

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511466

A 50036-L

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

05-423686

DATE 3/18/99

DATE SYSTEM APPROVED 4/19/99

INDEXED

INSPECTOR S.R.K.

Jack Fyock Septic Service _____ IS PERMITTED TO INSTALL ALTER _____

ADDRESS P.O. Box 89 Triadelphia Road Glenelg, MD 21737 PHONE (410) 988-9270

SUBDIVISION Windy Knolls LOT 22 ROAD 6424 Prestwick Drive

PROPERTY OWNER Cornerstone Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.

LOCATION - Place the distribution box 195 feet down the right (332.58') lot line and 50 feet off this same lot line as seen when facing the lot from the pipestem off Prestwick Drive. Run trenches on contour towards the right lot line.

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

OK Km 2299

PLANS APPROVED BY Donna K. Soe DATE 2/01/1999

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

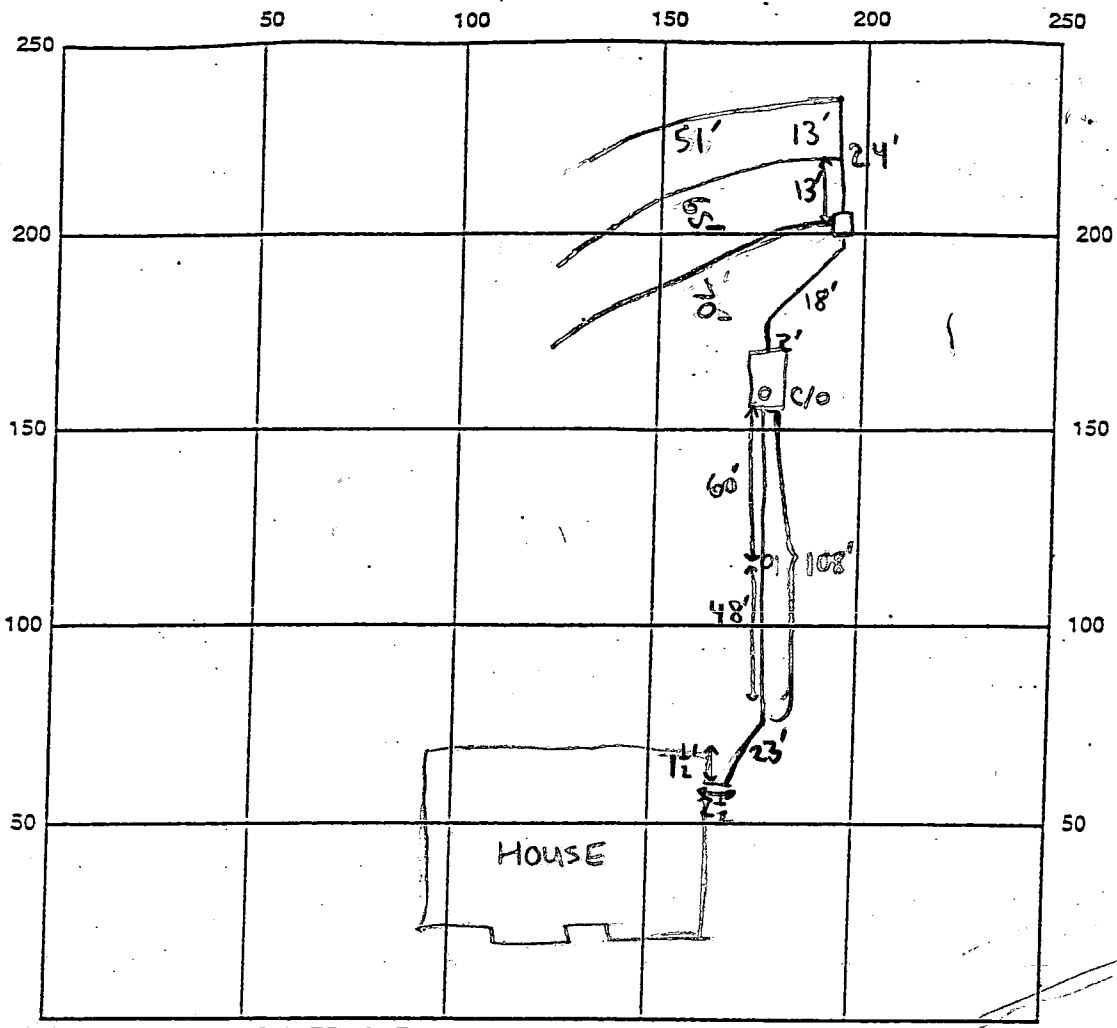
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMITS DIVISION
AND RETURNED 6/22/00
B00125014
DECK

50036-L



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

PRESTWICK DRIVE

SEPTIC TANK LEVEL 1250 Midseam

CLEANOUTS 6" tank, 6" midway between tank and 23' bend *in line cleanout*

DISTRIBUTION BOX LEVEL

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 186 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 744 SQ. FT.

