

5-13-87
2 AM

PERMIT

P 39187

SEWAGE DISPOSAL SYSTEM

A 33082

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

03-310 051
INDEXED

DATE 4/21/87

DATE SYSTEM APPROVED 5/14/87

INSPECTOR (Signature)

Andy Snow IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 854-6410

SUBDIVISION W-B Property ROAD 13855 Burntwoods Dr LOT 6

PROPERTY OWNER Martin Kline

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 3

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet 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.

LOCATION - Place the trench between perc hole (1) and perc hole (4). Perc hole (1) is located 330 feet from the back lot line which is 475 feet long and 220 feet from the left lot line which is 763.35 ft. long. Perc hole (4) is located 450 feet from the 475 ft. long lot line and 140 feet from the 763 ft. long lot line as seen when facing property from Burntwoods Road. Run trenches along contour between holes 1 & 4.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY R. Hodges/B. Nixon DATE 7/22/85 - 3/23/87

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(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 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.

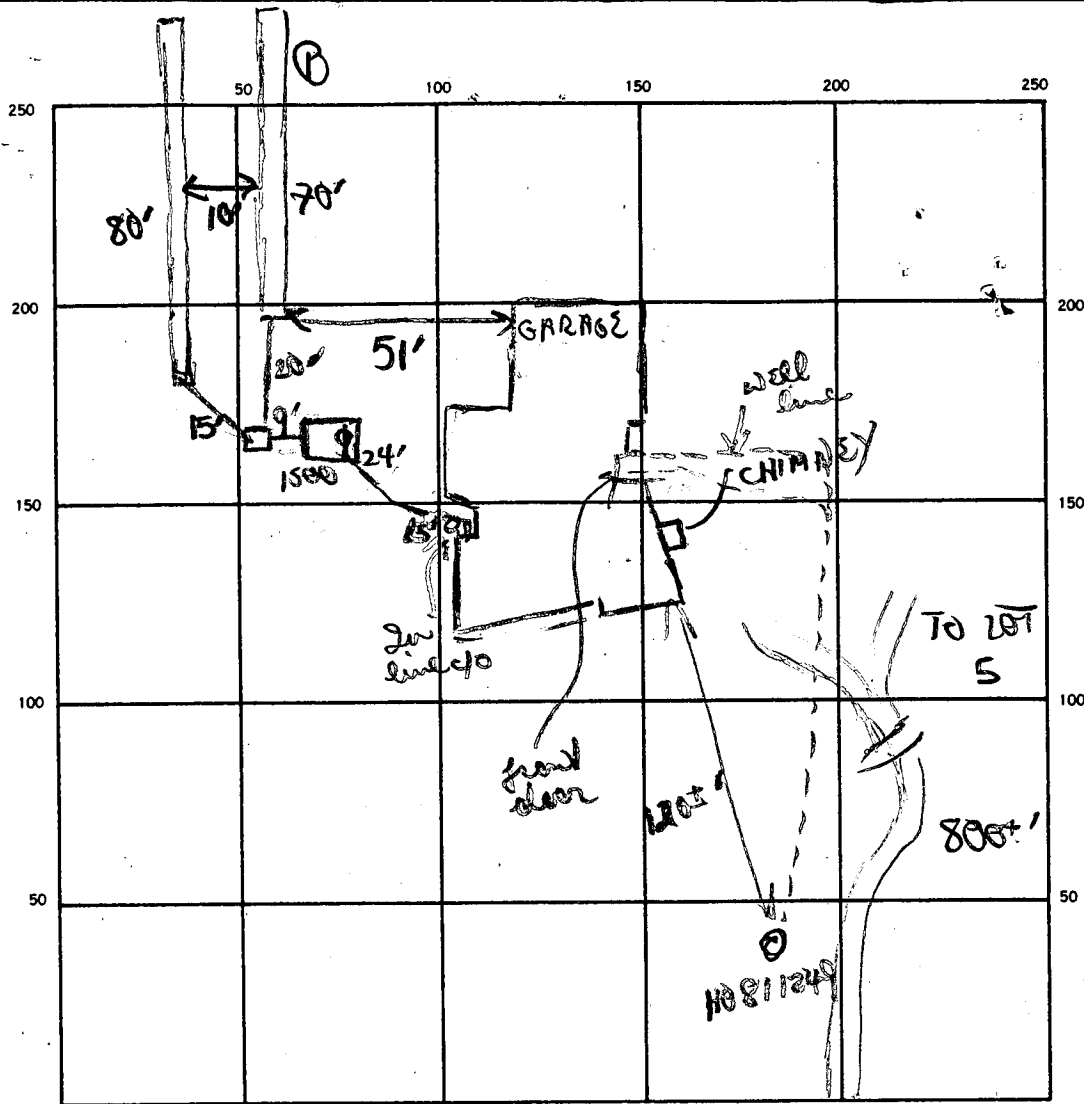
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 33082



