

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

STATE DEPARTMENT
01-149175
INDEXED

P 39882
A 31064
CT 1st
TE 8/18/87
ED 10/10/87
OR 

DATE SYSTEM APPROVED -

INSPECTOR.

Paul Schissler/South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Talbots Last Shift ROAD 5195 Talbot's Landing LOT 14D

PROPERTY OWNER Richard Kummer

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 - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet $3\frac{1}{2}$ feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at $3\frac{1}{2}$ feet below original grade. $4\frac{1}{2}$ feet of stone below distribution pipe.

LOCATION - Start 1st trench 210 feet down the right front lot corner (336.18') and 182.37' corner) and 105 feet off the front (336.18') lot line as seen when facing property from Road Way In. Run trenches along contour toward right front corner of lot. BE SURE TO MAINTAIN MINIMUM 100 FEET DISTANCE FROM SEPTIC TO WELL.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Bert Nixon

DATE 8/21/86

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: 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(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 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.

BUDG. PERMIT SIGNED
AND RETURNED 8/29/89
Serial # 29550 - Port.

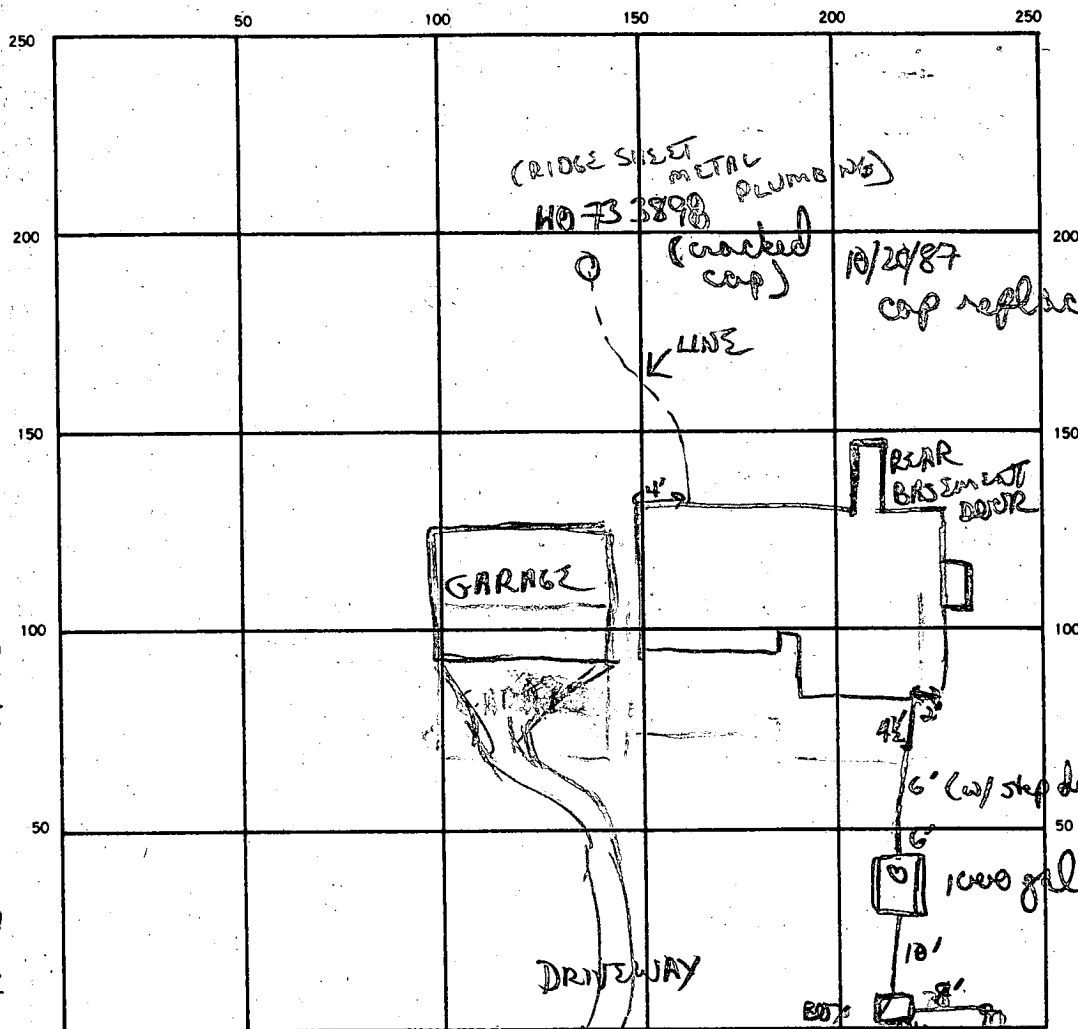
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

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

EH - 2-1186

31064
A

TALBOT'S LANDING → ILLCHESTER



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

COMMON ROAD

SEPTIC TANK, LEVEL 1000 gal CLEANOUTS 1.5

DISTRIBUTION BOX, LEVEL ✓

DRAIN FIELD/TILE FIELD, DEPTH 8' TRENCH WIDTH 2 FT. INLET DEPTH 32 FT.

EFFECTIVE GRAVEL DEPTH 4 1/2' 4 1/2' FT. TOTAL LENGTH 60' 60' FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 270 + 270 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

120
45/540
45
90

29'-9 1/2" on grade (higher than closer to shot box)

60
45
30
280

REMARKS 10/20/87 OK to finish shaping & adding stone pipe paper to trench #1. OK to start trench #2

10/20/87 OK to finish stumping trench #2. OK to cover trench #1 & all other work

10/20/87 will check ground & fitless adapter in (4" below) OK to cover line. (Tank w/ valve NOT installed)

DATE SYSTEM APPROVED 10/20/87 INSPECTOR B Nixson

8/21/92
 (22)

A 31064

SUBDIVISION:

TALBOTS LAST SHIFT
 ILLCHESTER RD

LOT NUMBER: 14D

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	_____ sq. ft./bedroom Minimum Total square Feet
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench.
 No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom

3-110.

