

9/15/94
PERM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50304 F
AI8307
A REPAIR

DISTRICT 3rd

DATE 9/29/94

DATE SYSTEM APPROVED 9/15/94

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL ALTER X
ADDRESS 13775 Triadelphia Road PHONE 988-9270
SUBDIVISION Eagles Loft LOT 18 ROAD 3438 Huntsman Run
PROPERTY OWNER Dr. Stahl
ADDRESS 3438 Huntsman Run Ellicott City, Maryland 21043

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

125 SQUARE FEET PER BEDROOM

125
4
1500 55
91500

LINEAR FEET OF TRENCH REQUIRED 55'

REPAIR-PURPOSE-DRYWELL HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 09/15/94

Install one trench off existing drywell, trench to run parallel to road.

Trench to be 55' long, inlet 2', bottom 11', stone 9'.

PLANS APPROVED BY [Signature] DATE 9/15/94

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

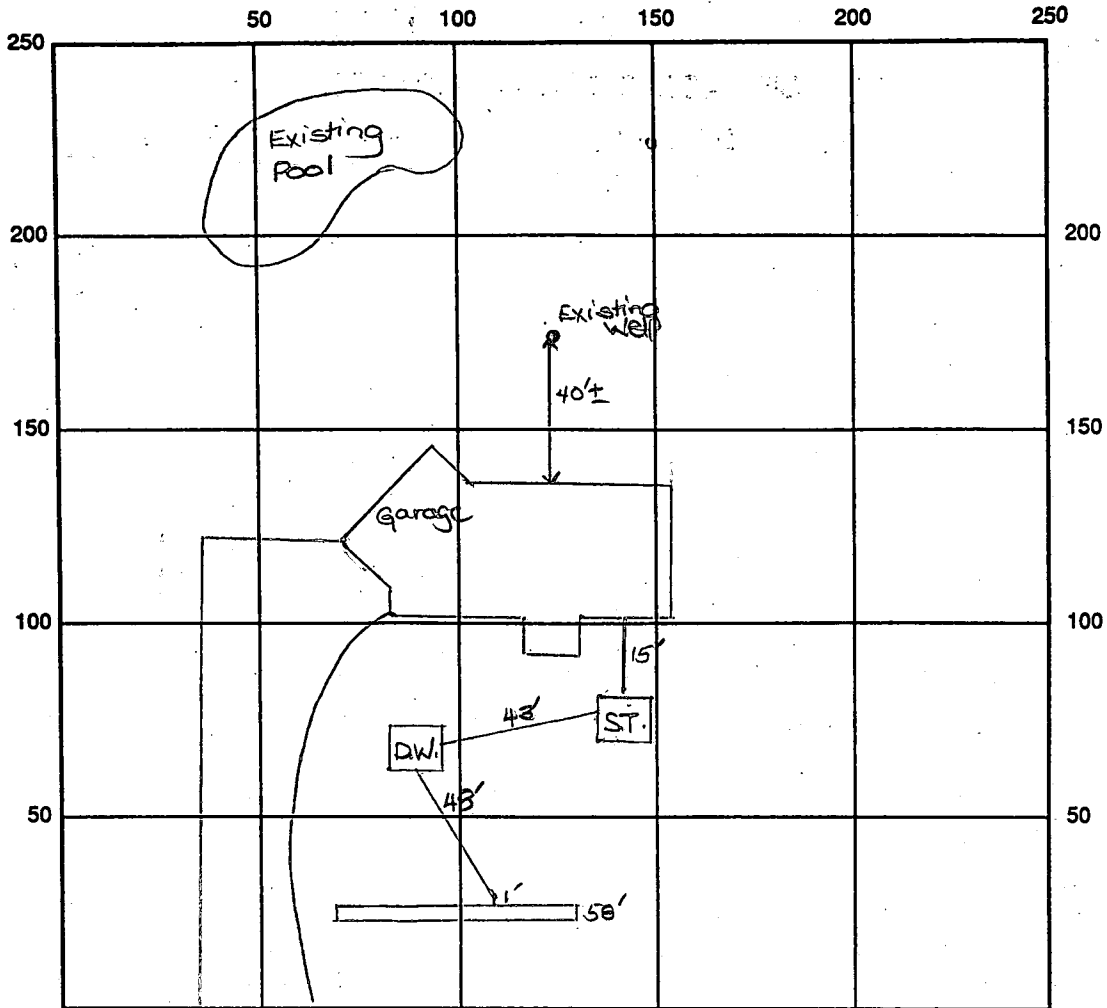
PERMIT VOID AFTER TWO YEARS

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**

P50304F



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Huntsman Run

SEPTIC TANK LEVEL Existing CLEANOUTS Existing

DISTRIBUTION BOX LEVEL N/A

DRAIN FIELD/TITLE DEPTH 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 9 FT. TOTAL LENGTH 58 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 522 SQ. FT.

DRYWALL INSIDE DIAMETER Existing FT. EFFECTIVE DEPTH BELOW INLET Existing FT.

ABSORBENT AREA 522 SQ. FT. + Existing

REMARKS: 9/15/94 Final - OK to cover all work, materials on site. DKS

DATE SYSTEM APPROVED 9/15/94 INSPECTOR Soma K. Joe

12/19/77 P.C. 0
C.B.C.

P 26270
A 18307

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

12/16/77 partial
before land release
12/19/77 as soon

as possible app'd per
attached letter
6/1/79

DISTRICT 3rd

DATE 6/28/77

INDEXED

Jack Fyock, Jr.

IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Rd.

PHONE 988-9270

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

3438

SUBDIVISION Eagles Loft

ROAD Unnamed

Huntman's Run

LOT 18

PROPERTY OWNER Adelphia Developers

Dr. Stahl

ADDRESS 6931 Donachie Road Balto., Md. 21239

465-1635

SPECIFICATIONS 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1250 GALLONS

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

OTHER DRY WELL - to have 130 square feet effective absorbent sidewall area per bedroom below inlet. Inlet to be 4 feet below original grade and maximum depth 10 1/2 feet. Location: 120 feet from right property line and 105 feet from front property line when facing lot from road. (Perc hole 4 & 5)

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPES ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY C. B. Streaker

DATE 2/11/76

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.

