

2 pm
10/24/87 amb

03-292 901

PERMIT

P 40490

A REPAIR

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT _____

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 11/17/87

INDEXED

DATE SYSTEM APPROVED 10-26-87

INSPECTOR JEN

Jack Fyock IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION Woodmark ROAD 12246 Etchison Road LOT 6 BLF Fee 9

PROPERTY OWNER Francis B Peters
12246 Etchison Road

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 4

14g
71560
80

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

1026 87 140 sq ft/bedroom, Inlet at 4 feet, Bottom of trench at 11 feet. Effective depth starts at 4.0 feet, 7 feet of stone. Place trenches on contour toward 2nd drywell and connect longer trench to drywell for more disposal area. JEN

PLANS APPROVED BY C. Williams DATE 10/26/87

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER TWO 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 OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

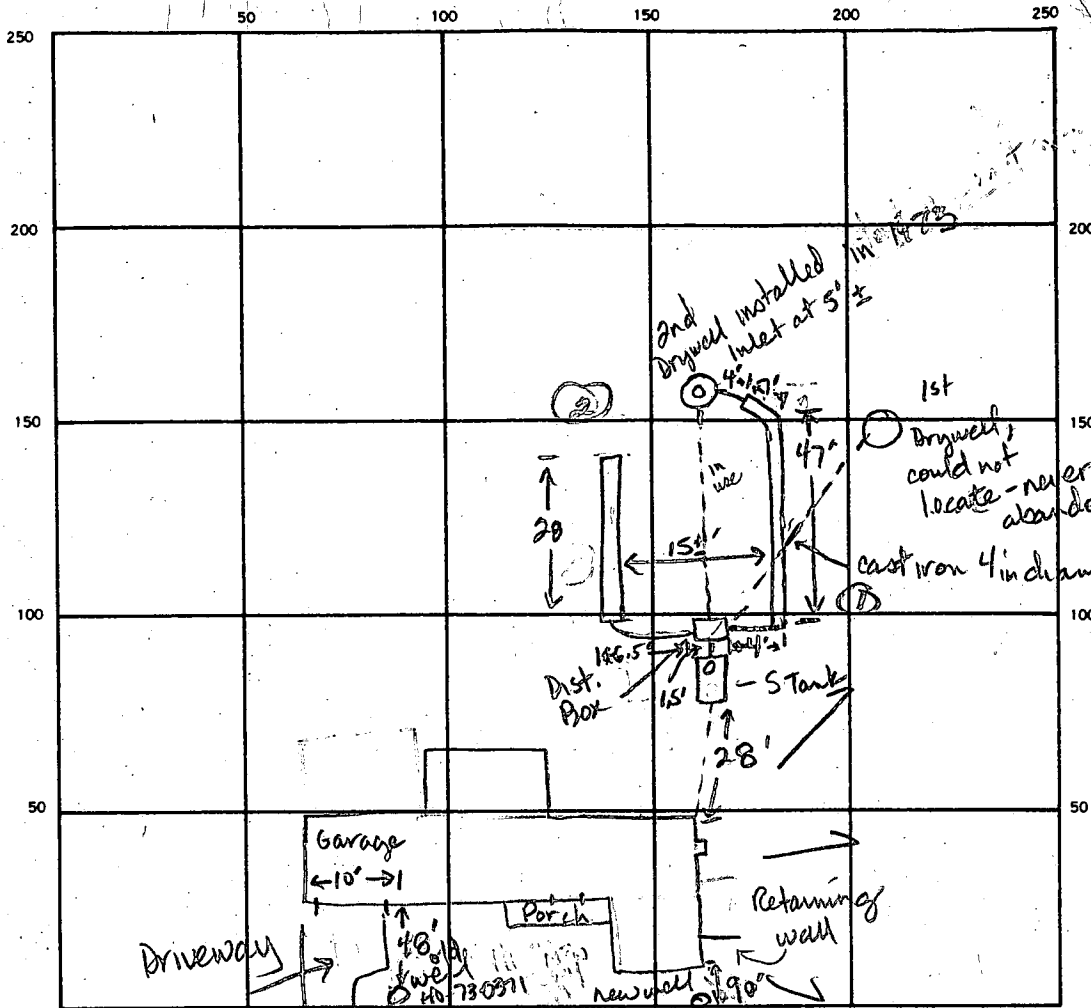
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

40490



12 24 / 48 = 3
 24 48 / 96 = 3
 36 72 / 144 = 5

20
 24
 8
 40
 2.4
 9.8

INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE
 Etchison Road
 HO-73-4314 - no tag - on slope down 29' from the edge of Etchison Rd.

SEPTIC TANK LEVEL 1500 ± CLEANOUTS 1 on ST, 1 on 2nd Drywell

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TILE FIELD DEPTH 11 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 4.5 FT.

EFFECTIVE GRAVEL DEPTH 7 6.5 FT. TOTAL LENGTH 54 28 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 378 182 SQ. FT.

