

3/18/86
9:30 AM

05-387116

approved 3/11/86
Stayed

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 36642

A REPAIR

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~

461-9933

INDEXED

ELLICOTT CITY

DISTRICT _____

DATE 3/11/86

Souder's Builders

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE _____

SUBDIVISION _____ ROAD 13983 Triadelphia Mill LOT _____

PROPERTY OWNER Donna & Barry Wilson Andre Fortin

13983 Triadelphia Mill Road

ADDRESS Dayton, Maryland 21036

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

~~REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.~~

PLANS APPROVED BY C. Williams DATE 3/11/86

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 AND AFTER PLACING GRAVEL IN TRENCH.

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 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, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

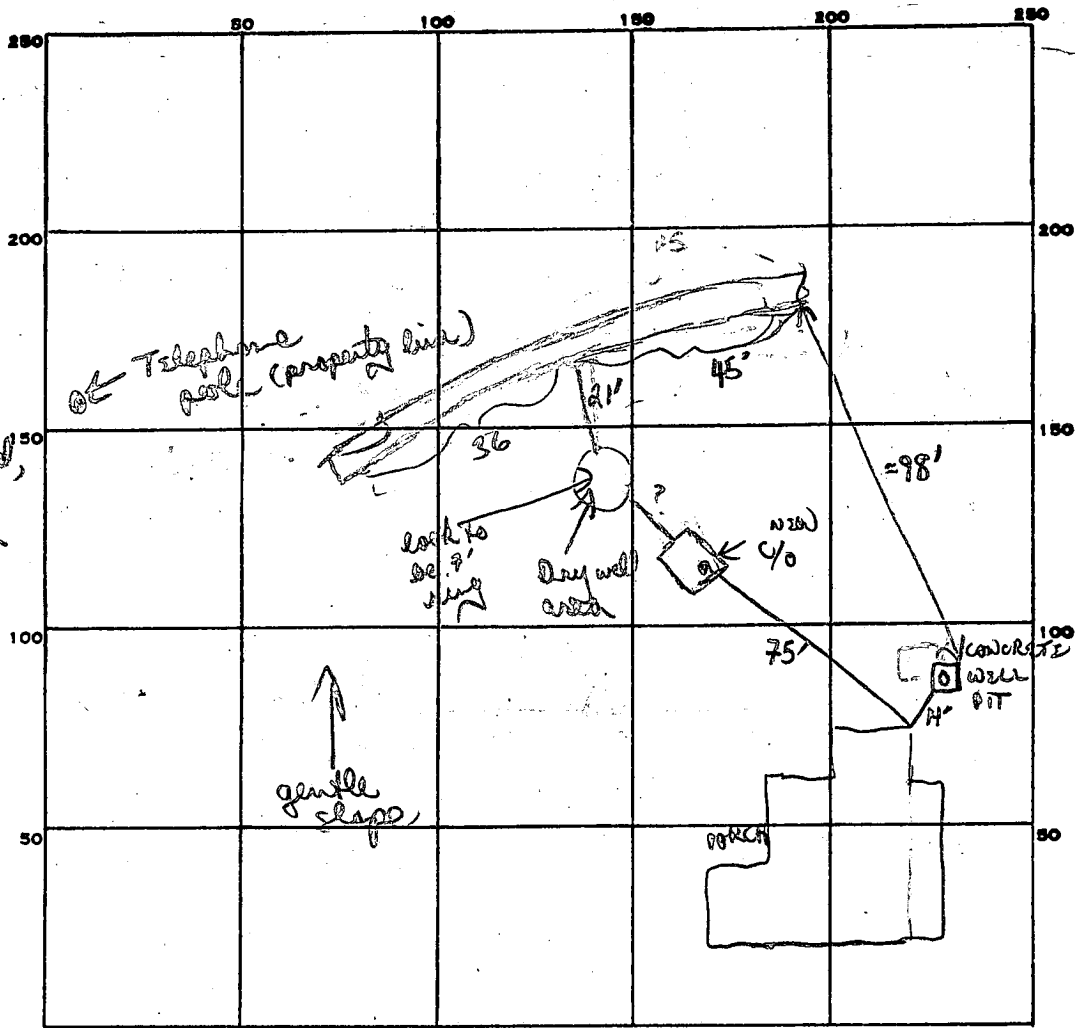
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

~~CALL 892-2330~~ FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

36642
A REPAIR

NOTE:
from area
around dry
well exposed,
very little
stone buffer
visible



Test hole
heavy red to
red brown
Clay 4'
fairly uniform
sandy/silt
occasional loc
with 10-15%
small loose
frags. of
structured
saprolite
13 1/2' D

PERMIT CARD

TRIDELPIA MILL RD

SEPTIC TANK, LEVEL concrete tank

CLEANOUTS

ST / DW

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9-9 1/2' FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 + IN. TOTAL LENGTH ≈ 80 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 480

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: Test hole dug for soil profile. H₂O in dry well less than 2' from surface. System installed 4-9" (5ft stone). 1 Trench ≈ 75' will be sufficient. Will be tapping into existing dry well. OIR to start trench & tap into dry well.
3/18/86 OK to add stone, pipe paper to trench. D.W. C/O to be installed.

