

SYSTEM TO BE INSTALLED
FIRST BEFORE BUILDING
PERMIT CAN BE SIGNED.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 1st

DATE 1/30/80

INDEX

South Carroll Backhoe Service

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 7311 Brangles Road, Marriottsville, Md. 21104 PHONE 795-2642

SUBDIVISION 3748-6450 WOODVALE PLACE ROAD Montgomery Road LOT

PROPERTY OWNER Charles Halcomb

ADDRESS 190 Virginia Lane, Glen Burnie, Md. 21061

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 SQ. FT.

INLET PIPE FT. BELOW ORIGINAL GRADE, MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN
FACING LOT FROM

TWO DRY WELLS - System to have 150 sq. ft. effective absorbent sidewall area per bedroom
below inlet. Inlet to be 2 ft. below original grade and maximum depth
9 ft. Dry well #1 to be located 35 ft. in from right side line (939 ft. property line)
and be constructed 13 X 14 square for sidewall area of 270 sq. ft. Dry well #2 to be
located 80 ft. in from right side line (939 ft. property line) and be constructed 13 X
13 square for sidewall area of 182 sq. ft. 5 ft. effective on Dry well #1 and 3 1/2 ft.
effective on Dry well #2.

PLANS APPROVED BY C. B. Streaker, D. W. Monaghan & F. Frommelt DATE 1/9/80

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.

P 30512

A 30302

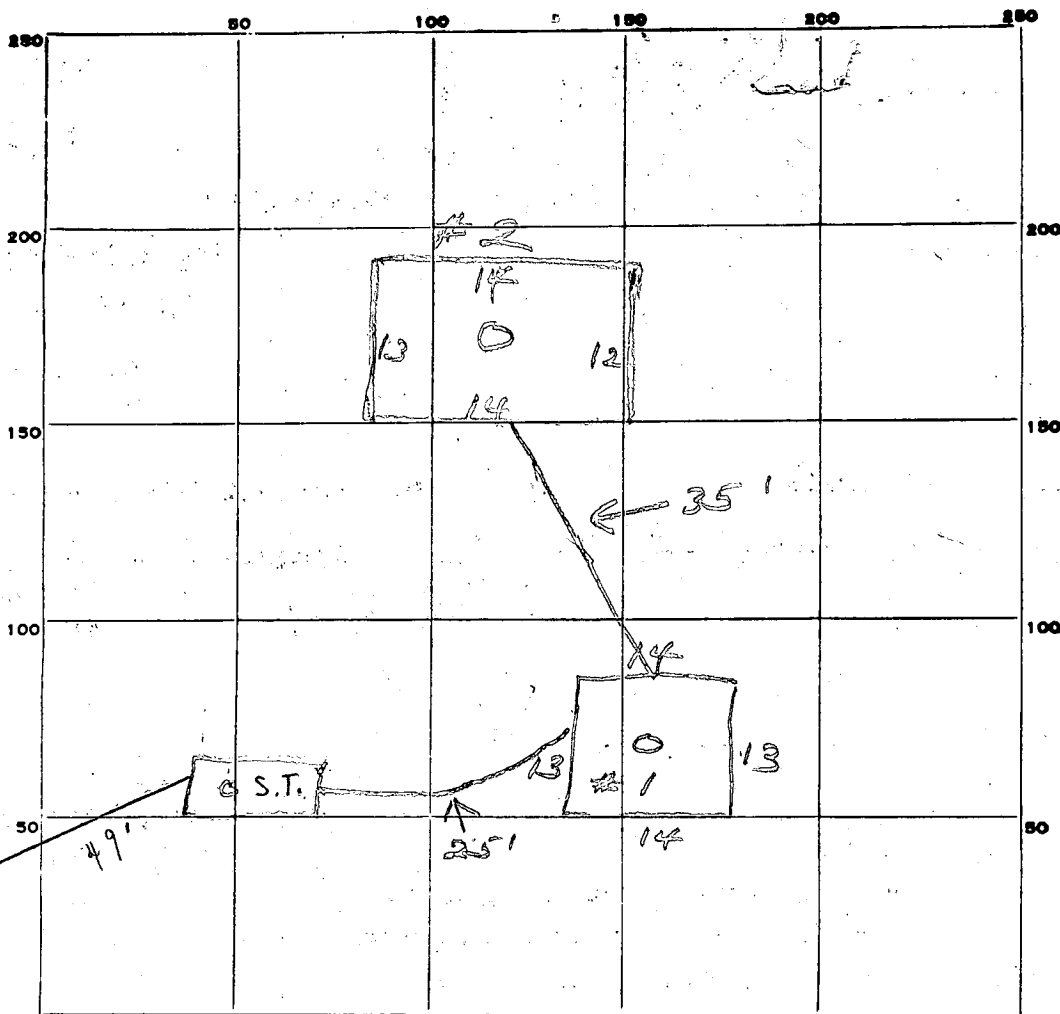
BLDG. PLANS SIGN
AND RETURNED 10/31/2008

B00133629

14x12 OFFICE/STORAGE AREA

A 30302

150
3
450
28
26
54
53
107



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒

DISTRIBUTION BOX, LEVEL ☐

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 107 FT. DEPTH BELOW INLET #1 7 1/2 FT. - 270

ABSORBENT AREA 455 + SQ. FT.