$$45 \sqrt{6300}$$

$$\frac{45}{180}$$

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE
BURNTWOODS RD

TO RTZ 32

SEPTIC TANK. LEVEL 1500 gal CLEANOUTS 1 In line 1 S.T.
 DISTRIBUTION BOX. LEVEL 1 w/ baffle
 DRAIN FIELD/TILE FIELD. DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 + 4 FT.
 EFFECTIVE GRAVEL DEPTH 4 1/2 4 1/2 FT. TOTAL LENGTH 80 70 FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 360 + 315 SQ. FT.
 DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA 675 SQ. FT.

80
 45
 450
 320
 70
 45
 350
 280

REMARKS 5/13/87 Soils in lower trench show patches of deeper clay
∴ extended trench extra 10' for additional area. OK to add
stone pipe paper to both trenches. OK to partial backfill
1st trench to access trench #2.
5/14/87 OK to cover trenches 1+2. Covering OK'd - OK to
cover all work

DATE SYSTEM APPROVED 5/14/87 INSPECTOR B Nefson

KENNA RD

OR WB PROPERTY

A 33082

SUBDIVISION:

WARFIELD

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.

210/1BD with garbage

174
 174
 3
 480
 148
 45√6380
 45
 180
 4
 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.

Permit
9/14/83
9:30 AM

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33082

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd

DATE August 24, 1983

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 MARTIN KLINE
~~Kennard Warfield c/o Tracy, Schulte & Associates~~

ADDRESS 8450 Baltimore National Pike PHONE 465-6105
Ellicott City, Maryland 21043

PROPERTY LOCATION:

SUBDIVISION Warfield LOT NO. 2 LOT NEW 6

ROAD AND DESCRIPTION Burnt Wood Road West of St. Rt. 32
13855 Burntwoods Dr.

SIZE OF LOT 6.2 Acres TYPE BLDG. Vacant
(NUMBER OF BEDROOMS)

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 K. Tracy
(SIGNATURE OF APPLICANT)

APPROVED BY Raymond Hodges FOR TRENCIA DATE 7/24/85

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/7/83 PERC OK HOLD FOR PLAT R.H.
7/27/85 Special Rules R.H.

BLDG. PERMIT SIGNED
AND RETURNED 10/20/86

S. Abel
BP 8415

THIS IS NOT A PERMIT

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

EH-12-1079

APPLICATION

SEWAGE DISPOSAL TESTING

A 33082

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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PROPERTY OWNER Kennard Warfield c/o Tracy, Schulte & Associates

ADDRESS 8450 Baltimore National Pike PHONE 465-6105
Ellicott City, Maryland 21043

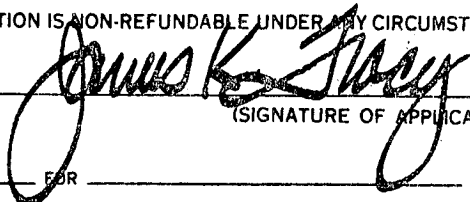
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(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

