

2-2-88
11-12-1988

04-344715

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 4th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

DATE 1/20/88

DATE SYSTEM APPROVED 2-5-88

INSPECTOR JEN

INDEXED

{ I.C.O.P. issued only }
Time expired

William H. Smith, Jr.

IS PERMITTED TO INSTALL X ALTER

ADDRESS P. O. Box 330, Forest Hill, MD 21050

PHONE 879-7641

SUBDIVISION Patapsco Overlook II ROAD 607 Weller Drive LOT 13

PROPERTY OWNER Frederick Blickenstaff

fackler

ADDRESS

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

GARBAGE GRINDER? YES _____ NO X

200 ft

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start first trench 140 feet from the rear (213') lot line and 120 feet from the right (796') lot line as seen when facing the property from Weller Drive. Run trenches along contour toward right lot line.

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

OK'd w/ change
(B)

PLANS APPROVED BY C. Williams

DATE 12/29/86

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: 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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

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.

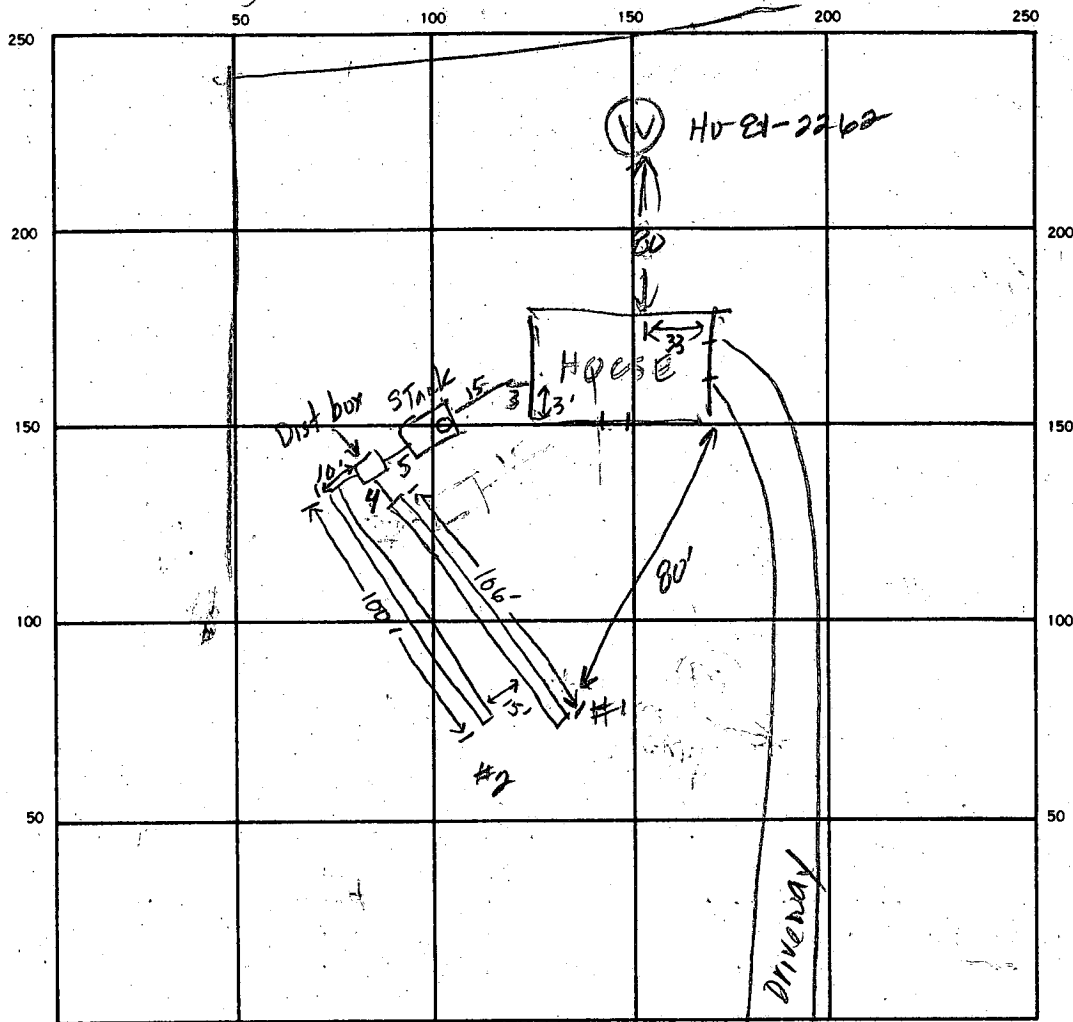
BLDG. PERMIT SIGNED
AND RETURNED 5/31/91
38184 W. Lee