REMARKS 2/13/80 Location OK. OK to cover all work.

leaves end of septic tank open for house connection.
Call when ready. Jd

2/25/81 Charles Halcomb discussed septic system of house site to me. Site plan
is slightly changed; house size is smaller. Cleanout in line from house
to septic tank required if length is over 50 ft. He will call for final before backfill.

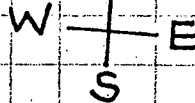
9/21/81 CHECKED - HOUSE CONNECTION COMPLETE C.R.B.

DATE SYSTEM APPROVED 9/21/81 INSPECTOR C. R. B. & J. S. H.

N86°52'E 73.84'

89'6"

83'3"



WATER WELL

0" ELEVATION

WATER WELL ELEVATION = 0" IS USED AS REFERENCE, ALL OTHER ELEVATIONS SHOWN AS MINUS VALUES (IN INCHES) RELATIVE TO WELL

100'

48'0"

73'0"

72'

40'

47'1"

145'

28'

HOUSE

52'0"

EXIST. ELEV. -47"
INV. ELEV. -71"

44'

INV. ELEV. -88"
EXIST. ELEV. -64"
INV. ELEV. -91"
(SEPTIC TANK)

INV. ELEV. -101"

13'x14'x9'
10' Dia.
(DRY WELL)

INV. ELEV. -105"
EXIST. ELEV. -71"

13'x13'x9'
10' Dia.
(DRY WELL)

30' PRIVATE ROAD

EXIST. ELEV. -94"
INV. ELEV. -118"

3/16/81
System installed
must see if connection
T.C. will be no basement
first floor, no
problem with sloping
First Floor F.S.

200'

300'

PROPERTY:
TAX MAP: 37
PARCEL NO.: 205
MONTGOMERY ROAD

I CERTIFY THE ABOVE
MEASUREMENTS AND ELEVATIONS
ARE ACTUAL AND CORRECT FOR
THIS PROPERTY:

SIGNED: Charles Halcomb

DATED: 1/19/80

Revised 1/24/81 To reflect smaller
House dimensions: going from 30'x54'
To 28'x40' House size

Charles Halcomb 1/24/81

SCALE 1" = 40'

S05°08'E 818.50'

400'

N32°30'W 939.90'

400'

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30302

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

Septic Tank { 1-3 Bedrooms 1000 gallons
4 Bedrooms 1250 gallons

DISTRICT 1

DATE 10-29-79

System
First

2 Dry wells to have 150 sq ft. effective
at sidewalk sidewall area per bedroom below init. level
to be 2' below original grade and maximum depth 9'
Locations of dry wells per original perc tests of 11/9/79 is
184' down line being 939' in length from corner
point of lines 73.84' in length and 939' in length and in
and 80' for other dry well.

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

ARCHIE - LEONA & THOMAS RICE

ADDRESS

5842 MONTGOMERY ROAD

PHONE

796-2386

PROPERTY LOCATION

DRY WELL 1: 35' in 5' effective in 13X14' = 270 sq ft.
DRY WELL 2: 80' in 3 1/2' effective in 13X13' = 182 sq ft.
Called in 11/6/80 per perc tests

SUBDIVISION

LOT NO.

452 Total for 3 Bedrooms

ROAD AND DESCRIPTION

OFF MONTGOMERY RD

SIZE OF LOT

5.98 AC. +

TYPE BLDG.

3 bedrooms
RESIDENCE

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

HOWARD COUNTY HEALTH DEPT

APPROVED BY

C.B.S., D.W.M. (F.F. WIND) FOR

Shallow Dry Wells

DATE

1/9/80

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

1/80 Reaccomplished specs for dry wells only

per Mr. Monaghan.
C.B.S.

BLDG. PERMIT SIGNED

AND RETURNED

Serial # 45858

THIS IS NOT A PERMIT

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION

A 30302

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

Septic Tank { 1-3 Bedrooms 1000 gallons
4 Bedrooms 1250 gallons

Dry wells to have 150 sq. ft.

DISTRICT 1 ST

effective absorbent sidewall area DATE 10-29-79

per bedroom below inlet. Inlet to be 2' below original grade and maximum depth 9'. Location per original

perc tests of 11/9/79. 184' down line

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

ARCHIE - LEONA & THOMAS RICE

ADDRESS

5842 MONTGOMERY Rd

PHONE

796 2386

PROPERTY LOCATION:

Ell., Md. 21227

Send copy of future house siting graph paper back to Mr. Rice

SUBDIVISION

LOT NO.

ROAD AND DESCRIPTION

5800 BLOCK OF MONTGOMERY Rd, Group MAIL BOXES

5842, 5844, 5846 BACK LANE APP. 1.0 mi

SIZE OF LOT

5.9801 ACRES

TYPE BLDG.