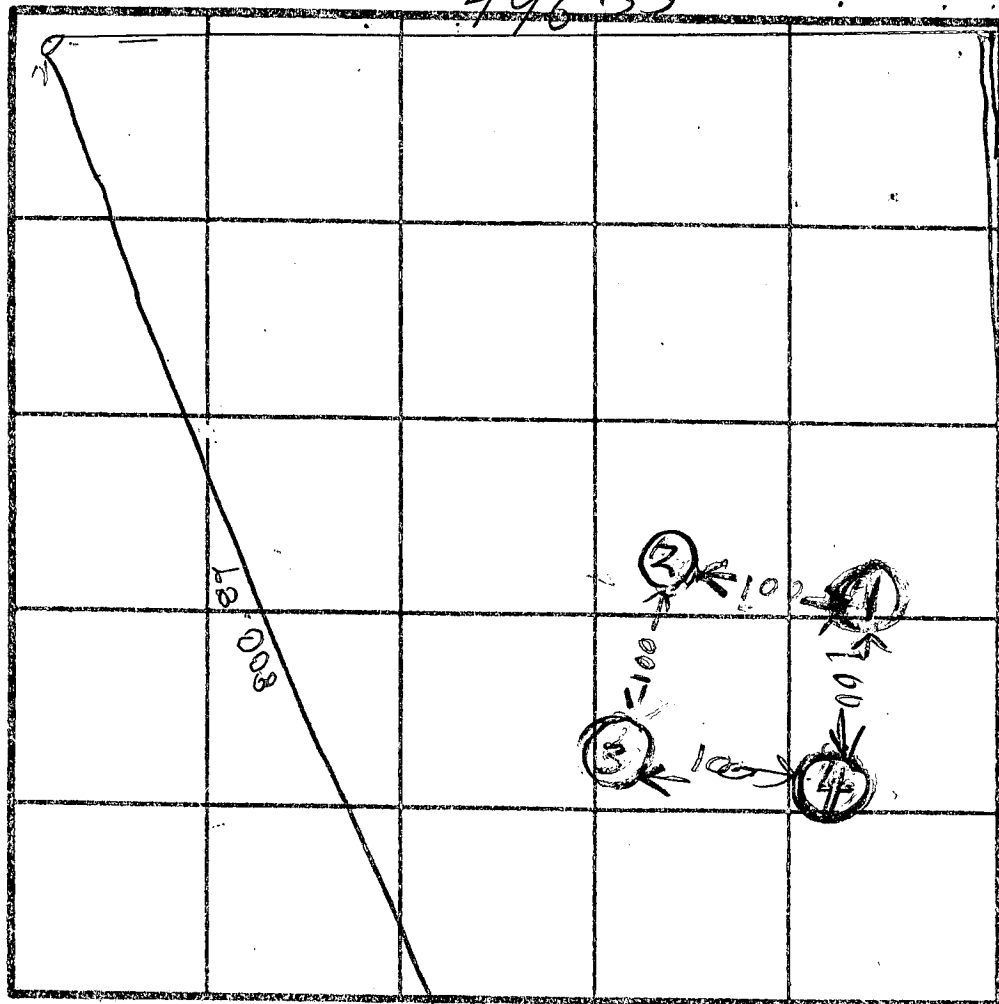
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

496.55

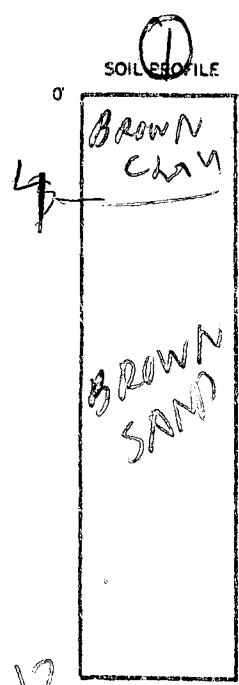
Lot 2
LOT 2

724.03



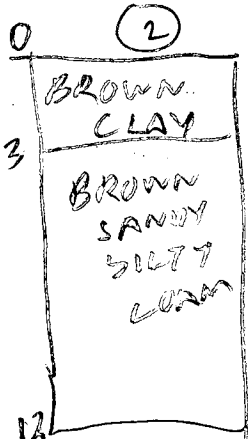
HOLE ELEVATION

- ① HIGH
- ② LOW
- ③ LOW
- ④ HIGH



SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/1/83	1 S	5.5	115	125	122	128	7
	1 V	13	LOOKS	OK			
9/1/83	2 S	4	149	55	155	209	14
	2 V	13	LOOKS	OK			
	3 S	4	231	233	233	238	5
	3 V	13	LOOKS	OK			
10/7/83	4 V	14	LOOKS OK				

