

5/29/79
final

05-381932

File

5/25/79
am. if possible

PERMIT

P 29730

A 24864

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

INDEXED

DATE 4/18/79

Robert L. Orndorff IS PERMITTED TO INSTALL ALTER

ADDRESS 9401 - 5th Street, Laurel, Md. 20810 PHONE 725-~~5969~~ 4969

SUBDIVISION Wesley Hills ROAD 11448 Rowley Road LOT 4

PROPERTY OWNER F. G. Marker Co., Inc.

ADDRESS 5900 Princess Garden Parkway, Lanham, Md. 20801 Phone: 459-5586

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 134 SQ. FT. per bedroom.

INLET PIPE 5 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 120 FT. FROM front LOT LINE AND 25 FT. FROM left LOT LINE AS SEEN WHEN
FACING LOT FROM Rowley Road.

PLANS APPROVED BY Raymond Hodges DATE 10/13/77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

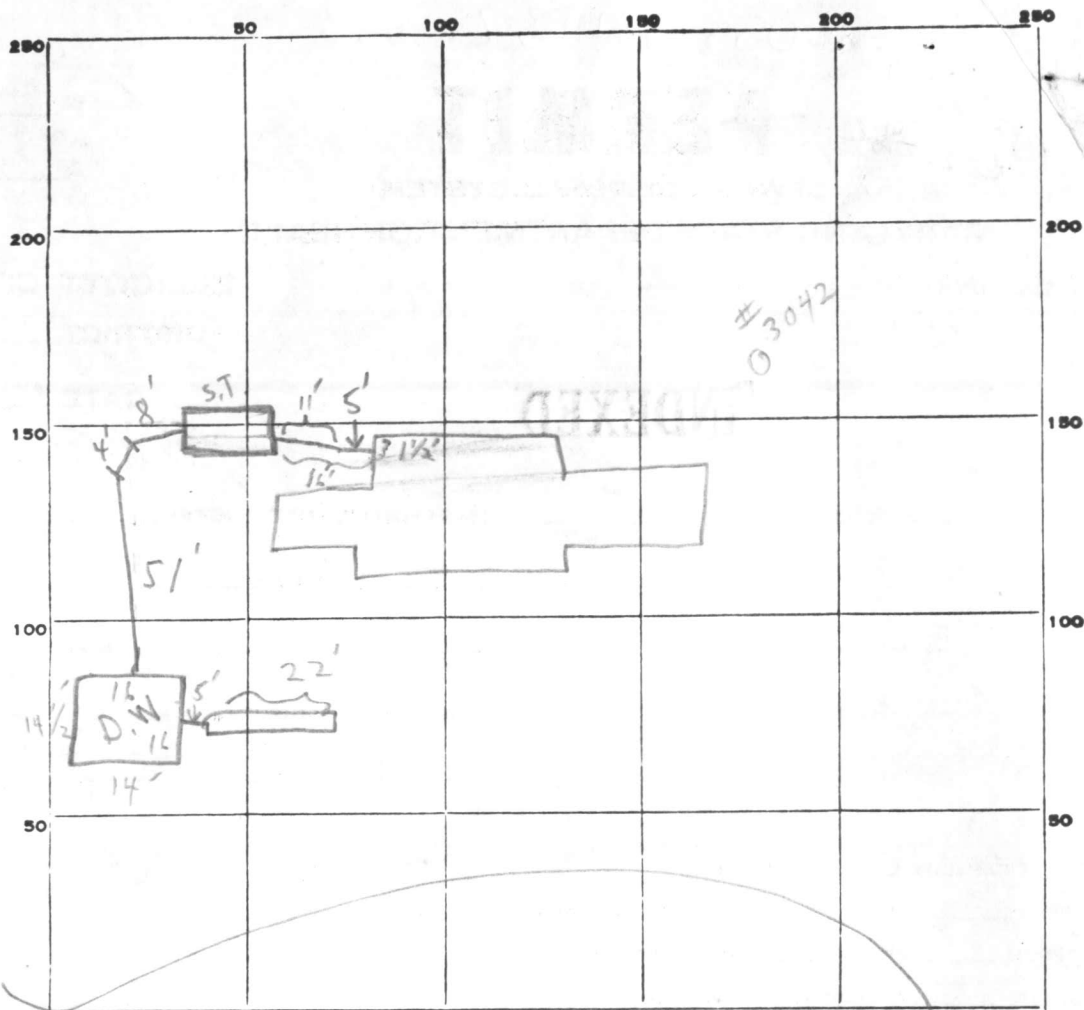
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 ACCEPTED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.**

