

04-340086

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 40574

A 38833

DISTRICT 4th

DATE 12/3/87

DATE SYSTEM APPROVED 12-17-87

INSPECTOR S. Abel

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Harbert Moore

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 831-5105

SUBDIVISION Weller Property ROAD 1383 Woodbine Road LOT 9

PROPERTY OWNER Roland Boetker

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

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 170 feet from the front (567.17') lot line and 75 feet from the right (1009.42') lot line as seen when facing the lot from Route 94. Run trenches on contour toward Route 94. MAINTAIN 100 FEET FROM ALL WELLS.

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

PLANS APPROVED BY S. Abel DATE 3/26/87

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(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.

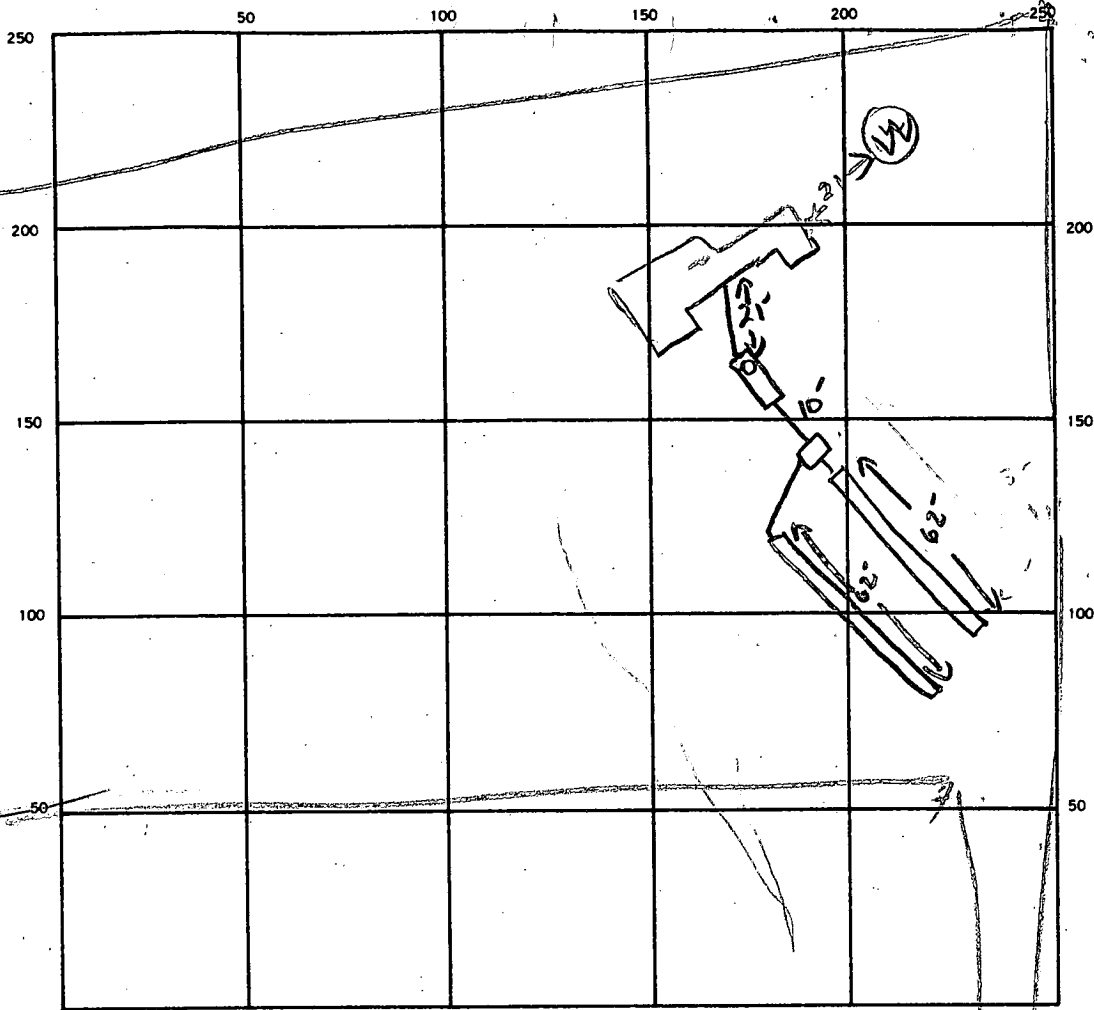
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 58833



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

RL 94

SEPTIC TANK. LEVEL OK 1000 ✓

CLEANOUTS ✓ST

DISTRIBUTION BOX. LEVEL ✓

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

EFFECTIVE GRAVEL DEPTH 5 6 FT. TOTAL LENGTH 62 62 FT. RLF 124

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 310 + 372 SQ. FT. TAA 682

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

ABSORBENT AREA 682 SQ. FT.

REMARKS 12/15/87 - LOCATION OK PER PLANS

DATE SYSTEM APPROVED 12-17-87

INSPECTOR S. Abel

APPLICATION

3-11-87
12 Noon

PERCOLATION TESTING

A 38833
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

app - 3/4/87
per C.W.
Sched. ASAP

DISTRICT _____

DATE 3/4/87

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 John R. and Alma K. Coomb Roland Boetker

ADDRESS Rt 94, Lisbon, Md 21785 PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Weller Property LOT NO. 49

ROAD AND DESCRIPTION Rt 94, 1/4 mile S of 144 on east side of road
(wish to relocate septic area) 1383 Woodbine Rd.