Trench to be 2 wide.

Inlet 3 1/2 feet below original grade.

Bottom maximum depth 8 feet below original grade.

Effective area begins at 3 1/2 feet below original grade.

4 1/2 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: START 1ST TRENCH 210' DOWN FROM THE RIGHT FRONT LOT CORNER (336.18' + 182.37' CORNER) AND 105' OFF THE FRONT (336.18') LOT LINE AS SEEN WHEN FACING PROPERTY FROM ROAD WAY IN. RUN TRENCHES ALONG CONTOUR TOWARD RIGHT FRONT CORNER OF LOT. BE SURE TO MAINTAIN ^{MINIMUM} 100' DISTANCE FROM SEPTIC TO WELL.

PRELIMINARY

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, MARYLAND 21043
TELEPHONE: 992-2330

A 31064

P 1000 gallons
1250 gallons

DISTRICT 1st

DATE 12/4/80

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 Howard Associates RICHARD KLUMMER

ADDRESS _____ PHONE Don Reuwer - 465-4920

PROPERTY LOCATION: _____

SUBDIVISION _____ LOT NO. 42) 14D

ROAD AND DESCRIPTION Elchester Road 5195 TALBOYS LANDING

SIZE OF LOT (?) TYPE BLDG. 3 or 4 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.

BLDG. PERMIT SIGNED
AND RETURNED 4-24-87

SIGNATURE OF APPLICANT /s/ Don Reuwer for Howard Associates

APPROVED BY C. B. Skinner FOR Trenches DATE 4/14/81

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 12/12/80 Discussed need more tests, may

use (7+8) hole, and try for a new area - office R.M.

Office 12/22/80 Discussed with Mr. Skinner - Need more tests

Office 12/30/80 Reaccomplished field sheet + 12/30/80 Hold for C.B.S. + F.D.

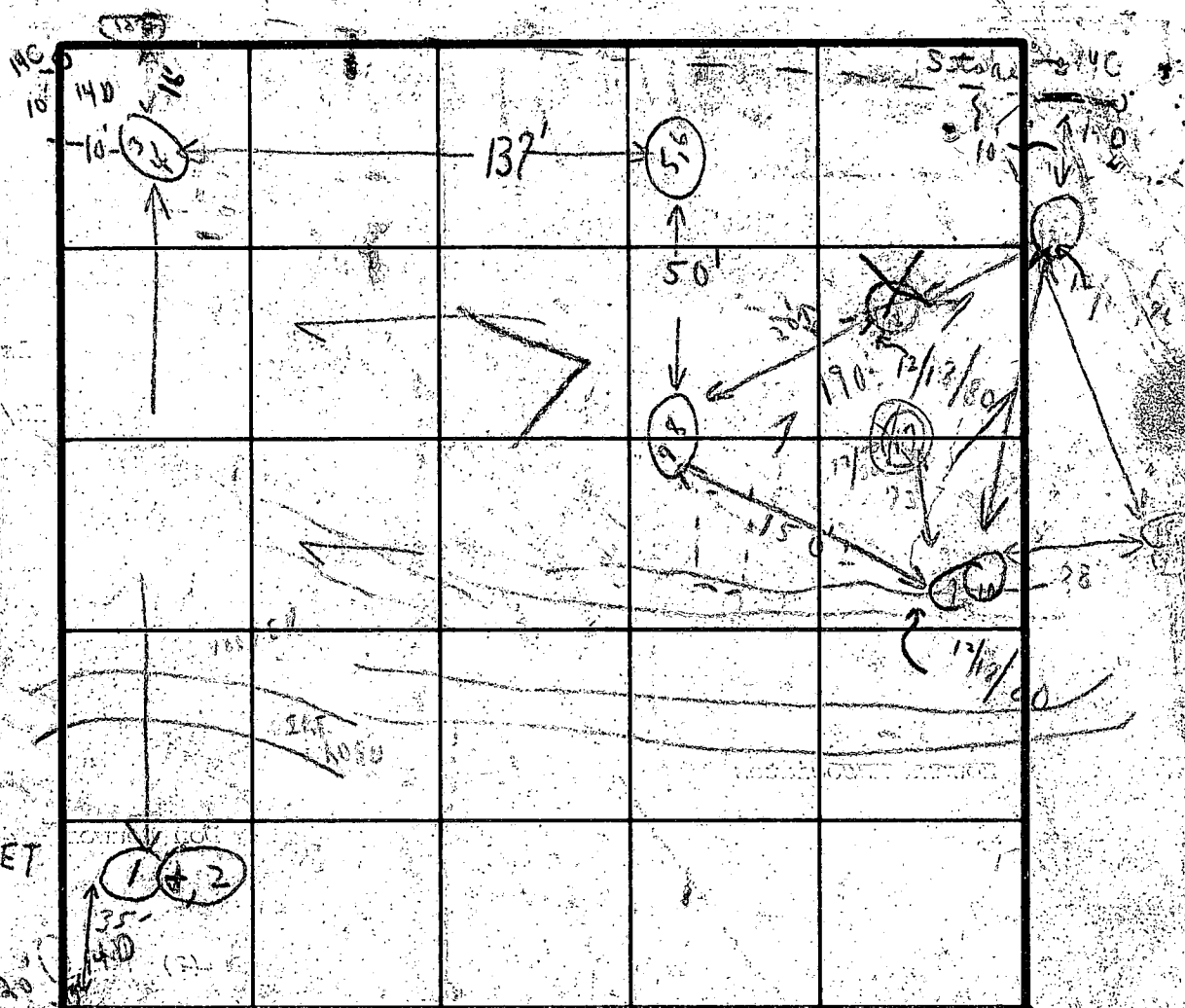
THIS IS NOT A PERMIT

11/9/81 Tentative approval for shallow trenches subject to
hole certification house site, well site. C.B.S.