A24864



PERMIT CARD _____

SEPTIC TANK, LEVEL _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH 7+ IN. TOTAL LENGTH 22 FT. (1) 15 4

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 60 1/2 FT. DEPTH BELOW INLET 7' FT. + (2) 423

ABSORBENT AREA 577+ SQ. FT.

REMARKS _____

5/25/79 checked found ① Partial - no cleanouts; trench only - ok for stones (area slippery + muddy) C.B.S.
 5/29/79 ② Checked - paper on trench to 4' avg. of surface. C.I. all the way to D.Well + to trench C.B.S.

DATE SYSTEM APPROVED _____

INSPECTOR _____

5/29/79 as per above

C.B.S. [Signature]

APPLICATION

A 24864

SEWAGE DISPOSAL TESTING

P. _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

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

DATE 12/1/76

system first

see attached sheet for specs

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 Capital District Wesleyan Church

ADDRESS 10929 Pleasant Acres Drive, Hyattsville 20783 PHONE 559-2626

PROPERTY LOCATION:

SUBDIVISION Wesley Hills LOT NO. 4

ROAD AND DESCRIPTION Kraus Road

SIZE OF LOT 40,000 sq. feet TYPE BLDG. 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT /s/ James W. Kraus, President

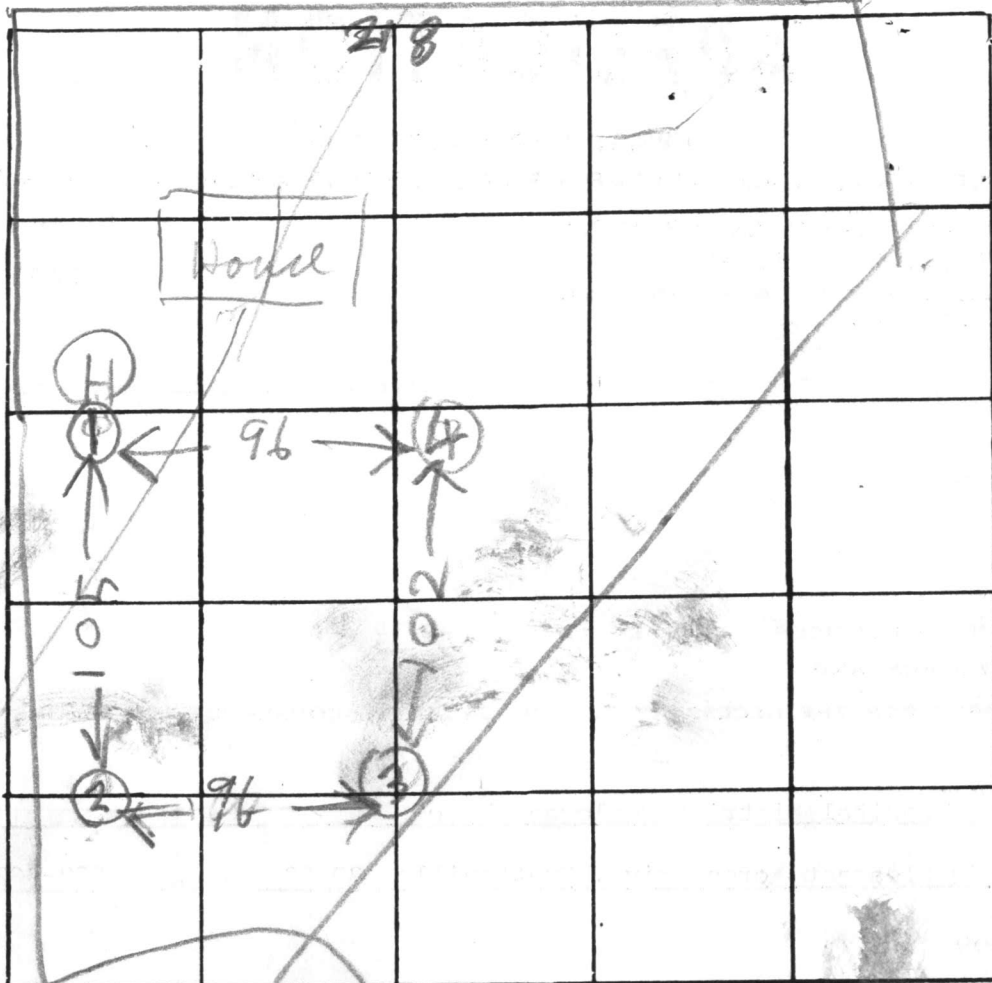
APPROVED BY Raymond Hodge FOR Approved DATE 10/13/77
(KIND OF SYSTEM)

