

3-21-88
3-28-88
3-29-88
3-31-88
12 noon
12 noon
12 noon

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

03-309703

P 39932

A 30461

DISTRICT 3rd

DATE 8/20/87

DATE SYSTEM APPROVED 1/12/88

INSPECTOR Cwell

Jim Miller / Garland Plumbing

~~Robert Garrett~~ IS PERMITTED TO INSTALL X ALTER

ADDRESS 1835 W. Old Liberty Rd, Westminster PHONE 875-2400

SUBDIVISION Wynfield ROAD 2730 Wynfield Road LOT 2 Section III

PROPERTY OWNER Robert Garrett NEW # FOR 442-5582

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

160
6480
80A trench

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 feet below original grade. 6 feet of stone below distribution pipe.

LOCATION - Place the first trench 480 feet down the rear (924.84') lot line from the intersect of the 924.84' line and the 474.85' line and 135 feet off the back lot line, as seen when facing the lot from Wynfield Road. Run trenches on contour toward the right lot line.

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

OK

PLANS APPROVED BY S. Abel DATE 7/07/87

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER TWO YEARS.

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

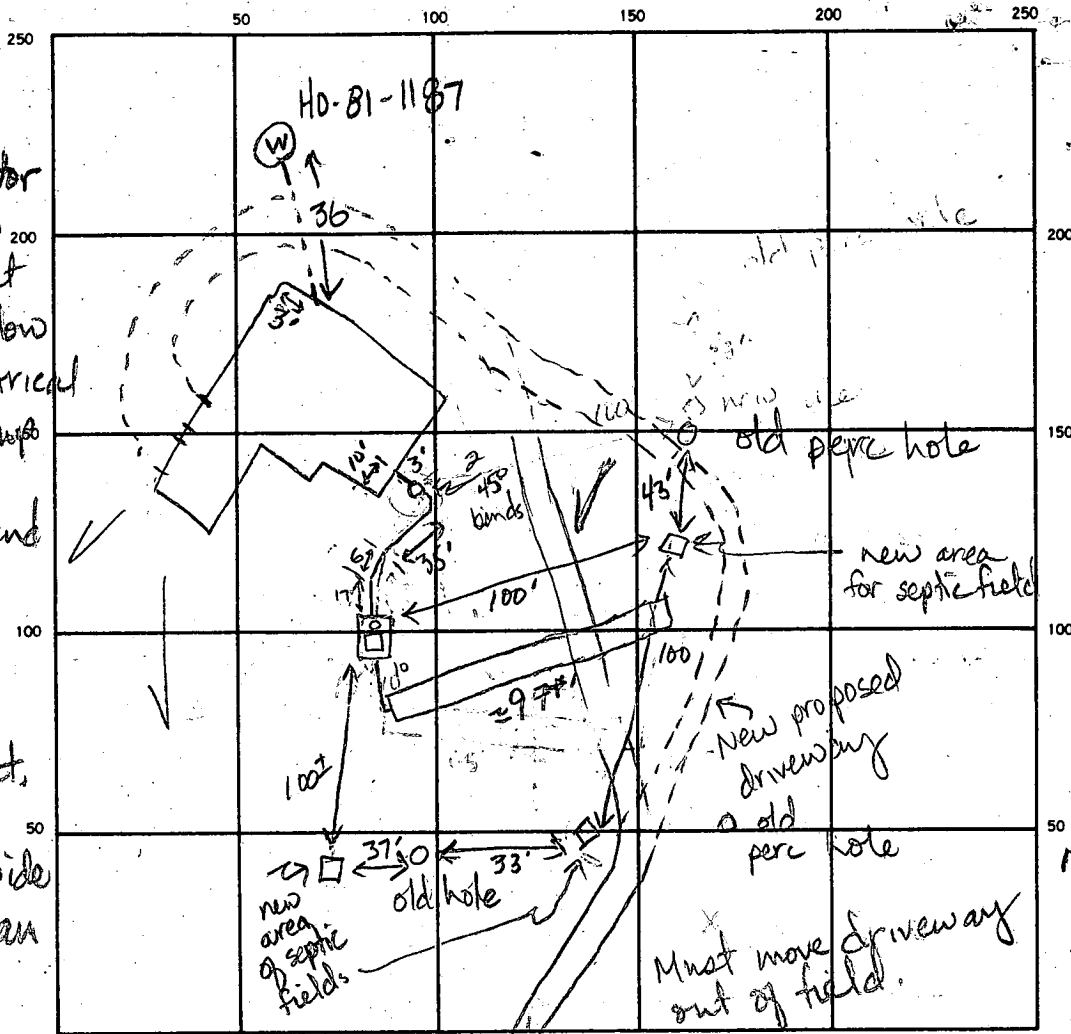
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 30461

3-28-88
 WP I
 Pitless adaptor
 at 42 inches
 well line at
 53 inches below
 grade. Electrical
 not hooked up
 yet. House
 connection and
 well line
 covered in
 trench. No
 pump tank
 installed yet.
 House
 connection inside
 OK. JENadrian



NOTE -
 MEASURED
 FINAL STONE
 COVERING/DEPTH
 MEASURED TO
 3' min - 3 1/2' in
 spots. Extra
 length needed
 in some places
 of ASSUMING 9'
 bottom

INDICATE NORTH. NAME ADJOINING ROADWAY AS BASE LINE.

