

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~

313-2640

03-302660
INDEXED

P 50901

A REPAIR

DISTRICT _____

DATE 9-28-95

DATE SYSTEM APPROVED 9/29/95

INSPECTOR M. Ritkin

Jack Fyock Septic Service IS PERMITTED TO INSTALL _____ ALTER X

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

SUBDIVISION Henryton Heights LOT 12, Sect. 1 ROAD 1715 Henryton Road

PROPERTY OWNER Culler

ADDRESS _____

SEPTIC TANK CAPACITY — GALLONS

NUMBER OF BEDROOMS 3

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 50'

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair.

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

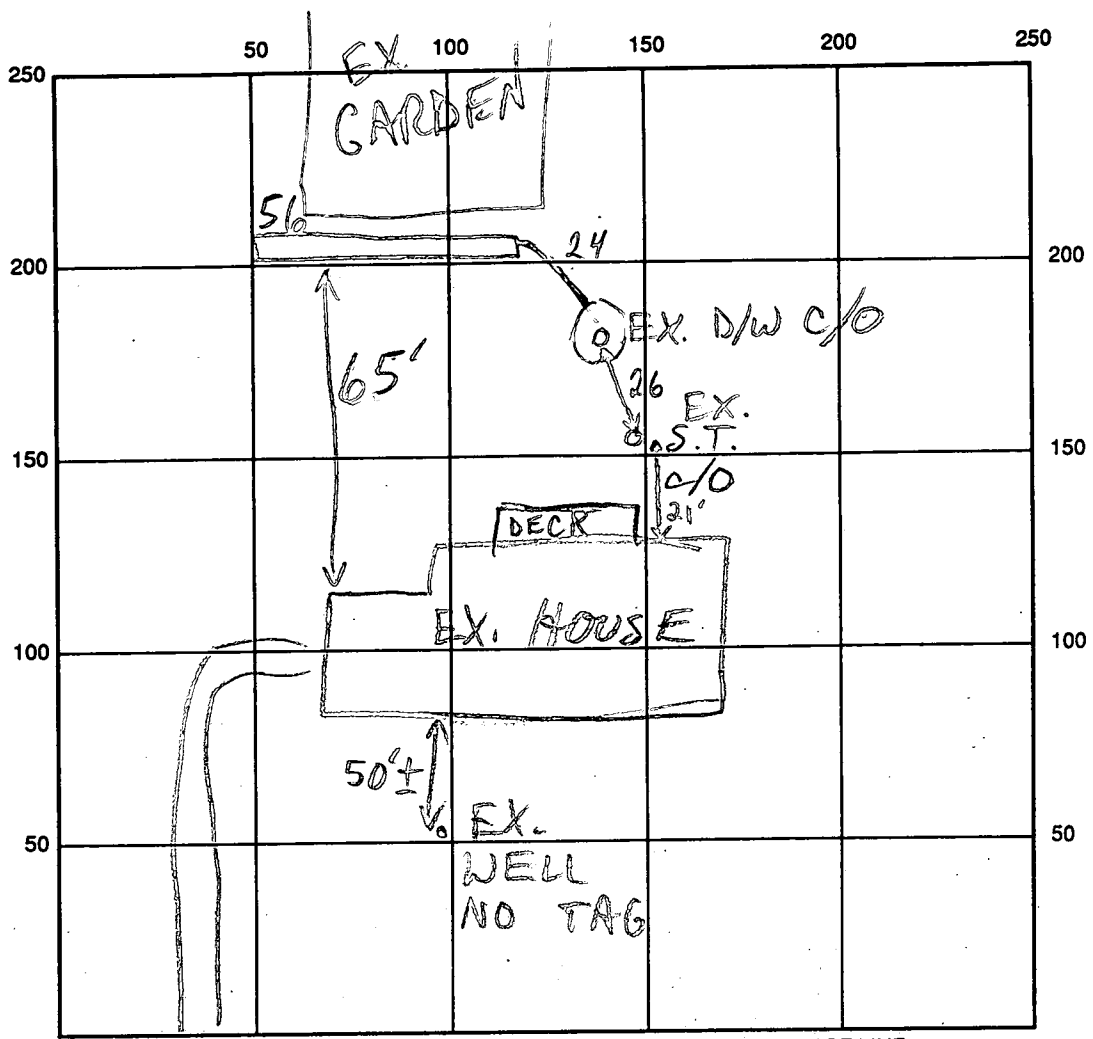
PERMIT VOID AFTER TWO YEARS

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 50901



HENRYTON RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000 GAL EX-OK CLEANOUTS EX. S.T. + D/W - OK