RESIDENCE

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

Archie S Rice

APPROVED BY

C. B. Streaker Held 11/8/80 FOR

REJECTED BY

11/8/80 - D.W.M. FOR

HOLD PENDING FURTHER TESTS

REASONS FOR REJECTION OR HOLDING

Maximum System depth 1'-4' trench, draw 1' into trench trench 3' wide. [Between per trench and area notes (1,2) + (9,10)]

Have copy to Mr. Rice of notes

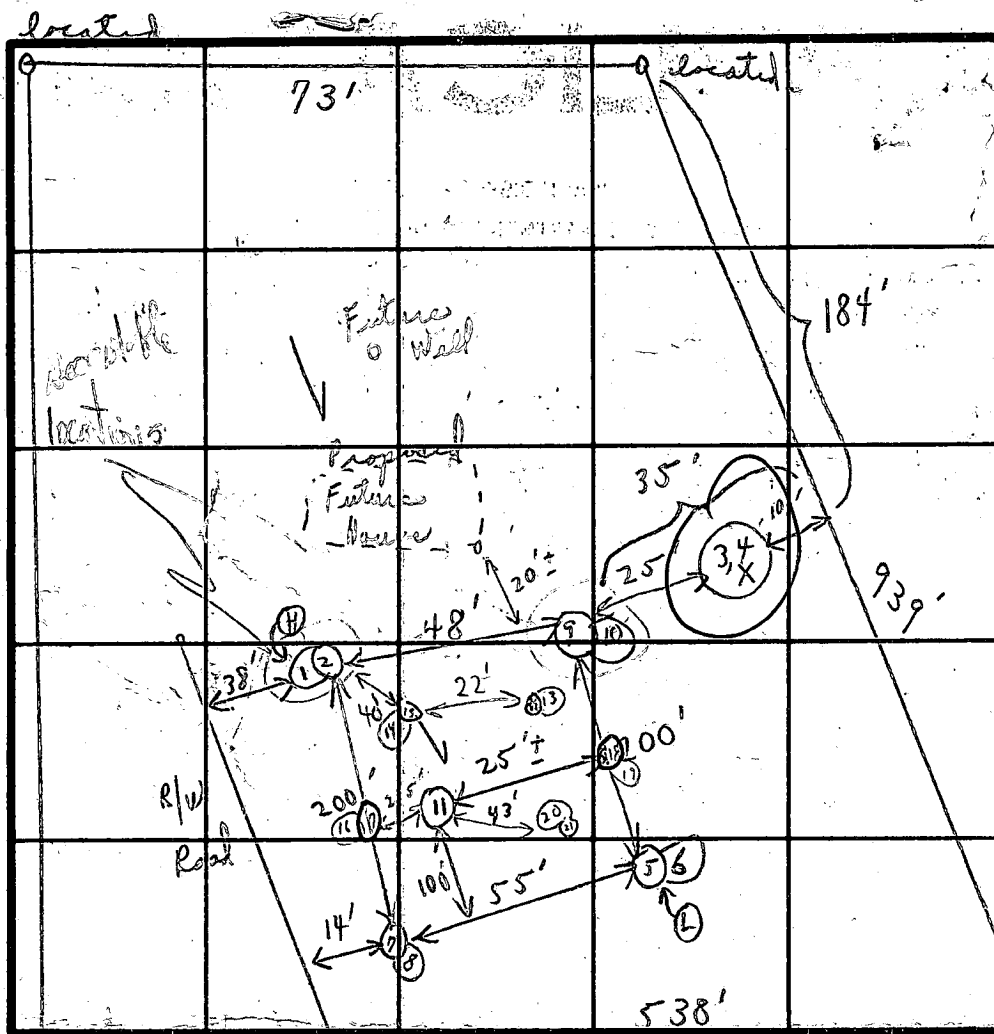
11/13/79 A.M. - discussed with Mr. C. B. Streaker - he recommends

THIS IS NOT A PERMIT

more holes in areas circled in ink. D.W.M. & C.B. called Mr. Rice

SEE
EACH
HOLE

Below
clay



Field sheet
Treats
not per
stakes

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/9/79	1	1'	9:45	9:53	9:53	10:09	16 min
	②	9 1/2'	9:42	←	→	9:43	30 sec -1.0 sec
	X ③ X	2'	10:23	10: X	10:5: 3 1/8" @ max		X X
	X 4 X	'	: Sand	dry	:	:	
	5	2 1/2'	10:48	10:50	10:50	10:54	4 min
	⑥	8 1/2'		Sand			
	7	2'	11:02	11:04	11:04	11:06	2 min
	⑧	8'	Caving	in	sands		
2-4'-5'	9	2'	11:09	11:10	11:10	11:11	1 min
1-2-3-4	10	8 1/2'	Sand	caving	in		
	11	11 holes	drift				

Day 9: 43
5/1/19
1/1/19

11:13
And day

REMARKS

TYPE OF SOIL:

TESTED BY

ALSO PRESENT

12/10/79 TESTED BY C. B. S.
SEE ATTACHED SHEETS, C. B. S.

