

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 7/27/71

P 16164
57075 B
A 09005

INDEXED

03-298221

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS Ten Oaks Road, Glenelg, Maryland PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

Bill Gray
13914

SUBDIVISION Burnt Wood ROAD Castlebar Drive LOT 9, Blk. B,
Sec. 3, Pt. 1

PROPERTY OWNER Burnt Woods Development Co., Inc.

ADDRESS _____

SPECIFICATIONS = 4 bdrms.

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1,200 GALLONS Tank to be no deeper than 4 ft. below grade.

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Leaching bed - 201 sq. ft. bottom area per bedroom and installed at a depth of 8 ft. below grade including gravel. Place leaching bed between 25 and 50 ft. from front lot line and between 20 and 70 ft. from right side as seen when facing lot from Street B.

CALL FOR INSPECTION OF PIT BEFORE GRAVEL IS INSTALLED.

PERMIT VOID AFTER THREE YEARS.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PLANS APPROVED BY Fletcher & Monaghan DATE 9/16/64

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

COG. PERMIT SIGNED

AND RETURNED 8-11-99

Serial # B77 119874
addition to kitchen

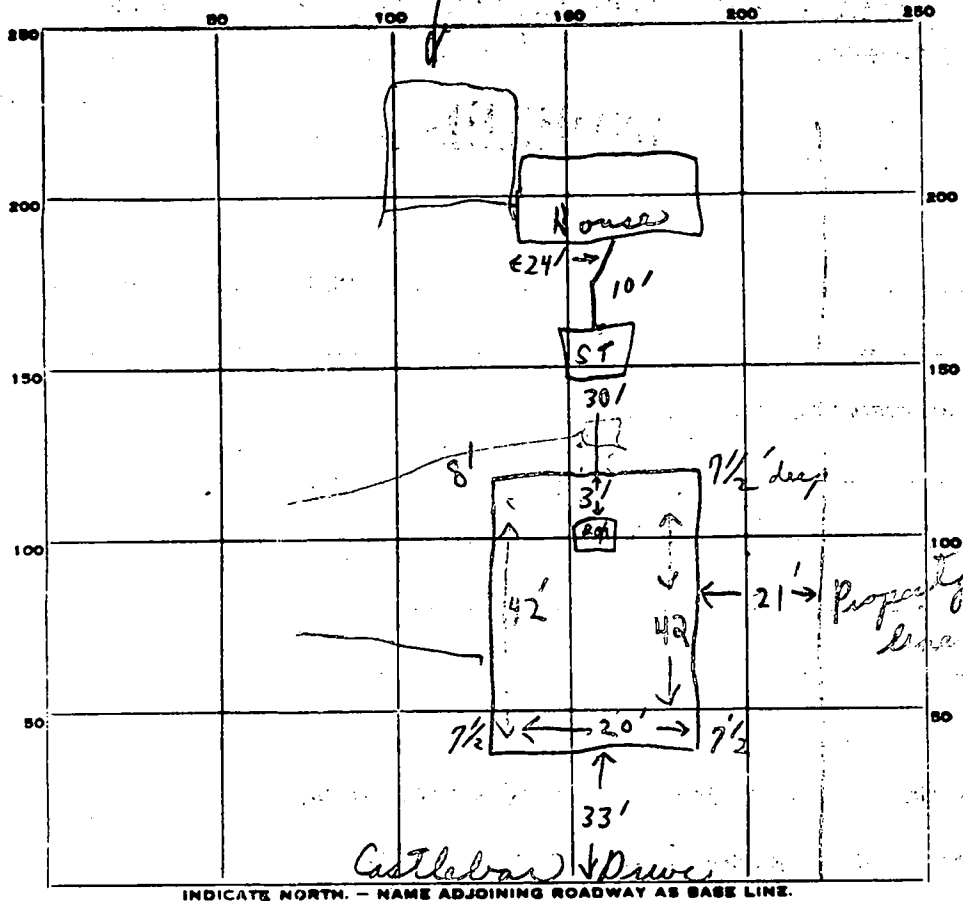


BLDG. PERMIT SIGNED AND RETURNED 3/4/96

Serial # 63635
large addition

A 57075 B
A 09005

Proposed 2000 gauge
 @ Selens, Beth
 12/22/94
 JLD CBS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD OK

SEPTIC TANK, LEVEL CLEANOUTS OK

DISTRIBUTION BOX, LEVEL

L Bed TILE FIELD, DEPTH 7 1/2 - 8' FT. L Bed TRENCH WIDTH 20 FT.