TAX MAP 7 PARCEL # 486

SIZE OF LOT 3.4 Acres TYPE BLDG. Residence
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

APPROVED BY Sidney Abel FOR Rep trenches DATE 7/29/87
(SIGNATURE OF APPLICANT)

REJECTED BY _____ FOR BLDG. PERMIT SIGNED AND RETURNED 12/3/87 DATE _____
Sidney Abel 15389
propane tank

REASONS FOR REJECTION OR HOLDING 3-11-87 Reque. Satisfactory, owner to supply
new plat w/ changes in Perc area for approval. No letter
of approval required. S. Abel
BDG. PERMIT SIGNED AND RETURNED 7/29/87
BP 13647

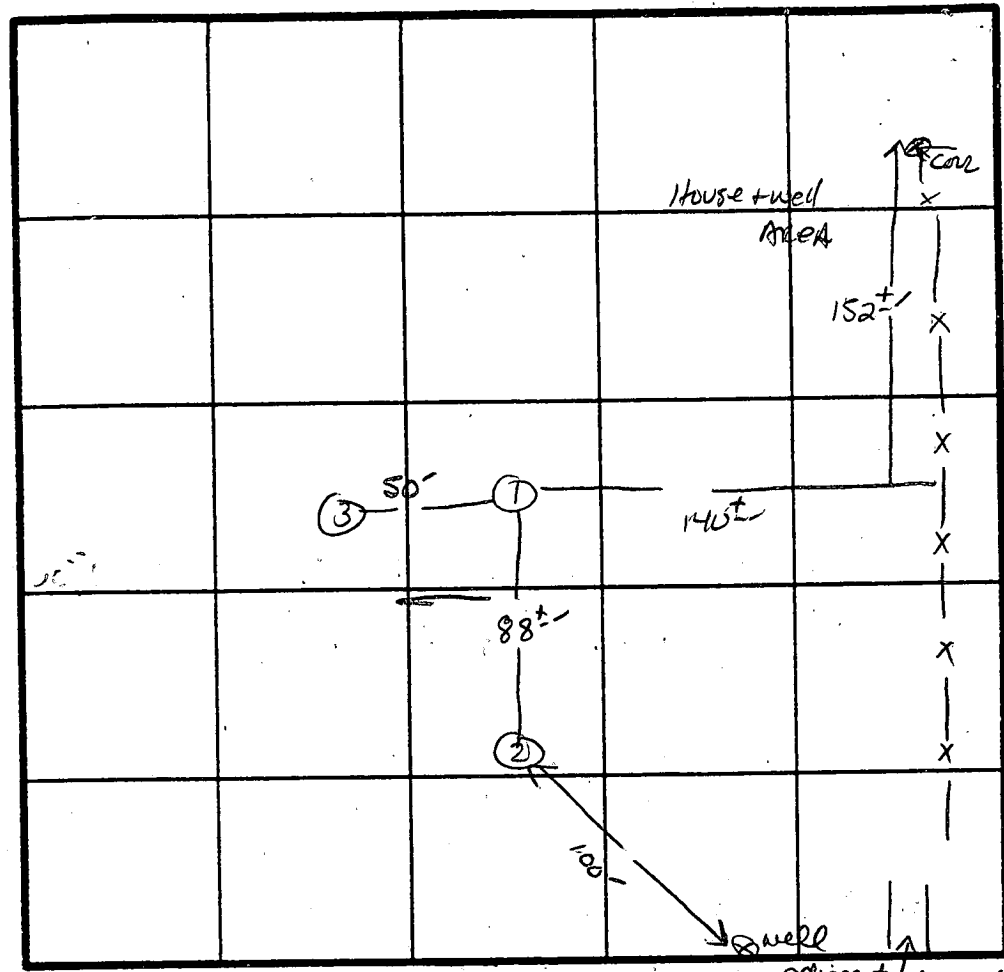
THIS IS NOT A PERMIT

① ②
SOIL PROFILE

6" AD
Yellow Br
Silty Loam
9% CLAY
15-20%
FRASS
Silty

4" Yellow Br
Silty Sand
Loam
15-20%
FRASS

12" ▽



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. adjacent / Access lcl. prop.
R-94

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/11/87	1 S	4.5'	12:16	12:26	12:26	12:48	22 min
	1 V	12" H ₂ O	UNIFORM soil below 4"				
	2 S	5'	12:24	12:28	12:28	12:38	10 min
	2 V	12" H ₂ O	UNIFORM soil below 4"				
	3 V	H ₂ O 9ft					

REMARKS Shallow Syst. only for Repairs.

TYPE OF SOIL ME Aily

TESTED BY S. Alief ALSO PRESENT _____

EH-12-1079

Paul

APPLICATION

A 28482

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

FINAL LOT 4

DISTRICT 4th

DATE 7/13/78

lot 4

~~Lot 2~~
per U.P. 79-24

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

LOT 4

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Norman Weller

ADDRESS Route 94, Lisbon, Md. 21765 PHONE Boender - 465-7777

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Lot 9 #6 New on 7/78 plot

ROAD AND DESCRIPTION Route 94 & South Street

SIZE OF LOT 4.4 acres m/1 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/ Jack Boender