SOIL PROFILE

SEE
FACE
HOLE
BELOW

FIELD SHEET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/11/80	1	4'	10:01	10:08	10:08	10:25	19
	2	8'	10:01	XX	10:31	10:34	19
	3	4'	10:38	10:40	10:40	0:43	3
3070	4	9'	10:38	10:58	10:58	11:11	1/4"
	5	4'	11:23	11:26	11:26	11:30	4
	6	7'-9'	11:23	@ 11:53	3/4"	10:10	XX
	7	3 1/2'	11:12	11:13	11:13	11:15	2
	8	8'	11:13	11:14	11:14	11:22	8
12/11/80	TESTS IN DIFFERENT AREA						
12/30/80	170	9'	1:30	3:00	3:00	3:05	170

REMARKS

TYPE OF SOIL:

TESTED BY

HOLD FOR CERTIFIED HOLES & PERC IN AREA }
" FOR MORE TESTS. } OF SMALL TREES

MAJOR TESTS

FM 24

ALSO PRESENT

20. Letters
Not signed me

PRELIMINARY

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, MARYLAND 21043
TELEPHONE: 992-2330

A 31064

P _____

DISTRICT 1st

DATE 12/4/80

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 Howard Associates

ADDRESS _____ PHONE Don Reuwer - 465-4920

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. (?) 140

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT (?) TYPE BLDG. 3 or 4 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.

SIGNATURE OF APPLICANT /s/ Don Reuwer for Howard Associates

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

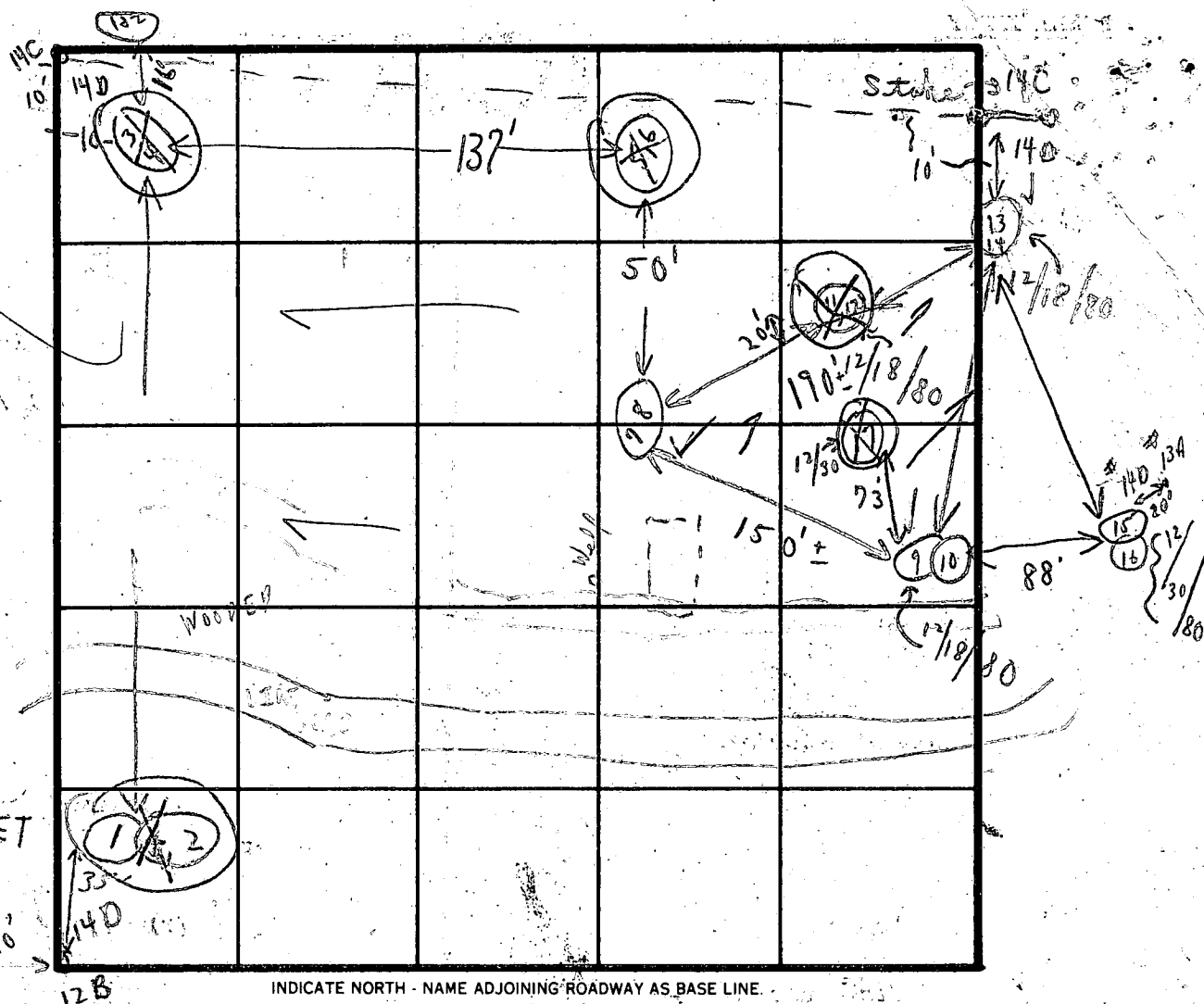
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE

SEE
EACH
HOLE
BELOW

FIELD SHEET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SOIL PROFILE	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
1-2 1/2' clay some sand	12/11/80	(1)	4'	10:01	10:08	10:08	10:25	19m
1-3' little sand to clay		(2)	8 1/2'	10:01	X X	10:31	little per 1/8" @ base	X
1-3' clay 8 1/2' to clay in bottom		(3)	4'	10:38	10:40	10:40	10:43	3m
1-3' clay 30-5' sand		(4)	9 1/2'	10:38	10:58	10:58	11:11:29	1 1/4" @ base XX
1-3' clay 30-5' sand		(5)	4'	11:23	11:26	11:26	11:30	4m
1-3' clay 30-5' sand		(6)	7'-9"	11:23	@ 11:53	3/4" @ base		X X
1-3' clay 3 1/2' sand		7 1/2'	3 1/2'	11:12	11:13	11:13	11:15	2m
1-3' clay 3 1/2' sand		8'	8'	11:13	11:14	11:14	11:22	8m
1-1 1/2' clayish	12/18/80	TESTS IN DIFFERENT AREA				{ SEE ATTACHED PAGE		
11'-12 1/2' sand & gravel	12/30/80	X 17 ^s _o	4'	11:50	12:00	12:00	12:33 1/2	3/4" @ base SK CB

REMARKS

TYPE OF SOIL

TESTED BY

HOLD FOR CERTIFIED HOLES & PERC IN AREA?
" FOR MORE TESTS, C.B.S. { OF SMALL TREES
+ BRUSH

MORFTESTS

TNRU

1070704

12/30/20

ALSO PRESENT

52 O. Kellerman
Not young, at one

EH - 24

HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health

Ellicott City, Maryland 21043

Phone: 992-2330

To: _____

Times

#140 {
21 { 5
4
15 { 3
16 { 4 } 16
18 { 4
20 } 44
19 { 7
13 }
9+10 { 23 } 33
7+8 { 10 } 8
12 | 93

From: _____

Date: _____

HOWARD ASSOC.

14 D

12/18/80

FIELD SHEET

P 242
(Continuation of tests)

SOIL PROFILE	Depth	START 1st "	START 2nd "	STOP 2nd "	Time Avg
1'-3 1/2' clayish	9 3 1/2 ft	1:12	1:12	1:13	1/2 m / inch
3 1/2'-8 1/2' sandy loam	10 8 1/2 ft	1:13	1:20	1:48	22 m out ✓
1'-3' clay	11 3' ft	1:34	1:36	1:43	7 m
3'-8' LORM clay	12 8 ft	1:34	2:00	X: X	@ 2:05 3 1/4" @ max (X)
1'-4' clay	13 4 ft	1:58	2:00	2:05	5 m
4'-8 1/2' sandy clay	14 8 1/2 ft	1:59	2:01	2:07	6 m ✓
1'-1' clayish	15 5'	12:55	12:56	12:59	3 m ✓
10' Sandy loam	16 10 ft	12:53	12:55	12:59	4 m ✓
1'-3' clayish	17 3'	first page			12/30/80 15 ft on line near 14D #149
3'-7' Loam	18 7'	12:05	12:08	12:12	
1'-4' clay	19 4'	1:02	1:06	1:13	7 m
4'-8' LORM	20 8 ft	1:01	1:07	1:20	13 m
1'-3' clay	20 A 3 1/2'	1:57	2:10	2:24	3 3/4" (12/30/80 C.B.D. + K.)
3'-7' LORM	20 B 7'	1:56	2:22	2:34	@ 2:52 3 1/4" max
1'-6 1/2' clay	21 A 5'	2:38	2:46	no pen	dry down
6 1/2'-9' sand	21 B 9'	2:34	2:36	2:41	5 m
White sand in bottom to 14'	21 C 6 1/2'	2:53	2:55	2:59	4 m

@ 14' white clay

2' Contours on the lot.

{ 1/9/81 Field sheet
to be reaccomplished }
1/14/81 C.B.D.

{ HOLD FOR CERTIFIED
HOLES
C. HUDKINS
(2) Ketterman }

HOWARD ASSOC.

14 D

12/18/80

12

FIELD SHEET

(Continuation of Test 1)

Time
Avg

COIL DEPTH	DEPTH	TIME 1st	TIME 2nd	STOP 2nd	Avg
1-3/4' just	7 3 1/2 ft	1.12	1.12	1.13	1/2 min / each
3/4-1 1/4' just	10 8 1/2 ft	1.13	1.20	1.48	22 min
1 1/4-2' just	11 3 1/2 ft	1.34	1.36	1.43	7 min
2-2 1/4' just	12 8 ft	1.34	2.00	X : X	@ 2'05" 3/4" @ max
2 1/4-3' just	13 4 ft	1.58	2.00	2.05	5 min
3-3 1/2' just	14 8 1/2 ft	1.59	2.01	2.07	6 min
3 1/2-4' clay	15 5'	12:55	12:56	12:59	3 min
4-10' sandy loam	16 10 1/2 ft	12:53	12:55	12:59	4 min

12/30/80

15.11 on 140
11200 140
1142

① { Hold for possible
12/18/80 further
test }

C.B.D.

(12/30/80 C.B.D. + V.R.)