Wynfield Road

SEPTIC TANK LEVEL 1000 gal 1 on tank, Manhole on ST, 1 at house connection
 CLEANOUTS

DISTRIBUTION BOX LEVEL N/A

DRAIN FIELD/TILE FIELD. DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 - 4 FT.

EFFECTIVE GRAVEL DEPTH 5 - 5 1/2' FT. TOTAL LENGTH ≈ 97' FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL BOTTOM AREA 485 SQ. FT.

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

ABSORBENT AREA ≈ 485 SQ. FT.

15
84
36
28
33

REMARKS 3-28-88 Septic tank not in yet. Must move driveway out of septic field. Must change 90° bend at house connection to 45° or less. Call for trench inspection. JEN 3-29-88 90° bend was changed to a 45° with 6 in piece between them. Septic tank is in place. JEN 3-30-88 Ok to add stone, pipe & paper to trench. Can cover up septic tank. JEN. 3/31/88 OK to cover trench & all work. Awaiting driveway for final OR.

DATE SYSTEM APPROVED 4/12/88 RECOMMEND DRIVELWAY RELOCATION. SYSTEM APPROVED EITHER WAY. Callan
 DATE SYSTEM APPROVED 4/12/88 RECOMMEND DRIVELWAY RELOCATION. SYSTEM APPROVED EITHER WAY. Callan
 INSPECTOR

A 30461

SUBDIVISION: Wynfield Sec. 3

LOT NUMBER: 2
Sec. 3

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
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

3 Bedroom
No garbage disposal

160 sq. ft./bedroom

Trench to be 2 wide.

Inlet 3 feet below original grade.

Bottom maximum depth 9 feet below original grade.

Effective area begins at 3 feet below original grade.

6 feet of stone below distribution pipe.

368 cu ft ???

sh

- 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 absorbent sidewall area by 22%.

LOCATION: PLACE THE FIRST TRENCH 480 FT DOWN THE REAR (924.84')
LOT LINE FROM THE INTERSECT OF THE 924.84' LINE AND THE
474.85' LINE AND 135 FT OFF THE BACK LOT LINE. AS SEEN
WHEN FACING THE LOT FROM WYNFIELD RD. RUN TRENCHES ON CONTOUR
TOWARD THE RIGHT LOT LINE. 7-7-87 SAH

PRELIMINARY

APPLICATION

A 30461

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 3rd

DATE 1/9/80

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 Land Associates, ROBERT GARRETT

ADDRESS 3450 Fort Meade Road, Laurel, Md. 20810

Tom Munz - 792-2242

PHONE Ted Snovell - 265-6543

PROPERTY LOCATION:

SUBDIVISION Hoffman property Wynfield

*LOT 3 sect 2 on final
36 lot 37 combined
March 20 1986*

ROAD AND DESCRIPTION Route 144 2730 Wynfield Rd.

LOT 2 SEC III

SIZE OF LOT 3 acres 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/ Ted Snovell for Land Associates

APPROVED BY [Signature] FOR _____ DATE 1/24/80

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 7/7/87

BP #13135
[Signature]