BLDG. PERMIT SIGNED BY
HOWARD COUNTY HEALTH DEPARTMENT
AND RETURNED 10/2/80

Serial # 8154
PCH

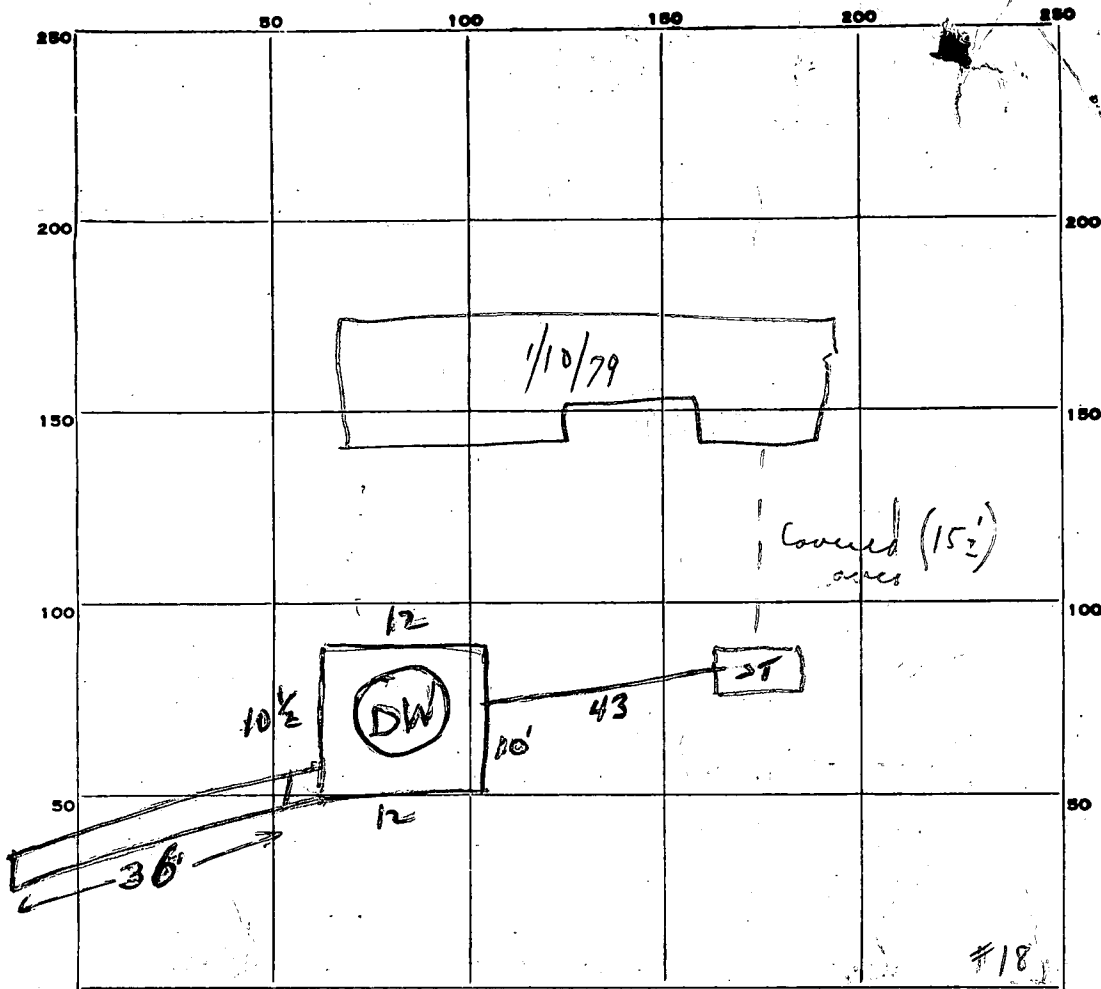
BLDG. PERMIT SIGNED
AND RETURNED 10/2/80

Serial # 8082
addition - 1 Bedroom
1 Bath

BLDG. PERMIT SIGNED
AND RETURNED 12/2/77

serial # 34033

A 18307



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

44 1/2
7
308
22
310

36
7
252
310
562

PERMIT CARD none seen

SEPTIC TANK, LEVEL 1250 gal ✓ CLEANOUTS ST / DW ✓ / ✓

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 1 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 1/2 ± IN. TOTAL LENGTH 36 FT. 18
216 234
229

NUMBER OF TRENCHES 1 SIDEWALL TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 44 1/2 FT. DEPTH BELOW INLET 7 FT. Inlet @ 4'

ABSORBENT AREA 330 SQ. FT. in DW; TOTAL Δ = 554 ±

REMARKS 12/16/77 System ~ 1/2' too deep but soil appears excellent,
so OK to count area. OK to cover DW + ST; OK to
install stone in trench. WNWZ. 12/19/77 stone + paper
on trench) to 4 1/2' from original grade.
No house, it started - as house connecting C.Rd.
1/10/79 Area graded + covered from house to septic tank
C.Rd.

DATE SYSTEM APPROVED _____ INSPECTOR _____

C1 1026 SEQUENCE NO. (MDE USE ONLY) 350

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) ok 8/22/97

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER 13-P-50304F

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED 08 14 97

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1239

OWNER STAHL, DR. ALAN STREET OR RFD 3438 NUNTSMAN RD TOWN W. FRIENDSHIP SUBDIVISION Eagles Loft SECTION LOT 18

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 16 NO. OF POUNDS 1600 GALLONS OF WATER 80 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 54 ft.

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 400 TYPE OF PUMP USED (for test) (A) air (P) piston (T) turbine (C) centrifugal (R) rotary (O) other (J) jet (S) submersible

STATE THE KIND OF FORMATIONS PENETRATED: THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include top soil, Shaley, Brown mica, Gray mica, Brown mica, Gray mica, Sand stone, Gray mica.

CASING RECORD

MAIN CASING TYPE (S) (T) (P) (L) Nominal diameter top (main) casing (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 (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) (O) (T)

C 2 DEPTH (nearest ft.)

Table with columns: A, C, H, S, C, R, E, N. Rows for 1, 2, 3 slot sizes and diameter of screen.

