

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SHADY CREEK COURT

C.O.#1 / S.T. OK

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL (Baffles in)

DRAIN FIELD/TITLE DEPTH 5 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 81 + 79 + 81 = 240 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS: 8/26/91 Later P.M. - ok to cover to 1' of end of trenches
all (3) closed to home; also from home to septic tank - only
Partial, C.B.S. 8/27/91 P.M. - Final - OK TO COVER SEPTIC WORK.
C.B.S.

DATE SYSTEM APPROVED 8/27/91 INSPECTOR Charles Bryan Stouke

APPLICATION

PERCOLATION TESTING

3A/17
A _____
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE 11/28/87

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 Springhill Associates - ~~cto~~ Fred Dickson & Associates, Inc.

ADDRESS 11 Warren Road, Baltimore, MD 21208 PHONE (301) 484-4100

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Meadowood LOT NO. H 10

ROAD AND DESCRIPTION Henryton Road - approximately 4000' north of Tunnel Road
Howard County, Maryland (1213 Shady Creek Road)

TAX MAP 10 PARCEL # 139

SIZE OF LOT 3⁺ Acres TYPE BLDG. Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Mike Seiff
(SIGNATURE OF APPLICANT)

APPROVED BY B. Neuman FOR Shallow only DATE 12/29/87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

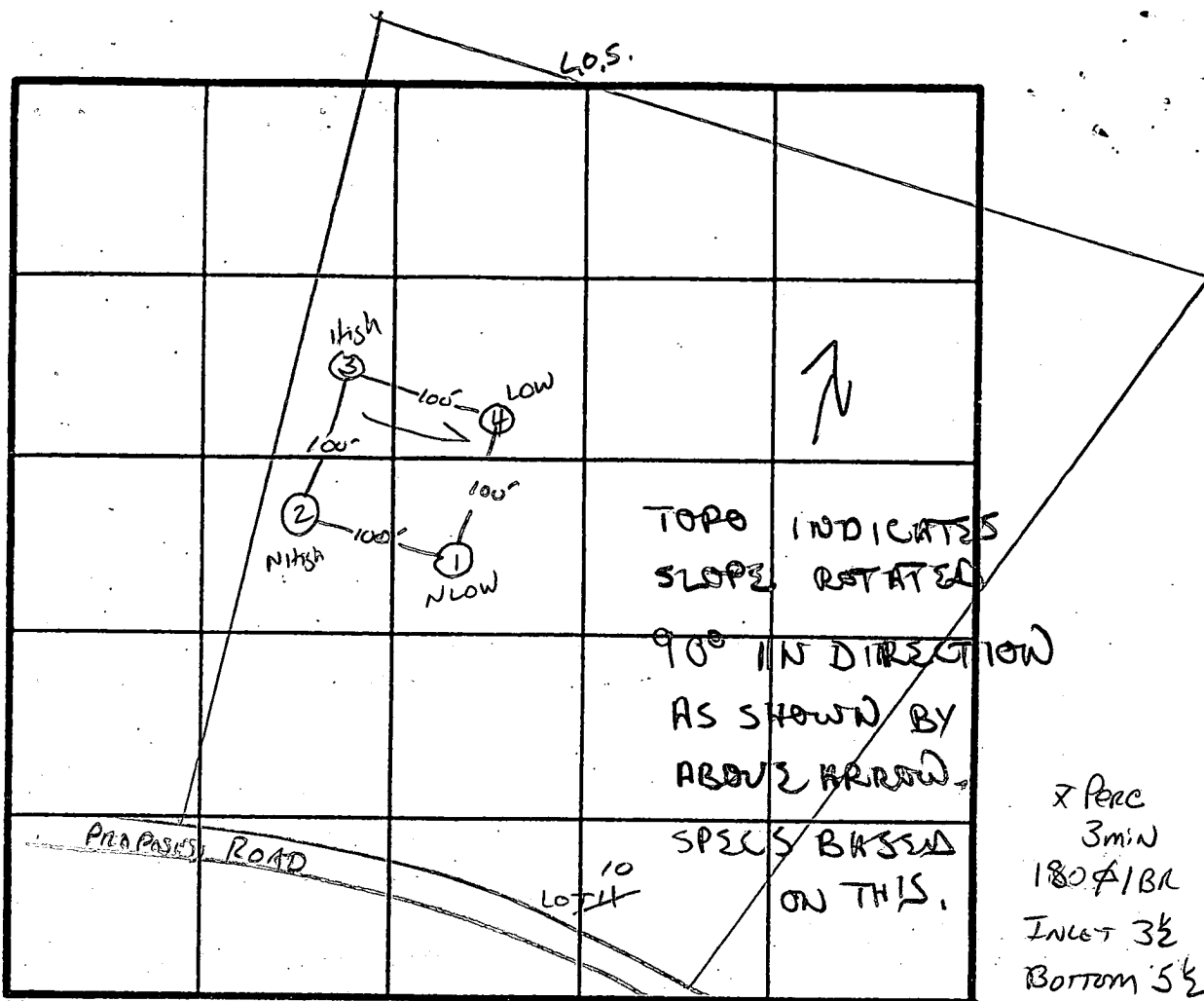
REASONS FOR REJECTION OR HOLDING
BLDG. PERMIT SIGNED AND RETURNED 4/11/91
Serial # 37028
SFD-4 Bedrooms
FOG. PERMIT SIGNED AND RETURNED 11/12/89
Serial # 27257-SFD.
Case