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

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/14/76	1S	5	219	232	232	245	13
	1D	12	219	222	222	234	12
	2S	6	220	230	little pore fluid		
	2D	13	220	225	225	230	5
	3S	6	231	236	236	243	7D
	3D	12½	231	237	237	243	6
	4V	11	TOP 4" CLAY		BOTTOM SANDY		DRY
12/14/76	2M	6½	235	237	237	239	2

REMARKS _____

TYPE OF SOIL _____

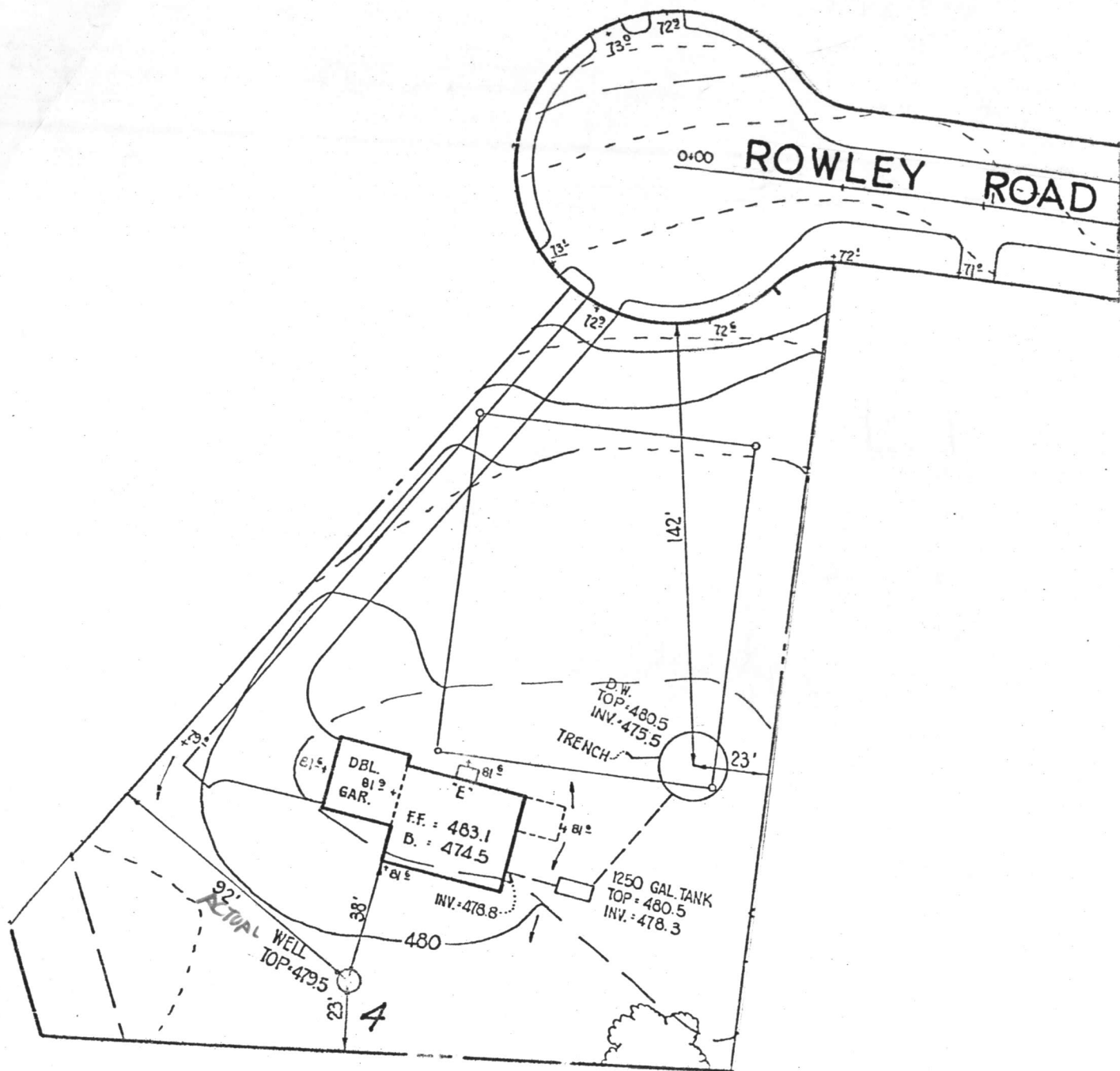
TESTED BY AH & RB ALSO PRESENT: Fyock

air time 8 max depth 5

Lot 4

235
237

6750



1/8/79 PLANS OK VRH

I HEREBY CERTIFY THAT THE MEASUREMENTS AND ELEVATIONS SHOWN HEREON ARE ACCURATE AND CORRECT FOR THIS PROPERTY.

DATE: *1/8/79*

**SITE DEVELOPMENT PLAN
WESLEY HILLS**

JOHNSON, McCORDIC & THOMPSON, P.A.
ENGINEERS • PLANNERS • SURVEYORS
1620 Elton Road
Silver Spring, Maryland 20903

Drawn by	Scale	Date
Checked by	Job No.	File No.
Approved by		

C 1 0380 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WI IN 30 DAYS AFTER WELL COMPLETE

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) _____

DATE WELL COMPLETED 10-27-1978

DEPTH OF WELL 165
 22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-3042
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 238

OWNER W. M. ... LAST NAME F. ... FIRST NAME

STREET OR RFD 5900 ... POST OFFICE ...

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<u>Sand</u>	<u>0</u>	<u>66</u>	
<u>gray med. sand</u>	<u>66</u>	<u>165</u>	

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT C M BENTONITE CLAY B C

