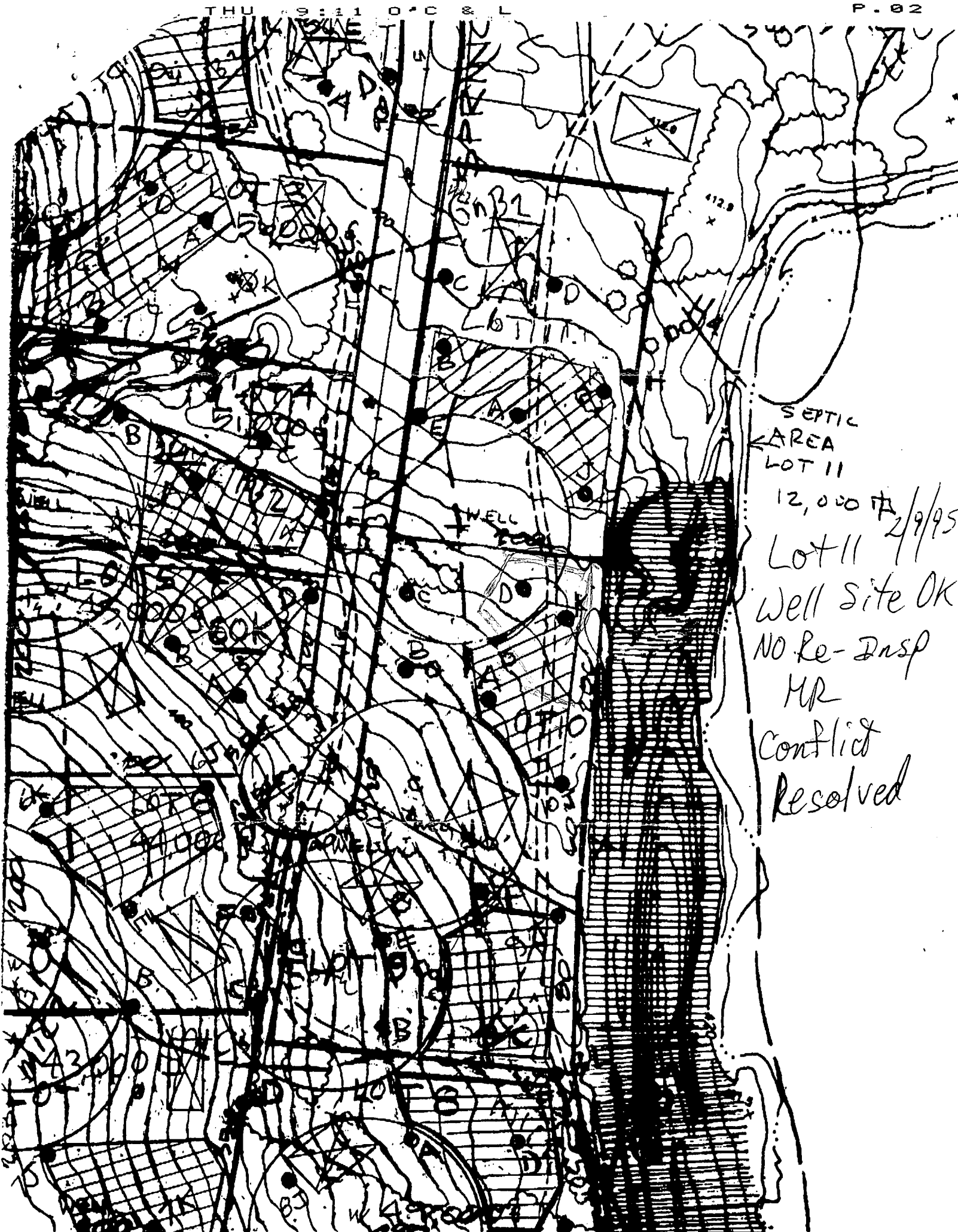
LAND SURFACE

(nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)See Attached
Location

COUNTY



SEPTIC
AREA
LOT 11

12,000 ft 2/9/95

Lot 11

Well Site OK

NO Re-Disp