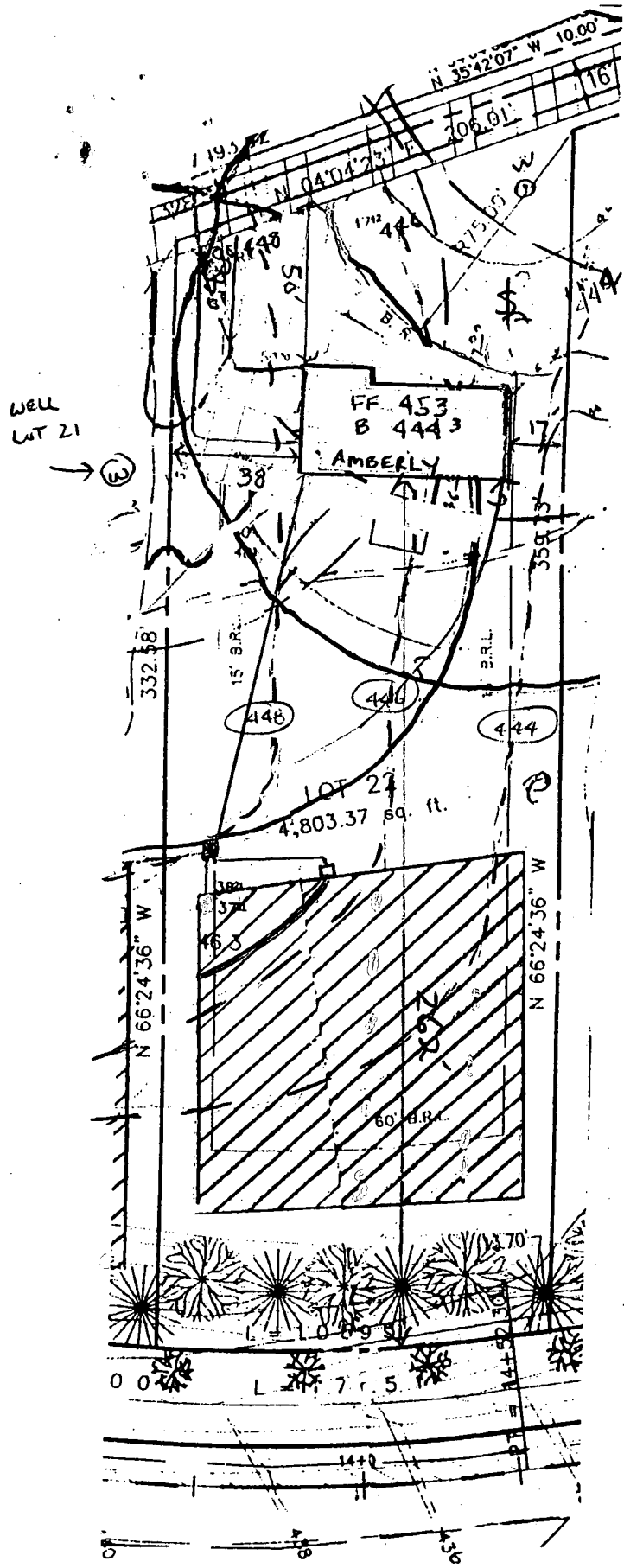
DRYWALL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 4/14/99 - OR TO COVER SRK

DATE SYSTEM APPROVED 4/14/99

INSPECTOR Steven R. King



Septic ELEVATIONS

- HOUSE OUT - 447³
- TANK IN - 445⁰
- TANK OUT - 444⁷
- Box IN - 443⁰
- Box OUT - 443⁰
- EXISTING ELEV AT Box - 447⁰

Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature

9/1/99
 Date

Total linear feet of trench required 180 feet

Width of trench(es) 2 feet

Depth of trench(es) 8 feet

Depth of stone required below distribution pipe 4 feet

PROJECT :	WINDY KNOLLS LOT 22	
LOCATION :	TAX MAP 34 , PARCEL 84 & 134 5th ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
TITLE :	SITE DEVELOPMENT PLAN	
BUILDER :	CORNERSTONE HOMES INC. 9671 NORFOLK AVE. Laurel, MD 20723	
DATE: 11-01-95	PROJ. NO.:	<p>Voria Engineering Inc. CONSULTING ENGINEERS 8307 MAIN ST., HISTORIC ELLICOTT CITY, MD TEL: 410-465-0400 FAX: 410-465-0489</p>
SCALE: AS SHOWN	SHEET 2 OF 2	

APPLICATION

PERCOLATION TESTING

A 50036L

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 5/18/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Clarksville Pike Joint Venture CORNERSTONE HOMES

ADDRESS C/O Land Design + Development Inc
10805 Hickory Ridge Rd Col Md 21044 PHONE 740-2100

AGENT OR PROSPECTIVE BUYER Mark Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Windy knolls LOT NO. 12 22

ROAD AND DESCRIPTION West side of Clarksville Pike (Rt 108)
(6424 PRESTWICK DRIVE)

TAX MAP 34 PARCEL # 84+134

BLDG. PERMIT SIGNED

AND RETURNED 2-1-99
Serial # B70115689

SIZE OF LOT 1 + or - acres TYPE BLDG. SFD - 4Bem
(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.