GRAVEL DEPTH 4' IN. TOTAL LENGTH 42 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 840

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

ABSORBENT AREA SQ. FT.

REMARKS Partial/ No septic tanks installed at time of inspection
on 8/12/91 C. Stricker, 8/17/91 distribution box in
leaching bed; 4 ft. gravel & paper on top of gravel at
time of inspection

12/29/94 C.W. recommended repair per. for addition, indicated of tank sand etc.

DATE SYSTEM APPROVED 8/17/91 INSPECTOR C Stricker

APPLICATION

A 09005

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

*4 bedrooms - 1,400
septic tank - 2' diameter - 750 gal
4 bedrooms - 1,900 gal
3 bedrooms - 1,500 gal
Trench to be made
septic tank shall be
below grade*

DISTRICT 3

DATE 9/9/64

*Leaching Bed - 20' x 20' ft bottom area per bedroom and installed at
a depth of 8' below grade including ground.*

*Place Leaching Bed between 25 and 50 ft from front lot line and
between 20 and 25 ft from rear lot line as seen when viewing lot
from Street B. call for inspection of pit
below granular installed*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Burnt Woods Development Co., Inc.

ADDRESS 212 Crownwood Road, E. C., Md. PHONE HO 5-1345

PROPERTY LOCATION:

SUBDIVISION Burnt Wood LOT NO. 9, Blk. B, Sec. 8

ROAD AND DESCRIPTION Street B - Call for inspection

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 145' x 300' TYPE BLDG. test per bedroom
NUMBER OF BEDROOMS 4

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ M. A. Wakefield, Jr.

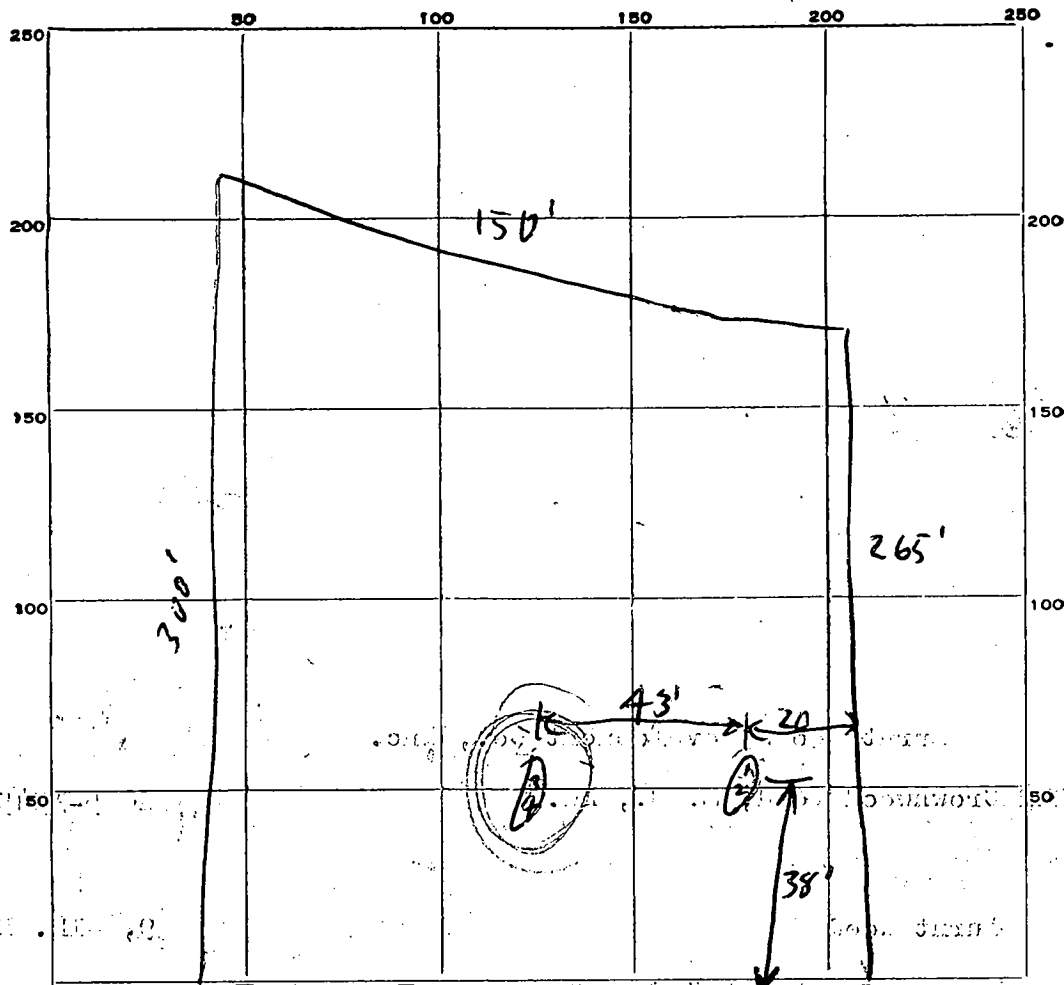
APPROVED BY R. W. White & L. W. Morgan FOR Leaching Bed DATE 9/10/64
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