3/19/86 OK to cover all work

DATE SYSTEM APPROVED

3/19/86

INSPECTOR

Stager

125'
3'
375 MIN



HOWARD COUNTY HEALTH DEPARTMENT

Mary Sue Baker, MBA, Acting County Health Officer

July 8, 1999

Mr. Richard Gamble
13983 Triadelphia Mill Road
Dayton, MD 21036

RE: Replacement Well Sampling
13983 Triadelphia Mill Road
Well Permit # HO-94-2198

Dear Mr. Gamble:

This office is requesting that you forward the attached form to the plumbing contractor who is responsible for installation of the pump, water line and related plumbing in the referenced replacement well. The plumber should forward the completed form to this office via fax or mail.

This office is also requesting that you contact the Community Environmental Health Services Program at (410) 313-2644 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04).

It is preferred that the sample be collected from an indoor tap, but if suitable scheduling is not completed, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment. **Failure to confirm the potability of this well water supply by completion of water sampling requirements could result in the issuance of an order to abandon and seal the well in accordance with COMAR 26.04.04.**

Additionally, a condition of the well drilling permit was proper abandonment of the existing drilled pit well. This should be completed as soon as possible to avoid delays in the issuance of potability certification. This well abandonment process can best be accomplished by a licensed well driller, who may perform the work without inspection; but, the driller must then file a report with this office. **If this well abandonment is performed by any other party, the materials and procedures must be inspected and approved by a sanitarian from this office before any work is initiated.**

If you have any questions, please call me at (410)313-2640. Thank you for your attention to these important matters.

Approving Authority

Registered Sanitarian
Water and Sewerage Program

MR
cc: File

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 # 13430
Date 5/29/99

Name of Installer Sheldon Fenton

Telephone 301-854-0500

License Number 11092

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner RICHARD/MOLLY GAMBLE

Telephone 301-854-0794

Subdivision 13983 TRIADOLPHIA MILL RD

Lot # 21036

Well Tag # 40-94-2198

Site Address DAYTON, MD. 21036

Pump

1. Type

- a. Deep well jet ☐
b. Shallow well jet ☐
c. Submersible ☒

2. Make Goulds

3. Model # 59507412

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 ☐

Motor

1. Horsepower 3/4

2. RPM 3450

3. Voltage 230

a. 110 ☐

b. 220 ☐

Pitless Adapter

1. Make Martinson

2. Model # B10X

3. Depth 4'

Tank

1. Capacity 100 GAL

2. Pressure relief valve? YES

Piping

1. Type Polyethylene

2. Size 1"

3. NSF and/or BOCA Code approved yes

4. Depth of supply line 4'

Well data

1. Depth 300 ft.

2. Yield 4 GPM

3. Static water level 65 ft.

4. 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: 4 SEP 99

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

C 1 9693

SEQUENCE NO. 11
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY.
PLEASE TYPETHIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.COUNTY
NUMBER

P 36642

ST/CO USE ONLY

DATE Received
MM DD YY
8 13

DATE WELL COMPLETED

6/6/99
MM DD YY
15 20

Depth of Well

22 300 26
(TO NEAREST FOOT)OK MR
7/6/99PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-2148
28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

SUBDIVISION

SECTION

LOT

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	
Red Shale	2	12	
clay	12	35	
brown shale	35	62	
Sand Stone	62	63	
Mica	63	66	
Sand Stone	66	73	
Mica	73	74	✓
Sand Stone	74	172	
Mica	172	173	✓
Sand Stone	173	300	
Mica			

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
☒ Y ☐ N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 23 NO. OF POUNDS 2300

GALLONS OF WATER 115

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 48 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below☒ ST
STEEL☐ CO
CONCRETE☐ PL
PLASTIC☐ OT
OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)

S T

6

68

E
A
C
H
C
A
S
I
N
G

OTHER CASING (if used)

diameter

depth (feet)

inch

from to

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below☒ ST
STEEL☐ BR
BRASS☐ HO
OPEN
HOLE☐ PL
PLASTIC☐ OT
OTHER

C 2

DEPTH (nearest ft.)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

E A C H S C R E E N

SLOT SIZE 1 2 3

DIAMETER
OF SCREEN (NEAREST
INCH)

56 60

from to

GRAVEL PACK

IF WELL DRILLED

WAS FLOWING WELL

INSERT F. IN BOX 68

MDE USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

(E.R.O.S.)