Mark Reich
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

50036 L
COUNTY #

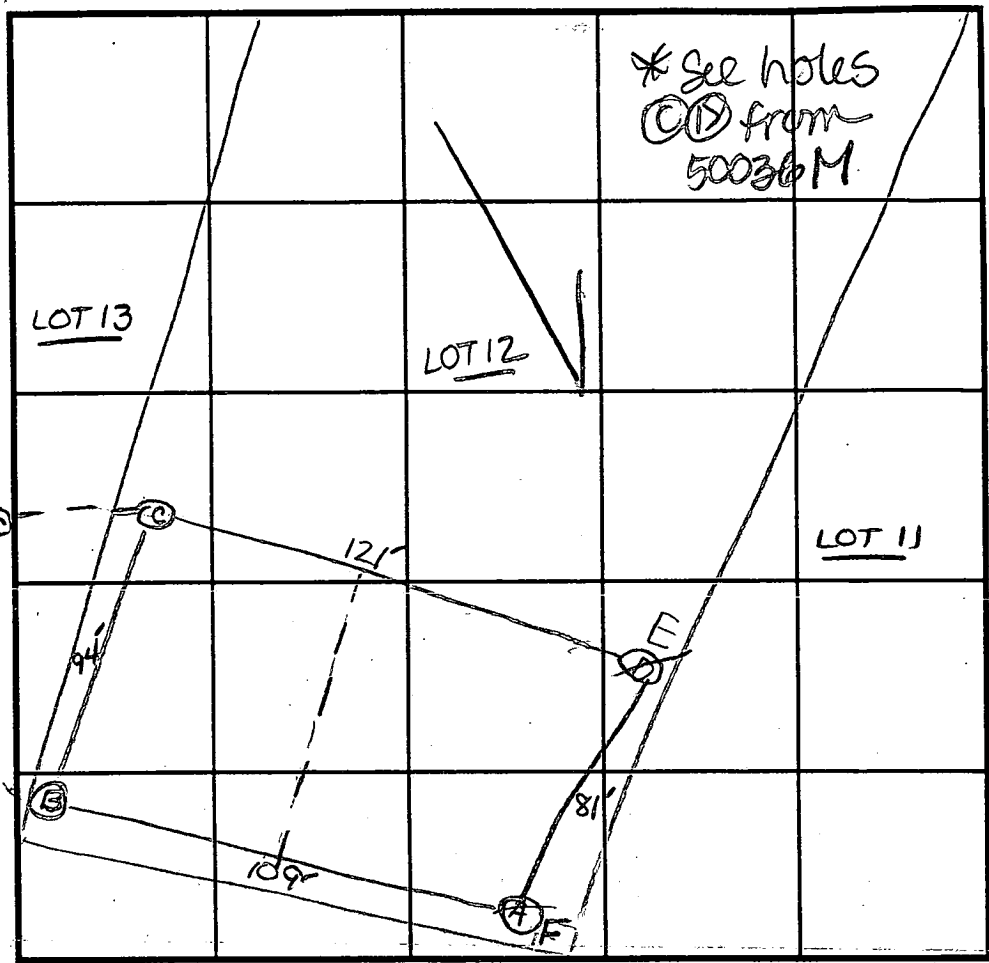
SOIL PROFILE

0'
red br clay loam
14 br sandy loam
10% rock frags
11.5'

topsoil
or br clay loam
14. or. to beige sandy loam
white pocket limestone
11.5'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
Rte 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/26/94	B	4.0'S	11:14 ₃₀	11:15 ₃₀	11:15 ₃₀	11:17	2
		11.5'D	See profile				
	C	12.5'D	Visual - See profile				
	A F	4.0'S	11:24 ₃₀	11:26 ₃₀	11:26 ₃₀	11:30 ₃₀	4
		11.5'D	See profile				
	D E	4.0'S	11:37	11:38	11:38	11:39 ₃₀	2
		7.5' M	11:36 ₃₀	11:37 ₃₀	11:37 ₃₀	11:39	2
		11.5'D	See profile				

REMARKS Tested as staked

TYPE OF SOIL _____

TESTED BY D. Soe ALSO PRESENT O.K. Jr & wife

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 3 TRENCH WIDTH 2'

INLET DEPTH 4' MAXIMUM BOTTOM DEPTH 8' SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 50036 PA

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 5/18/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Clarksville Pike Joint Venture

ADDRESS C/O Land Design + Development Inc
10805 Hickory Ridge Rd Col Md 21044 PHONE 740-2100

AGENT OR PROSPECTIVE BUYER Mark Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:
SUBDIVISION Windy knolls LOT NO. 13-21

ROAD AND DESCRIPTION West side of Clarksville Pike (Rt 108)

TAX MAP 34 PARCEL # 84+134

SIZE OF LOT 1 + or - acres TYPE BLDG. SFD
(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. Mark Reich
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

50036 M

COUNTY #

SOIL PROFILE

(B)

topsoil

red br
clay
loam

br to
H br
silty
loam

10% rock
frags

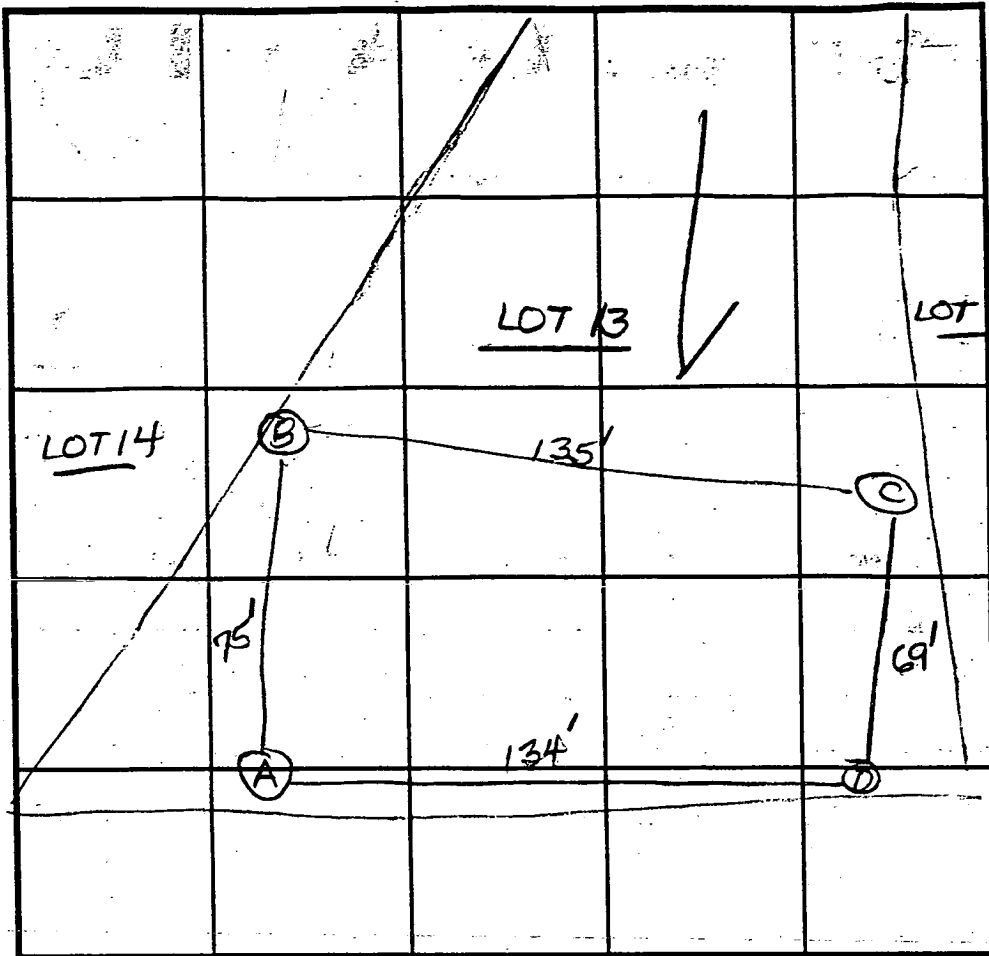
(A)

