

approved 9/16/80

Stage

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 9/4/80

INDEXED

05-360587

9/16/80
a.m. please
as soon as possible

P 30892

A 29979

Stanley A. Souder Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS 6832 Mink Hollow Road, Highland, Md. 20777 PHONE _____

SUBDIVISION _____ ROAD 7254 Mink Hollow Road LOT Parcel B

PROPERTY OWNER Stanley A. Souder

ADDRESS same as above

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 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. per bedroom in dry well below inlet.

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 10 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 162 FT. FROM rear LOT LINE AND 53 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM the road.

PLANS APPROVED BY Raymond Hodges & Fred Frommelt DATE 7/30/80

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.

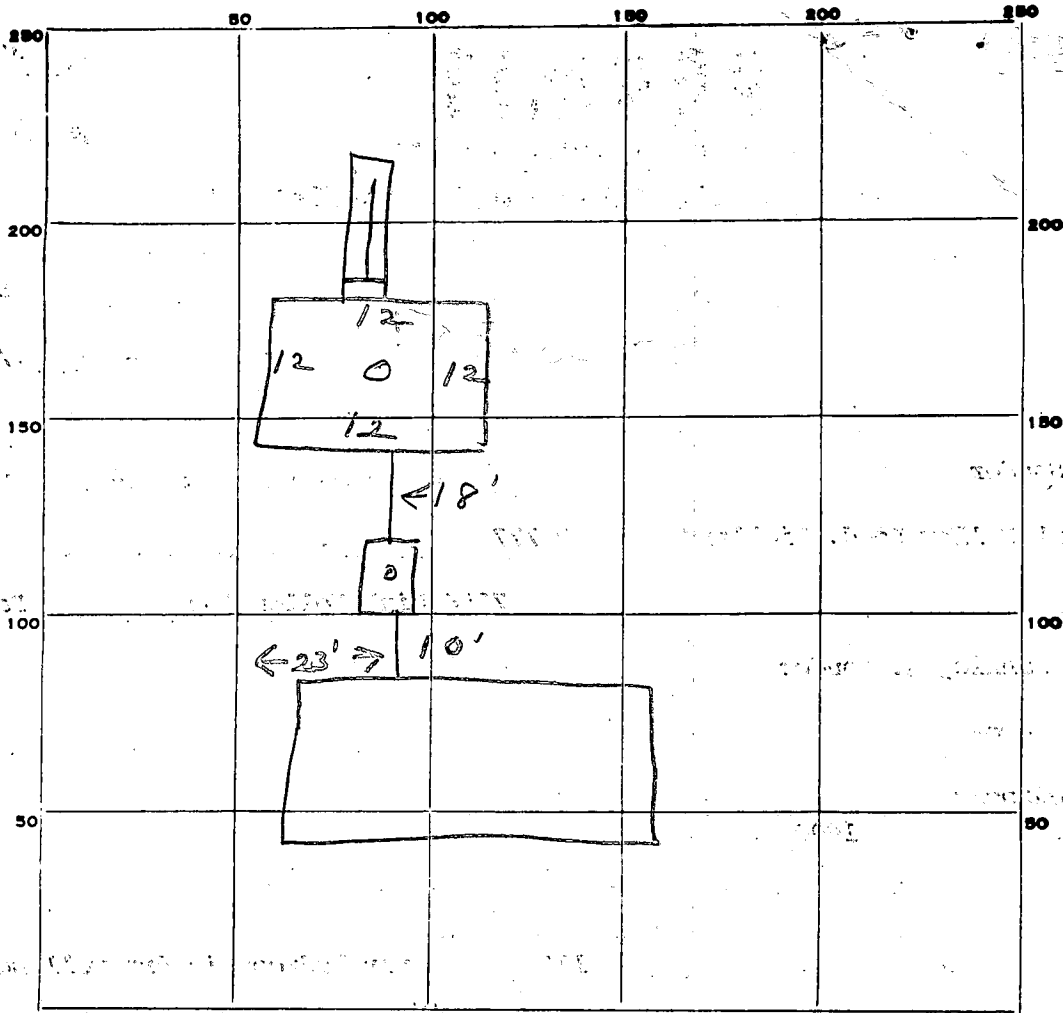
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 29979



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

SEPTIC TANK, LEVEL

CLEANOUTS

ST / DW

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 1 FT.