12/10/79

SOIL PROFILE	Hole #	Depth	1 st " 1 st Stop	1 st " 1 st Stop	2 nd " 2 nd Stop	Total
1'-5' SAND 5'-7' CLAY	12	{ 2	10:20	10:20	10:21	1 min { 10:22 DRY }
WHITE CLAY	(13)	{ 7	10:19 (LITTLE TO NO PERC)	10:19	10:10:49	X
1'-6' SAND 6'-8' CLAY	14	{ 3	10:26	10:27	10:28	1 min.
END CLAY 6' YEAR 13	15	{ 8	10:27	10:28	10:30	2 min. (10:34 DRY)
1'-7' SANDY GRAVEL	16	{ 2	10:52	10:54	10:56	2 min.
TO HARD CLAY	(17)	{ 7	10:50	10:50 (1/4" LITTLE PERC)	10:50	11:20 X min.
1'-5' LOAM 5' CLAY	18	{ 2 1/2	11:01	11:02	11:05	3 min.
5'-7' CLAY	(19)	{ 7	11:01	11:01 (LITTLE TO NO PERC)	11:01	11:31 XX
5'-1' SANDY	20	{ 2	11:16	11:22	11:34	12 min
1.5'-7' SANDY + CLAYISH	21A	{ 7	11:13	11:16	11:24	8 min
MOSTLY CLAY	(21B) (Under 20)	7 ft	11:34	11:36	11:43	9 min

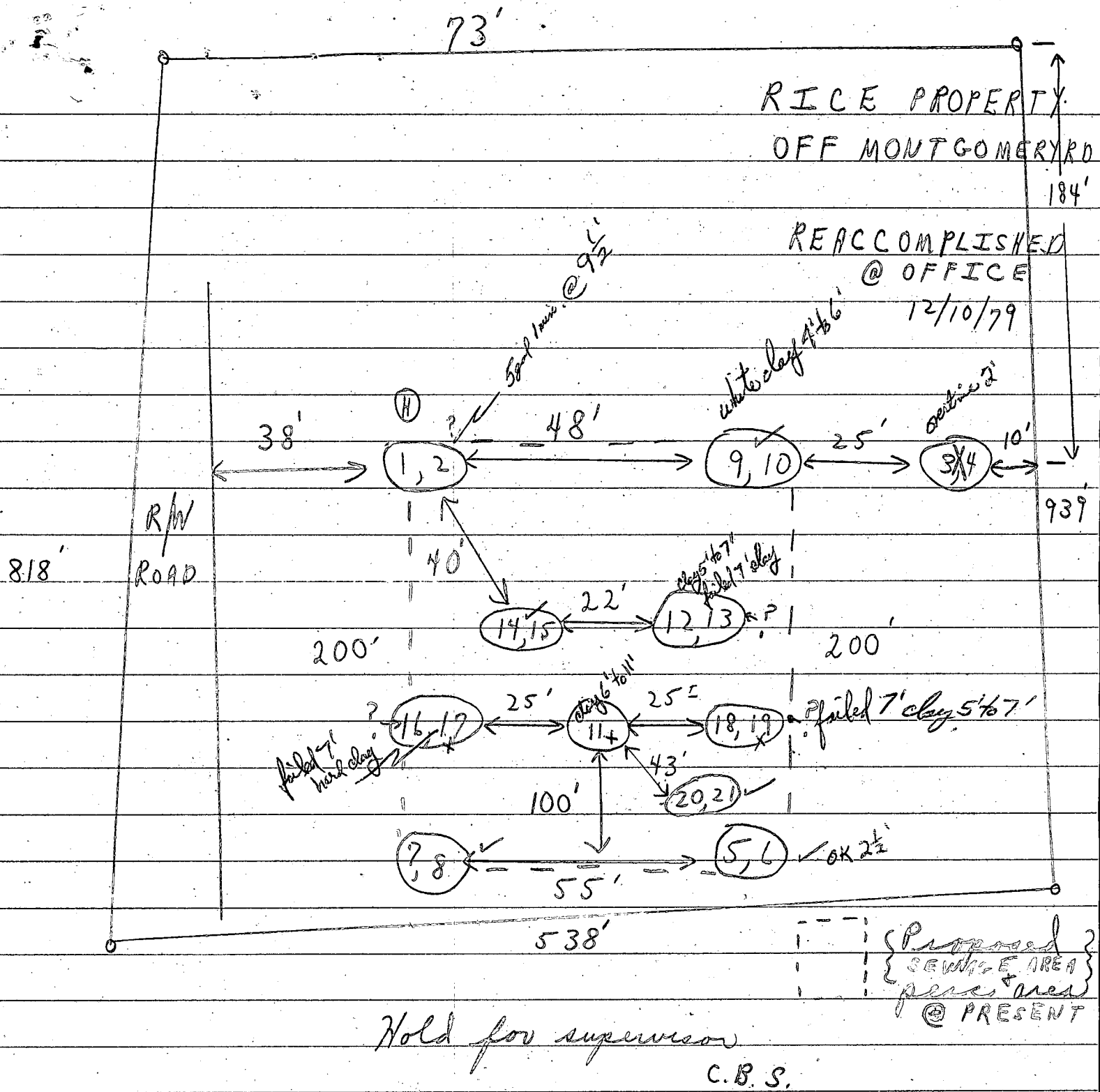
12/10/79 GENERAL SOIL PROFILE -
 [(BELOW TOP SOIL? CLAY) - SANDY LOAM)
 TO CLAY IN SOME HOLES]

12/10/79 TESTS BY C.B.S
 12/10/79 SAME MEN AS
 ON 11/9/79 + DIGGER

[Hold for supervisors]
 (COPY GIVEN MR. RICE)

1/8/80 c site Mr. George Lutz, Mr. Rice, Mr. Monaghan
Mr. Frommelt, future owner

pay hole near water well ^{1/2} w of water line
Soil Profile of Well Driller
12'-13' down sandy to 26'



DRAWING NOT TO SCALE

C.B.S.

