

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

03-28169

57382B
P ~~020508~~

A REPAIR

DISTRICT 3rd

DATE 11-4-96

OF INSPECTION
DATE SYSTEM APPROVED 11/2/96

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 313-2640

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER X

ADDRESS 588 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Woodmark LOT 56 ROAD 12210 Carroll Mill Road

PROPERTY OWNER David R. Gregory

ADDRESS 12210 Carroll Mill Road
Ellicott City, Maryland 21042

SEPTIC TANK CAPACITY 1500 GALLONS

***PURPOSE FOR REPAIR: Approval for Building Permit Application #B00102871.

NUMBER OF BEDROOMS 5

SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED

REPAIR - Building Permit Application # B00102871 increases the number of bedrooms from 4 to 5 in the proposed 1 story addition.
Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED BY DATE

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

BLDG. PERMIT SIGNED

AND RETURNED 11/22/96

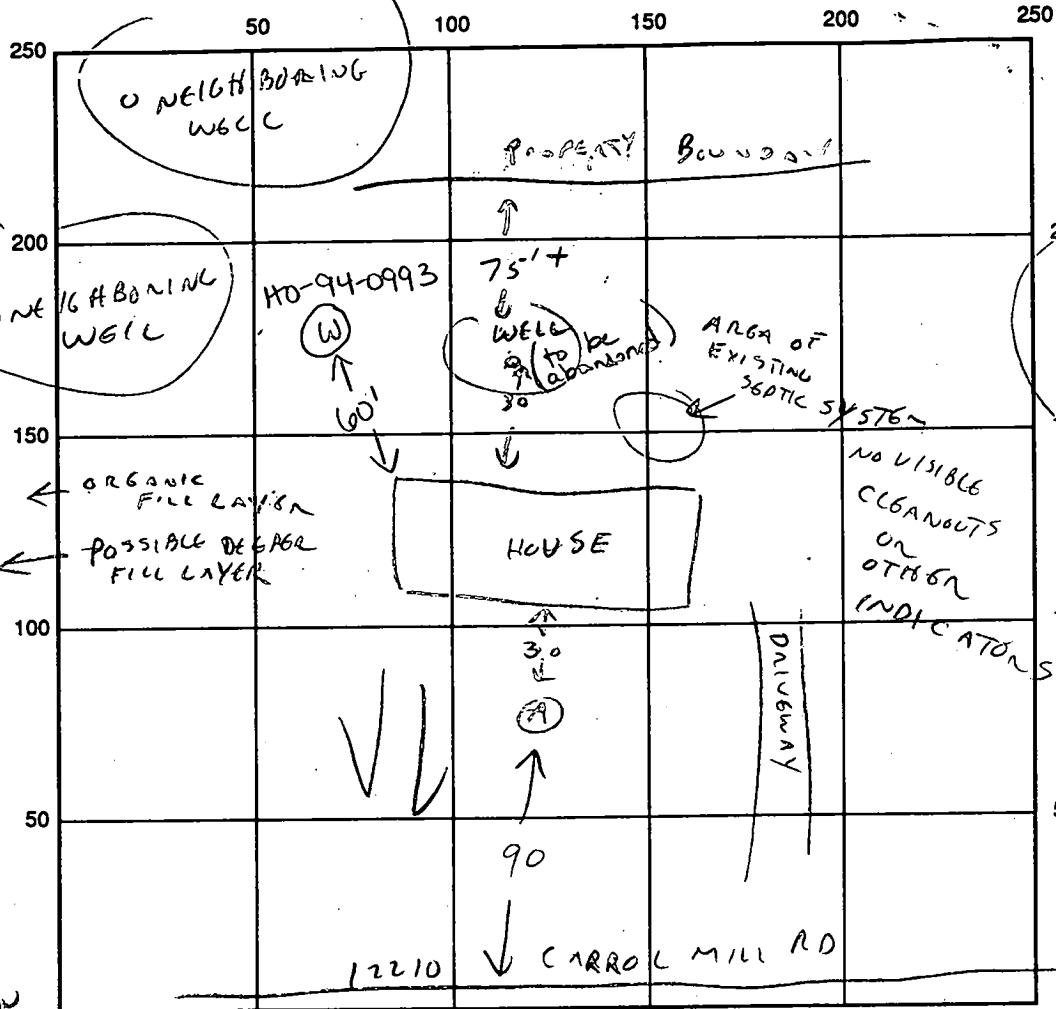
PERMIT VOID AFTER TWO YEARS

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 PVA 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

P 57382B



MISC. FILL
 ORGANIC FILL 3 1/2
 BEIGE CLAY COARSE 5'
 ORANGE CLAY
 ROCK 9
 V. DAMP SEEPAGE 11
 3
 15

SEVERE ROCK AT 9' ON WEST HALF OF HOLE ONLY

TOUSUPPORT B00102871 PROPOSES EXPANSION

TEST RESULTS UNSUCCESSFUL

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: SOIL CONDITIONS IN FRONT YARD NOT SUITABLE FOR SEPTIC SYSTEM EXPANSION - FILL, CLAY, ROCK, WATER. BACK YARD NOT AVAILABLE DUE TO PROXIMITY TO NUMEROUS WELLS.

3-25-97 WPI OK TO COVER WELL LINE P.A. 3.5' BELOW GRADE, CASING 2' ABOVE GRADE, 2 PIECE WATER TIGHT CAP KM

DATE SYSTEM APPROVED _____ INSPECTOR: C. Wilbur 11/12/96

FILE INQUIRY FORM

Property Address: Woodmark, Lot 56; 12210 Carroll Mill Rd

2/23/04 KN spoke to Ron Pitt concerning contemplation of kitchen expansion.

Review of file indicates POTENTIAL future repair area near back.

Mr Pitt is aware of 10' setback to septic tank & 20' to easement / closest trench/drywell location.

Mr. Pitt to come in for file review & copies. KN told him 2 copies free then \$0.60 per page.

KN

Also, told him possible repair area may be req'd by health dept via perc test prior to BP approval.