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A-31157



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.
WELLER Drive

SEPTIC TANK. LEVEL 1000 gal CLEANOUTS OK
DISTRIBUTION BOX. LEVEL OK, w/ baffle
DRAIN FIELD/TILE FIELD. DEPTH 7 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 1 1/2 FT.
EFFECTIVE GRAVEL DEPTH 4 1/4 FT. TOTAL LENGTH 106/100 FT.
NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 424/400 SQ. FT.
DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
ABSORBENT AREA 824 SQ. FT.

REMARKS 2/2/88 - LOCATION OK PER PLANS IT TRENCH #1 DUG
106 FT LONG & A LITTLE STONE ADDED. FINISH TRENCH #1. DIG TRENCH #2 & CALL
2-5-88. OK to add stone, pipe and paper to both trenches. Grout at
distribution box. OK to cover trench #2. JEN 2-5-88 OK to cover
trench #1 and all other work. JEN

DATE SYSTEM APPROVED 2-5-88 INSPECTOR Jane E. Nadeau

APPLICATION

A 31157

Prep.

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

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

DATE 2/9/81

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 Georgia Ave. Properties Inc.

ADDRESS c/o E. Brook Lee III, 13838 Ga. Ave, Wheaton, Md.

PHONE _____

PROPERTY LOCATION:

SUBDIVISION Georgia Ave Properties LOT NO. 13

ROAD AND DESCRIPTION Md. Rte.94 and Old Frederick Rd.

SIZE OF LOT 3 ac + TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE NA

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

SIGNATURE OF APPLICANT [Signature]
Agent

APPROVED BY _____ FOR _____ DATE _____
(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

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 X
Replacement _____

Receipt # 40834
Date 1/20/88

Name of Installer Wm. H. Smith

Telephone 879-7641

License Number PI58

Certified Well Pump Installer X Well Driller _____ Registered Plumber _____

Name of Property Owner Fred Blickenstaff Telephone _____
Subdivision PATAPOSCO Overlook Lot # 13 Well Tag # HD-9A-226V
Site Address 607 Weller Drive

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible _____
2. Make _____
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 _____

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth _____

Tank
1. Capacity _____
2. Pressure relief valve? _____

Piping
1. Type _____
2. Size _____
3. NSF and/or BOCA Code approved _____
4. Depth of supply line _____

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? _____

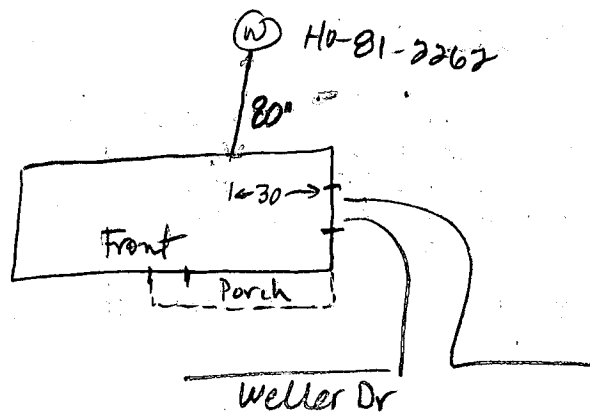
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: William H. Smith

Date: 1/20/88

2/2/88 OK TO COVER OUTSIDE WORK. DONOT KNOW IF
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.
PRESSURE TANK INSTALLER HOUSE LOCKED UP
HD-215 CHECK ON RETURN VISIT TO SEPTIC SYSTEM RH



2-5-88

Pitless adaptor at 41 inches, well line and ground connected. House connection covered. Pressure tank installed w/ relief valve before tank. Inside house connection ok. J.E. Noebean.

