

B 1 14291

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-2639 fill in this form completely

please print or type

Date Received (APA) 04/09/00

OWNER INFORMATION RN 8211

8 MM DD YY 13

Smart Elaine

15 Last Name Owner First Name 34

15430 Roxbury Road

36 Street or RFD 55

Glenwood, Md. 21738

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

George F. Easterday M W D 040

Driller's Name 76 License No. 81

L. Franklin Easterday, Inc.

Firm Name

9265 Brown Church Rd., MT. Airv. Md. 21771

Address

Signature: George F. Easterday Date: 4/3/2000

B 2 WELL INFORMATION

APPROX. PUMPING RATE 5 (GAL. PER MIN.)

AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, DEWATERING
P PUBLIC WATER SUPPLY WELL
T TEST, OBSERVATION, MONITORING
G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A58979 COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 04/03/00
CO SIGNATURE EXP. DATE
NORTH GRID 521 000 EAST GRID 0795 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary DRive-POINT
other

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
D THIS WELL WILL DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 54 G A P 63

PERMIT No. HO-94-2639

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

B 3 LOCATION OF WELL CO#

Howard 8 COUNTY 21

23 SUBDIVISION 42

SECTION 44 46 LOT 48 50

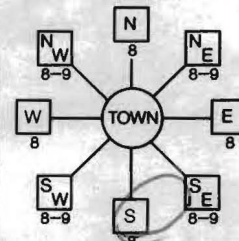
Glenwood

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



14718 Dorsey Mill Rd

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 50 37 DISTANCE FROM ROAD FL ENTER FT OR MI 38 39

TAX MAP: BLK: PARCEL

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. wells
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

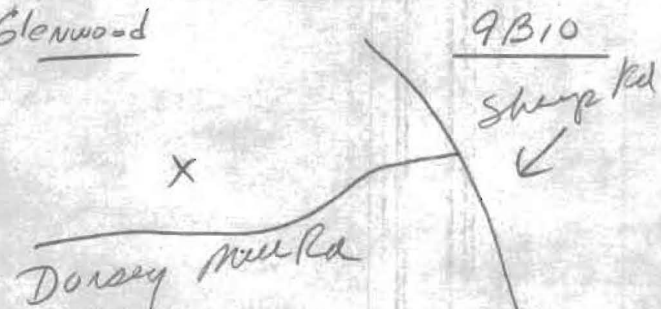
E 790

000 000

N 520

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N



C1 01891

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. On 5/30/00 SKW

COUNTY NUMBER A-58979

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-2639

OWNER: SMART, ELAINE STREET OR RFD 14718 DORSEY HILL TOWN Glenwood SUBDIVISION SECTION LOT

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Topsoil, Shale, Tan mica, and Gray mica.

GROUTING RECORD form with fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL, CEMENT, BENTONITE CLAY, NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

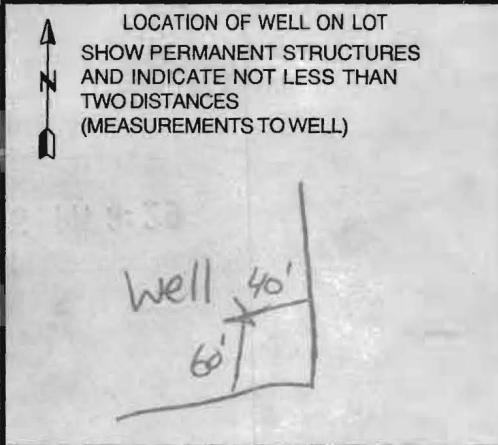
CASING RECORD form with fields for casing types insert, MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for screen type or open hole, diameter of screen, slot size.

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED PLACE, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



WELL HYDROFRACTURED form with YES/NO options.

CIRCLE APPROPRIATE LETTER form with options A, E, P.