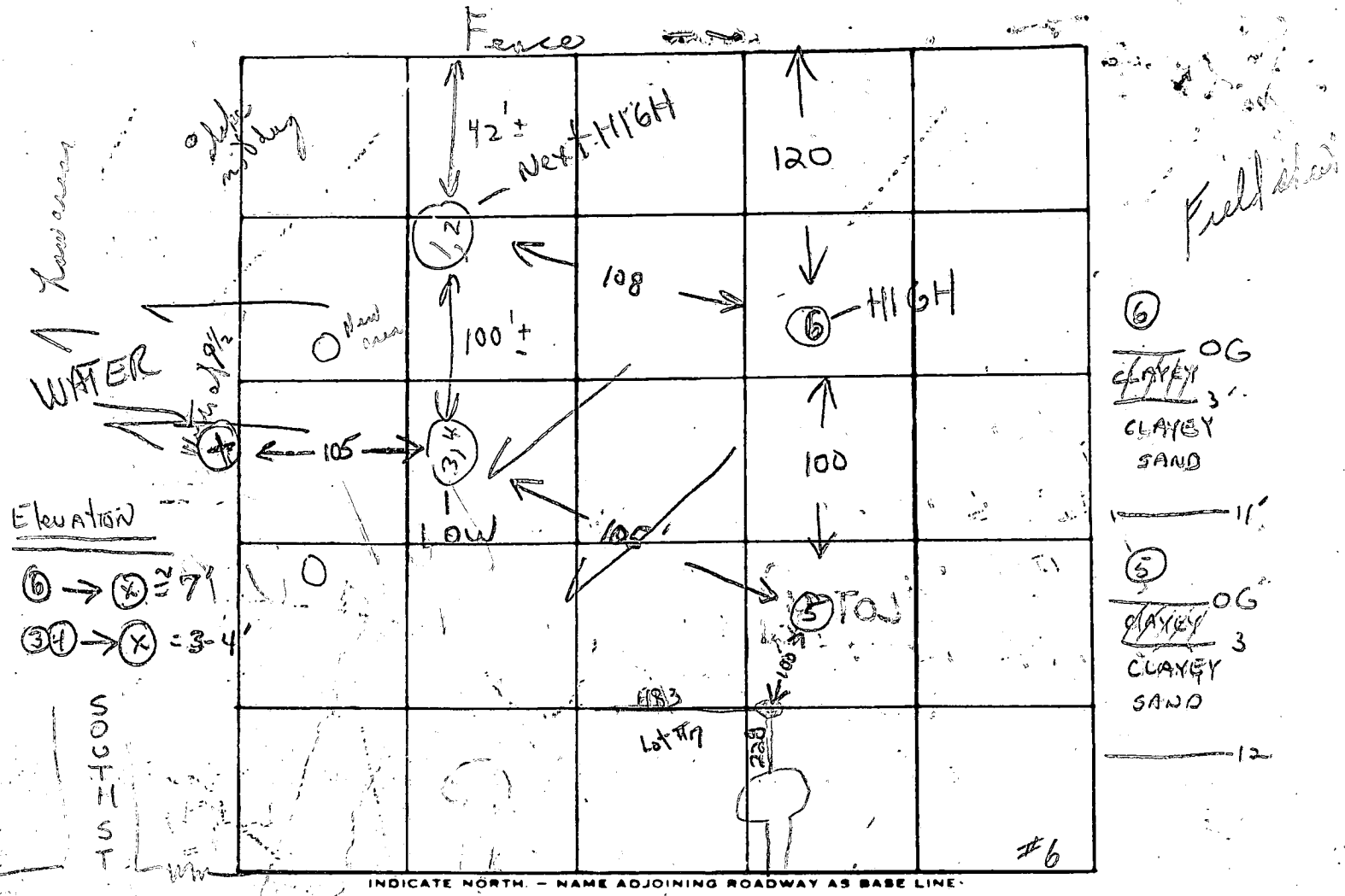
APPROVED BY J. Keller FOR AWY DATE 4/18/79
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING HOLD for Elevations 23 MAY 79 (GCP)

