

PERMIT

P 28974

A 27026

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

03-305872

ELLICOTT CITY

DISTRICT 3rd

DATE 10/3/78

INDEXED

*11/17/78
after lunch*

Liberty Backhoe Service, Inc.

IS PERMITTED TO INSTALL ALTER

ADDRESS 7311 Brangles Road, Marriottsville, Md. 21104

PHONE 795-2642

SUBDIVISION Friendship Manor

ROAD 2566 Wellworth Way

LOT 36

PROPERTY OWNER Rembrandt Builders

ADDRESS 9051 Baltimore National Pike, Ellicott City, Md. 21043

Phone: 465-3000

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 130 SQ. FT. absorbent sidewall area per bedroom.

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 11 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 175 FT. FROM front LOT LINE AND 60 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM Wellworth Way.

PLANS APPROVED BY Donald W. Monaghan

DATE 10/11/77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

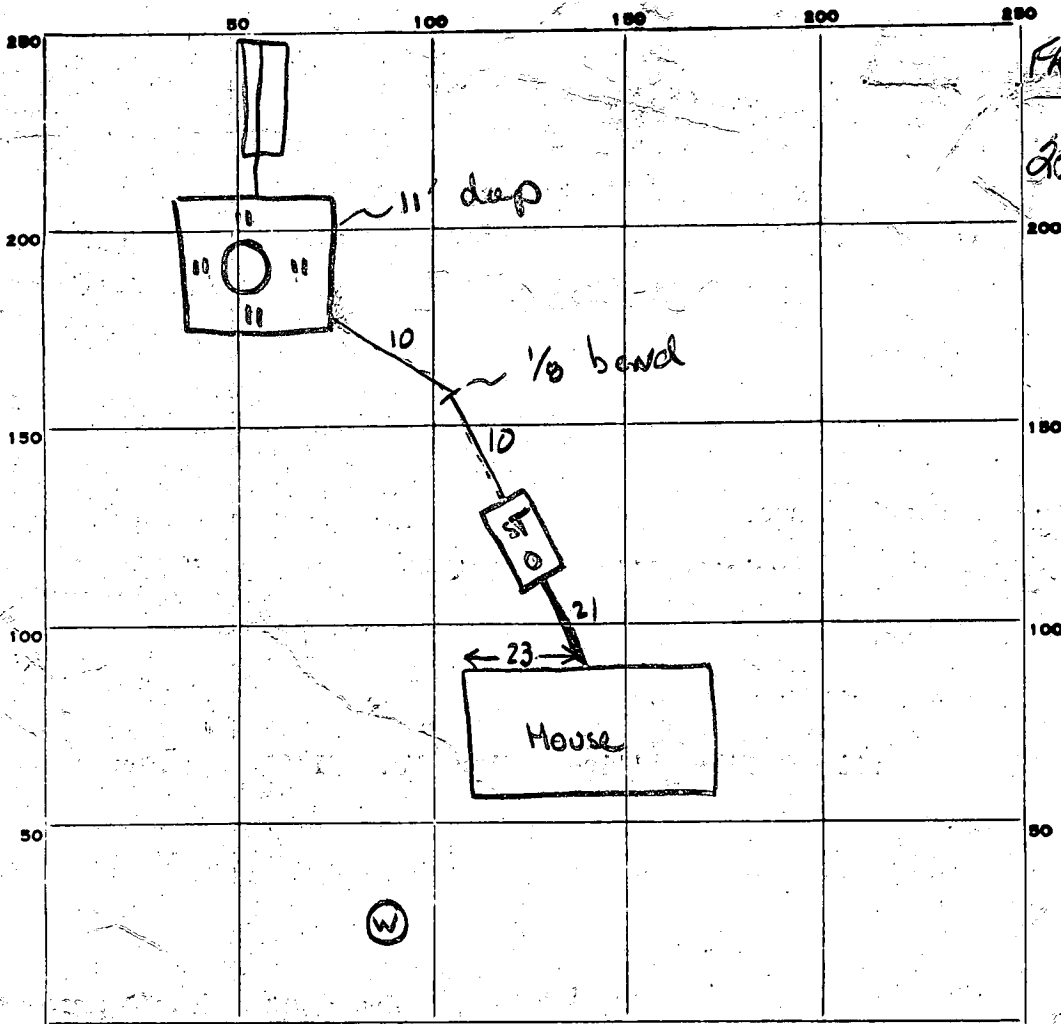
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