DRYWELL INSIDE DIAMETER Existing FT. EFFECTIVE DEPTH BELOW INLET 5 11 FT.

ABSORBENT AREA 560 SQ. FT.

2.54
 1.7
 378
 182
 560
 6.5
 28
 520
 130
 182

REMARKS 10-26-87 OK to add stone, pipe & paper to trench #1. Can cover trench #1 but have both ends open. JEN. 10-26-87 OK to add stone, pipe & paper to trench #2. OK to cover trench #2. New line from septic tank to distribution box OK to cover. OK to cover all work. JEN

DATE SYSTEM APPROVED 10-26-87 INSPECTOR JENadeau

8-23 Parted F
10-31 OK P 18639

PERMIT

SEWAGE DISPOSAL SYSTEM

A 16528

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 3rd

DATE 6/29/73

Francis Peters

IS PERMITTED TO INSTALL ALTER

ADDRESS 13115 Overbrook Lane, ~~Box~~ Bowie, Md. 20715

PHONE 464-1424

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

Work Wash. 529-0505
(dial 72 +) "

SUBDIVISION Woodmark

ROAD ~~Cornell Mill Road~~ Etchison

LOT 6, Blk. F, Sec. 9

PROPERTY OWNER Francis Peters

ADDRESS same as above

SPECIFICATIONS 3 bedrooms

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY ~~1000~~ 1500 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL - 100 sq. ft. absorbent sidewall area per bedroom to begin below the inlet. Inlet to be 3 ft. Maximum depth permitted for dry well is 10 ft. Locate dry well 61 ft. from rear property line and 60 ft. from right side line as seen from Etchison Road.

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.
PERMIT VOID AFTER THREE ~~XXX~~ YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY Robert V. Torre

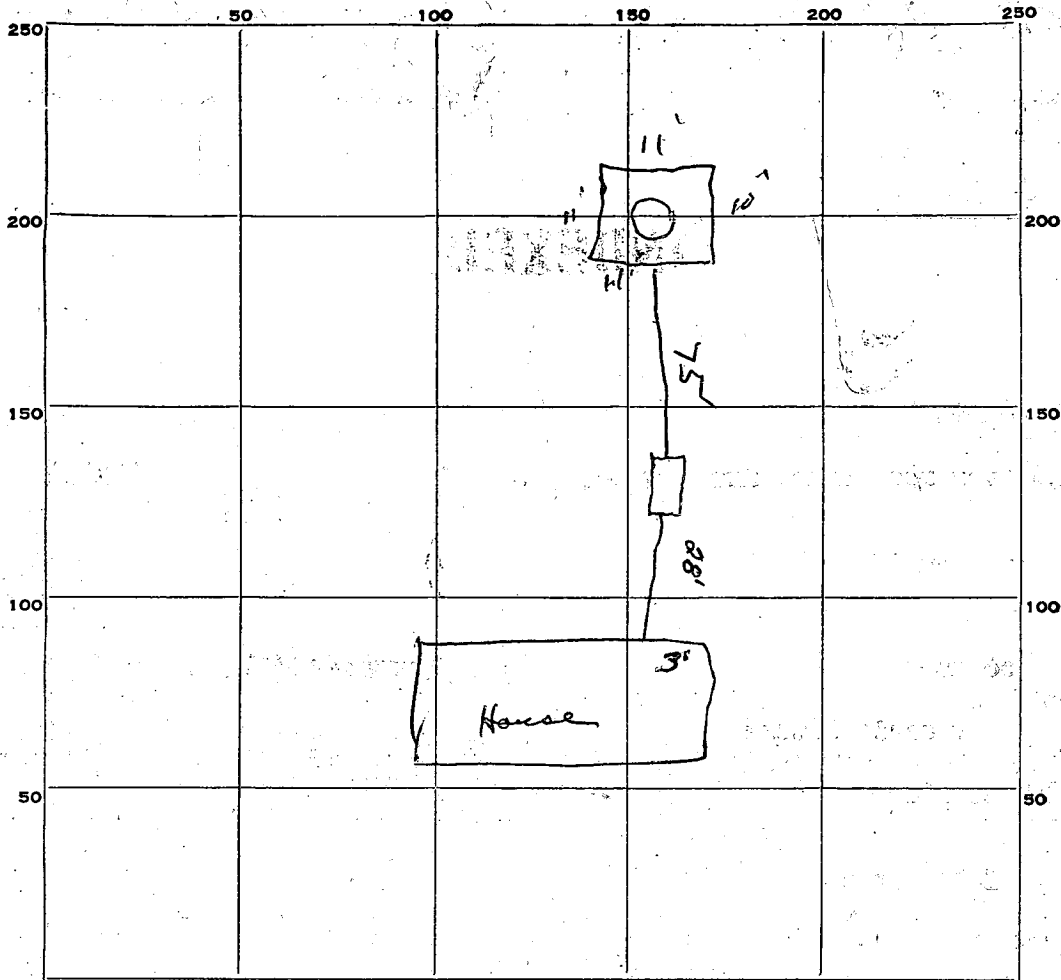
DATE 9/28/72

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

See note on back

A 16528



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

SEPTIC TANK, LEVEL

CLEANOUTS

DISTRIBUTION BOX, LEVEL

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 43 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 301 SQ. FT.