DISTRIBUTION BOX LEVEL

DRAIN FIELD/TITLE DEPTH 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 8 FT. TOTAL LENGTH 516 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 448 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 448 SQ. FT.

REMARKS: 9/29/95 OK TO FINISH & COVER MR

DATE SYSTEM APPROVED 9/29/95 INSPECTOR M. Rifkin

10/25/76

~~10/19/76~~ ~~incomplete~~

PERMIT INDEXED

P 23950

A 19297

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

DATE 9/22/76

STOP WORK
10/15/76

WRIGHT CONST CO.
Glenn Curry

IS PERMITTED TO INSTALL ALTER

ADDRESS 1554 Henryton Rd., Marriottsville, Md. 21104 PHONE 328-2861

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Henryton Heights ROAD ~~unamed Road-Off~~ 1715 Henryton Rd. LOT 12, Sect. 1

PROPERTY OWNER Glenn Curry

ADDRESS ~~1554~~ 1715 Henryton Rd., Marriottsville, Md. 21104

SPECIFICATIONS 3 Bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

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

OTHER DRY WELL- 360 sq. ft. sidewall area below inlet. Drywell inlet to be 4 ft. below original grade and bottom of drywell to be 11 ft. deep below original grade. Place the drywell 125 ft. from the front lot line and 20 ft. from the right side of the lot as seen when facing the lot from Henryton Rd. ~~It~~ also suitable for trenches.

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

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STANK 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 Raymond Hodges DATE 12/1/75

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 19297

$$\begin{array}{r} 3 \\ 46 \\ \hline 276 \end{array}$$

$$\begin{array}{r} 4 \\ 43 \\ \hline 368 \end{array}$$

$$\begin{array}{r} 22 \\ 24 \\ \hline 46 \end{array}$$



27
 99

PERMIT CARD _____
 SEPTIC TANK, LEVEL OK 10'0 CLEANOUTS OK | DW blocked
 DISTRIBUTION BOX, LEVEL top 2 ft below grade OK 10/19/76
 TILE FIELD, DEPTH 13 FT. TRENCH WIDTH 2 FT.
 GRAVEL DEPTH _____ IN. TOTAL LENGTH 12 FT.
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA _____
 SEEPAGE PITS, INSIDE DIAMETER 46 FT. DEPTH BELOW INLET 11 FT.
 ABSORBENT AREA 406 SQ. FT. TOTAL BUT ONLY 268 IS AT PROPER LEVEL

REMARKS 10/15/76 - stop work order - cleanout on DW blocked unable to measure depth however there is no way this DW will provide nearest Area STOP work ordered 10/15/76 HB

10/19/76 DW with 3 ft deep Ditch added. Cover Tank & DW. Put Stone in ditch & Call for Reinspection
 DATE SYSTEM APPROVED 10 25 76 INSPECTOR R. Buss

To Mr. Hodges

Date 9/30 Time 3:30

WHILE YOU WERE OUT

M Wright Coats Co.

of _____

Phone 795-2385

Area Code Number Extension

TELEPHONED	<input checked="" type="checkbox"/>	PLEASE CALL	<input checked="" type="checkbox"/>
CALLED TO SEE YOU	<input type="checkbox"/>	WILL CALL AGAIN	<input type="checkbox"/>
WANTS TO SEE YOU	<input type="checkbox"/>	URGENT	<input type="checkbox"/>