Depth

(1) 1st 16 min. (clay - 4½ to 8')
(2) 9½ O.T. 2 min 6½ inches (5 gal. 1 min.)

(3) 2 1 O.T. 30 min. ½"
4 4-8 carry sand

(5) 2½ 4 min
(6) 8½ carry sand

Nov. 9 =

(7) 2 2 min
(8) 2-8 carry sand

(9) 2 1 min 5 gal in 3 min. } white clay 4' to 6'
(10) 8½ 6½ to 8½ carry sand

(11) 1' to 6' sand gravel 6' to 11½ white clay

12 2 1 min 2 inches (2 min dry)

(13) 7 30 min little to No perc. O.T.

(14) 3 1 min.

(15) 8 2 min. 7 min dry

16 2 2 min.

(17) 7 30 min O.T. ¼"

18 2½ 3 min.

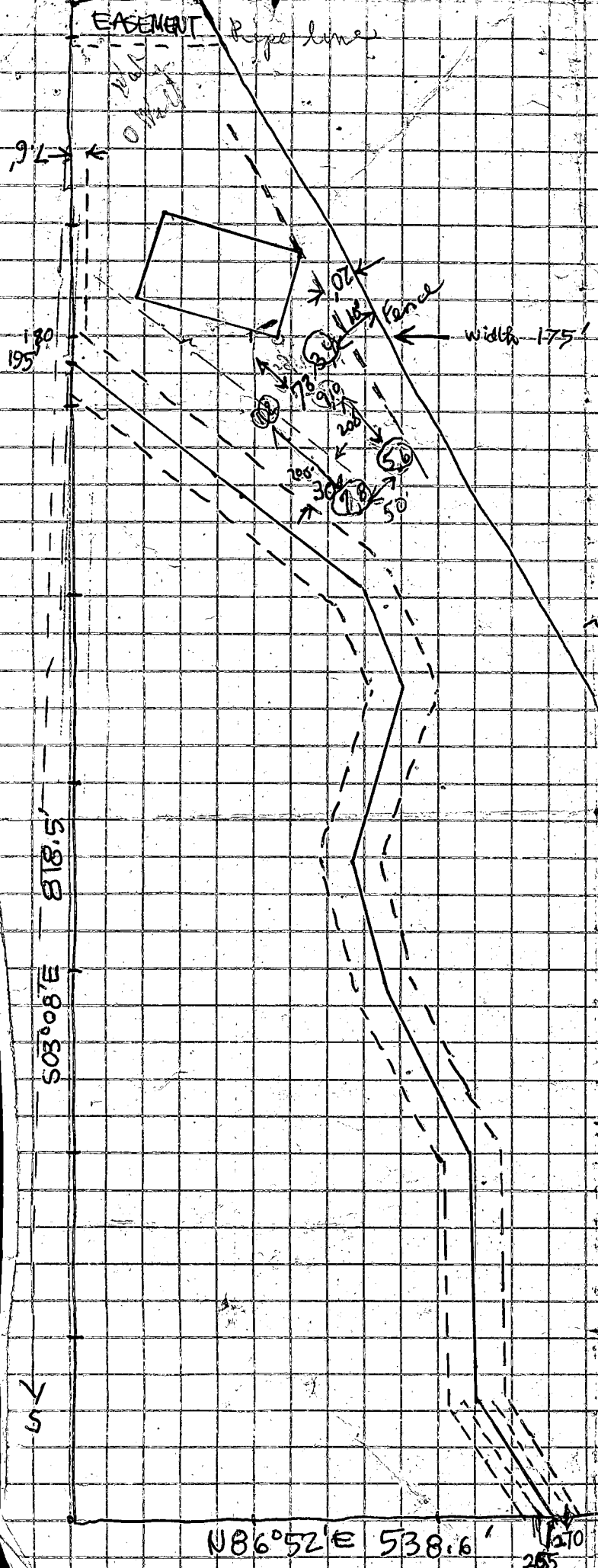
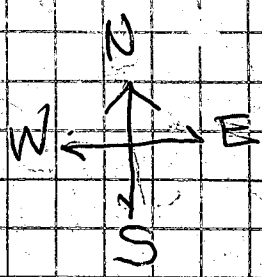
(19) 7 30 min O.T. little to No perc.