THIS IS NOT A PERMIT



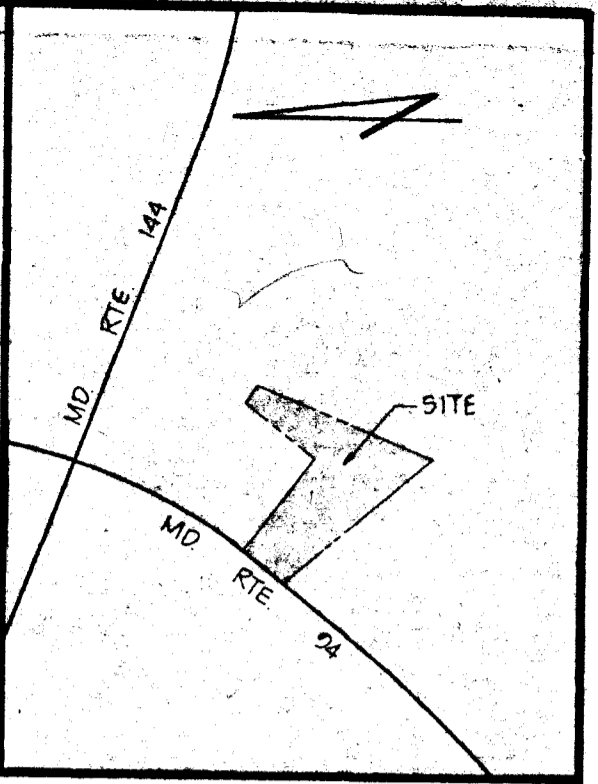
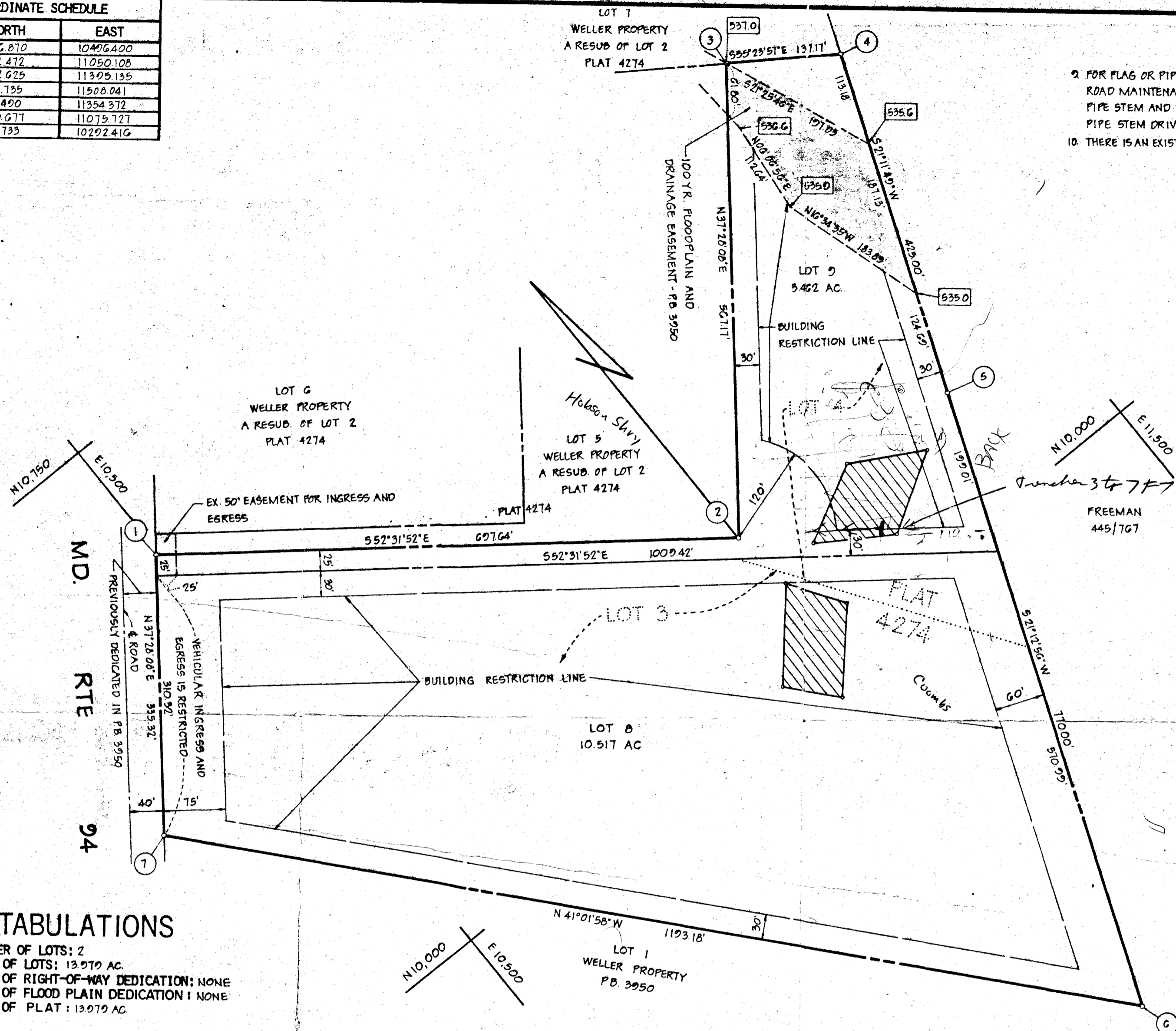
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/30/78	1	3'	11:30	11:32	11:32	11:34	2 min
	② 2	10 1/2'	11:31	11:33	11:33	11:42	9 min
	3	13'	11:39	11:42	11:42	11:46	4 min
	④ 4	11'	11:39	11:49	11:49	11:58	11 min
8/31/78	55	3'	11:31	11:35	11:35	11:43	8
	⑤ 50	12 1/2'	11:34	11:41	11:44	12:11	27
	65	4'	11:40	12:00	12:00	12:15	15
	60	11'	11:42	11:47	11:47	12:00	13

REMARKS (Tests in open field 2 holes on 8/30/78)

TYPE OF SOIL 1 hole of original 4 deep water at 10'

TESTED BY C. B. [Signature] ⑥ ALSO PRESENT: Mr. [Name] of [School]

COORDINATE SCHEDULE		
NO.	NORTH	EAST
1	10596.870	10476.400
2	10172.472	11050.108
3	10622.625	11305.135
4	10544.735	11528.041
5	10148.420	11354.372
6	0430.677	11075.727
7	10330.733	10292.416



2. FOR FLAG OR PIPE STEM LOTS, REFUSE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPE STEM AND THE ROAD RIGHT OF WAY AND NOT ONTO THE FLAG OR PIPE STEM DRIVEWAY.
10. THERE IS AN EXISTING DWELLING ON LOT 8.

GENERAL NOTES

- TAX MAP: 7, PART OF PARCEL 286
- DEED REFERENCE: 1086/544 AND 1055/445.
- COORDINATES SHOWN HEREON ARE BASED ON ASSUMED DATUM
- SUBJECT PROPERTY ZONED R, PER 10-3-77 COMPREHENSIVE ZONING PLAN.
- 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.
- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. 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 AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. 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 (o) HAVE BEEN FIELD LOCATED.
- THE PURPOSE OF THIS PLAT IS TO REVISE THE COMMON LOT LINE BETWEEN LOTS 8 AND 9 AND TO REVISE THE BUILDING RESTRICTION LINES ON LOT 9.