topsoil

red br
clay
loam

H br
to br
silty
loam

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rte. 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/26/94	(B)	4.0' S	10:40 ₃₀	10:42 ₃₀	10:42 ₃₀	10:44 ₃₀	2
	} NOT ON LOT 22	8.0' M	10:40	10:41 ₃₀	10:41 ₃₀	10:43 ₃₀	2
		13.0' D	see profile				
	} A	4.0'	10:46 ₃₀	10:48 ₃₀	10:48 ₃₀	10:50 ₃₀	2
		12.0' D	see profile				
	} C	12.5' D	visual - see profile				
		} D	4.5'	11:06 ₃₀	11:07 ₃₀	11:07 ₃₀	11:08 ₃₀
	11.5' D		see profile				
	(Repair)	4.5'	11:09	11:11	11:11	11:12 ₃₀	2

REMARKS Tested as staked

TYPE OF SOIL _____

TESTED BY D. Soe

ALSO PRESENT O.K. Jr & wife

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2

TRENCH WIDTH 2'

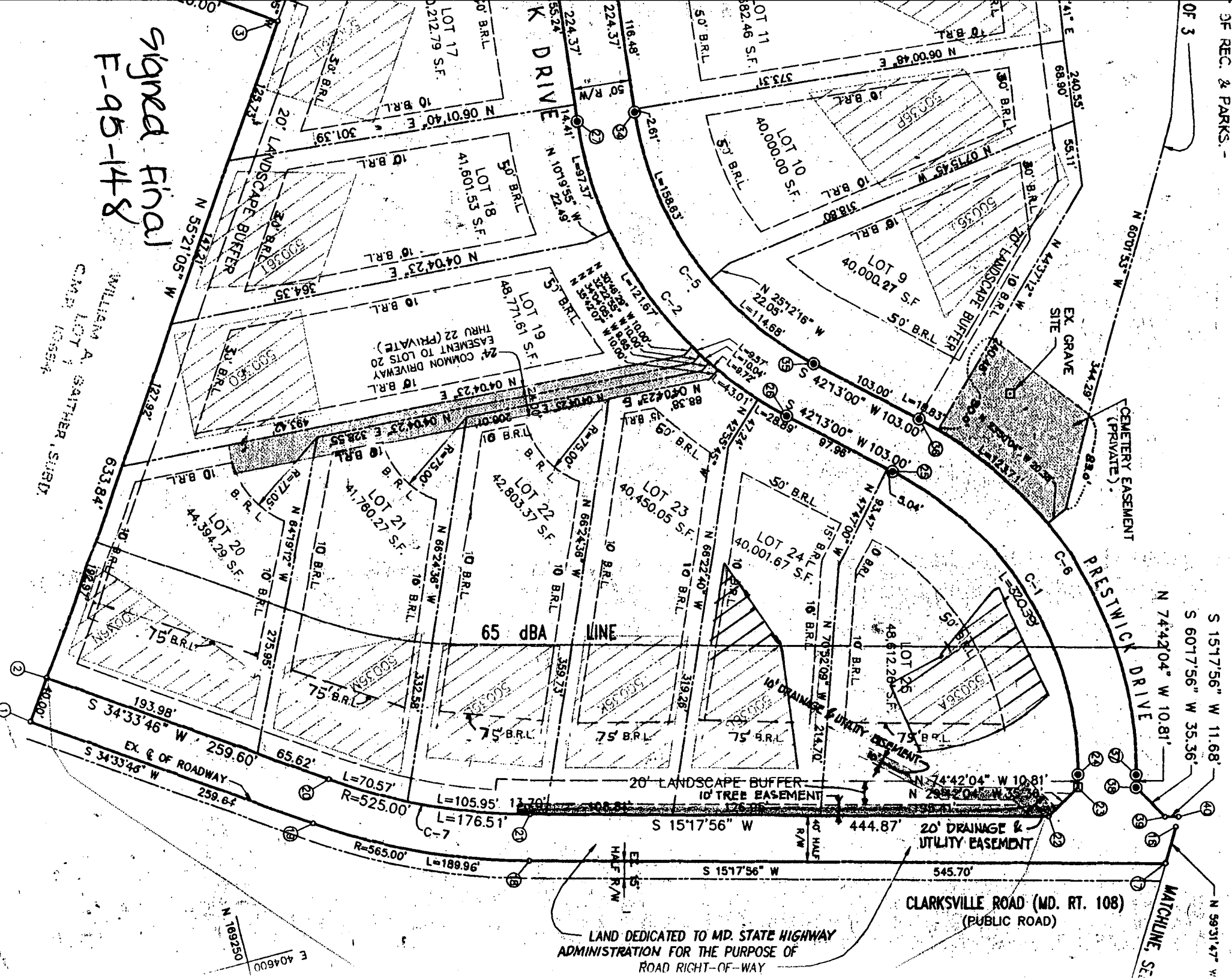
INLET DEPTH 4'

MAXIMUM BOTTOM DEPTH 8'

SQ. FT./BEDROOM 180'

Signed Final
E-95-148

WILLIAM A. GAITHER, SURD.
CADD LOT 1 GAITHER, SURD.
10554



LAND DEDICATED TO MD. STATE HIGHWAY
ADMINISTRATION FOR THE PURPOSE OF
ROAD RIGHT-OF-WAY

CLARKSVILLE ROAD (MD. RT. 108)
(PUBLIC ROAD)

MATCHLINE, SEE



Sent? - Resolved -
Anyway

HOWARD COUNTY HEALTH DEPARTMENT

Mary Sue Baker, MBA, Acting County Health Officer

April 14, 1999

Cornerstone Homes
Attn: John Conners
Director of Construction

John,

This is to confirm our recent conversations with respect to serious concerns about a number of the water wells in the Windy Knolls subdivision that appear to be inadequately grouted.