MR

Conflict

Resolved



PRESERVATION
PARCELS
38,93 ACRES

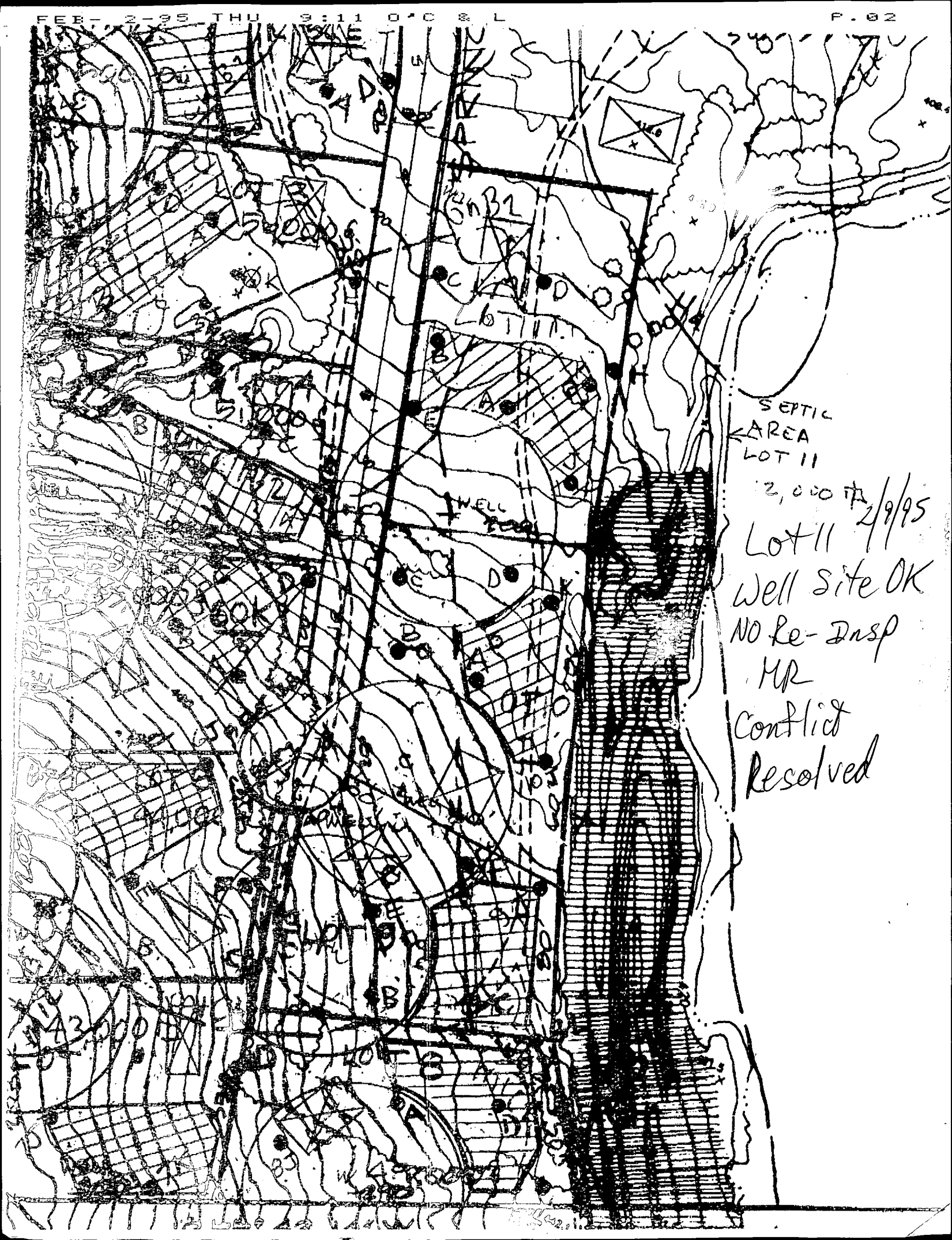
SEE AND
CONFIRMED
PLAN OF 11/19/95
CHANGED DESPITE NEW
SUBSTANTIALITY
SITUATION NOT
11/27/95 w/2 DEMONSTRATION