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES) (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 (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate, box and enter casing height) (+) above () below LAND SURFACE 2 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

- 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 LIC. NO. MW D 040

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MW D 481

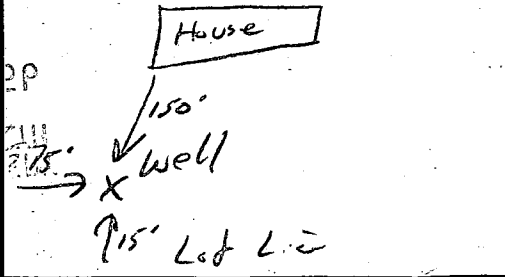
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

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)



APPLICATION

A 18307

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3rd

DATE 4/18/73

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 Adelphia Developers

ADDRESS 6931 Donachie Road, Balto., Md. 21239 PHONE Purdum & Jeschke 465-1635

PROPERTY LOCATION:

SUBDIVISION Adelphia LOT NO. 18

ROAD AND DESCRIPTION Unnamed road

SIZE OF LOT 40,500 sq. ft. TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Purdum & Jeschke

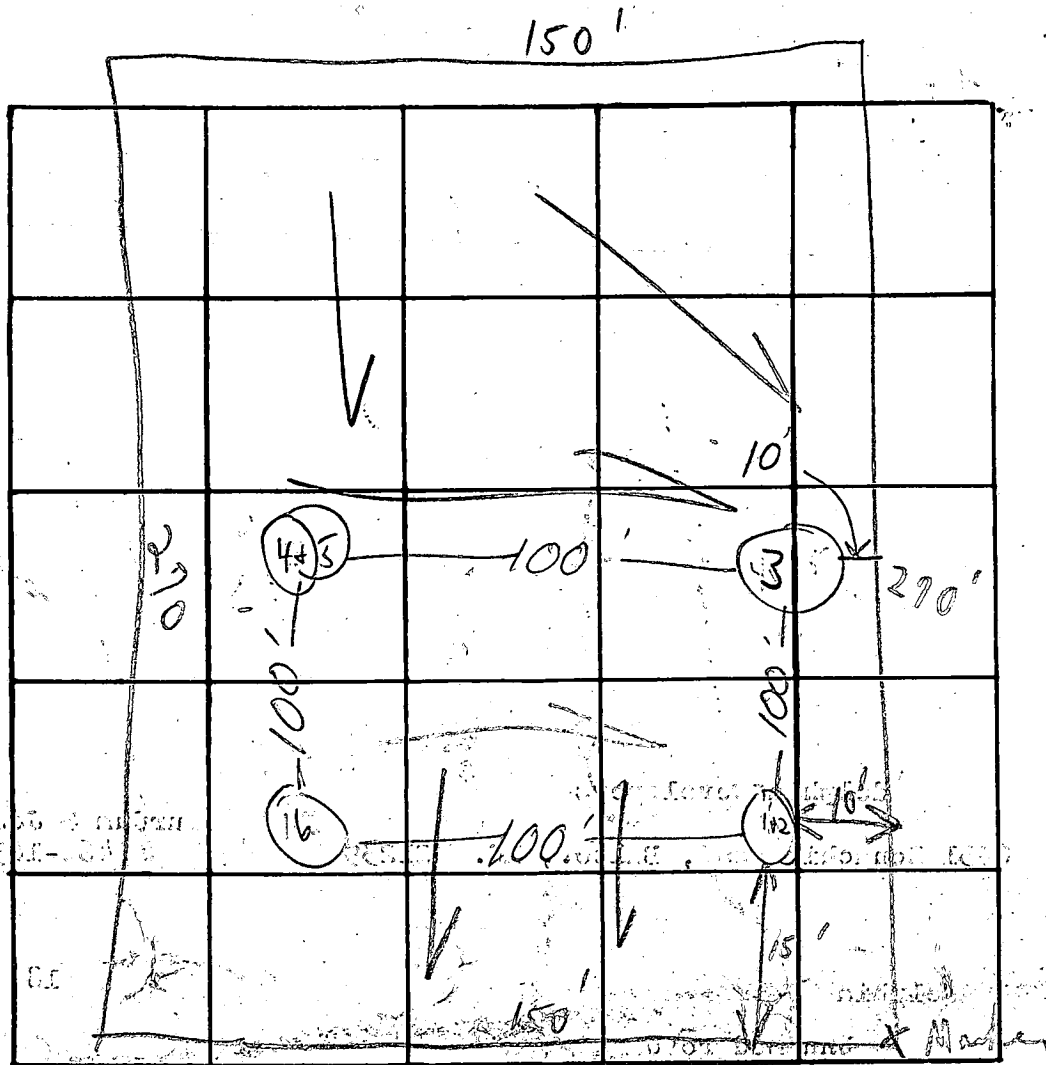
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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.

Lot #18

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/24/73	1	3'	2:54	2:56	2:56	3:01	5m
	2	10'	2:54	3:00	3:00	3:08	8m
73	3	10'	Vertical hole similar to 142				4'
	4	4'	3:06	3:09	3:09	3:14	5m
	5	10 1/2'	3:09	3:11	3:11	3:20	9m
	6	9'	Vertical hole similar to 4+5				4 27/7 min

Use 4+5

Use 4+5 High

check 4'

REMARKS

Control holes - Woods Holes Certified

TYPE OF SOIL

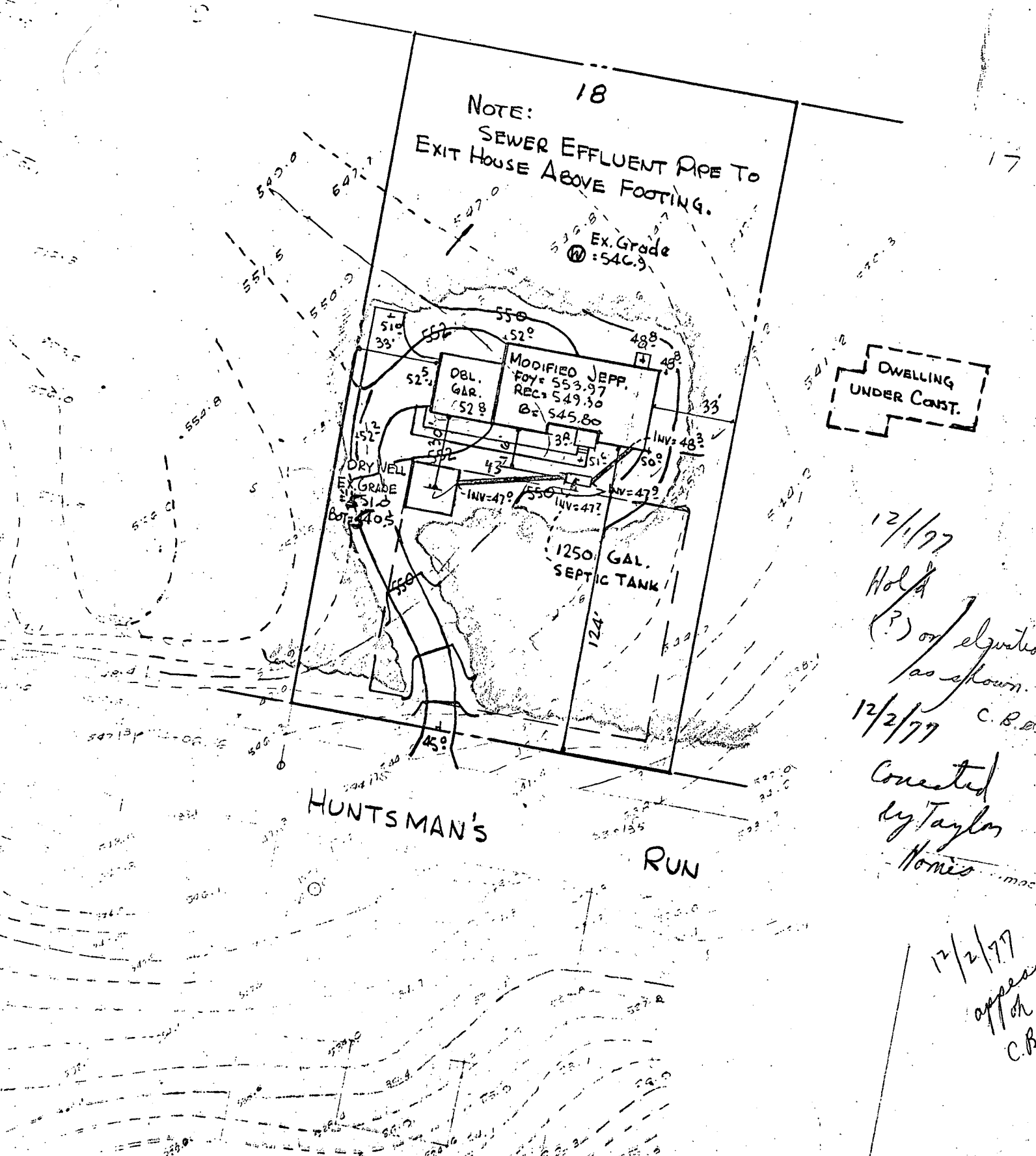
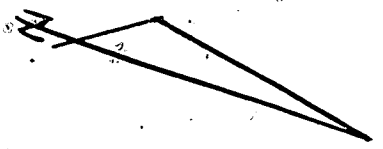
Sandy (Mica)

