

2/13/91
AH 2/15/91
PM

PERMIT

04-313494

SEWAGE DISPOSAL SYSTEM

P 46809

A REPAIR

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

DATE 2/13/91

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

DATE SYSTEM APPROVED 2/15/91

INDEXED

INSPECTOR E. B. O.

Herman Sirk IS PERMITTED TO INSTALL _____ ALTER

ADDRESS 2555 Jennings Chapel Road, Woodbine, Md. 21797 PHONE 489-4724

SUBDIVISION _____ LOT _____ ROAD _____

PROPERTY OWNER Mr. Frank Dorsey

ADDRESS 14836 Bushy Park Road

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 2

200 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

REPAIR - TO REPLACE METAL SEPTIC TANK WITH 1000 GAL CONCRETE TANK AND EXTEND TRENCH

400' TOTAL INLET 5' BOTTOM 10' 80' TRENCH - M.R. J.

PLANS APPROVED BY Craig Williams cm DATE 02/12/91

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**

P
46809



HOWARD COUNTY HEALTH DEPARTMENT

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

June 4, 2001

Frank Dorsey
14920 Cemetary Road
Cooksville, MD 21723

RE: **Replacement Well Issues**
14836 Bushy Park Road
Well Permit #: HO-94-3068

Dear Mr. Dorsey:

This office is requesting that you forward the enclosed form to the appropriate licensed contractor (Well Driller, Registered Plumber or Pump Installer) who will be responsible for the installation of the well pump, well water line connection and related plumbing in the referenced replacement well. The contractor should complete this form neatly and submit it to this office via fax or mail after the pump has been placed in the well. **Submission of this completed form by the contractor is required for final approval of the field inspection which should be conducted by an inspector from this office when the work is ready for inspection. The contractor is responsible for scheduling an inspection request with this office.**

Once the well is connected to the dwelling and an inspection has been conducted and approved, this office is also requesting that you contact the Community Environmental Health Program at (410) 313-1773 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). There is currently no charge for the sampling and it to your benefit to have it tested.

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

Failure to confirm the potability of this well water supply by completion of documentation or water sampling requirements could result in the issuance of an order to abandon and seal the replacement well in accordance with COMAR 26.04.04.

If you have any questions, or would like to discuss these matters further please call me directly at (410) 313-2643. Thank you for your attention to these important matters.



HOWARD COUNTY HEALTH DEPARTMENT

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

Respectfully,

Brian Baker

Brian Baker, R.S.
Well and Septic Program

Enclosure

cc: Community Environmental Health Program
File

C1 0710

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED 12/21/01
COUNTY NUMBER P46809

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 4 30 01

Depth of Well 220' (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3068

OWNER Dorsey Frank Bushy Park Cooksville

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand (0-56) and Gray Mica Rock (56-220).

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (20), NO. OF POUNDS (1850), GALLONS OF WATER (120), DEPTH OF GROUT SEAL (0-56 ft).

CASING RECORD: MAIN CASING TYPE (ST), Nominal diameter (6), Total depth (60). Includes checkboxes for steel, concrete, plastic, and other.

OTHER CASING (if used) table with columns for diameter and depth.

SCREEN RECORD: screen type or open hole (ST, BR, HO, PL, OT).

DEPTH (nearest ft.) table with columns for depth intervals (1-21, 23-26, 30-32, 38-41, 45-47, 51-55) and values (58, 220).

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

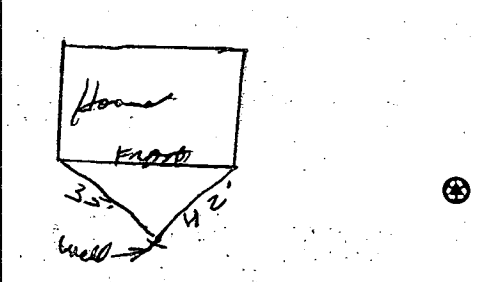
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), W Q

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (4), METHOD USED TO MEASURE PUMPING RATE (air), WATER LEVEL (52 ft. before, 165 ft. when pumping), TYPE OF PUMP USED (air).

PUMP INSTALLED: DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED PLACE (29), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47).

CASING HEIGHT (circle appropriate box and enter casing height): + above, - below (2 ft. 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).



NUMBER OF UNSUCCESSFUL WELLS (2), WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

B 1 03769

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-3068

W515031 please print or type

fill in this form completely

Date Received (APA)

04 06 01

OWNER INFORMATION

8 MM DD YY 13

Dorsey Last Name, Frank First Name

14920 Cemetery Rd Street or RFD

Cooksville Md 21723

LOCATION OF WELL

Howard COUNTY

NA SUBDIVISION

SECTION 44 46 LOT 48 50

Cooksville NEAREST TOWN

1 MILE FROM TOWN

DRILLER INFORMATION

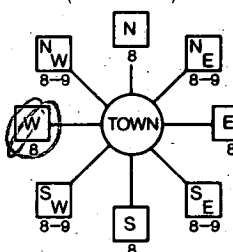
Joseph L. Mayne M 5 D 0 2 4

Joseph L. Mayne Well Drilling Firm Name

5512 Ridge Rd Mt. Airy Md 21771 Address

Joseph L. Mayne 4/6/2001 Signature Date

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



14836 Bushy Park Rd NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



300 DISTANCE FROM ROAD ENTER FT OR MI

TAX MAP: BLK: PARCEL

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (D)
Farming (Livestock Watering & Agricultural Irrigation) (F)
Industrial, Commercial, Dewatering (I)
Public Water Supply Well (P)
Test, Observation, Monitoring (T)
Geo-Thermal (G)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME, WS15031 COUNTY NO.

