

6/23/78
around 3:30 pm
6/26/78

File

PERMIT

P 27960
A 23574

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLCOTT CITY

DISTRICT 5th

DATE 4/27/78

INDEXED

Kastner Plumbing & Heating

IS PERMITTED TO INSTALL ALTER

ADDRESS Morningstar Drive, Dayton, Md.

PHONE _____

SUBDIVISION _____ ROAD 12848 Highland Road LOT 2

PROPERTY OWNER James Heath

ADDRESS 10711 Harding Road, Laurel, Md. 20810 Phone: 776-4193

SPECIFICATIONS 3 bedrooms

14812

SEPTIC TANK CAPACITY 1000 GALLONS

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

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA 360 SQ. FT. total sidewall area in dry well.

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 13 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 250 FT. FROM Highland Road LOT LINE AND 55 FT. FROM left LOT LINE AS SEEN WHEN

FACING LOT FROM Highland Road.

PLANS APPROVED BY Raymond Hodges

DATE 3/15/77

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.

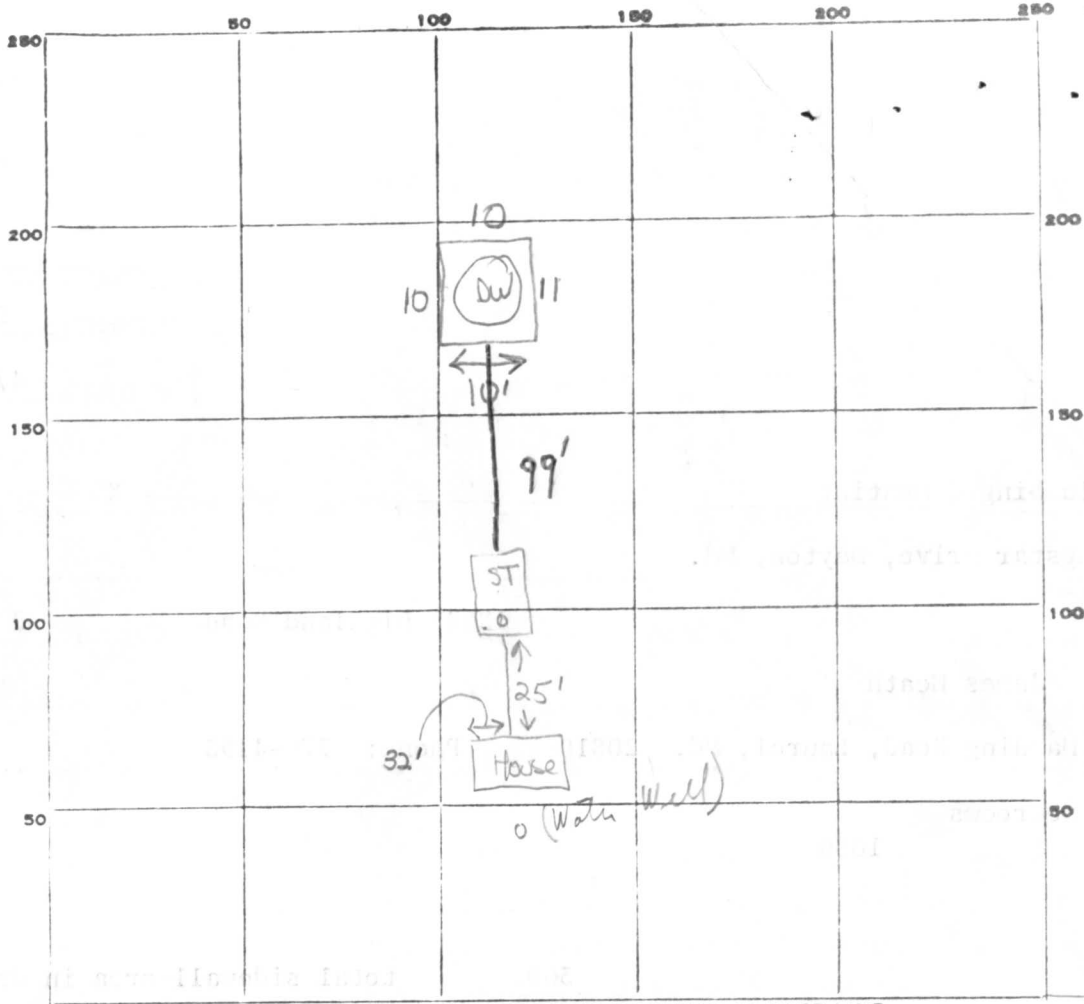
PERMIT VOID AFTER THREE YEARS.

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.