GRAVEL DEPTH 7 IN. TOTAL LENGTH 12 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 84

33.6
84
420

SEEPAGE PITS, INSIDE DIAMETER 48 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 420 SQ. FT.

REMARKS 9/16/80 - OK to cover all work

DATE SYSTEM APPROVED

9/16/80

INSPECTOR

Stayer

Pre-Record

APPLICATION

SEWAGE DISPOSAL TESTING

A 29979

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



*inlet 3 ft max. B.O.G.
total depth 10 ft max. B.O.G.
located 162 ft. from rear line &
53 ft. from left side line as seen from road*

DISTRICT 5th
DATE 7/9/79

*130 sq. ft. per Bedroom
390 " " min. system
Total*

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 Thomas C. & Maria M. Mitchell Stanley A. Souder

ADDRESS 7244 Mink Hollow Road, Highland, Md. 20777 PHONE 596-9206

PROPERTY LOCATION: 6832 Mink Hollow Road
Highland, Md. 20777

SUBDIVISION _____ LOT NO. Parcel B

ROAD AND DESCRIPTION Next to Parcel "A" on Mink Hollow Road - see attached plat and description

SIZE OF LOT 1.121 acres TYPE BLDG. 3 or 4 bedrooms
*1/2 mile from Mtz County Line on Left
Near TIMBERLINE FARM SIGN*

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/ Thomas C. Mitchell

BLDG. PERMIT SIGNED
AND RETURNED 8/5/79
Mail # 75805

APPROVED BY _____ FOR _____ DATE _____

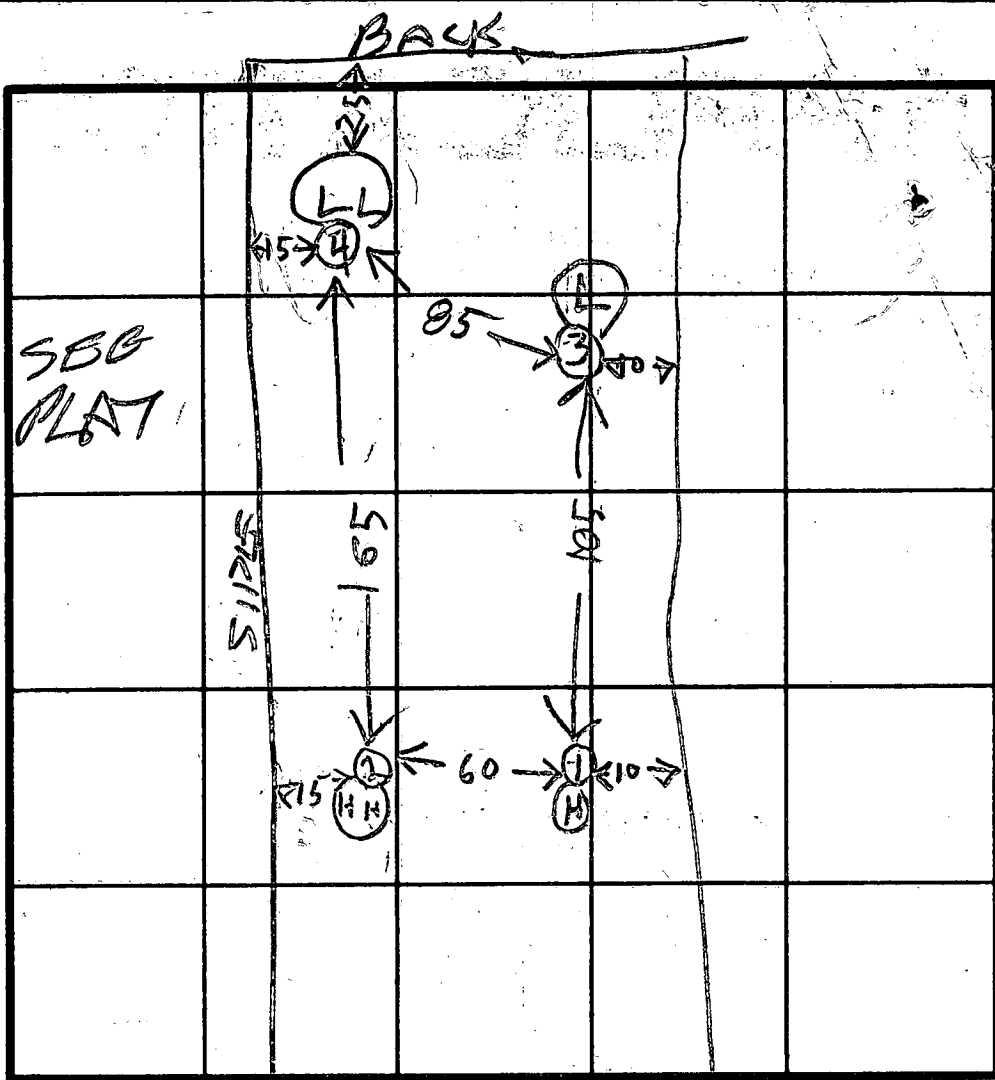
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7/25/79 / hold for review with
supervisor copy to T. Mitchell
7/26/79 DM said per OK RH