OWNER / DEVELOPER

THOMAS COOMBS RODNEY FRY R. NORMAN WELLER
 MD. RTE. 04 14016 BAROOT ST. MD. RTE. 04
 WOODBINE, MD. 21794 ROCKVILLE, MD. 20853 LISBON, MD. 21765

AREA TABULATIONS

TOTAL NUMBER OF LOTS: 2
 TOTAL AREA OF LOTS: 13.979 AC.
 TOTAL AREA OF RIGHT-OF-WAY DEDICATION: NONE
 TOTAL AREA OF FLOOD PLAIN DEDICATION: NONE
 TOTAL AREA OF PLAT: 13.979 AC.

OWNERS STATEMENT

WE, THOMAS L. COOMBS, ALMA K. COOMBS, HIS WIFE, RODNEY C. FRY AND DALE M. FRY, HIS WIFE, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES. ALL EASEMENTS OF RIGHT OF WAY AFFECTING THE PROPERTY ARE INCLUDED IN THIS PLAN OF SUBDIVISION. WITNESS OUR HANDS THIS 7TH DAY OF DECEMBER, 1982.

SURVEYORS CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT, THAT IT IS A RESUBDIVISION OF 1) LOTS 3 AND 4 AS SHOWN ON A PLAT OF SUBDIVISION ENTITLED 'LOTS 3, 4, 5, 6 AND 7, WELLER PROPERTY, A RESUBDIVISION OF LOT 2' RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN PLATBOOK 4274, 2) ALL OF THE LANDS THAT WERE GRANTED AND CONVEYED BY R. NORMAN WELLER AND RUTH B. WELLER, HIS WIFE, TO THOMAS L. COOMBS AND ALMA K. COOMBS, HIS WIFE, BY DEED DATED JANUARY 4, 1982 AND RECORDED AMONG THE AFORESAID LAND RECORDS IN LIBER 1086 AT FOLIO 544 AND 3) ALL OF THE LANDS THAT WERE GRANTED AND CONVEYED BY R. NORMAN WELLER AND RUTH B. WELLER, HIS WIFE, TO RODNEY C. FRY AND DALE M. FRY, HIS WIFE, BY DEED DATED MAY 29, 1981 AND RECORDED AMONG THE AFORESAID LAND RECORDS IN LIBER 1055 AT FOLIO 445 AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

William G. Hartel
 WILLIAM G. HARTEL, P.L.S. NO. 0436 12-8-82
 DATE

RECORDED AS PLAT 5353 ON 1-31-83
 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND

**LOTS 8 AND 9
 WELLER PROPERTY
 A RESUBDIVISION OF LOTS 3 AND 4**

TAX MAP: 7 VP-79-24; F-79-123 ZONED: R
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1"=100' DATE: NOVEMBER, 1982

boender associates engineers
 /surveyors
 /planners
 SUITE 102-107 TOWN & COUNTRY PROFESSIONAL BUILDING
 ELLICOTT CITY, MARYLAND 21043
 BALTIMORE 301-465-7777 SALISBURY 301-745-1266

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT.

Joseph Boylston 1-24-83
 HOWARD COUNTY HEALTH OFFICER F.B. DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING.

Thomas A. Harris 1-28-83
 PLANNING DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS. HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.

Gregory F. Nemej 1-26-83
 DIRECTOR DATE

Thomas L. Coombs
 THOMAS L. COOMBS
Alma K. Coombs
 ALMA K. COOMBS
R. Norman Weller
 WITNESS

Rodney C. Fry
 RODNEY C. FRY
Dale M. Fry
 DALE M. FRY
R. Norman Weller
 WITNESS

THE SCHEDULE

EAST
10496400
11050108
11305135
11508041
11354372
11075727
10292416

LOT 7
WELLER PROPERTY
A RESUB OF LOT 2
PLAT 4274

LOT 6
WELLER PROPERTY
A RESUB OF LOT 2
PLAT 4274

LOT 5
WELLER PROPERTY
A RESUB OF LOT 2
PLAT 4274

LOT 9
3.462 AC.

- 9. FOR FLAG OR PIPE ROAD MAINTENANCE
- PIPE STEM AND THE
- PIPE STEM DRIVE
- 10. THERE IS AN EXISTING

3/26/87
plat of adjustment
to per field, OK
to approve as shown
EBW

MD.
PREVIOUSLY
N 37° 15' 00" E 110.500'

