

7/17/95 any

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50790A  
A 21580  
A REPAIR

DISTRICT 5th

DATE 7/29/95

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH  
~~XXXXXXXXXX~~ 313-2640

### INDEXED

FROM DRIVEWAY-IN-COMMON,  
IS 2ND INDIV. DRIVEWAY  
ON L6 FT.

DATE SYSTEM APPROVED 7/17/95

INSPECTOR [Signature]

Jack Fyock Septic Service IS PERMITTED TO INSTALL  ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Fox Haven LOT 2 ROAD 13993 Clarksville Pike

PROPERTY OWNER Thomas

ADDRESS 13993 Clarksville Pike  
Highland, Maryland 20777

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

125 SQUARE FEET PER BEDROOM

53 1/2  
7/375  
35  
25

LINEAR FEET OF TRENCH REQUIRED 54

REPAIR - PURPOSE - Septic system has failed.

Call for inspection when ground is opened so sanitarian can recommend repair. 06/01/95

Install one 54 or longer Trench, 2' wide, 11 ft deep, in lot 3 ft, 7' stone fill.  
Connect to existing dry well. RFD 7/17/95

PLANS APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

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

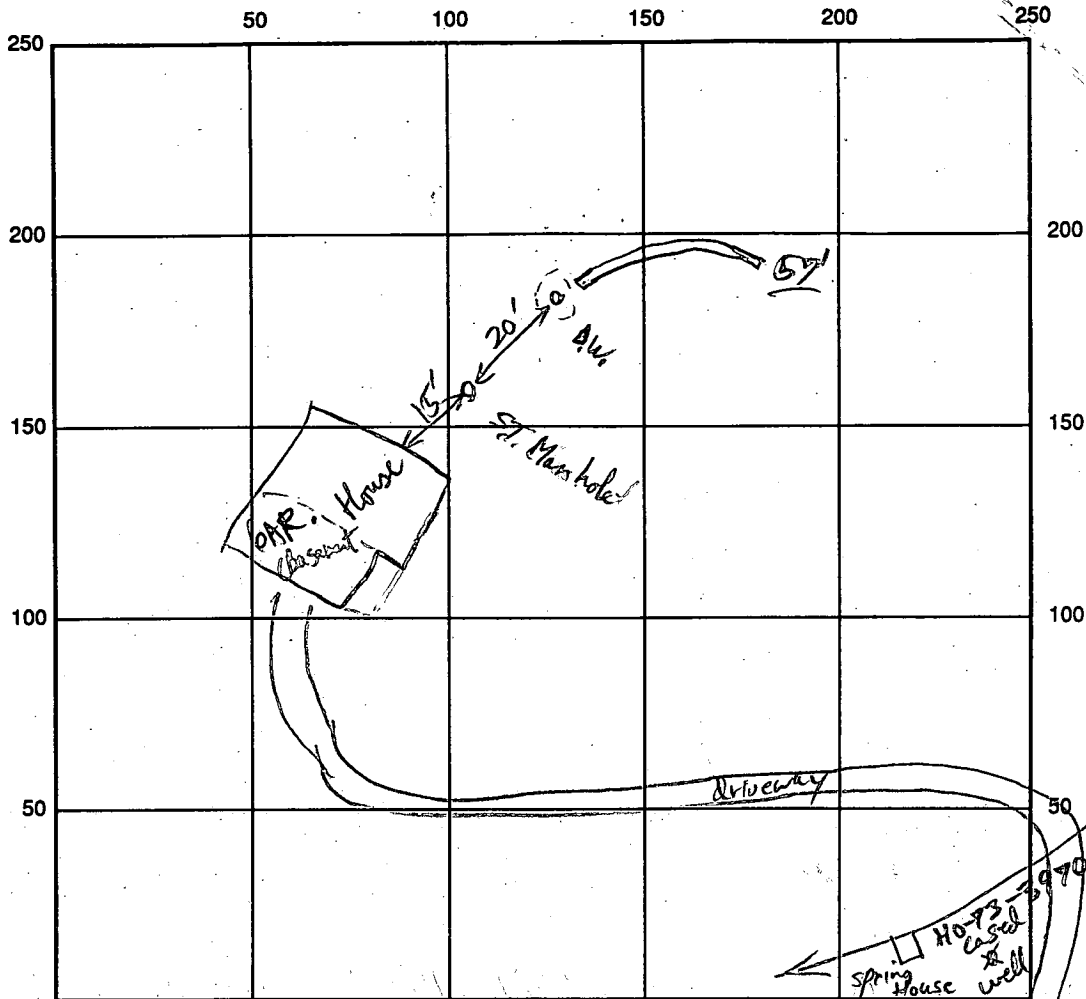
PERMIT VOID AFTER TWO YEARS

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 50790A



← To Rt 108 private paved road INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL existing CLEANOUTS ST. Manhole + D  
 DISTRIBUTION BOX LEVEL NA  
 DRAIN FIELD/TITLE DEPTH 11 FT. TRENCH WIDTH 2' FT. INLET DEPTH 3 FT.  
 EFFECTIVE GRAVEL DEPTH 7 FT. TOTAL LENGTH 57 FT.  
 NUMBER OF TRENCHES one ONE SIDEWALL/BOTTOM AREA 400<sup>±</sup> SQ. FT.  
 DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.  
 ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: Trench begins 3' from D.W. Cleanout - 15 K to Area App 7/17/95

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DATE SYSTEM APPROVED 7/17/95 INSPECTOR APRIL BLAG