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MWD 040, DRILLERS SIGNATURE George F. Easterday, LIC. NO. 1 AW D 328

DEPTH (nearest ft.) table with columns 1-21 and handwritten values 19, 600.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 10/1/98 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) - N/A -

\* PERMIT NUMBER OF REPLACEMENT WELL Ho -94 -1691

\* PERSON ABANDONING WELL: Darren Wilson

WELL DRILLERS LICENSE NUMBER: JSD065  
 CIRCLE: MWD/MSD/MGD

\* OWNER'S NAME: Elaine Smart

\* WELL LOCATION: 14718 Dorsey Mill Rd

COUNTY: Howard

NEAREST TOWN: Glenn

TAX MAP \_\_\_\_\_ BLOCK \_\_\_\_\_ PARCEL \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_

SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_

NEAREST ROAD: Roxbury Rd

MARYLAND GRID COORDINATES

BOX NUMBER E 792  
 N 521

000	X
000	

SHOW WELL LOCATION BY X WITHIN BOX

\* TYPE OF WELL BEING ABANDONED:

- DRILLED  JETTED
- BORED/AUGURED  HAND DUG
- OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC  MUNICIPAL/PUBLIC
- IRRIGATION  INDUSTRIAL
- TEST/OBSERVATION

\* TYPE OF CASING:

- STEEL  PLASTIC
- CONCRETE  OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 5 1/8 INCHES IN DIAMETER

\* DEPTH OF WELL: 72 FEET DEEP

\* WAS ANY CASING REMOVED?  YES  NO  
 if yes, length removed, in feet: \_\_\_\_\_

\* WAS CASING RIPPED OR PERFORATED?  YES  NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Gravel	72	24
Benonite	24	3
Fill Dirt	3	0

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN [Signature]

LICENSE # 269

MWD/MSD/MGD CIRCLE ONE

DATE 9-30-98

SEQUENCE NO (MDE USE ONLY) **4187**

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.  
 COUNTY NUMBER **A 58979**

ST/CO USE ONLY  
 DATE RECEIVED **9/17/98**

DATE WELL COMPLETED **08 31 98**  
 Depth of Well **400**  
 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"  
**HO - 94 - 11091**

OWNER **SMART**  
 last name  
 STREET OR RFD **4718 DORSEY MILL TOWN RD**  
 SUBDIVISION **GLENWOOD**

OWNER **ELAINE**  
 first name  
 SECTION **1**

LOT **2**

**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	
TOP SOIL	0	2	
brown shale	2	13	
Mica	13	135	
Sandstone	135	136	✓
Mica	136	400	

**GROUTING RECORD** yes  no   
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **7** NO. OF POUNDS **700**  
 GALLONS OF WATER **35**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **18** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
 **ST**  **CO**  
 STEEL CONCRETE  
 **PL**  **OT**  
 PLASTIC OTHER  
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch)! **6** Total depth of main casing (nearest foot) **20**  
 60 61 63 64 66 70'

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

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
 **ST**  **BR**  **HO**  
 STEEL BRASS OPEN HOLE  
 **PL**  **OT**  
 PLASTIC OTHER  
**C 2** DEPTH (nearest ft.)  
 1 2  
 1 **18** **400**  
 8 9 11 15 17 21  
 23 24 26 30 32 36  
 38 39 41 45 47 51  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH)  
**56** **60**  
 from to

**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 8 9  
 PUMPING RATE (gal. per min.) **1**  
 11 15  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **130** ft.  
 17 20  
 WHEN PUMPING **400** ft.  
 22 25  
 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**  
 DRILLER INSTALLED PUMP YES  NO   
 (CIRCLE) (YES or NO)  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. **29**  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**  
 PUMP HORSE POWER **37** **41**  
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 **+** above } LAND SURFACE  
 **-** below } **2** (nearest foot)  
 49 50 51

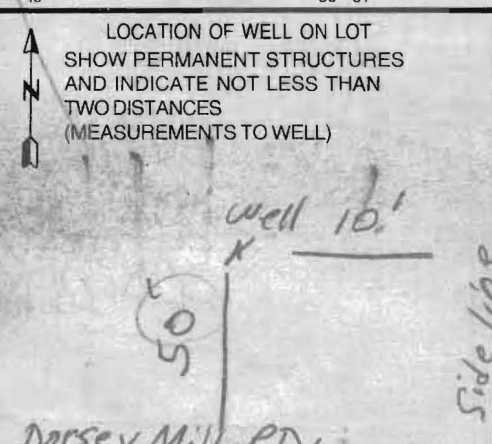
NUMBER OF UNSUCCESSFUL WELLS: **0**

WELL HYDROFRACTURED  **Y**  **N**

CIRCLE APPROPRIATE LETTER  
**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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "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.