Problems observed at time of well line installation include:

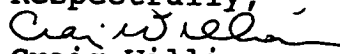
- lot 4 - large voids in the grout;
- lot 22 - no grout below the pitless adapter;
- lot 19 - inappropriate grout material - rock cuttings and soil mixed in with the grout.

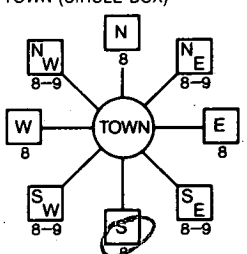
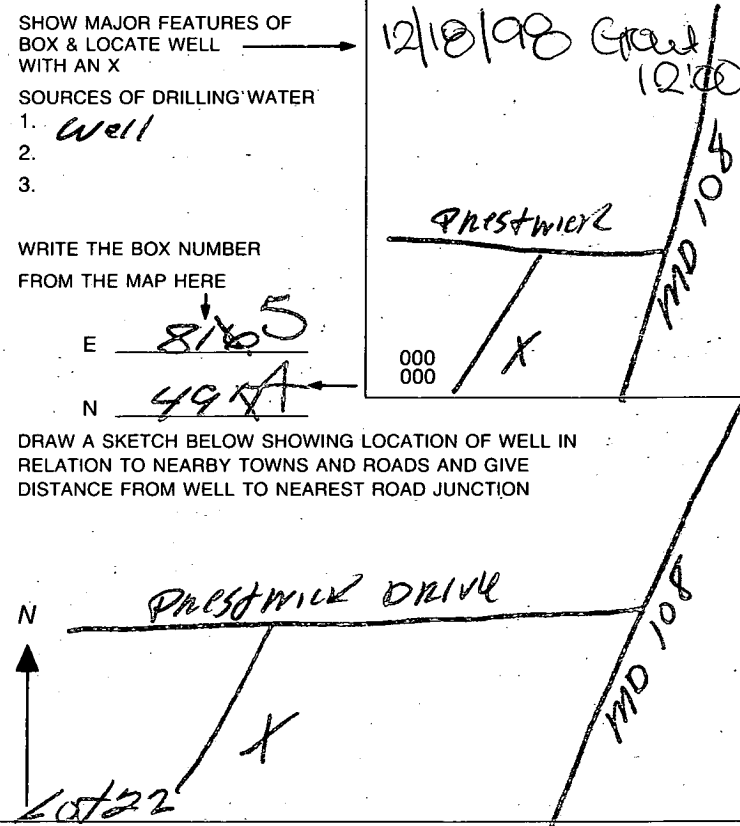
These are construction defects that do not satisfy requirements for properly constructed wells and pose severe threat for potential contamination of the water supply.

We cannot proceed further with individual permits or occupancy approvals until there is confidence that the properties in question are each served by "a properly constructed" well.

The "down-the-hole" view afforded by the well line inspection provides only a very limited window to observe the condition of the grout. A scheduled site evaluation with a backhoe and handtools would be the first step in confirming the degree of the problem. With a licensed driller present as your consultant, recommendations for remediation can be considered and agreement on an appropriate course of action can be reached.

Please contact this office to schedule the evaluation at the earliest opportunity.

Respectfully,

Craig Williams

B 1	6423	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>HO-94-20006</u>
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
Date Received (APA) <u>12/1/98</u> OWNER INFORMATION Last Name <u>Land Design & Development</u> Owner First Name Street or RFD <u>10805 Hickory Ridge</u> Town <u>Columbia</u> State <u>MD</u> Zip <u>21044</u>			LOCATION OF WELL COUNTY <u>Howard</u> SUBDIVISION <u>Windy Knolls</u> SECTION <u>I</u> LOT <u>22</u> NEAREST TOWN <u>CLARKSVILLE</u> MILES FROM TOWN (enter 0 if in town) <u>2</u> MI	
DRILLER INFORMATION Driller's Name <u>Denny Harley M SD 143</u> License No. Firm Name <u>Harley Drilling & Pump Systems</u> Address <u>Box 160 Walkersville, MD 21044</u> Signature <u>Denny Harley</u> Date <u>11-30-98</u>			DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NEAR WHAT ROAD <u>Prestwick Drive</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD <u>30</u> FEET ENTER FOR MI <u>FD</u>	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>3</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>A50036L</u> STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <u>12/1/98</u> EXP. DATE <u>12/31/98</u> NORTH GRID <u>494</u> EAST GRID <u>0815</u>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)			SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> WRITE THE BOX NUMBER FROM THE MAP HERE E <u>8105</u> N <u>494</u> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <u>200</u> FEET APPROXIMATE DIAMETER OF WELL <u>6"</u> 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) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> 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 (MDE OR COUNTY USE ONLY)				
APPROP. PERMIT NUMBER _____ G A P _____ FORCE <u>DS</u> WRITE INITIALS IN BOX PERMIT No. <u>HO-94-20006</u>				
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -				

C 1 9380

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

1 2 3 6

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER A50036L

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 12-13-98

Depth of Well 22 270 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" NO. 94-0006

OWNER LDD STREET OR RFD PROSIEWICK DRIVE TOWN CROFTSVILLE SUBDIVISION Windy Knolls SECTION LOT 22

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Brown Soil + mica, Blue Rock, and Got water at 90' and 250'.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD: casing types insert appropriate code below, MAIN CASING TYPE (ST), Nominal diameter (6 1/2"), Total depth of main casing (60).