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

## INDEXED

DISTRICT 5th

DATE 9/75

P 22145  
A 21580

*10/8/75*  
*Ready*

*file down*  
*108-75*

Edwin G. Willson (*Floyd*)

IS PERMITTED TO INSTALL  ALTER

ADDRESS Ashton, Maryland 20702

PHONE 774-9698

A SEWAGE DISPOSAL SYSTEM LOCATED AT \_\_\_\_\_

SUBDIVISION (Fox Haven)

ROAD Clarksville Pike (Route 108) LOT 2

PROPERTY OWNER Edwin G. Willson

ADDRESS Ashton, Maryland 20702

SPECIFICATIONS 3 bedrooms

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

SEPTIC TANK CAPACITY 1000 ~~1250~~ GALLONS

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

OTHER DRY WELL - To have 120 sq. ft. effective sidewall absorption area per bedroom to begin below the first 4 ft. of non-porous soil. Maximum depth permitted for dry well is 12 ft. below original grade. Place the dry well 75 ft. from the rear lot line and 300 ft. from the left side line, as seen when facing the property from the unnamed right-of-way.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

PLANS APPROVED BY Frank Skinner

DATE 7/16/75

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.

A 21580

RECORDED  
Liber 713

Folio 363

# APPLICATION

A 21580

P \_\_\_\_\_

## SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356

DATE 6/2/75

*3 B.R. 1000 gal. septic tank | 4 B.R. 1250 gal. septic tank*  
A drywell to have 120 sq. ft. effective sidewall absorption area per bedroom, to begin below the first 4 ft. of non-porous soil. Maximum depth permitted for drywell is 12 ft. below original grade. Place the drywell 75 ft. from the rear lot line and 300 ft. from the left side line, as seen when facing the property from the unnamed right of way.

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 Edwin G. Willson

ADDRESS Ashton, Md. 20702 PHONE 774-9698

PROPERTY LOCATION: Highland, Md.