AC 2

"EAGLE'S LOFT"

DATE: OCT. '77

SCALE: 1"=50'



12/1/77
Hold
(?) on elevation
as shown.

12/2/77 C.B.B.
Consented
by Taylor
Homes

12/2/77
appears
OK
C.B.B.

B 1 2291 SEQUENCE NO. (WRA USE ONLY)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
Howard 21401

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
11/22/77
10:00 P.M.

OWNER *Edward Thomas, Inc.*
 COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD *P.O. Box 55*
 COL 36 COL. 58

POST OFFICE *Simpsonville, Md. 21150*
 COL 57 COL. 76

B 1 CONTINUED DRILLER INFORMATION

DATE *June 30, 1977* **LICENSE NUMBER** *238*
 77 80

FIRST NAME *Joseph L. Morgan* **DRILLER** **LAST NAME**

SIGNATURE *Joseph L. Morgan*

B 3 LOCATION OF WELL

COUNTY *Cecil Howard* (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION *Crater Hill* 23 42

SECTION *44* **LOT** *18* 48 50

NEAREST TOWN *Hamlet* 52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) *2* 73 76 77 78

B 2 WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) *5* 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) *750* 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

MUNICIPAL WATER SUPPLY

PRIVATE WATER COMPANY } MUST HAVE STATE HEALTH DEPT. APPROVAL

TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)

NORTH EAST N.E. NORTHEAST S.E. SOUTHEAST

SOUTH WEST N.W. NORTHWEST S.W. SOUTHWEST

NEAR WHAT ROAD *Hamletman Run*

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH EAST WEST

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) *200* 34 37 38 39

APPROXIMATE DEPTH OF WELL *200* 24 28 FEET

APPROXIMATE DIAMETER OF WELL *6* (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE)

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

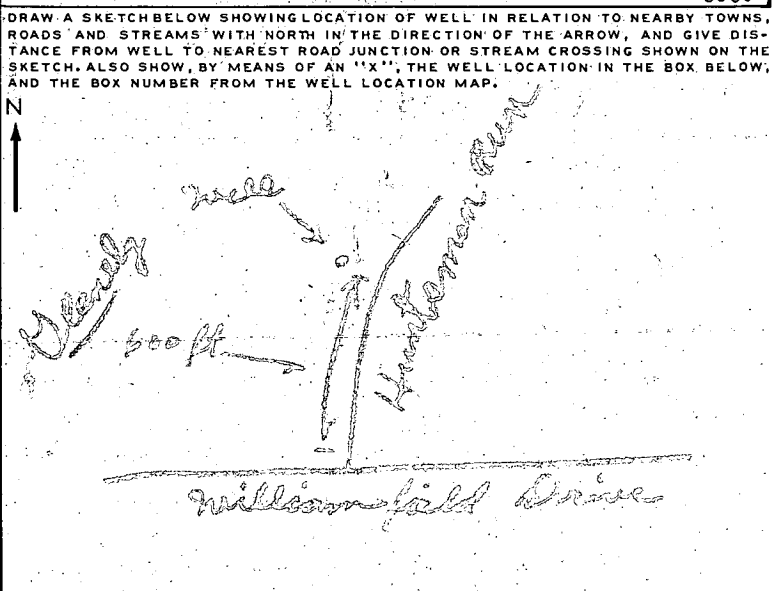
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

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

APPROPRIATION PERMIT NUMBER *54* **ENGINEER REVIEW DISTRICT NO.** *63*

FORCE *67* **WRITE INITIALS IN BOX** *68* **CONDITIONS** *70 71 72 73 74 75 76 77 78 79*



B 4 CONTINUED HEALTH DEPARTMENT APPROVAL

STATE HEALTH (CIRCLE BOX) **COUNTY NAME** *Howard* **COUNTY NO.** *226879*

DATE *6 23 77* **APPROVED BY** *Ronald H. Monahan Sanitarian*

WELL LOCATION MAP

BOX NUMBER *800* *520*

NORTH COORDINATE *50 51 52 53 54 55*

EAST COORDINATE *57 58 59 60 61 62 63*

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

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

1 2 3 (SEQ. NO.) 6

11/23/77

9:30 a.m.

J. Wayne grout
Eagles Left.

This well has 70 ft of casing of which 60 ft of open hole was measured. Due to the well passing through some hard strata pipe was not able to reach bottom. Well can be grouted as per F.F. if the jet pipe is dropped to the max depth and 1 or 2 bags pumped without any grout in evidence for substantial distance up the outside of pipe. (Which would indicate a bridge and failure to penetrate to @ 60')

ROB 22 NOV, 77

- 16 Bags grout - ROB. exp 23 Nov 77

C 1 2635

SEQUENCE NO. (WRA USE ONLY)

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 (WRA USE ONLY)

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE WELL COMPLETED

22 (TO NEAREST FOOT) 26

28 29 30 31 32 33 34 35 36 37

8-13

15 20

DRILLERS IDENTIFICATION NO.

