

12795

9-18-84
11AM

03-311503

PERMIT

P 37549
36928
A 36928

SEWAGE DISPOSAL SYSTEM MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH

ELLICOTT CITY

992-2330
XXXXXXX
461-9933

DISTRICT 3rd

DATE 8/19/86

INDEXED

Donald Parlette IS PERMITTED TO INSTALL X ALTER

ADDRESS 6575 Route 32, Clarksville, MD 21029 PHONE 531-2140

SUBDIVISION 12865 ROAD 12855 Route 144 LOT

PROPERTY OWNER Teresa Kay & Gary Lee Stonesifer
12855 Route 144

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 8½ feet below original grade. Effective area begins at 3½ feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 25 feet from the rear lot line and 120 feet from the right lot line as seen when facing the property from Route 144. Run trench(s) along contour toward right lot line.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

PLANS APPROVED BY C. Williams DATE 8/13/86

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 AND AFTER PLACING GRAVEL IN TRENCH.

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. **DO NOT PERMIT SIGN**

PERMIT VOID AFTER THREE YEARS.

AND RETURNED 9-09-89

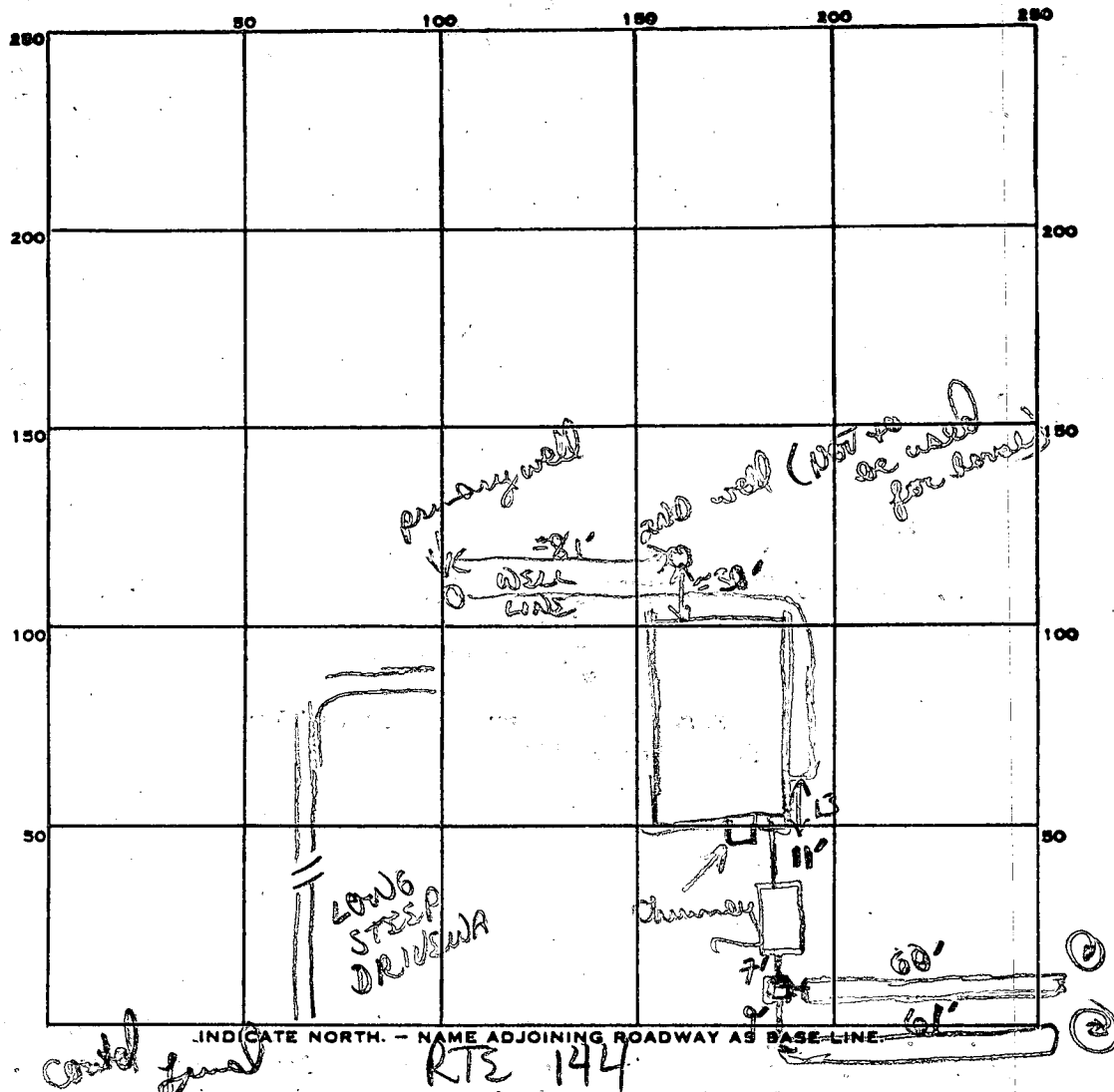
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED. Seal to 120 396
Shawmut Prod.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A
37549
36928



PERMIT CARD

SEPTIC TANK, LEVEL 1500 gal

CLEANOUTS 1 ST.

600 min

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 8 1/2 - 9 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 3, 3 IN. TOTAL LENGTH 60 x 60 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 3000 + 300

SEEPAGE PITS, INSIDE DIAMETER — FT. DEPTH BELOW INLET — FT.

ABSORBENT AREA 603 SQ. FT.