SUBDIVISION (Fox Haven) LOT NO. 2

ROAD AND DESCRIPTION Off E. Side of Rt 108 on first private road approximately 400' N. of Patuxent River

SIZE OF LOT Parcel 2, 5.015 ac. 713/363 TYPE BLDG. res. - 4 bedrms  
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 Richard Hallowell  
Richard Hallowell -286-2988

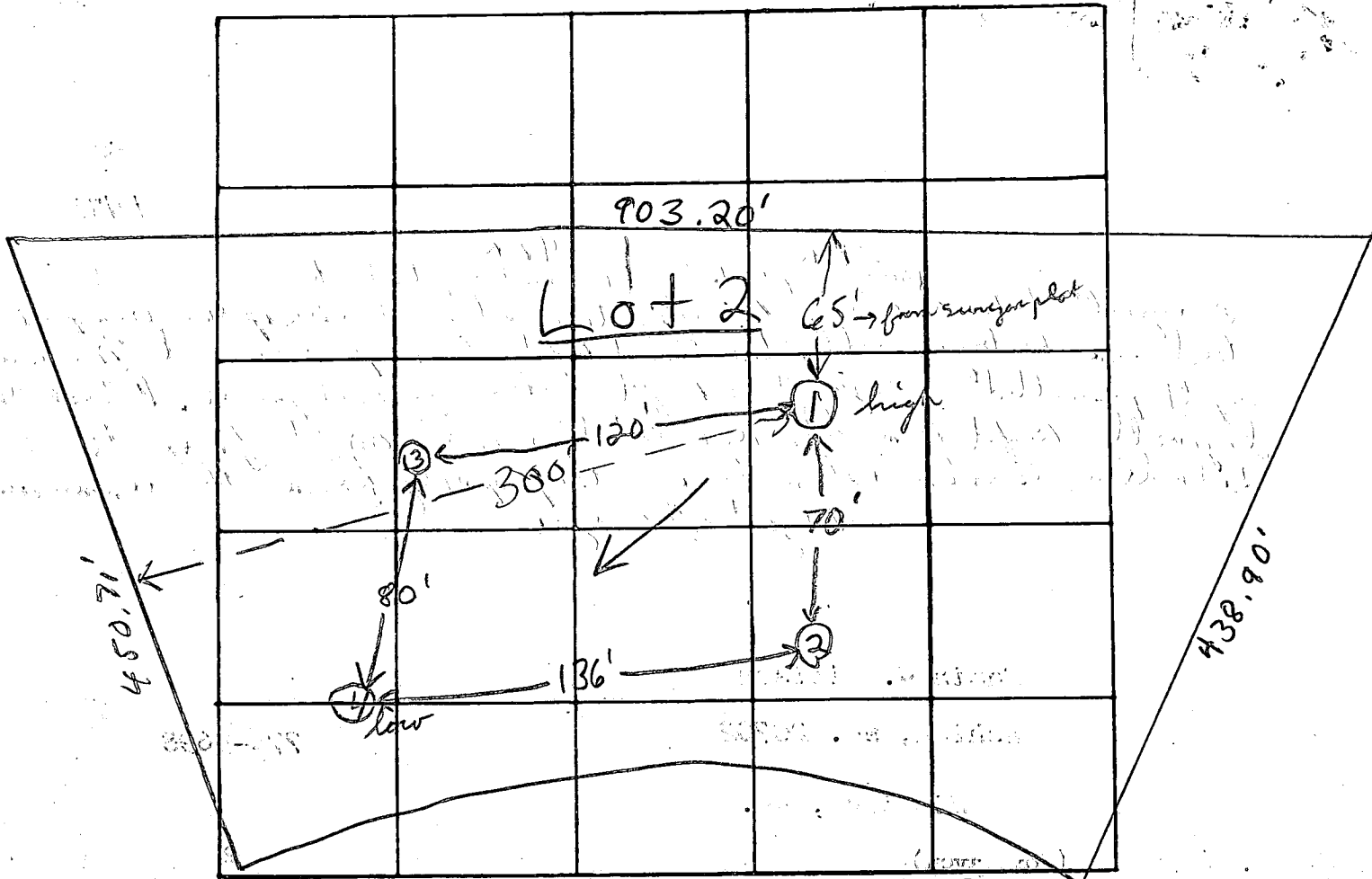
APPROVED BY Frank Skinner FOR drywell DATE 7/16/75  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 6/16/75 Hold for certified copies F.S. O.R. F.S.  
BLDG. PERMIT SIGNED 7/14/75  
AND RETURNED

