

6-21-79 AMP. J.F.

# PERMIT

P 29916  
A 28905

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

05-384052

ELLICOTT CITY  
DISTRICT 5th

DATE 6/13/79

6/14/79  
Kate C.O.  
11.15  
6/18/79 final  
No C.B.D.

**INDEXED**

Bob Orndorff

IS PERMITTED TO INSTALL  ALTER

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

SUBDIVISION Allnutt Farm Estates ROAD 13446 Pond Field Court LOT 16, Sec.2

PROPERTY OWNER John A. Tesk 854-0241

ADDRESS 25 Lake Drive, Plainfield, Illinois

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 300 SQ. FT. in dry well.

INLET PIPE 5 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 10 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT \_\_\_\_\_ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 110 FT. FROM front LOT LINE AND 140 FT. FROM right LOT LINE AS SEEN WHEN FACING LOT FROM the front.

Come off dry well with a 5 ft. earth buffer and begin trench. Trench to be 2 ft. wide, 10 ft. deep, 52 ft. long, 5 ft. of stone and follow contour of ground and be inspected before gravel is installed.

PLANS APPROVED BY Donald W. Monaghan DATE 10/14/78

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 TERRAZO ACCEPTED.

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

A 28905



# APPLICATION

*Behest*  
10/3/78  
2:30 P.M.

SEWAGE DISPOSAL TESTING

A 28905

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043  
TELEPHONE: 992-2330

Septic Tank - 3 bedroom - 1000 gal  
" " " " - 1250 gal

DISTRICT \_\_\_\_\_

Dry Well - 300 sq ft absorbent sidewall  
area to begin below the first 5 ft of orig. grade.  
Max depth permitted for well is 10' below orig. grade. Come off d.w. 5' south  
buffer & begin trench. Trench to be 3' wide - 10' deep - 25' long - 5' stone  
& follow contour of ground & be inspected before gravel is installed  
of 4 bedrooms - trench is to be 52 ft long.

DATE 9/22/78

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

Place Dry Well 110 ft from front lot line  
and 140 ft from right side as seen when facing from  
the front.

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

PROPERTY OWNER Test, John A. Test

ADDRESS 25 Lake Drive PHONE 815-436-3197

PROPERTY LOCATION: Plainfield, Allison 60544

SUBDIVISION Allnutt Farm Estates LOT NO. 16, Sec. 2

ROAD AND DESCRIPTION 13446 Pond Field Court

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. 3 or 4 bedrooms

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

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER

ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT /s/ Robert Kaplan & Associates