RETURNED YOUR CALL

Message _____

Please Call
today
S.C. Please
call

Operator

9/30/76

Preliminary

APPLICATION

A 19297

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

3BR - 1000 Gal

DISTRICT

3rd

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

4BR - 1250 Gal

DATE

11/14/73

DRY WELL - 360 SQ FT SIDEWALL AREA BELOW MEET 3BR
480 SQ FT SIDEWALL AREA 11' 114BR

DRY WELL INLET TO BE 4 FT BELOW
ORIGINAL GRADE AND BOTTOM MOOR
DRY WELL TO BE 17 FT DEEP
BELOW ORIGINAL GRADE

PLACE THE DRY WELL 125 FT FROM
TO: THE COUNTY HEALTH OFFICER THE FRONT LOT LINE
ELLICOTT CITY, MARYLAND AND 20 FT FROM THE RIGHT

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE
DISPOSAL SYSTEM. SIDE OF THE LOT AS SEEN
WHEN FACING THE LOT

PROPERTY OWNER E. L. Ramsburg and wife
FROM HENRYTON ROAD
ADDRESS 185 Henryton Road, Marriottsville, Md. Any questions call Purdum and
PHONE Jesckne, 465-1635

PROPERTY LOCATION: LOT ALSO SUITABLE
FOR TRAILERS New 12
SUBDIVISION Henryton Heights LOT NO. B, Sect. 1

ROAD AND DESCRIPTION Unnamed road off Henryton Road

SIZE OF LOT 40,000 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/ E. L. Ramsburg

APPROVED BY Raymond Hodges FOR Drywell DATE 12/1/75
(KIND OF SYSTEM)

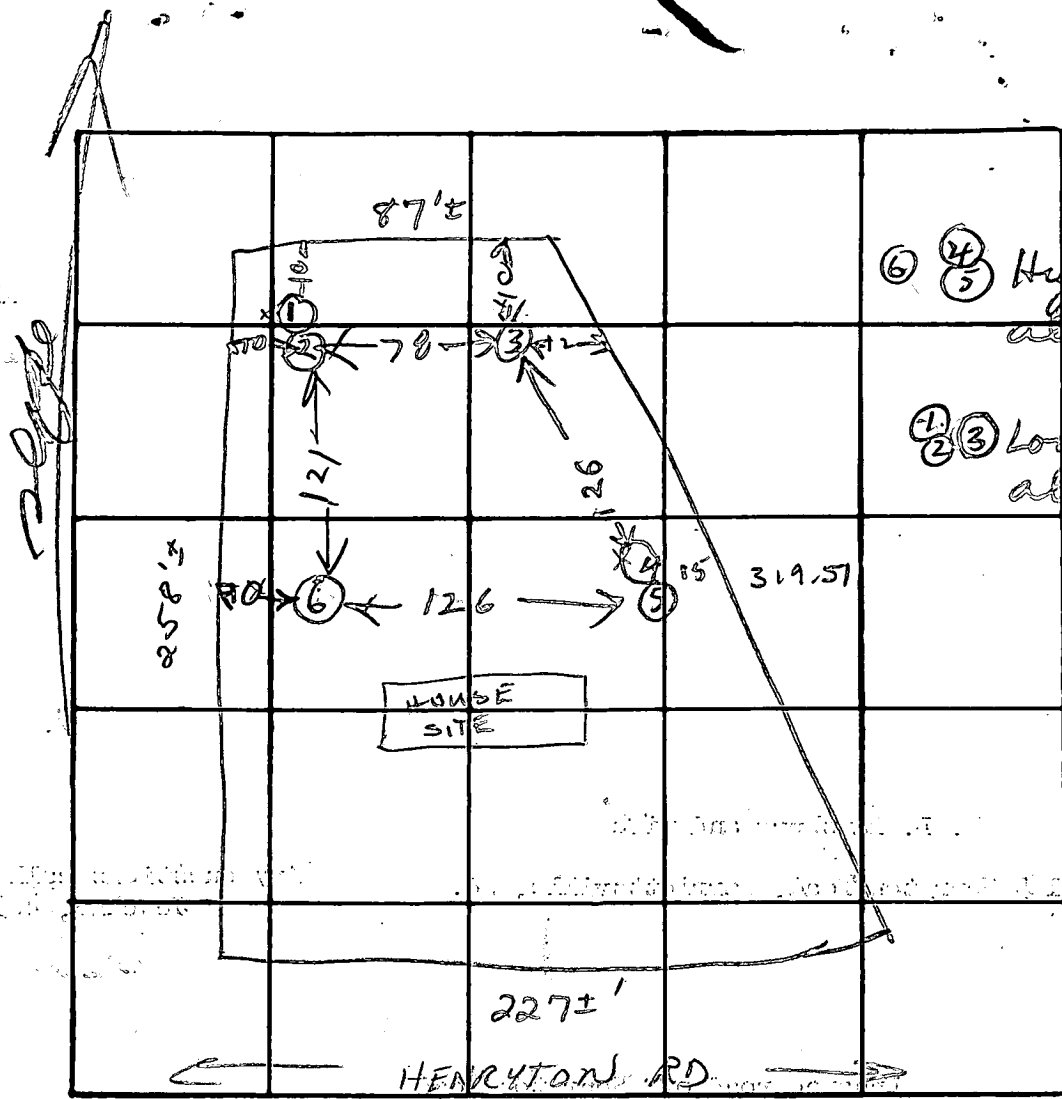
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 5/1/76