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

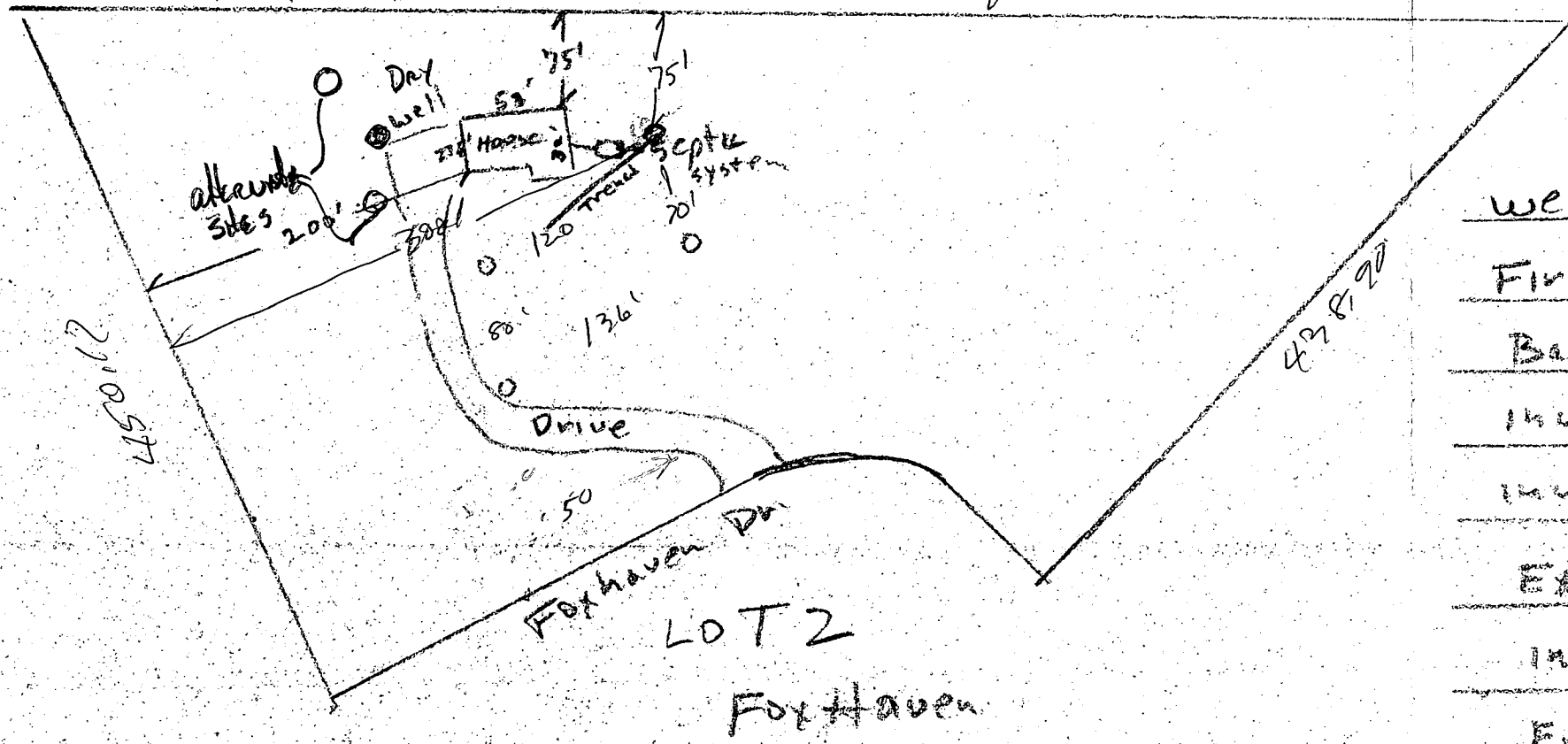
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/5/78	1 high	4 1/2'	2 31'	2 30'	2 36'	2 44'	8 min
	1 A	12'	2 31'	—	—	2 38'	7 min
	2	12'	Visual	top 2' close	min	loam below	
	3	5'	2 29'	2 30'	2 30'	2 32'	2 min
	3 A	11 1/2'	2 29'	2 34'	2 34'	2 41'	7 min
	4 low	6'	2 27'	2 29'	2 29'	2 31'	2 min
	4 A	13 1/2'	2 27'	2 34'	2 34'	2 48'	14 min

7 min arg  
inlet  
120 ft/B.R.