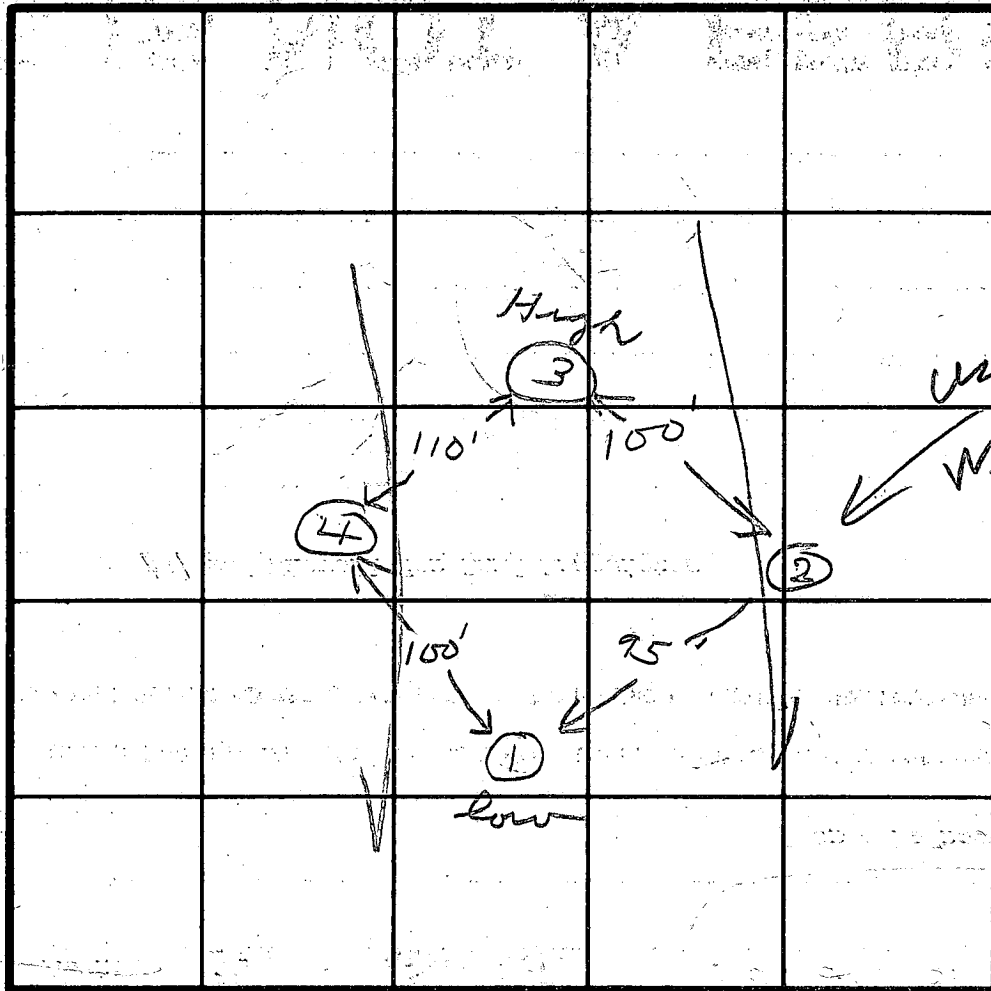
THIS IS NOT A PERMIT

① ②

SOIL PROFILE

0-3'
clay
3'-13'
Sand, clay
shale at 13'

③
0-4'
clay
4-13'
sand, clay
shale - 12'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
1/22/80	1S	4	9:50	9:52	9:52	9:55	3	
	1D	13	9:50	9:56	9:56	10:04	8	
	2S	4	10:05	10:08	10:08	10:15	7	
	2D	13	10:05	10:08	10:08	10:15	7	
	3S	3 1/2	10:09	10:20	10:20	10:38	18	
	3D	13	10:09	10:11	10:11	10:15	4	
	4 V	13	Visual - hole unsafe					
			sandy loam - shale at 12'					

8mm' av.
3' mlet

REMARKS could not find corner property stake

TYPE OF SOIL _____

TESTED BY [Signature] ALSO PRESENT J. Duryowski

PRELIMINARY

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30415

P _____

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

DISTRICT 3rd.

DATE 12/10/79

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 Land Associates

ADDRESS 3450 Ft. Meade Rd., No. 206, Laurel, Md. 20810

PHONE Tom Munz or Ted Snovell - 265-6543

PROPERTY LOCATION:

Lot 3 sect 2 on final
Lot 36 & Lot 37 combined
Lot 36

SUBDIVISION Hoffman property LOT NO. _____

ROAD AND DESCRIPTION Route 144

SIZE OF LOT 3 acres plus 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/ Ted Snovell for Land Associates