ST. "B" 145

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/16/64	1	6 ft	1015	1035	1035	1115	40 min.
	2	10 1/2 ft.	1016	1030	1030	1100	30 min.
	3	6 ft	1023	1030	1030	1042	12 min.
	4	10 ft.	1024	1030	1030	1044	14 min.

SOIL AUGER FINDING Soil in #1 & 2 very rocky; Soil in 3/4 good; use 3 & 4 for system
very few rocks

TESTED BY RDE 9/16/64

REMARKS

ALSO PRESENT Douglas S. Porter LOT NO. 9B, Sec & 39 part 1

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

SEQUENCE NO. (DWR USE ONLY) 2325 DATE RECEIVED (DWR USE ONLY) DATE WELL COMPLETED 10/21/71

DEPTH OF WELL 120 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-72-0037

DRILLERS IDENTIFICATION NO. 42

OWNER LAST NAME FIRST NAME STREET OR RFD POST OFFICE

WELL LOG table with columns: DESCRIPTION, FEET FROM, FEET TO, CHECK IF WATER BEARING. Includes handwritten entries: Depth 0-3, Sand 3-50, Brown silt 50-120, Muck 100-120.

GROUTING RECORD: WELL HAS BEEN GROUTED YES, TYPE OF GROUTING MATERIAL CEMENT, BENTONITE CLAY, NO. OF BAGS 11, NO. OF POUNDS 1100, GALLONS OF WATER 65, DEPTH OF GROUT SEAL 0-50 FT.

CASING RECORD: MAIN CASING TYPE ST, NOMINAL DIAMETER TOP (MAIN) CASING 6 INCH, TOTAL DEPTH OF MAIN CASING 54 FEET.

OTHER CASING (IF USED) table with columns: DIAMETER (INCH), DEPTH (FEET) FROM, TO.

SCREEN RECORD: SCREEN TYPE OR OPEN HOLE, (INSERT APPROPRIATE CODE BELOW) ST, BR, HO, PL, OT.

DEPTH (NEAREST WHOLE FOOT) FROM TO table with rows for EACH SCREEN 1, 2, 3.

DIAMETER OF SCREEN 56-60 (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR

PUMPING TEST: HOURS PUMPED 1, PUMPING RATE 20 GALLONS PER MINUTE, WATER LEVEL 35 FEET, TYPE OF PUMPED USED AIR, PISTON, TURBINE.

PUMP INSTALLED: TYPE OF PUMP, DRILLER WILL INSTALL PUMP YES, CAPACITY: GALLONS PER MINUTE 31-35, PUMP HORSE POWER 37, PUMP COLUMN LENGTH 43-47.

CASING HEIGHT ABOVE/BELAND SURFACE, LOCATION OF WELL ON LOT: SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS.

Handwritten notes: Lot 9B, about 35' above R. Tour 9-22-71

CIRCLE APPROPRIATE BOXES: A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED, E ELECTRIC LOG OBTAINED, C COPY OF ELECTRIC LOG ATTACHED

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, SIGNATURE, (PLEASE PRINT)



A09005

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

December 29, 1994

Mr. Bill Grau
13914 Castlebar Drive
Gleneig, Maryland 21737

RE: 13914 Castlebar Dr.