②

{ HOLD FOR CENT-FOOT
C. HUBBINS
(2) K. HUBBINS }

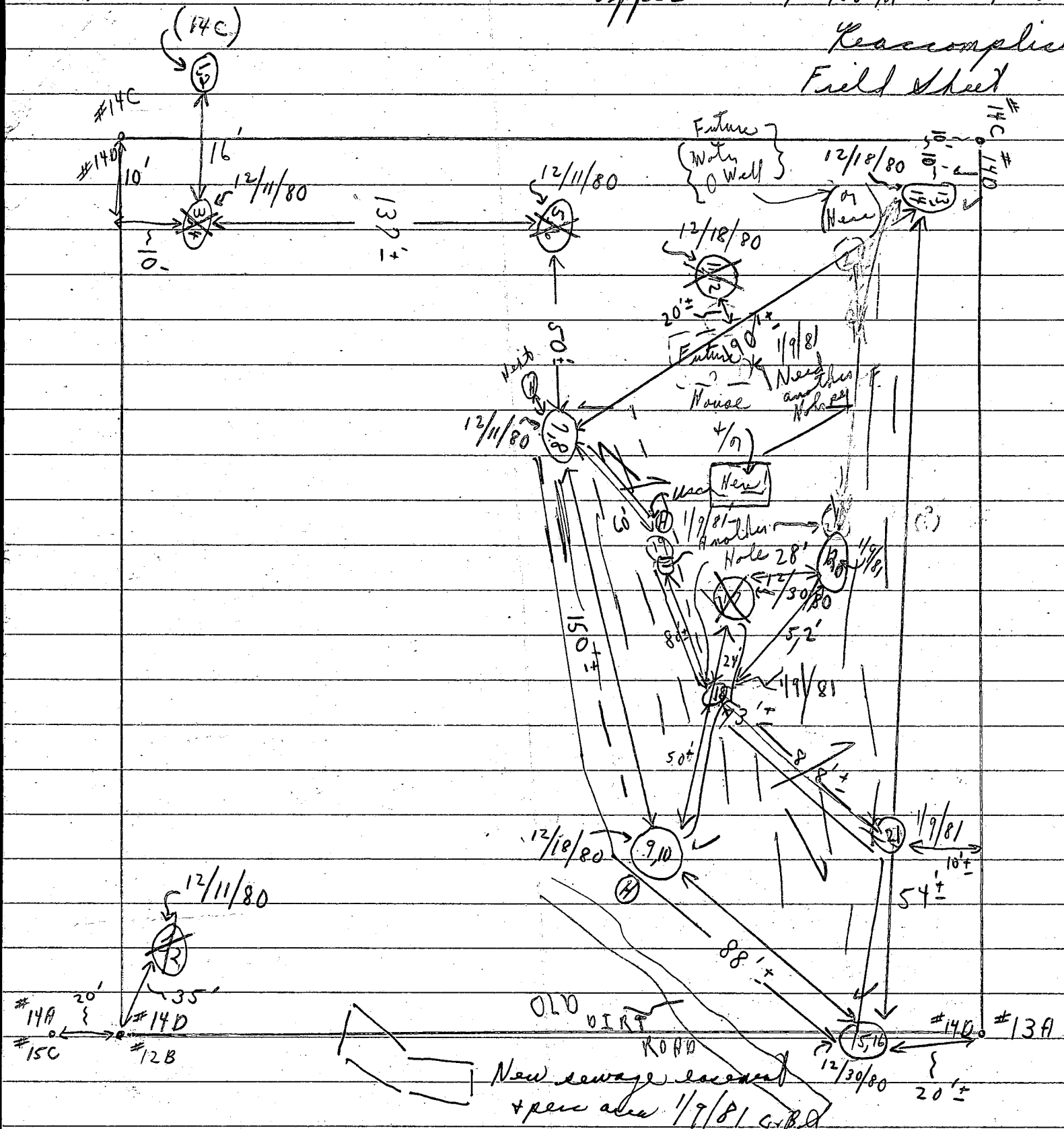
HOWARD ASSOCIATES
ILCHESTER ROAD

Office

14D

12/30/80 + 12/31/80

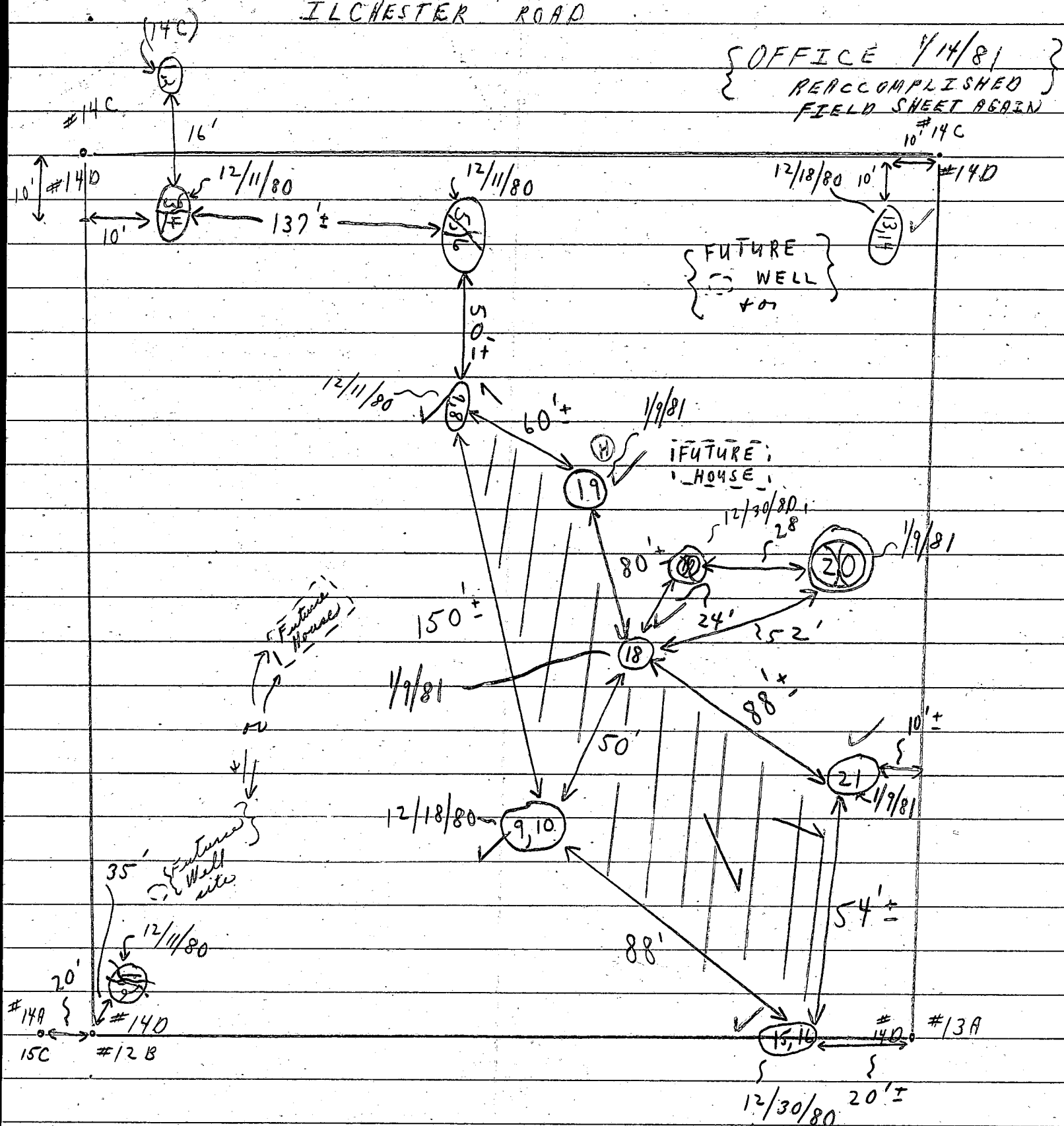
Accomplished
Field Sheet



Note (1) lot had high brush and small trees all over lot