1250 gal. Tank

4 bedrooms x 200 sq' = 800 sq'

1 Trench 2' wide
7' deep
Stone: ~~2' x 4' x 100'~~
~~800 sq ft.~~

800 sq' / 4 ft stone
= 200 LF of trench

⊕ 48 well Elev.

4 x 100' - 1100
2100'

Exist. elev. @ Septic Tank 42.27

Inv. elev. (into) Septic Tank 39.26

Inv. elev. (out of) Tank 38.93

Inv. elev. (into) Trench 38.6

Exist. @ Trench 41.6

F.F. 50
B.E. 42

Inv. elev. (out of) house 39.7

⊕ 34.47

200
3-7

10/8/87 elevations of
w/ change in trench length

BLDG. PERMIT SIGNED
AND RETURNED 10/8/87

S. Afful

BP 15002

BRL

Patricia Overland - Lot 13

607 Weller Dr. Joanne Blickenstaff 876-2874

C1	6071	SEQUENCE NO. (OEP USE ONLY)	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			COUNTY NUMBER	A 31157

DATE Received	DATE WELL COMPLETED	Depth of Well	PERMIT NO.
8 13	09 1787	22 253 26 (TO NEAREST FOOT)	FROM "PERMIT TO DRILL WELL" HC-87-2262
OWNER	CONSTRUCTION	first name	TOWN
STREET OR RFD	WELLER DRIVE		LISBON
SUBDIVISION	PATAPSCO OVERLOOK	SECTION	LOT
		2	13

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
Dirt	0	1
Brown Clay & Brown Schist	1	6
Soft Brown Schist	6	18
Soft Brown Schist laced w/Brown & Red Clay	18	36
Soft Brown Schist	36	80
Soft Brown Schist & Sand	80	93
Soft, Hard, Brown & Blue Schist	93	100
Hard Blue Schist	100	115
Hard Brown Schist	115	118
Hard Blue Schist	118	126
Hard Black & Blue Schist	126	150
Hard Brown Schist	150	153
Hard Brown & Blue Schist	153	160
Hard Black Schist	160	185
Hard Blk. & Blue Schist Opening	185	190

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
yes	no
Y	N
TYPE OF GROUTING MATERIAL	
CEMENT	BENTONITE CLAY
CM	BC
NO. OF BAGS	NO. OF POUNDS
44	136
GALLONS OF WATER	
264	
DEPTH OF GROUT SEAL (to nearest foot)	
from	ft. to
0	110
48	58
(enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below	STEEL	CONCRETE
	PL	OT
	PLASTIC	OTHER
MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
S T	6	112
60	61	66

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

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

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
SLOT SIZE 1 2 3																																																		
DIAMETER OF SCREEN																																																		
(NEAREST INCH)																																																		
from to																																																		
GRAVEL PACK																																																		
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68																																																		

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

PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	15	
METHOD USED TO MEASURE PUMPING RATE		
Submersible		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	25	
WHEN PUMPING	66	
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	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)	
LAND SURFACE	
(nearest foot)	

LOCATION OF WELL ON LOT	
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).	
FREDERICK Rd.	
WELLER DR.	
Woodbine Ct.	

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. 296	
Ronald L. Kyker	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

Depth of well 253'
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. 25

HD-224

B 1 2131

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
PERMIT TO DRILL WELL

OEP PERMIT NUMBER

40-81-2262

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

please print or type

fill in this form completely

Date Received

8 0 13

OWNER INFORMATION

BLICKENSTAFF CONT'G'S
 2026 HERBERT AVE.
 WESTMINSTER MD 21157

DRILLER INFORMATION

Ronald L. Kyker

Driller's Name

Westminster Rotary Well Drilling, Inc.

Firm Name

P.O. Box #861., Westminster, Md. 21157

Address

Signature

Date

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

5

AVERAGE DAILY QUANTITY NEEDED
(GAL. PER DAY)

350

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
☐ F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
☐ P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
☐ T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL

300

FEET

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)

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

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER

GAP

FORCE

WRITE INITIALS IN BOX

PERMIT NO.