OWNER LAST NAME

FIRST NAME

STREET OR RFD

POST OFFICE

WELL DESCRIPTION

WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY) FEET FROM TO CHECK IF WATER BEARING

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES Y NO N

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT CM BENTONITE CLAY BC

NO. OF BAGS NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 48 FT. TO 54 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES INSERT APPROPRIATE CODE BELOW STEEL ST CONCRETE CO PLASTIC PL OTHER OT

MAIN CASING TYPE NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED) DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE INSERT APPROPRIATE CODE BELOW STEEL ST BRASS OR BRONZE BR OPEN HOLE HO PLASTIC PL OTHER OT

C 2 (SEQ. NO.)

DEPTH (NEAREST WHOLE FOOT) FROM TO

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

DIAMETER OF SCREEN 56 60 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 8 9

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 11 15

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 17 (NEAREST FOOT) 20

WHEN PUMPING 22 (NEAREST FOOT) 25

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

AIR AIR P PISTON T TURBINE CENTRIFUGAL C ROTARY R OTHER (DESCRIBE BELOW) 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) YES Y NO N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

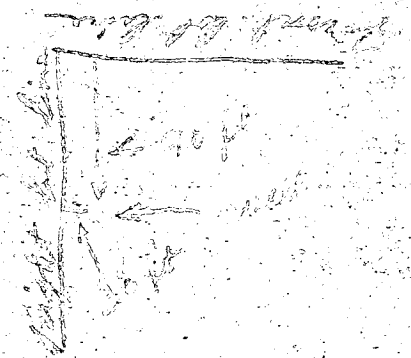
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE LAND SURFACE BELOW (NEAREST FOOT)

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

(PLEASE PRINT)

SIGNATURE

May 25, 1979

Howard County Health Department
P.O. Box 476
Ellicott City, Maryland 21043

Attention: Environmental Health

Re: Residence of Dr. Alan G. Stahl,
3438 Huntsmans Run,
Ellicott City, Maryland 21043

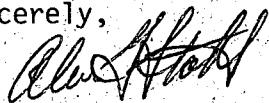
To Whom It May Concern:

This is written, at your request, to certify that cast iron piping has been utilized as per Howard County codes in connecting our home to both the septic and drywell systems.

I would appreciate your passing on your certification to the Building Permits Department (I would also like a copy of this communication) such that the final occupancy permit may be issued to us.

Thank you very much for your assistance.

Sincerely,



Alan G. Stahl, M.D.

AGS/pd

June 1, 1979

Western Pacific Financial Corporation
7390 Ritchie Highway, Suite 608
Glen Burnie, Md. 21061
Attn: Debbie

RE: Dr. Stahl
Eagles Loft, Lot 18
3438 Huntsman's Run

Dear Debbie:

The well and septic system on the above referenced property have been installed, inspected and approved by this Department except for the final house to septic tank connection. Approval for this connection, which is normally inspected is given per Dr. Stahl's letter to this office, indicating that in fact a cast iron pipe was installed as required.

This approval is given for occupancy of the house only by the Stahl family. Should the house be transferred to another party prior to a satisfactory operating period, it would be required that the pipe be excavated for inspection and approval.

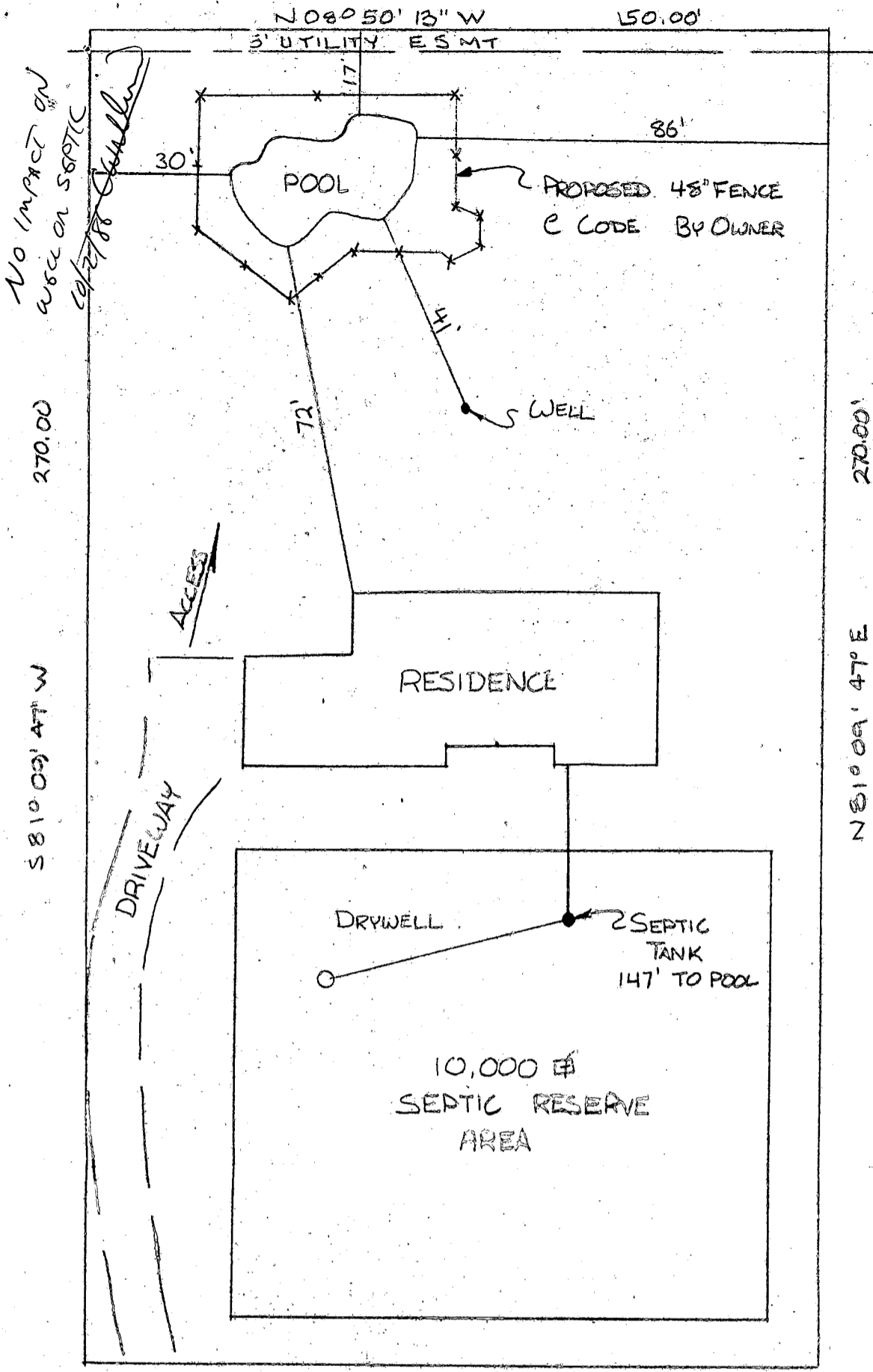
If there are any questions, please contact this office at 992-2330 any working day.