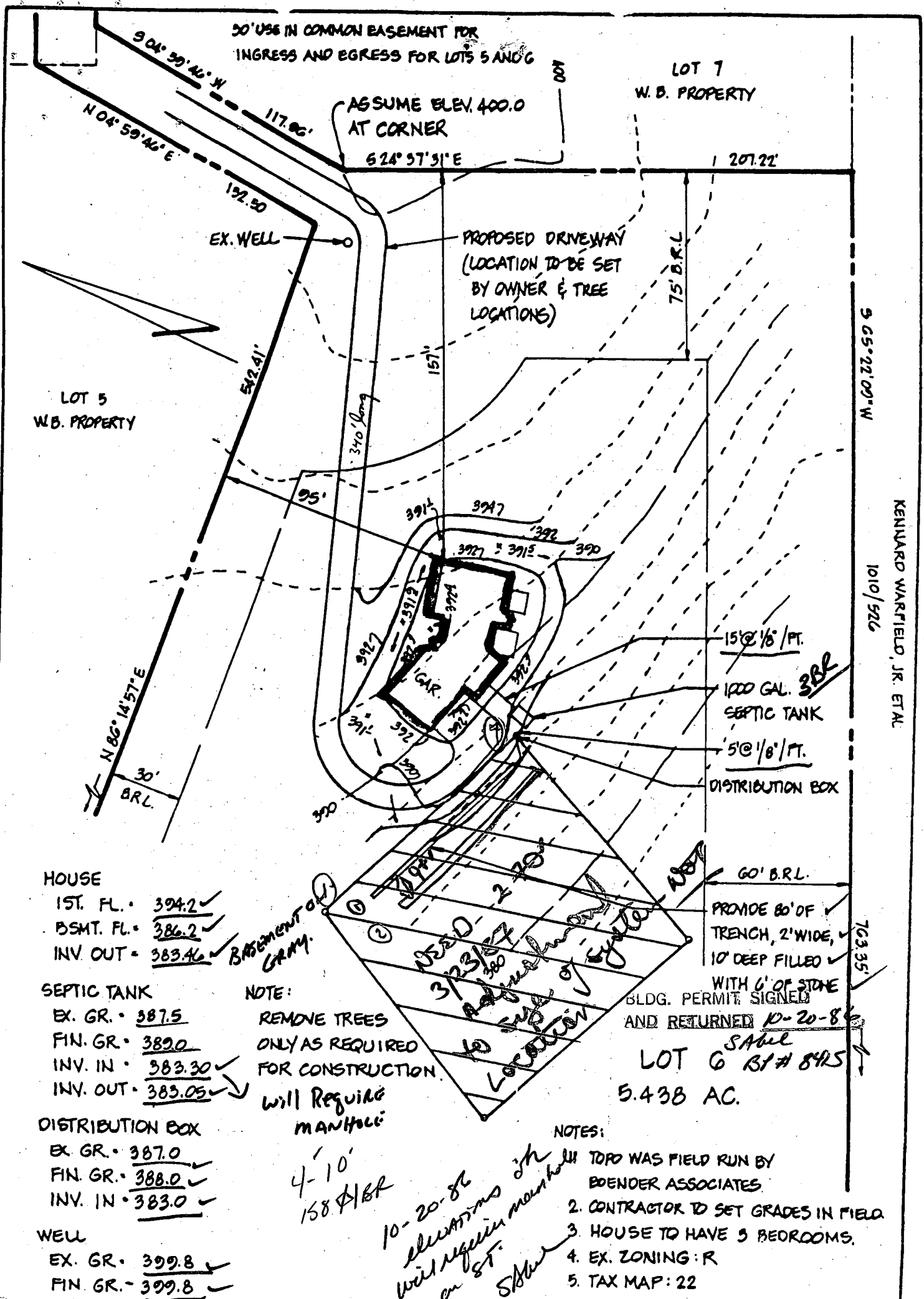
REMARKS PERC. HOLES PER SURVEYOR STAKES IN WOODS

TYPE OF SOIL _____

TESTED BY R. HODGES

ALSO PRESENT SKIP CASSBURN

EH-12-1079



- HOUSE
- 1ST. FL. • 394.2 ✓
 - BSMT. FL. • 386.2 ✓
 - INV. OUT. • 383.46 ✓
- SEPTIC TANK
- EX. GR. • 387.5 ✓
 - FIN. GR. • 389.0 ✓
 - INV. IN. • 383.30 ✓
 - INV. OUT. • 383.05 ✓
- DISTRIBUTION BOX
- EX. GR. • 387.0 ✓
 - FIN. GR. • 388.0 ✓
 - INV. IN. • 383.0 ✓
- WELL
- EX. GR. • 399.8 ✓
 - FIN. GR. • 399.8 ✓

NOTE:
 REMOVE TREES ONLY AS REQUIRED FOR CONSTRUCTION.
 Will require manhole

4'-10" 158' B.R.
 10-20-86 elevations in will require manhole on ST.
 S.M.W.

60' B.R.L.
 PROVIDE 80' OF TRENCH, 2' WIDE, 10' DEEP FILLED WITH 6" OF STONE
 BLDG. PERMIT SIGNED AND RETURNED 10-20-86
 LOT 6 S Abel B1 # 8425
 5.438 AC.

