

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

A 513633-B

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

INDEXED

DATE SYSTEM APPROVED \_\_\_\_\_

INSPECTOR \_\_\_\_\_

15-101016

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SUBDIVISION Village of River Hill LOT 60 ROAD 6420 Autumn Sky Walk

PROPERTY OWNER Greenfield

ADDRESS \_\_\_\_\_

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

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**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A  
513633  
B

C 1 06636

SEQUENCE NO. (MDE 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.

COUNTY NUMBER W 511486

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

ST/CO/USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED

8/3/99

Depth of Well

400

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HG 94-2327

OWNER Greenfield B. James STREET OR RFD 5420 Autumn Sky Way TOWN Clarksville SUBDIVISION Village of River Hill SECTION 1 LOT 60

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 12 NO. OF POUNDS 1200 GALLONS OF WATER 72 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 28 ft.

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 30 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 400 TYPE OF PUMP USED (for test) A piston C centrifugal J jet P piston R rotary S submersible T turbine O other

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

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include TOP SOIL, Sand Stone, Mica, Quartz, Mica.

CASING RECORD (S) (T) (C) (O) (P) (L) (O) (T) STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE (S) (T) Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot)

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

SCREEN RECORD (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

Table with columns: T, A, C, R, E, N, S, L, O, T, S, I, Z, E, D, I, A, M, E, T, E, R, O, F, S, C, R, E, E, N, D, I, A, M, E, T, E, R, O, F, S, C, R, E, E, N, (N, E, A, R, E, S, T, I, N, C, H)

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES or 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)

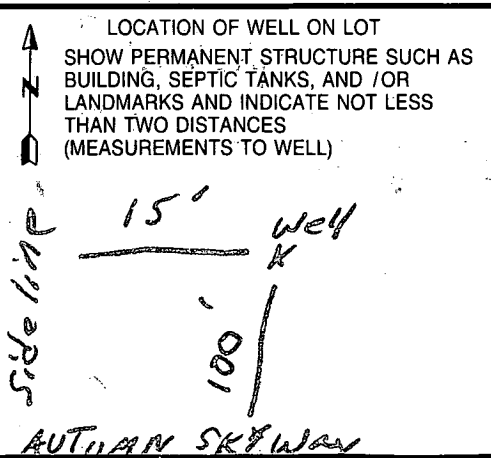
NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N) CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 M W D 0440 George F. Esterday DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 M W D 501 Charles K. Bell

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA



B 1 8746 SEQUENCE NO. (MDE-USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL STATE PERMIT NUMBER H0-94-2327  
 1 2 3 6  
 70 fill in this form completely 79  
 please print or type

Date Received (APA) 3/26/99 OWNER INFORMATION RN 7794  
 8 MM DD YY 13  
 15 Last Name Greenfield Owner Jim First Name  
 36 C/O Columbia Builders/ P. O. Box 999 Street or RFD  
 57 Columbia, Md 21044 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL 513633-15  
 8 COUNTY Howard 21  
 23 SUBDIVISION Village Of River Hill 42  
 SECTION 1 LOT 60  
 44 46 48 50  
 52 NEAREST TOWN Clarksville 71  
 MILES FROM TOWN (enter 0 if in town) 2 M 1  
 73 76 77 78

DRILLER INFORMATION  
 76 Driller's Name George F. Easterday License No. M W D 040 81  
 Firm Name L. Franklin Easterday, Inc.  
 9265 Brown Church Rd. MT Air, Md 21171  
 Address  
 Signature George F. Easterday Date 3/25/1999

B 4 1. 2. DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 6420  
 11 Autumn Sky Way NEAR WHAT ROAD 30  
 420 Autumn Sky Way ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  
 WEST 32 EAST  
 SOUTH  
 34 100 37  
 DISTANCE FROM ROAD ENTER FT OR MI 38 39  
 TAX MAP: 35 BLK 3 PARCEL 428