Sincerely,

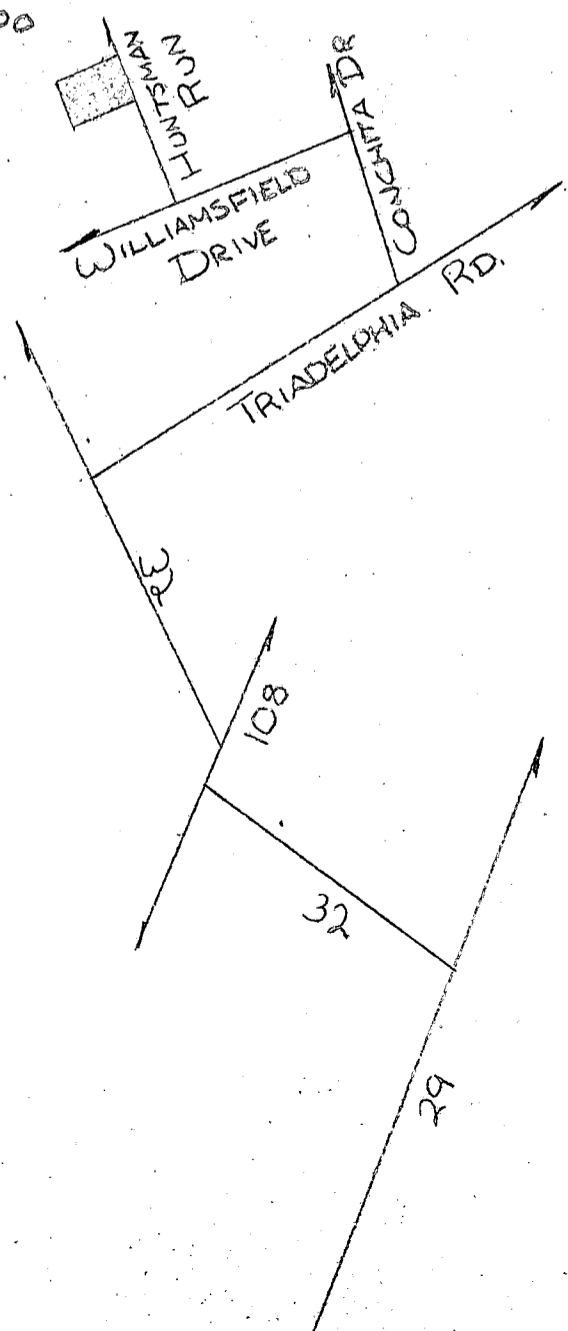
Fred Frommelt, Director
Water and Sewerage Program

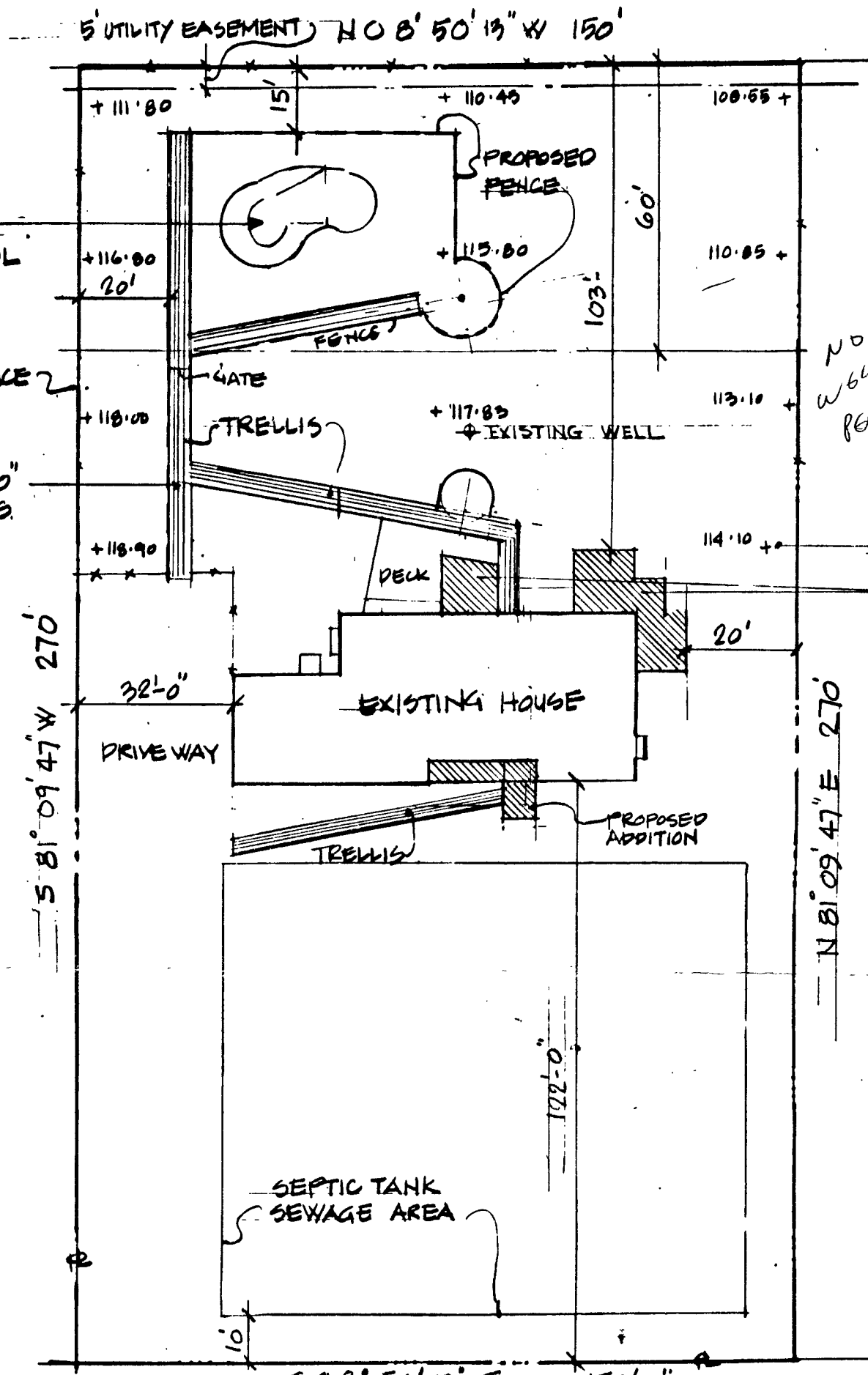
FF:ds

cc: Dr. Stahl



HUNTSMAN RUN





NO IMPACT ON
WELL OR SEPTIC
PER JIM STAYLER
10/1/86
Candler

PROPOSED
IN GROUND POOL

EXISTING FENCE 2

PROPOSED 7'-0"
HIGH TRELLIS

EXISTING 4

PROPOSE
ADDITION

N
SCALE: 1"=30'

