

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

OK TO 3 FT. ST. MANHOLE
BELOW ORIGINAL GRADE

DISTRIBUTION BOX, LEVEL _____

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

GRAVEL DEPTH 6 1/2 FT. IN. TOTAL LENGTH 78 FT.

INLET AT 3 1/2 FT.

NUMBER OF TRENCHES 1

SIDEWALL TOTAL BOTTOM AREA 500 FT

178
6 1/2
39
4.62
509

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

ABSORBENT AREA 501 SQ. FT.

REMARKS

10/13/82 CATION OK PER PLANS

INLET TO DITCH 3 FT B.O.G.

ADD STONE TO DITCH B.H

10/14/82 6 1/2 FT GRAVEL ADDED. OK TO COVER WORK

DATE SYSTEM APPROVED

10/14/82

INSPECTOR

CW [Signature]

APPLICATION

Permit

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 29000
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 5th

See attached sheet for specs

DATE 10/11/78

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 ~~Archie W. Broadwater~~ Richard Poppy

ADDRESS 5435 Broadwater Lane, Clarksville, Md. 21029 PHONE 531-5269
21029

PROPERTY LOCATION:

SUBDIVISION Broadwater Estates LOT NO. 13

ROAD AND DESCRIPTION off Broadwater Lane 5646 Chamblis Dr.