APPROVED BY Ell. Monaghan FOR Ell. Trench DATE 10-14-78

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

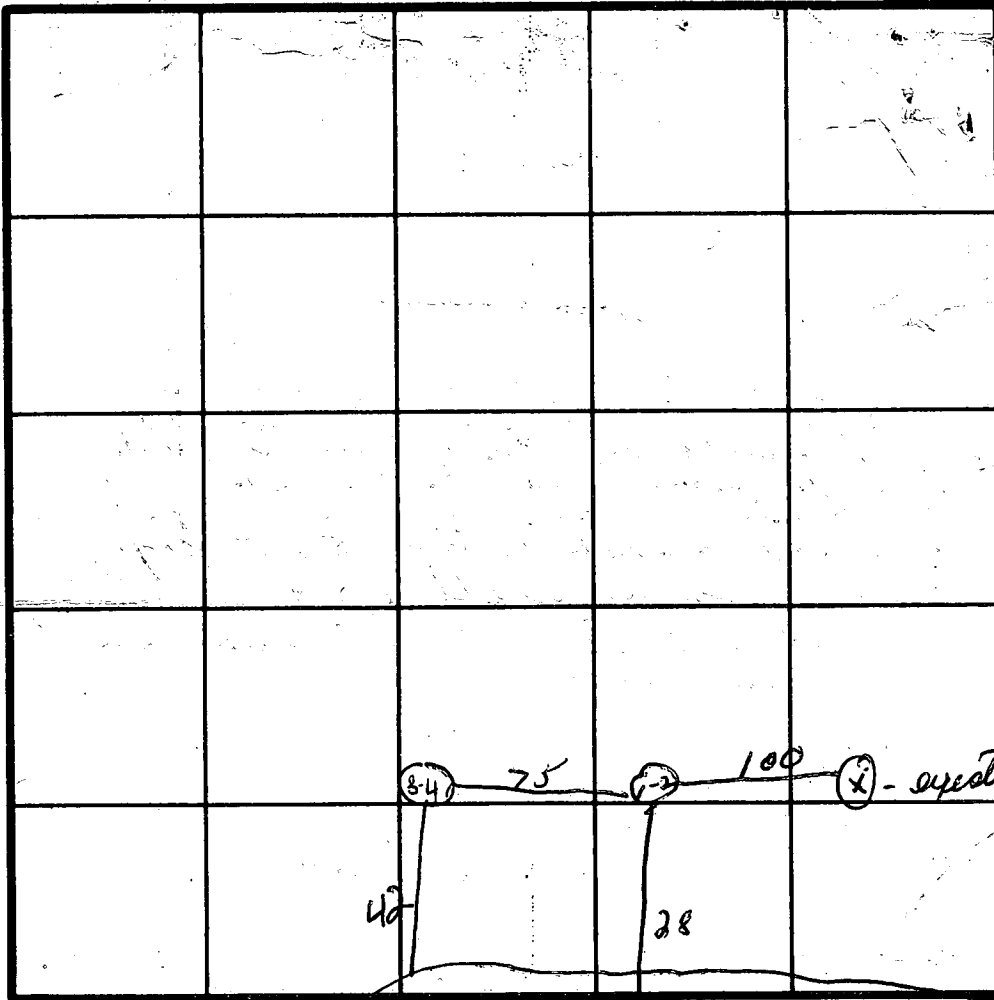
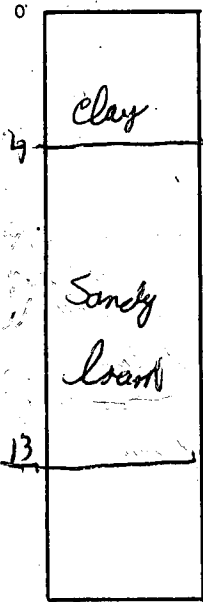
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

BLDG. PERMIT SIGNED  
AND RETURNED 11/24/78  
serial # 37726

# THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/3/78	1	4 1/2'	3 20	3 23	3 23	3 21	8 min	
	2	13'	3 17	3 18	3 18	3 21	3 min	
	3	not tested same type soil						
	4							

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY DWM ALSO PRESENT \_\_\_\_\_



# APPLICATION

A 24724

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356

DISTRICT Fifth

DATE 9/9/76

*Syst. First*

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 Mr. and Mrs. Smith W. Allnutt, Jr.

13288 Highland Road

ADDRESS Highland, MD 20777

PHONE 988-9303

PROPERTY LOCATION:

*Allnutt*

*New lot 14*

SUBDIVISION ~~Hi~~ Land Farm Estates

LOT NO. 119

ROAD AND DESCRIPTION Court "D"

SIZE OF LOT 1.09 Ac

TYPE BLDG. 3 or 4 bedroom

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/ Margaret G. allnutt

APPROVED BY *D.J. Hill*

FOR *DW & Traces*

(KIND OF SYSTEM)

DATE 4-13-77

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

(KIND OF SYSTEM)

DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

10000  
00000

10000-00000			10000-00000	10000-00000

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE -

10000

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT: \_\_\_\_\_

# APPLICATION

A \_\_\_\_\_

P \_\_\_\_\_

## SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000; EXT. 356

DISTRICT Fifth

DATE 9/9/76

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 Mr. and Mrs. Smith W. Allnutt, Jr.  
13288 Highland Road  
ADDRESS Highland, MD 20777 PHONE 988-9383

PROPERTY LOCATION:

SUBDIVISION Hillside Farm Estates LOT NO. 119

ROAD AND DESCRIPTION County Rd

SIZE OF LOT 1.09 Ac TYPE BLDG. 3 or 4 bedroom  
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/ Margaret G. Allnutt