KN

#57382-B
Mr. Pitt
Carroll Mill Rd



11/10/96
TALKED TO GREGORY'S
ABOUT "ALL POSSIBILITIES"
THE MOST LOGICAL OF WHICH,
IF THE PROPOSAL WERE TO CONTINUE,
WOULD BE FOR REPLACEMENT OF THEM
WELL TO A LOCATION THAT WOULD
ALLOW SEPTIC SYSTEM
EXPANSION IN THE
REAR YARD.
THEY WILL
CONSIDER THE
MATTER FURTHER
AND ADVISE
OF THEIR INTENT.
(CW)

HOWARD COUNTY HEALTH DEPARTMENT

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

November 14, 1996

Mr. David Gregory
12210 Carroll Mill Road
Ellicott City, Maryland 21042

RE: Percolation Test Results
Woodmark Subdivision - Lot 56
12210 Carroll Mill Road

Dear Mr. Gregory:

Percolation testing was conducted at the above referenced property on November 12, 1996 for the purpose of establishing that site conditions were suitable for septic system expansion as needed to support your proposed addition to the residence (Building Permit Application No. B00102871).

Regrettably, the results were not encouraging. The single test hole dug at the highest portion of the front yard that was practical for septic system installation was unsuccessful. The test hole revealed fill dirt to 3 1/2' or 5'; then clay to 9 feet. Deeper zones of that same test hole revealed rock and water table complications.

Higher locations in the back yard were not evaluated. The well locations on this lot and on the several surrounding properties made it difficult to envision that the necessary septic area could be established while still maintaining adequate separation from the various wells.

A request for further evaluation would require submission of an accurately scaled drawing showing: property boundaries, building footprint, well and septic locations on this property, well locations on surrounding properties, and slope.

While no definitive conclusion can be reached without the benefit of the requested site plan, it seems likely that the only path towards a favorable outcome would be for relocation of the well in order to establish sufficient area for the required septic system expansion.

Should you wish to continue the review, or discuss any questions you may have, please contact me at the below address or by calling (410) 313-2640.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW:jr

Enclosures

cc: Stan Rider, Builder

Department of Licenses and Permits

File

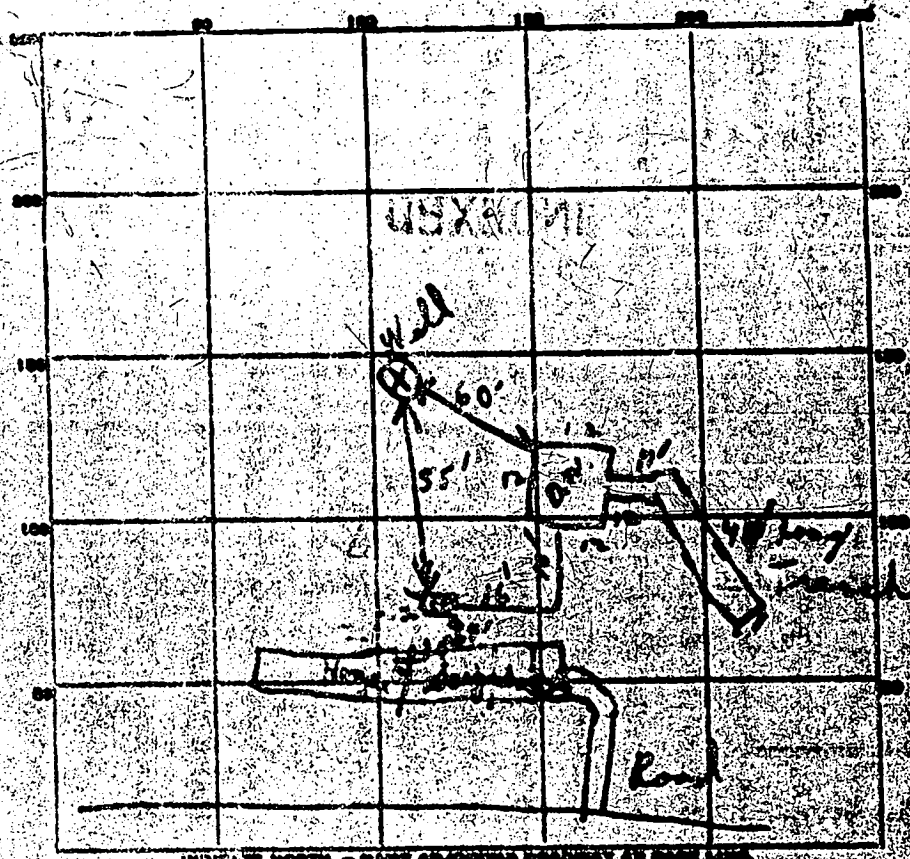
Bureau of Environmental Health

3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544

Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2644

Food Protection Program (410) 313-2642 TDD (410) 313-2323

250
270
520



PERMIT CARD No card

SEPTIC TANK LEVEL OK CLEANOUTS 1

DISTRIBUTION BOX LEVEL

TILE FIELD DEPTH FT. TRENCH WIDTH FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 45 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA

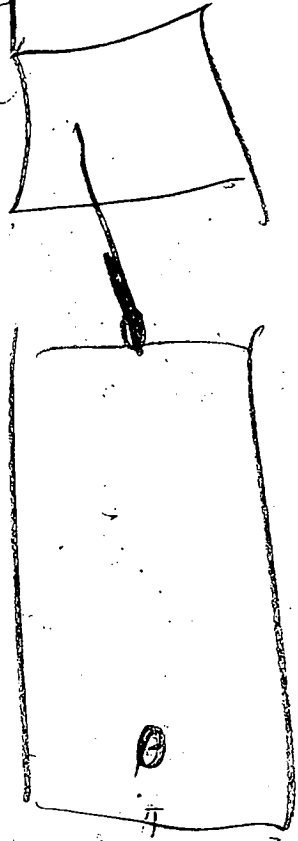
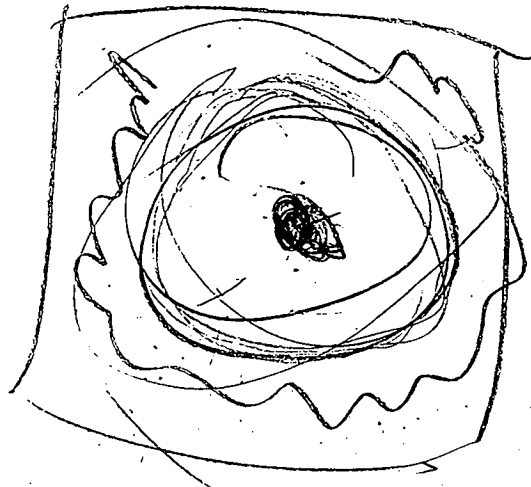
SEEPAGE PITS OUTSIDE 48 FT. DEPTH BELOW INLET 5.5 FT.