OTHER CASING (if used) diameter, depth (feet) from to.

SCREEN RECORD: screen type or open hole (HO), insert appropriate code below, STEEL, BRASS, BRONZE, PLASTIC, OPEN, HOLE, OTHER.

NUMBER OF UNSUCCESSFUL WELLS: 0

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...

DRILLERS LIC. NO. M SD 143, DRILLERS SIGNATURE (Ray Bank), LIC. NO. D

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

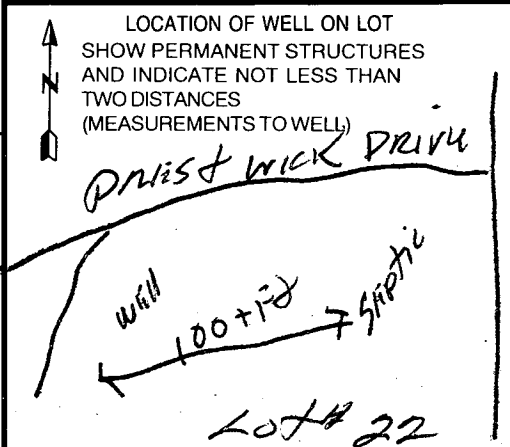
DEPTH (nearest ft.) table with columns 1-21 and rows A-C3-E-N. Includes entries for 60 and 270.

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (5), METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL (30 ft. before, 150 ft. when pumping), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED: DRILLER INSTALLED PUMP (NO), IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (above/below LAND SURFACE).



B 1 2 3 4 5 6		SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER NO - 94 - 1954 70 fill in this form completely 79
---------------	--	-----------------------------	---	---

Date Received (APA) 11/11/98
8 MM DD YY 13

OWNER INFORMATION RN 7635

15 Last Name Owner First Name 34
Cornerstone Homes

36 Street or RFD 55
9691 Norfolk Ave

57 Town 70 State 72 Zip 76
Laurel, Md. 20723

B 3 HOWARD LOCATION OF WELL CO#

8 COUNTY 21

23 SUBDIVISION Windy Knolls 42

SECTION 44 46 48 50
22
49 51
CLARKVILLE

92 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M I
73 76 77 78

DRILLER INFORMATION

George F. Easterday MW D 040
76 License No. 81

L. Franklin Easterday, Inc.
Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771
Address

Mary F. Easterday 11/16/98
Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD 30
Frestwick Drive

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 30 37
DISTANCE FROM ROAD Ft.
ENTER FT OR MI 38 39

TAX MAP BLK: PARCEL

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5
8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, DEWATERING

PUBLIC WATER SUPPLY WELL

TEST, OBSERVATION, MONITORING

GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER - HEALTH DEPARTMENT APPROVAL

COUNTY NAME
COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 11/16/98
43 MM DD YY 48

CO SIGNATURE EXP. DATE

NORTH GRID 494 000 EAST GRID 0815 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST

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 DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER 54 G A P 63

PERMIT No. NO - 94 - 1954
70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. wells
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 816
N 490

000
000

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

108

51
D10

RECEIVED
NOV 09 1998
L. FRANKLIN EASTERDAY INC.

B 1 **3029**

SEQUENCE NO.
(DP USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-94-0882

(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)

050196

OWNER INFORMATION

ZAMB DESIGN + DEVELOPMENT INC

10805 HICKORY RIDGE

COLUMBIA MD 21044

DRILLER INFORMATION
WAGNER & EARL

DRILLER'S NAME
HARLEY DRILLING + PUMP SYSTEMS

FIRM NAME
Box 160 WICKERSVILLE, MD 21

ADDRESS
4-26-96

SIGNATURE

DATE

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **3**

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 **200** FEET

APPROXIMATE DIAMETER OF WELL _____ 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 - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- 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)

APPROX. PERMIT NUMBER **G A P**

FORCE **DS** WRITE INITIALS IN BOX PERMIT No. **40-94-0882**

SPECIAL CONDITIONS

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

B 3

LOCATION OF WELL

HOWARD

WINDY KNOLLS

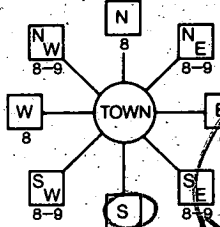
SECTION 2 LOT 22

CLARKSVILLE

MILES FROM TOWN (enter 0 if in town) 2 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



~~148-108~~ **PRESTWICK**

NEAR WHAT ROAD **DRIVE**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

300

DISTANCE FROM ROAD

ENTER OR MI

TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME **A50036L** COUNTY NO.

STATE SIGNATURE _____ DATE ISSUED **073196**

DRUG/SOL CO-SIGNATURE **7/30/97**

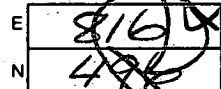
NORTH GRID **496000** EAST GRID **089600**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL

SOURCES OF DRILLING WATER

1. **well**
- 2.
- 3.