no garbage disposal

SIZE OF LOT 3.0 acres m/l TYPE BLDG. 3 or 4 bedroom

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/ Jack T. Gibson

APPROVED BY C. B. Cheska FOR Dug Well & trench DATE 12/31/79

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 6/1/82
Serial # 49785

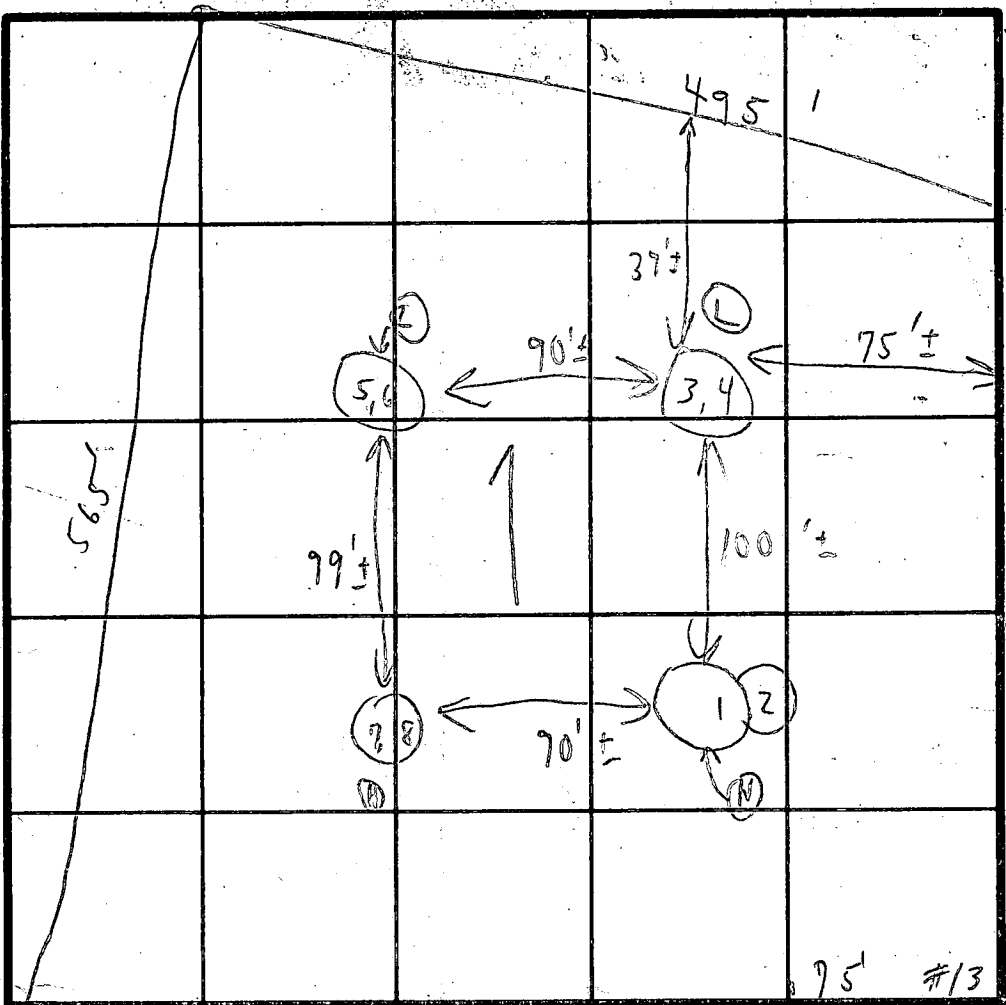
THIS IS NOT A PERMIT

13

Field sheet
Test types
inches

SOIL PROFILE

Below clay
Sandy loam



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Unnamed Road

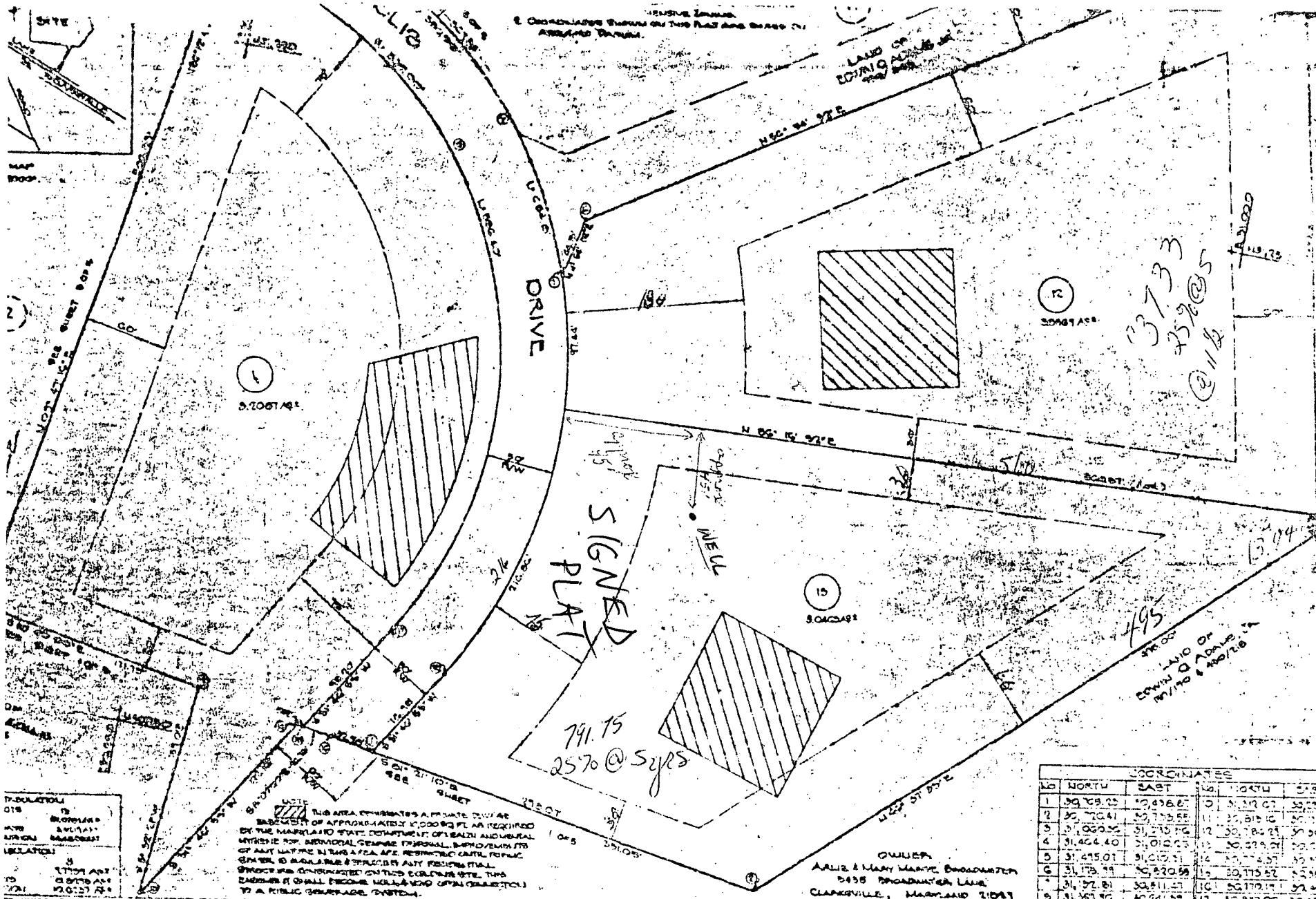
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/24/28	1	4'	1:19	1:22	1:22	1:27	5m
	Ⓟ 2	9 1/2'	1:20	1:22	1:22	1:25	3m
	3	4 1/2'	1:30	1:33	1:33	1:38	5m
	Ⓛ 4	10'	1:32	1:34	1:34	1:37	3m
	5	4'	1:37	1:43	1:43	1:49	6m
	6	9'	1:40	1:43	1:43	1:49	6m
	7	4'	1:44	1:48	1:48	1:54	6m
	8	9'	1:45	1:47	1:47	1:53	6m