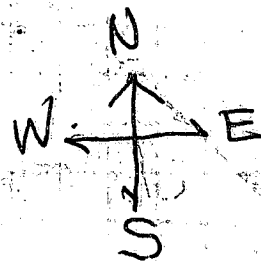
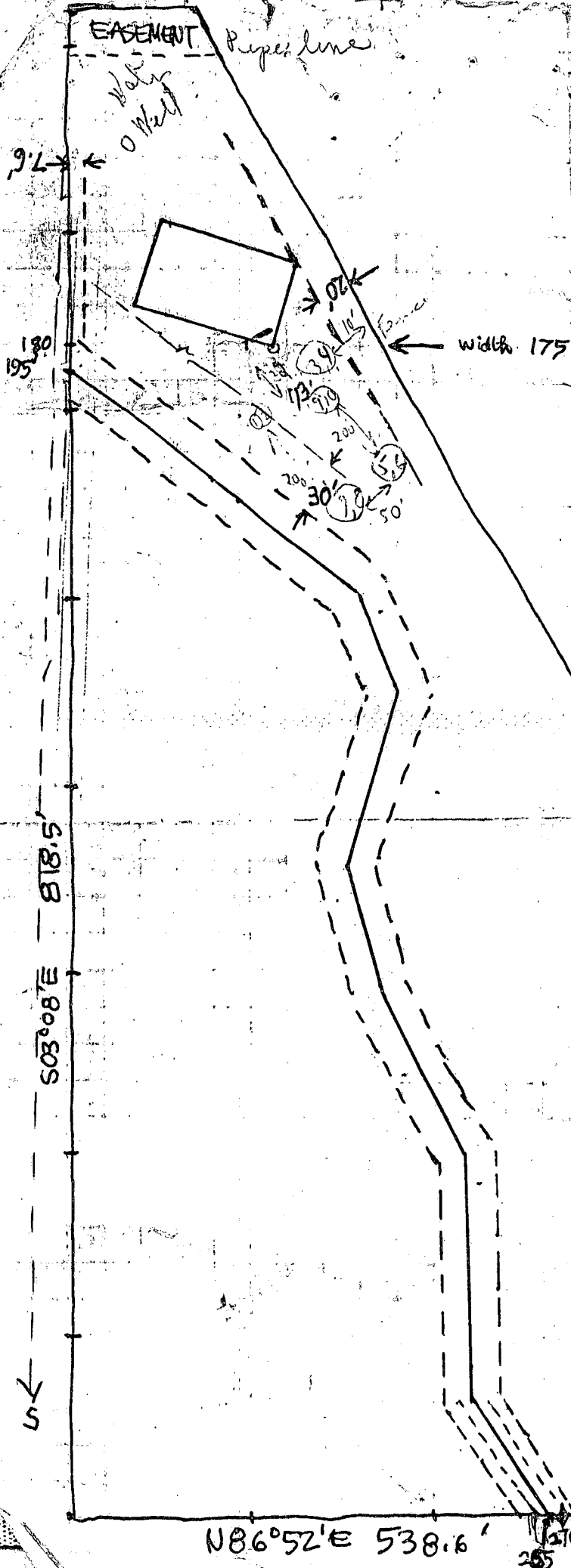
5' to 7' clay

20 2' 12 min.

21 7' 8 min. 213 7' 9 min

(Rice Property)





(Rice Property)

11/13/79
 Hold for more
 field work before
 turning back
 (Sent copy back
 to Mr. Rice
 11/13/79
 5842 Montgomery Rd
 Elkhridge, Md.
 21227)

1/9/80 (1) Sent copy back
 with
 (2) copy of spec
 C.B.S.

CENTERLINE DIMENSIONS OF EXISTING
30 FT. WIDE ROAD

1. S 01° 57' E 162.00'
2. S 17° 59' E 222.00'
3. S 06° 41' W 200.00'
4. S 03° 17' W 100.00'
5. S 04° 19' W 200.00'
6. S 12° 41' E 300.00'
7. S 39° 22' E 400.00'
8. S 61° 53' E 100.00'
9. S 51° 31' E 100.00'
10. S 34° 27' E 100.00'
11. S 54° 11' E 100.00'
12. S 57° 11' E 100.00'
13. S 27° 36' E 60.00'
14. S 13° 13' W 100.00'
15. S 19° 22' E 70.00'
16. S 30° 52' E 100.00'
17. S 06° 40' E 138.90'
18. S 34° 00' E 78.00'
19. S 07° 00' W 100.00'
20. S 04° 44' E 232.00'