A 23574

23574



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

WEST

6/26/78 Highland Rd RT 216
Super-Excavated ST / DW

PERMIT CARD _____

SEPTIC TANK, LEVEL CLEANOUTS 6/26/78 ok 6/26/78

DISTRIBUTION BOX, LEVEL _____ N/A

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

DW NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 41 FT. DEPTH BELOW INLET 9 FT.

ABSORBENT AREA ± 369 SQ. FT.

23 June 78 REMARKS Continue work: do not backfill until final approval (GLK)

6/26/78 F.C.O. - pipe in from tank to dry well; and cleanouts on. Plumber - called Mr. Monaghan - no cleanout needed from tank to dry well per plumber's conversation with Mr. Monaghan.

DATE SYSTEM APPROVED 6/26/78 as per above INSPECTOR C.B. Stricker

RT 108

C 1 4657 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 WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER W 25 476

DATE RECEIVED (WRA USE ONLY) Apr 14 3 5 1977 DEPTH OF WELL 123

DATE WELL COMPLETED 15 20 22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" 41-73-1974

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 273

OWNER OLEARY William LAST NAME FIRST NAME 1679

STREET OR RFD 8607 Riggs Rd. POST OFFICE Delphi Md.

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	
Top Soil	0	2	
Sandy	2	11	
Sand Stone	11	30	
Micka	30	40	
Sand Stone	40	45	<input checked="" type="checkbox"/>
Micka	45	123	

OK w w z
4-25-77

House up, S.S. in back well located to right side > 100' fr. S.S. of

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT M BENTONITE CLAY C

NO. OF BAGS 10 NO. OF POUNDS 1000

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 21 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES: STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE S A

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

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 23

OTHER CASING (IF USED)

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: STEEL BRASS OR BRONZE OPEN HOLE PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM	TO
1 <u>21</u>	2 <u>123</u>
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52

SLOT SIZE 1, 2, 3

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM 60 TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

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

TELESCOPE CASING T W Q

LOG INDICATOR 70 72

OTHER DATA AVAILABLE 74 75 76

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2 8 9

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 6 11 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 40 (NEAREST FOOT) 17 20
 WHEN PUMPING 123 (NEAREST FOOT) 22 25

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

AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

PUMP INSTALLED

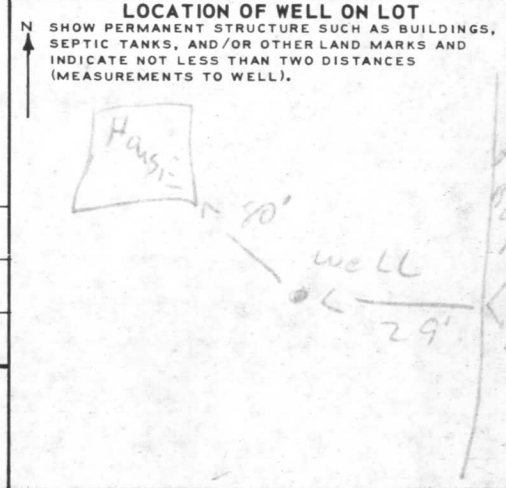
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

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 } LAND SURFACE (NEAREST FOOT) 2
 BELOW }