NOT TO
REVIEW A
ERROR SURVEY
APPEARANCE SURVEY
CONFIRMED
SURVEY
W/S BORDER
11/13/95

REVIEW
SURVEY TO
PROBABLE
W/2 DEMONSTRATION
BE NEAR
SEEMS TO
NOT BE CORRECT
WELL STAKE
11/12/95

LOT 11

W 1/4 42 1/2



SEPTIC
AREA
LOT 11

2,000 ft 2/9/95

Lot 11

Well Site OK

NO Re-Disp

MR

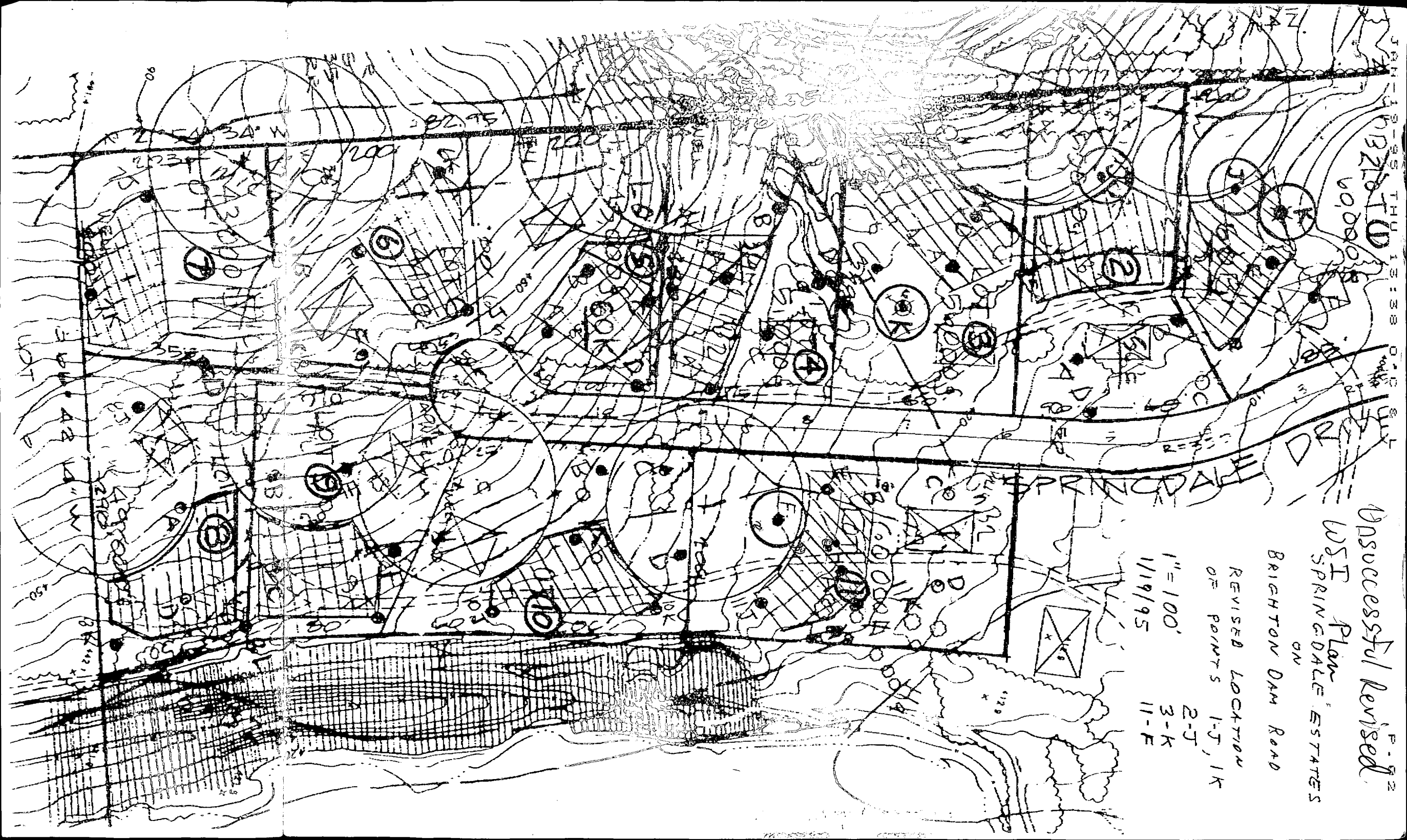
Conflict

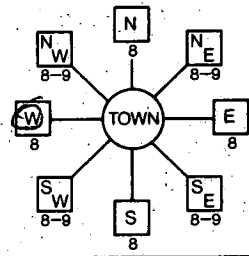
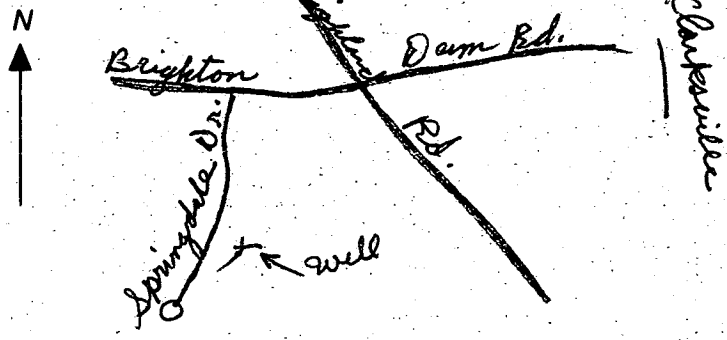
Resolved