**C 2** DEPTH (nearest ft.)  
 1 2  
 1 **18** **400**  
 8 9 11 15 17 21  
 23 24 26 30 32 36  
 38 39 41 45 47 51  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH)  
**56** **60**  
 from to



DRILLERS LIC. NO. **MWD 040**  
**Bence F. Easterday**  
 DRILLERS SIGNATURE  
 (MUST MATCH SIGNATURE ON APPLICATION)  
 LIC. NO. **MWD 501**  
**Charles A. Foster**

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 88 **88**

MDE 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

B 1 2-66  
2 3 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER

HO - 94 - 11691  
70 fill in this form completely 79

Date Received (APA)  
2/20/98

OWNER INFORMATION RN 7523

B 3 Howard

LOCATION OF WELL CC#

8 MM DD YY 13  
Smart Elaine  
15 Last Name Owner First Name 34  
5436 Roxbury Road  
36 Street or RFD 55  
Glenwood, Md. 21738  
57 Town 70 State 72 Zip 76

8 COUNTY 21  
23 SUBDIVISION 42  
SECTION 44 46 LOT 48 50  
Glenwood  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 2 M I  
73 76 77 78

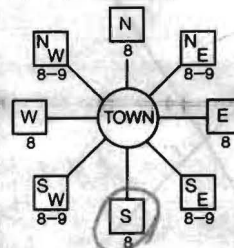
DRILLER INFORMATION

George F. Easterday

M W D 040

Driller's Name 76 License No. 81  
L. Franklin Easterday, Inc.  
Firm Name  
9285 Brown Church Rd., MT. Airy, Md. 21771  
Address  
Signature George F. Easterday Date 7/28/1998

B 4  
1 2  
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



14718 Dorsey Mill Rd

11 NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH  
WEST 32 EAST  
SOUTH  
34 50 37  
DISTANCE FROM ROAD Ft  
ENTER FT OR MI 38 39  
TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION  
1 2 APPROX. PUMPING RATE 5  
(GAL. PER MIN.) 8 500 12  
AVERAGE DAILY QUANTITY NEEDED  
(GAL. PER DAY) 14 20

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 APPROVAL)
- TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

HOLDATED A 58979  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S  
DATE ISSUED 08/20/98 EXP. DATE 08/19/99  
43 MM DD YY 48 CO SIGNATURE EXP. DATE  
NORTH GRID 50 521 000 EAST GRID 57 0195 000 63

APPROXIMATE DEPTH OF WELL 300 FEET  
24 28  
APPROXIMATE DIAMETER OF WELL 6 INCH  
NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN  
30 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)  
37 CABLE REVERSE-ROTary DRIVE-POINT  
other

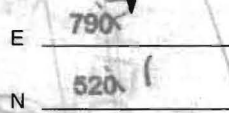
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
SOURCES OF DRILLING WATER  
1. wells  
2. 148  
3.

8-31-98  
Arout 8:30  
8/31/98 missed  
isp - location ok  
000  
000

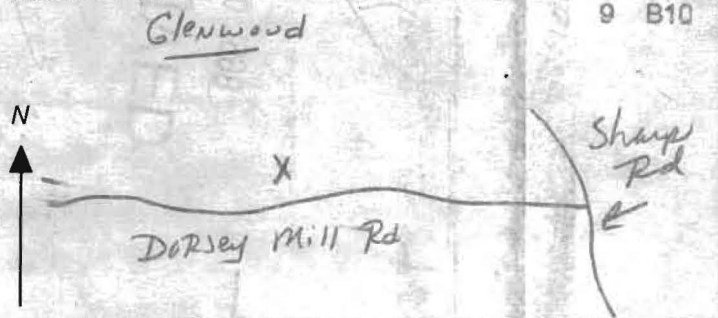
REPLACEMENT OR DEEPEMED WELLS  
(CIRCLE APPROPRIATE BOX)