ABSORBENT AREA SQ. FT.

REMARKS 6/12/22 Need cleanouts on septic tank
4 p. well. Hold for supervisor 4' off of house
S.T. not connected to trench not completely
insured at time of inspection. CBS. Received
with Fred Faramelli stated everything 55' from
well. Even though 55' from well. Mr. Floyd to
call office at home of S. F. to
TANK ALONG SIDE OF GARAGE. SEE NOTE
CBS - FF

DATE SYSTEM APPROVED INSPECTOR

7 10 12



Fluoro

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 3

DATE 9/28

1732
1972-13075

Jack Frank

IS PERMITTED TO INSTALL SEWAGE

ADDRESS 5th Oaks Road, Glenside, Md.

PHONE 286-2222

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Woodmont, Inc.

ROAD Carroll Hill Rd.

PROPERTY OWNER M. S. Roberts

ADDRESS _____

SPECIFICATIONS - 4 SECTIONS

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

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

SEPTIC TANK CAPACITY 1,250 GALLONS

FOR GARAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%

OTHER dry well - 100 sq. ft. absorbent sidewall area per section 10'

4' sq. of non-absorbent ground. The system shall be installed on a minimum of

11 sq. ft. of non-absorbent ground. The system shall be installed on a minimum of

when facing lot from Carroll Hill Road. incl 16" x 2" horizontal pipe 10' x 10' x 10'

NOTE: ALL PIPS FROM HOUSE TO SEPTIC TANK MUST BE GLEP TYPE hand 40' x 10' x 10'

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL SCHED PIPS ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY D. H. [Signature]

DATE 10/1/72

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER IN PLACE UNTIL INSPECTED AND APPROVED.

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

13075

APPLICATION

SEWAGE DISPOSAL TESTING

A 13023
P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

*Sights read - 3 between - 198' gal
2000 gal.
1400*

ELLICOTT CITY

DISTRICT 1

DATE 9/6/67

*4 1/2 ft. above ground
Dig Well 100 sq ft. abundant sidewalk area per between 8 ft. from lot front
under pipe. Permit for dig well below grade to 11 ft.
Place Dig Well 85 ft. from front lot line and 30 ft. from right side line as
seen under paving lot from corner of lot.*

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 Neopark, Inc. c/o H. A. Wakefield

ADDRESS 231 Mathan Rd., Ellicott City, Md.

PROPERTY LOCATION:

SUBDIVISION Neopark, Inc. LOT NO. 56, Blk. 2, Sec. 3

ROAD AND DESCRIPTION Mathan Rd.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____ PHONE 7424

ADDRESS _____ PHONE _____

SIZE OF LOT 180' x 230' x 189' x 270' TYPE BLDG. 2 1/2

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT H. A. Wakefield

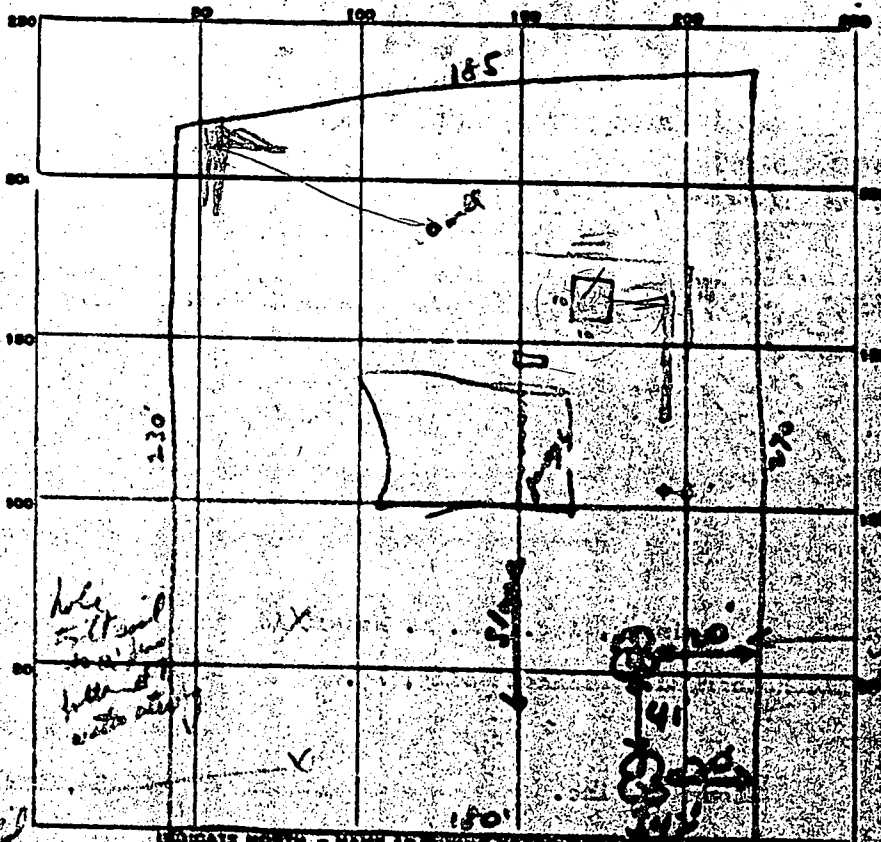
APPROVED BY W. Morgan FOR Ray Well DATE 10/14/68