REMARKS

8-23-73

iron work cut out under standpipe on s. tank, & std. pipe attached was loose, tank pumped out of water & mud silt F.F.

DATE SYSTEM APPROVED

10-31-73

INSPECTOR

Det. Perry

C1 3292 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A 165282

Date Received (OEP use only)

DATE WELL COMPLETED 122382

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-4319

OWNER last name Peters first name Fran STREET OR RFD 12946 Etchison Road TOWN Mayfield SUBDIVISION Woodmark SECTION 9 LOT 6 block F

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 Topsoil, Brown Mica, Mica schist, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 9 NO. OF POUNDS 900 GALLONS OF WATER 48 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft to 30 ft.

CASING RECORD casing types insert appropriate code below. MAIN CASING TYPE S-T Nominal diameter top(main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 33

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

SCREEN RECORD screen type or open hole insert appropriate code below. DEPTH (nearest ft.) HO 31 300

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

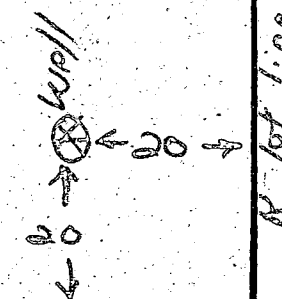
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 38 WHEN PUMPING 300 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 WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N 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 LAND SURFACE - below 2 (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



CIRCLE APPROPRIATE BOX 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 George J. Basterday SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

Etchison

APPLICATION

A 16528

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY *Septic Tank - 3 bedroom - 1000 gal* ELLICOTT CITY

DISTRICT 3

DATE 11/30/71

Dry Well - 100 sq. ft. absorbent sidewall area per bedroom to begin below the inlet.

Maximum depth permitted for dry well is 10 ft. Locate dry well 6 ft. from rear property line and 60 ft. from right side line as seen from Estherson Rd.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Mark Wakefield, Jr.
ADDRESS 12150 Mt. Albert Court
Ellicott City, MD., 21043 PHONE 531-5072

PROPERTY LOCATION:

SUBDIVISION Woodmark, Inc. LOT NO. 6, Block F, Sec. 9

ROAD AND DESCRIPTION Carroll Mill Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 140' x 318' x 198' x 330 TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE: _____

SIGNATURE OF APPLICANT Mark Wakefield, Jr.

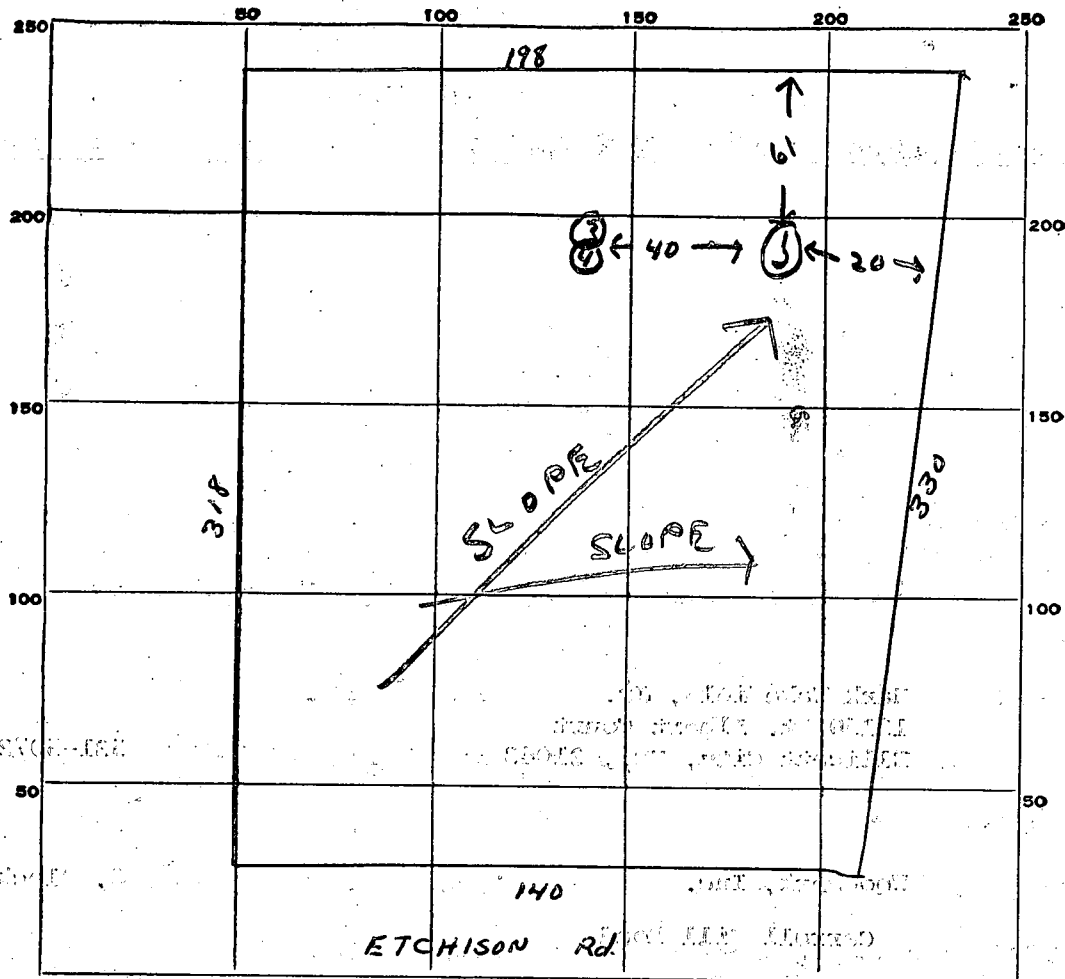
APPROVED BY Robert v. Tone FOR Dry Well DATE 9/28/72
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/15/11	3	9 1/2 ft	11 30			11 32	2 min
	4	3 1/2 ft	11 30	11 32	11 32	11 35	3 min
	1	11 ft	11 31			11 33	2 min
	2	4 ft	11 31	11 33	11 33	11 37	4 min LOT GF