APPROVED BY R.D. & D.W.M. FOR DRYWELL DATE 12/27/79

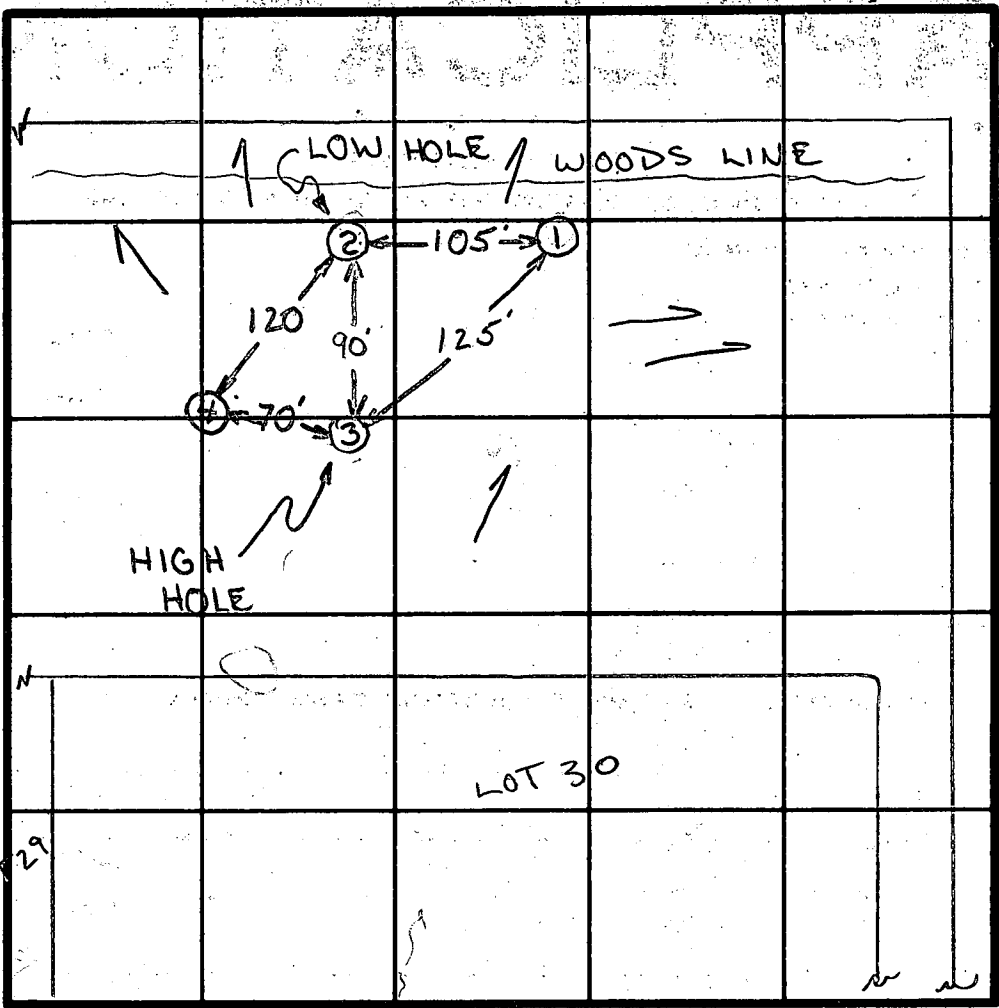
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

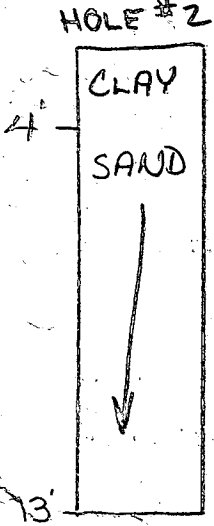
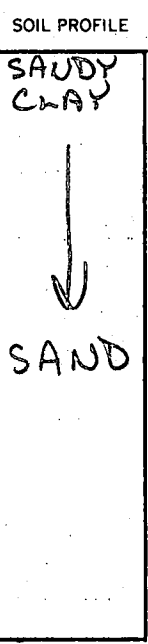
REASONS FOR REJECTION OR HOLDING OK - R.D. - 12/18/79

THIS IS NOT A PERMIT

LOT 36



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/18/79	1S	4'	11:39	11:40	11:40	11:42	2
	1D	12 1/2'	11:39	11:42	11:42	11:47	5
↓	2S	4'	11:41	11:45	11:45	12:01	16
	2D	13'	11:41	11:42	11:42	11:44	2
↓	3S	4 1/2'	11:43	11:46	11:46	11:49	3
	3D	14'	11:43	11:46	11:46	11:49	3
↓	4S	4'	11:49	11:50	11:50	11:52	2
	4D	12'	11:49	12:02	12:02	12:25	23