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADDRESS AND DISTANCE TO ROAD

Carroll Mill Rd

light soil
to 3' depth

DATE	TEST NO.	DEPTH	PRE-TEST		TEST 1' STOP		TIME
			START	STOP	START	STOP	
9/16/67	1	5'	10:57	Overtime			
	2	10'	10:58	11:03	11:03	11:11	Paint
	3	4 1/2'	10:56	10:57	10:57	10:59	2 min
	4	10'	10:57	10:58	10:58	10:59	1 min

SOIL AUGER FINDING

TESTED BY JHK + Dmy

REMARKS If sep system high use 3-4

Lot 56 E 3

C 105701
1 2 3
THIS NUMBER IS TO BE PRINTED IN COL. 2-6 ON ALL CARDS

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE 6800, ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT A13073

THIS REPORT MUST BE SUBMITTED WITHIN 10 DAYS AFTER WELL COMPLETION
FILL IN THIS FORM COMPLETELY
COUNTY NUMBER 2866

DATE WELL COMPLETED 1-22-72
DEPTH OF WELL 143
NO. OF FEET TO NEAREST FOOT 00

PERMIT NO. FROM "PERMIT TO DRILL WELLS" 70-72-0772
DRILLER IDENTIFICATION NO. 42

OWNER R. L. ...
STREET OR RFD 1313 ...
POST OFFICE ...

WELL DESCRIPTION

DESCRIPTION (USE ONLY THESE TERMS)	FEET FROM	TO	UNDER IF WATER BEARING
Gravel	0	1	
Stone	1	2	
Granite	2	143	

GROUTING RECORD

WELL WAS GROUTED (CIRCLE APPROPRIATE BOX)
TYPE OF GROUTING MATERIAL (CIRCLE BOX)
CEMENT 00
DEBRISITE CLAY 00
NO. OF BAGS 0
LBS. OF POWDER 100
GALLONS OF WATER 0
DEPTH OF GROUT SEAL TO NEAREST FOOT:
FROM 0 FT. TO 23 FT.

CASING RECORD

TYPE OF CASING MATERIAL (CIRCLE BOX)
STEEL 00
CONCRETE 00
PLASTIC 00
OTHER 00
MAIN CASING TYPE S T
DIAMETER (NEAREST INCH) 5
TOTAL DEPTH OF MAIN CASING TO NEAREST FOOT 143

OTHER CASING (IF USED)

DIAMETER (NEAREST INCH) 0
DEPTH (FEET) 0

SCREEN RECORD

TYPE OF SCREEN (CIRCLE APPROPRIATE BOX)
STEEL 00
PLASTIC 00
OTHER 00
DEPTH (NEAREST WHOLE FOOT) FROM 0 TO 0
DIAMETER OF SCREEN 0 (NEAREST INCH)
GRAVEL PACK 0
IF WELL DRILLED WITH A PLACING WELL CIRCLE BOX 00 P

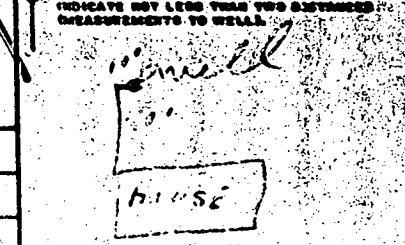
PUMPER TEST

FORMS PROVIDED FOR READING RECORDS
PUMPER ON
DURATION OF TEST (OR NUMBER OF GALLONS)
METHOD USED TO MEASURE PUMPING RATE
WATER LEVEL (MEASURED FROM LAND SURFACE)
RISE 0
FALL 1.50
TYPE OF PUMPER USED (CIRCLE APPROPRIATE BOX)
A 00
B 00
C 00
D 00
E 00
F 00
G 00
H 00
I 00
J 00
K 00
L 00
M 00
N 00
O 00
P 00
Q 00
R 00
S 00
T 00
U 00
V 00
W 00
X 00
Y 00
Z 00

CAPED INSTALLATION

TYPE OF PERMITS OBTAINED (CIRCLE APPROPRIATE BOX)
NONE - GET APPROVED BY A.P. OR G.P.
CIRCULAR WELL (CIRCLE APPROPRIATE BOX)
CLOSURE FOR SERVICE (TO NEAREST GALLERY)
PUMP HEAD POWER
PUMP COLUMN LENGTH TO NEAREST FOOT
CAPED HEIGHT (CIRCLE APPROPRIATE BOX)
A ABOVE
B BELOW
LAND SURFACE (NEAREST FOOT) 0

LOCATION OF WELL ON LOT



CIRCLE APPROPRIATE BOXES
A WELL WAS ABANDONED AND SEALED WHEN THIS REPORT WAS COMPLETED
B ELECTRIC LOG OBTAINED
C TEST WELL CONVERTED TO PRODUCTION WELL
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED IN THE ABOVE-CAPTIONED "PERMIT TO DRILL WELLS", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.
DRILLER NAME
DATE
SIGNATURE

OWN USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CASING
LOG INDICATOR
OTHER DATA AVAILABLE

B 1 **7492** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

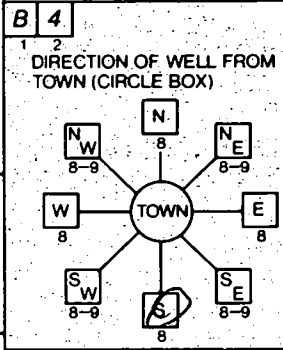
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
Hd-94-0993
 fill in this form completely

Date Received (APA) **1/20/96**
 OWNER INFORMATION
Gregory **Dave**
 Last Name Owner First Name
12210 **CARROLL** **MILL** **RD**
 Street or RFD
ELK COTTAGE **CITY** **MD** **21042**
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
WOODMARK SUBDIVISION
 SECTION **3** LOT **56**
WEST FRIENDSHIP NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **3** MI

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
Joseph L. Wayne
 Driller's Name License No. **24**
Joseph L. Wayne Well Drilling
 Firm Name
5512 Ridge Rd. Mt. Airy, Md. 21771
 Address
Joseph L. Wayne **11/20/96**
 Signature Date