UNSUCCESSFUL Revised
WST Plan
SPRINGDALE ESTATES
ON
BRIGHTON DAM ROAD

REVISED LOCATION
OF POINTS 1-J, 1-K
2-J
3-K
11-F

1" = 100'
1/19/95



B 1 5339 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-0334 fill in this form completely
OWNER INFORMATION Date Received (APA) 121294 15 Last Name 8 Demmitt 13 Owner 34 RICHARD 36 Street or RFD 55 BOX 228 57 Town 70 State 72 MD 76 Zip 1029		B 3 LOCATION OF WELL 8 COUNTY 21 HOWARD 23 SUBDIVISION 42 SPRINGDALE SECTION 44 46 LOT 48 50 11 52 NEAREST TOWN 71 CLARKSVILLE MILES FROM TOWN (enter 0 if in town) 73 3 76 77 78 MI	
DRILLER INFORMATION Driller's Name 77 License No. 80 Joseph E. Mayne 24 Firm Name Joseph E. Mayne Well DRILLING Address 5512 Ridge Rd. Mt. Airy, Md. 21771 Signature 12/10/94 Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD 11 Springdale Drive 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 25 37 DISTANCE FROM ROAD ENTER FT OR MI FT 38 39 TAX MAP: _____ BLK: _____ PARCEL: _____	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A 49861 M COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 021095 Mark E. Rifkin 02/10/96 CO SIGNATURE EXP. DATE NORTH GRID 496000 EAST GRID 0804000 50 55 57 63	
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)		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 8024 N 4986 000 000 TAG OK MR	
APPROXIMATE DEPTH OF WELL 265 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY 37 AIR-PERCussion ROTARY (Hydraulic Rotary) 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 	
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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEN 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 MR WRITE INITIALS IN BOX PERMIT No. 40-94-0334 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			

1/30/95

CHRONOLOGY

SPRINGDALE -- LOT 11

12/12/94 WELL PERMIT RECEIVED

1/10?/95 REC'D NOTIFICATION OF STAKING OF WELL SITE

1/12/95 FIRST WELL SITE INSPECTION--LOT 11 WAS FIRST LOT INSPECTED; SANITARIAN M.R. OBS'D WELL SITE 20 FEET FROM (AND AT SAME ELEV. AS) HOLE "F", & ONLY 95-100 FEET FROM HOLE BELIEVED TO BE "A" (SCALES AT 150 FEET ON SITE PLAN); M.R. THEN SUSPENDED INSP OF OTHER LOTS IN ORDER TO CALL R. DEMMITT FROM FIELD TO ATTEMPT RESOLUTION OF LOT 11 IN FIELD; AT SITE MEETING (SAME AFTERNOON), R. DEMMITT WAS NOT IN TOTAL AGREEMENT WITH M.R.'S DETERMINATION OF DISCREPANCY, BUT AGREED TO HAVE ENGINEER MEET M.R. HERE; WELL SITES 6-10 APPROVED, PERMITS ISSUED

1/13/95 FIELD MEETING WITH S. BARBER (SURVEYOR), AND HE RECOGNIZED CERTAIN DISCREPANCIES BETWEEN SIGNED PERC CERT AND LOCATION OF WELL SITE IN FIELD; HE WAS UNCERTAIN OF CAUSE, BUT HE AGREED TO REVIEW SURVEY DATA; PROCEEDED WITH WELL SITE INSPS. FOR OTHER LOTS; LOTS 4 & 5 APPROVED, WHILE ~~ANOTHER~~ SURVEY DISCREPANCIES NOTICED ON LOTS 1-3, SITES NOT APPROVED

1/19/95 ENGINEER FAXED REVISED PLAN, WHICH DEPICTED A REVISED HOLE "F" MOVED DOWNHILL 25-30 FEET, BUT EVERYTHING ELSE SHOWN WAS IDENTICAL TO THE ORIGINAL SITE PLAN

1/27/95 WELL SITE INSP WITH R. DEMMITT; WELL STAKE NOT MOVED, TRANSIT POINT ALSO DID NOT APPEAR TO HAVE MOVED; M.R. MAINTAINED DETERMINATION OF DETERMINATION OF DISCREPANCY BETWEEN PLAN AND FIELD LOCATIONS; M.R. AGREED TO BRING PROBLEM TO C.W.'S ATTENTION; R. DEMMITT AGREED TO HAVE ENGINEER TAKE ANOTHER LOOK