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 RALPH MAYNE

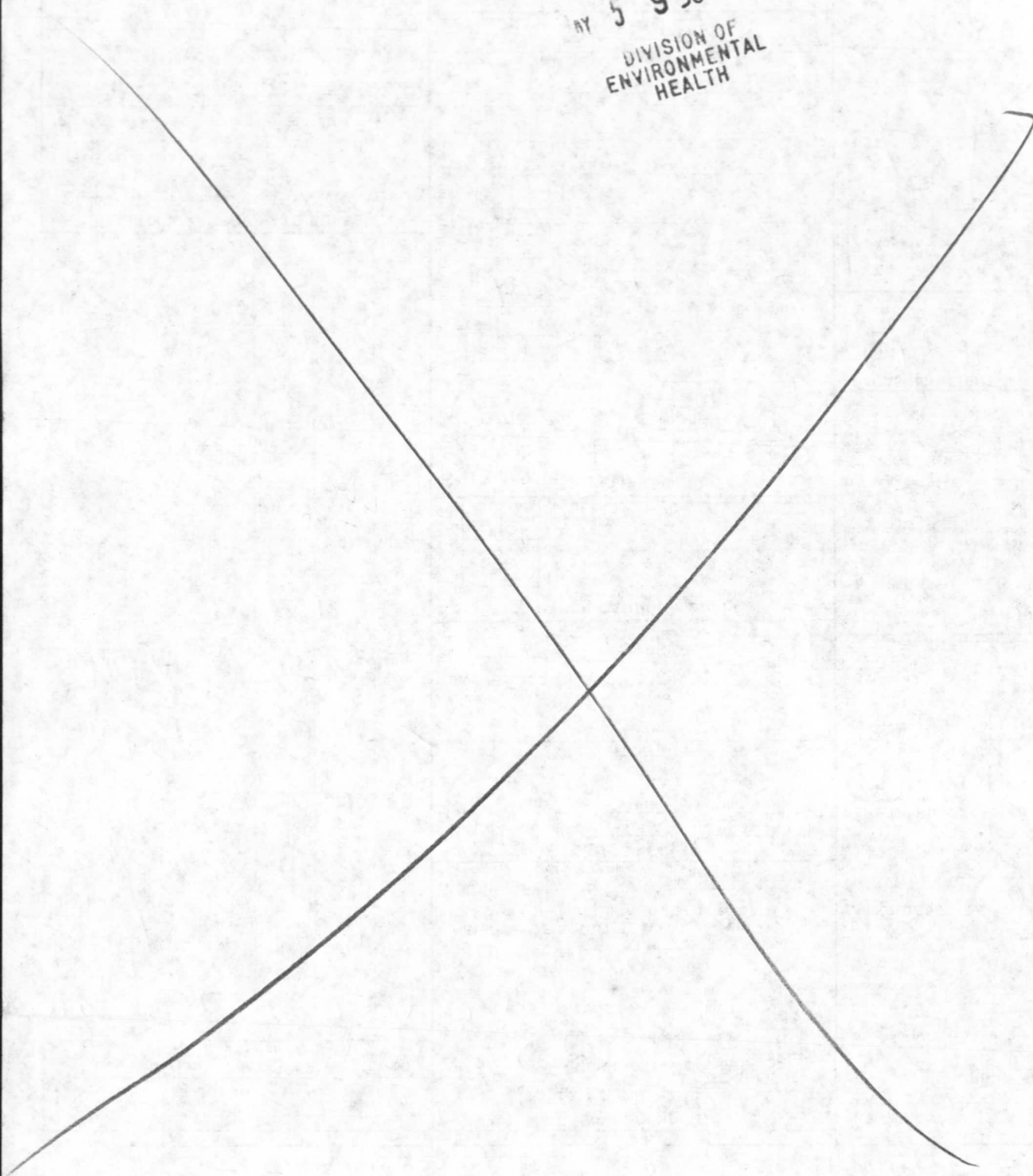
(PLEASE PRINT) Ralph Mayne

SIGNATURE Ralph Mayne

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

NY 5 9 58 AM '77

DIVISION OF
ENVIRONMENTAL
HEALTH



APPLICATION

A 23574

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 1000 GAL TANK DISTRICT 5
ENVIRONMENTAL HEALTH SERVICES 1250 GAL TANK DATE 7/19/76
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

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 Herbert Dyer

ADDRESS Highland Road, Highland, Md. PHONE 465-7777

Any questions call:

465-7777

Dennis

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1

ROAD AND DESCRIPTION 12852 Highland Road

SIZE OF LOT 1.5 acre TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Family Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT /s/ Jack Boender