EX. 50' EASEMENT FOR INGRESS AND EGRESS FOR LOTS 5, 6, 3 (NEW LOT 8) AND 4 (NEW LOT 9) - PLAT 4274

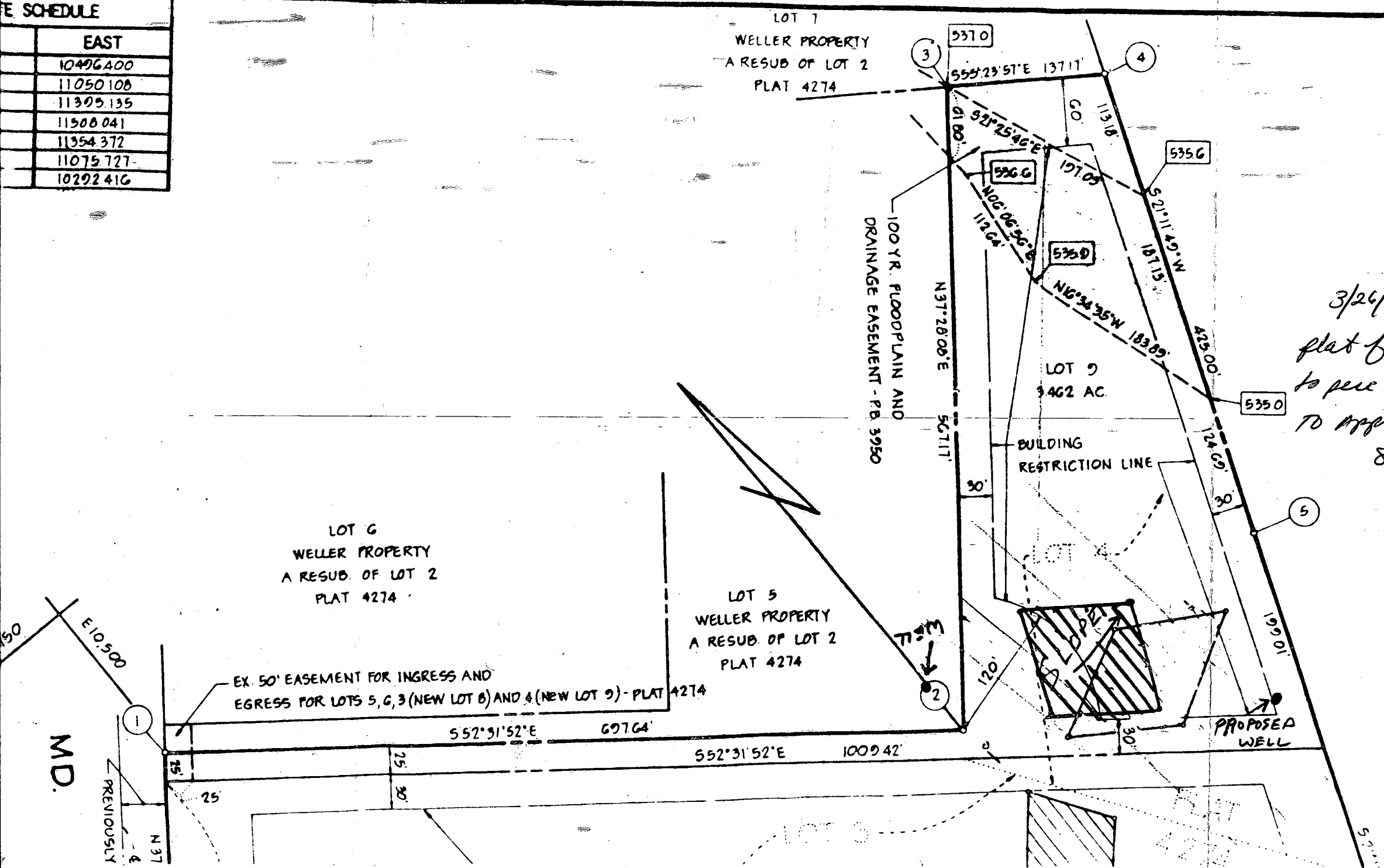
100 YR. FLOODPLAIN AND DRAINAGE EASEMENT - PB 3950

BUILDING RESTRICTION LINE

PROPOSED WELL

N 10.000' E 11.500'

FREEMAN 445/767



KIMBERTHY TURF FARMS, INC.