THIS IS NOT A PERMIT

① ② ③ ④
SOIL PROFILE

4"
A-1-3
yellow BR
Silt LOAM
9-12% CLAY
100% FRAGS
3'
TRANS TO yellow
BR: highly
micaceous
SANDY silt
LOAM
15-25%
FRAGS
INCREASING
TO 40%
AT BOTTOM
G1

10.15-12



7 Perc
3min
180#/BA
INLET 3 1/2
BOTTOM 5 1/2

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO HENRYTON RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	1 S 1 V	3.5 12.5	10:52	10:53	10:53	10:54	1 MIN
	2 V	11'	UNIFORM soil below 3'				
	3 S 3 M	3' 7'	10:59	11:06	11:00	11:07	7 min 2 min
	3 V	12'	UNIFORM soil below 3'				
	4 S 4 V	3' 11.5'	11:02	11:03	11:03	11:04	1 min

REMARKS HOLES PER PLAT

TYPE OF SOIL Glenely

TESTED BY S. Abel

ALSO PRESENT JACK FICKler

B 7 2290 SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

OEP PERMIT NUMBER
HO-81-2488
fill in this form completely

Date Received 07/14/87
OWNER INFORMATION
SARING WILL ASSOC
1432 RT 32
W FRIENDS HIA MD 21794

B 3 LOCATION OF WELL R-39638
HOWARD COUNTY
MEADOWOOD
SECTION 1 LOT 10
SYRBYVILLE
MILES FROM TOWN 4 MI

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Inc.
9265 Br. Ch. Rd., Mt. Airy, Md. 21771
Signature: George F. Easterday Date: 7/12/87

B 4 SHADY CREEK COURT
DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 8 FT

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
COUNTY NAME HOWARD COUNTY NO. A 38117
OEP SIGNATURE B. N. Nifan DATE ISSUED 06/29/87
NORTH GRID 549000 EAST GRID 0820000

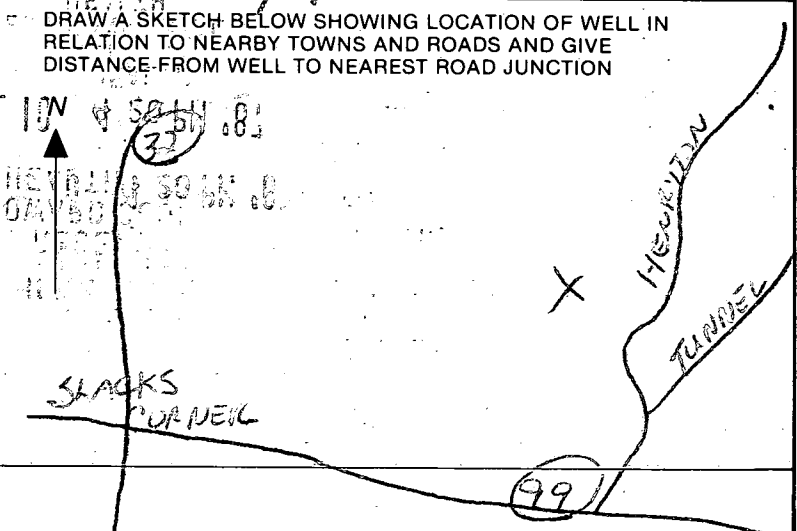
APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY Drive-POINT

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. WELL
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
8260
5409
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

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 (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE PERMIT No. HO-81-2488

SPECIAL CONDITIONS

C1 2097 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 38117

DATE Received

DATE WELL COMPLETED 062189

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HC-81-2488

OWNER ASSOCIATES SPRING HILL
STREET OR RFD SANDY CREEK COURT first name TOWN SYKESVILLE
SUBDIVISION MEADOWOOD SECTION 1 LOT 10

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Clay, Shaley Sand Stone, Mica, Sand Stone, Mica.