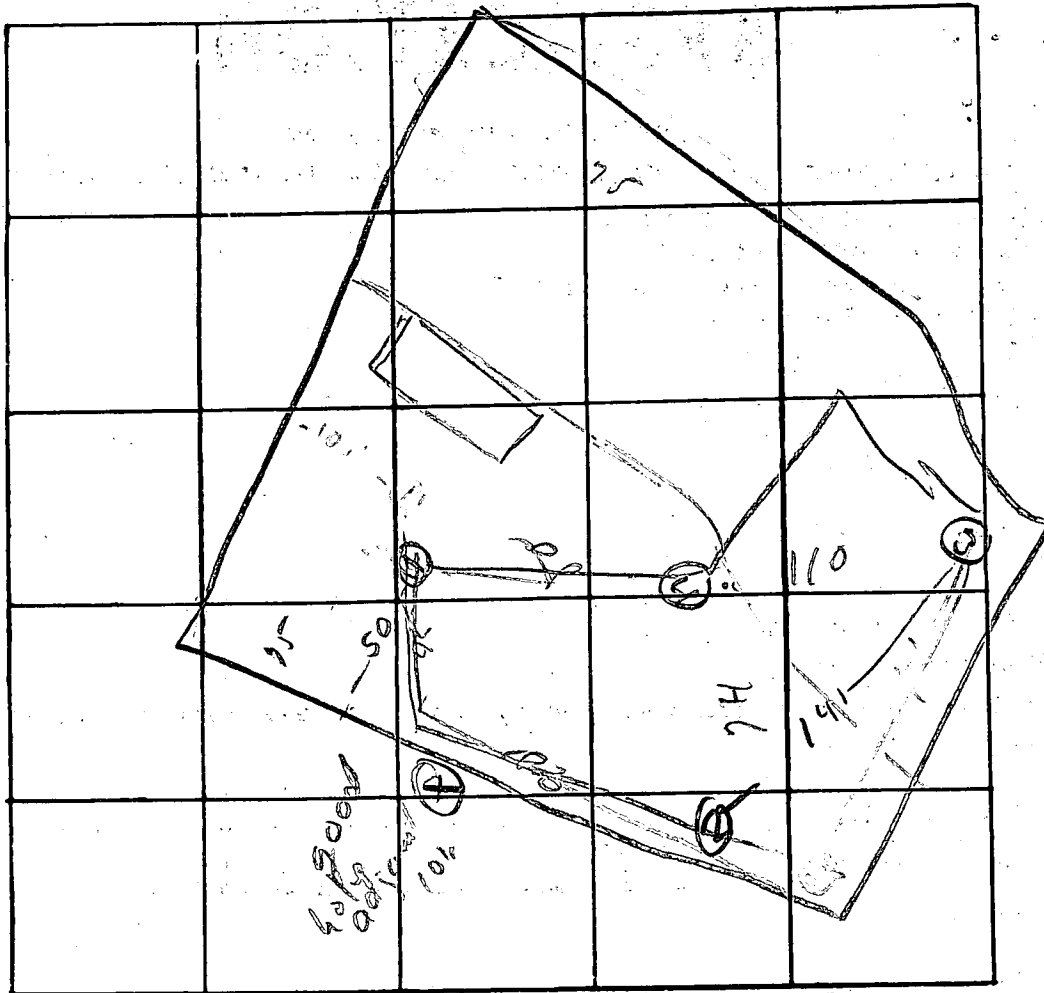
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/29/41	1s	5'	250	300	300	305	5
2/28	d	13'	250	253	253	255	5
	3s	5'	303	305		358	~30
	d	13'	303	306	306	311	8
	4	5-13'	grad	low			
	2s	3'	313	314	314	315	1
	d	13'	313	310	316	321	5

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY M/04 ALSO PRESENT: KCA

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356

A \_\_\_\_\_  
P \_\_\_\_\_  
DISTRICT Witch

DATE 9/9/75

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 Mr. and Mrs. Smith W. Allnutt, Jr.  
13288 Highland Road/  
ADDRESS Highland, MD 20777 PHONE 988-9303

PROPERTY LOCATION:

SUBDIVISION Hl - Land Farm Estates LOT NO. 118

ROAD AND DESCRIPTION Court "D"

SIZE OF LOT 2.20 Ac TYPE BLDG. 3 or 4 bedroom  
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/ Margaret G. Allnutt

