

12/10/93
12/13 AM JING
2/6/94 4:30 P.M.

Tap ID 04-353110

7/6 P.M.
HOUSE CONNECTION
OK C.B.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

XX461-9933XXX (410) 313-2640

INDEXED

DATE SYSTEM APPROVED 7/6/94
INSPECTOR C.B. ✓

DISTRICT 4

DATE 12/2/93

A 43834

P 49778

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Echo Estates LOT #3 ROAD 15480 Morgan Woodbine Rd.

PROPERTY OWNER Mark and Dale Soper

ADDRESS 12010 Little Patuxent Pkwy., Columbia, MD 21044

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 126

TRENCHES - Trench to be 2' wide. Inlet 4.5' below original grade. Bottom maximum depth 9.5' below original grade. Effective area begins at 4.5' below original grade. 5' of stone below distribution pipe.

LOCATION - Starting from the intersection of the 633.25' and 463.09' lot lines, place the distribution box 175' down the 463.09' lot line and 115' off this same lot line. Run trenches on contour toward this same lot line.

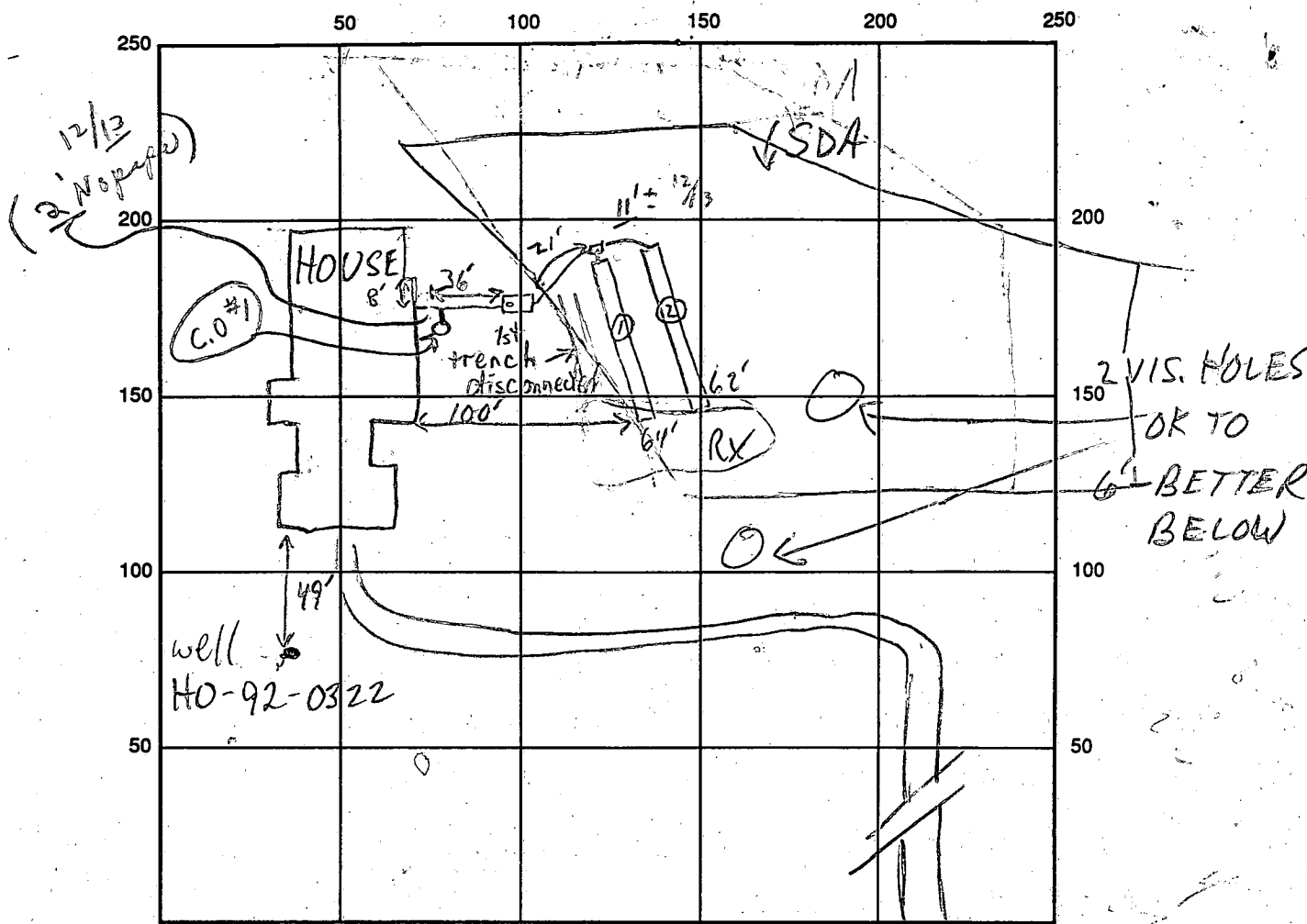
NOTES: - No trench to exceed 100' in length. Provide 6"-8" diameter cleanout and cap to grade or above on septic tank. OK MR 11/30/93