Dear Mr. Grau:

This is in regards to your inquiry of December 19, 1994 about a planned addition to the above referenced property.

You propose an addition that is to be 22.5' from your existing well. The recommended separation is 30' and you are encouraged to provide this separation if possible. Should your proposal continue to be for 22.5' separation, that distance will be acceptable to this office.

The proposal is for significant additional living area, and as such, represents a potential increase in flow to the septic system. The system being nearly 25 years old, it can be expected to be near the end of its useful life. Percolation testing originally conducted on this property was not extensive enough to make any projections about repair options at this time.

To further evaluate your proposal, a septic repair permit (\$25 permit) is required. Under that permit, the first step would be to conduct percolation testing to determine soil conditions, in order to recommend an appropriate enlargement or replacement system. That permit would also serve to authorize installation of the recommended repairs.

If the reported 1,250 gallon septic tank is found to be in sound condition, no additional tank capacity is required.

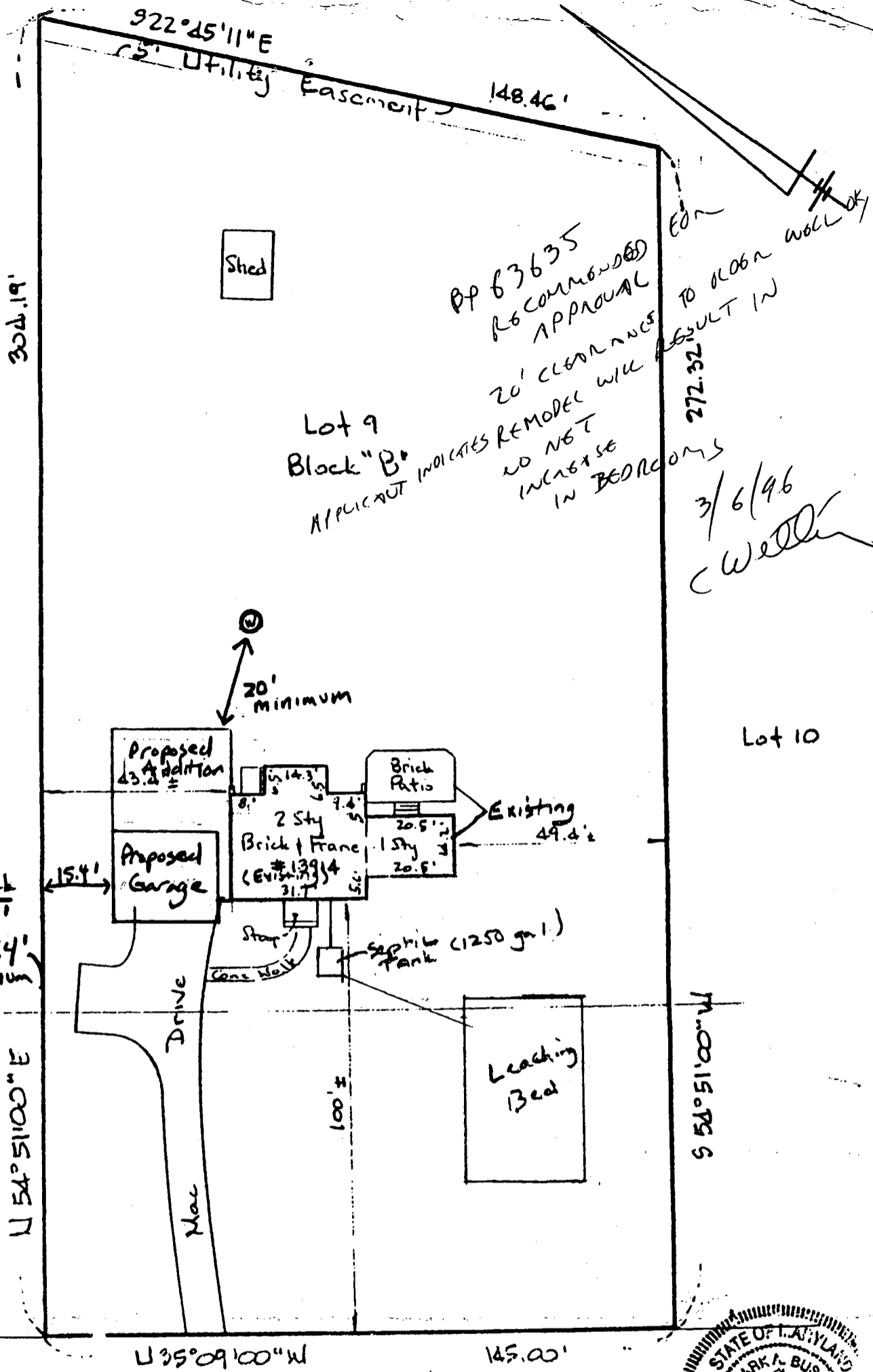
If you should have any questions concerning this matter, please feel free to call me at 313-2640.