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

A 27026



FRIENDSHIP MANOR
 LOT 36
 206 WELWORTH WAY

520

2
 18
 76
 44
 18
 352

132
 4

520

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

WELWORTH WAY

PERMIT CARD CONTRACTOR 1/16 YES 1/17/79 ST | DW
 SEPTIC TANK, LEVEL 1250 tapered CLEANOUTS OK | OK
 DISTRIBUTION BOX, LEVEL Na

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT.
 3-11
 GRAVEL DEPTH 3 FT. TOTAL LENGTH 22 FT.
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 176 ±176
 perimeter 44 3-11 DEPTH BELOW INLET 8 ±352
 SEEPAGE PITS, INSIDE DIAMETER 44 FT. DEPTH BELOW INLET 8 FT.
 ABSORBENT AREA SQ. FT. 528

REMARKS 1/17/79 - Call for final when work on house sewer complete,
 cleanouts installed when gravel is added to trench. (GLK)
 1/17/79 ABOVE COMPLETE R/H

DATE SYSTEM APPROVED 1/17/79 INSPECTOR R-HAD CES

C 1 **2569** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

DATE RECEIVED (WRA USE ONLY) 9/27/98
 DATE WELL COMPLETED

8-13 15 20

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DEPTH OF WELL 200
 22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" PL-73-2969
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 40

OWNER Chateau Builders
 LAST NAME FIRST NAME

STREET OR RFD 8654 Baltimore National Ave POST OFFICE ELLIOTT CITY

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
topsoil	0	2	
clay	2	10	
sandstone	10	35	
mica	35	38	
sandstone	38	40	
mica	40	58	
sandstone	58	63	
mica	63	188	
opening	188	189	
mica	189	200	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT BENTONITE CLAY

NO. OF BAGS 10 NO. OF POUNDS 600

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 21 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW):
 STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 16 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 194

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 12

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 35 (NEAREST FOOT)
 WHEN PUMPING 200 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST):
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

OTHER CASING (IF USED)

EACH CASING DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW):
 STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)
 FROM 22 TO 200

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE
 BELOW } 2 (NEAREST FOOT)

CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

Right Lot Line
 80'
 well
 50'
 Front Lot Line

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 NAME George F Eastwood
 (PLEASE PRINT)

SIGNATURE George F Eastwood

IF DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING 70 LOG INDICATOR 72 OTHER DATA AVAILABLE 74 75 76

B 1	4436	<small>SEQUENCE NO. (WRA USE ONLY)</small>	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL	WRA PERMIT NUMBER <i>40-73-2464</i>
<small>1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PURCHASED IN COLS. 3-6 ON ALL CARDS)</small>				FILL IN THIS FORM COMPLETELY

<small>DATE RECEIVED (WRA USE ONLY)</small> <i>9/27/78</i> <i>9:30 A.M.</i>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><small>OWNER</small> <i>Christians Builders</i></td> <td style="width:50%;"><small>FIRST NAME</small></td> </tr> <tr> <td><small>COL 15 LAST NAME</small></td> <td><small>COL. 34</small></td> </tr> <tr> <td><small>STREET OR RFD</small> <i>5654 St. Natl. Lake</i></td> <td><small>COL. 55</small></td> </tr> <tr> <td><small>COL 36</small></td> <td><small>COL. 76</small></td> </tr> <tr> <td><small>POST OFFICE</small> <i>Ellicott City Md.</i></td> <td><small>COL. 87</small></td> </tr> </table>	<small>OWNER</small> <i>Christians Builders</i>	<small>FIRST NAME</small>	<small>COL 15 LAST NAME</small>	<small>COL. 34</small>	<small>STREET OR RFD</small> <i>5654 St. Natl. Lake</i>	<small>COL. 55</small>	<small>COL 36</small>	<small>COL. 76</small>	<small>POST OFFICE</small> <i>Ellicott City Md.</i>	<small>COL. 87</small>
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<small>COL 36</small>	<small>COL. 76</small>										
<small>POST OFFICE</small> <i>Ellicott City Md.</i>	<small>COL. 87</small>										