PLANS APPROVED BY Mark Rifkin DATE 4/7/93

- 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, 90° ELBOWS NOT ACCEPTABLE.
- 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(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)
- 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 35/40 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 PVA 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 APPROVAL ON THIS PERMIT**

A
43834



MORGAN WOODBINE RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

C.O. #1

SEPTIC TANK LEVEL 1000 GAL - OK CLEANOUTS S.T. : OK OK

DISTRIBUTION BOX LEVEL OK (Baffles is in OK)

DRAIN FIELD/TITLE DEPTH 9.5 / 9.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 / 1 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 / 5 FT. TOTAL LENGTH 1064 @ 2623 = 126 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 630 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 630⁺ SQ. FT.

REMARKS: 12/10/93 #1 ROCK PROBLEMS @ UPPER EDGE OF SDA ALONG DRIVEWAY -
RE-SET D.B. FOR MAX EFFICIENCY MR 12/10/93 #2 OK TO CONT MR
12/13/92 P.M. Partial No house connection; all covered except ends
near dist. box & for ends. CRD 12/13 Needs HOUSE CONNECTION
ONLY - ok to cover rest of trench & test area; CRD
7/6/94 WATER TEST FROM HOME TO S. TANK - OK - FINAL CRD

DATE SYSTEM APPROVED 7/6/94 INSPECTOR Charles Bryan & Truesher

APPLICATION

PERCOLATION TESTING

A 43834

P _____

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

DISTRICT Fourth

March 2, 1989

DATE _____

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 Paul Harrison, Jr. (Mark + Dale Saper)

ADDRESS 6430 Woodbine Road, Woodbine, MD 21797 PHONE 489-5049

PROSPECTIVE BUYER Anchor Capital Group, Inc.

ADDRESS 133 Defense Highway, Annapolis, MD 21401 PHONE (301) 841-5510

PROPERTY LOCATION:

SUBDIVISION ~~Harrison Farm~~ Echo Estates LOT NO. 3

ROAD AND DESCRIPTION Located @ Intersection of Morgan Station Road & Woodbine Morgan Road (15480 Morgan Woodbine Road)

TAX MAP 3 PARCEL # 10

SIZE OF LOT 79.36 Ac. 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.

James Hanna
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OF HOLDING 5-30-89 Pending perc hole locations and subdivision plat approval. JEN