PLAT REFERENCE: W.B. PROPERTY, LOTS 5, 6 AND 7, SECTION 1, AREA 1, RECORDED AS PLAT G443

TITLE: GRADING STUDY				
PROJECT: LOT 6 - W.B. PROPERTY				
LOCATION: 3RD ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=50'	DESIGNED BY: J.J.B.	DRAWN BY: J.J.B.	CHECKED BY:	DATE: MAR., 1986
FIELD BOOK:	PAGE NO.:	JOB NO.: 86010	DRAWING NO.: 1 OF 1	

boender associates
 inc.
 consulting engineers
 land surveyors
 land planners

COURTHOUSE SQUARE
 3565 ELLICOTT MILLS DRIVE
 ELLICOTT CITY, MD. 21043
 (301) 465-7777

KENNARD WARFIELD, JR. ET AL.
 1010/526

B 1 2206

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

11-41-1-09 fill in this form completely

Date Received 12/12/85 10:00 AM

OWNER INFORMATION

Last Name, Owner, First Name, Street or RFD, Town, State, Zip

B 3

LOCATION OF WELL

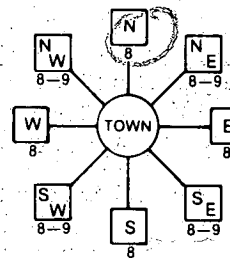
COUNTY, SUBDIVISION, SECTION, LOT, NEAREST TOWN, MILES FROM TOWN

DRILLER INFORMATION

Driller's Name, License No., Firm Name, Address, Signature, Date

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

APPROX. PUMPING RATE (GAL. PER MIN.), AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME, COUNTY NO., OEP SIGNATURE, STATE HEALTH INSERT S, DATE ISSUED, CO SIGNATURE, EXP. DATE, NORTH GRID, EAST GRID

APPROXIMATE DEPTH OF WELL FEET

APPROXIMATE DIAMETER OF WELL INCH NEAREST 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 (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)

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

APPROP. PERMIT NUMBER, FORCE INITIALS PERMIT No., WRITE INITIALS IN BOX

SPECIAL CONDITIONS

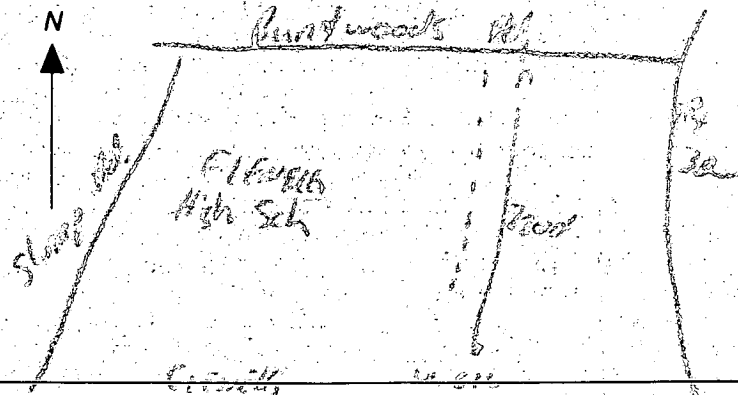
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER, 1. well, 2., 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