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEM AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

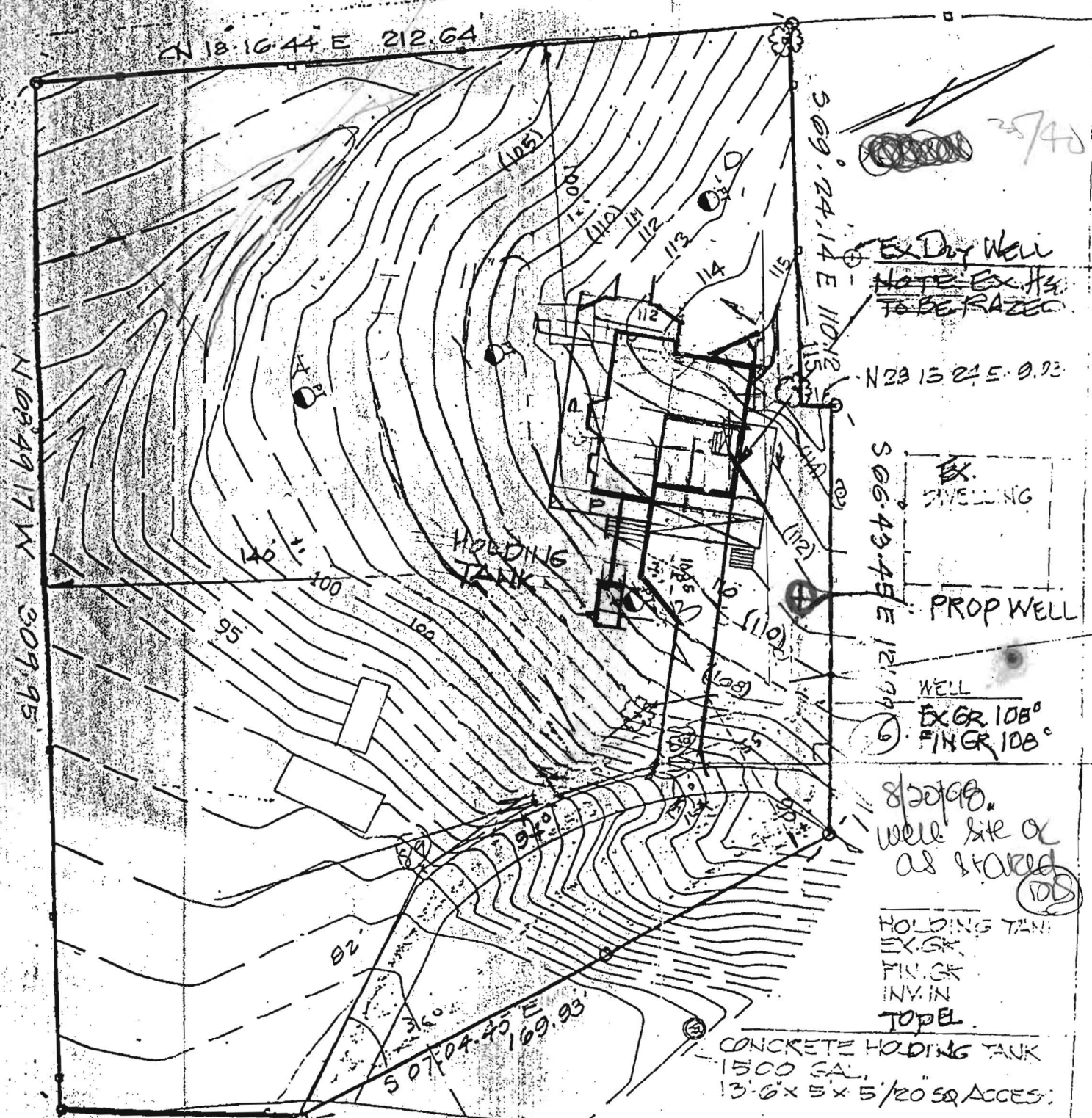


Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 54 G A P 63  
WRITE INITIALS IN BOX PERMIT No. HO - 94 - 11691  
FORCE DS 67 68 70 71 72 73 74 75 76 77 78 79