BLDG. PERMIT SIGNED
AND RETURNED 10/5/93
Serial # 50592
SFD - 3 Bum

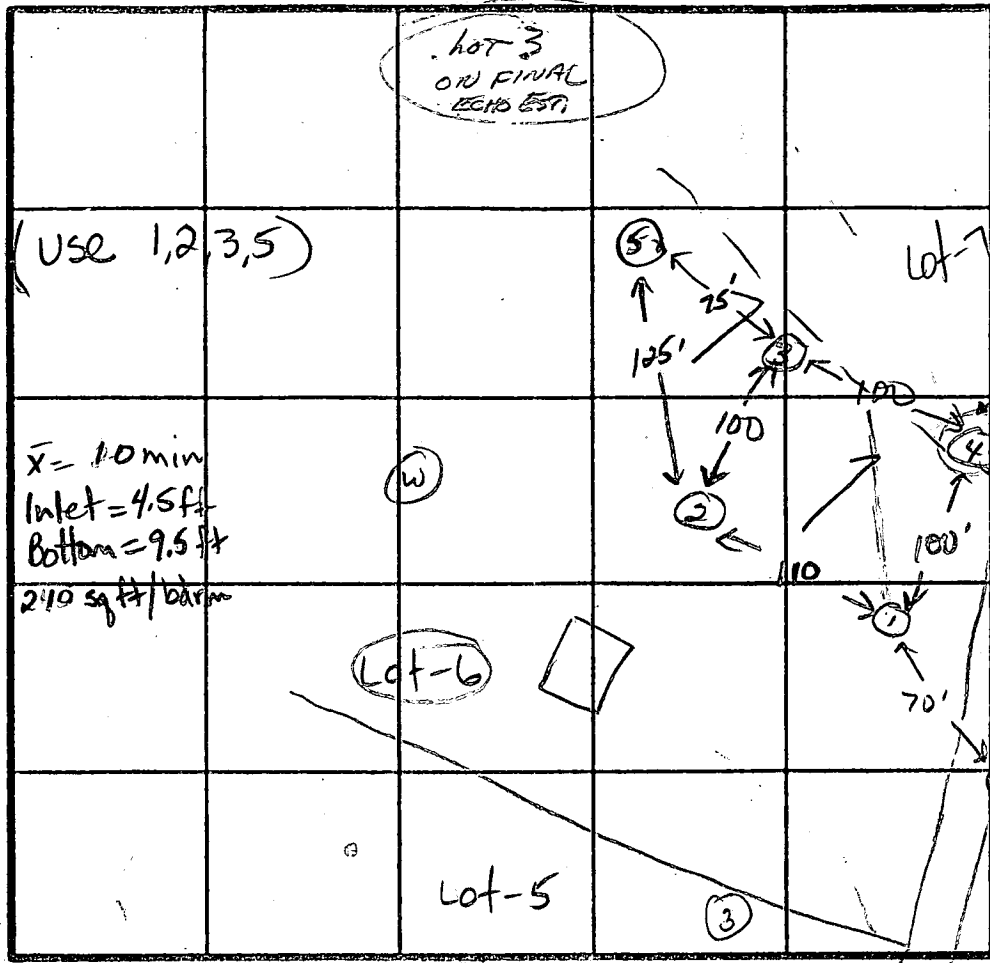
HD-216

THIS IS NOT A PERMIT

A 43834

①②
SOIL PROFILE

0-3.5 Br sicl
1m
3.5-14 Br tan
sa sicl m
trc of
broken rx
<10%
14.0 Bottom



Highest 2
Lowest 3-5
4

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

③
0-3.0 Rd sicl
1m
3-10 Tan mica
sa sicl m
some
broken
rx pieces
<35%
10.0 Bottom

④
0-4.0 Rd-br
sicl 1m
4.0-13.5 Rd-br
sa sicl
1m,
<10%
broken
rock
13.5 Bottom

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-25-89	1	4.5 S	3:10	3:17	3:17	3:43	26min
		8.0 M	3:12	3:13	3:13	3:24	11min
		14.0 D	Bottom (see profile)				ok
	2	5.0 S	3:19	3:21	3:21	3:24	3min
		8.5 M	3:18	3:20	3:20	3:23	3min
		13.0 D	Bottom (caved twice, clay bars)				ok
	3	5.0 S	3:26	3:29	3:29	3:42	13min
		8.0 M	3:26	3:27	3:27	3:29	2min
		10.0 D	Bottom (caved in)				ok
	x ④	4.5 S	3:33	3:55	No movement		Failed
8.0 M		3:33	3:38	3:38	3:52	14min	
13.5 D		Bottom (see profile)				Failed	
5-30-89	5	5.5 S	10:18	10:32	10:32	11:02 1/2	Failed
		5.5 S	11:54	11:58	11:58	12:02	4min
		13.0 D	Bottom (see profile)				ok