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

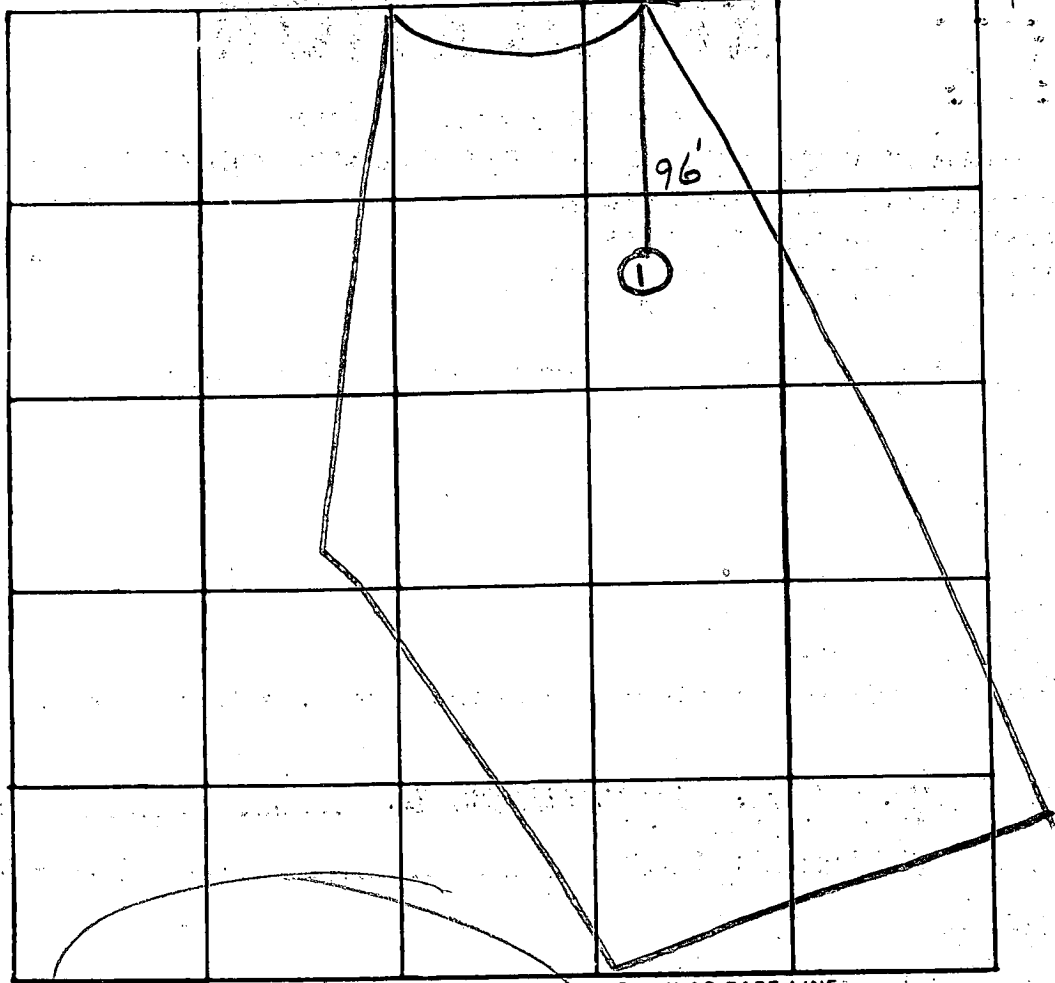
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