Aug 28
13'
13'
3 1/2
12
inlet 3 1/2
mot. 10

REMARKS Tests in woods

TYPE OF SOIL _____

TESTED BY C. Bell ALSO PRESENT { Names #11



RESOLUTION
 018 IS
 BY THE BOARD
 AND APPROVED
 BY THE BOARD
 11/15/77

11-14-77
 12-4-77

NOTE: THE AREA COMPREHENSIVE A PRIVATE DRIVE AT BASEMENT OF APPROXIMATELY 10000 SQ FT AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND GENERAL HYGIENE FOR MEMORIAL CEILING PERSONAL BATH/TOILETS OF ANY NATURE IN THIS AREA AFTER RESTRICTED CAPITAL FORMER SPECIAL IS AVAILABLE & SPECIFIED IN ANY RESIDENTIAL SPECIFIC AND CONDUCTED ON THIS COLLECTIVE SITE. THIS DRIVEWAY SHALL BECOME A PUBLIC DRIVEWAY UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM.

OWNER
 AARIE & MARY MARIE BROADBENT
 5438 BROADWAY LAKE
 CLARKSVILLE, MARYLAND 21031
 DEED REF: 117088, 108048, 108049

NO	NORTH	EAST	NO	NORTH	EAST
1	30,708.05	50,496.67	10	30,717.07	50,496.67
2	30,708.05	50,735.55	11	30,717.07	50,735.55
3	31,000.00	51,210.00	12	30,717.07	51,000.00
4	31,424.40	51,010.00	13	30,717.07	50,735.55
5	31,424.40	51,010.00	14	30,717.07	50,735.55
6	31,178.81	50,735.55	15	30,717.07	50,735.55
7	31,178.81	50,735.55	16	30,717.07	50,735.55
8	31,178.81	50,735.55	17	30,717.07	50,735.55
9	31,178.81	50,735.55	18	30,717.07	50,735.55

4467
 11/14/77

received 9/16/80

B 1 7373 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
10-73-3591

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
9/30/80

OWNER
 COL 15 LAST NAME: PROPP FIRST NAME: Paul COL. 34

STREET OR RFD
 COL 36: 5609 Water Rd. COL. 55

POST OFFICE
 COL 57: Clarksville Md. 21029 COL. 76

B 1 CONTINUED DRILLER INFORMATION

DATE 9/5/80 **LICENSE NUMBER** 40

FIRST NAME H. F. Pastorek **DRILLER** H. F. Pastorek **LAST NAME**

SIGNATURE H. F. Pastorek

B 3 LOCATION OF WELL

COUNTY Howard (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION Producers East 23 42

SECTION 44 **LOT** 13 48 50

NEAREST TOWN Clarksville 52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 73 76 77 78

B 2 WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION.