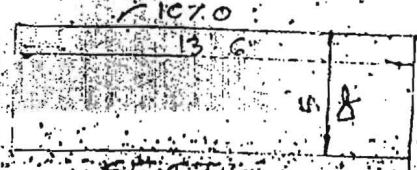
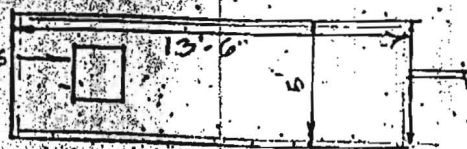
SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



JOHN C. MELLEMA SR. INC.  
 5409 EAST DR  
 BALTO. 21227  
 410-247-7483

SITE PLAN  
 14718 DOKESY MILL RD  
 DISTR. HO. CO. MD.  
 JUNE 4, 1998 SCALE 1" = 40'



NO. SPEC  
 COMPRESS - 400 PSI  
 10 GA. W.M.  
 TOP 1/2" OF TANK  
 WIRE MESH - PLV'S #3 REIN.  
 4" THICK WALL

11/6/00  
with signature

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation   
Replacement \_\_\_\_\_

Receipt # \_\_\_\_\_  
Date 12-10-99

Name of Installer Keith Hundertmark

Telephone 410-857-0255

License Number 8300  
Certified Well Pump Installer \_\_\_\_\_

Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner William Smart

Telephone \_\_\_\_\_  
Well Tag # MO-94-1691

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
Site Address 14718 Dorsey Mill Rd.  
Glenwood, MD

- Pump**
- Type
    - Deep well jet \_\_\_\_\_
    - Shallow well jet \_\_\_\_\_
    - Submersible
  - Make \_\_\_\_\_
  - Model # \_\_\_\_\_
  - Capacity \_\_\_\_\_ GPM
  - Pump exceeds well capacity Yes \_\_\_\_\_ No
  - If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_
  - What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards  Other \_\_\_\_\_

- Motor**
- Horsepower \_\_\_\_\_
  - RPM \_\_\_\_\_
  - Voltage \_\_\_\_\_
    - 110 \_\_\_\_\_
    - 220

- Pitless Adapter**
- Make yes
  - Model # \_\_\_\_\_
  - Depth \_\_\_\_\_

- Tank**
- Capacity \_\_\_\_\_
  - Pressure relief valve?

- Piping**
- Type 160 PSI
  - Size 1"
  - NSF and/or BOCA Code approved
  - Depth of supply line 42"

- Well data**
- Depth \_\_\_\_\_ ft.
  - Yield \_\_\_\_\_ GPM
  - Static water level \_\_\_\_\_ ft.
  - Will water supply be disinfected by installer? no

11/6/00  
with signature

well line, p.a. 4.5' below grade  
well casing 1.5' above ground  
2pc cap OK  
PVC conduit OK -> 18" b.g. OK TO COVER (DKS)

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Keith Hundertmark

Date: 12-10-99

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.




**HOWARD COUNTY HEALTH DEPARTMENT**

*Joyce M. Boyd, M.D., County Health Officer*

August 20, 1998

MEMORANDUM

TO: Ms. Elaine Smart  
15430 Roxbury Road  
Glenwood, Maryland 21738

FROM: Donna K. Soe, R.S.   
Water and Sewerage Program  
Bureau of Environmental Health

RE: Well Permit Application  
14718 Dorsey Mill Road

This is to confirm that the above referenced well permit application has been approved subject to the following conditions:

- The existing hand dug well serving the dwelling shall be properly abandoned and sealed upon completion of the replacement well
- A holding tank shall be the means of sewage disposal for the proposed replacement dwelling. Specific size and location of the holding tank shall be determined by the Health Department at the time of building permit application.