REMARKS Certify all holes - wooded lot Good soil start at 3' in (3) & (4)  
 TYPE OF SOIL silt loam loam below top 2' → 5' clayey soil  
 TESTED BY F.S. & R.T. ALSO PRESENT: F. v. de S.

7/9/75 Sketch O.K. F.S.

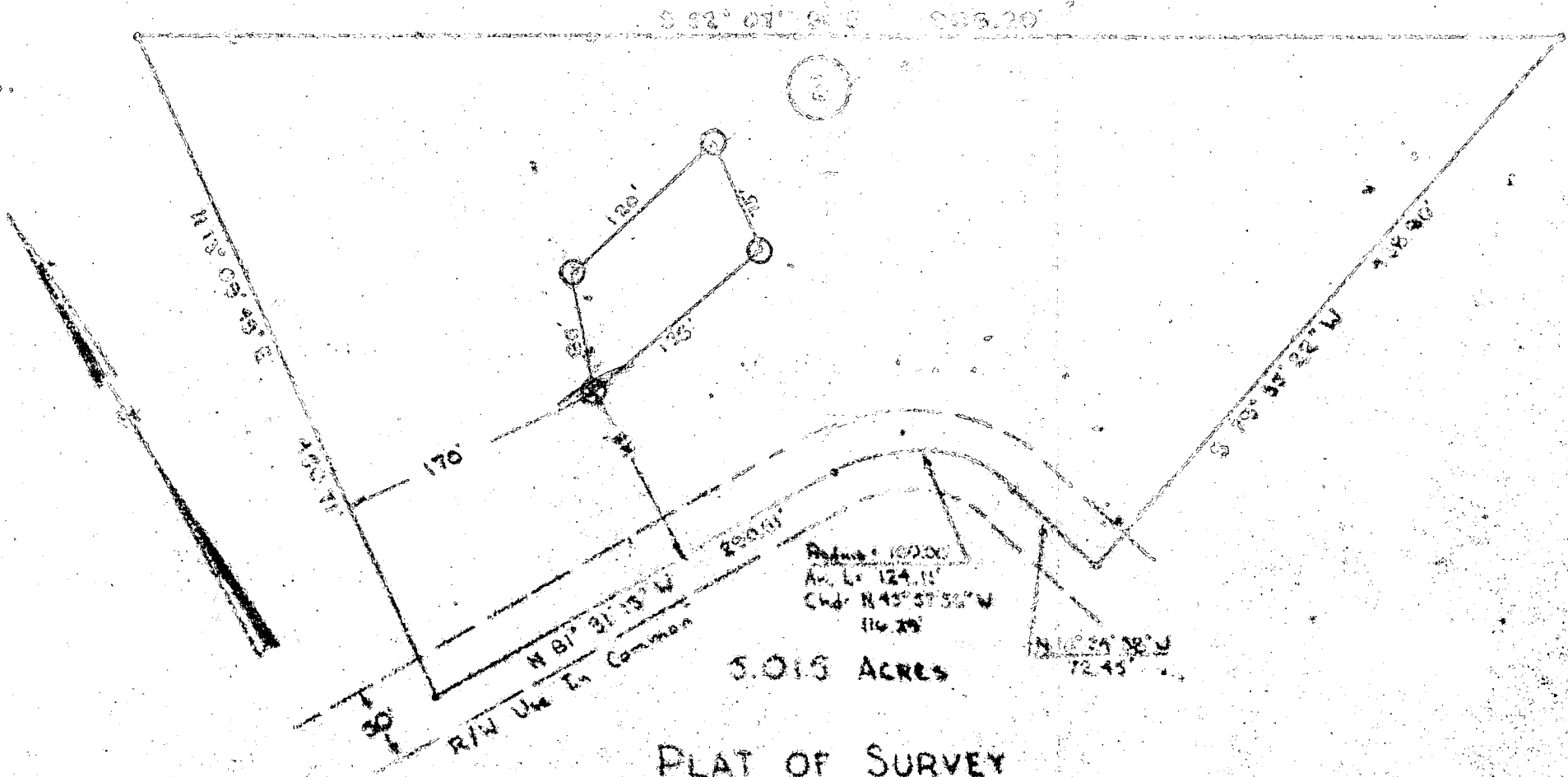
903 20



Well ELEV	503'
First FL	500'
Base Level	492'
Inv House	491'
Inv Tank	490'
East Tank	493'
Inv PIT	489'
East PIT	492'
Elev at Test	491'

13993 Charksville Rd  
 # 108 Highland Ind

I certify the above measurements and elevations are actual  
 + correct for this property  
 John D. Pullman  
 774 96.98



PLAT OF SURVEY  
 OF  
 LOT 2, FOX HAVEN  
 FIFTH ELECTION DIST., HOWARD CO.  
 HIGHLAND, MARYLAND  
 SCALE 1 IN = 100 FT. FEB. 7, 1975

See also field notes of completion test.  
 Note: The lot shown herein complies with the  
 minimum acreage and lot area as required  
 by the Maryland State Health Department.  
 Approved: [Signature] Water & Forest Service

[Signature] 6/9/75  
 Howard County Health Officer



[Signature]  
 1908-2

FS  
Foxhaver lot 2

2 Dry holes. DSO, PFW

✓ Myself stayed well

below septic area