REMARKS 9/18/86 OK to add stone pipe paper to both trenches
WPT - OK to cover outside line (lines & ground were in OK)
potless 4' 3-4" below grade ↳ needs to be covered
9/18/86 OK to cover trench # 2 + finish sealing stone pipe
paper to trench # 1 + cover. OK to cover all other work

DATE SYSTEM APPROVED

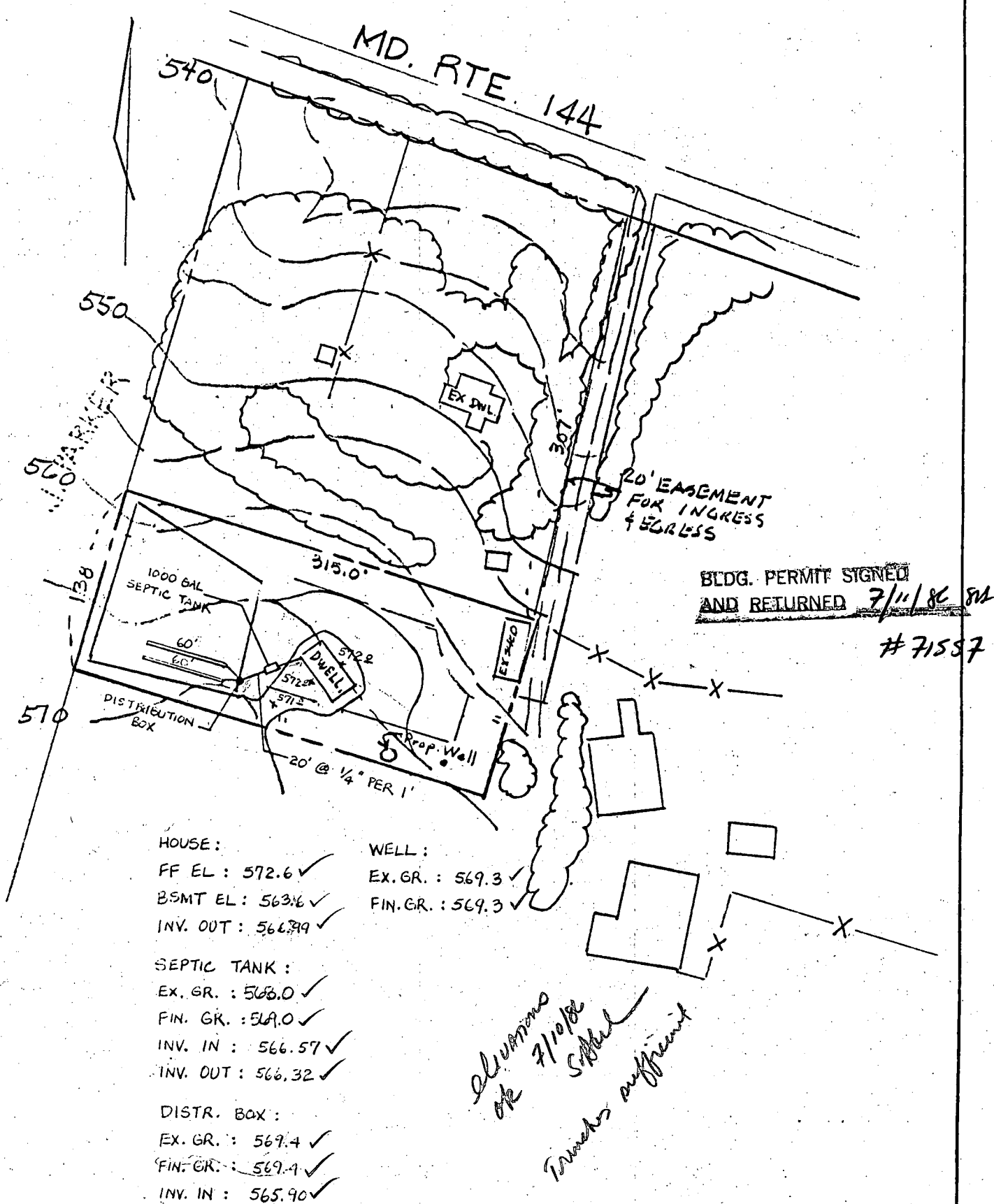
9/18/86

INSPECTOR

B Nylor

CALH-
Teresa Stoner
461-4865 or
442-2340

Peric. Cent. & Septic System Design



TOPO FROM HO. CO AERIAL PHOTO.
PROP. FROM DEEDS

TITLE: PERCOLATION TEST PLAT				
PROJECT: HUDSON PROPERTY				
LOCATION: 3rd ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=100	DESIGNED BY: D	DRAWN BY: —	CHECKED BY: JAB	DATE: 5/12/86
FIELD BOOK: —	PAGE NO.: —	JOB NO.: 86126	DRAWING NO.: 1 of 1	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MD. 21043
(301) 465-7777

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

A 36928

P _____

DISTRICT 3rd

DATE 5/10/86

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 Teresa Kay + Gary Lee Stonesifer

ADDRESS 6504 Marvin Ave. Sykesville PHONE 795-1790 or 442-2340

PROPERTY LOCATION:

SUBDIVISION Farm Preservation 12865 Rt 144 LOT NO. "B"

ROAD AND DESCRIPTION 12865 Rt. 144 West Friendship, MD 21794

lot located behind Grey House on the Hill. (Staked OFF).
(1ST LEFT DRIVEWAY PAST BUTTERCUP CT.)