THIS IS NOT A PERMIT



258
130
120
④⑤ Highest pair
about same level
①②③ Lowest pair
about same level
Lot # 13

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/6/73	1	3 1/2	1016	1019	1019	1026	7
11/6/73	2	11 1/2	1017	1018	1018	1019	1
	3	11 1/2	TOP 5' 1/2 FT CLAY	6 FT		DRY	
	4	4 1/2	1028	1029	1029	1032	3
	5	11	1028	1030	1030	1034	4
11/6/73	6	11 1/2	TOP 3 FT CLAY	8 1/2 FT SAND		DRY	

air time
4 Min
max Depth
4 FT. inlet

REMARKS 130 368 268 406 46 14
TYPE OF SOIL 8 5 406 138 184 138

APPLICATION

A 19297

SEWAGE DISPOSAL TESTING

P _____

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 11/14/73

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 E. L. Ramsburg and wife

ADDRESS 185 Henryton Road, Marriottsville, Md. Any questions call Purdum and
PHONE Jasckhe, 465-1635

PROPERTY LOCATION:

SUBDIVISION Henryton Heights LOT NO. #13, Sect. 1

ROAD AND DESCRIPTION Unnamed road off Henryton Road

SIZE OF LOT 40,000 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/ E. L. Ramsburg