REMARKS All Holes as shown on plat except #5. OK to use 50ft away from #4

TYPE OF SOIL 0-3.5 Rd-br sicl 1m, 3.5-13 Br tan sa sicl m, <35% rx

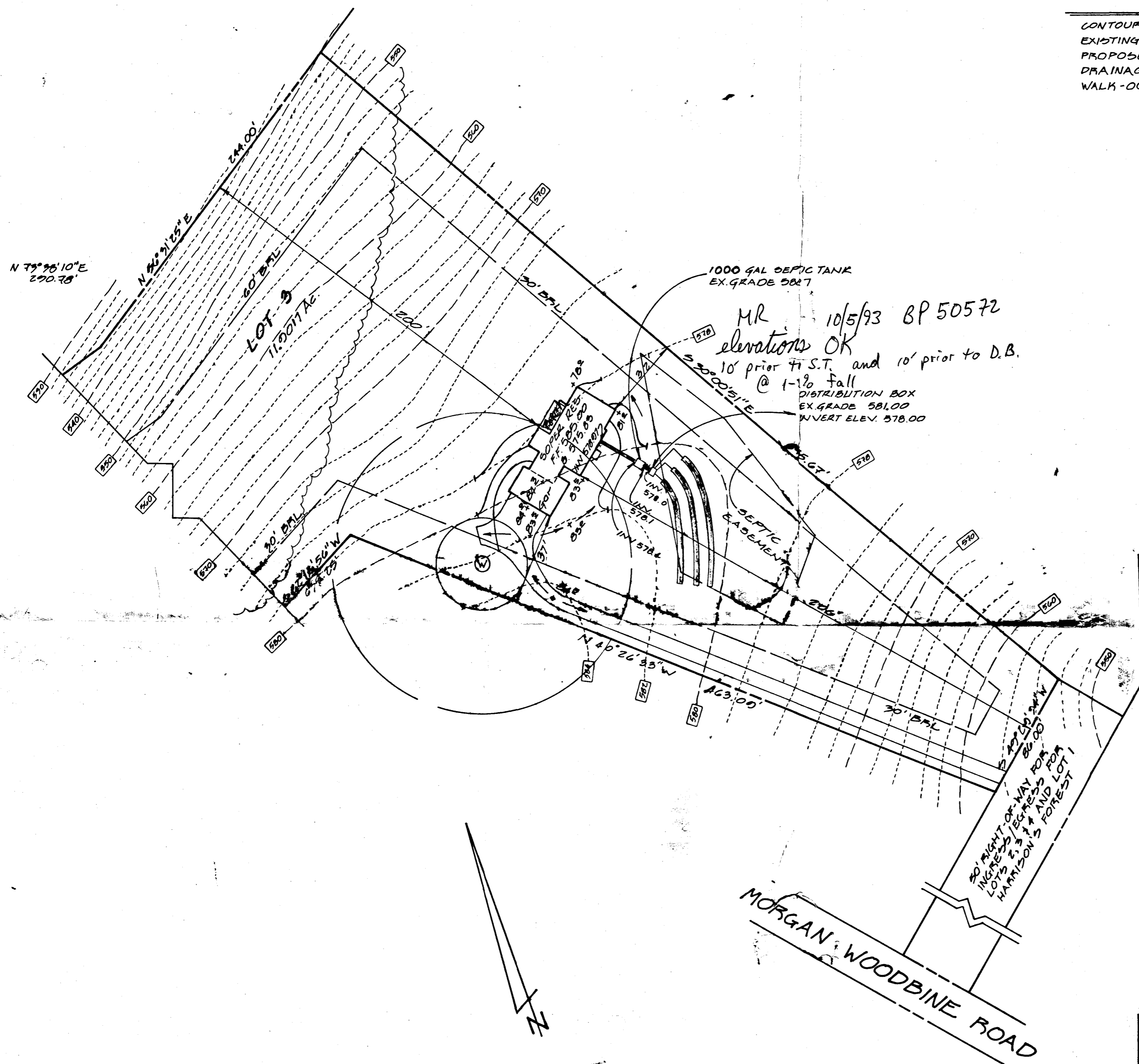
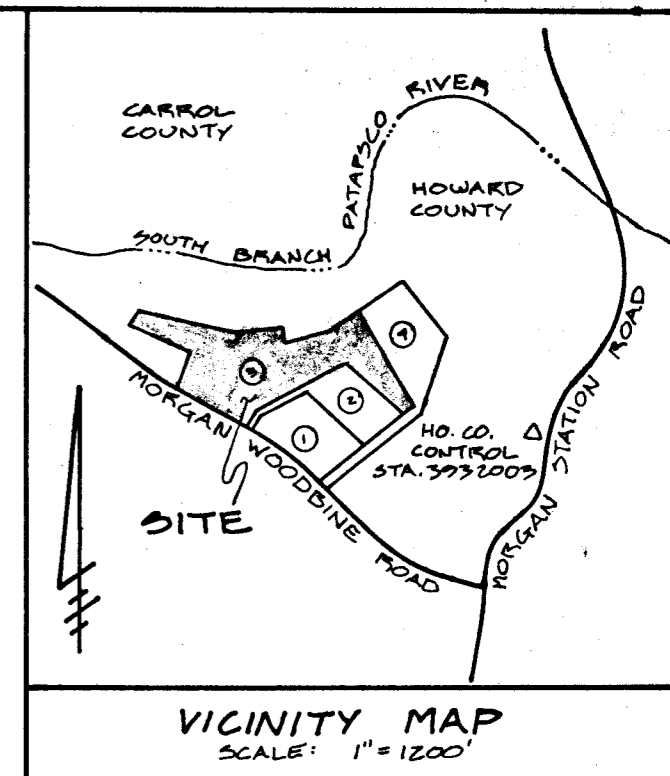
TESTED BY Jane Nadeau