Very truly yours,

Craig Williams / Au

Craig Williams, Program Director
Water and Sewerage Program

CW:at



BP 63635
 RECOMMENDED
 APPROVAL
 20' CLEARANCE
 TO CLEAR WALL OF
 RESULT IN
 272.32
 3/6/96
 C. Weller

RR Zone
 Side Setback
 Required - 15'
 Provided - 15.4'
 (Minimum
 75' B.R.L.)

THE LOT SHOWN HEREON IS IN FLOOD
 ZONE C PER F.E.M.A. FLOOD INSURANCE
 RATE MAP PANEL # 240044-0720B & 0021B

THIS IS TO CERTIFY That The Improvement Indicated
 Hereon Are Located As Shown. This Is Not A Property
 Line Survey And Should Not Be Used As Such.

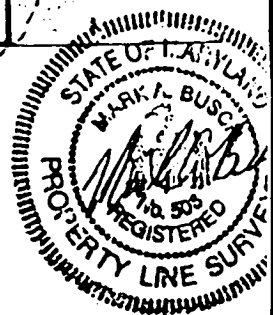
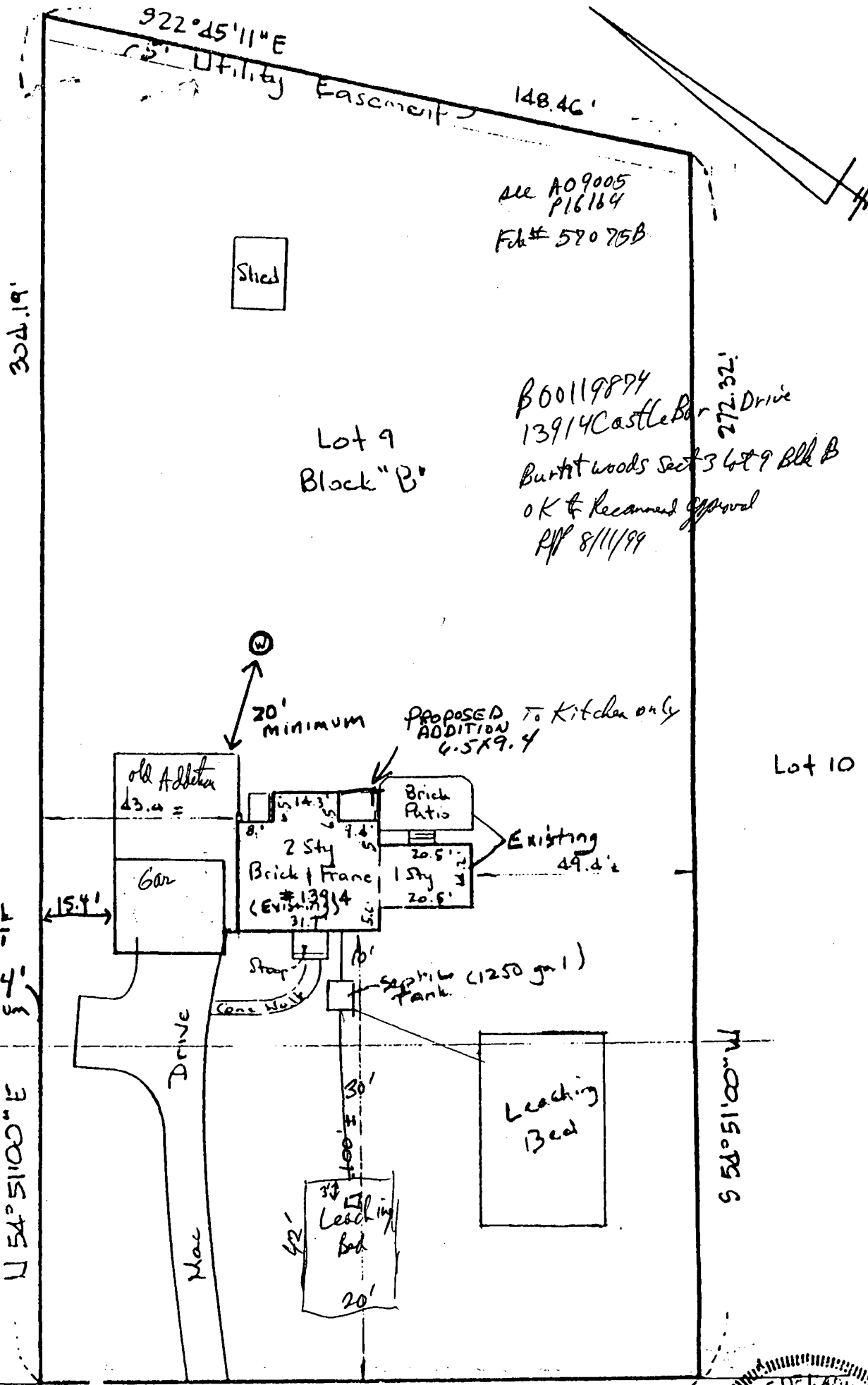