corner marker  
lot 118 & 117



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

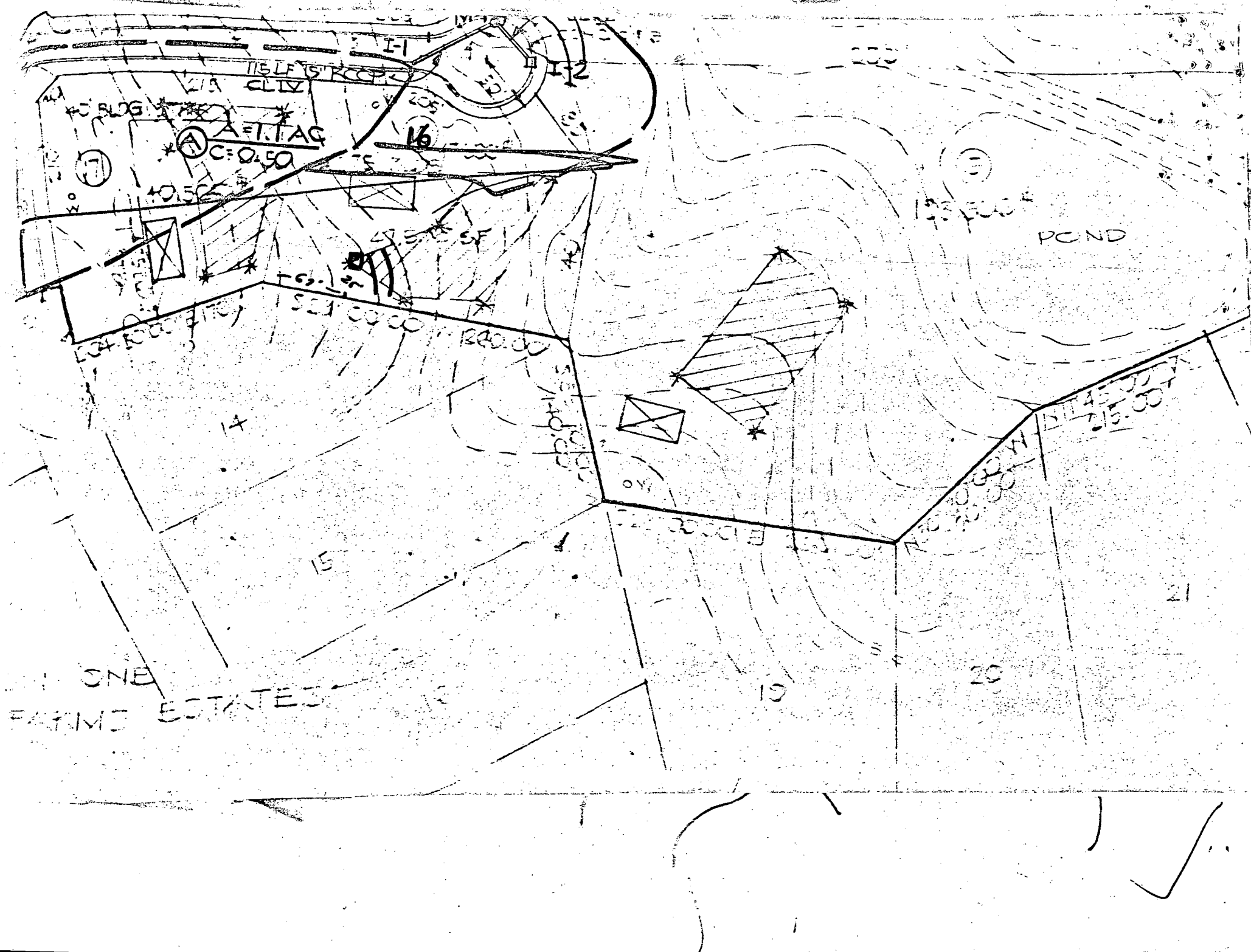
Pond

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/29/76	1	Water at 8'					hb

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT: \_\_\_\_\_



ONE  
FARM ESTATE

C 1 **3545** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 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 WITHIN 30 DAYS AFTER WELL COMPLETE

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **W28-630**

DATE RECEIVED (WRA USE ONLY)

**Sept 8, 1978** DATE WELL COMPLETED

8-19 15 20

DEPTH OF WELL **300'**

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"

**H10-73-2927**

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. **273**

OWNER **Task John**

LAST NAME FIRST NAME

STREET OR RFD **25 LAKE DR RR2** POST OFFICE **PLAINFIELD ILL, 60544**

**WELL LOG**

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	TO	CHECK IF WATER BEARING
Top Soil	0	2	
Sandy	2	52	✓
Sandstone	57	80	✓
M. cka	80	245	
Sandstone	245	250	✓
M. cka	250	275	
Sandstone	275	280	✓
M. cka	280	300	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  YES  NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT  BENTONITE CLAY

NO. OF BAGS **17** NO. OF POUNDS **1700**

GALLONS OF WATER **102**

**DEPTH OF GROUT SEAL** (TO NEAREST FOOT)

FROM **0** FT. TO **34 MEASURED** FT.

(ENTER 0 IF FROM SURFACE)

**CASING RECORD**

CASING TYPES (INSERT APPROPRIATE CODE BELOW)

STEEL  CONCRETE  PLASTIC  OTHER

MAIN CASING TYPE  NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **60**

**OTHER CASING** (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

**SCREEN RECORD**

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)

STEEL  BRASS OR BRONZE  OPEN HOLE  PLASTIC  OTHER

C 2 (SEQ. NO.)

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT) FROM TO

1 **H0** **58** **300**

2

3

SLOT SIZE 1. 2. 3.

DIAMETER OF SCREEN **56** (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING  LOG INDICATOR  OTHER DATA AVAILABLE

C 3 (SEQ. NO.)

