

2/2/79 P.C.C. c.Bd

File

P 29480 ② P.C.O.  
A Repair ③ F.C.O.

2/2/79  
after used please

# PERMIT

SEWAGE DISPOSAL SYSTEM  
MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5th

DATE 2/2/79

Jack Fyock

IS PERMITTED TO INSTALL ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Md.

PHONE 988-9270

SUBDIVISION \_\_\_\_\_

ROAD 12161

Route 108 - on left past LOT  
Shephard's Lane - little white house

PROPERTY OWNER Hugh Kendall

ADDRESS Route 108, Clarksville, Md.

SPECIFICATIONS

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

DEEP TRENCH \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

INLET PIPE \_\_\_\_\_ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH \_\_\_\_\_ FT. BELOW ORIGINAL GRADE

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

LOCATE DISPOSAL AREA \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AND \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AS SEEN WHEN

FACING LOT FROM

REPAIR - Call for an appointment when ground is opened up and Sanitarian will

recommend repair system.

(3 bedrooms per Mr. Kendall)  
Recommend 1000 gallon minimum  
70' of trench

PLANS APPROVED BY Palmer F. Wine

DATE 2/2/79

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.

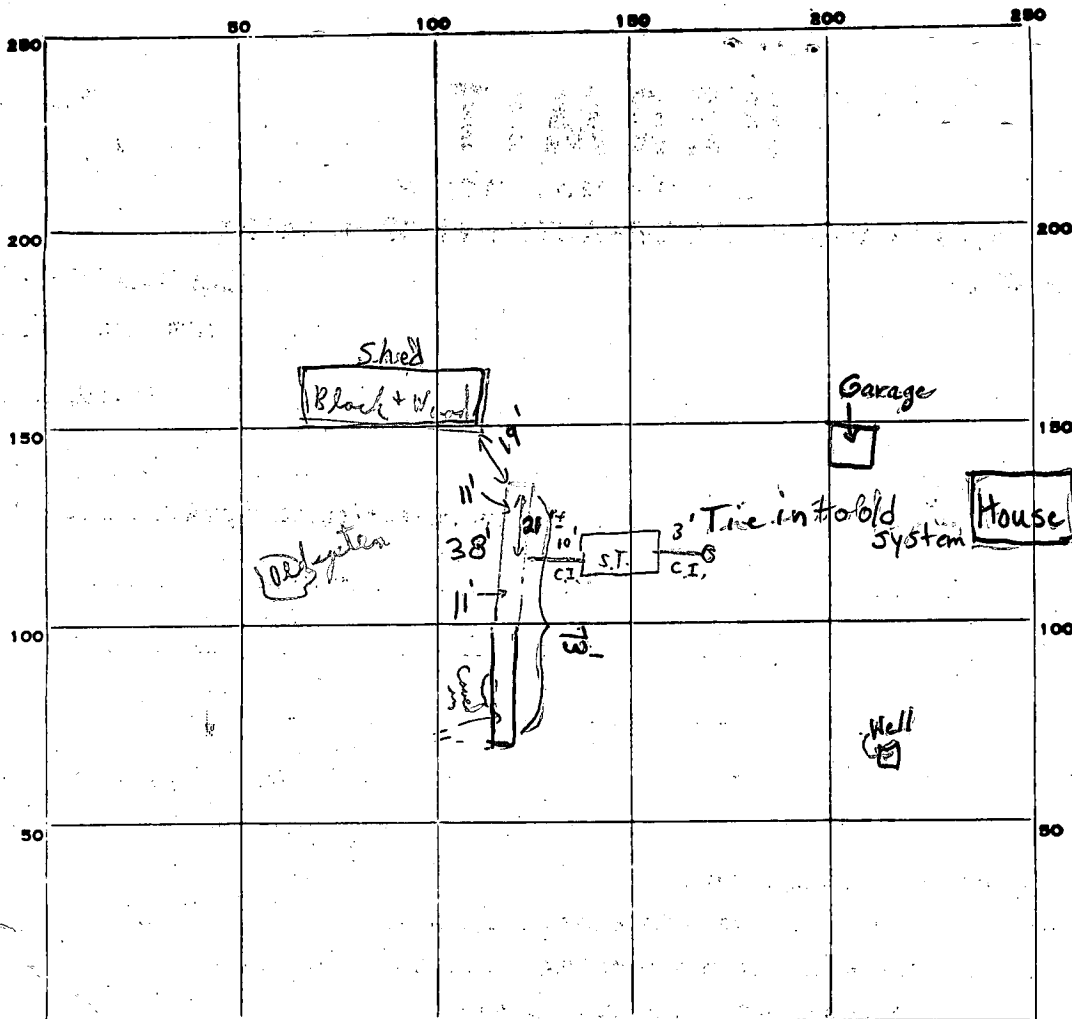
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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.