SOIL AUGER FINDING Use Notes 3+4.

TESTED BY R. Torre

REMARKS

B 1 **8634** SEQUENCE NO. (DWR USE ONLY)

STATE OF MARYLAND
 DEPARTMENT OF WATER RESOURCES
 STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401

DWR PERMIT NUMBER
 10-13-37

APPLICATION FOR PERMIT TO DRILL WELL

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY)
 9/4/73

OWNER
 COL 15 LAST NAME: Peters, Francis
 COL 34 FIRST NAME: Mason, Hubert

STREET OR RFD
 COL 36: 12248 Etchison Rd.
 COL 58: _____

POST OFFICE
 COL 57: Northumbury
 COL 76: _____

B 1 CONTINUED **DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

DATE June 18, 73 **LICENSE NUMBER** 42

SIGNATURE
J. F. Eastman

B 3 **LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6 Howard

COUNTY Howard (DO NOT ABBREVIATE COUNTY NAME)

SUBDIVISION Woodmark

SECTION 9, B, F **LOT** 6

NEAREST TOWN Maryfield

MILES FROM TOWN 2

B 2 **WELL INFORMATION**

1 2 3 (SEQ. NO.) 6 5

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) _____

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT

M MUNICIPAL WATER SUPPLY

P PRIVATE WATER COMPANY } MUST HAVE STATE HEALTH DEPT. APPROVAL

T TEST

B 4 **DIRECTION FROM TOWN**

1 2 3 (SEQ. NO.) 6

S SOUTH **W** WEST **N** NORTHWEST **S** SOUTHWEST

NEAR WHAT ROAD Carroll Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 N NORTH **S** SOUTH **E** EAST **W** WEST

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 300

APPROXIMATE DEPTH OF WELL 100 FEET

APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) **JETTED** **DRIVEN**

AIR-ROTARY **AIR-PERCUSSION** **ROTARY (HYDRAULIC ROTARY)**

CABLE **REVERSE-ROTARY** **DRIVE-POINT**

OTHER (DESCRIBE) _____

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) _____

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

Sketch area with handwritten notes:
 Well at on left of Carroll Rd
 B144
 30' case
 300' well
 27' open
 8 bags
 8 bags
 3 R & M well

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

APPROPRIATION PERMIT NUMBER _____ **ENGINEER REVIEW DISTRICT NO.** _____

FORCE _____ **CONDITIONS** _____

BOX NUMBER
 E 810
 N 520

NORTH COORDINATE 525000
 50 51 52 53 54 55

EAST COORDINATE 0815000
 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) _____
 65 66 67 68

B 4 CONTINUED **HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6 Howard 3307

STATE HEALTH (CIRCLE BOX) **S**

DATE 062073

APPROVED BY
Palmer F. Wine, Director

B 5 SPECIAL CONDITIONS 8-63 (DWR USE ONLY)

1 2 3 (SEQ. NO.) 6

SEQUENCE NO. (DWR USE ONLY) **0059**

1 2 3 4 (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

DATE RECEIVED (DWR USE ONLY)

DATE WELL COMPLETED **8-30-73**

DEPTH OF WELL **300** (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" **AG-73-0371**

DRILLERS IDENTIFICATION NO. **42**

OWNER **Peter Francis** LAST NAME FIRST NAME **Northway, J.**

STREET OR RFD POST OFFICE

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	
<i>Gravel</i>	1	2	
<i>Sandy</i>	2	30	
<i>Granite</i>	30	300	✓