SIZE OF LOT 1 Acre TYPE BLDG. (3) Rancher
(NUMBER OF BEDROOMS)

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. Teresa Kay Stonesifer Gary Lee Stonesifer
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING For certified plat

BLDG. PERMIT SIGNED
AND RETURNED 7/14/86
71557

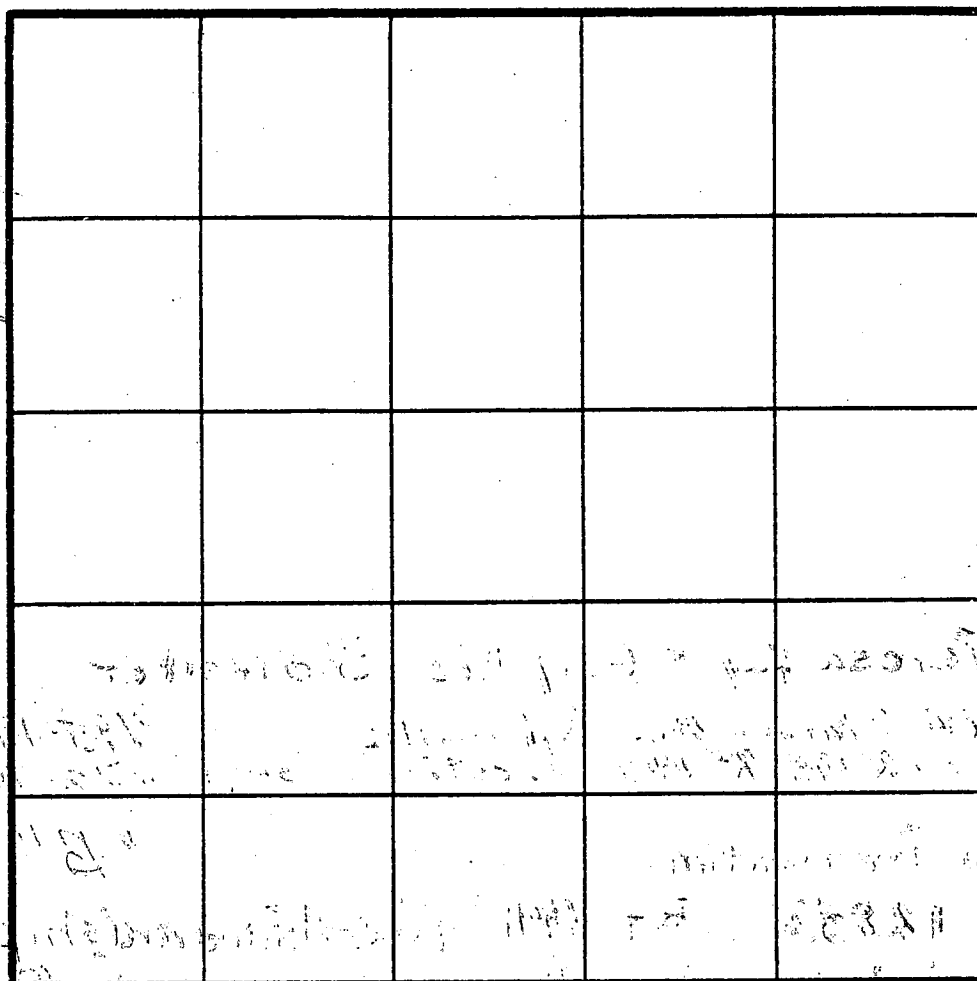
THIS IS NOT A PERMIT

0

23-1- powder

57 2/25%

乙 乙



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

[illegible]

scored by
salt content

REMARKS

See other page

TYPE OF SOIL

TESTED BY

B. W. W. W.

ALSO PRESENT

Theresa, Don P.

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

A 36929

P _____

DISTRICT

3rd

DATE

5/10/86

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

Teresa Kay + Gary Lee Stonesifer

ADDRESS

6504 Marvin Ave. Sykesville

PHONE

795-1790 or 442-2340

PROPERTY LOCATION:

SUBDIVISION

Farm Preservation

LOT NO.

"B"

ROAD AND DESCRIPTION

12855

Rt. 144

West Friendship, MD 21794

SIZE OF LOT

1 Acre

TYPE BLDG.

(3) Rancher
(NUMBER OF BEDROOMS)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
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WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Teresa Kay Stonesifer
(SIGNATURE OF APPLICANT)