12210 Carroll Mill Road
 NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
220 DISTANCE FROM ROAD
 ENTER FT OR MI **FT**
 TAX MAP: _____ BLK: _____ PARCEL _____

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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)

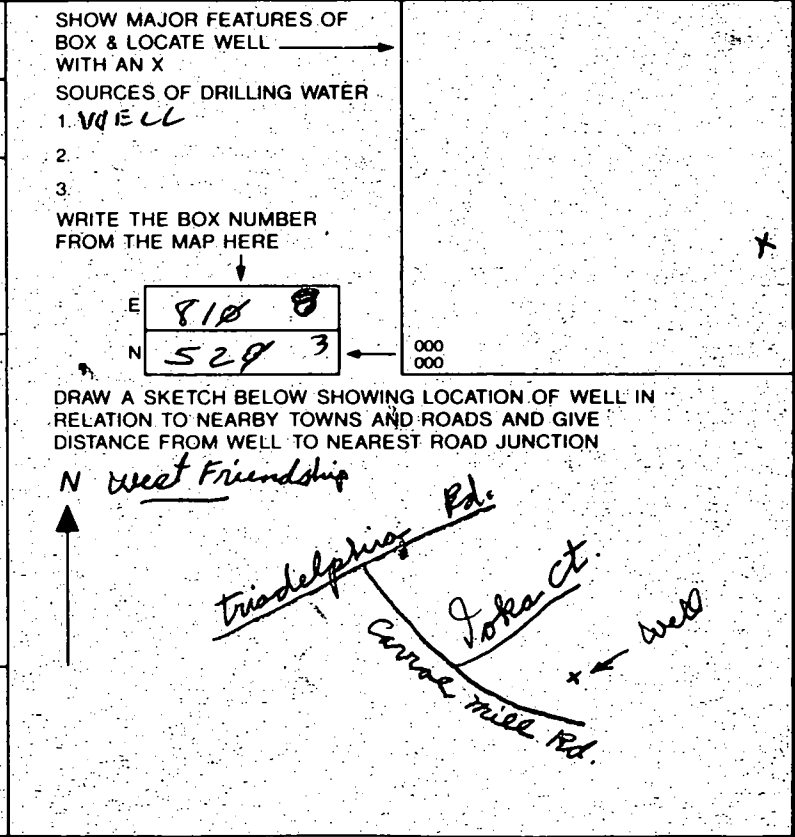
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME
13 COUNTY NO.
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **1/22/96** **Civ. Wilson** **11/21/97**
 CO SIGNATURE EXP. DATE
 NORTH GRID **523000** EAST GRID **0818000**

APPROXIMATE DEPTH OF WELL **260** FEET
 APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 D THIS WELL WILL DEEPEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **CW** WRITE INITIALS IN BOX PERMIT No. **Hd-94-0993**



C1 7893 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. COUNTY NUMBER 13

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 1/25/96

Depth of Well 380 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-0993

OWNER GREGORY DAVE STREET OR RFD 12210 CAROL MILL RD TOWN WEST FRIENDSHIP SUBDIVISION WOODMARK SECTION 3 LOT 56

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows: Sand (0-36), Gray mica Rock (36-380)

GROUTING RECORD (yes/no) Y N

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 15 NO. OF POUNDS 1410

CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE 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 insert appropriate code below ST BR HO PL OT STEEL BRASS BRONZE OPEN HOLE PLASTIC OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES Y NO N

CIRCLE APPROPRIATE LETTER 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.

TYPE: MWD/MSD/MGD DRILLERS LIC. NO. 24 Joseph L Maype

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO.

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

DEPTH (nearest ft.) table with rows 1-3 and columns 8-36

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 15 METHOD USED TO MEASURE PUMPING RATE Air

WATER LEVEL (distance from land surface) BEFORE PUMPING 47 ft.

WHEN PUMPING 293 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

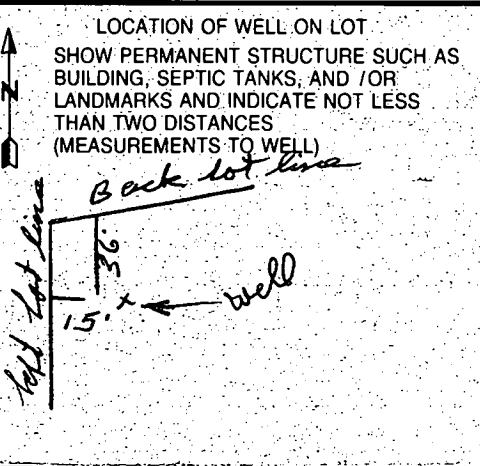
PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO

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) PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE (nearest foot) 2



WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

new well hooked up 3/25/97
 but not yet in service
 per as per report instructions
 on

DATE WELL ABANDONED: 3/27/97 (month/day/year)

HO-72-0176 (NO 726)

HO-94-0993

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: RON SMITH - CARROLL WATER SYSTEMS

WELL DRILLERS LICENSE NUMBER: N/A

CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: David Gregory

SEE SANITARIAN WITNESS BELOW

* WELL LOCATION: 12210 Carroll Mill Road

COUNTY: Howard
 NEAREST TOWN: Ellicott City
 TAX MAP 23 BLOCK 12 PARCEL 39
 SUBDIVISION: Woodmark
 SECTION: 3 LOT: 56

	(X)
000	
000	

MARYLAND GRID COORDINATES

E 0818
 BOX NUMBER
 N 524

TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

SHOW WELL LOCATION BY X WITHIN BOX

USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC INDUSTRIAL

TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) _____

SIZE OF CASING: 4 INCHES IN DIAMETER

DEPTH OF WELL: 276 FEET DEEP

WAS ANY CASING REMOVED? YES NO
if yes, length removed, in feet: 3

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
PORTLAND	2	29
WASHED GRAVEL	29	276

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN: Craig Wells

SAN REGIST # 0808

MWD/MSD/MGD

LICENSE #

CIRCLE ONE

4/4/97

DATE

CARROLL WATER SYSTEMS, INC.