B 1	CONTINUED	DRILLER INFORMATION
<small>1 2 3 (SEQ. NO.) 6</small>		
<small>DATE</small> <i>9/25/78</i>	<small>LICENSE NUMBER</small> <i>40</i>	<small>77 80</small>
<small>FIRST NAME</small> <i>W. F. Easterday</i>	<small>DRILLER</small>	<small>LAST NAME</small>
<small>SIGNATURE</small> <i>W. F. Easterday</i>		

B 3	LOCATION OF WELL
<small>1 2 3 (SEQ. NO.) 6</small>	
<small>COUNTY</small> <i>Howard</i>	<small>21</small>
<small>SUBDIVISION</small> <i>Frederick Manor</i>	<small>42</small>
<small>SECTION</small>	<small>LOT</small> <i>36</i>
<small>NEAREST TOWN</small> <i>West Friendship</i>	<small>50</small>
<small>MILES FROM TOWN (ENTER 0 IF IN TOWN)</small> <i>0</i>	<small>71</small>
	<small>76 77 78</small>

B 2	WELL INFORMATION
<small>1 2 3 (SEQ. NO.) 6</small>	
<small>MAXIMUM PUMPING RATE (GALLONS PER MINUTE)</small> <i>5</i>	<small>8 12</small>
<small>AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)</small> <i>600</i>	<small>14 20</small>
USE FOR WATER (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	
<input type="checkbox"/> F FARMING, AGRICULTURE, IRRIGATION	
<input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.	
<input type="checkbox"/> M MUNICIPAL WATER SUPPLY	
<input type="checkbox"/> P PRIVATE WATER COMPANY	
<input type="checkbox"/> T TEST	
<small>MUST HAVE STATE HEALTH DEPT. APPROVAL</small>	

B 4	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)								
<small>1 2 3 (SEQ. NO.) 6</small>									
<table border="0" style="width:100%;"> <tr> <td><input type="checkbox"/> N NORTH</td> <td><input type="checkbox"/> E EAST</td> <td><input type="checkbox"/> NE NORTHEAST</td> <td><input checked="" type="checkbox"/> SE SOUTHEAST</td> </tr> <tr> <td><input checked="" type="checkbox"/> S SOUTH</td> <td><input type="checkbox"/> W WEST</td> <td><input type="checkbox"/> NW NORTHWEST</td> <td><input type="checkbox"/> SW SOUTHWEST</td> </tr> </table>		<input type="checkbox"/> N NORTH	<input type="checkbox"/> E EAST	<input type="checkbox"/> NE NORTHEAST	<input checked="" type="checkbox"/> SE SOUTHEAST	<input checked="" type="checkbox"/> S SOUTH	<input type="checkbox"/> W WEST	<input type="checkbox"/> NW NORTHWEST	<input type="checkbox"/> SW SOUTHWEST
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<input checked="" type="checkbox"/> S SOUTH	<input type="checkbox"/> W WEST	<input type="checkbox"/> NW NORTHWEST	<input type="checkbox"/> SW SOUTHWEST						
<small>NEAR WHAT ROAD</small> <i>RT 144</i>	<small>8 9</small>								
<small>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</small>	<small>11 30</small>								
<input type="checkbox"/> N NORTH	<input checked="" type="checkbox"/> S SOUTH	<input type="checkbox"/> E EAST	<input type="checkbox"/> W WEST						
<small>32</small>	<small>32</small>	<small>32</small>	<small>32</small>						
<small>DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)</small> <i>400</i>		<small>34 37</small>	<small>38 39</small>						

<small>APPROXIMATE DEPTH OF WELL</small> <i>150</i>	<small>24 28 FEET</small>
<small>APPROXIMATE DIAMETER OF WELL</small> <i>6</i>	<small>(NEAREST INCH)</small>