APPROVED BY _____

FOR _____

DATE _____

REJECTED BY _____

FOR _____

DATE _____

HOLD PENDING FURTHER TESTS _____

DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

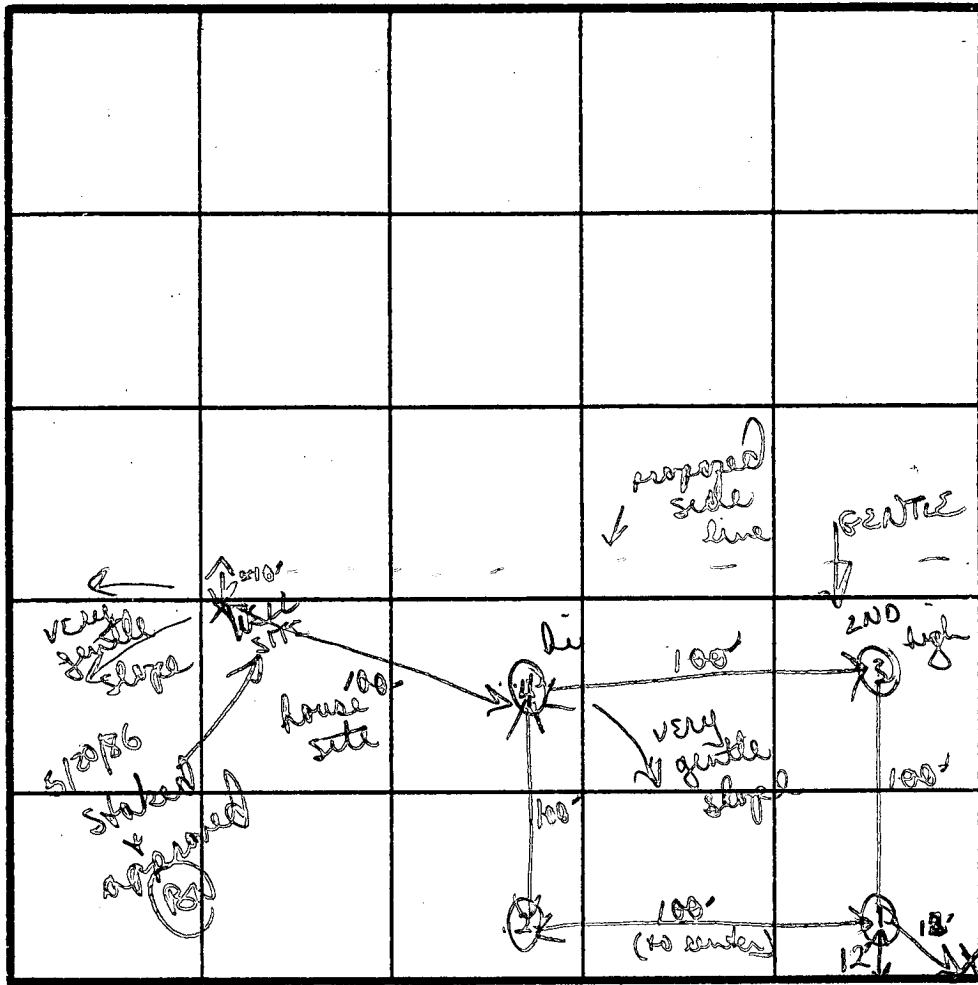
①

SOIL PROFILE

0'
Red/orange
clay to clay
loam
3'
uniform
purple/
brown
silty/mica
sandy
loam
25% 1-5"
fragments
of hard
rock
12'D

③

orange/red
clay (heavy)
4'
turning into
fine/mica
gran purple
silty mica
loam
12'D



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

②

orange powdery
sandy clay
loam
2 1/2'
fine purple
silty/sandy
mica loam
1 1/2' pocket of
small frag
saprolite
12'D

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/20/86	①	3'5	1254	110	110	135	25 min
		8' m	1253	1255	1255	1257	2 min
		12'D	bottom (see profile)				
	②	2 1/2'5	123	124	124	125	1 min
		8' m	107	109	109	113	4 min
		12'D	bottom (see profile)				
	③	4'5	150	212	212	241	29 min
		7 1/2' m	130	133	133	136	3 min
		12'D	bottom see profile				
	200' hole	4'5	208	232	232	300	28 min

REMARKS

2 slow holes attributed to still in clay layer
could have deepened 1/2' & ↓ per times if needed
very good soils below clay layer; mostly silty/sandy
mica loam