(2) High holes (9, 8) + (9, 10)
(3) ✓ Good holes
(4) Possible septic area

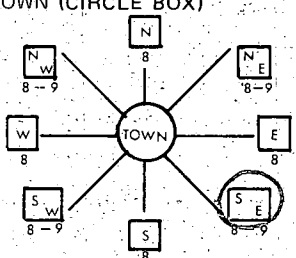
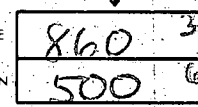
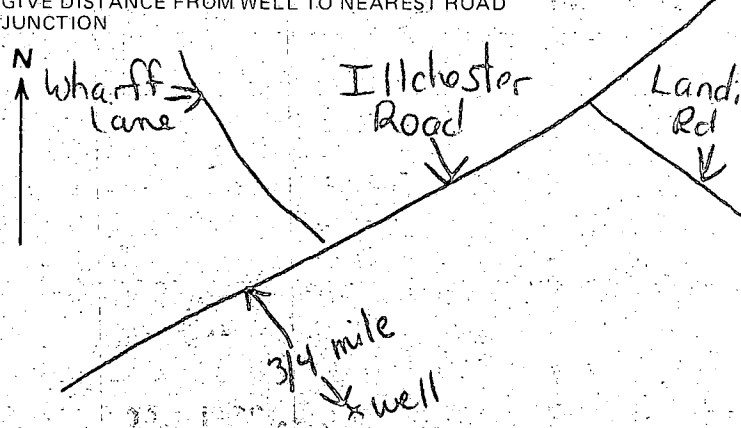
HOWARD ASSOCIATES
ILCHESTER ROAD