Approval of the well permit application is based upon your acceptance of these conditions. If you have any questions or concerns, please contact me at the address below or by calling (410) 313-2640.

Thank you in advance for your cooperation in this important matter.

*BANK FAX  
410 665-4212  
Attn: Barbara  
Stoy*

Post-it® Fax Note	7671	Date	10/29	# of pages	▶ 1
To	Barbara Stoy		From	Amy	
Co./Dept.			Co.		
Phone #			Phone #		
Fax #			Fax #		

Environmental Health  
Ellicott City, Maryland 21043-4544  
Community Environmental Health Program (410) 313-2644  
TDD (410) 313-2323 FAX (410) 313-2648

*Pat Radke 410-740-0156*

TO: Howard Co. Health Dept.

June 23, 1998

To date a house that is 97 years old sits on the property, at 14718 Dorsey Mill Rd.

The existing house has faucets for water in kitchen and coming from what is believed to be a shallow/hard dug well. There are no bathroom facilities. There is an outhouse that was being used and sits behind the house.

The point of disposal from the kitchen sink is unknown.

We will take down most of the existing house to expand and improve and will build a house (as described on map) in its place. A holding tank is indicated.

The existing house has three bedrooms a living rm, dining rm. & kitchen. The house proposed has 3 bedrooms, great rm, dining rm & kitchen. These rooms will replace the rooms in the existing house yet will be slightly enlarged to include updated items ie: closets, standard size staircase and bathrooms.

J. Appollonco  
J. Appollonco

buyer → Elaine Smart  
power of attorney for 15430 Roxbury Rd  
Appolloneo Glenwood, MD 21738  
(410) 442-4665

estate → Joyce Cutbail

RECEIVED  
HOWARD CO. HEALTH DEPT.  
ENVIRONMENTAL HEALTH  
1998 JUN 23 P 12:20



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HOWARD COUNTY HEALTH DEPARTMENT

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*Diane L. Matuszak, M.D., M.P.H., County Health Officer*

May 15, 2000

Attn: George Easterday  
L. Franklin Easterday, Inc.  
9265 Brown Church Road  
Mt. Airy, MD 21771

RE: Replacement Well Permit Fee  
Well Permit # HO-94-2639  
14718 Dorsey Mill Road

Dear Mr. Easterday:

It was recently reported that the status indicated on the above referenced replacement well permit application had changed. As indicated on the permit, well HO-94-2639 was to replace well HO-94-1691 which was to be abandoned and sealed. It is now understood, that well HO-94-1691 will not be abandoned and sealed but will be used as a standby supply. *and HO-94-2639 will be used as a standby supply.*

~~replace a well that will be~~ As you should already be aware, it is now necessary that the required \$80 well permit fee is submitted as soon as possible. A check made payable to the director of finance will suffice. Thank you in advance for your cooperation in this matter. *supply.*