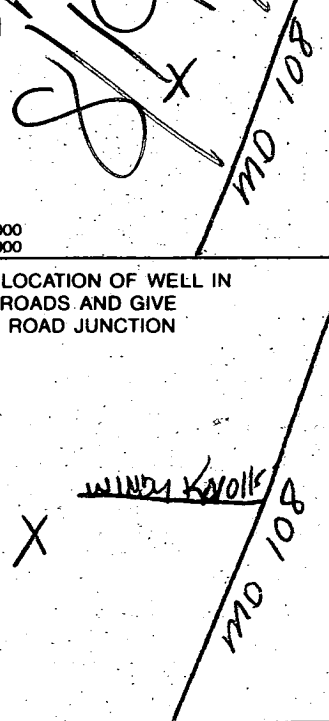
WRITE THE BOX NUMBER FROM THE MAP HERE



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



LOT #22



SITE INSPECTION SHEET

OWNER: _____

DATE REQUESTED: _____

ADDRESS: Windy Knolls Lot #22

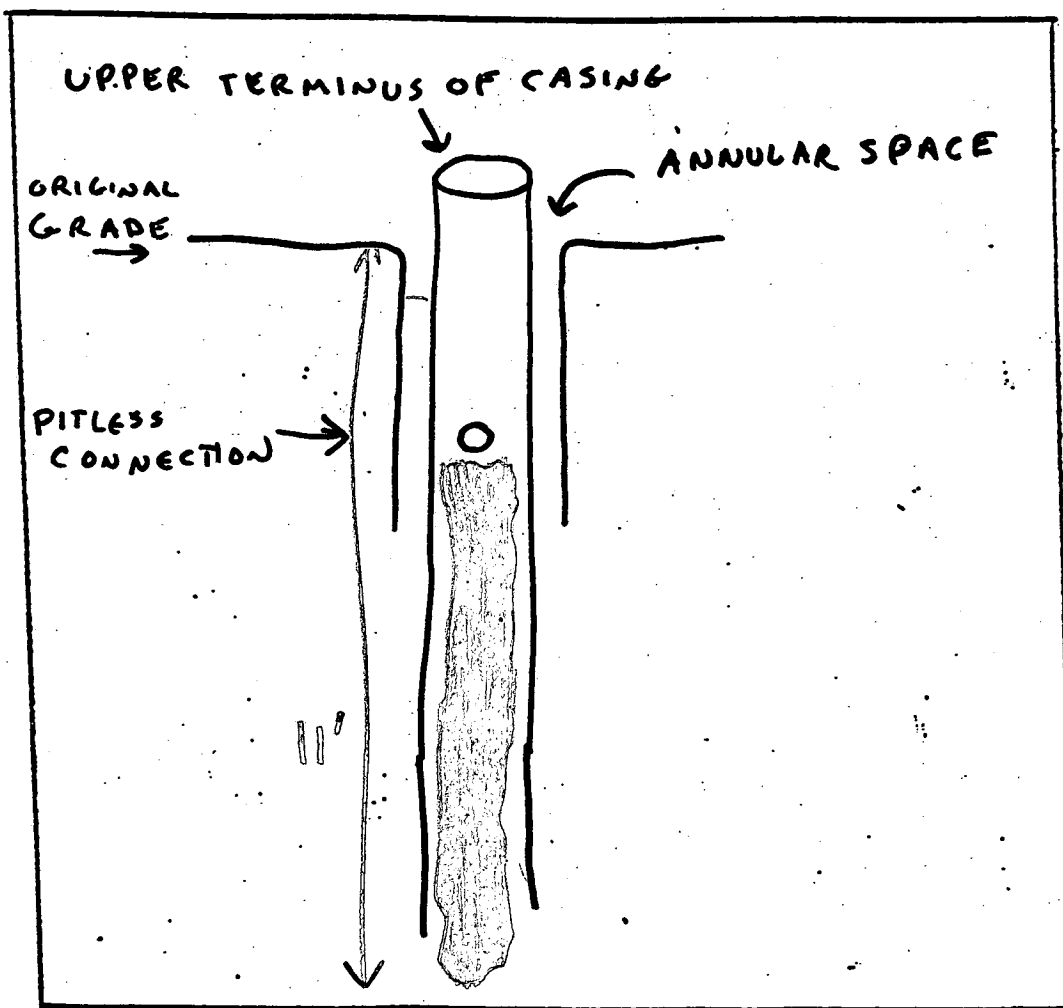
DRILLER: Perry Harley

WELL TAG # HO-94-2006

COUNTY # Howard

PROPOSAL: WELL CONSTRUCTION EVALUATION -

LOCATION DIAGRAM



COMMENTS: Adequate grout at 11' confirmed 4/22/99 S.R.K. Also present Eric Dougherty, George Easterday, Dave Kerr

DATE: _____

INSPECTOR: _____

see Also HO-94-2006 Co/Steel

- pitless / emp / elevator in
- one side of Annulus grout present, other side no grout soil only
- builder plans to expose annulus -

END @ 4²⁶ pm # u/Dave Kerr

ERIC Dougherty (EJD)
MDE, WMA

(NOTES FROM 4/20/99)

Craig




MARYLAND DEPARTMENT OF THE ENVIRONMENT
2500 Broening Highway • Baltimore, Maryland 21224
(410) 631-3000

Parris N. Glendening
Governor

Jane T. Nishida
Secretary

MEMORANDUM

TO: Maryland Board of Well Drillers

FROM: Eric Dougherty, Geologist
Groundwater Permit Program 

SUBJECT: Observations Made During Inspection Of Wells

DATE: April 26, 1999

On April 20 and April 22, 1999, I conducted a site inspection at Windy Knolls Subdivision, Clarksville, Howard County, Maryland in response to a request from Dave Kerr, Regional Sanitarian. On April 20, five wells were inspected. On April 22, a follow-up inspection was conducted using the MDE down-hole camera and a backhoe.

Lot 19, well tag number HO-94-1688, was found to have an open annular space to 44 ft below TOC, 62.5 ft of 6" steel casing and a total depth of 177 ft. Some cement was present at the land surface for a 1 foot thickness, but no cement was found in the exposed annular space below grade for 4 feet. The annular space was grouted on April 22, with 15 sacks of neat portland cement.

Well HO-94-1690, was inspected and found to have voids in the cement grout to a depth of 11 feet below grade. At 11 feet below grade, the grout appears solid.

Lot 1, no well tag, the steel casing was found to be 52.5 ft in length, and the grout had voids to 15 feet below TOC. Grout staining/curtain lining of the annular space was found from 2 feet below grade to 15 feet below grade.