40-81-2262

SPECIAL CONDITIONS

LOCATION OF WELL

HOWARD

8 COUNTY

PATAPUSCO OVERLOOK

23 SUBDIVISION

SECTION 2

LOT 13

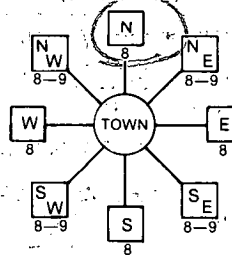
LISBON

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town)

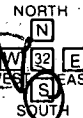
.50 MI

DIRECTION OF WELL FROM TOWN (CIRCLE-BOX)



WELLER DRIVE

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD

ENTER FT or MI

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD

COUNTY NAME

A 31157

COUNTY NO.

OEP

SIGNATURE

STATE HEALTH

INSERT S

DATE ISSUED

070487

R. N. Nylor

03/04/87

NORTH

GRID

553000

EAST

GRID

0780000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

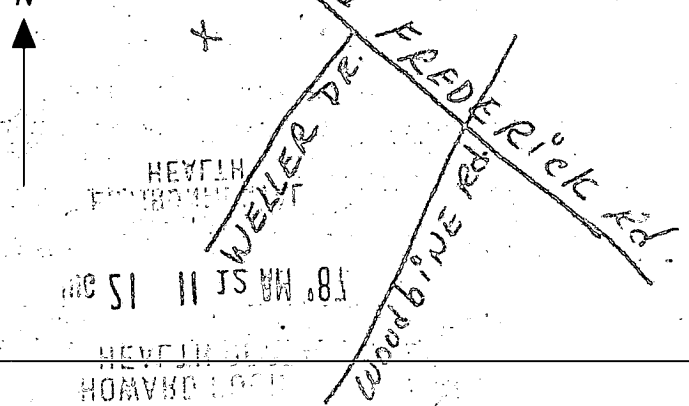
- CITY
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

78980
5543000
000

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

N



9/17/87 1030am

- ① Well 253 F 7 deep
- ② 112 ft casing
- ③ 110 ft ft open hole
- ④ 44 bags
- ⑤ Location OK
- ⑥ Arrived after well grout
finished got information
from operator

B. W. W. W.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

JUN 21 11 12 AM '87

TABLE SEE SHEET 2 OF 3

MATCH LINE SEE SHEET 2 OF 3

9 21° 29' 25' W

200.27'

**LOT 15
4.084AC.**

LOT 14
3.811 AC.

LOT 13
3500 AC

LOT 12
3550 AC

LATIONS

PARCELS TO

15 71.771 AC.
RECORDED INCL'DING

RECORDED: 74917 AC

THIS SHEET

CELLS TO BE RECORDED 7
E.L.S 25.636 AC.

RECORDED INCLUDING WIDENING STRIP: 1.852 AC.

