

B 1 2206 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

70 71 72 73 74 75 76 77 78 79

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

please print or type

Date Received

OWNER INFORMATION

Grid for owner information including last name, first name, street, town, and state.

B 3

LOCATION OF WELL

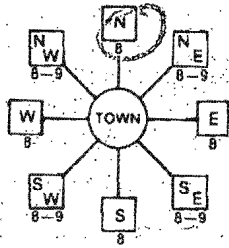
Grid for location of well including county, subdivision, section, lot, nearest town, and miles from town.

DRILLER INFORMATION

Form for driller information including name, license number, firm name, address, and signature.

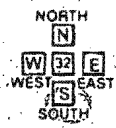
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD

ENTER FT OR MI

B 2

WELL INFORMATION

Form for well information including approximate pumping rate and average daily quantity needed.

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Options for water use: HOME, FARMING, INDUSTRIAL, PUBLIC OR PRIVATE WATER COMPANY, TEST/OBSERVATION.

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Form for health department approval including county name, signature, date issued, and north/east grid coordinates.

APPROXIMATE DEPTH OF WELL

APPROXIMATE DIAMETER OF WELL

METHOD OF DRILLING (circle one)

Form for method of drilling with options like BORED, JETTED, AIR-ROTARY, etc.

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

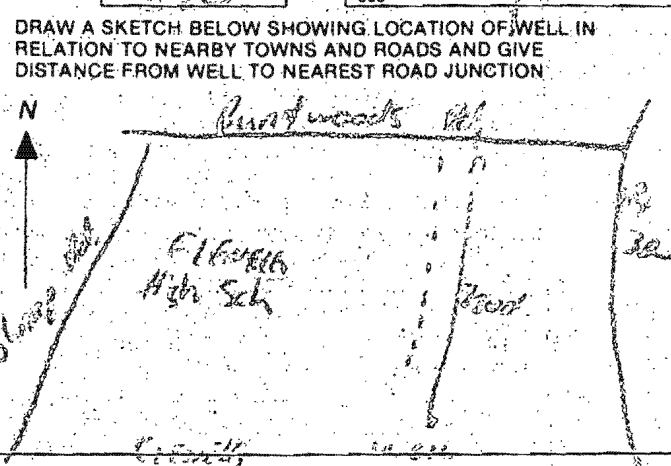
Form for replacement or deepened wells with options N, Y, S, D and a field for permit number.

Not to be filled in by driller (OEP USE ONLY)

Form for appropriate permit number and force initials.

SPECIAL CONDITIONS

Form for major features of box and locate well, sources of drilling water, and box number.



12/12/85

- ① 60 FT CASING
- ② 44 FT OPEN HOLE MEASURED WITH A STRING
- ③ NOT SURE OF LOCATION MIDDLE OF WOODS
HOWEVER I UNDERSTAND CRAIG'S SURVEYORS PICKED SITE
RECENTLY
- ④ 23 BAG USED
- ⑤ WELL OK

Raymond Hodger

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL
DRILLER:

My well driller is not to install the pump for my water well, and I
hereby certify that it will be my responsibility to have a Pump Permit
taken out by a registered master plumber or certified pump installer.
It will be my responsibility to notify the Health Department before
and during the installation so that inspections can be made by their
representative. (Pursuant to Chapter XVII, of the Plumbing Code of
Howard County.)

Ronald Warfield Jr.
(Name)
14663 Madelpha Rd.
Greenly, Md. 21737
(Address)

HO-81-1249
(OEP Well Permit Number)

11-13-85
(Date)

Lot 6 - Burntwoods Rd.

12/3/86
\$10.00
ck# 1013

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

12/1/86
copy here

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

B3082

New Installation Replacement Receipt # _____ Date _____

Name of Installer ROBERT S. BECK Telephone 421-9279

License number 2163
 Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner J. Martin + Mary Kline Telephone 951-7375
 Subdivision WB Property Lot # 6 Well tag # HO-81-1249
 Site Address 13855 Burdwards Rd.
Genesq md. 21737

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>1/2</u>	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # <u>PT-800</u>
b. Shallow well jet _____	3. Voltage <u>B</u>	3. Depth <u>48"</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	
2. Make <u>Goulds</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>7E1105422</u>		
4. Capacity <u>7</u> GPM		
5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input checked="" type="checkbox"/> No _____		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input checked="" type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other _____		

Tank	Piping	Well data
1. Capacity <u>42</u>	1. Type <u>plastic</u>	1. Depth <u>180</u> ft.
2. Pressure relief valve? <u>Yes</u>	2. Size <u>1"</u>	2. Yield <u>30+GPM</u>
	3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/>	3. Static water level _____ ft.
	4. Depth of supply line <u>48"</u>	4. Will water supply be disinfected by installer? <u>yes</u>

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: [Signature]

Date: 12/3/86

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

KENNARD
SUBDIVISION: WARFIELD

OR WB PROPERTY

A 33082

LOT NUMBER: 2

NEW 6

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	Minimum Total square Feet
3 bedroom	1000 gallon	_____ sq. ft./bedroom
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

174
38
210

174
22
348
348
38.28

3/23/87 NEED 2 70' TRENCHES

TRENCHES

174 sq. ft./bedroom

Trench to be 2 wide.

Inlet 4 feet below original grade.

Bottom maximum depth 8 1/2 feet below original grade.

Effective area begins at 4 feet below original grade.

4 1/2 feet of stone below distribution pipe.

210/180 with garbage

174
525
120
3
480
148
45
180
45
3

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: 7/22/85 PLACE THE TRENCH BETWEEN

PERC HOLE (1) & PERC HOLE (4). PERC HOLE (1) IS LOCATED 330 FT FROM THE ^{BACK} LOT LINE WHICH IS 475 FT LONG AND 220 FT FROM THE LEFT LOT LINE WHICH IS 763.35 FT LONG. PERC HOLE (4) IS LOCATED 450 FT FROM THE 475 FT LONG LOT LINE AND 140 FT FROM THE 763 FT LONG LOT LINE AS SEEN WHEN FACING PROP FROM BURNT WOODS ROAD. RUN TRENCHES ALONG CONTOUR BETWEEN HOLES 1 & 4.