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 8 NO. OF POUNDS 800
GALLONS OF WATER 40
DEPTH OF GROUT SEAL (to nearest foot) from 0 to 21 ft.

CASING RECORD
casing types insert appropriate code below
ST CO STEEL CONCRETE
PL OT PLASTIC OTHER

MAIN CASING Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
TYPE ST 6 24

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

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

DEPTH (nearest ft.)
EACH SCREEN 1 40 22 400

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 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. 40
DRILLERS SIGNATURE

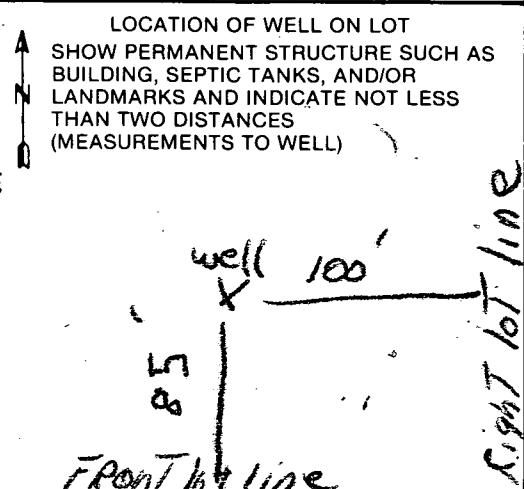
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 6
PUMPING RATE (gal. per min. to nearest gal.) 2
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface) BEFORE PUMPING 40 WHEN PUMPING 105
TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
CAPACITY: GALLONS PER MINUTE (to nearest gallon)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (circle appropriate box and enter casing height)
LAND SURFACE (nearest foot)



620
8100
6 h.

Page _____ of _____
Date _____

Review OKMR 1/11/91

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2488
Location of property (road) SHADY CREEK CT. *Carroll Bldg.*
Subdivision MEADOWWOOD Lot 10 Block _____ Plat _____ Sec. 1
Well Driller GEORGE LASTERDAY Owner ASSOCIATES, SPRING HILL
HAGON
Depth of well 400' 1 3/4
Distance of measuring point (M.P.) above ground _____
Static water level (S.W.L.) below M.P. 1 1/2 FT.
40'

I. High rate pumping -- reservoir drawdown
Time pump started 8:15 Pumping rate 10 G.P.M. *Hagon*
Total time 45 min to reach pumping water level 105 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:00	105	26 SEC	380 FT.	2 1/4 GPM
9:15	105	26 SEC		2 1/4 GPM
9:30	105	26 SEC		2 1/4 GPM
9:45	105	26 SEC		2 1/4 GPM
10:00	105	26 SEC		2 1/4 GPM
10:15	105	26 SEC		2 1/4 GPM
10:30	105	26 SEC		2 1/4 GPM
10:45	105	26 SEC		2 1/4 GPM
11:00	105	26 SEC		2 1/4 GPM
11:15	105	26 SEC		2 1/4 GPM
11:30	105	26 SEC		2 1/4 GPM
11:45	105	26 SEC		2 1/4 GPM
12:00	105	26 SEC		2 1/4 GPM
12:15	105	26 SEC		2 1/4 GPM
12:30	105	26 SEC		2 1/4 GPM
12:45	105	26 SEC		2 1/4 GPM
1:00	105	26 SEC		2 1/4 GPM
1:15	105	26 SEC		2 1/4 GPM
1:30	105	26 SEC		2 1/4 GPM
1:45	105	26 SEC		2 1/4 GPM
2:00	105	26 SEC		2 1/4 GPM
2:15	105	26 SEC		2 1/4 GPM
2:30	105	26 SEC		2 1/4 GPM
2:45	105	26 SEC		2 1/4 GPM
HD-2243:00	105	26 SEC		2 1/4 GPM

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 X
Replacement _____

Receipt # 39638
Date 7/14/91

Name of Installer C. Stephen Zabel

Telephone 875-2964

License Number 6033

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner Fred Dickson

Telephone 447-5965

Subdivision Meadowood Lot # 10

Well Tag # HO - 01 - 2488

Site Address 1213 Shady Creek Rd.

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
- Make _____
- Model # _____
- Capacity 5 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 1
- RPM _____
- Voltage _____
 - 110 _____
 - 220

Pitless Adapter

- Make Hanson
- Model # _____
- Depth 42"

Tank

- Capacity 80 equivalent
- Pressure relief valve? Yes

Piping

- Type Plastic
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth 400 ft.
- Yield 2 GPM
- Static water level 40 ft.
- Will water supply be disinfected by installer? Yes

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: C. Stephen Zabel

Date: 7/14/91

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

HD-215

P.M. (1) 8/26 No inspection
P.M. (2) 8/27 Not ready -> C.B.