70 72 74 75 76

TELESCOPE

CASING

LOG

INDICATOR

OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour)

3

PUMPING RATE (gal. per min.)

4

METHOD USED TO

MEASURE PUMPING RATE

Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

50 ft.

WHEN PUMPING

300 ft.

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 INSTALLED PUMP

YES

(CIRCLE) (YES OR NO)

NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O)

IN BOX 29.

CAPACITY:

GALLONS PER MINUTE

(to nearest gallon)

31 35

PUMP HORSE POWER

37 41

PUMP COLUMN LENGTH

(nearest ft.)

43 47

CASING HEIGHT (circle appropriate box

and enter casing height)

☒ + above

LAND SURFACE

☐ - below

(nearest

foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)120' well
x
Triadelphia Mill Rd.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes

☒ Y

no

☐ N

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 26.04.04 "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 LIC. NO. MW D 040

Pearce F. Gustafson

DRILLERS SIGNATURE

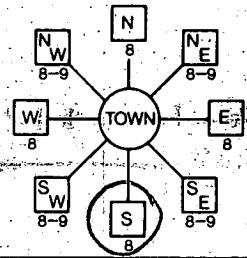

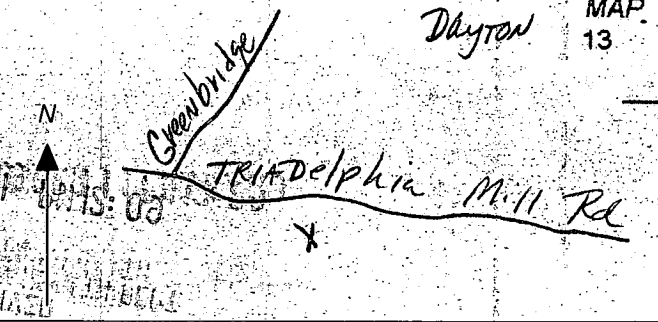
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MW D 501

Chadwick H. L. L.

SITE SUPERVISOR (sign. of driller or journeyman

responsible for sitework if different from permittee)