8mm av.
3' inlet

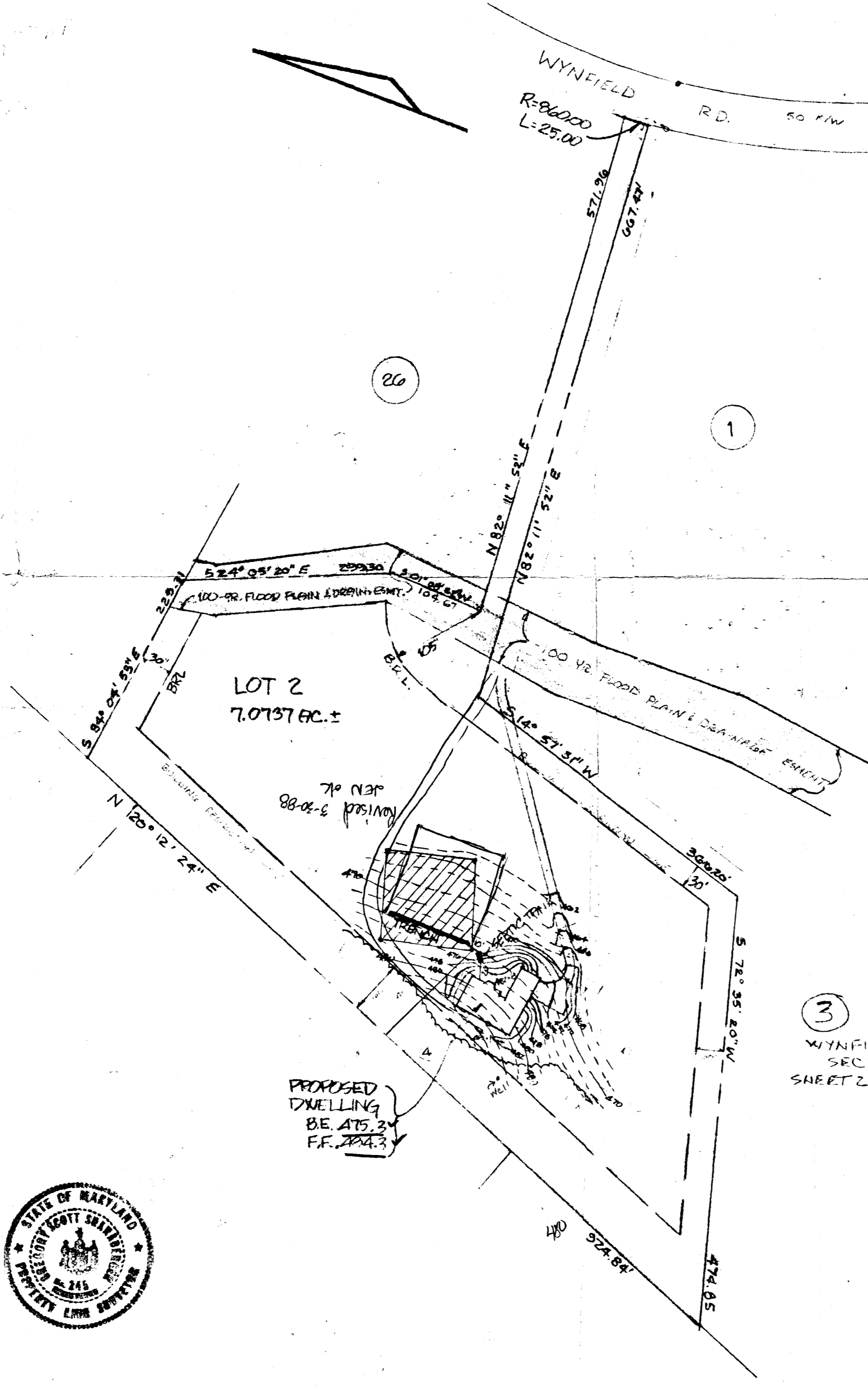
REMARKS LOT 30 PERC AREA IS VERY CLOSE TO LOT 29
DIFF. FROM PLAT. VERIFY WELL LOCATION BEFORE APPROVAL.

TYPE OF SOIL SANDY - INLET CAN GO IN AT 3'

TESTED BY R.D. & J.S.

ALSO PRESENT JIM DUSZYNSKI

SHANBERGER & LANE
 8726 TOWN & COUNTRY BLVD.
 SUITE 203
 ELLICOTT CITY, MD. 21043
 461-9563



SEPTIC SYSTEM DATA

INVERT @ HOUSE: 471.8' + BSMT

SEPTIC TANK

EX GR 475.0' ✓
 FIN GR 470.0' ✓
 INV. IN 471.4' ✓ MANHOLE TO GRADE REQUIRED
 INV. OUT 471.2' ✓

TRENCH (2' x 30') of SW

EX GR 472.0' ✓
 FIN GR 470.0' ✓
 INV. IN 471.0' ✓
 BOTTOM OF STONE 465.0' ✓

7/7/87
 elevation of
 SW

BLDG. PERMIT SIGNED
 AND RETURNED 7/7/87
 BY #13135
 SBLW

3
 WYNFIELD
 SEC 3
 SHEET 2 OF 5

SITE PLAN
 LOT 2 SEC. 3 WYNFIELD
 PLAT # 6043
 3RD ELECTION DISTRICT
 HOWARD COUNTY, MD.
 SCALE: 1" = 100'
 6/10/1987

B 1 8639 SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN CQLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-1187

fill in this form completely

Date Received

02/16/85

OWNER INFORMATION

GARRETT ROBERT
54 GLENWOOD AVE.
BALTIMORE MD 21228

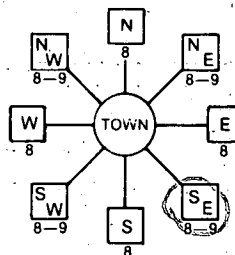
LOCATION OF WELL

HOWARD
WYNFIELD
SECTION 2 LOT 2
West Friendship
MILES FROM TOWN 1.3 MI

DRILLER INFORMATION

Joseph L. Mayne
Joseph L. Mayne Well Drilling
5512 RIDGERD. NH. AIRY MD. 2177
8/16/85

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



WYNFIELD RD.
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



11000
DISTANCE FROM ROAD

ENTER FT or MI

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A 30461
COUNTY NAME COUNTY NO.
OEP SIGNATURE STATE HEALTH INSERT S
DATE ISSUED 092485 Craig W. ... 3/24/86
CO SIGNATURE EXP. DATE
NORTH GRID 530000 EAST GRID 0814000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