Respectfully,

*Steven R. Krieg*  
Steven R. Krieg, Sanitarian  
Water and Sewerage Program

SRK

cc: File ✓

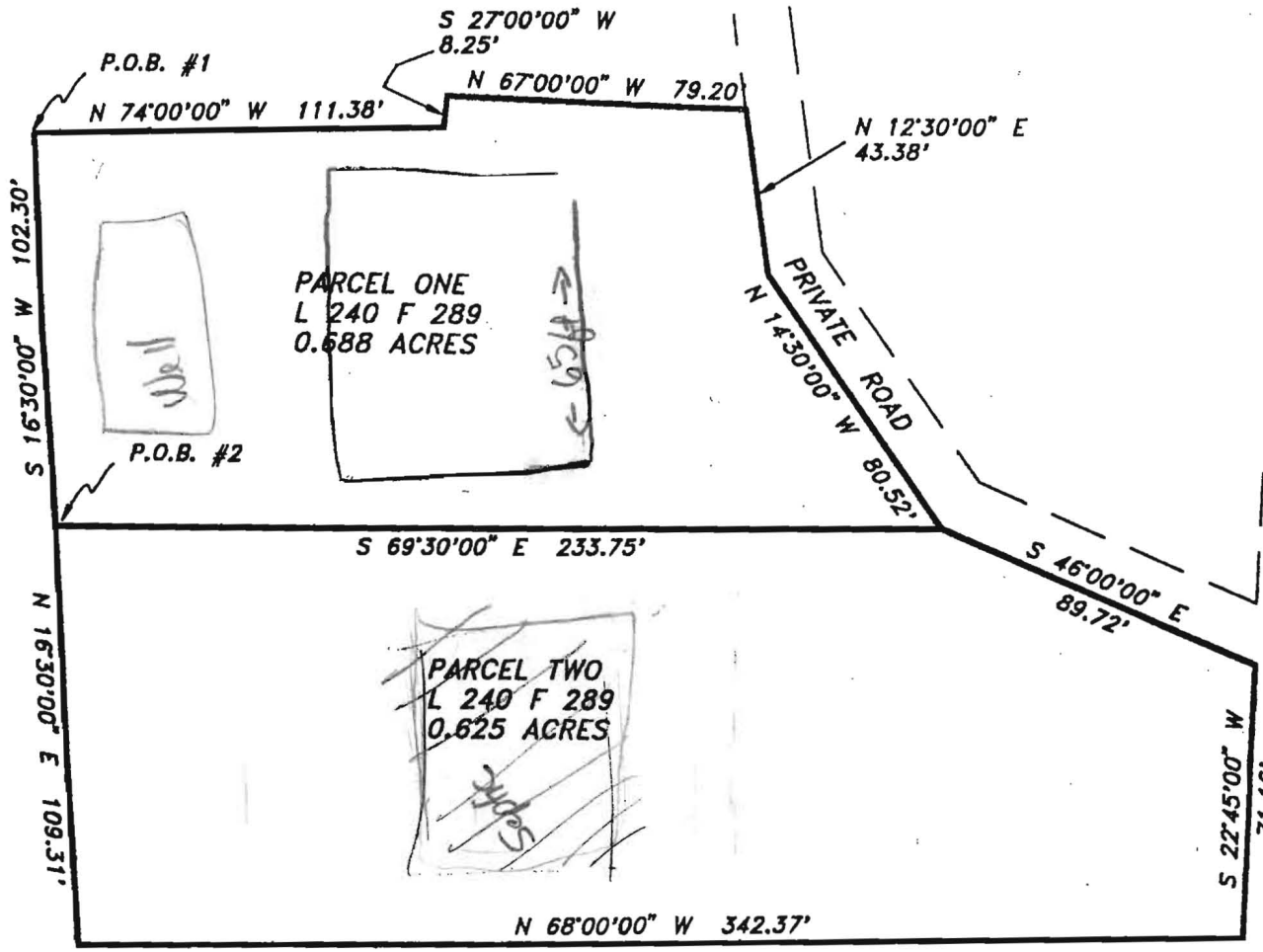
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Bureau of Environmental Health

3525-H Ellicott Mills Drive • Ellicott City, Maryland 21043-4544

Water and Sewerage, Permits (410) 313-1771 Community Environmental Health Program (410) 313-1773  
Director (410) 313-2640 TDD(410) 313-2323 TOLL FREE - 1-877-4MD-DHMH

There is a 97 yr old farmhouse w/outhouse that sit on parcel one  
 These 2 parcels will be merged to be one lot.  
 There is no septic system existing. There is a hand dug well  
 that will be replaced by a new well (indicated)



**DEED PLOT**  
 PROPERTY OF  
**KENNETH H. COOK SR.**  
 AND  
**DORA L. GRIMES**  
 LIBER 240 FOLIO 289  
 HOWARD COUNTY, MD.  
 SCALE 1"=30'