993 / 378

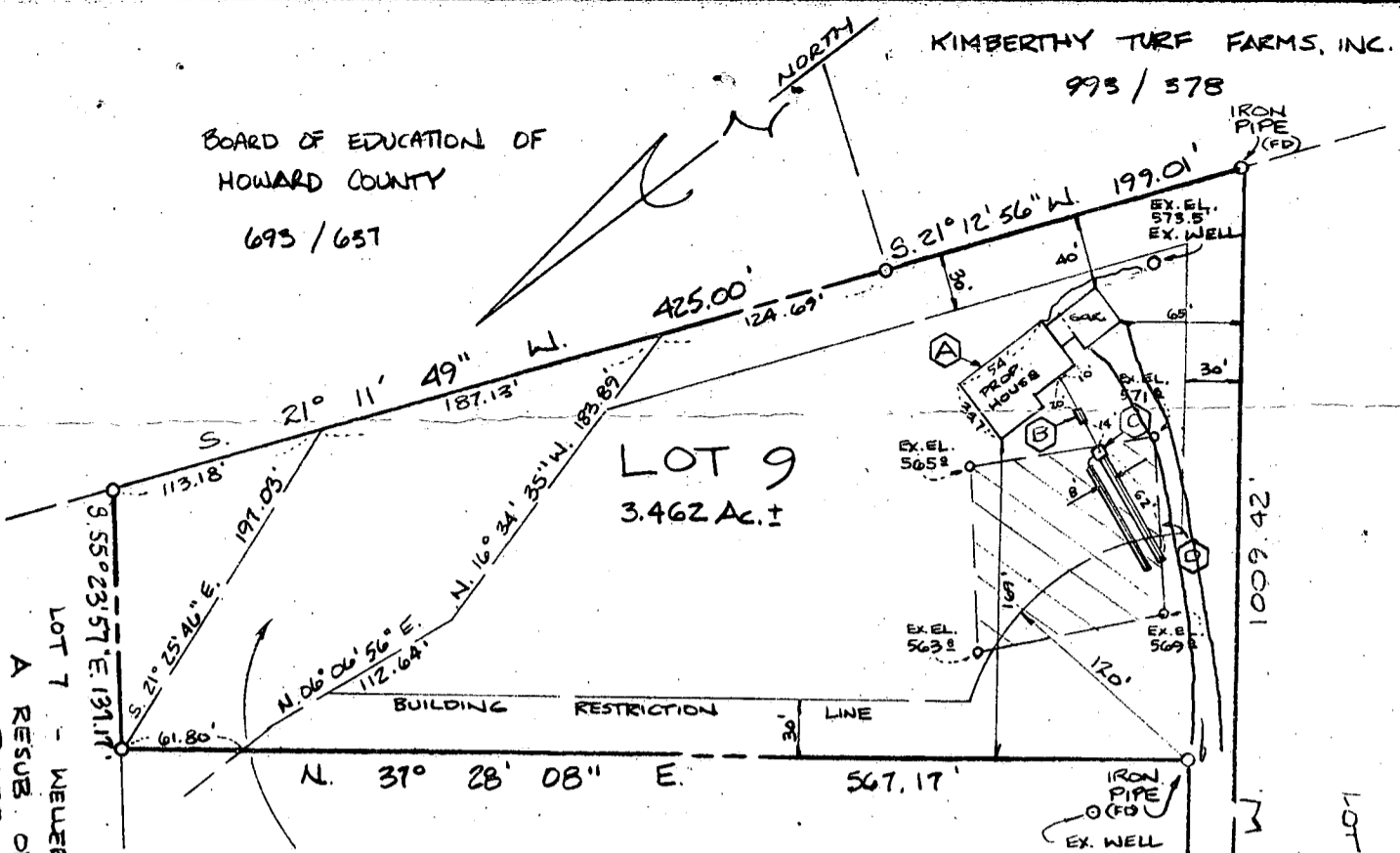
BOARD OF EDUCATION OF HOWARD COUNTY

693 / 657

LOT 7 - WELER PROPERTY
A RESUB. OF LOT 2
PLAT # 4274

LOT 3 - WELER PROPERTY
FB. 3950

LOT 9
3.462 Ac. ±



100 YEAR FLOODPLAIN AND DRAINAGE EASEMENT - FB. 3950

- (A) PROP. HOUSE-
F.F. El. = 575.0 ✓
Bsmt. El. = 566.5 ✓
Inv. Out. = 568.2 ✓
- (B) PROP. SEPTIC TANK-
Ex. El. = 570.1 ✓
Inv. In = 568.0 ✓
Inv. Out = 567.6 ✓

- (C) PROP. DIST. BOX-
Ex. El. = 570.2 ✓
Inv. In El. = 567.5 ✓
 - (D) PROP. TRENCHES-
2 @ 62' (length) ✓
Inv. El. = 567.2 ✓
5' of stone ✓
8' bottom max. ✓
- LOT 5
WELER PROP.
A RESUB. OF
LOT 2
PLAT 4274
OK FOR 3BA w/0073P.

PLOT PLAN
LOT 9
WELER PROPERTY
A RESUBDIVISION OF LOTS 3 & 4

SITUATED ON MARYLAND RTE # 94
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 100'
JULY, 1987

7/29/87
Elevations ok
Site plan ok to install
SAB

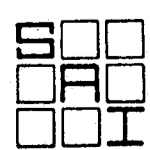
BLDG. PERMIT SIGNED AND RETURNED 7/29/87
BP13647
SAB

EX. 50' EASEMENT FOR INGRESS & EGRESS



MARYLAND ROUTE # 94

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



SHELADIA Associates, Inc.
CONSULTING ENGINEERS
310 A South Main Street, Mt. Airy MD. 21771
(301) 829-2890

REFERENCE	JOB NO.
PLAT # 5353	87 - 1575

N7584

B 1 1931 SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

NO-81-2086
fill in this form completely

Date Received

8 13

OWNER INFORMATION

DOETKER ROLAND
15 Last Name 34 Owner First Name

10457 FREDERICK RD
36 Street or RFD 55

WOODBINE MD 21159
57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Ralph Mayne 273
Driller's Name 77 License No. 80

Ralph Mayne (well driller)
Firm Name

9170 Brown Church Rd, Mt Airy
Address

Ralph Mayne 3/31/87
Signature Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500
14 20

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 150 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST 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

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 (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE INITIALS PERMIT NO. NO-81-2086

SPECIAL CONDITIONS 854-6087

LOCATION OF WELL

HOWARD
8 COUNTY 21

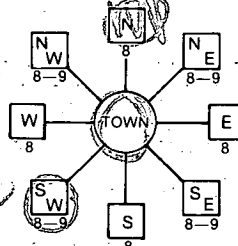
WELLER HOOP
23 SUBDIVISION 42

SECTION --- LOT 9
44 46 48 50

215 RD
52 NEAREST TOWN 71

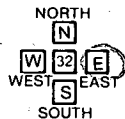
MILES FROM TOWN (enter 0 if in town) 1 MI
73 76 77 78

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 94 30
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 37
DISTANCE FROM ROAD
ENTER FT or MI 7 7

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A 28482
COUNTY NAME COUNTY NO.