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

M MUNICIPAL WATER SUPPLY

P PRIVATE WATER COMPANY } MUST HAVE STATE HEALTH DEPT. APPROVAL

T TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

N NORTH **E** EAST **NE** NORTHEAST **SE** SOUTHEAST

S SOUTH **W** WEST **NW** NORTHWEST **SW** SOUTHWEST

NEAR WHAT ROAD Rt 32 8 9

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) **N** **S** **E** **W** 32 32 32 32

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 500 34 37 38 39

APPROXIMATE DEPTH OF WELL 150 FEET 24 26

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)

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

D THIS WELL WILL DEEPEM 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.** 65

FORCE 67 **WRITE INITIALS IN BOX** 68 **CONDITIONS** 70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL

STATE HEALTH (CIRCLE BOX) 9 **COUNTY NAME** Howard **COUNTY NO.** A29000

DATE 09 26 80 **APPROVED BY** Fred Frommelt, Sanitarian

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

BOX NUMBER E 810
N 500

NORTH COORDINATE 50 51 52 53 54 55

EAST COORDINATE 081 000 000 000

ELEVATION AT WELL HEAD (FEET) 65 66 67 68

Sketch: A hand-drawn sketch shows a well location marked with an 'X' in a grid. The grid is labeled with 'N' for North and 'E' for East. The well is located at the intersection of the 500-foot mark on the North axis and the 810-foot mark on the East axis. A handwritten note next to the sketch reads: "97' - casing 2' - above gr. 80' - open 27' - bag cement".

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

1 2 3 (SEQ. NO.) 6

C1 4657 SEQUENCE NO. (WRA USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED
 COUNTY NUMBER A29000

Date Received (WRA use only) 9/30/80
 DATE WELL COMPLETED

Depth of Well 220
 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"
40-73-2691

OWNER PAPPY RICK last name first name
 STREET OR RFD 5609 Trotter Rd. TOWN CLARKSVILLE, Md.
 SUBDIVISION Broadwater Est. SECTION 13 LOT 13

WELL LOG
 Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
topsoil	0	2	
Red clay	2	8	
schick	8	80	
sandstone	80	74	
mica	74	120	
Sandstone	120	162	
Mica	162	174	
Flint	174	177	
Mica	177	220	

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
 TYPE OF GROUTING MATERIAL
 CEMENT BENTONITE CLAY
 NO. OF BAGS 27 NO. OF POUNDS 2700
 GALLONS OF WATER 135
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 80 ft.
 (enter 0, if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE ST Nominal diameter top(main)casing (nearest inch) 6 7/8 Total depth of main casing (nearest foot) 220

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

SCREEN RECORD
 screen type or openhole insert appropriate code below
 ST STEEL BR BRASS HO OPEN HOLE
 PL PLASTIC OT OTHER

DEPTH (nearest ft.) 95 220
 SLOT SIZE 2
 DIAMETER OF SCREEN (NEAREST INCH) from to

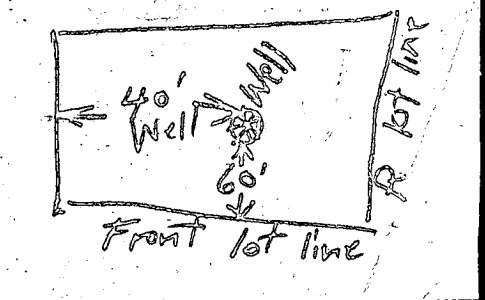
GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX

WRA 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

C 3 (seq no)
 PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min. to nearest gal.) 12
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 220
 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 YES NO
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
 PUMP HORSEPOWER 37 41
 PUMP COLUMN LENGTH (nearest ft.) 45 47
 CASING HEIGHT (circle appropriate box and enter casing height) + above - below 2 (nearest foot)

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



- CIRCLE APPROPRIATE BOX
 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 IDENT. NO. 40
 DRILLERS SIGNATURE James J. Lottman
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee) Wesley H. Blount

NOTE:

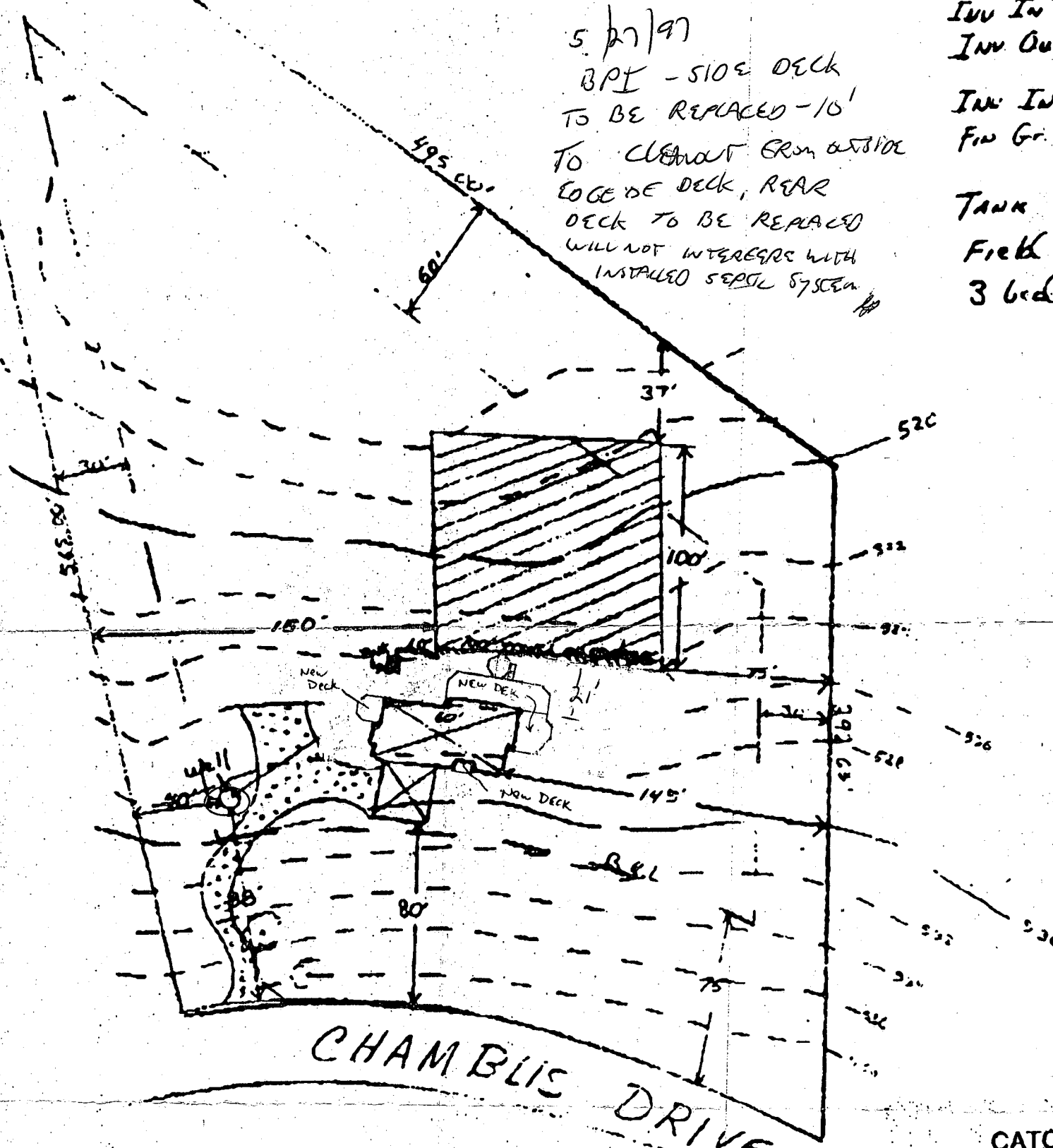
Well 52
F.F. 51
Base. 50
Inv. Out

5/27/97
BPT - SIDE DECK
TO BE REPLACED - 10'
TO CLEAR OUT GRASS OUTSIDE
EDGE OF DECK, REAR
DECK TO BE REPLACED
WILL NOT INTERFERE WITH
INSTALLED SEPTIC SYSTEM

Fin Gr. TA
Inv. In TA
Inv. Out

Inv. In
Fin Gr. P

TANK 1
Field
3 bed



CHAMBLIS DRIVE

CATCH
CREDIT UN