4/3/00  
RWSS 1100

SITE INSPECTION SHEET

OWNER: \_\_\_\_\_

DATE REQUESTED: 4/3/00

ADDRESS: 14718 Dorsey Mill Rd

DRILLER/CONTRACTOR: Easterday

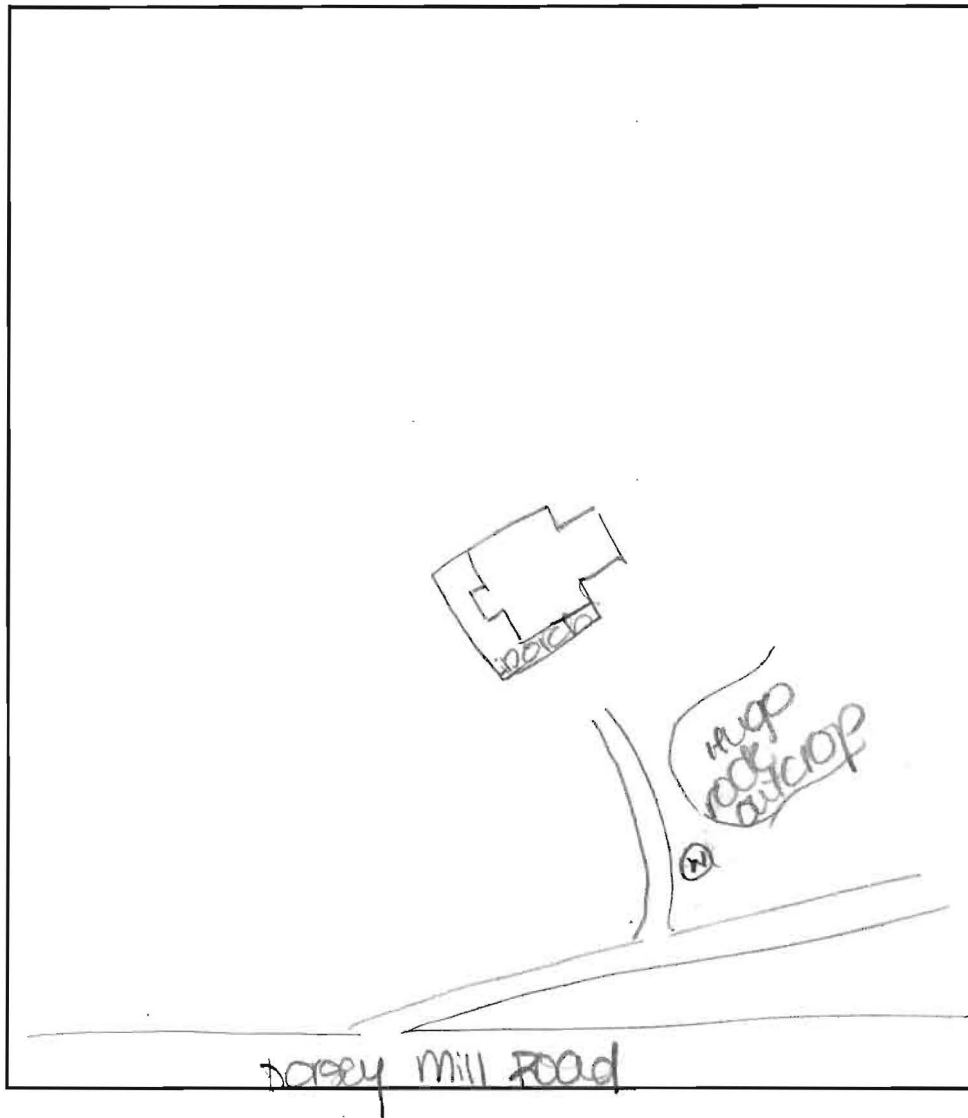
WELL TAG NUMBER: HO-94-2639

TAX & PARCEL: \_\_\_\_\_

COUNTY: A58979

PROPOSAL: New well has gone dry - needs replacement

LOCATION DIAGRAM



COMMENTS: Well site ok as stated. Failed well to be abandoned.

DATE: 4/3/00

INSPECTOR: [Signature]