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

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

HOLD PENDING FURTHER TESTS NA DATE 11/6/73

REASONS FOR REJECTION OR HOLDING 11/6/73 Perc OK Hold for Final

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	

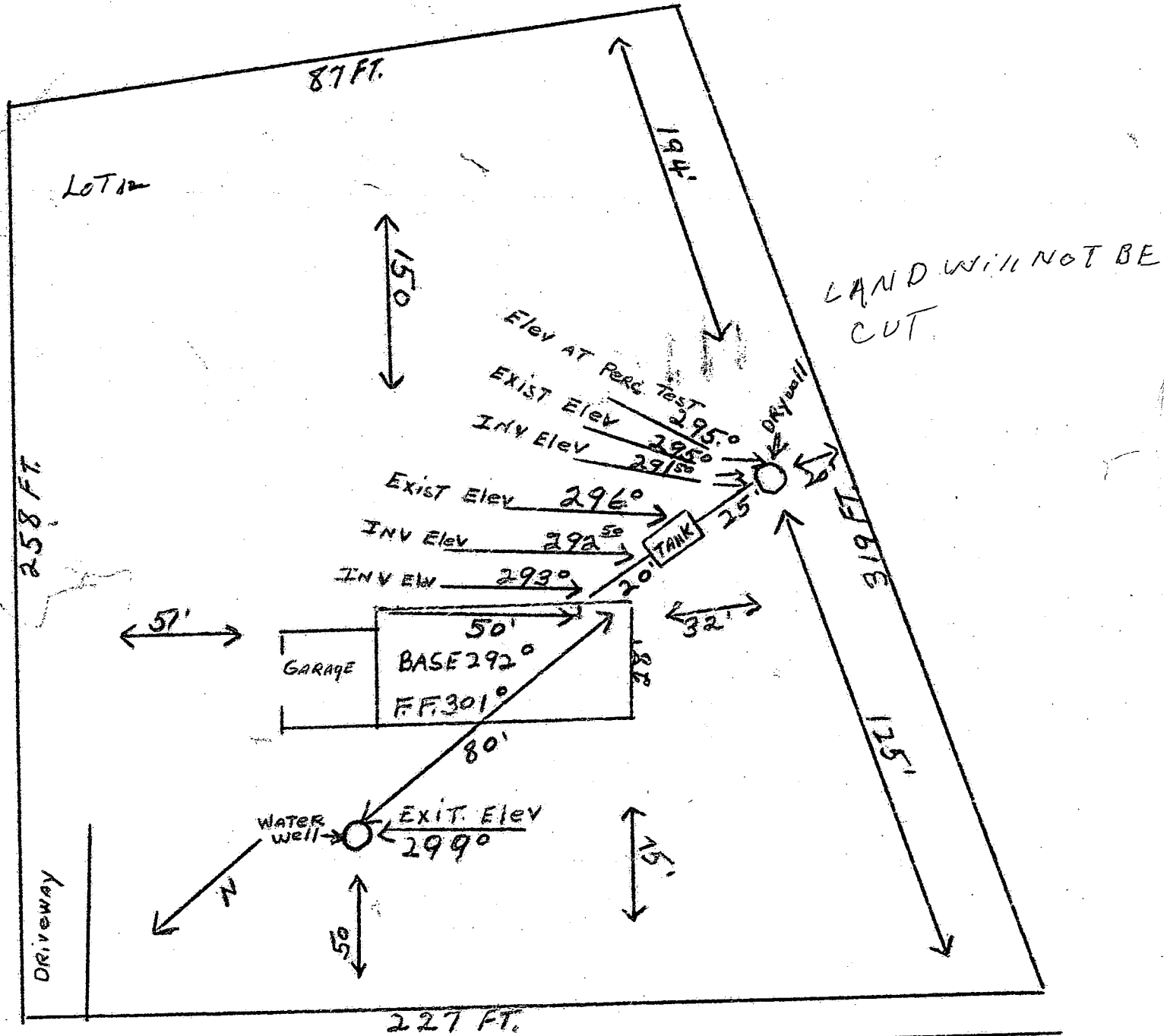
REMARKS _____

TYPE OF SOIL _____

Phone - 328-2861

HENRYTON HEIGHTS.