THIS IS NOT A PERMIT

MICHELL
PARCEL B



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

MINK HOLLOW RD

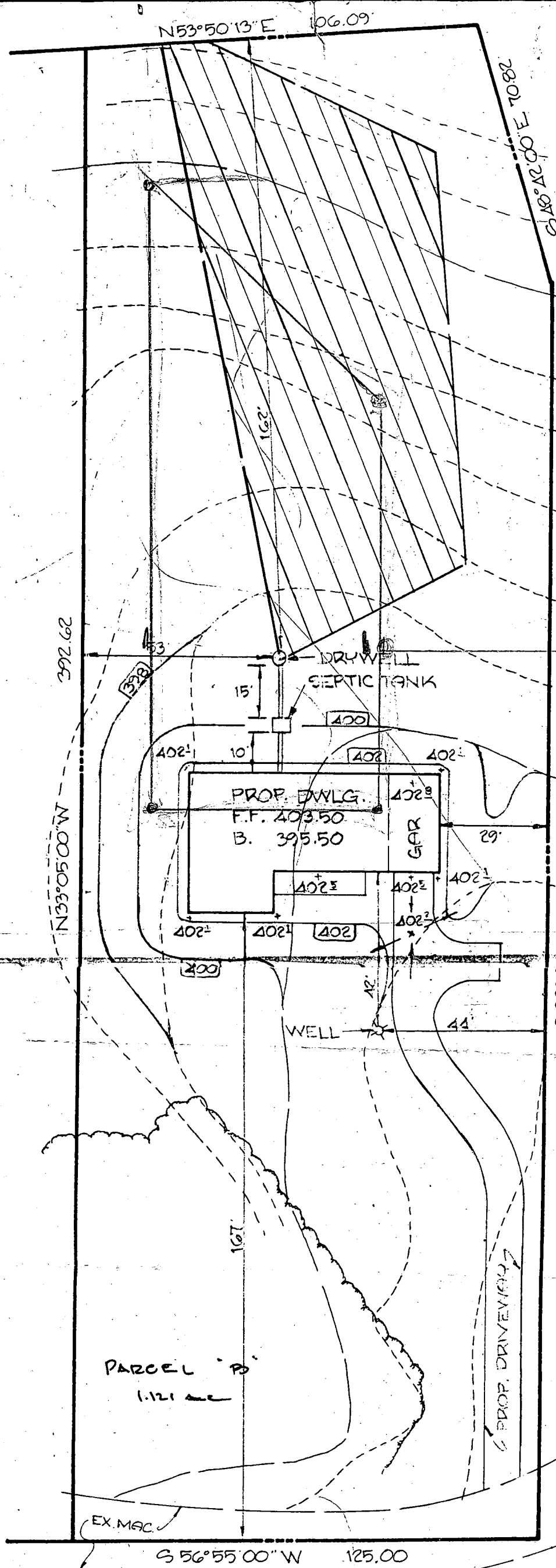
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/25/79	1S	4	250	253	253	257	4
	1D	14	254	324	1st mech	30	FAIL
	2S	3	304	306	306	310	4
	2D	12	339	345	345	355	10
	3S	3	318	320	320	322	2
	3D	13	349	410	2nd mech	21 min	*
	4S	3	319	321	321	323	2
	4D	13 1/2	358	403	403	418	15
7/25/79	1M	7	344	350	350	400	20

REMARKS * HAD TO LEAVE

TYPE OF SOIL

TESTED BY RH

ALSO PRESENT COLPMAN MITCHELL



7254
WHITE SIGN

*slab location ok
8-5-80 off
changes 8-5-80.*

DRY WELL DATA
EX. GR. : 399.50
FIN. GR. : 399.50
INV. : 396.50

SEPTIC TANK DATA
EX. GR. : 399.50
FIN. GR. : 400.00
INV. IN. : 397.10
INV. OUT. : 396.60

INV. FROM HOUSE : 397.30

WELL DATA
EX. GR. 402.10
FIN. GR.