TYPE OF SOIL

TESTED BY

B. Nyfon

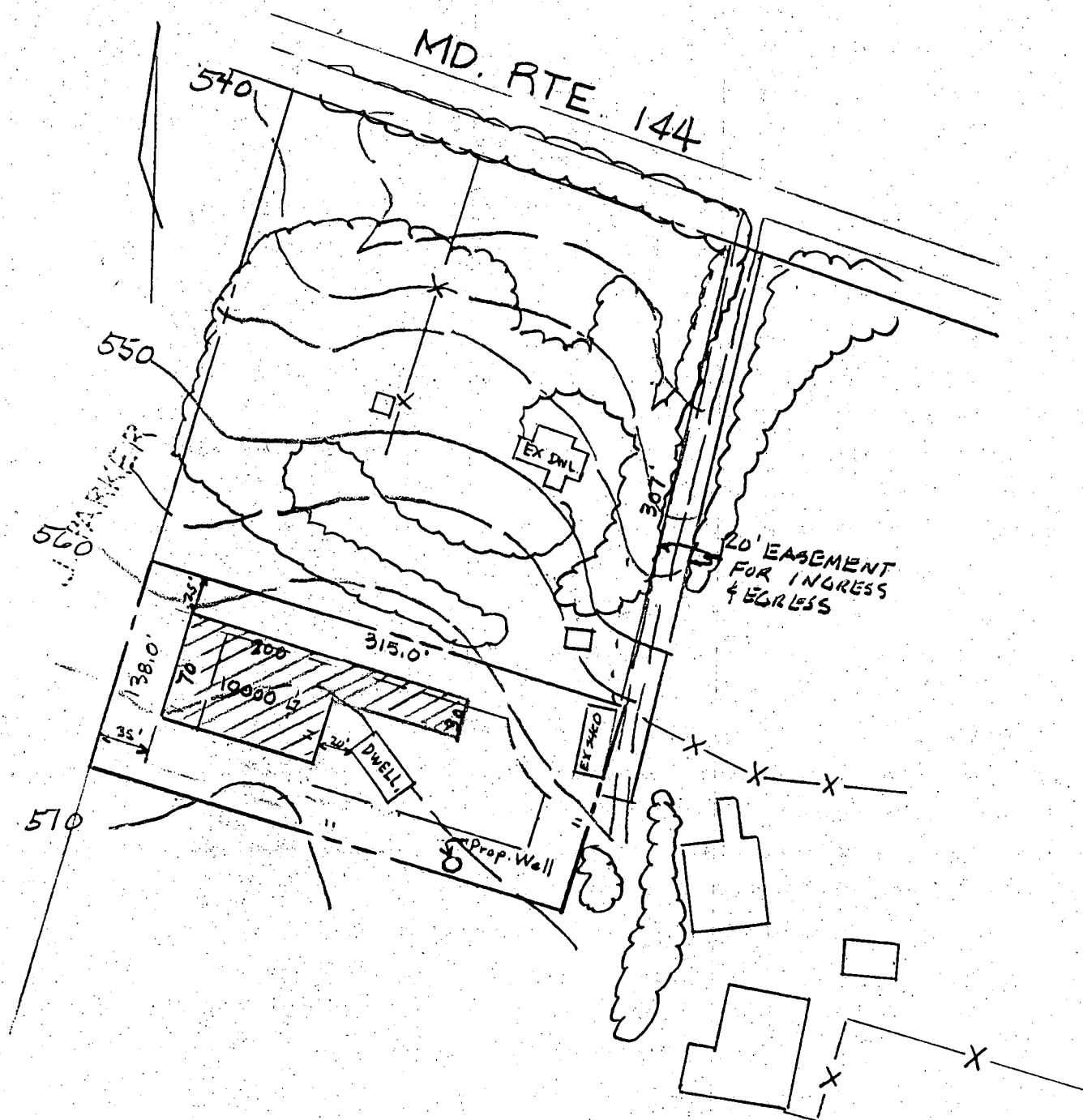
ALSO PRESENT

Teresa, Don Portet

(over)

INLET 3 1/2'
X = 13 min

EH-12-1079



TOPO FROM HO. CO ARIEL PHOTO.
PROP. FROM DEEDS

TITLE: PERCOLATION TEST PLAT				
PROJECT: HUDSON PROPERTY				
LOCATION: 3rd ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=100	DESIGNED BY: D	DRAWN BY: —	CHECKED BY: JAB	DATE: 5/12/86
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COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MD. 21043
(301) 465-7777

B 1 2881

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

please print or type

fill in this form completely

Date Received

8 13

OWNER INFORMATION

S T O N E S I K E R C A T R Y

15 Last Name 34

12775 144

36 Street or RFD 55

West Friesen Rd 1745

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

George F. Castorday 400

Driller's Name 77 License No. 80

L. Franklin Easterday/Tac

Firm Name

This is a Church Rd. with Army M

Address

George F. Castorday 5-2-86

Signature Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 3

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 1000

14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)22 ☐ 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 100 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

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

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 SEALED39 ☐ 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 52

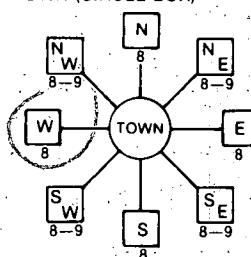
Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER 54 G A P 63

FORCE 42 INITIALS IN BOX PERMIT No. 100-21-1452

SPECIAL CONDITIONS

LOCATION OF WELL

H 21
8 COUNTY 21
FARM PRESERVATION 42
23 SUBDIVISION
SECTION 44 46 LOT 48 50 MAP 15 P. 74
52 NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 1 73 76 77 78B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)11 30
NEAR WHAT ROADON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)34 37
DISTANCE FROM ROAD

ENTER FT or MI 57 38 39

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

H. J. WARD A-36927

COUNTY NAME COUNTY NO.

OEP SIGNATURE STATE HEALTH INSERT S 41

DATE ISSUED 052186

CO SIGNATURE EXP. DATE 11/21/86

NORTH GRID 534000 EAST GRID 081000

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

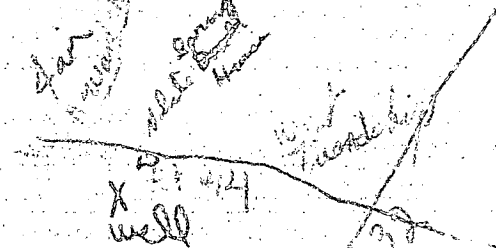
- 1.
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 1110
N 74000
000

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

N

received 5/2/86
W37006
84000

6/17/86 1st well as originally staked
2nd well's elevation lower
than 1st, but as far from
the pec field as possible
(will be 1-2' lower than
high pec hole)

6/17/86
closer
+ the lower yield
NEED TAG
& PERMIT

1st graft in progress when arrived
68 ft casing
39 ft open hole
15 bags cement
(TAG NOT YET ASSIGNED)

2nd 42' open hole
12 bags cement
48' casing
(40-81-1482)

Review

Depth of well 140 ft
Distance of measuring point (M.P.) above ground 1 ft
Static water level (S.W.L.) below M.P. 52 ft

Time pump started 1:13 p Pumping rate 10 gpm
Total time 15 min to reach pumping water level 90 ft. below M.P.

[illegible]

C 08892

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORTFILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A-36929

DATE Received

8						13
---	--	--	--	--	--	----

DATE WELL COMPLETED

06/17/86

Depth of Well

22 140 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

40-81-1482

OWNER

STANESIEK CARRY

STREET OR RFD

last name 12715 RT 144

first name

TOWN

WEST FRIENDSHIP

SUBDIVISION

FARM SUB.