PLOT PLAN

LOCATION CERTIFICATION
 #13914 CASTLEBAR DRIVE; LOT 9
 Block B "SECT. 3 (PARTIAL) BURNTWOOD"
 HOWARD Co., MD. Plat B. 10, Folio 20

H HICKS ENGINEERING CO., INC.
 ENGINEERS, SURVLYORS & PLANNERS
 200 EAST JOPPA ROAD - SUITE 402
 TOWSON, MARYLAND 21286
 TELEPHONE: (410)494-0001

DATE: 9/9/94 SCALE: 1" = 20' FILE: 17676



THE LOT SHOWN HEREON IS IN FLOOD ZONE C PER F.E.M.A. FLOOD INSURANCE RATE MAP PANEL # 240044-0720B + 0021B

THIS IS TO CERTIFY That The Improvement Indicated Hereon Are Located As Shown. This Is Not A Property Line Survey And Should Not Be Used As Such.

PLOT PLAN

LOCATION CERTIFICATION		
#13914 CASTLEBAR DRIVE; LOT 9 Block B "SECT. 3 (PARTIAL) BURNTWOODS HOWARD CO., MD. Plat Book 10, Folio 20		
DATE: 9/9/94	SCALE: 1" = 20'	FILE: 1767

H HICKS ENGINEERING CO., INC.
 ENGINEERS, SURVLYORS & PLANNERS
 200 EAST JOPPA ROAD - SUITE 402
 TOWSON, MARYLAND 21286
 TELEPHONE: (410)494-0001