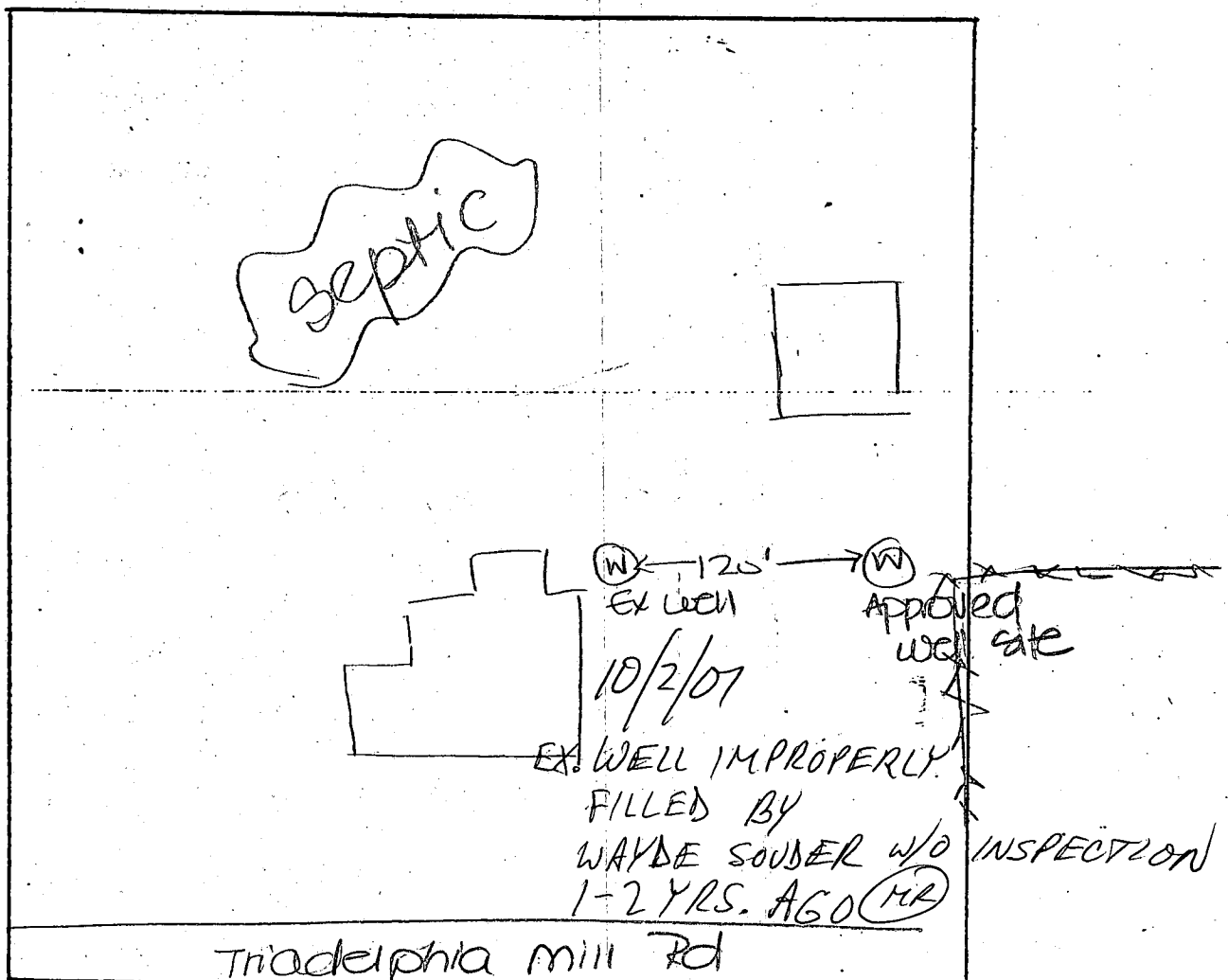
B 1 1 2 3 4 5 6 8721	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER NO - 94 - 2198 OK M ² fill in this form completely 79
Date Received (APA) 03/11/99 8 MM DD YY 13		OWNER INFORMATION RN 7770 Howard 8 COUNTY 21	
15 Last Name Gamble Owner Richard First Name 34 13983 Triadelphia Mill Rd 36 Street or RFD 55 Dayton, Md 21036 57 Town 70 State 72 Zip 76		LOCATION OF WELL CC# 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 Dayton 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 M 1 73 76 77 78	
DRILLER INFORMATION George F. Easterday M VD 040 Driller's Name 76 License No. 81 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd.. MT. Airv. Md. 21771 Address George F. Easterday 3/9/1999 Signature Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
B 2 1 2 WELL INFORMATION APPROX. PUMPING RATE 5 (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY) 14 20		13983 Triadelphia Mill Rd 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 100 Ft ENTER FT OR MI 38 39 TAX MAP: 27 BLK: 24 PARCEL 13	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD P366A2 COUNTY NAME COUNTY NO STATE SIGNATURE INSERT S S DATE ISSUED 03/12/99 03/11/99 43 MM DD YY 48 CO SIGNATURE EXR DATE NORTH GRID 504 000 EAST GRID 0800 000 50 55 57 63	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X 5/6/99 10:15 SOURCES OF DRILLING WATER 1. wells 2. 3.	
APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		WRITE THE BOX NUMBER FROM THE MAP HERE E 800 N 504 000 000	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 <u>AIR-ROTary</u> AIR-PERCussion ROTARY (Hydraulic Rotary) 37 <u>CABLE</u> REVERSE-ROTary Drive-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION Dayton MAP 13 F5 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 54 63 PERMIT No. NO 94 - 2198 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

SITE INSPECTION SHEET

OWNER: Richard Gamble
ADDRESS: 13983 Triadelphia Mill Rd.
Dayton
PROPOSAL: to drill replacement well

DATE REQUESTED: 3/10/99 anytime
3/9/99 10:00
DRILLER: G. Easterday
WELL TAG # _____
COUNTY # P 36642

LOCATION DIAGRAM



COMMENTS: Replacement well site OK as staked

DATE: 3/11/99

INSPECTOR: DIG



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

October 17, 2001

Andre Fortin
13983 Triadelphia Mill Road
Dayton, MD 21036

RE: Outstanding Well Issues
13983 Triadelphia Mill Road
Tax Map 27, Parcel 13

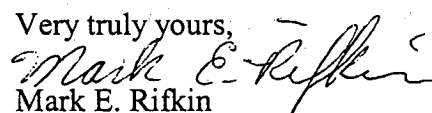
Dear Mr. Fortin:

The Howard County Health Department hereby reports there are no outstanding issues on the referenced property. Therefore, there are currently no obstacles to review or issuance of future building permit applications or other permit applications, pending review of the application itself.

Recently, there was an outstanding issue of the proper filling of a disconnected well. Local contractor Wayne Souder reported that he had improperly filled the well, as directed by the owner at the time (approximately one to two years ago). This office accepted that report at face value, with no penalties to Mr. Souder or other persons.

If you have any questions, please call this office at (410) 313-2640.

Very truly yours,


Mark E. Rifkin

Water and Sewerage Program

MER

Cc: File