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT M BENTONITE CLAY B C

NO. OF BAGS **8** NO. OF POUNDS **800**

GALLONS OF WATER **48**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM **0** FT. TO **27** FT. (ENTER 0 IF FROM SURFACE)

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) **30**

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE

STEEL S T BRASS OR BRONZE B R H O

PLASTIC P L OTHER O T

DEPTH (NEAREST WHOLE FOOT)

EACH SCREEN	FROM		TO	
	1	2	3	4
1	8	9	11	15
2	15	17	21	23
3	23	24	26	30
	30	32	36	38
	38	39	41	45
	45	47	51	

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 **68** F N

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING T W G

LOG INDICATOR 70 72 74 75 76

OTHER DATA AVAILABLE

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **11**

METHOD USED TO MEASURE PUMPING RATE **Load**

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **17** (NEAREST FOOT)

WHEN PUMPING **35** (NEAREST FOOT)

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

AIR A PISTON P TURBINE T

CENTRIFUGAL C ROTARY R OTHER (DESCRIBE BELOW) O

JET J SUBMERSIBLE S

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) **31**

PUMP HORSE POWER **37**

PUMP COLUMN LENGTH (NEAREST FOOT) **43**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE + BELOW -

LAND SURFACE (NEAREST FOOT) **50**

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

CIRCLE APPROPRIATE BOXES

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

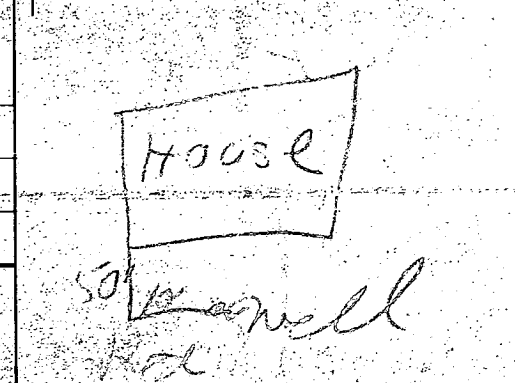
E ELECTRIC LOG OBTAINED

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 **J. Estabrook**

SIGNATURE **J. Estabrook**



FILE Replacement Well Check

DATE REPORTED 11/6/82

PROPERTY OWNER Sue Peters

P. O. ADDRESS

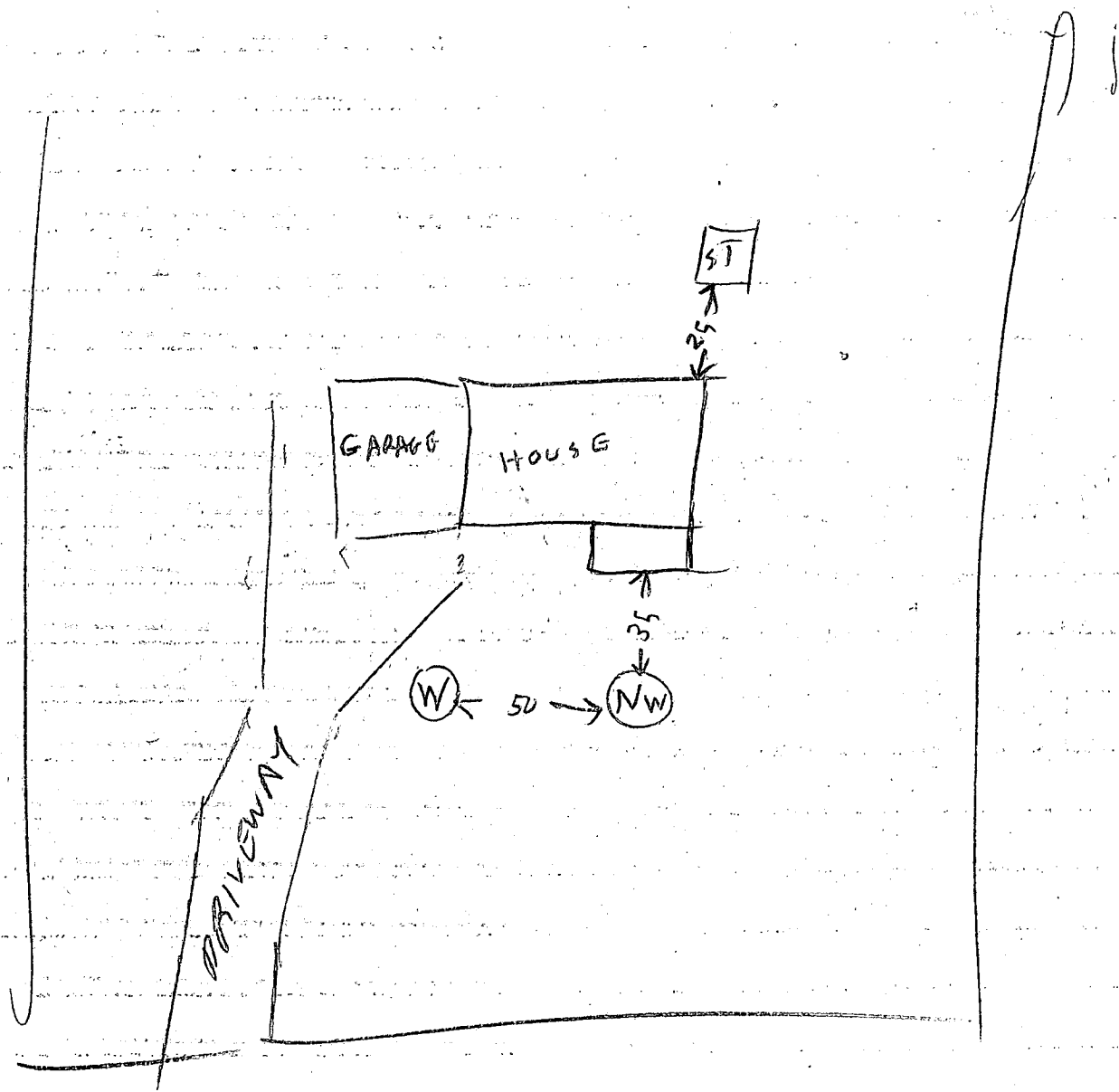
DIRECTIONS TO PROPERTY 12246 Elchison Rd Woodmark
Lot 6