Water Supply & Water-Conditioning Equipment
 525 Old Westminster Pike • Westminster, MD 21157
 (410) 876-5100 • (800) 978-5100 • FAX (410) 751-6468

ECOWATER
 SYSTEMS



SERVICE INVOICE

12762

IN WARRANTY OUT OF WARRANTY RENTAL UNIT DATE: _____ TIME: _____

NAME: David Gregory (Home owner) HOME PHONE: _____
 ADDRESS: 12210 Carroll Mill Rd WORK PHONE: _____
Ellicott City, MD 21042 PAGER #: _____

Water Pump: _____ Model: _____ Serial No. _____

TYPE OF SERVICE: INSTALL FILTER SVC FILTER SVC PUMP SVC OTHER WT NC
 INSTRUCTIONS: Abandon old well

LABOR: <input type="checkbox"/> 1 person <input type="checkbox"/> 2 persons <input type="checkbox"/> 3 persons	Time In:	Time Out:	Job Hours:	Travel Hours:	Total Hours:

MATERIAL	PRICE	MATERIAL	PRICE
Well Depth 276'		#6 washed stone fill to	
Casing 25'		5' Below casing.	
No Existing TAG		CUT off 1' Below grade	
		Finished with portland cement	
ON 3-27-97 Carroll Water Systems Filled well at 12210 Carroll Mill Rd. with #6 washed stone to about 10' below top of casing cut to 1' below grade and Filled balance with			

WELL TAG # portland cement PERMIT # _____ TOTAL MATERIAL CHARGES \$ _____
cap is in place 4-4-97

MAP COORDINATES _____ PAY THIS AMOUNT \$ _____

Parts and Service Received: **ACCEPTED IN LIEU OF INSPECTION OF FINAL ABANDONMENT SMIT REPORT 29 OF PORTLAND.** Work Order Completed: _____
 Remarks: _____ Serviceman's Signature: _____

RECEIVED: \$ _____ RECEIPT FOR PAYMENT IN FULL PARTIAL
 *BALANCE DUE OF \$ _____ DUE ON _____ PAYMENT OF TOTAL CHARGES FOR JOB
 Received by: _____

Handwritten notes:
 ACCEPTED IN LIEU OF INSPECTION OF FINAL ABANDONMENT SMIT REPORT 29 OF PORTLAND.
 4/4/97
 How CO. HEALTH

12210 Carroll Mill Road
Ellicott City, Maryland 21043

June 12, 1997

Mr. Craig Williams
Howard County Department of Health
3525 Ellicott Mills Drive
Suite 8
Ellicott City, Maryland 21043

Dear Mr. Williams:

In order to accommodate the Health Department we have drilled and placed a new well to free up future septic disposal area necessary to support the potential not actual increase in flow necessary to our newly constructed addition. The final request of the Health Department was to install an additional tank. We would like to request that this final requirement be waived. The additional tank is not needed to support the current septic condition, and could easily be added whenever future repair is needed. This waiver would relieve us of additional burden at this time.

Thank you for your time and consideration in this matter.

Sincerely,

David Gregory

1298-7

SCALE: 1"=40'

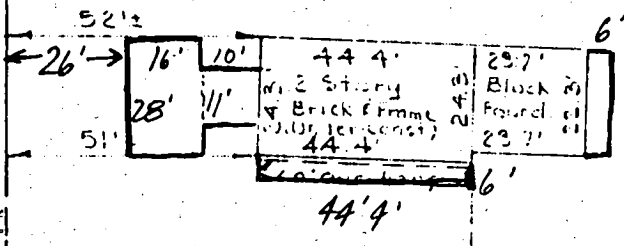
N 38° 23' 28" W - 182.47'

11-22-96
 Building permit
 was released
 based on
 following -
 - A successful
 well was
 drilled - 159 ft
 - septic repair
 permit has
 been applied
 for
 - C. Williams
 confident on
 soil conditi
 behind house
 for repair

CE 10' UTILITY EASEMENT

New well drilled here

LOT No. 56
 BLOCK 'E'
 SECTION No. 3
 WOODMARK
 Well 15/40
 x Septic



75' BUILDING RESTRICTION LINE

N 28° 55' 35" W - 180.00'

270.00' N 61° 04' 25" E

290.00' to P.C. @ CARROLL MILL COURT

CARROLL MILL ROAD

This is to certify that I have surveyed the property known as: Lot No. 56 - Block 'E' - Section No. 3 -
"WOODMARK", Third Election District, Howard County, Maryland

for the purpose of locating the improvements thereon, and the improvements are located as shown.

Signed this 26TH day of MAY 1972.

PURDUM AND JESCHKE
 ENGINEERS AND LAND SURVEYORS
 3697 PARK AVE.
 ELLICOTT CITY, MARYLAND 21043

Corliss Kooch
 Engineer and Land Surveyor

This plat is not intended for use in the establishment of property lines.



HOWARD COUNTY HEALTH DEPARTMENT

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

July 15, 1997

Mr. David Gregory
12210 Carroll Mill Road
Ellicott City, Maryland 21043

RE: Building Permit Application
Serial Number: B00102871

Dear Mr. Gregory:

This office has received your letter, dated June 12, 1997, requesting a waiver to the septic system repair requirements to support the new addition. All issues related to your septic system have been resolved.

A new well was drilled on your property November 25, 1996 and the existing well was properly abandoned on March 17, 1997. As of this date, this office has not received confirmation or an inspection request of the house connection from the new well. Please call this office at 410-313-2640 to request an inspection.

Also, a water sample request has not been received in this office to verify that the well water is bacteriological safe to drink. Please make arrangements for the water sample to be taken by calling 410-313-2644 so that a Certificate of Potability can be issued and this will complete the State's requirement for replacement wells.