\* P29480



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD \_\_\_\_\_ ① + ② Not seen

SEPTIC TANK, LEVEL \_\_\_\_\_ ok ③ Yes signed front

CLEANOUTS \_\_\_\_\_ ③ Yes

DISTRIBUTION BOX, LEVEL \_\_\_\_\_ N/A

TILE FIELD, DEPTH \_\_\_\_\_ 11 FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ 7' + IN. TOTAL LENGTH \_\_\_\_\_ 73 FT.

NUMBER OF TRENCHES \_\_\_\_\_ 1 TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ 521 + SQ. FT.

REMARKS 2/2/79 Found - existing house - trench 38' long, 11' depth  
 Partially to put stone in first 38'; ② at the still Trench to 73'  
 long & 11' depth some way ③ 2:15 - Trench 2:30 On site  
 Trench graded again 73'  
 length 11' depth - ok for stone in rest of trench - pipe in  
 + mortared around S.T. both ends + cleanout plug in + cemented  
 at base Paper on trench to 3 1/2' avg of grade of ground. C.B.D.

DATE SYSTEM APPROVED \_\_\_\_\_ 2/2/79 \_\_\_\_\_

INSPECTOR \_\_\_\_\_ C. B. Steward

C1 1348

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

WELL NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

COUNTY NUMBER P 20480

Date Received (OEP use only)

DATE WELL COMPLETED

12 48 1

Depth of Well

300

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

10-73-4062

OWNER Kendall last name Hugh R. first name

STREET OR RFD 12161 Clarksville Pike TOWN Clarksville

SUBDIVISION SECTION LOT

**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	
Brown shale	0	23	
gray granite	23	300	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (Circle appropriate box) YES  NO

TYPE OF GROUTING MATERIAL  
CEMENT  BENTONITE CLAY

NO. OF BAGS 7 NO. OF POUNDS 658  
GALLONS OF WATER 49  
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 25 ft.

**CASING RECORD**

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) 28

**OTHER CASING (if used)**

diameter (in) depth (feet) from to

**SCREEN RECORD**

screen type or openhole

insert appropriate code below

STEEL  BRASS  OPEN HOLE   
PLASTIC  OTHER

**EACH SCREEN**

DEPTH (nearest ft.)

1 10 26 300

- CIRCLE APPROPRIATE BOX
- 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 10.17.13 "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 IDENT. NO. 238  
DRILLERS SIGNATURE Joseph L. Mearns

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

SLOT SIZE

DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX

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

T (E.R.O.S.) W Q  
70 72 74 75 76  
TELESCOPE LOG OTHER DATA  
CASING INDICATOR

**PUMPING TEST**

HOURS PUMPED (nearest hour) 4

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface) BEFORE PUMPING 70 WHEN PUMPING 220

TYPE OF PUMP USED (for test)  air  piston  turbine  centrifugal  rotary  other (describe below)  jet  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))

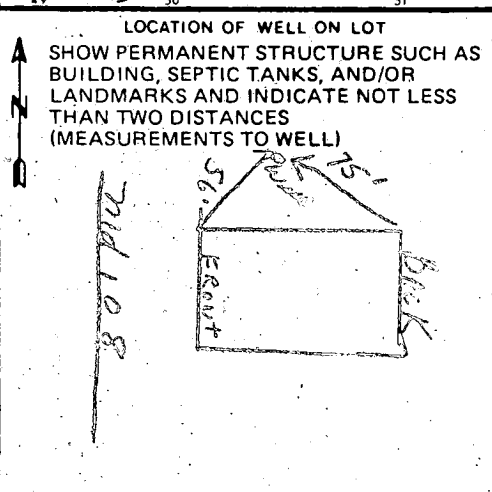
CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)  above  below