8/13/96
WSI
11:00

SITE INSPECTION SHEET

INDEXED

05-372755

OWNER: Elridge Wise

DATE REQUESTED: 8/12/96

ADDRESS: 13210 Highland Rd

DRILLER: _____

* 301-854-3461

WELL TAG # _____

* 410-531-1174

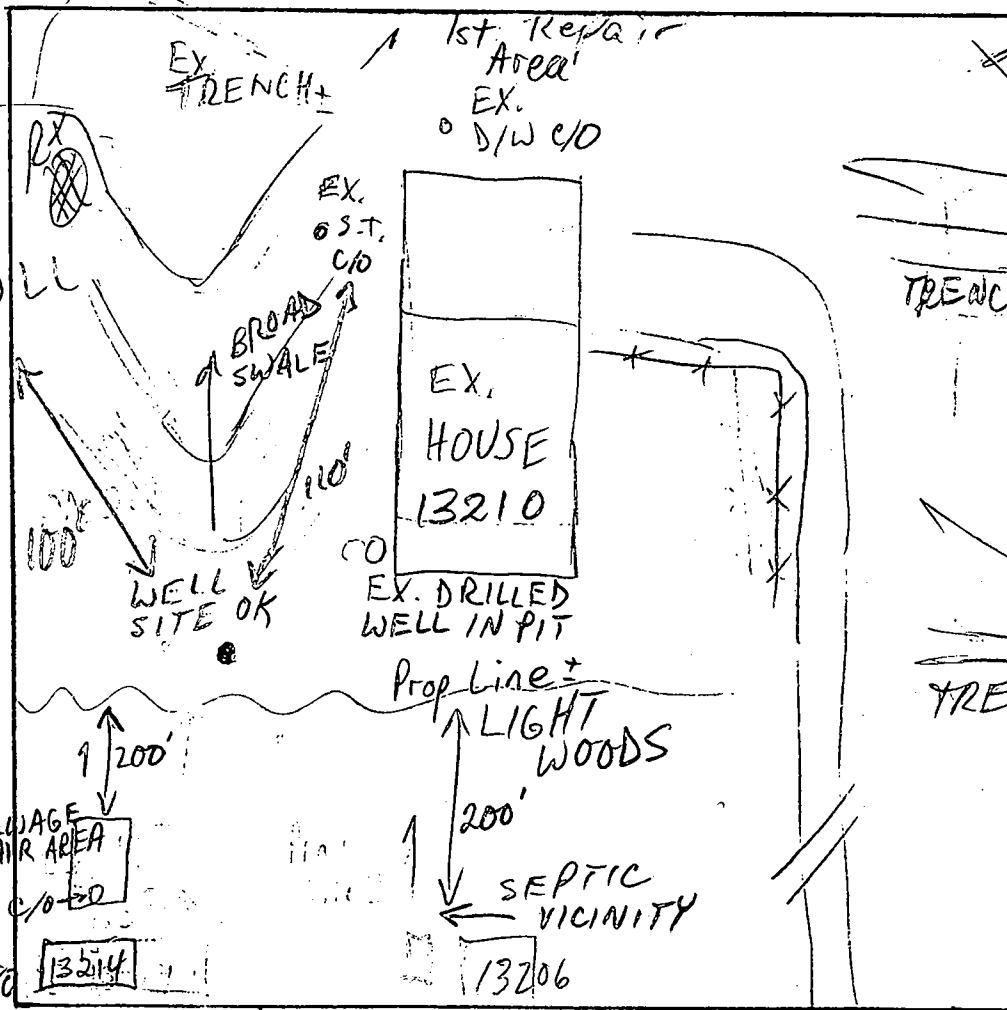
COUNTY # _____

PROPOSAL: Replacement well site - driller to bring in paperwork

8/13/96 repl. well requested due to low flow *

EX. WOODS (Prop Line)

LOCATION DIAGRAM



COMMENTS:

8/13/96 WELL SITE APPROVED IS BEST AVAIL, ALTHO 200-300'
DOWNSLOPE OF ADJACENT SEPTICS ALONG HIGHLAND RD,
OTHER SITES WORSE MR

DATE: _____

INSPECTOR: _____

57077A

C1 7809

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER W 57077A

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" OK MR 10/2/96 H40-94-0906

OWNER Wise last name 13210 Highland Rd first name Elridge TOWN Highland SUBDIVISION SECTION LOT

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes handwritten entries: TOP Soil, red shale & clay, brown shale, Sand Stone mica, Sand Stone mica, Flint mica.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y/N). TYPE OF GROUTING MATERIAL (Cement CM, Bentonite Clay BC). NO. OF BAGS 12, NO. OF POUNDS 1200. GALLONS OF WATER 60. DEPTH OF GROUT SEAL (to nearest foot) from 0 to 36 ft.

CASING RECORD. MAIN CASING TYPE (S, T, G, 6, 40). Nominal diameter top (main) casing (nearest inch) 6. Total depth of main casing (nearest foot) 40.

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

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

NUMBER OF UNSUCCESSFUL WELLS: WELL HYDROFRACTURED (Y/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...