ALSO PRESENT Charlie, Dale Fogel

2nd *attempt


LEGEND

CONTOUR INTERVAL	2 feet
EXISTING CONTOUR	--- 979 ---
PROPOSED CONTOUR	--- 979 ---
DRAINAGE FLOW	→
WALK-OUT BASEMENT	W.O.B. →



GENERAL NOTES

1. Property Zoned: R
2. Plat Reference: 10870
3. Topography taken from plans prepared by Vanmar Associates, Inc.
4. Length of Trench to be determined at time of Permit Issuance
5. 3 Bedrooms
6. Basement will not sewer by gravity

 CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 - WASH.		
DESIGNED	SITE DEVELOPMENT PLAN	SCALE
J.M.E.		1" = 50'
DRAWN	LOT 3 ECHO ESTATES SECTION ONE	DRAWING
MGR		1 of 1
CHECKED	TAX MAP: 3 PARCEL: P10 10 4th ELECTION DISTRICT HOWARD COUNTY, MARYLAND	JOB NO.
J.M.E.		93-139
DATE	DATE: MARK SOPER 12010-N LITTLE PATUXENT PKWY COLUMBIA, MD. 21044	FILE NO.
July, 1993		93-139-X



HOWARD COUNTY HEALTH DEPARTMENT

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

September 13, 1994

Mr. and Mrs. Mark Soper
15480 Morgan Woodbine Road
Woodbine, Maryland 21797

RE: Echo Estates, Lot #3
15480 Morgan Woodbine Road
Well Permit #HO-92-0332

Dear Mr. and Mrs. Soper:

This is to advise you that the septic system was installed, inspected, and approved on July 6, 1994.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

A nitrate device has been installed to treat the previously documented excessive nitrate contamination. The nitrate removal system appears to be operating properly as evidenced by the recent water sample taken on July 5, 1994.

COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a Permanent Deviation to that section of the regulation on condition that the nitrate removal system effectively maintains the nitrate-nitrogen contaminant level below the 10 parts per million requirement.

FINAL CERTIFICATE OF POTABILITY

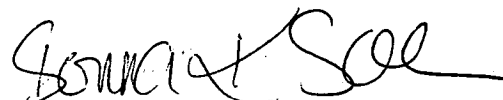
This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) #HO-92-0332. It will be necessary for you to continue to comply with the following conditions:

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2642
Director (410) 313-2645 TDD (410) 313-2323

1. The system must be properly operated and maintained continuously, in accordance with the service contract for the life of the residence.
2. It is recommended that a yearly nitrate analysis be performed.
3. If, in the future, you decide to sell or rent your home, you must make any potential buyer/tenant aware of the above condition.