SECTION

LOT

B

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
TOP SOIL	0	2	
CLAY	2	4	
SHALEY	4	12	
SAND STONE	12	25	
MICA	25	50	
SAND STONE	50	55	✓
MICA	55	95	
SAND STONE	95	98	✓
MICA	98	140	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ no ☐

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 12 NO. OF POUNDS 1200

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 42 ft.
(enter 0 if from surface)

CASING RECORD

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

ST 6 48

OTHER CASING (if used)

diameter depth (feet)
inch from to

1	2	3	4	5	6	7	8	9	10

screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

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

C 2

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

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

TELESCOPE
CASINGLOG
INDICATOR

OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 52

WHEN PUMPING 90

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)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box
and enter casing height)

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)CIRCLE APPROPRIATE LETTER
A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 10.17.13 "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. 40

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

Page 1 of 1
Date 11/1/2011

Review OK 5/20/86 CLW

HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 811482
Location of property (road) 12795 RTE 144
Subdivision FARM PRESERVATION Lot B Block Plat Sec.
Well Driller GEORGE EASTERDAY Owner STANISLIFER, TERESA & GARY

Depth of well 140 66pm
Distance of measuring point (M.P.) above ground _____
Static water level (S.W.L.) below M.P. 52 1/2'

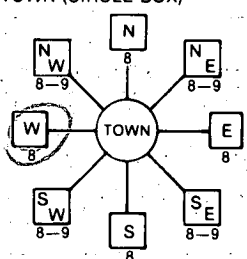
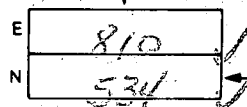
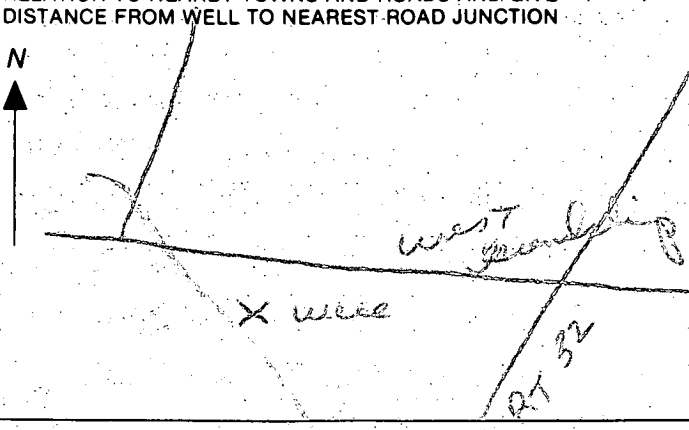
1. High rate pumping -- reservoir drawdown

Time pump started 1:15 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 90 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

Pump set at 130' level

B 1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) 4444	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 10-81-1530 fill in this form completely
Date Received <u>7/8/96</u> OWNER INFORMATION 15 Last Name <u>STONES</u> 13 Owner <u>FRANKLIN</u> 34 First Name <u>FRANKLIN</u> 36 Street or RFD <u>17798 RT 144</u> 55 57 Town <u>WILFRED</u> 70 State <u>MD</u> 72 Zip <u>21795</u> 76		B 3 LOCATION OF WELL 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 8 COUNTY <u>US78</u> 23 SUBDIVISION <u>EARM PRESERVATION</u> 42 SECTION <u>44</u> 46 LOT <u>48</u> 50 52 NEAREST TOWN <u>WILFRED</u> 71 MILES FROM TOWN (enter 0 if in town) <u>1</u> 73 <u>MI</u> 76 77 78	
DRILLER INFORMATION Driller's Name <u>George P. Easterday</u> 77 License No. <u>80</u> Firm Name <u>L. Franklin Easterday, Inc.</u> Address <u>9265 Brown Ch. Rd., Mt. Airy, Md. 21771</u> Signature <u>[Signature]</u> Date <u>5/26/96</u>		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD <u>RT 144</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 DISTANCE FROM ROAD <u>1.5</u> 37 ENTER FT or MI <u>FT</u> 38 39	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>UNB. JARD</u> COUNTY NO. <u>A-36929</u> OEP SIGNATURE <u>[Signature]</u> STATE HEALTH INSERT S <input type="checkbox"/> 41 DATE ISSUED <u>06/25/96</u> CO-SIGNATURE <u>A. Nixon</u> EXP. DATE <u>12/25/96</u> NORTH GRID <u>534000</u> 50 55 EAST GRID <u>081000</u> 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input checked="" type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>WELL</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE  DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <u>200</u> 24 28 FEET APPROXIMATE DIAMETER OF WELL <u>6</u> NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30. AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> 37. CABLE <input checked="" type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39. <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 GAP _____ 63 FORCE <u>BA</u> WRITE INITIALS IN BOX PERMIT No. <u>10-81-1530</u> 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS			

C101120

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND

WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY

PLEASE PRINT OR TYPE

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

10-81-1482

COUNTY

NUMBER

A36929

DATE Received

DATE WELL COMPLETED

061786

Depth of Well

2220026

(TO NEAREST FOOT)

OWNER

STONESIFER, GARRY

last name

12795 RT 144

first name

TOWN

West Friendship

SUBDIVISION

SECTION

LOT

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

clay

2

6

Shaler

6

12

Sand Stone

12

50

Mica

50

75

Sand Stone

75

80

Flint

80

100

Mica

note 3/4 gal

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

45

NO. OF BAGS

15

NO. OF POUNDS

1500

GALLONS OF WATER

75

DEPTH OF GROUT SEAL (to nearest foot)

from

0

48

TOP

52

ft. to

39

54

BOTTOM

58

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

60

61

Nominal diameter top (main) casing (nearest inch)

6

63

64

Total depth of main casing (nearest foot)

68

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

HO

8

9

11

49

15

200

17

21

EACH SCREEN

2

23

24

26

30

32

36

3

38

39

41

45

47

51

SLOT SIZE

2

3

DIAMETER OF SCREEN

56

60

(NEAREST INCH)

from

to

GRAVEL PACK

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

72

74

75

76

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

3

8

9

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

1

11

15

METHOD USED TO MEASURE PUMPING RATE

Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

80

17

20

WHEN PUMPING

200

22

25

TYPE OF PUMP USED (for test)

A

27

air

P

27

piston

T

27

turbine

C

27

centrifugal

R

27

rotary

O

27

other (describe below)