OEP SIGNATURE DATE ISSUED
STATE HEALTH INSERT S 41

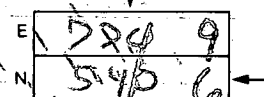
052187 B Wilson 11/21/87
43 48 CO-SIGNATURE EXP. DATE

NORTH GRID 546000 EAST GRID 0779000
50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

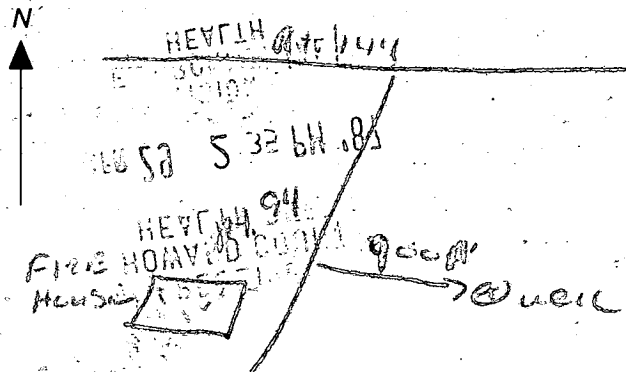
- SOURCES OF DRILLING WATER
- 1. well
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE



Location of 58 casing 1" around 40' open 9" bags cement 6/3/87

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



C1 0383
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND
 WELL COMPLETION REPORT**
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A 28482**

DATE Received: [] [] [] [] [] [] [] []
 DATE WELL COMPLETED: **060387**
 Depth of Well: **205** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **HO-81-2086**

OWNER: **ROSIKER** (last name) **RO AND** (first name) TOWN: **LISBON**
 STREET OR RFD: **RTE 94**
 SUBDIVISION: **WELLS PROPERTY** SECTION: **-** LOT: **9**

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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown SLATE	2	40	✓
Brown SLATE	40	45	
Blue SLATE	45	75	
Brown SLATE	75	80	✓
Blue SLATE	80	205	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** (yes) **N** (no)
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **9** NO. OF POUNDS **700**
 GALLONS OF WATER **54**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **45** ft.

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE: **PL** Nominal diameter: **6** Total depth of main casing: **58**

OTHER CASING (used) diameter: [] inch depth (feet) from [] to []

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

C2
 DEPTH (nearest ft.)
 EACH SCREEN: **HO** **56** **205**

CIRCLE APPROPRIATE LETTER
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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

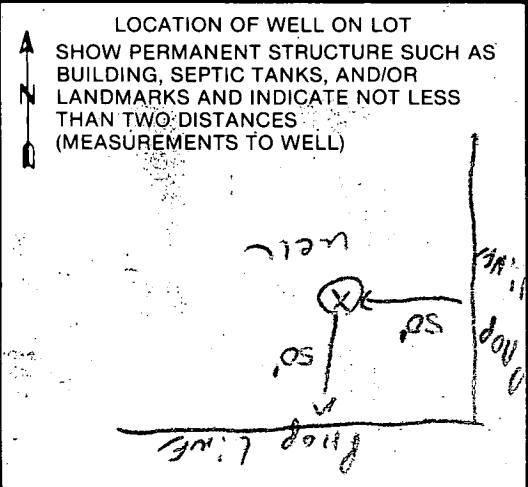
DRILLERS IDENT. NO. **273**
 DRILLERS SIGNATURE: *Ralph Wayne*
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): *Ralph E. Wayne*

SLOT SIZE: 1 [] 2 [] 3 []
 DIAMETER OF SCREEN: [] (NEAREST INCH)
 GRAVEL PACK: []
 IF WELL DRILLED WAS FLOWING WELL INSERT IN BOX 68:

TELESCOPE CASING T (E.R.O.S.)
LOG INDICATOR WQ (E.R.O.S.)
 OTHER DATA: [] [] [] [] [] []

C3
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):
 BEFORE PUMPING: **25**
 WHEN PUMPING: **35**
 TYPE OF PUMP USED (for test): **S** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED:
 PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 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: **2** (nearest foot)
- below }



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

11/2/87
OK to cover
line

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation _____ Receipt # _____
Replacement _____ Date _____
Name of Installer JOSEPH GARTLAND Telephone _____
License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____
Name of Property Owner JOHN D ← (on BP of site) Telephone _____
Subdivision WELLS PROPERTY Lot # 9 Well Tag # 40-81-2086
Site Address 1383 WOODBINE RD. (ROUTE 94)

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 42"
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 _____

lines in OR - no ground (plastic casing)

Tank Piping Well data
1. Capacity _____ 1. Type _____ 1. Depth 20 ft.
2. Pressure relief valve? _____ 2. Size 1" black 2. Yield 10 GPM
3. NSF and/or BOCA Code approved _____ 3. Static water level 25 ft.
4. Depth of supply line 42" 4. Will water supply be disinfected by installer? _____

11/2/87
Tank w/ Valve
not in

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: Hubert W Moore
Date: 12-1-87 Bubala

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
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
Replacement

Receipt # 40442
Date 11/6/87

Name of Installer J. Joseph GATLAND Inc.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner MOORE & BOETHE

Telephone 831-5105

Subdivision WELLS ESTATE Lot # 9

Well Tag # HO-81-2086

Site Address 1383 Woodbine Rd.

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 10EJ05422
- Capacity 10 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 1/2
- RPM
- Voltage
 - 110
 - 220

Pitless Adapter

- Make Howard
- Model # PT800
- Depth 42"

Tank

- Capacity 42gal.
- Pressure relief valve? 75PSI

Piping

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

Well data

- Depth ft.
- Yield GPM
- Static water level ft.
- Will water supply be disinfected by installer? Yes

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 11/2/87

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