Dates of Water Sampling:
August 24, 1994
July 5, 1994

Date of Well Acceptance:
April 7, 1993



Approving Authority
Donna K. Soe, Sanitarian
Water and Sewerage Pforgra

DKS

B 1 7315

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-92-0332

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

please print or type

fill in this form completely

Date Received (APA)

021693

OWNER INFORMATION

BLEVINS HENRY

3600 WATERVILLE RD

MDA1771

B 3

LOCATION OF WELL

HOWARD

ECHO ESTATES

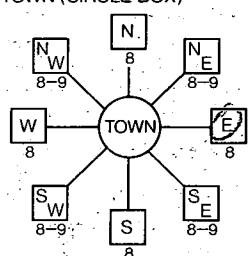
SECTION 1 LOT 3

WOODBINE

MILES FROM TOWN (enter 0 if in town) 7/8 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Morgan Woodbine Road

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

600 DISTANCE FROM ROAD

ENTER FT or MI 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)

APPROXIMATE DEPTH OF WELL 280 FEET

APPROXIMATE DIAMETER OF WELL 6 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

- 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 MR PERMIT No. HO-92-0332

SPECIAL CONDITIONS

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A43834 COUNTY NO.

STATE SIGNATURE DATE ISSUED 033193 Mark E. Riffkin 9/30/93

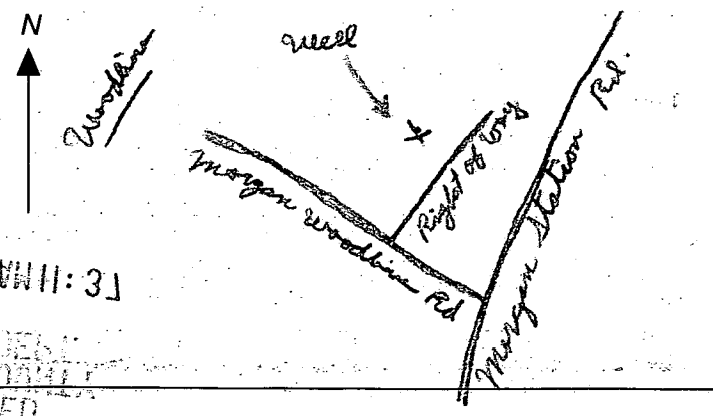
NORTH GRID 555000 EAST GRID 0785000

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

7885
5525

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



C1 **7827** SEQUENCE NO. (DENY USE ONLY)

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

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER **A43834**

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 **040793**

22 26 **205** (TO NEAREST FOOT)

28 37 **40-92-0332**

OWNER **Kleins** last name **Henry** first name
STREET OR RFD **Morgan Woodbine Rd** TOWN **Woodbine**
SUBDIVISION **ECHO ESTATES** SECTION _____ LOT **3**

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	
<i>Brown Shale</i>	<i>0</i>	<i>64</i>	
<i>Blue Rock</i>	<i>64</i>	<i>205</i>	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
TYPE OF GROUTING MATERIAL
CEMENT **CM** BENTONITE CLAY **BC**
NO. OF BAGS **11** NO. OF POUNDS **1034**
GALLONS OF WATER **66**
DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **45** ft.

CASING RECORD
casing types insert appropriate code below
ST **CO** **PL** **OT**
STEEL CONCRETE PLASTIC OTHER
MAIN CASING TYPE
Nominal diameter top (main) casing (nearest inch) **6** **67**
Total depth of main casing (nearest foot) **67**

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.)
HO **66** **205**
EACH SCREEN
SLOT SIZE 1 2 3
DIAMETER OF SCREEN _____ (NEAREST INCH)
from _____ to _____

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.) W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) **3**
PUMPING RATE (gal. per min. to nearest gal.) **15**
METHOD USED TO MEASURE PUMPING RATE **bucket**
WATER LEVEL (distance from land surface)
BEFORE PUMPING **43**
WHEN PUMPING **49**
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) (YES or NO) 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)
+ above } LAND SURFACE (nearest foot)
- below }

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)

See Attached Location

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.

DRILLERS IDENT. NO. **238**
DRILLERS SIGNATURE
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)