B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5  
 1 2 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500  
 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, DEWATERING  
 PUBLIC WATER SUPPLY WELL  
 TEST OBSERVATION, MONITORING  
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME Howard COUNTY NO. W 511 486  
 STATE SIGNATURE \_\_\_\_\_ INSERT S →  
 DATE ISSUED 7/19/99 CO SIGNATURE Carol Herby EXP/DATE 7/14/00  
 43 MM DD YY 48  
 NORTH GRID 501 000 EAST GRID 0824 000  
 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET  
 24 28  
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. wells  
 2. wells  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E 820 4  
 N 500 1  
 000  
 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  
 8/3/99 No Inspection  
 6/00  
 8/3/99

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

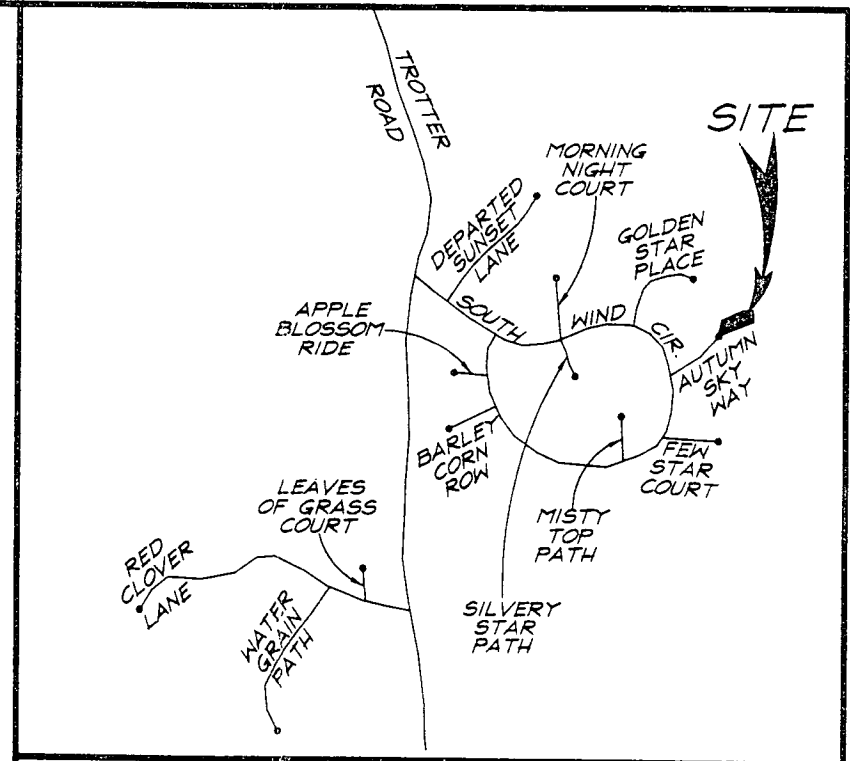
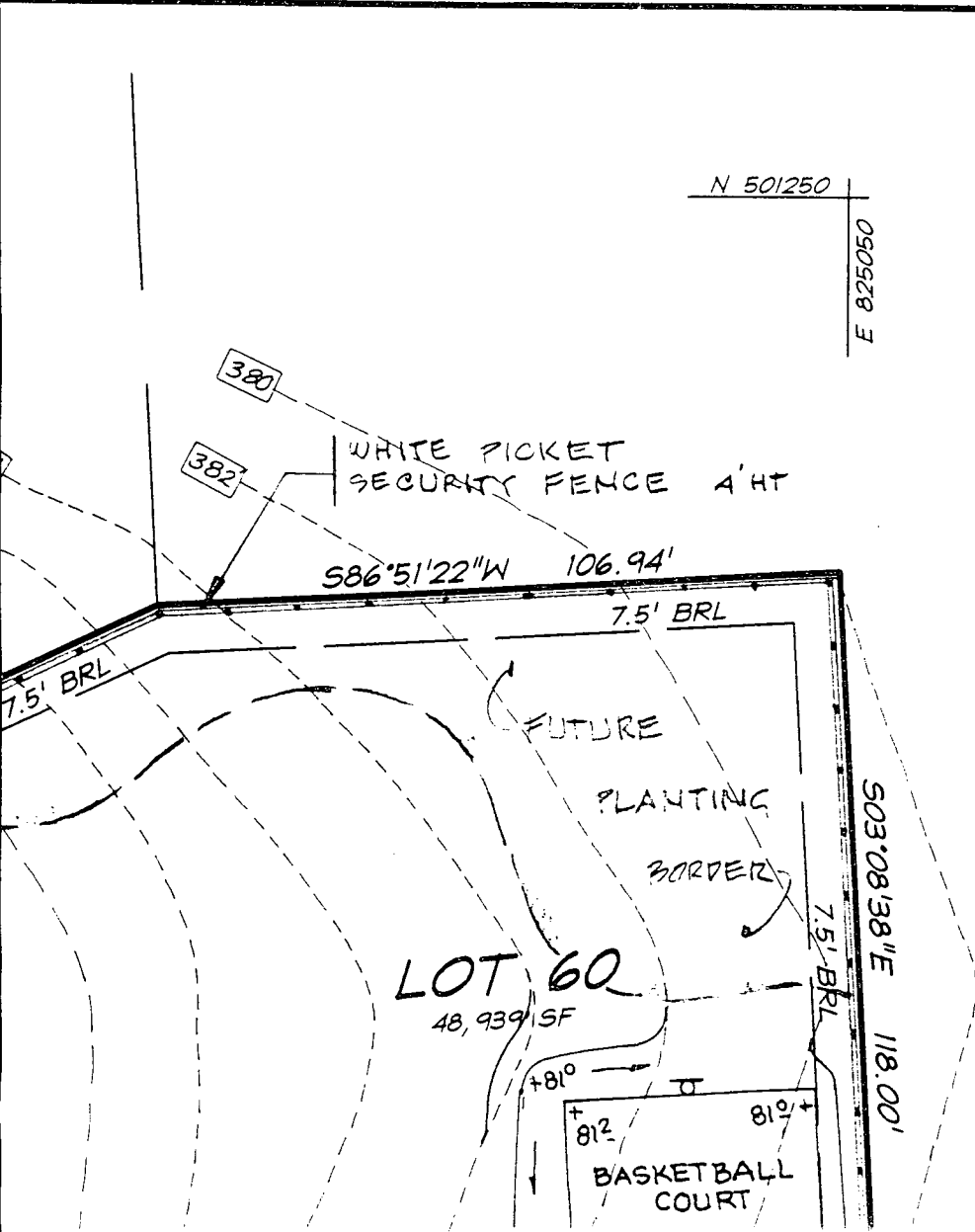
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEMED AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

MAP 14 J7  
 N  
 200m  
 S with wind Cc  
 Autumn Sky Way  
 X

Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_  
 54 63  
 PERMIT No. H0-94-2327  
 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS Yield Test Required - Also maintain proper distance from any utility pipes (water, sewer, gas, electric, etc) that maybe in area.





VICINITY MAP

# **ColumbiaBuilders**

June 1, 1999

Mr. Ron Pinkley  
Heath Department  
3525 Suite H Ellicott Mills Drive  
Ellicott City, Maryland 21043

Re: 6420 Autumn Sky Way  
Building Permit #B00117218

Dear Mr. Pinkley:

We have contracted with Easterday Drilling to drill a well on the above referenced property. Although this property falls on the public water and sewer line, we are requesting a well for agricultural purposes to economically maintain the landscape and swimming pool.

Very truly yours,



B. James Greenfield

BIG/drb

E:\CONSTRH\_SF160\_WELL.DOC

**Columbia Builders, Inc.**

P.O. Box 999  
Columbia, Maryland 21044  
Phone: (410) 730-3939