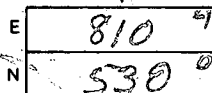
METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE



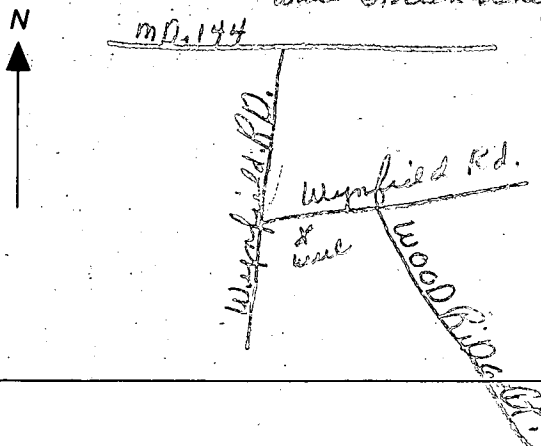
Location of 50' casing 40' open 10' bags cement

9/30/85
Papers + Log given to Mayne crew

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

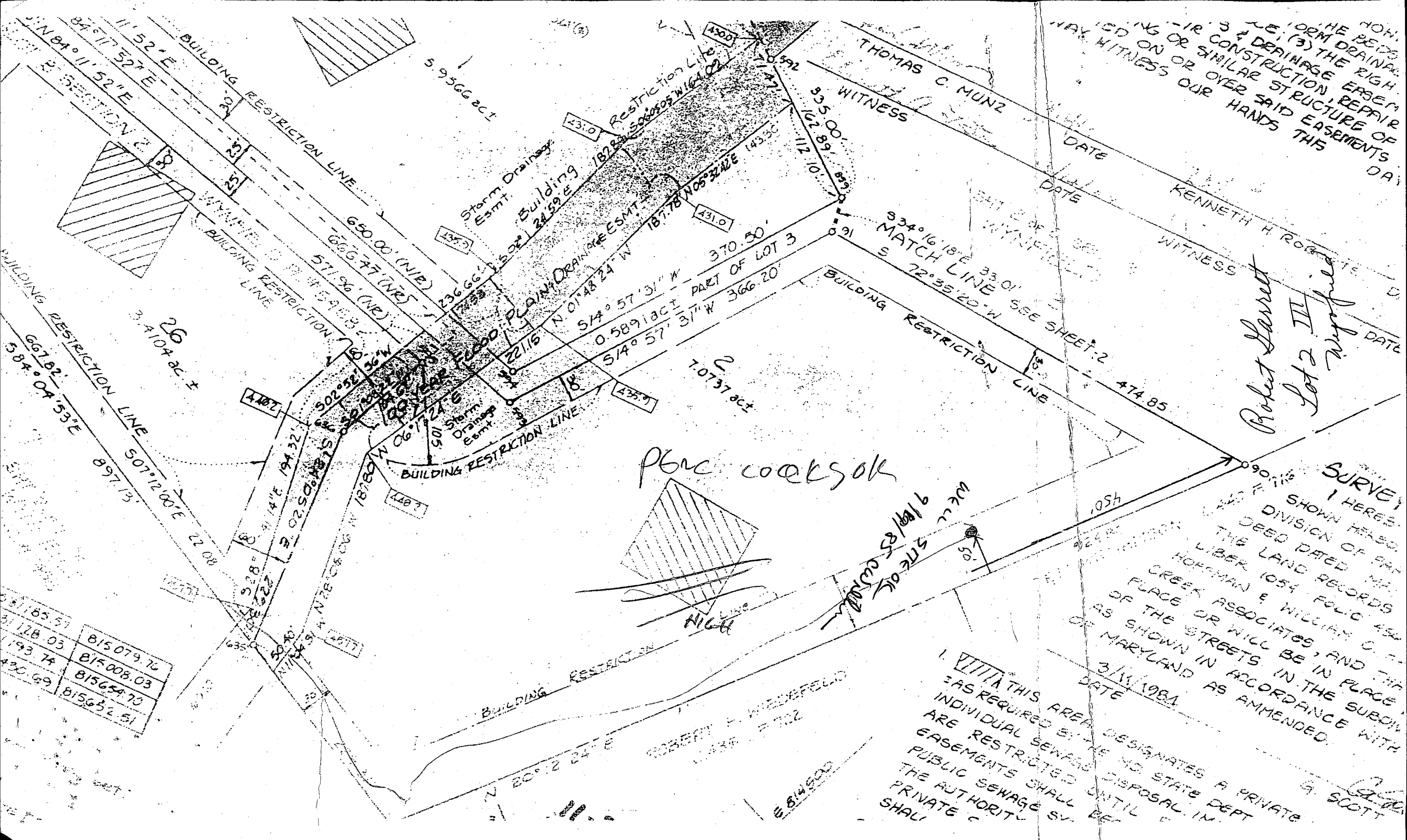


Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE WRITE INITIALS IN BOX PERMIT NO. HO-81-1187