Box number grid: E 800, N 020

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



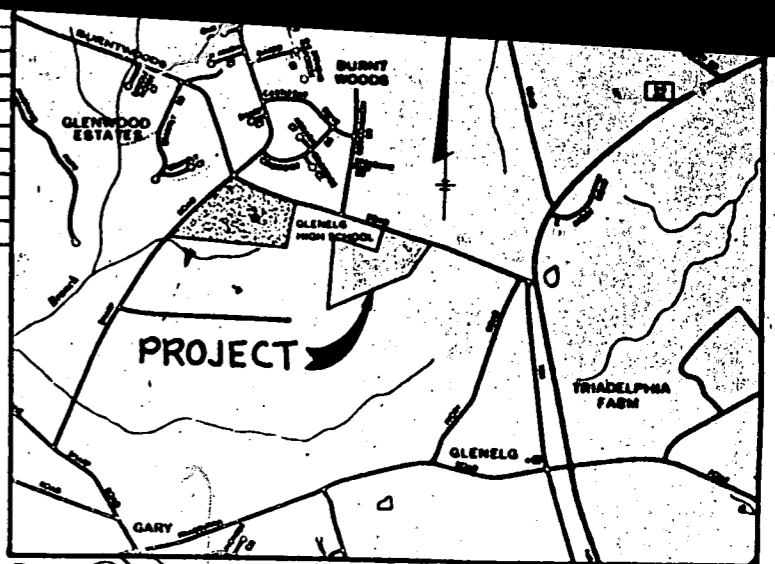
12/12/85

- 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 25 BAG USED
- ⑤ Well OK

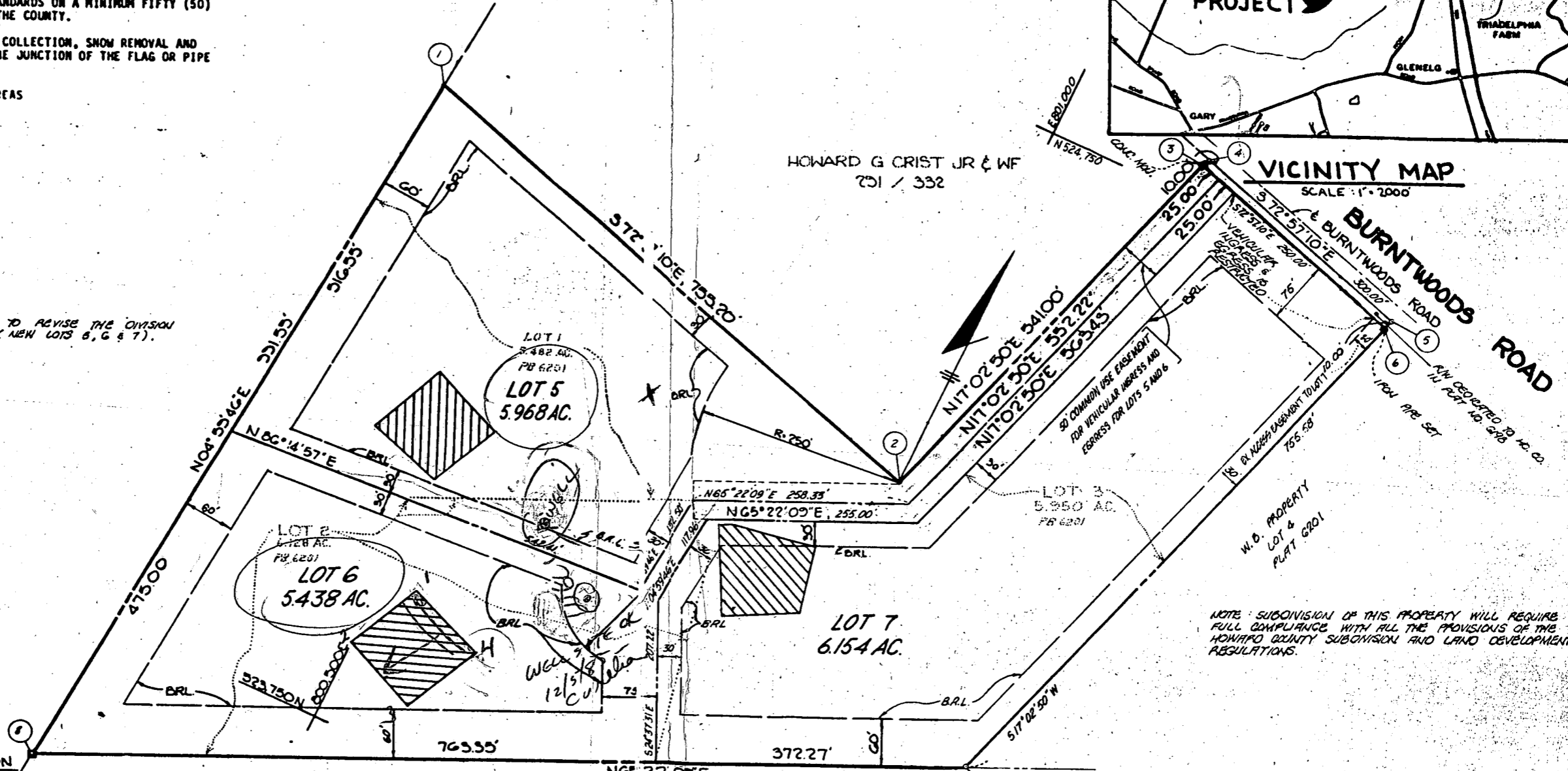
Raymond Hodger

- NOTES:
1. 4" x 4" x 35" CONCRETE MONUMENTS INDICATED THUS; ■ IRON PIN SHOWN THUS.
 2. ALL COORDINATES SHOWN HEREON ARE BASED ON THE MARYLAND STATE GRID SYSTEM.
 3. ORIGIN OF COORDINATES: HOWARD COUNTY GEODETIC CONTROL POINT NO. 3234004.
 4. SUBJECT PROPERTY ZONED 'R' PER 8/2/85 COMPREHENSIVE ZONING PLAN.
 5. B.R.L. INDICATES BUILDING RESTRICTION LINE.
 6. FLAG OR PIPE STEM LOTS SHALL NOT BE FURTHER SUBDIVIDED INTO LOTS ACCOMMODATING ADDITIONAL RESIDENCES UNLESS A PUBLIC ROAD CAN BE CONSTRUCTED ACCORDING TO COUNTY STANDARDS ON A MINIMUM FIFTY (50) FOOT RIGHT-OF-WAY TO BE DEEDED TO THE COUNTY.
 7. FOR FLAG OR PIPE STEM LOTS, REFUSE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPE STEM LOT DRIVEWAY.
 8. ■ INDICATES APPROVED PERC. AREAS

COORDINATES		
NO.	NORTH	EAST
1	524 493.869	800 292.911
2	524 272.475	801 014.930
3	524 789.705	801 173.530
4	524 799.266	801 176.461
5	524 711.318	801 463.280
6	524 701.757	801 440.349
7	523 979.364	801 259.834
8	523 506.079	802 206.558



THE PURPOSE OF THIS PLAT IS TO REVISE THE DIVISION LINES BETWEEN LOTS 1 THRU 3 (NEW LOTS 5, 6 & 7).



MAE B MUSGROVE
188 / 140

NOTE: SUBDIVISION OF THIS PROPERTY WILL REQUIRE FULL COMPLIANCE WITH ALL THE PROVISIONS OF THE HOWARD COUNTY SUBDIVISION AND LAND DEVELOPMENT REGULATIONS.

TOTAL TABULATIONS THIS SUBMISSION
 TOTAL NUMBER OF LOTS AND/OR PARCELS TO BE RECORDED: 3
 TOTAL AREA OF LOTS AND/OR PARCELS: 17.560 AC
 TOTAL AREA OF RIGHT-OF-WAY DEDICATION TO BE RECORDED: NONE
 TOTAL AREA OF SUBDIVISION TO BE RECORDED: 17.560 AC