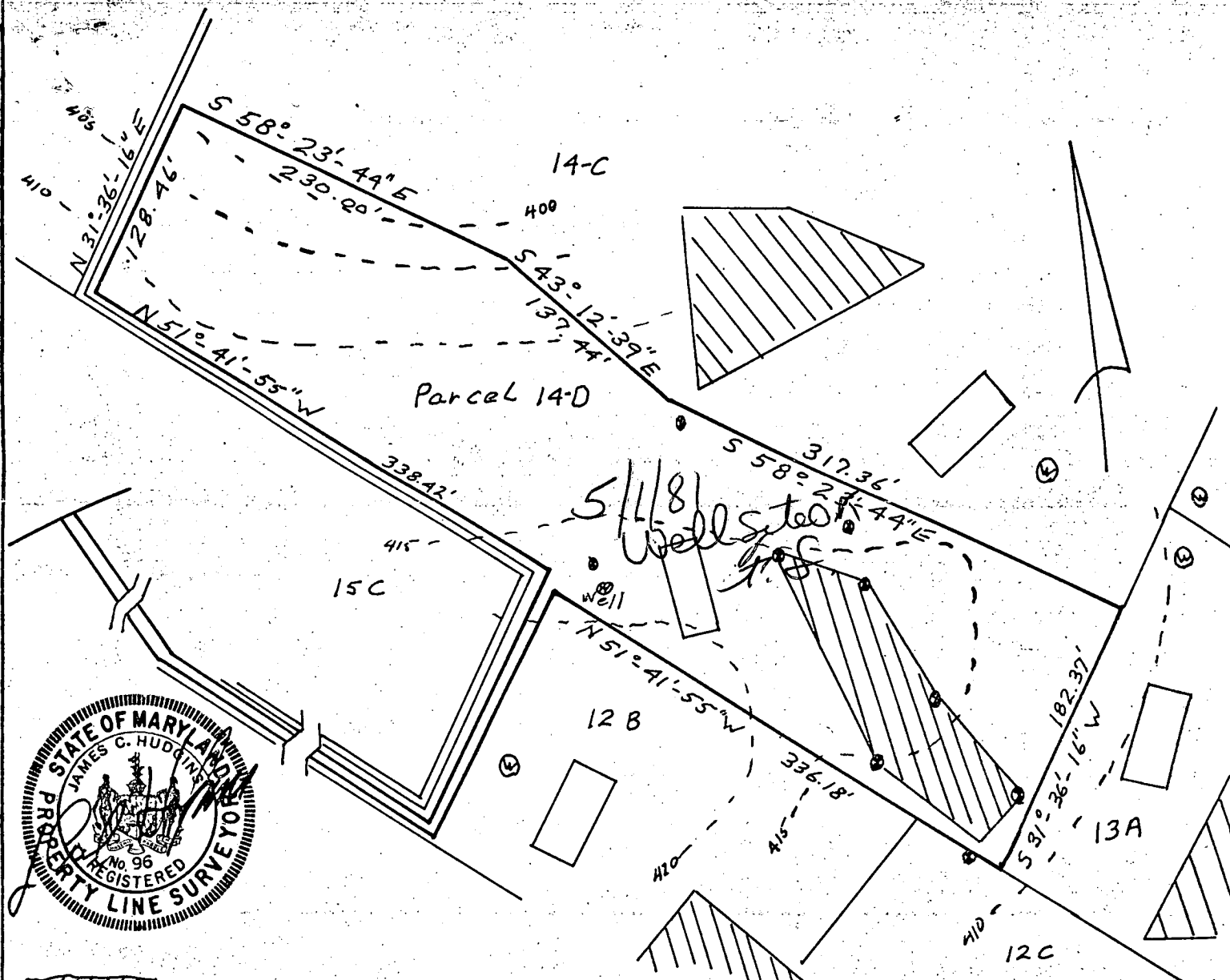
14D



NEW RESERVE AREA AS OF 1/9/81

✓ HOLES PERCED SATISFACTORY
⊗ HOLES PERCED UNSATISFACTORY

B 1 1789 SEQUENCE NO. WRA USE ONLY (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	WRA PERMIT NUMBER HO-73-3899 fill in this form completely
DATE RECEIVED <u>4/30/81</u> 8 (WRA USE ONLY) 13 OWNER INFORMATION LAST NAME <u>Holt</u> OWNER <u>Mark</u> FIRST NAME 15 <u>2305</u> 59th Avenue 34 STREET OR RFD <u>Tuxedo</u> MD <u>20785</u> TOWN 57 STATE 76 ZIP		
B 1 CONTINUED DRILLER INFORMATION DRILLER'S NAME <u>Stanley W. Bollinger Jr</u> 308 77 LICENSE NO. 80 <u>Stanley W. Bollinger Jr</u> <u>4/29/81</u> SIGNATURE DATE		
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>550</u> USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT) APPROXIMATE DEPTH OF WELL <u>200</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH Method of Drilling (circle one) BORED (OR AUGERED) ☐ JETTED ☐ JETTED & DRIVEN AIR ROTARY ☐ AIR PERCUSSION ☒ ROTARY (HYDRAULIC) CABLE ☐ REVERSE ROTARY ☐ DRIVE POINT ☐ 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 ☐ 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 (WRA USE ONLY) APPROP. PERMIT NUMBER <u>54</u> <u>GAP</u> <u>63</u> FORCE <u>67</u> <u>68</u> WRITE INITIALS IN BOX CONDITIONS <u>70</u> <u>71</u> <u>72</u> <u>73</u> <u>74</u> <u>75</u> <u>76</u> <u>77</u> <u>78</u> <u>79</u>		
B 3 LOCATION OF WELL COUNTY <u>Howard</u> SUBDIVISION <u>Howard Associates Prop.</u> SECTION <u>44</u> LOT <u>14D</u> NEAREST TOWN <u>Ellicott City</u> MILES FROM TOWN (enter 0 if in town) <u>3 1/2</u> M I B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD <u>Ilchester Road</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST ☐ EAST ☒ 34 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) <u>3/4</u> FT SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX  WRITE THE BOX NUMBER FROM THE MAP HERE 40' - casing 1' - above gr 15' - open well 30' - jet 5 - bags cement 7/15/81		
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>Howard</u> COUNTY NO. <u>237064</u> EHA SIGNATURE <u>Frank Skinner</u> STATE HEALTH CIRCLE BOX <u>5</u> MO <u>04</u> DAY <u>30</u> YR <u>81</u> <u>Frank Skinner</u> Sanitarian <u>5/1/81</u> NORTH <u>506</u> EAST <u>0863</u> ELEV. (FT.) _____ GRID 50 55 GRID 57 63 65 68		
B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY) _____		



This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments 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 "●".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

Joey M. Foxline
County Health Officer

3-24-81
Date

PERCOLATION TEST PLAT

PARCEL 14D
DEED 1043/393
TALBOT'S LAST SHIFT
PROPERTY OF
HOWARD ASSOCIATES
1st Election District
Howard County, Maryland
Scale 1"=100'
Date 3/4/81

NTT Associates
Suite 307, Clark Bldg.
Columbia, MD 21044
321-0307

C1	8267	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED COUNTY NUMBER A31064
----	------	--------------------------------	---	---

Date Received (WRA use only)	11/4/91	DATE WELL COMPLETED	Depth of Well 145 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-3899
---------------------------------	----------------	---------------------	--	--

OWNER last name Helt first name Mark	STREET OR RFD Ilchester Road	TOWN Ellicott City
SUBDIVISION Howard Assoc. - Talbot's last Shift	SECTION	LOT 14 D

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	
Brown Shale	2 8	
SAND	8 35	
Brown Sandstone	35 112	
Brown Sandstone	112 114	J10
GRANITE	114 145	

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	
yes ☒	no ☐
TYPE OF GROUTING MATERIAL	
CEMENT ☒ M	BENTONITE CLAY ☐ B ☐ C
NO. OF BAGS 5	NO. OF ROUNDS 470
GALLONS OF WATER 30	
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30 ft.	