INFORMANT

CONDITION FOUND: 11/6/82 - Well to be drilled
on site shown reverse side. New
well is to be drilled because of
water shortage. Talked to occupant
B:H

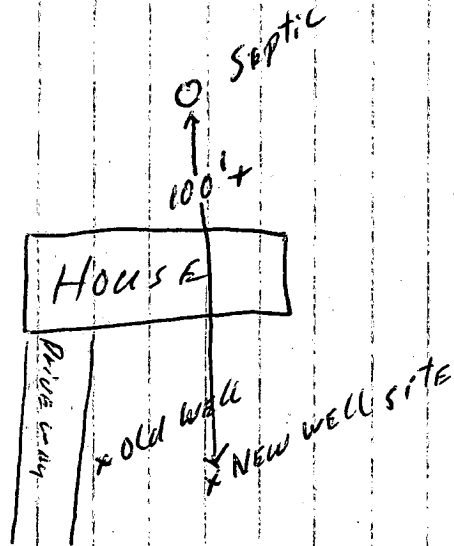
ACTION TAKEN:

FINAL DISPOSITION:



ETCHISON RD

SOE P6 TEUS



Etchison Rd.

B 1 2894	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL <i>please print or type</i>	OEP PERMIT NUMBER HO-73-4319 <i>fill in this form completely</i>
<small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>			

Date Received 1 1 1 6 8 2
(OEP Use Only)

OWNER INFORMATION

PETERUS SUE
Last Name 15 Owner 34 Name

1 2 2 4 6 | E T C H I S O N | R D |
36 Street or RFD 55

E C C I R C L O A T T | C I T Y | M D | 2 1 0 4 3
Town 57 State 76 Zip

B 3 LOCATION OF WELL

COUNTY Howard

SUBDIVISION Woodmark

SECTION 9 LOT 6 Blackf

NEAREST TOWN Etchison Rd. Mayfield

MILES FROM TOWN (enter o if in town) 3 **M 1**

B 1 Continued **DRILLER INFORMATION**

Stanley W. Ballinger Jr. **908**
Driller's Name 77 License No. 80

Stan Well Drilling Inc.
Firm Name

PO Box 2035 West, Md 21157
Address

Stanley W. Ballinger Jr. **11/16/82**
Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Etchison Rd.
NEARWHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) **W** **32** **E**
WEST EAST SOUTH

DISTANCE FROM ROAD **70'**
(CIRCLE APPROPRIATE BOX) 37

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

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

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **205**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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 **250** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH

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 _____

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

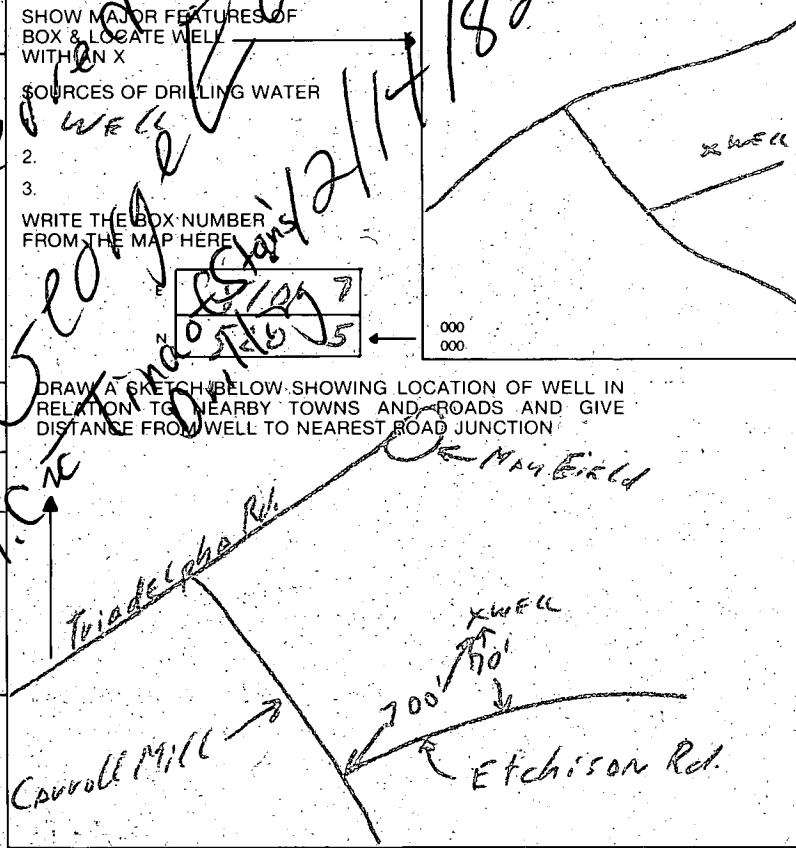
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

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

APPROX. PERMIT NUMBER **G A P**

FORCE **FS** WRITE INITIALS IN BOX PERMIT No. **HO-73-4319**



B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME **A 16528Z** COUNTY NO.

OEP SIGNATURE **Frank Shuman** STATE HEALTH CIRCLE BOX **S 41**

DATE ISSUED **11 16 82** CO SIGNATURE

NORTH GRID **525** EAST GRID **0817** EXPIRES **051683**

B 5 SPECIAL CONDITIONS 8-63

B 6770

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

HO-73-4319

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS)

please print or type

fill in this form completely

Date Received

1 2 3 4 8 2 (OEP Use Only)

B 3

LOCATION OF WELL

OWNER INFORMATION: Peter S. K. Farmer, 1234 E. T. C. H. I. S. O. N. A. L. L. E. T. I. C. O. + T. C. + V.

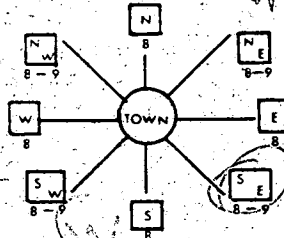
COUNTY: Howard; SUBDIVISION: Woodmark; SECTION: 9; LOT: 6, Block WF; NEAREST TOWN: Mayfield; MILES FROM TOWN: 2

B T Continued

DRILLER INFORMATION

Driller's Name: Harold Pastorday; Firm Name: 9865 Brown Pl...; Address: ...; Signature: ...; Date: 12/13/82

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: Carroll Mill; ON WHICH SIDE OF ROAD: EAST; DISTANCE FROM ROAD: 509m 700

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5; AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER: 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE. 8107, 5205

12/23/82 WELL OK + SEE OTHER SIDE

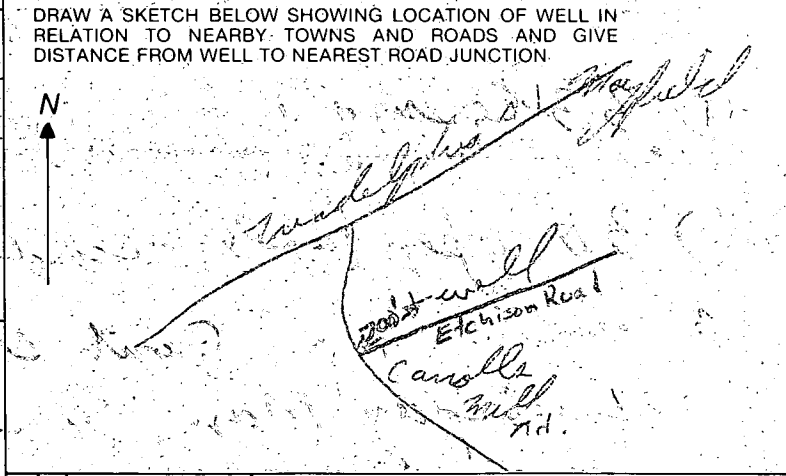
USE FOR WATER (CIRCLE APPROPRIATE BOX): D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY); F FARMING; I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER; P PUBLIC OR PRIVATE WATER COMPANY; T TEST, OBSERVATION, MONITORING

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6 INCH

METHOD OF DRILLING (circle one): 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; D THIS WELL WILL DEEPEM AN EXISTING WELL