B 1 3728 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-13-3532 FILL IN THIS FORM COMPLETELY
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DATE RECEIVED (WRA USE ONLY)	OWNER <u>Walter P. Rice</u> (RICE-RICE-PROPERTY) COL 15 LAST NAME FIRST NAME COL 34 STREET OR RFD <u>190 Virginia Ave. P. 21</u> COL 36 COL 55 POST OFFICE <u>Johns River 210</u> COL 57 COL 76
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B 1 1 2 3 (SEQ. NO.) 6 CONTINUED	DRILLER INFORMATION DATE <u>11/18/79</u> LICENSE NUMBER <u>40</u> COL 77 COL 80 FIRST NAME <u>D. F. Rice</u> DRILLER LAST NAME SIGNATURE <u>D. F. Rice</u>
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B 2 1 2 3 (SEQ. NO.) 6 CONTINUED	WELL INFORMATION MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>5</u> COL 8 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>500</u> COL 14 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ F FARMING, AGRICULTURE, IRRIGATION ☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. ☐ M MUNICIPAL WATER SUPPLY ☐ P PRIVATE WATER COMPANY ☐ T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL
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B 3 1 2 3 (SEQ. NO.) 6 CONTINUED	APPROXIMATE DEPTH OF WELL <u>150</u> FEET COL 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> (NEAREST INCH) COL 31 35
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B 4 1 2 3 (SEQ. NO.) 6 CONTINUED	METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) ☐ JETTED ☐ DRIVEN ☐ 80-87 AIR-ROTARY ☐ AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY) ☐ CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT ☐ OTHER (DESCRIBE) _____
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B 5 1 2 3 (SEQ. NO.) 6 CONTINUED	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 DEEPEN AN EXISTING WELL. PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ COL 41 52
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B 6 1 2 3 (SEQ. NO.) 6 CONTINUED	NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER <u>64</u> ENGINEER REVIEW DISTRICT NO. <u>63</u> COL 64 65 FORCE ☐ WRITE INITIALS IN BOX ☐ CONDITIONS ☐ <u>W</u> COL 67 68 70 71 72 73 74 75 76 77 78 79
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B 7 1 2 3 (SEQ. NO.) 6 CONTINUED	HEALTH DEPARTMENT APPROVAL STATE HEALTH (CIRCLE BOX) <u>S</u> COUNTY NAME <u>Howard</u> COUNTY NO. <u>W30302</u> MO. DAY YR. <u>11</u> <u>16</u> <u>79</u> DATE <u>11/16/79</u> COL 43 48 APPROVED BY <u>Donald W. Monaghan, Sanitarian</u>
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B 8 1 2 3 (SEQ. NO.) 6 CONTINUED	SPECIAL CONDITIONS 8-63 (WRA USE ONLY) COL 1 63
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B 3 1 2 3 (SEQ. NO.) 6 CONTINUED	LOCATION OF WELL COUNTY <u>Howard</u> (DO NOT ABBREVIATE COUNTY NAME) COL 21 SUBDIVISION <u>29</u> COL 42 SECTION <u>44</u> LOT <u>48</u> COL 50 NEAREST TOWN <u>Elkridge</u> COL 52 MILES FROM TOWN (ENTER 0 IF IN TOWN) <u>3</u> COL 71 COL 76 77 78
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B 4 1 2 3 (SEQ. NO.) 6 CONTINUED	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) N NORTH E EAST NE NORTHEAST SE SOUTHEAST S SOUTH W WEST NW NORTHWEST SW SOUTHWEST NEAR WHAT <u>Mullin's Lane</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N 32 S 32 E 32 W 32 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>50</u> COL 34 37 38 39
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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.

B 9 1 2 3 (SEQ. NO.) 6 CONTINUED	HO-80-T-1 BOX NUMBER <u>500</u> NORTH COORDINATE <u>50</u> <u>51</u> <u>52</u> <u>53</u> <u>54</u> <u>55</u> EAST COORDINATE <u>57</u> <u>58</u> <u>59</u> <u>60</u> <u>61</u> <u>62</u> <u>63</u> ELEVATION AT WELL HEAD (FEET) <u>65</u> <u>66</u> <u>67</u> <u>68</u> COL 65 66 67 68
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C 1	2617	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, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITH
IN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBERDATE RECEIVED
(WRA USE ONLY)

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

H0-73-3532

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

40

OWNER HALCOMA CHARLES

LAST NAME

STREET OR RFD 190 VIRGINIA LANE

POST OFFICE

GLEN BURNIE, MD.

WELL DESCRIPTION

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	
Top Soil	0	3	
Shale	3	15	
SAND	15	85	
SANDSTONE	85	94	
MICA	94	180	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

YES ☒ NO ☐

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT ☒ BENTONITE CLAY ☐NO. OF BAGS 57 NO. OF POUNDS 5700GALLONS OF WATER 285

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 40 FT.
(ENTER 0 IF FROM SURFACE)

CASING RECORD

CIRCLING 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	<u>6</u>	<u>92</u>
	60 61 63 64 66 70	

EACH CAS- ING	OTHER CASING (IF USED)	
	DIAMETER (INCH)	DEPTH (FEET) FROM TO
	☐	☐
	☐	☐

SCREEN TYPE OR OPEN HOLE	SCREEN RECORD		
	☒ ST	☐ BR	☐ HO
	STEEL	BRASS OR BRONZE	OPEN HOLE
	☐ PL	☐ OT	
	PLASTIC	OTHER	

C 2	1 2 3 (SEQ. NO.)	6
EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
	<u>40</u>	<u>180</u>
	8 9 11 15 17 21	
	23 24 26 30 32 36	
	38 39 41 45 47 51	

DIAMETER OF SCREEN 56 TO 60 (NEAREST INCH)GRAVEL PACK 12 TO 50IF WELL DRILLED WAS A
FLOWING WELL CIRCLE BOX ☐

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
(E.R.O.S.)	
70 ☐	72 ☐
TELESCOPE CASING	LOG INDICATOR
74 75 76 OTHER DATA AVAILABLE	

C 3	1 2 3 (SEQ. NO.)	6
PUMPING TEST		

HOURS PUMPED (TO NEAREST HOUR) 4PUMPING RATE
(GALLONS PER MINUTE TO NEAREST GALLON) 15METHOD USED TO
MEASURE PUMPING RATE BUCKET

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 17 (NEAREST FOOT)WHEN PUMPING 180 (NEAREST FOOT)TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)
(FOR PUMPING TEST)

☒ AIR	☐ PISTON	☐ TURBINE
☐ CENTRIFUGAL	☐ ROTARY	☐ OTHER (DESCRIBE BELOW)
☐ JET	☐ SUBMERSIBLE	

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 35PUMP HORSE POWER 37 41PUMP COLUMN LENGTH
(NEAREST FOOT) 43 47CASING HEIGHT (CIRCLE APPROPRIATE BOX
AND ENTER CASING HEIGHT)

☒ ABOVE	LAND SURFACE	NEAREST FOOT
☐ BELOW		
<u>49</u>	<u>2</u>	<u>51</u>

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).