PARCEL "B"
1.121 AC

MINK HOLLOW RD.



HUDKINS ASSOCIATES, INC.
231 JOSEPH SQUARE
COLUMBIA, MARYLAND 21044

SITE PLAN PARCEL "B"
THOMAS C. MITCHELL PROPERTY
5TH ELECTION DISTRICT HOWARD CO., MD
JULY 21, 1980 SCALE: 1" = 30'
LIBER 678, FOLIO 10

B 1 **5011** SEQUENCE NO. (WRA USE ONLY)

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

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
HO-73-3637
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
 7/28/80
 11-30 AM
 9:30 AM

OWNER SAUNDER R. STANLEY
 COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD 6832 Mink Hollow Rd.
 COL 36 COL. 55

POST OFFICE High Land Md. 20777
 COL 57 COL. 76

B 1 CONTINUED **DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

DATE July 6 1980 LICENSE NUMBER 273
 77 80

FIRST NAME Ralph **DRILLER** **LAST NAME** MAYNE

SIGNATURE *Ralph Mayne*

B 3 **LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6 **Howard**

COUNTY (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION THOMAS B MINK HOLLOW 42

SECTION 29 Parcel B 42

NEAREST TOWN High Land 50

MILES FROM TOWN (ENTER 0, IF IN TOWN) 79 76-77-78

B 2 **WELL INFORMATION**

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5
 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500
 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL

PRIVATE WATER COMPANY }

TEST

B 4 **DIRECTION FROM TOWN**
 (CIRCLE APPROPRIATE BOX)

NORTH EAST NE NORTHEAST SE SOUTHEAST

SOUTH WEST NW NORTHWEST SW SOUTHWEST

NEAR ROAD WHAT? Mink Hollow Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH EAST WEST

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 100 34 37 38-39

APPROXIMATE DEPTH OF WELL 150 FEET
 24 26

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE)

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 DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)

APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 65

FORCE WRITE INITIALS IN BOX CONDITIONS A E N S G W Q C L U

B 4 CONTINUED **HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6

41 STATE HEALTH (CIRCLE BOX) COUNTY NAME COUNTY NO.

DATE 7 20 80 APPROVED BY *J. Brummett*

48 *red Brummett* Sanitarian

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.

BOX NUMBER E 000 N 450 6

NORTH COORDINATE 80 81 82 83 84 85

EAST COORDINATE 00 01 02 03 04 05

ELEVATION AT WELL HEAD (FEET) 0/0 5/0

Handwritten notes: *High Land Md.*, *7/28/80*, *10 Bags of cement*, *38 1/2 Well Head*, *42 Well casing*, *C.B.S.*