BOENDER ASSOCIATES
 3565 ELLICOTT MILLS DRIVE
 ELLICOTT CITY, MARYLAND 21043
 465-7177

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS.
James P. Jones 10-9-88
 COUNTY HEALTH OFFICER DATE
 APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING
F. Roman L. Harris 10-17-85
 DIRECTOR DATE
 APPROVED: FOR PUBLIC ROADS HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.

SURVEYOR'S CERTIFICATE
 I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A RESUBDIVISION OF PART OF THE LANDS CONVEYED BY HOWARD G. CRIST, ET AL. TO KENNARD WARFIELD, JR. AND THOMAS S. WARFIELD, DECEASED, BY DEED DATED JULY 7, 1980, AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY IN LIBER 1010, FOLIO 526. SAID PARCEL ALSO BEING A RESUBDIVISION OF LOTS 1 THRU 3 AS SHOWN ON A PLAT OF SUBDIVISION ENTITLED W.B. PROPERTY, SECTION 1, AREA 1, LOTS 1 THRU 4, RECORDED AMONG THE AFORESAID LAND RECORDS IN PLATBOOK 6201 AND THAT ALL MONUMENTS ARE IN PLACE OR WILL BE IN PLACE PRIOR TO THE ACCEPTANCE OF THE STREETS IN THE SUBDIVISION OF HOWARD COUNTY AS SHOWN, IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

DEDICATION FOR INDIVIDUALS
 I, KENNARD WARFIELD, JR., OWNER OF THE PROPERTY SHOWN AND OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICE IN AND UNDER ALL ROADS AND STREET RIGHT-OF-WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREIN; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR GOOD AND OTHER VALUABLE CONSIDERATION HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE AND OPEN SPACE WHERE APPLICABLE; (3) THE RIGHT TO REQUIRE DEDICATION OF WATER-TENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERECTED ON OR OVER THE SAID EASEMENTS AND RIGHT-OF-WAYS.

WITNESS MY HANDS THIS 10TH DAY OF AUGUST, 1985.
Kennard Warfield, Jr.