Wells HO-94-2005 and 2006 were also inspected for grout integrity by digging along side of the casing with a backhoe. The depth exposed was approximately 15 feet at these two locations. The grout appeared solid and completely filling the annular space below where the pitless connection would be expected.

Attached for your review and information is a copy of my field notes and well completion report for lot 19, well HO-94-1688. If you have any questions, please feel free to contact me at extension 3797. Thank you.

Cc: Dave Kerr
Craig Williams, Howard County

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-N Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Receipt # _____ Date 5/8/99
Name of Installer FUNGA P/Bg & Htg Co. Telephone 410-465-1401
License Number 6318
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner _____ Telephone _____
Subdivision Windy Knolls Lot # 22 Well Tag # HQ-91-22-06
Site Address 6424 PEEPERWICK DR

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Gold's
3. Model # 76505412
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 guard Other

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

Pitless Adapter
1. Make HORNBARD
2. Model # _____
3. Depth 5 FT

Tank
1. Capacity 80 GPM
2. Pressure relief valve? YES

Piping
1. Type PE
2. Size 1/2"
3. NSF and/or BOCA Code approved
4. Depth of supply line 227 FT

Well data
1. Depth 260 ft.
2. Yield 5 GPM
3. Static water level 190 ft.
4. Will water supply be disinfected by installer? YES

WPT COMPLETE
APPROXIMATELY 5/12/99

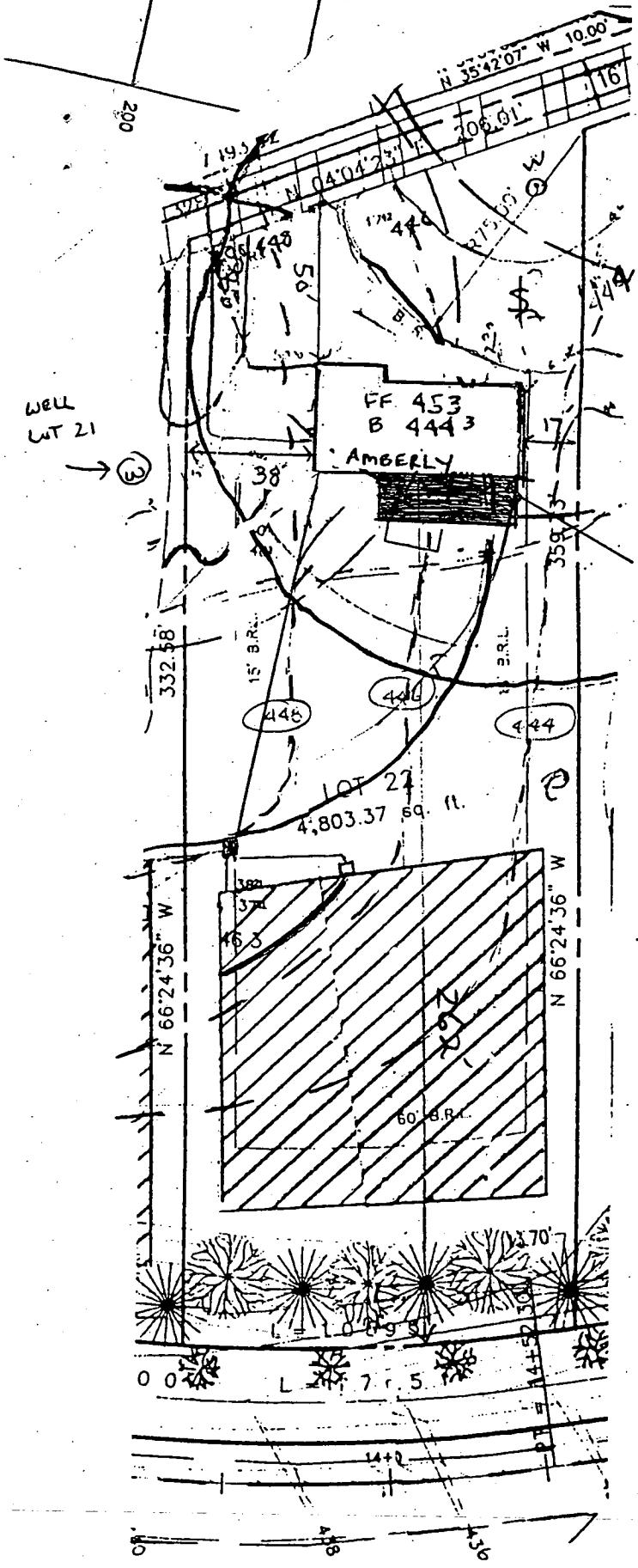
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 5/8/99

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



Septic ELEVATIONS

- HOUSE OUT - 447³
- TANK IN - 445⁰
- TANK OUT - 444⁷
- Box IN - 443⁰
- Box OUT - 443⁰
- 42'x14' EXISTING OPEN Wood deck ELEV AT Box - 447⁰

Approved Septic System Plan
Howard County Health Department

[Signature]
Signature


2/1/95
Date

Total linear feet of trench required 180 feet

Width of trench(es) 2 feet

Depth of trench(es) 8 feet

Depth of stone required below distribution pipe 4 feet

PROJECT :		WINDY KNOLLS LOT 22	
LOCATION :		TAX MAP 34 , PARCEL 84 & 134 5th ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
TITLE :		SITE DEVELOPMENT PLAN	
BUILDER :		CORNERSTONE HOMES INC. 9671 NORFOLK AVE. Laurel, MD 20723	
DATE: 11-01-95	PROJ. NO.:	 Voria Engineering CONSULTING ENGINEER 8307 MAIN ST., HISTORIC ELLICOTT CT TEL: 410-465-0400 FAX: 410-4	
SCALE: AS SHOWN	SHEET 2 OF 2		