TYPE MWD/MSD/MGD DRILLERS LIC. NO. H40

DRILLERS SIGNATURE (Must match signature on application)

LIC. NO. MWD 501

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

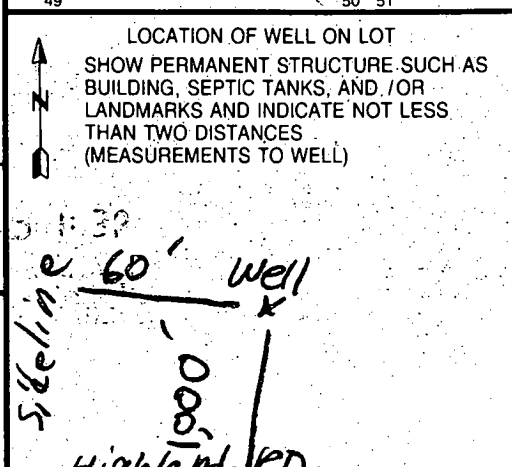
DEPTH (nearest ft.) table with columns 1-31. Includes handwritten entries: 40, 38, 400. SLOT SIZE 1, 2, 3. DIAMETER OF SCREEN (NEAREST INCH) 56, 60.

GRAVEL PACK: IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68.

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER). TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST. HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min.) 2.5. METHOD USED TO MEASURE PUMPING RATE Bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 50 ft. WHEN PUMPING 400 ft. TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible.

PUMP INSTALLED. DRILLER WILL INSTALL PUMP (YES/NO). TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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, - below. LAND SURFACE (nearest foot) 2.



B 1 00691 SEQUENCE NO. (DP USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
H0-94-0906
70 fill in this form completely 76

Date Received (APA) 081596
OWNER INFORMATION
WISE EARRIDGE
15 Last Name 34 Owner First Name
13210 HIGHLAND RD
38 Street or RFD 55
HIGHLAND MD 20777
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
1 2 HOWARD
8 COUNTY 21
23 SUBDIVISION 42
SECTION 44 46 LOT 48 50
HIGHLAND
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 1 MI
73 76 77 78

DRILLER INFORMATION
George F. Easterday 40
Driller's Name 77 License No. 80
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
Address
George F. Easterday 8-13-96
Signature Date

B 4
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
N W N E
W TOWN E
S W S E
S
NEAR WHAT ROAD 11 13210 HIGHLAND RD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W EAST E
SOUTH S
34 11000 37
DISTANCE FROM ROAD
ENTER FT or MI 177
36 38

B 2 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)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard W57077A
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED Mark E. Sullivan 8/19/97
43 48 CO SIGNATURE EXP. DATE
NORTH GRID 494000 EAST GRID 0808000
50 55 57 63

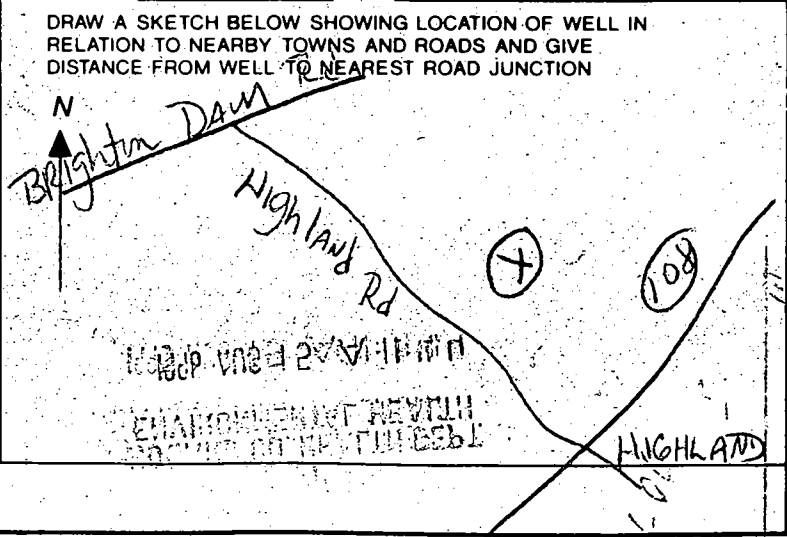
APPROXIMATE DEPTH OF WELL 200 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
36 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROTary Drive-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1 wells
2
3
WRITE THE BOX NUMBER FROM THE MAP HERE
E 8088
N 4944
000
000
9/4/96
8.15 GROUT
NO INSP
X

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
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP
54 63
FORCE MR WRITE INITIALS IN BOX PERMIT No. H0-94-0906
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

DRILLER