S.H.A. PLAT NO. 43276

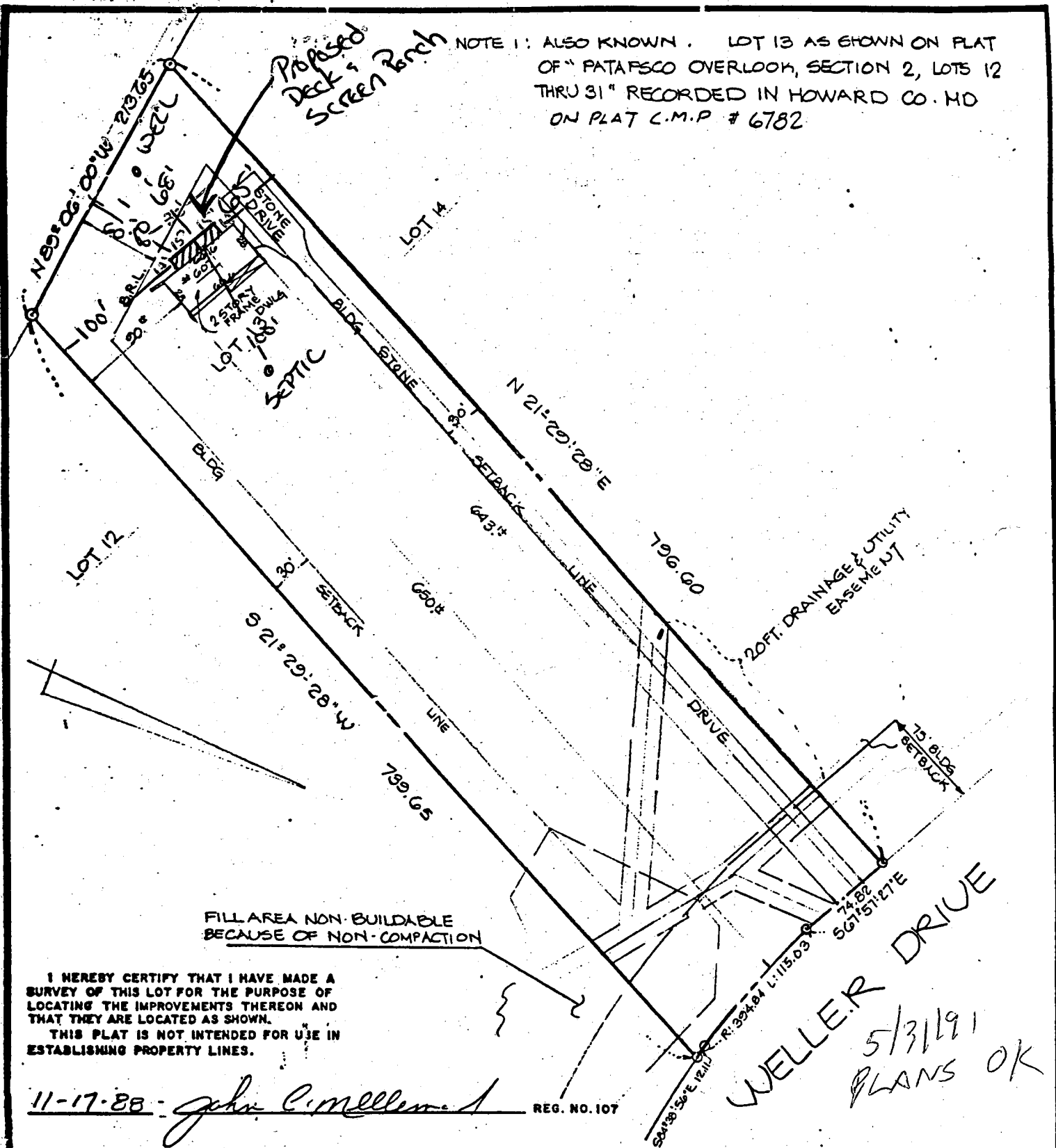
VEHICULAR INGRESS AND EGRESS RESTRICTED

LAND DEDICATED TO HOWARD COUNTY, MARYLAND FOR THE PURPOSE OF A PUBLIC ROAD. (0.016 AC.)

PART OF PARCEL
GEORGIA AVENUE F

Proposed Deck & Screen Borch

NOTE 1: ALSO KNOWN LOT 13 AS SHOWN ON PLAT OF "PATAPSCO OVERLOOK, SECTION 2, LOTS 12 THRU 31" RECORDED IN HOWARD CO. MD ON PLAT C.M.P. # 6782

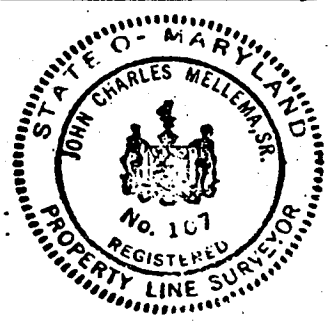


FILL AREA NON-BUILDABLE BECAUSE OF NON-COMPACTION

I HEREBY CERTIFY THAT I HAVE MADE A SURVEY OF THIS LOT FOR THE PURPOSE OF LOCATING THE IMPROVEMENTS THEREON AND THAT THEY ARE LOCATED AS SHOWN.
THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES.

11-17-88 *John C. Mellema, Jr.* REG. NO. 107

WELLER DRIVE
5/31/91
PLANS OK



LOCATION SURVEY	
607 WELLER DRIVE	HOWARD COUNTY MD.
JOHN C. MELLEMA SR., INC.	
LAND SURVEYORS	
6100 BALTIMORE NATIONAL PIKE - BALTIMORE, MARYLAND 21228	

SCALE
1"=100'
DATE
11-17-88
JOB NO.
88707