SPECIAL CONDITIONS



HE BEING
FORM DRAINAGE
(3) THE RIGHT
CONSTRUCTION, REPAIR
OR SIMILAR STRUCTURE OF
WITNESS OUR HANDS THIS
DATE

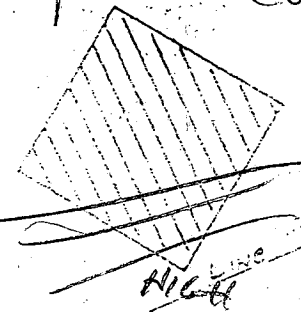
THOMAS C. MUNZ
WITNESS

KENNETH H. ROBERTS
WITNESS

Robert Garrett
Lot 2 III
Robert Garrett

MATCH LINE SEE SHEET 2
S 72° 35' 22" W
S 33° 01' 18" E

PHONE COOKS OK



WELL SITE OK
9/19/85

SURVEY
I HEREBY SHOW HEREON
DIVISION OF PUBLIC
DEED DATED MAY
THE LAND RECORDS
LIBER 1054 FOLIO 454
HOFFMAN & WILLIAM C. F.
CREEK ASSOCIATES, AND THE
PLACE OR WILL BE IN PLACE
OF THE STREETS IN THE SUBDIVISION
AS SHOWN IN ACCORDANCE WITH
OF MARYLAND AS AMENDED.
3/11/1984
DATE

THIS AREA DESIGNATES A PRIVATE
AS REQUIRED BY THE MD STATE DEPT
INDIVIDUAL SEWAGE DISPOSAL IN
ARE RESTRICTED UNTIL THE
EASEMENTS SHALL BE
PUBLIC SEWAGE SYSTEM
THE AUTHORITY SHALL
PRIVATE SHALL

815079.16
815008.03
815654.10
815652.51

C1 2451 STATE OF MARYLAND (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A 30461

DATE Received

DATE WELL COMPLETED 093085

Depth of Well 285 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-1187

OWNER GARRET ROBT last name first name STREET OR RFD WYNFIELD RD TOWN WEST FRIENDSHIP SUBDIVISION WYNFIELD III SECTION LOT 2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes handwritten entries: Brown Shale (0-49), Gray mica Rock (49-285).

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC), NO. OF BAGS 10, NO. OF POUNDS 940, GALLONS OF WATER 60, DEPTH OF GROUT SEAL 40 ft.

CASING RECORD: MAIN CASING TYPE (S), Nominal diameter 6 inch, Total depth of main casing 50 feet.

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

SCREEN RECORD: screen type or open hole (S), STEEL (BR), BRASS (HO), BRONZE (PL), HOLE (OT), PLASTIC (OTHER)

DEPTH (nearest ft.) table with handwritten values: 40, 49, 285

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 238, DRILLERS SIGNATURE Joseph L. Mays

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

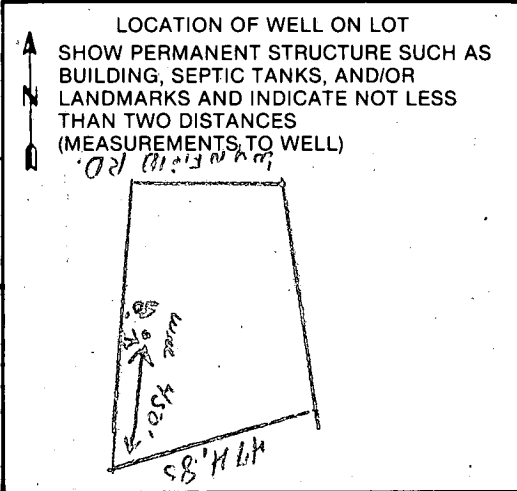
SLOT SIZE 1 2 3, DIAMETER OF SCREEN (NEAREST INCH)

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 CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED 6, PUMPING RATE 2 gal. per min., METHOD USED TO MEASURE PUMPING RATE bucket, WATER LEVEL 40, WHEN PUMPING 178, TYPE OF PUMP USED (for test) submersible

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES (NO), TYPE OF PUMP INSTALLED, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT



Page 1 of 1
 Date 9/30/85

Review OK 11/6/85 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1187
 Location of property (road) WYNFIELD RD
 Subdivision WYNFIELD III Lot 2 Block Plat Sec.
 Well Driller JOE MAYNE Owner ROBT GAMMETT

Depth of well 285'
 Distance of measuring point (M.P.) above ground 1'
 Static water level (S.W.L.) below M.P. 40'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 10 gal.
 Total time 30 min. to reach pumping water level 142 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 4 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:15	105'	6		10
8:30	142	6		10
8:45	142	30		2
9:00	142	30		2
9:15	146	30		2
9:30	146	35		1 3/4
9:45	146	35		1 3/4
10:00	146	35		1 3/4
10:15	146	35		1 3/4
10:30	146	35		1 3/4
10:45	148	35		1 3/4
11:00	150	40		1 1/2
11:15	152	40		1 1/2
11:30	178	30		2
11:45	178	30		2
12:00	178	30		2
12:15	178	30		2
12:30	178	30		2
12:45	178	30		2
1:00	178	30		2
1:15	178	30		2
1:30	178	30		2
1:45	178	30		2
2:00	178	30		2
2:15	178	30		2

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
 Bureau of Environmental Health
 3520-11 Ellicott Mills Drive
 Court House Square
 Ellicott City, Md. 21043
 461-9933

New Installation
 Replacement

Receipt # 39943
 Date 8/2/87

Name of Installer J. Jas. GARLAND Inc.