by old spring, provided

good samples are obtained.

only other alternatives

clear land above 2 Dry

holes or beyond septic

and trying to get rig

in there

3K 10/15/81

B 1 **8190** SEQUENCE NO. WBA USE ONLY  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
please print or type

WRA PERMIT NUMBER  
**40-73-3970**  
fill in this form completely

DATE RECEIVED **7/27/81**  
**10/16/81**  
**3/5/82**  
8 (WRA USE ONLY.) 13  
OWNER INFORMATION  
**Wilson Ed**  
LAST NAME OWNER FIRST NAME  
**Box 32**  
STREET OR RFD  
**Oshton Md.**  
TOWN STATE ZIP

B 3 LOCATION OF WELL  
COUNTY **Howard**  
SUBDIVISION **Fop Haven**  
SECTION **46** LOT **2**  
NEAREST TOWN **Highland**  
MILES FROM TOWN (enter 0 if in town) **1** MI

B 1 CONTINUED DRILLER INFORMATION  
**George F. Pender**  
DRILLER'S NAME 40  
7/24/81  
SIGNATURE DATE

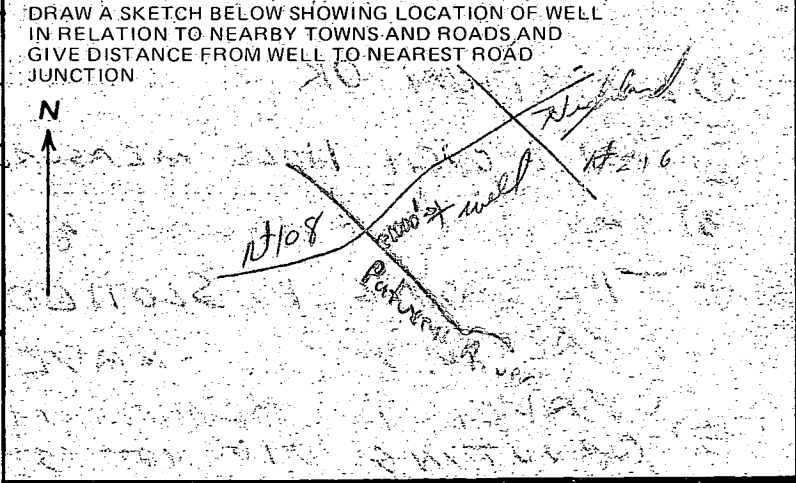
B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
NEAR WHAT ROAD **Rt 108**  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST EAST SOUTH  
**700**  
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) FT MI