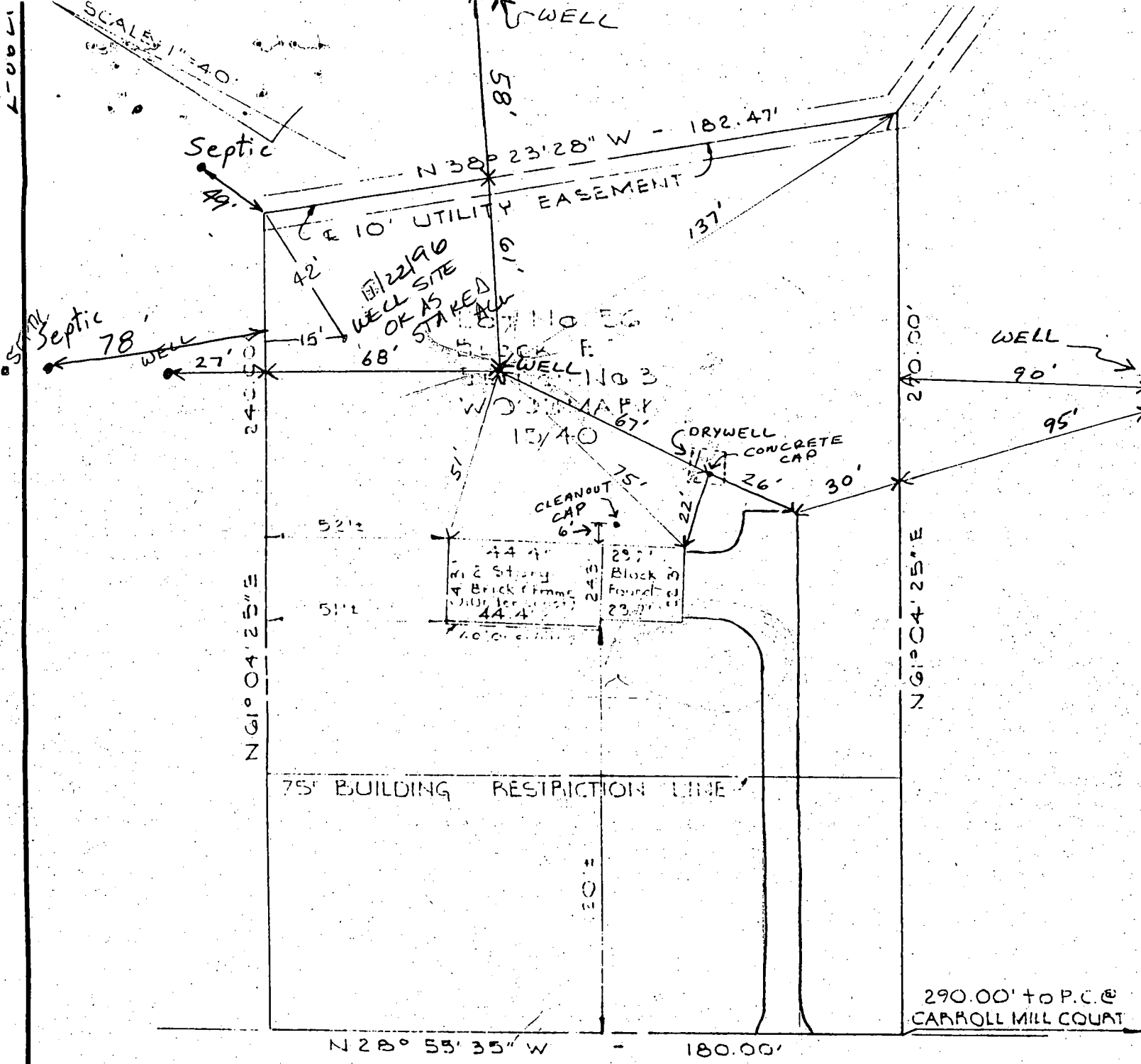
Thank you for your cooperation in this matter.

Very truly yours,

Glen Savage, R.S.
Water and Sewerage Program

GS:jr

17-00-7



CARROLL MILL ROAD

GREGORY RESIDENCE
 12210 CARROLL MILL ROAD
 ELLICOTT CITY MD.

This is to certify that I have surveyed the property known as Lot No. 56 - Block 'E' - Section No. 3 - "WOODMARK"; Third Election District, Howard County, Maryland