95' → Well

↑ 150'

lot line

CIRCLE APPROPRIATE BOXES

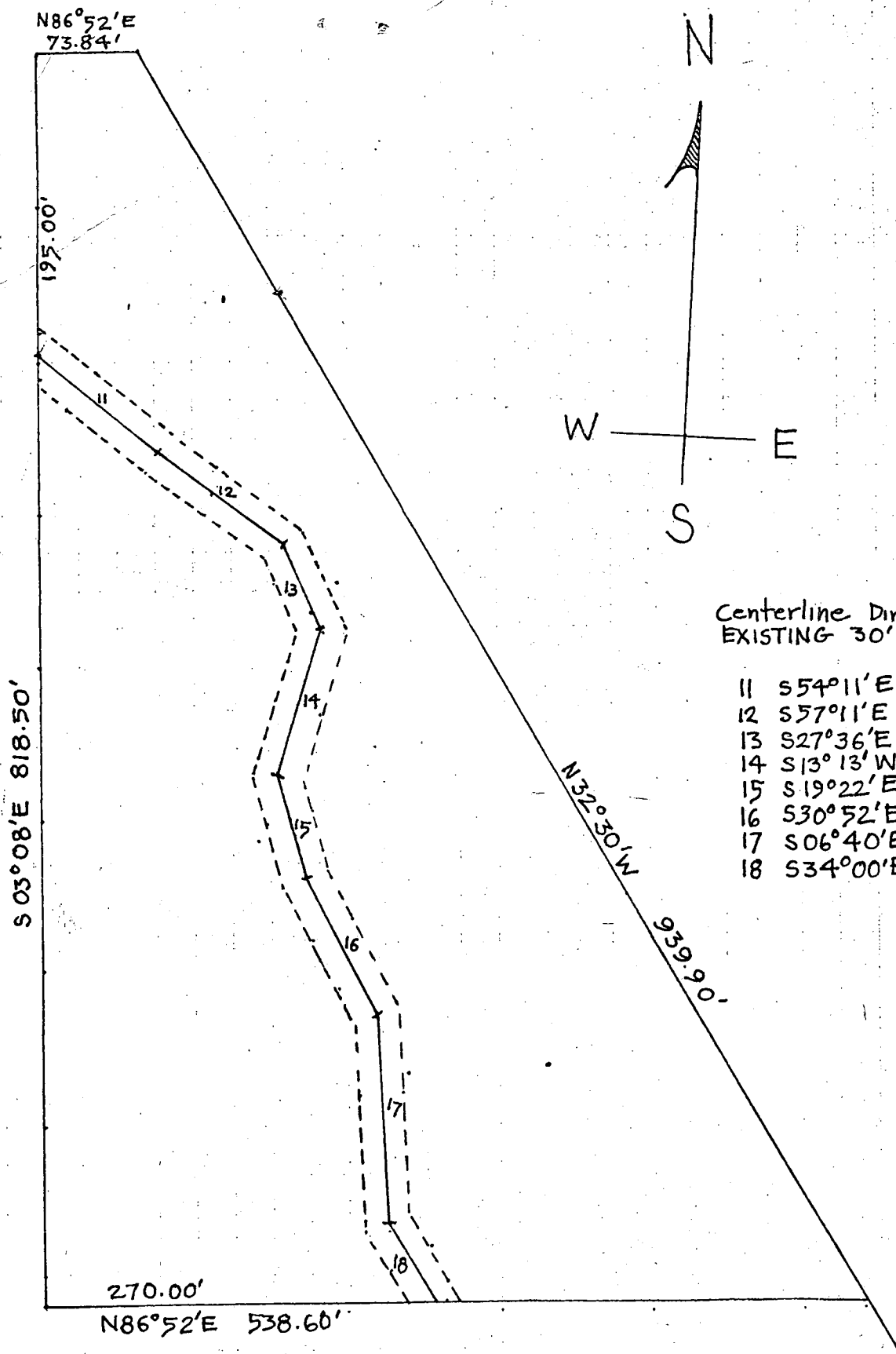
- ☐ A WELL WAS ABANDONED AND SEALED WHEN THIS
WELL WAS COMPLETED.
- ☐ E ELECTRIC LOG OBTAINED
- ☐ P TEST WELL CONVERTED TO PRODUCTION WELL

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

(PLEASE PRINT) GEORGE F. FASTEROMSIGNATURE George F. FASTEROM

HEALTH



Lot which is remainder of liber M.W.B. No. 256 folio 497 (May 24, 1954) Property, with the property recorded in liber 336 Pgs 21-22 (July 15, 1959) excepted.

C.T. Halcomb 12/19/79

SCALE 1" = 100'