J

27

jet

S

27

submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

YES

NO

(CIRCLE) (YES or NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE:

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

LAND SURFACE

-

below

49

(nearest foot)

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)

left 67' line

20' well

300'

RT. 144

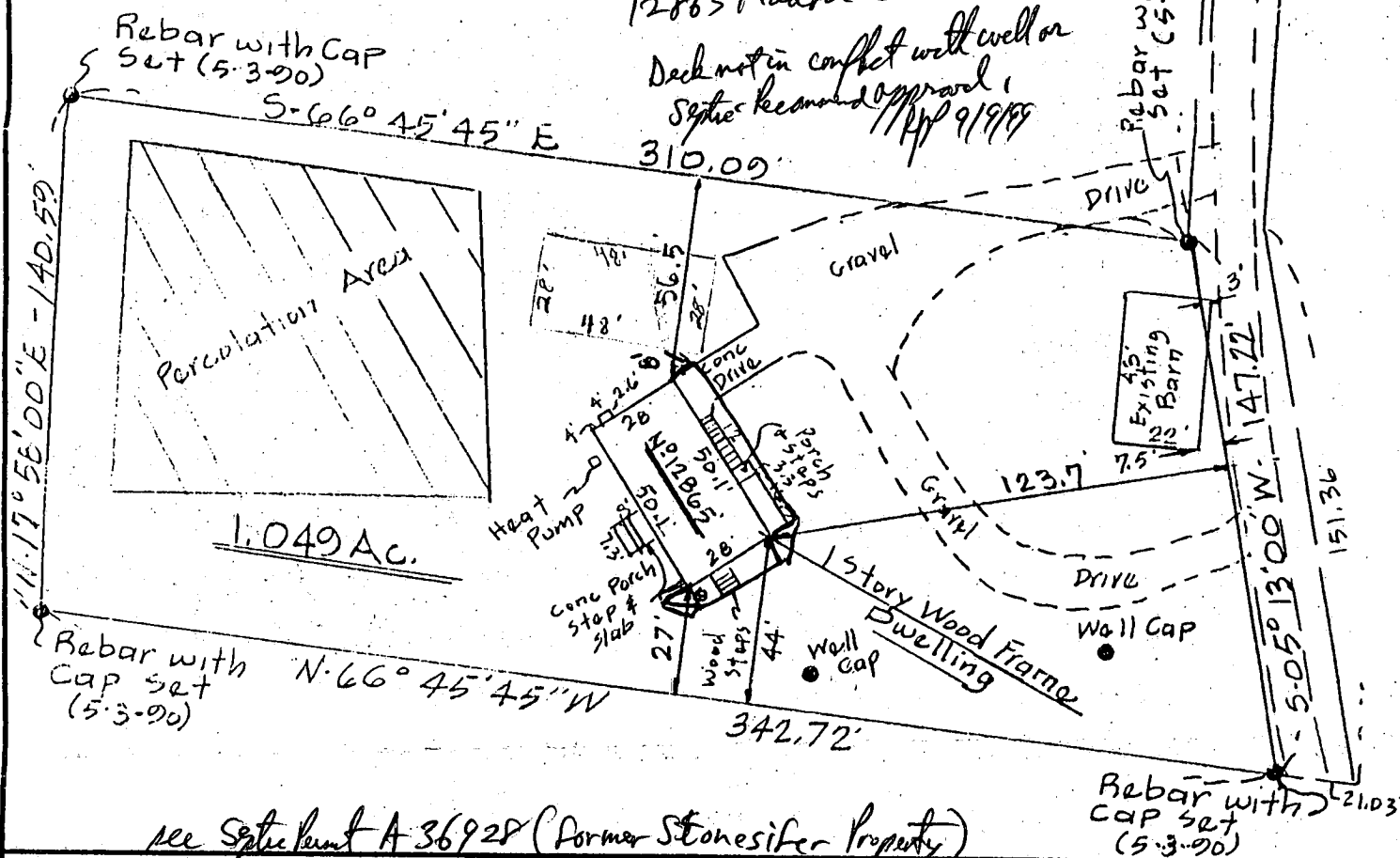
S-66°45'45"E-ZD,DU

20' Wide Easement For
Ingress & Egress To and
From Md. Rt. 144



Deck not in conflict with well or
 Seismic Resonance Approval,
 310.00
 App 9/9/95

310.00



see Supplement A 36928 (former Stonesifer Property)

PROJECT 12865 MARYLAND ROUTE NO 144

LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.

FIELD BOOK 128	PAGE NO. 20	DRAWN BY: BH	CHECKED BY —	DATE: 5-4-90
-------------------	----------------	-----------------	-----------------	-----------------

SCALE	JOB NO.:
1" = 50'	86126

THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENTS AND THAT THEY ARE LOCATED AS SHOWN HEREON.

SIGNATURE William G. Hartel

SIGNATURE _____
REG. NO. 9436 DATE 5-4-90

Boender Associates

ENGINEERS • PLANNERS • SURVEYORS

3230 BETHANY LANE
ELLICOTT CITY, MD. 21043
(301) 465-7777 FAX: (301) 465-7966

THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.

Click here for a plain text ADA compliant screen.