LAND SURFACE 2 (nearest foot)



B 1 6382

SEQUENCE NO. WRA USE ONLY

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

HO-73-4062

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

please print or type

fill in this form completely

DATE RECEIVED 11/20/81 8 (WRA USE ONLY) 13 OWNER INFORMATION

B 3 LOCATION OF WELL COUNTY Howard SUBDIVISION SECTION 44 LOT 48 NEAREST TOWN Clarksville MILES FROM TOWN 0 MI

Rendall R. Hugh LAST NAME OWNER FIRST NAME 12220 Clarksville Pike STREET OR RFD Clarksville Md. 21029 TOWN STATE ZIP

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST 32 EAST SOUTH 93 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 37 38 39

B 1 CONTINUED DRILLER INFORMATION Joseph H. Mays 238 DRILLER'S NAME LICENSE NO. 80 Joseph H. Mays Nov 30, 81 SIGNATURE DATE

B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

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)

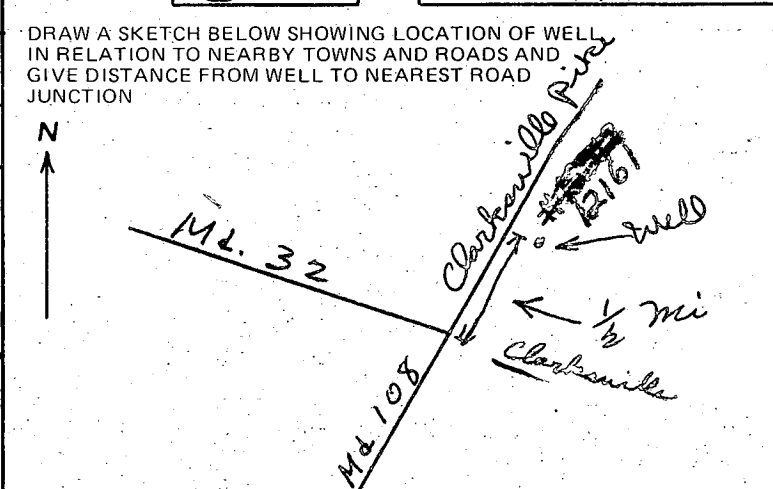
APPROXIMATE DEPTH OF WELL 140 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

Method of Drilling (circle one) BORED (OR AUGERED) JETTED JETTED & DRIVEN AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC) CABLE REVERSE ROTARY DRIVE POINT ROTARY 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 THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

Not to be filled in by driller (WRA USE ONLY) APPROX. PERMIT NUMBER GAP FORCE INITIALS CONDITIONS 40-73-4062

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX Location OK 28' - casing 2 1/2' - above gr. 25' - opens 7 - bags cement 12/4/81



B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME P 29490 COUNTY NO. EHA SIGNATURE STATE HEALTH CIRCLE BOX MO DAY YR 11/23/81 CO SIGNATURE Frank Shinn DATE 11/23/81 NORTH 503 EAST 0818 ELEV. (FT.) GRID 50 55 GRID 57 63 65 68

B 5 SPECIAL CONDITIONS (WRA USE ONLY)

FILE Well site check DATE REPORTED 11/20/81

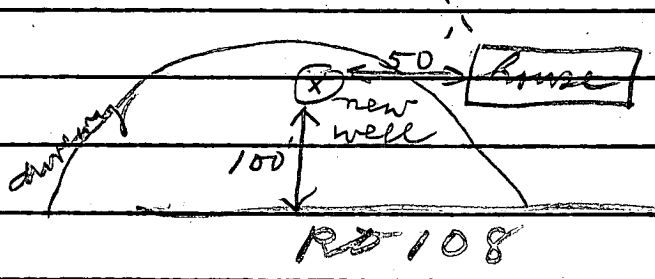
PROPERTY OWNER Hugh R. Kendall

P.O. ADDRESS 12164 Rte 108 TELEPHONE \_\_\_\_\_

DIRECTIONS TO PROPERTY \_\_\_\_\_

INFORMANT \_\_\_\_\_

CONDITION FOUND New well to be on left side of house, 100 ft from Rte 108 - 50 ft from left side of house 11/23/81 JF



ACTION TAKEN \_\_\_\_\_

FINAL DISPOSITION \_\_\_\_\_