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)		
BORED (OR AUGERED) JETTED DRIVEN		
<input checked="" type="checkbox"/> AIR-ROTARY	<input type="checkbox"/> AIR-PERCUSSION	<input type="checkbox"/> ROTARY (HYDRAULIC ROTARY)
<input type="checkbox"/> CABLE	<input type="checkbox"/> REVERSE-ROTARY	<input type="checkbox"/> DRIVE-POINT
<small>OTHER (DESCRIBE)</small>		

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL	
<input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED	
<input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY	
<input type="checkbox"/> D THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)	

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)	
<small>APPROPRIATION PERMIT NUMBER</small>	<small>ENGINEER REVIEW DISTRICT NO.</small>
<i>54</i>	<i>63</i>
<small>FORCE</small>	<small>CONDITIONS</small>
<i>67 68</i>	<i>70 71 72 73 74 75 76 77 78 79</i>

B 4	HEALTH DEPARTMENT APPROVAL
<small>1 2 3 (SEQ. NO.) 6</small>	
<small>STATE HEALTH (CIRCLE BOX)</small> <input checked="" type="checkbox"/> S	<small>COUNTY NAME</small> <i>Howard</i>
<small>DATE</small> <i>08 23 78</i>	<small>COUNTY NO.</small> <i>W28769</i>
<small>MO. DAY YR.</small>	<small>APPROVED BY</small> <i>Donald H. Monaghan, Sanitaria</i>
<small>43 48</small>	<small>65</small>

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD/JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

24' - CASING
2' - ABOVE GR
21' - OPEN HOLE
6 - BAGS CEMENT

OK
9/27/78
RT 144
FW 32

<small>BOX NUMBER</small>	<input type="checkbox"/> E	<input type="checkbox"/> N	<input type="checkbox"/> W	<input type="checkbox"/> S
<i>810</i>	<i>810</i>	<i>830</i>	<i>830</i>	<i>830</i>
<small>NORTH COORDINATE</small>	<small>EAST COORDINATE</small>	<small>ELEVATION AT WELL HEAD (FEET)</small>	<small>0/0</small>	<small>5/0</small>
<i>50 51 52 53 54 55</i>	<i>57 58 59 60 61 62 63</i>	<i>65 66 67 68</i>	<i>0/0</i>	<i>5/0</i>

B 5	SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
<small>1 2 3 (SEQ. NO.) 6</small>	

PRELIMINARY

APPLICATION

A 27026

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3rd

DATE 10/10/77

P O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356.

*Septic Tank 3 bedrm - 1000 gal
4 bedrm - 1250 gal.*

*Dry Well 130 sq ft. absorbent sidewalk area on bedroom to
begin below the first 3' of org. grade. New depth permitted for DW
is 11 ft below org. grade.*

*Place Dry Well 175 ft from front lot line + 60 ft from
left side as seen when facing from Wellworth way*

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 William B. Ridgely

ADDRESS Spring Meadow Farms, Cooksville, Md. PHONE 531-5115 (Carol Clark)

PROPERTY LOCATION:

SUBDIVISION Friendship Manor LOT NO. 36

ROAD AND DESCRIPTION Route 144 and Route 32

2566 Wellworth Way

SIZE OF LOT ? TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Albert Scheel BLDG. PERMIT SIGNED AND RETURNED 10/3/78 Serial No. 37007