RECORDED AS PLAT 6443 ON 10-17-85 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND.
W.B. PROPERTY
 LOTS 5, 6, 7, SECTION 1, AREA 1
 A RESUBDIVISION OF LOTS 1 THRU 3 W.B. PROPERTY SECTION 1, AREA 1
 OPZ FILES: VP-85-21, VP-85-21-A-1, F-85-60
 SHEET 1 OF 1 TAX MAP NO. 22

C1 **2508** SEQUENCE NO. (OEP 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 **A33082**

DATE RECEIVED: [] [] [] [] [] [] DATE WELL COMPLETED: **12/28/85** DEPTH OF WELL: **180** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **NO-81-1249**

OWNER: **WARFIELD KEN** last name first name
 STREET OR RFD: **BURNWOODS RD** TOWN: **GLENELG**
 SUBDIVISION: **WB Property** SECTION: [] LOT: **6 (OLD 2)**

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	
Top Soil	0	2	
Sandy	2	50	<input checked="" type="checkbox"/>
Sand Stone	50	55	
Micka	55	70	
Sand Stone	70	75	<input checked="" type="checkbox"/>
Micka	75	180	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** YES **N** NO
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **23** NO. OF POUNDS **2300**
 GALLONS OF WATER **138**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **94** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER
 MAIN CASING TYPE: **PL** Nominal diameter (nearest inch) **6** Total depth of main casing (nearest foot) **60**

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

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

C2
 E.A.C.H. S.C.R.E.E.N. DEPTH (nearest ft.)
 1 **10** 5 180
 2 [] [] [] [] [] []
 3 [] [] [] [] [] []
 4 [] [] [] [] [] []
 5 [] [] [] [] [] []
 6 [] [] [] [] [] []
 7 [] [] [] [] [] []
 8 [] [] [] [] [] []
 9 [] [] [] [] [] []
 10 [] [] [] [] [] []
 11 [] [] [] [] [] []
 12 [] [] [] [] [] []
 13 [] [] [] [] [] []
 14 [] [] [] [] [] []
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 51 [] [] [] [] [] []
 SLOT SIZE 1 [] 2 [] 3 []
 DIAMETER OF SCREEN [] (NEAREST INCH)

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **7**
 METHOD USED TO MEASURE PUMPING RATE **Backed**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **37**
 WHEN PUMPING **34**
 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 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: **29**
 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 } [] (nearest foot)

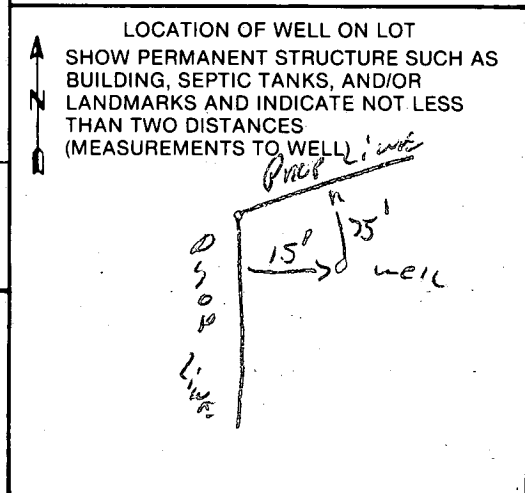
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
 E ELECTRIC LOG OBTAINED
 P TEST WELL CONVERTED TO PRODUCTION WELL

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. **273**
 DRILLERS SIGNATURE **Naresh Mays**
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK [] from [] to []
 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



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.)

Kennard Warfield, Jr.
(Name)

14663 Madelphae Rd.

Greely, Md. 21737
(Address)

40-81-1249

(OEP Well Permit Number)

11-13-85

(Date)

Lot 6 - Burnside Rd.

12/3/86

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION \$10.00

CR # 1013

12/9/86
anytime

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

33082

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 Burntwards Rd.
Glenelg Md. 21737

Pump
 1. Type
 a. Deep well jet _____
 b. Shallow well jet _____
 c. Submersible
 2. Make Goulds
 3. Model # 7E1105422
 4. Capacity 7 GPM
 5. Pump exceeds well capacity Yes _____ No
 6. If Yes, is low pressure cutoff switch installed? Yes No _____
 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other _____

Motor
 1. Horsepower 1/2
 2. RPM _____
 3. Voltage B
 a. 110 _____
 b. 220

Pitless Adapter
 1. Make _____
 2. Model # PT-800
 3. Depth 48"

Tank
 1. Capacity 42
 2. Pressure relief valve? yes

Piping
 1. Type plastic
 2. Size 1"
 3. NSF and/or BOCA Code approved
 4. Depth of supply line 48"

Well data
 1. Depth 180 ft.
 2. Yield 30+6 GPM
 3. Static water level _____ ft.
 4. 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: [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.