**PUMPING TEST**

HOURS PUMPED (TO NEAREST HOUR) **10**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **Bucket**

METHOD USED TO MEASURE PUMPING RATE **Bucket**

**WATER LEVEL** (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **30** (NEAREST FOOT)

WHEN PUMPING **300** (NEAREST FOOT)

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

AIR  PISTON  TURBINE  CENTRIFUGAL  ROTARY  OTHER (DESCRIBE BELOW)  JET  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)  YES  NO

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) **31** **35**

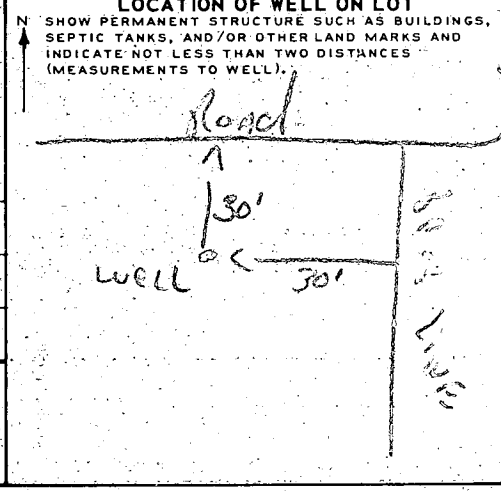
PUMP HORSE POWER **37** **41**

PUMP COLUMN LENGTH (NEAREST FOOT) **43** **47**

**CASING HEIGHT** (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE  BELOW

LAND SURFACE **2** (NEAREST FOOT)



**CIRCLE APPROPRIATE BOXES**

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

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 **Ralph Mayne**

(PLEASE PRINT) **Ralph Mayne**

SIGNATURE **Ralph Mayne**

**B 1** 9007 SEQUENCE NO. (WRA USE ONLY)

**STATE OF MARYLAND**  
**WATER RESOURCES ADMINISTRATION**  
**TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401**  
**APPLICATION FOR PERMIT TO DRILL WELL**

WRA PERMIT NUMBER HO-73-2181  
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) 9/8/78  
 9:30 A.M.

OWNER TESK A. John  
 COL 15 LAST NAME COL 16 FIRST NAME COL 34

STREET OR RFD 25 LAKEVIEW DRIVE R.R. #2  
 COL 36 COL 55

POST OFFICE Plain Field, Illinois 60544  
 COL 57 COL 76

**B 1** CONTINUED **DRILLER INFORMATION**

DATE Aug 1, 1978 LICENSE NUMBER 27320  
 COL 1 COL 2 COL 3 COL 4 COL 5 COL 6 COL 7 COL 8 COL 9 COL 10 COL 11 COL 12 COL 13 COL 14 COL 15 COL 16 COL 17 COL 18 COL 19 COL 20 COL 21 COL 22 COL 23 COL 24 COL 25 COL 26 COL 27 COL 28 COL 29 COL 30 COL 31 COL 32 COL 33 COL 34 COL 35 COL 36 COL 37 COL 38 COL 39 COL 40 COL 41 COL 42 COL 43 COL 44 COL 45 COL 46 COL 47 COL 48 COL 49 COL 50 COL 51 COL 52 COL 53 COL 54 COL 55 COL 56 COL 57 COL 58 COL 59 COL 60 COL 61 COL 62 COL 63 COL 64 COL 65 COL 66 COL 67 COL 68 COL 69 COL 70 COL 71 COL 72 COL 73 COL 74 COL 75 COL 76 COL 77 COL 78 COL 79 COL 80 COL 81 COL 82 COL 83 COL 84 COL 85 COL 86 COL 87 COL 88 COL 89 COL 90 COL 91 COL 92 COL 93 COL 94 COL 95 COL 96 COL 97 COL 98 COL 99 COL 100

DATE Aug 1, 1978 LICENSE NUMBER 27320

FIRST NAME Ralph DRILLER LAST NAME WAYNE

SIGNATURE Ralph Wayne

**B 3** LOCATION OF WELL

COUNTY Howard  
 COL 14 COL 15 COL 16 COL 17 COL 18 COL 19 COL 20 COL 21 COL 22 COL 23 COL 24 COL 25 COL 26 COL 27 COL 28 COL 29 COL 30 COL 31 COL 32 COL 33 COL 34 COL 35 COL 36 COL 37 COL 38 COL 39 COL 40 COL 41 COL 42 COL 43 COL 44 COL 45 COL 46 COL 47 COL 48 COL 49 COL 50 COL 51 COL 52 COL 53 COL 54 COL 55 COL 56 COL 57 COL 58 COL 59 COL 60 COL 61 COL 62 COL 63 COL 64 COL 65 COL 66 COL 67 COL 68 COL 69 COL 70 COL 71 COL 72 COL 73 COL 74 COL 75 COL 76 COL 77 COL 78 COL 79 COL 80 COL 81 COL 82 COL 83 COL 84 COL 85 COL 86 COL 87 COL 88 COL 89 COL 90 COL 91 COL 92 COL 93 COL 94 COL 95 COL 96 COL 97 COL 98 COL 99 COL 100

SUBDIVISION ALL WYTH FARMS EST.