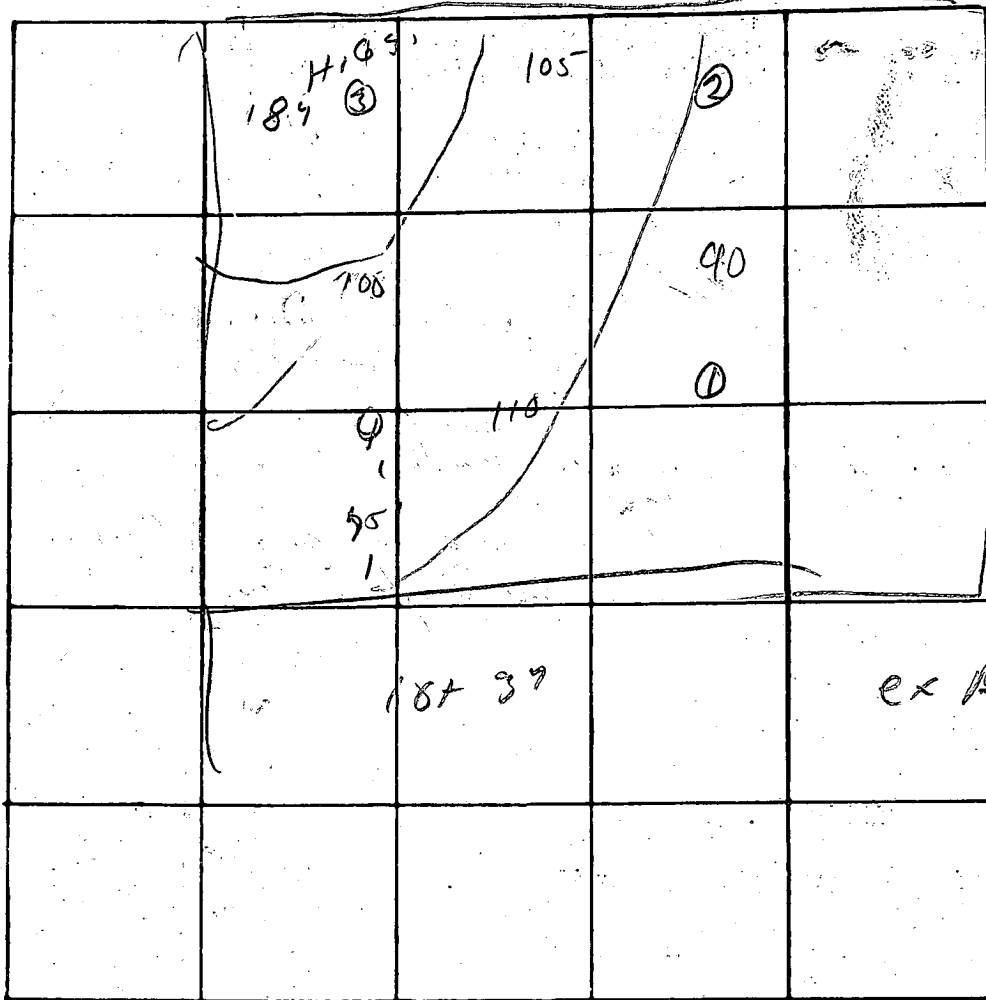
APPROVED BY D O'N FOR D O'N DATE 10/11/77
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