3438 HUNTSMAN RUN

PROPERTY KNOWN AS LOT # 18
EAGLES LOFT PLAT # 3370
3RD ELECTION DISTRICT

SITE PLAN - 1"=30"

STAHL RESIDENCE
3138 HUNTSMAN'S RUN
ELICOTT CITY MD

PAREKH ASSOCIATES
1620 THE TERRACES
BALTIMORE MD 21209

Property known as: LOT 18
 EAGLES LOFT PLAT # 3370
 3RD ELECTION DISTRICT
 HOWARD CO. MD.
 # 3438 HUNTSMAN RUN

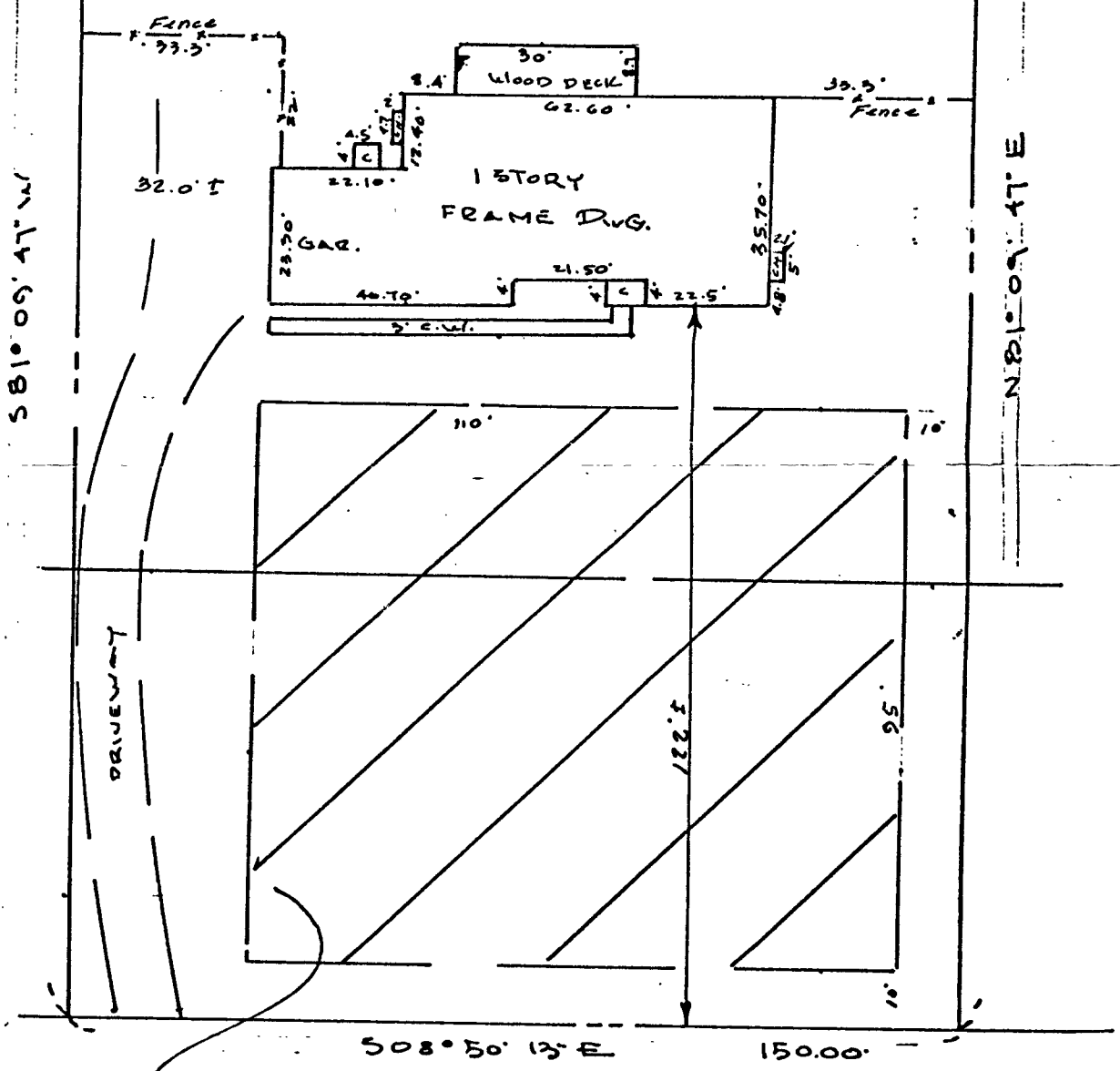
THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

N 08° 50' 13" W 150.00'
 5' UTILITY ESMT

270.00'
 S 81° 09' 47" W

270.00'
 N 81° 09' 47" E

LOT 18
 10,500 sq ft



508° 50' 13" E 150.00'

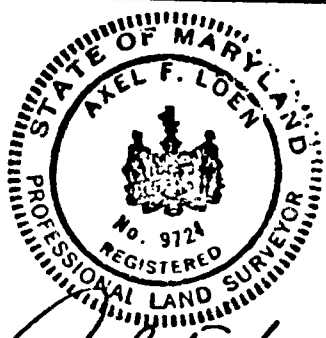
HUNTSMAN RUN
 50' e/w

CERTIFICATION

This is to certify that I have surveyed the property known as:
3438 HUNTSMAN RUN

for the purpose of locating the improvements thereon, and the improvements are located as shown.