B 2 WELL INFORMATION  
APPROX. PUMPING RATE (GAL. PER MIN.) **2**  
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)

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX  
**10/29/81 WELL OK**  
**SEE OTHER SIDE RD**  
**& ATTACHED LETTER**  
WRITE THE BOX NUMBER FROM THE MAP HERE  
E **800 8**  
N **480 4**

APPROXIMATE DEPTH OF WELL **150** FEET  
APPROXIMATE DIAMETER OF WELL **6** INCH  
Method of Drilling (circle one)  
 BORED (OR AUGERED)  JETTED  JETTED & DRIVEN  
 AIR ROTARY  AIR PERCUSSION  ROTARY (HYDRAULIC)  
 CABLE  REVERSE ROTARY  DRIVE POINT  
other

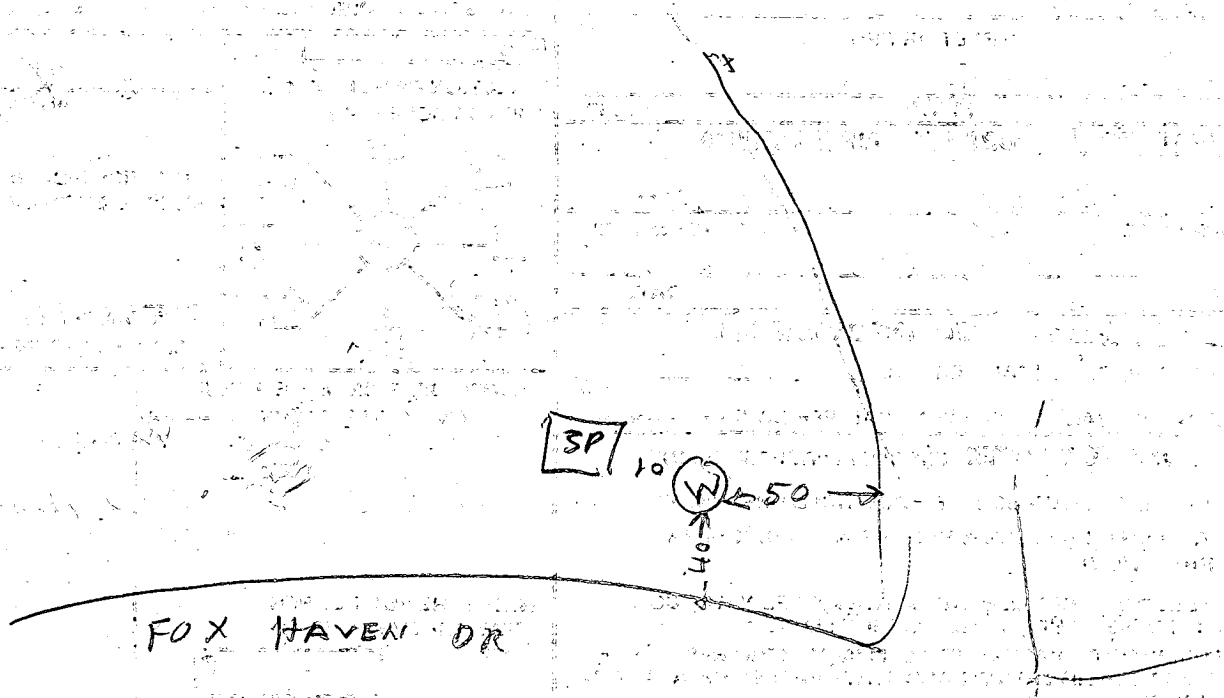


REPLACEMENT OR DEEPEMED WELLS (Circle Appropriate Box)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPEMED AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
**HOWARD** COUNTY NAME **A21580** COUNTY NO  
EHA SIGNATURE **Frank Skinnier** STATE HEALTH CIRCLE BOX **5**  
MO DAY YR **8/03/81** CO. SIGNATURE DATE  
NORTH **484** EAST **0808** ELEV. (FT.)  
GRID 50 55 GRID 57 63 65 68