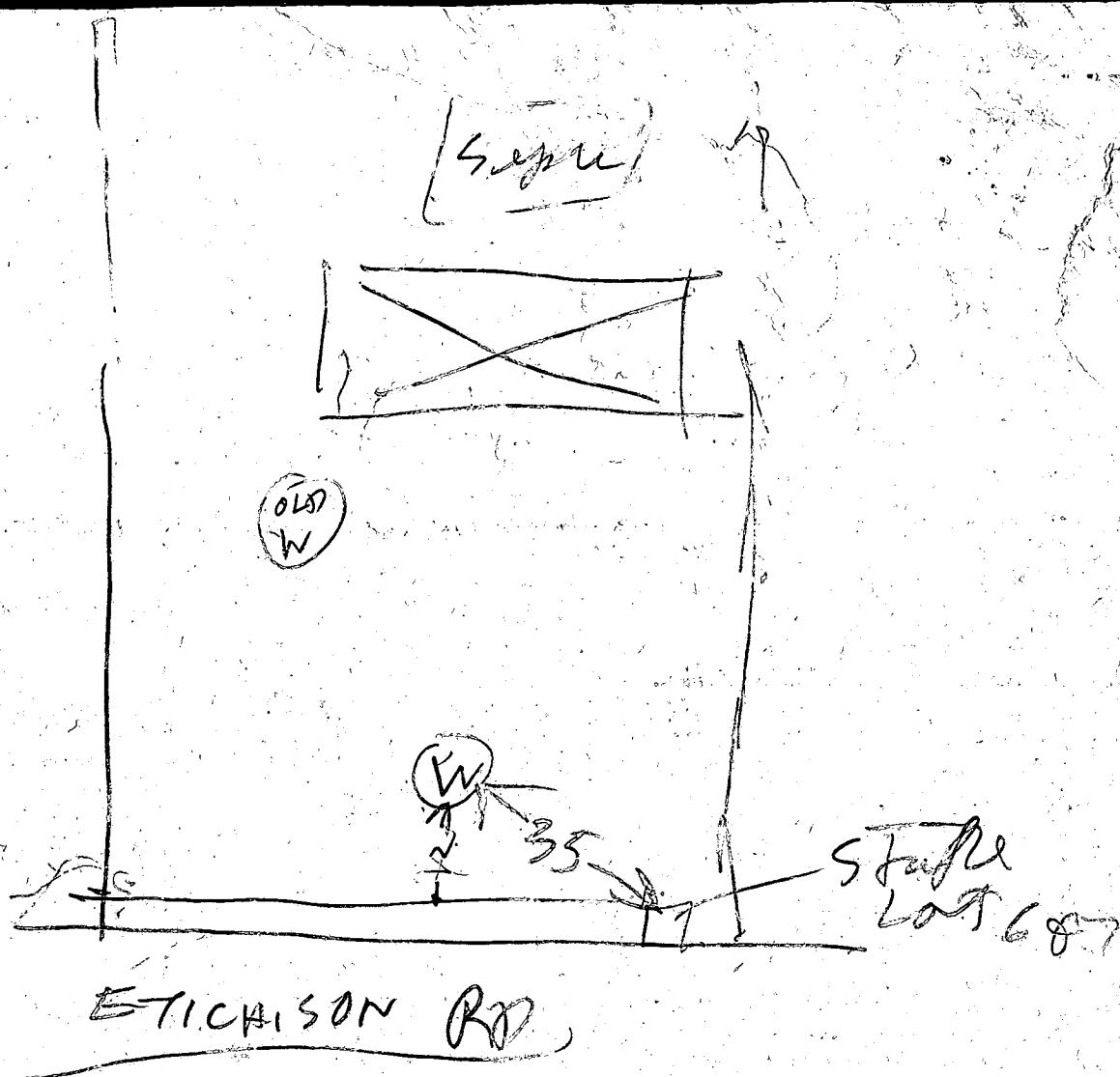
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: HOWARD COUNTY NAME, 016528Z COUNTY NO.

Not to be filled in by driller (OEP USE ONLY): APPROX. PERMIT NUMBER: GAP; FORCE: FS; PERMIT No.: HO-73-4319

OEP SIGNATURE: Frank ...; DATE ISSUED: 12/23/82; NORTH GRID: 525; EAST GRID: 0817; EXPIRES: 05/683

B 5

SPECIAL CONDITIONS 8-63



12/23/82

- ① 33 Crossing 1 FT out of ground
- ② 30 open Hole according to Sonny
- ③ arrive 9:15 Groat already started
Easterday Man, Sonny said He got
special permission
- ④ LOCATION OK
- ⑤ 9 BAGS.

R. Kodyke

N 03° 28' 50" E

308.56'

207.19'

S 88° 33' 03" E

EXIST Elev. 977
Invert Elev. 95

61'

60'

Dry well

Slope

337.31'

Slope

Tank

Exit Elev. 100
Invert Elev. 96

Invert Elev. 96.5

F.F. 107
Base. 98

41'

15'

44'

Well
Exist. Elev. 107

100'

107.7"

Slope

139.05'

S 150° 17' 00" W

3-28-73.
elev. & location of
L.F.

WOODMARK
SECTION 9
BLOCK F
LOT 6