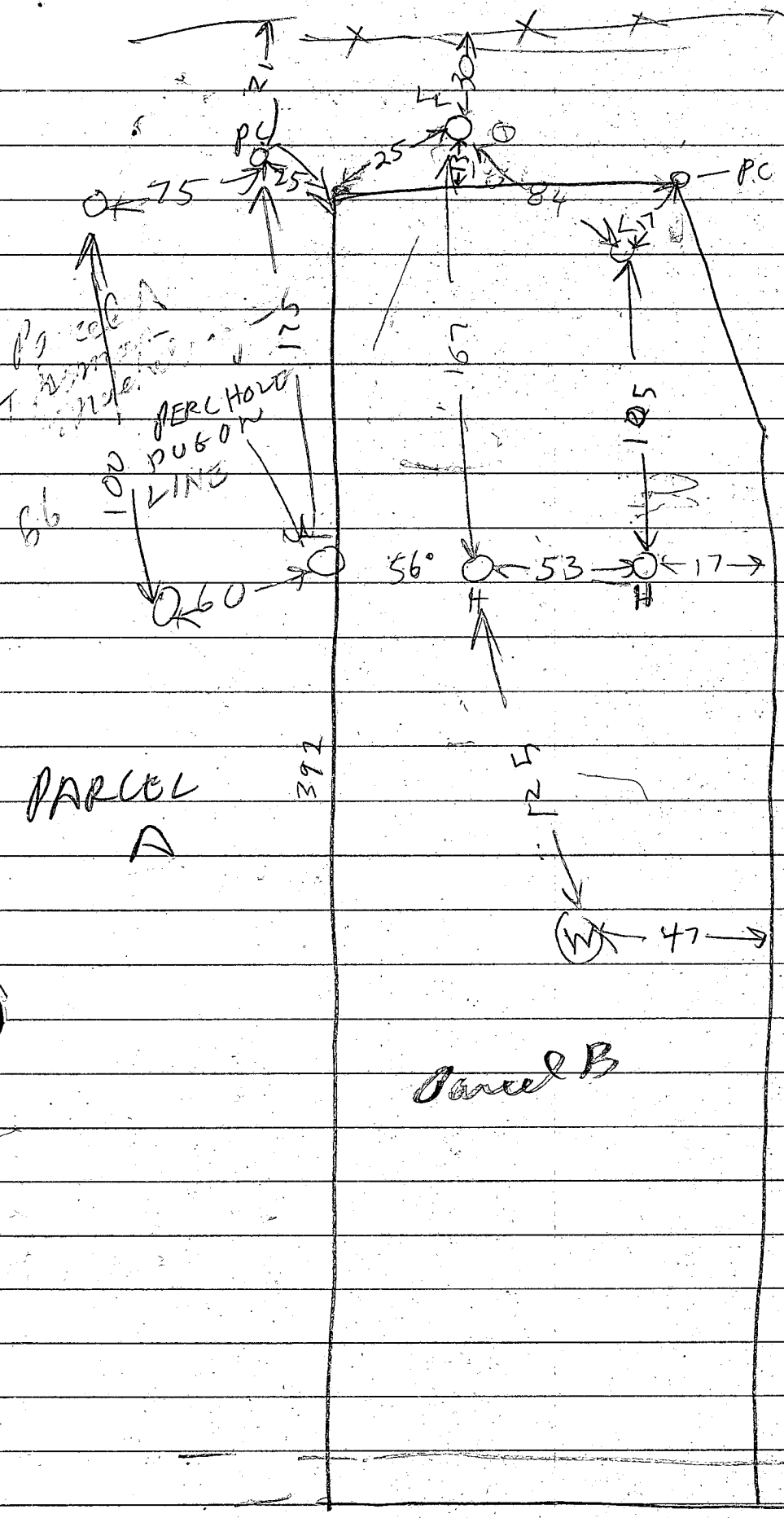
B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

C 2 4601

THOMAS MITCHELL

25
25



○ = OLD TESTS

PARCEL A

Parcel B

7/3/80 Re-measured
Holes (B) Soudan
present. PC =
Property Corner
Call 286 2045

MC 15 HOLLOW BD
See other notes

8/1/80 Discussed with F.P. Retest
not needed for Parcel B
but proper repair system plans
will be needed. R/H

C1 4601 SEQUENCE NO. (WRA USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

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

COUNTY NUMBER A 29979

Date Received (WRA use only) July 27, 1980 DATE WELL COMPLETED

Depth of Well 265 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-3637

OWNER Soudler A. Stahley last name first name STREET OR RFD 6832 Mink Hollow Road TOWN Highland Md. SUBDIVISION Thomas B Mitchell SECTION LOT Parcel B

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Sandy, Sand Stone, Micka, and Sand Stone.

GROUTING RECORD WELL HAS BEEN GROUTED (YES Y NO N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 10 NO. OF POUNDS 1600 GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 25 measured

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE (S+) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 42

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

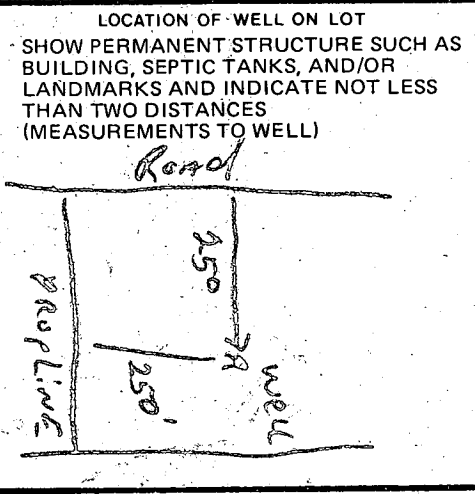
SCREEN RECORD screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT)

EACH SCREEN DEPTH (nearest ft.) 40 265 SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F) WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 265 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 (Y) NO (N) 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 2 (nearest foot)



- 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. 273 Label Mays DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Ralph E. Mays SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

40 73 3637