Not to be filled in by driller (WRA USE ONLY)  
APPROP. PERMIT NUMBER **GAP**  
WRITE INITIALS IN BOX **HS** FORCE CONDITIONS **40-73-3970**

B 5 SPECIAL CONDITIONS (WRA USE ONLY)



10/16/81 on 325

- ① LOCATION OK
- ② 10 FT OPEN HOLE MEASURED WITH A STRING
- ③ 25 FT CASING & 2 FT OUT OF GROUND
- ④ THE CASING IS SLOTTED NEAR BOTTOM & PACKED WITH GRAVEL & ON TOP OF GRAVEL IS BENTONITE CLAY
- ⑤ GROUTING DID NOT START TILL 430 GROUTER TO KEEP RECORD OF BAGS & CALL OFFICE

22 OCT 81

LETTER WRITTEN EXPLAINING HOW WELL CONSTRUCTED. THIS IS A DEVIATION FROM WELL STANDARDS TYPE OF WELL SEE ATTACHED LETTER



# L. F. EASTERDAY, INC.

WELL DRILLING - TRENCHING - PUMPS & SERVICE

9265 Brown Church Rd., Mt. Airy, Maryland 21771

PHONE 829-1640

October 19, 1981

Howard County Health Department  
Bureau of Environmental Health  
3716 Court Place  
Ellicott City, Maryland 21043

Attention: Frank Skinner

Subject: Deviation from well standards for HO-73-3970, located in  
Fox Haven Lot 2; Owner, Ed Wilson

Gentlemen:

The well drilled for Ed Wilson in Fox Haven Lot 2 has been completed. Because of the difficulty to find water on the property (3 dry holes) and a very limited moving area, we find it impossible to comply with the established regulations for well construction in the Piedmont area (rock drilling).

We are requesting a deviation for this particular well, Reference, Subtitle 17 "Sanitation" 10.17.3 "Well Construction", .07 "Construction Standards", D. "Well Casing", (3) "Minimum Casing Length", (b). The well was drilled to a depth of 160 feet, has 4 GPM, and contains 27 feet of steel casing. It has gravel from the bottom of the casing to 12 feet, bentonite 12 to 11 feet and cement 11 to 0 feet, with 14 bags of cement in 11 feet open hole. Also, under E. "Well Screens", (4), in order to let the only water hit at 14 feet be available for use, the casing had to be slotted because the 10 inch hole had already been drilled.

The owners are very much aware of the situation and are willing to try the well. Should you have any further questions, or need more information, please contact our office. We will await your reply to this matter.

Very truly yours,

George F. Easterday  
Vice President

GFE/ob

cc: Ray Ludlow, w/Completion Report  
Ed Wilson

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.  
ELLCOTT CITY, MD.  
OCT 22 11 02 AM '81

C1 8146 SEQUENCE NO. (WRA USE-ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

Date Received (WRA use only) 10/16/01 DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT) 20

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-73-3970

OWNER Wilson Ed last name first name STREET OR RFD Md. Rte 108 TOWN Highland SUBDIVISION Fox Haven SECTION LOT 2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for topsoil, brown shale, mica, etc.

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 14 NO. OF POUNDS 1400

CASING RECORD table with columns: casing types, Nominal diameter, Total depth. Includes entries for ST (Steel) and 6 inch diameter.

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

SCREEN RECORD table with columns: screen type, SLOT SIZE, DIAMETER OF SCREEN. Includes entry for HO (Open Hole) and 25 inch slot size.

CIRCLE APPROPRIATE BOX [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"...

DRILLERS IDENT. NO. 40 DRILLERS SIGNATURE Robert X. Hubbard SITE SUPERVISOR

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F)

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST table with columns: HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED. Includes entry for 2.25 hours and BUCKET method.

PUMP INSTALLED YES (Y) NO (N) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE)