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	6	40

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

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

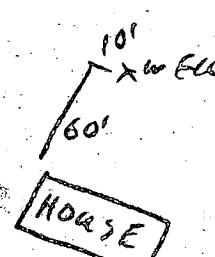
C2	(seq. no.)
DEPTH (nearest ft.)	
☒ H ☐ O	38 145
EACH SCREEN	
1	
2	
3	

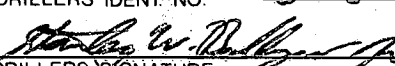
SLOT SIZE	1 2 3
DIAMETER OF SCREEN	(NEAREST INCH)
from	to
GRAVEL PACK	15
IF WELL DRILLED WAS FLOWING WELL	CIRCLE BOX ☐ F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T	(E.R.O.S.)
W.Q	
70 ☐	72 ☐
TELESCOPE CASING	LOG INDICATOR
OTHER DATA	

C3	(seq. no.)	
PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	10	
METHOD USED TO MEASURE PUMPING RATE	Bucket	
WATER LEVEL (distance from land surface)	45	
BEFORE PUMPING	145	
WHEN PUMPING		
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 (CIRCLE APPROPRIATE BOX)	YES ☐ NO ☒
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))	☐
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	LAND SURFACE
☐ below	(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 BOX	
☒ 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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.	
DRILLERS IDENT. NO.	308
DRILLERS SIGNATURE	
(MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)	

Water Sample Request

PROPERTY OWNER Richard Kummer DATE OF REQUEST 12/18/87
 TELEPHONE _____ NEW WELL NUMBER HO-73-3899

DIRECTIONS OR INSTRUCTIONS _____

SAMPLE TYPE

☐ Health Hazard
☒ U & O
☐ Real Estate
☐ Pond or Stream
☐ Sewage
☐ Other

REASON FOR REQUEST

☐ Physician's Advice
☒ New Residence
☐ Nitrate Monitoring
☐ Taste or Odor
☐ Treatment System Necessity
☐ Plumbing or Well Repair
☐ Replacement Well
☐ Curiosity

SETTLEMENT DATE ____/____/____

SEPTIC SYSTEM: ☒ Approved ☐ Disapproved DATE 10/20/87

CONDITION: _____

SUPPLY TYPE: ☐ Drilled Well ☐ Hand Dug ☐ Spring ☐ Public

CONDITION: A 31064

FIRST SAMPLE COLLECTOR Delmarva TIME 8:30 DATE 12/18/87

☒ BACTERIA _____, pH 6.9, Free Cl⁻ 0.0, Res. Cl⁻ 0.0, VOC _____

☐ CHEMICAL _____, LEAD & COPPER _____, NITRATES 0.26, PESTICIDE _____

ACTION: Bact positive, Turb=6.0 NTU's

RESAMPLE COLLECTOR Delmarva DATE 1/12/88

☒ BACTERIA AD52, pH _____, Free Cl⁻ 0.0, Res. Cl⁻ 0.0, TIME 8:00am

☐ CHEMICAL _____, Other _____

ACTION: ICOP issued 1-21-88 JEN

RESAMPLE COLLECTOR M. Larkin DATE 5/9/89

☒ BACTERIA AD526, pH 6.5, Free Cl⁻ 0.0, Res. Cl⁻ 0.0, TIME 11:25

ACTION: 5/16 send F.C.O.P.C.R.D

RESAMPLE COLLECTOR _____ DATE ____/____/____

☐ BACTERIA _____, pH _____, Free Cl⁻ _____, Res. Cl⁻ _____, TIME _____

ACTION: _____

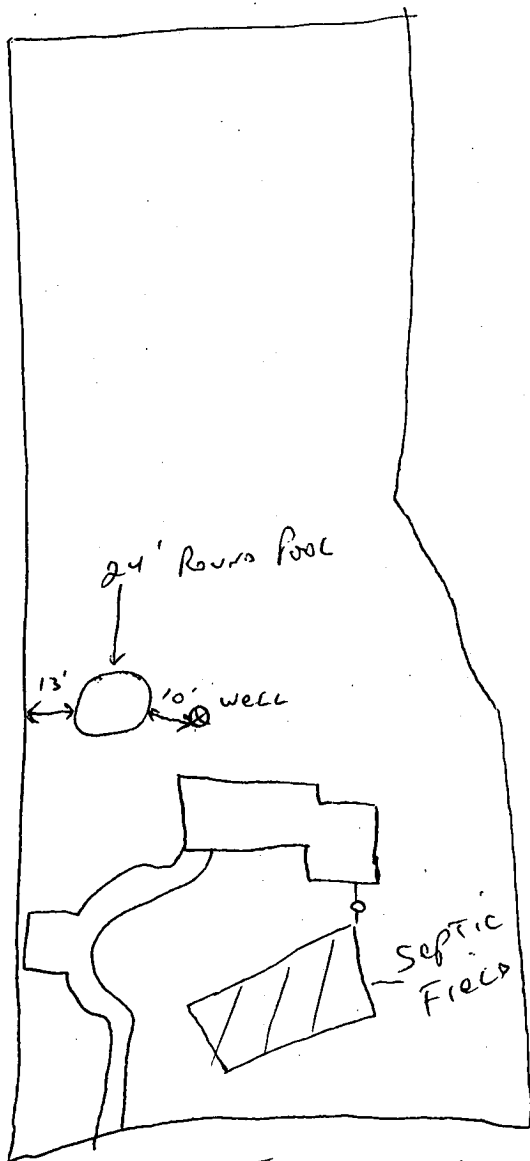
NAME

ADDRESS

Richard Kummer

5195 Talbot's Landing Rd, EC 21425
Talbot's Lost Shift - Lot 14D

5/9



NO IMPACT
WELL OR SEPTIC
OK TO PROCEED,
8/29/89
Cory Williams

5195 TALBOT'S LANDING
(LOT 14D)