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

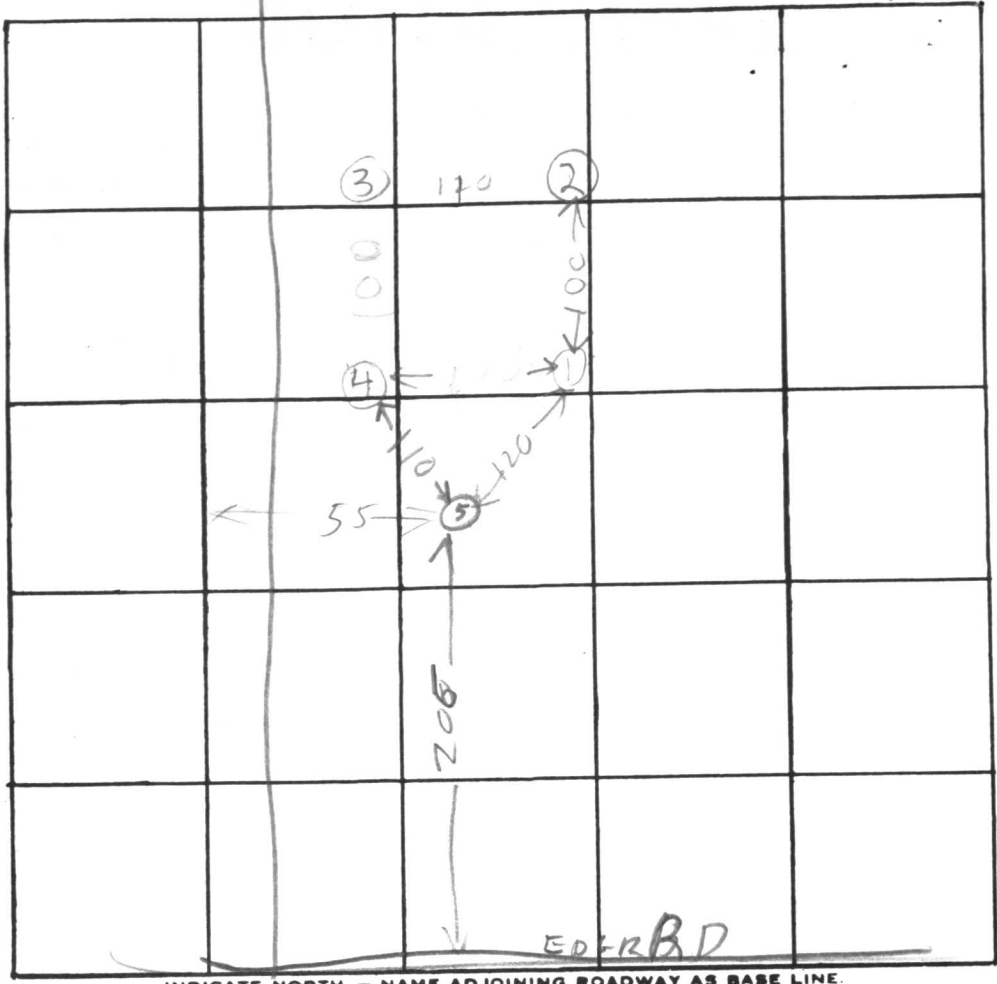
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A. 23574



lot 1
2

12848
Highland St.
James Heath

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

BT

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/20/76	1D	14	131	132	132	133	1
7/20/76	1S	3	131	132	132	133	1
	2S	3 1/2	135	136	136	138	2
	2D	13	WATER		13 FT		
	3D	4	139	141	141	146	5
	3S	13 1/2	139	142	142	152	10
	4	12 1/2	ALL SAND				
	5D	13	336	338	338	344	6
	5S	4	336	337	337	344	7

REMARKS _____

TYPE OF SOIL _____

TESTED BY B. Hodger ALSO PRESENT: Spangler
Dyer
Lot 1

C. 1 **4516** 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 WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER W27-426

DATE RECEIVED (WRA USE ONLY) _____ DATE WELL COMPLETED 3/8/78

DEPTH OF WELL A 23574 285 (TO NEAREST FOOT) 22 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-2550

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 273

OWNER HEATH JAMES LAST NAME FIRST NAME

STREET OR RFD 12848 Highland Rd. POST OFFICE Highland Md.

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	
Top Soil	0	2	
Sandy	2	40	✓
Sand Stone	40	50	
Micka	50	60	
Sand Stone	60	65	✓
Micka	65	185	

21' open
 fitted to 31'
 3-5-78 m.B.

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES Y NO N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)*

CEMENT C M BENTONITE CLAY B C

NO. OF BAGS 11 NO. OF POUNDS 1100

GALLONS OF WATER 66

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 35' measured FT.

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) 52

OTHER CASING (IF USED)

DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

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

PLASTIC P L OTHER O T

SCREEN

1 H O 50 285

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 F

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

TELESCOPE CASING T LOG INDICATOR L OTHER DATA AVAILABLE W Q

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 8

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 30 (NEAREST FOOT)

WHEN PUMPING 285 (NEAREST FOOT)

TYPE OF PUMPED 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) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) _____

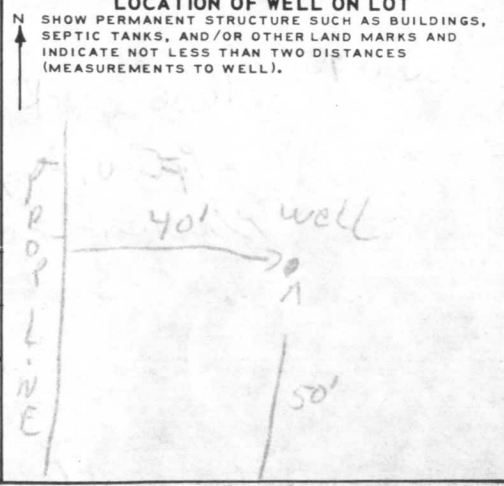
PUMP HORSE POWER _____

PUMP COLUMN LENGTH (NEAREST FOOT) _____

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE } LAND SURFACE ✓ (NEAREST FOOT)

- BELOW } 2



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 THE 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) _____

SIGNATURE Ralph Mayne