DATE ISSUED 04 06 01, Steven R. King CO SIGNATURE, 04 06 02 EXP. DATE

NORTH GRID 541 000, EAST GRID 790 000

APPROXIMATE DEPTH OF WELL 240 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered) AIR-ROTARY (circled), AIR-PERCussion, ROTARY (Hydraulic Rotary)
CABLE, REverse-ROTARY, Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (N)
This well will replace a well that will be abandoned and sealed (Y)
This well will replace a well that will be used as a standby-contact local approving authority for policy on standby wells (S) (circled)
This well will deepen an existing well (D)
Permit number of well to be replaced or deepened: NA

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

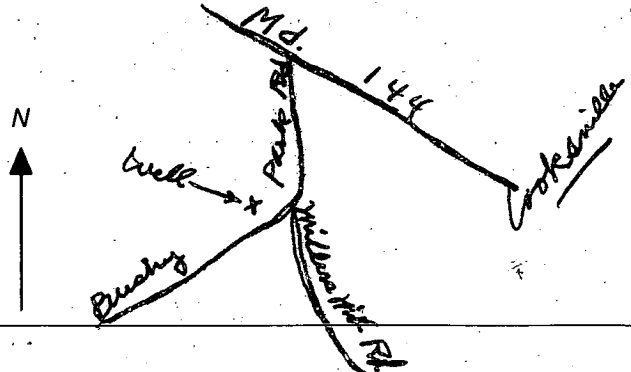
SOURCES OF DRILLING WATER

- Well (circled)
Other sources listed 1, 2, 3

WRITE THE BOX NUMBER FROM THE MAP HERE

E 790, N 5401

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)

APPROX. PERMIT NUMBER HO-94-3068

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

SITE INSPECTION SHEET

OWNER: Frank Dorsey address: 14920 Cemetery Rd

DATE REQUESTED: 4/6/01

PHONE #: _____

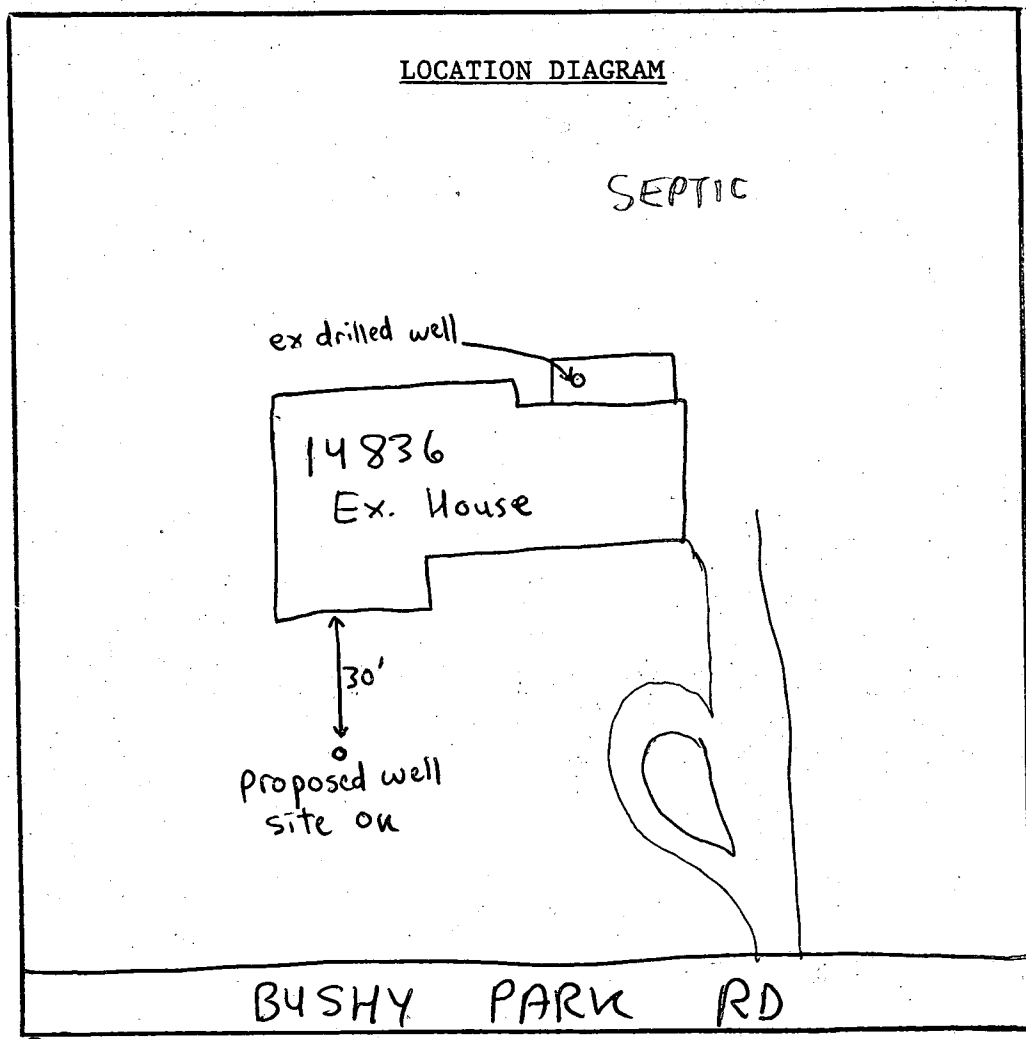
CONTRACTOR: Joe Mayne

ADDRESS: of Well 14836 Bushy Park Rd

WELL TAG #: HO-94-3068

COUNTY #: WS15031

PROPOSAL: Ex. Well has collapsed but enough water remains to use ~~as~~ for residential irrigation. OK SRK



COMMENTS: Proposed well site on, owner wants to keep ex. well on
Fee received.

DATE: 4/6/01

INSPECTOR: Steven R. Krieg