RF 141

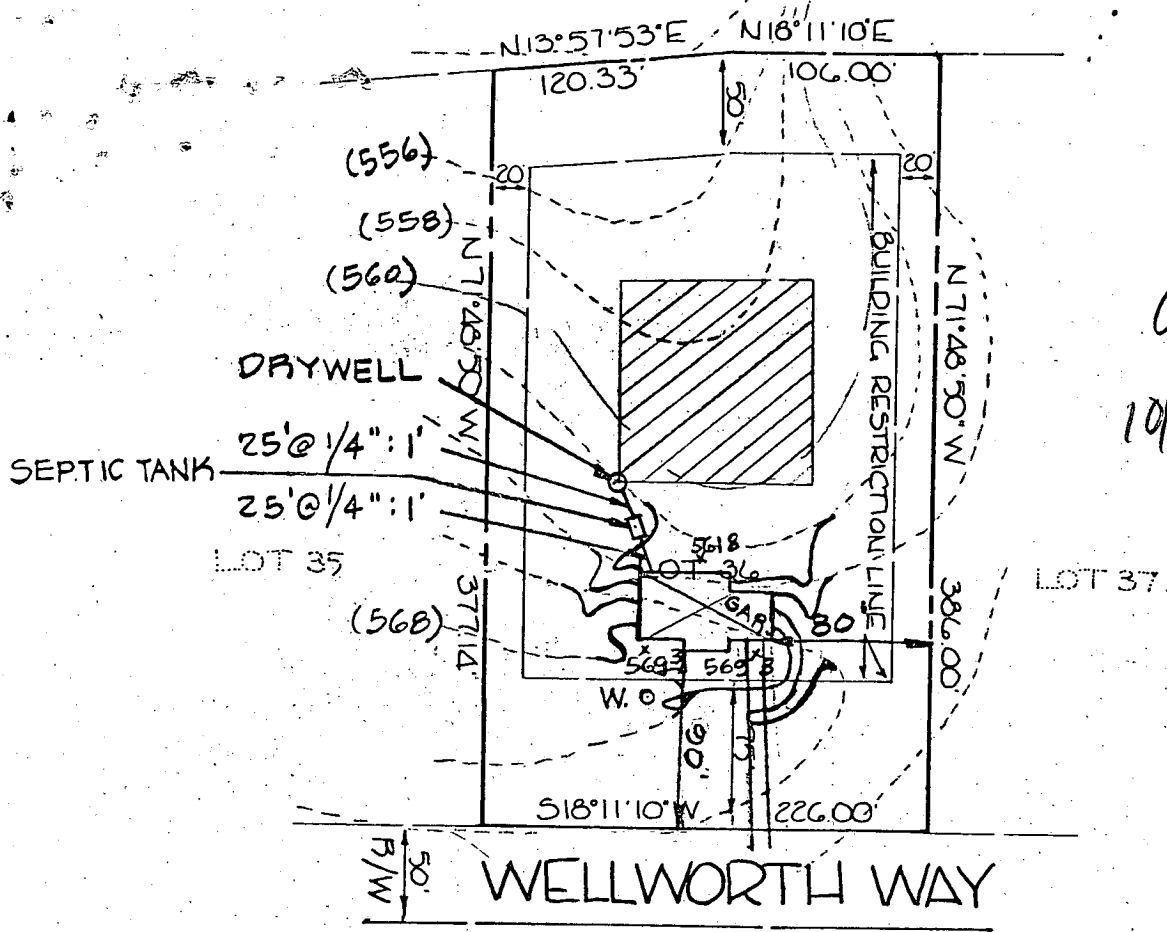
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/11/69	15	3	10 ⁰⁶	—	—	10 ¹⁴	8
	0	13	10 ⁰⁶	—	—	10 ¹⁴	8
	25	3	10 ¹¹	—	—	10 ¹⁶	4
	9	13	10 ¹¹	—	—	10 ¹⁶	4
	45	4	10 ¹⁴	10 ¹⁹	10 ¹⁹	1 ²⁰	3
	9	13	10 ¹⁴	10 ¹⁹	10 ¹⁹	1 ²⁰	3
	3013	similar to 2					

REMARKS _____

TYPE OF SOIL _____

TESTED BY D. J. O'Neill

ALSO PRESENT: _____



4" = 1"

HOUSE:

F.F. ELEV. - 570.8
 BSMT. ELEV. - 562.3
 INV. OUT - 560.3

DRYWELL:

EX. GRADE - 562.0
 PROP. GRADE - 562.0
 INV. IN - 559.0

SEPTIC TANK:

EX. GRADE - 563.0
 PROP. GRADE - 563.0
 INV. IN - 559.8
 INV. OUT - 559.5

WELL:

EX. GRADE - 568.2
 PROP. GRADE 568.2

NOTE: Topography shown hereon is based on Howard County Aerial Topography Maps. Contractor is to set grades in the field.

TITLE			
GRADING STUDY - "KENT"			
PROJECT			
FRIENDSHIP MANOR - SECTION 2 - LOT 36			
LOCATION			
THIRD ELECTION DISTRICT - HOWARD COUNTY, MARYLAND			
DATE:	DESIGN BY:	DRAWN BY:	CHECKED BY:
AUGUST, 1978	WHN	DHH	WHN
SCALE:	JOB NO.:	DRAWING NO.:	
1" = 100'	78205	1 of 1	

boender associates

engineers
 surveyors
 planners