SEAL



SCALE: 1"=30' DATE: 11/15/1979

AXEL F. LOEN

PROFESSIONAL LAND SURVEYOR
 730 - 0967
 10754 FAULKNER RIDGE CIRCLE
 COLUMBIA, MD. 21044

Fee Paid W575F6

B 1 3048

SEQUENCE NO. 2-197
(MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO - 94 - 1239

fill in this form completely

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

Date Received (APA)
07/23/97

OWNER INFORMATION RN 7160

Stahl Dr. Alan
Last Name Owner First Name
3438 Huntsman Run
Street or RFD
Ellicott City, Md. 21042
Town State Zip

LOCATION OF WELL
Howard
COUNTY
Eagles Loft
SUBDIVISION
SECTION 44 46 LOT 18 48 50
West Friendship
NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 2

DRILLER INFORMATION
George F. Easterday M VD 040
Driller's Name License No.
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd. MT. Airy, Md. 21774
Address
George F. Easterday 7/22/97
Signature Date

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
3438 Huntsman Run
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD
DISTANCE FROM ROAD 50
ENTER FT OR MI 38 39
TAX MAP: BLK. PARCEL

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
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 APPROVAL)
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard 13-150304 F
COUNTY NAME COUNTY NO.
STATE SIGNATURE
DATE ISSUED 07/23/97
CO SIGNATURE
NORTH GRID 525 000 EAST GRID 0809 000

APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 6 INCH.

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. wells
2. wells
3. wells
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800 9
N 520 5
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
WEST FRIENDSHIP
N HUNTSMAN Run x
WILLIAMSFIELD CONCHITA
TRIDELPHIA RD

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) 41 HO-93-2180

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER 54 G A P 63
FORCE RP WRITE INITIALS IN BOX PERMIT No. HO - 94 - 1239

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

7/22/97
3:30 meet
driller

SITE INSPECTION SHEET

OWNER: Stahl

DATE REQUESTED: 7-22-97

ADDRESS: 3438 Huntsman Run

DRILLER: Easterday

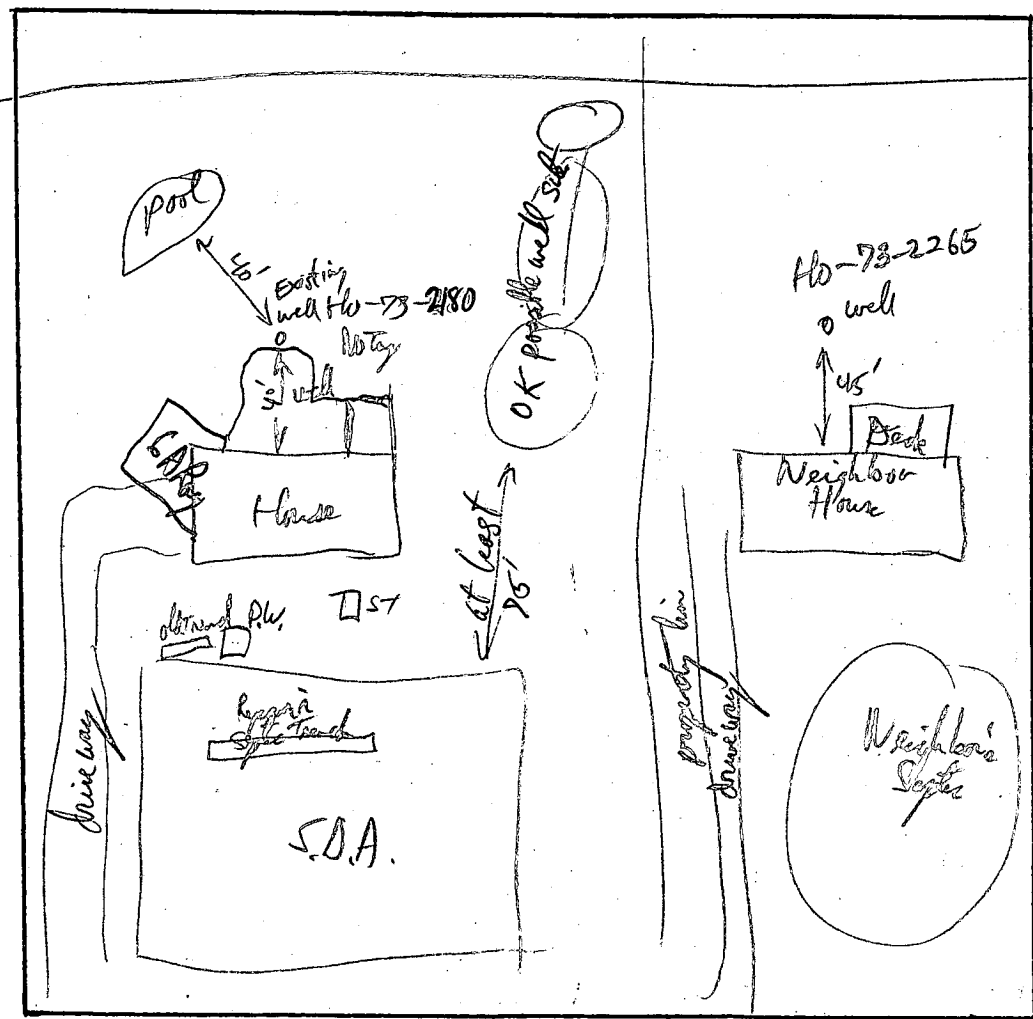
WELL TAG # _____

COUNTY # P 50304F (Reno)

PROPOSAL: Replacement Well

LOCATION DIAGRAM

Neighbors
House



COMMENTS: new well site on right rear of lot at least 30ft from house and at least 75 ft from septic area should be acceptable -

DATE: 7/22/97

INSPECTOR: [Signature]

3438 Huntsmans Run
Ellicott City, MD 21042

July 23, 1997

Howard County Health Department
Attn: Ronald Pinkney
3525 Ellicott Mills Drive, Suite H
Ellicott City, MD 21043

Dear Mr. Pinkney:

I appreciate your prompt response to meet with Easterday Well and Pump, Inc. and me on July 22, 1997 regarding our failing well. According to Howard County requirements and your kind advice, I am providing you with the following:

1. Enclosed is my check for \$80.00 payable to the Howard Co. Health Dept. for drilling my new well in the near future.
2. I also request that you allow me to retain my old well for "backup" in the future.

If you need any additional action from me, please let me know at your earliest convenience.

Thank you again for your help.

Sincerely,

Alan G. Stahl

cc: Easterday Well and Pump, Inc.
9265 Brown Church Rd.
Mt. Airy, MD 21771



HOWARD COUNTY HEALTH DEPARTMENT

DATE 7/25/97

203-8586

Received From ALAN G. STAHL
3438 HUNTSMANS RUN, ELICOTT CITY, MD 21042
 For Well Permit Application - Replacement
3438 HUNTSMANS RUN
 CASH
 CHECK
 NO. 379
Eighty and 00/100 Dollars
 \$ 80 10
 Received By Il Jane Turner