Telephone 875-2400

License number 1713
 Certified Well Pump Installer

Well Driller Registered Plumber

Name of Property Owner ROBERT GARRETT
 Subdivision WYNFIELD Lot # 2
 Site Address 2730 WYNFIELD RD.

Telephone 747-1029
 Well tag # HO - 81 - 1187

Pump

1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
2. Make Goold
3. Model # 5ES35122
4. Capacity 5 GPM

Motor

1. Horsepower 1/2
2. RPM
3. Voltage
 - a. 110
 - b. 220

Pitless Adapter

1. Make Harvard
2. Model # RT 800
3. Depth 42"

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

Tank

1. Capacity 42 gal
2. Pressure relief valve? 75 psi

Piping

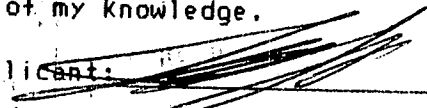
1. Type PLASTIC
2. Size 1"
3. NSE and/or BOCA Code approved
4. Depth of supply line 42"

Well data

1. Depth ft.
2. Yield GPM
3. Static water level ft.
4. Will water supply be disinfected by installer?

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: 

Date: 7/24/87

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

HOWARD COUNTY HEALTH DEPARTMENT



Receipt

Date August 21 1987
 Name Joseph Quillard
 Telephone No. 735-2410

DETAILED LOCATION OF SITE, DEVELOPMENT, SECTION, ROAD,
 LOT NO. & ELECTION DISTRICT
Robert Smith
Wilmington - Lot 2
2730 W. Myrtle Rd

Will Pump Inspection
Permit \$ 10.10

Received Payment Check 1857

ORIGINAL
WHL 39943

THIS RECEIPT IS NOT
 A PERMIT AND IT IS
 NOT A WARRANTY OF
 PERFORMANCE OF
 "THE SYSTEM" THAT
 IS INSTALLED

THE APENCO CORPORATION 214,246-82

3-28-88 Pitless adaptor at 42 inches, well line at 53 inches below grade. Electrical not hooked up yet. House connection and well line covered in trench. No pump tank installed yet. House connection ok. J.E. Nadeau

RECEIVED
 HOWARD COUNTY HEALTH DEPARTMENT
 AUG 30 11 25 AM '87

HOWARD COUNTY HEALTH DEPARTMENT
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Ellicott City, MD 21043
 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation _____ Receipt # _____
 Replacement _____ Date _____
 Name of Installer _____ Telephone _____
 License Number _____
 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____

Name of Property Owner Robert Garrett Telephone _____
 Subdivision Wynfield Lot # 2 Sec III Well Tag # HO-81-1107
 Site Address 2730 Wynfield Road

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
3. Model # _____		
4. Capacity _____ 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 _____		

Tank	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	Depth of supply line _____	4. Will water supply be disinfected by installer? _____

3-28-88 Pitless adapter at 42 inches. Well line at 53 inches below grade. Electrical not hooked up yet. House connection & well line covered in trench. No pump tank yet JENadeau

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: _____

Date: _____

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

30941

New Installation
Replacement

Receipt # 39943
Date 8/21/87

Name of Installer J. JAS. GARLAND INC.

Telephone 875-2400

License number 1713
Certified Well Pump Installer

Well Driller Registered Plumber

Name of Property Owner ROBERT GARRETT

Telephone 747-1029

Subdivision WYNFIELD Lot # 2 Well tag # - - -

Site Address 2730 WYNFIELD RD.

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible

Motor

- 1. Horsepower 1/2
- 2. RPM
- 3. Voltage
 - a. 110
 - b. 220

Pitless Adapter

- 1. Make Alward
- 2. Model # PT 800
- 3. Depth 42"

2. Make Gould

3. Model # SESU422

4. Capacity 5 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

Tank

- 1. Capacity 42 gal
- 2. Pressure relief valve? 75 psi

Piping

- 1. Type PLASTIC
- 2. Size 1"
- 3. NSF and/or BOCA Code approved
- 4. Depth of supply line 42"

Well data

- 1. Depth ft.
- 2. Yield GPM
- 3. Static water level ft.
- 4. Will water supply be disinfected by installer?

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: [Signature]

Date: 7/24/87

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