NO. OF BAGS 17 NO. OF POUNDS 1759

GALLONS OF WATER 102

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 60 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T CONCRETE C O

PLASTIC P L OTHER O T

MAIN CASING TYPE S T

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 73

OTHER CASING (IF USED)

DIAMETER (INCH)	DEPTH (FEET) FROM	TO
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T BRASS OR BRONZE B R OPEN HOLE H O

PLASTIC P L OTHER O T

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1 71 165

2

3

SLOTSIZE 1, 2, 3,

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 5

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 53 (NEAREST FOOT)

WHEN PUMPING 5 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A AIR P PISTON T TURBINE

C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)

J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON)

PUMP HORSE POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE } LAND SURFACE (NEAREST FOOT)

- BELOW } (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

CIRCLE APPROPRIATE BOXES

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 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 Joseph L. Wayne

(PLEASE PRINT) Joseph L. Wayne

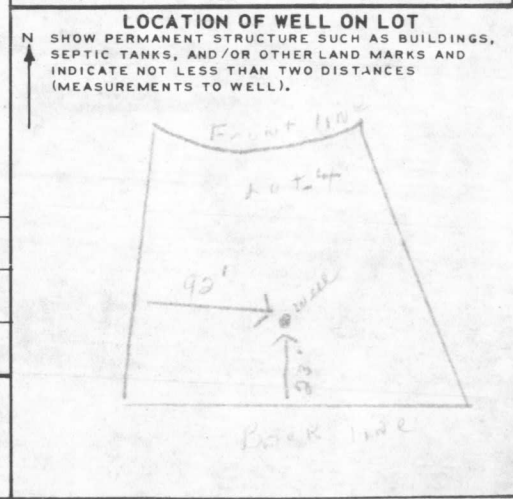
SIGNATURE Joseph L. Wayne

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING T W

LOG INDICATOR (E.R.O.S.) Q

OTHER DATA AVAILABLE 74 75 76



RECEIVED

JAN 29 9 47 AM '70
HOWARD COUNTY
HEALTH DEPT.
ELlicOTT CITY, MD.

NO. 10 100