SECTION II LOT 16

NEAREST TOWN Highland

MILES FROM TOWN (ENTER 0 IF IN TOWN) 3 M I

**B 2** WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 300

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL

PRIVATE WATER COMPANY

TEST

**B 4** DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

NORTH EAST NORTHWEST SOUTHWEST

SOUTH WEST

NEAR WHAT ROAD Pond Field Ct.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) E W

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 50 FT MI

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED)  JETTED  DRIVEN

AIR-ROTARY  AIR-PERCUSSION  ROTARY (HYDRAULIC ROTARY)

CABLE  REVERSE-ROTARY  DRIVE-POINT

OTHER (DESCRIBE)

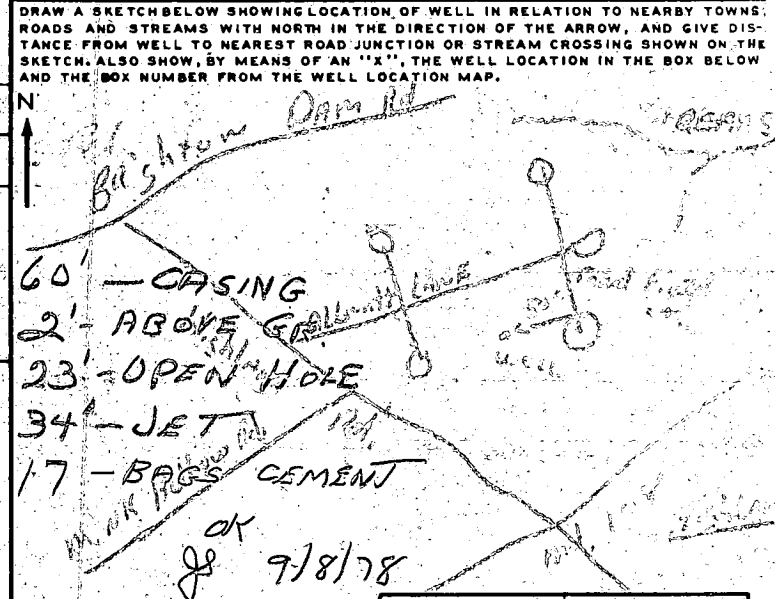
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

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

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 (WRA USE ONLY)**

APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63

FORCE 67 WRITE INITIALS IN BOX VP CONDITIONS 70 71 72 73 74 75 76 77 78 79

BOX NUMBER 800 490

NORTH COORDINATE 50 51 52 53 54 55

EAST COORDINATE 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 65 66 67 68