Maryland Department of Assessments and Taxation
HOWARD COUNTY
Real Property Data Search

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[View Map](#)
[New Search](#)

Account Identifier: District - 03 Account Number - 311503

Owner Information

Owner Name: STONESIFER TERESA KAY
STONESIFER GARY LEE HUSB
Use: RESIDENTIAL
Principal Residence: YES
Mailing Address: 12865 ROUTE 144
WEST FRIENDSHIP MD 21794
Deed Reference: 1) / 1740/ 383
2)

Location & Structure Information

Premises Address 12865 ROUTE 144
WEST FRIENDSHIP 21794
Zoning RCDEO
Legal Description 1.000 A
12865 ROUTE 144
WEST FRIENDSHIP

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Group	Plat No:	Plat Ref:
15	10	254						80		

Special Tax Areas Town Ad Valorem Tax Class NO A/V, NO M/P, RURAL FIRE TAX

Primary Structure Built	Enclosed Area	Property Land Area	County Use
1986	1,400 SF	1.00 AC	
Stories 1	Basement YES	Type STANDARD UNIT	Exterior FRAME

Value Information

	Base Value	Value As Of 01/01/2001	Phase-in Assessments As Of 07/01/2002	As Of 07/01/2003
Land:	72,000	95,000		
Improvements:	106,210	109,410		
Total:	178,210	204,410	195,676	204,410
Preferential Land:	0	0	0	0

Transfer Information

Seller: STONESIFER THERESA KAY	Date: 10/28/1987	Price: \$0
Type: NOT ARMS-LENGTH	Deed1: / 1740/ 383	Deed2:
Seller: HUDSON JAMES W ET AL	Date: 11/05/1986	Price: \$0
Type: MULT ACCTS ARMS-LENGTH	Deed1: / 1549/ 613	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:

Exemption Information

Partial Exempt Assessments	Class	07/01/2002	07/01/2003
County	000	0	0
State	000	0	0
Municipal	000	0	0

Tax Exempt: NO
Exempt Class:

Special Tax Recapture:

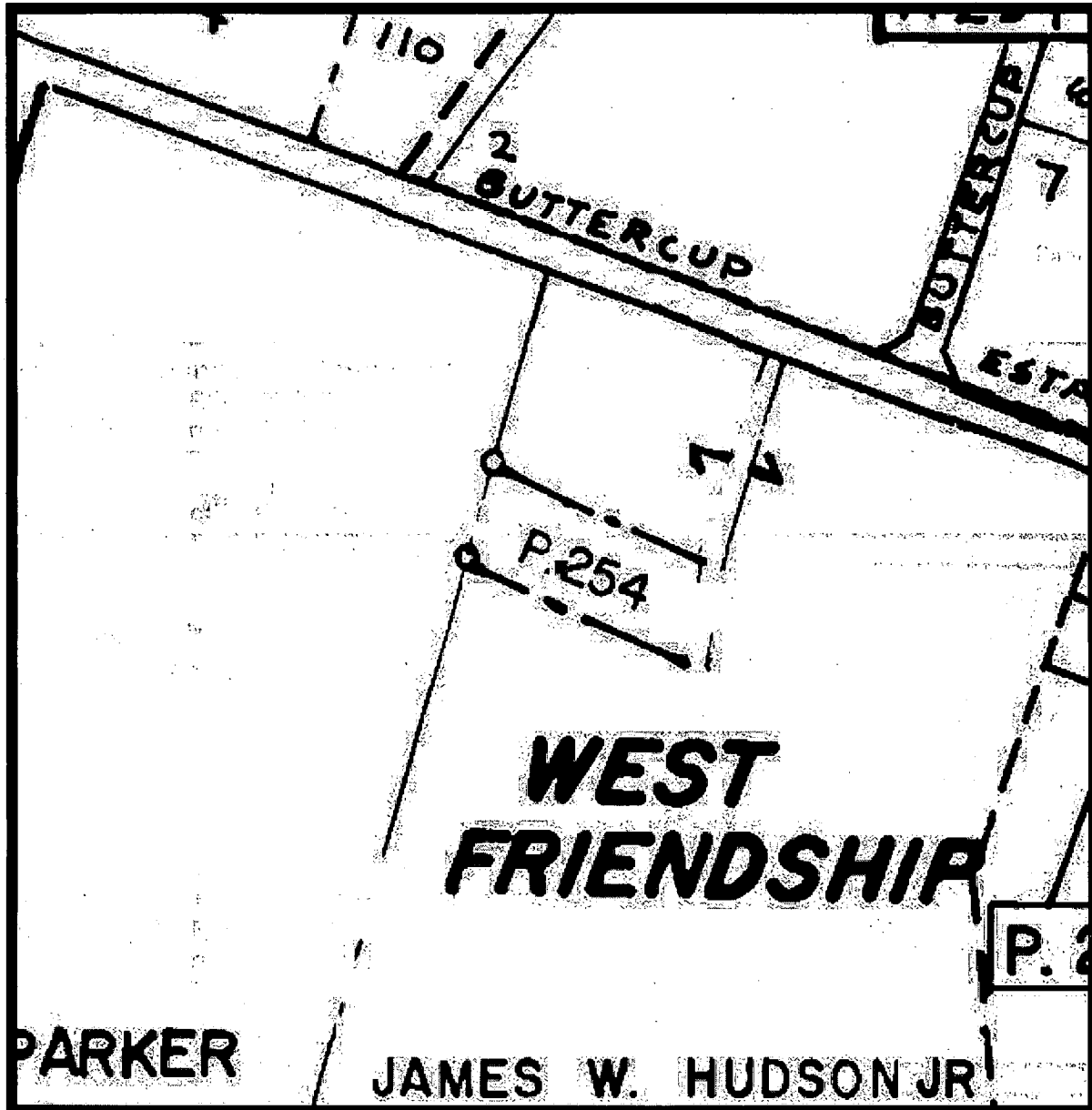
* NONE *



Maryland Department of Assessments and Taxation
HOWARD COUNTY
Real Property Data Search

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District - 03 Account Number - 311503



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