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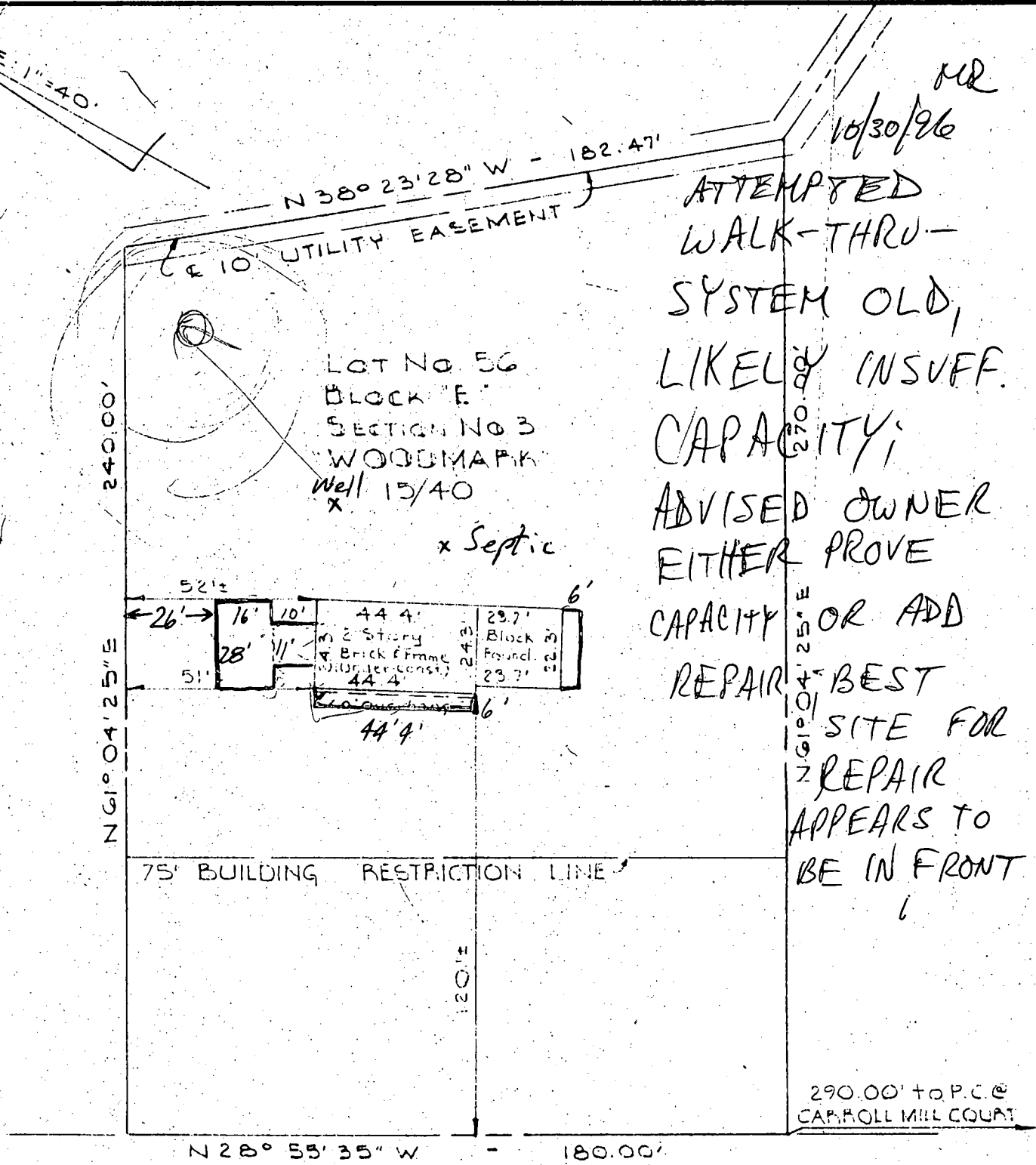
Signed this 26TH day of MAY 1972.

PURDUM AND JESCHKE

William H. Jacobs

1-862-7

SCALE 1"=40'



MR
 10/30/96
 ATTEMPTED
 WALK-THRU-
 SYSTEM OLD,
 LIKELY INSUFF.
 CAPACITY;
 ADVISED OWNER
 EITHER PROVE
 CAPACITY OR ADD
 REPAIR
 BEST
 SITE FOR
 REPAIR
 APPEARS TO
 BE IN FRONT

CARROLL MILL ROAD

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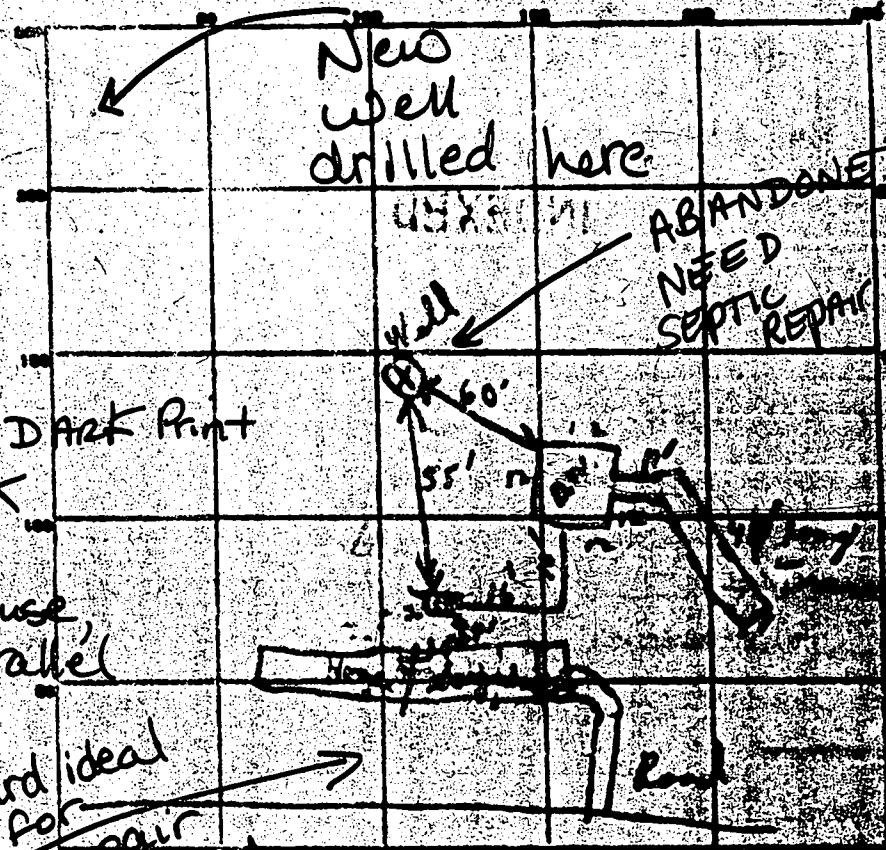
Signed this 26TH day of MAY 1972

Cerelia K. Roach
 Engineer and Land Surveyor

PURDUM AND JESCHKE
 ENGINEERS AND LAND SURVEYORS
 3697 PARK AVE.
 ELLICOTT CITY, MARYLAND 21043

This plat is not intended for use in the establishment of property lines.

250
270
520



2/23/04 Dark Print
Septic tank
IS 6'
From house
laying parallel

Front yard ideal
location for
septic repair
but failed

PERMIT CARD

SEPTIC TANK LEVEL 05 CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

TILE FIELD DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 45 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA _____

SEEPAGE PITS, INCH DIAMETER 48 FT. DEPTH BELOW INLET 6.5 FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 6/12/12 Need cleanouts on septic tank
& p. well. Hold for supervisor 4' off of line
S.T. not connected to trench not completely
insured at time of inspection. CBS
with Fred Escamilla stated everything 55' from
well. Front yard 55' from well. The Front to
call off of line.

DATE SYSTEM APPROVED _____ INSPECTOR CBS - FF