**B 4** CONTINUED **HEALTH DEPARTMENT APPROVAL**

STATE HEALTH (CIRCLE BOX) S COUNTY NAME Howard COUNTY NO. W28630

DATE 09 08 78 APPROVED BY Donald W. Monaghan, Sanitarian

**B 5** SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

**SEPTIC SYSTEM DATA**

INV. OF SEWER INTO DWELLING: 513.82

**SEPTIC TANK DATA:**

EX. GR. 519.00  
 FIN. GR. 518.00  
 INV. IN 513.50  
 INV. OUT 513.20

**DRYWELL DATA:**

EX. GR. 517.80  
 FIN. GR. 517.80  
 INV. IN 512.80  
 INV. OUT 512.70

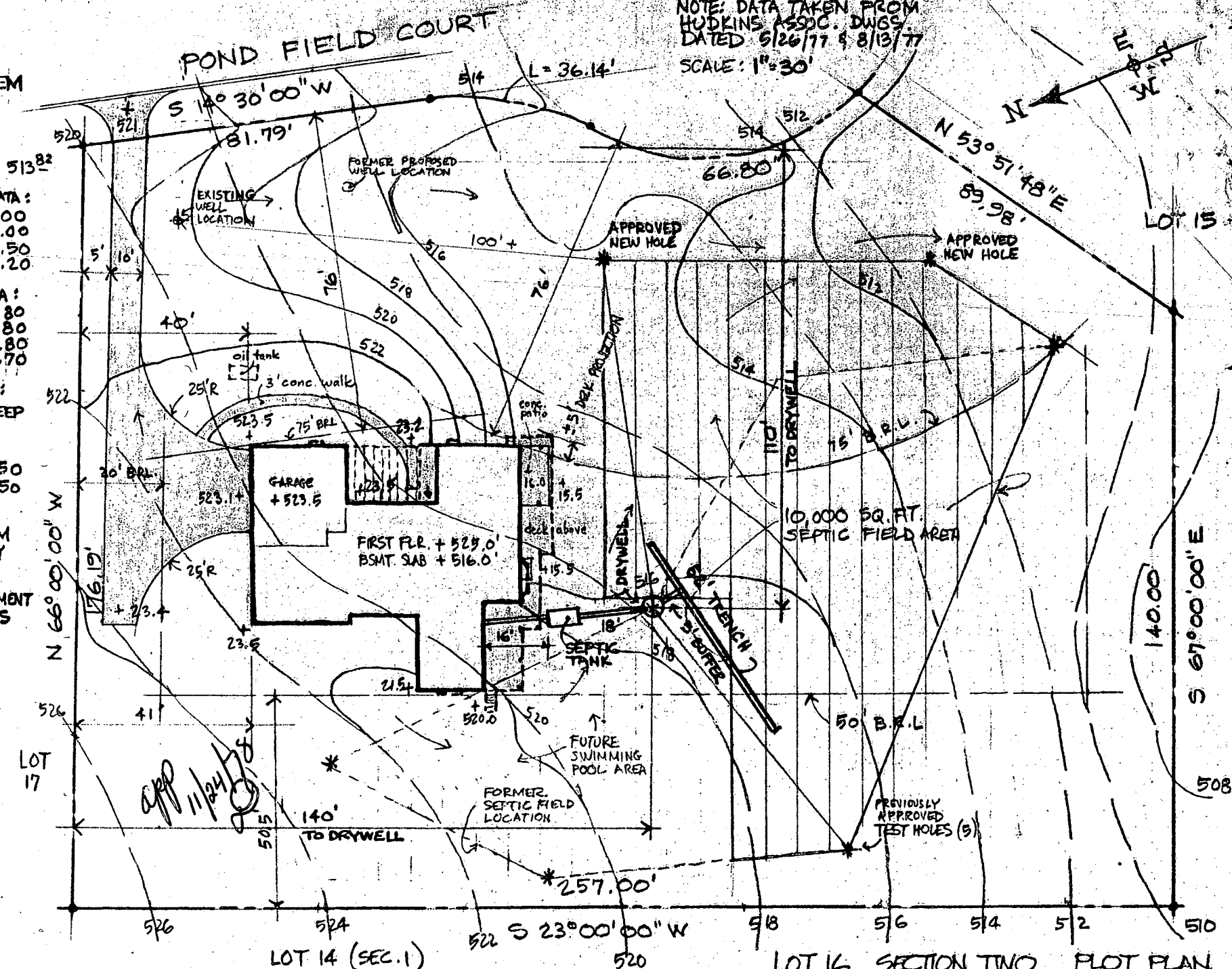
**TRENCH DATA:**

3' WIDE, 10' DEEP  
 52' LONG  
 5' STONE  
 INV. IN 512.50  
 EX. GR. 517.50

**SEPTIC SYSTEM DESIGNED BY**

**ENGINEERS LAND DEVELOPMENT CONSULTANTS**  
 465-8518

TOPOGRAPHICAL  
 NOTE: DATA TAKEN FROM  
 HUDKINS ASSOC. DWGS  
 DATED 5/26/77 & 8/13/77  
 SCALE: 1"=30'



TASK RESIDENCE / ROBT. KAPLAN & ASSOC. ARCHITECTS 992-5221

LOT 16 SECTION TWO PLOT PLAN  
 ALLNUTT FARMS ESTATES  
 5TH ELECTION DISTRICT, HOWARD COUNTY, MD.

# FILE INQUIRY FORM

Property Address: 13446 Pond Field Ct.

4/21/04 - owner brought in a schematic to show where he would like to put a pool.

Okay for pool on the rear of the property - do the right of the septic field. MEM