PROPERTY Glenn W. CURRY
SECTION ONE
3RD ELECTION DIST
HOWARD COUNTY

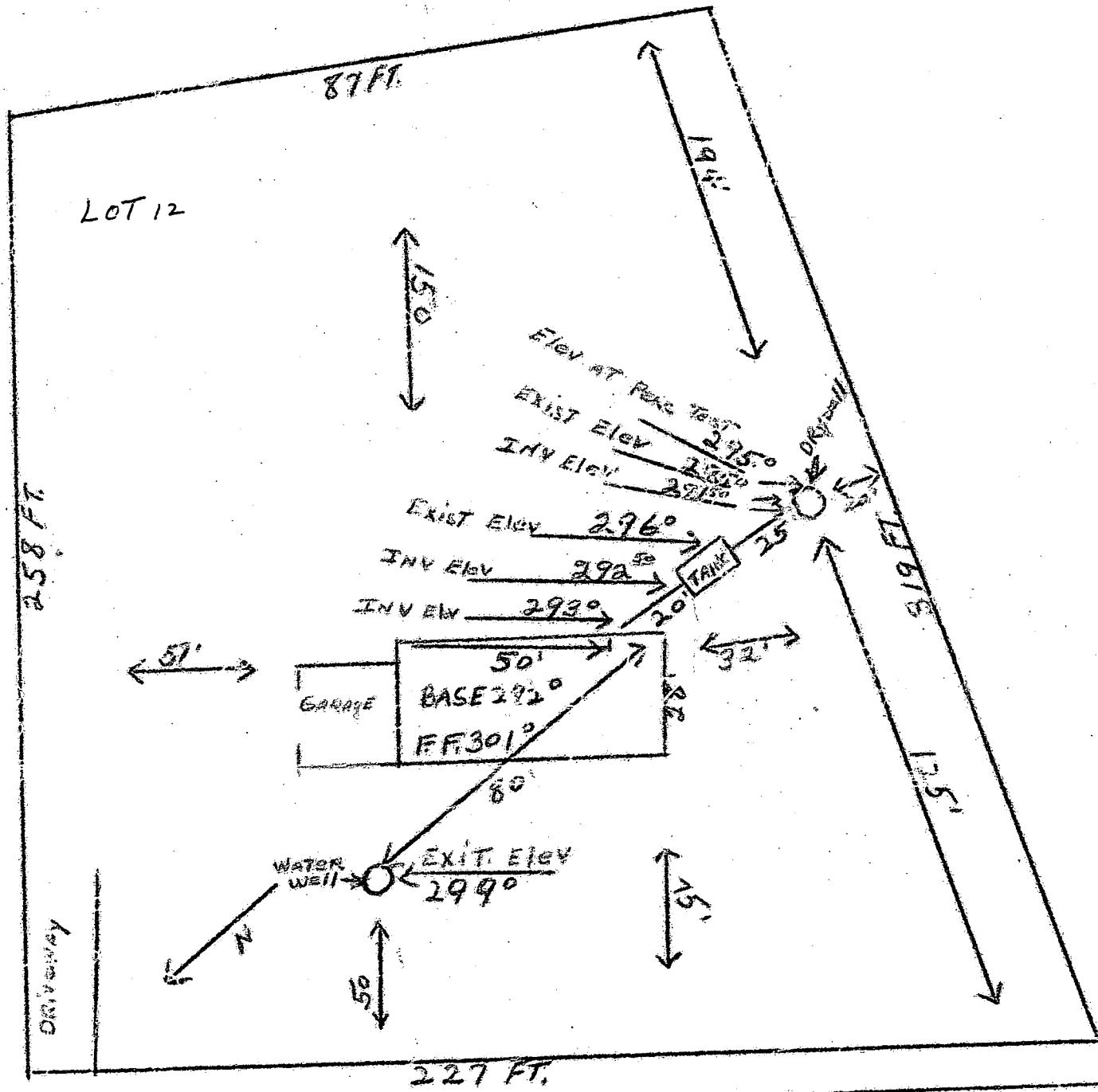


HENRYTON RD.

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL AND CORRECT FOR THIS PROPERTY

2/27/76 signed Glenn W. Curry
Reviewed Septer Plans OK R/H
C. S. W.

Property Glenn W. Curry
Section 002
3rd ELECTION DIST
HOWARD COUNTY



HENRYTON RD.

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL AND CORRECT FOR THIS PROPERTY

signed Glenn W. Curry
2/27/76 Revised Septic Plan OK

BH

B 1 6210

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

40-73-1625

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) 11/9/76 9:30 A.M.

OWNER: Curry Glen COL 15 LAST NAME COL 34 FIRST NAME COL 36 STREET OR RFD: 1554 Heryton RD. COL 36 COL 55 POST OFFICE: Marriottsville MD. 21104 COL 57 COL 76

B 1 CONTINUED DRILLER INFORMATION 1 2 3 (SEQ. NO.) 6 DATE: 9/13/76 LICENSE NUMBER: 251 77 80 DRILLER: Arthur P. Edmondson FIRST NAME DRILLER LAST NAME SIGNATURE: [Signature]

B 3 LOCATION OF WELL 1 2 3 (SEQ. NO.) 6 COUNTY: Howard COUNTY (DO NOT ABBREVIATE COUNTY NAME) 21 SUBDIVISION: Henryton Heights 23 42 SECTION: 1 44 46 LOT: 12 48 50 NEAREST TOWN: Henryton Marriottsville 52 71 MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 73 76 77 78

B 2 WELL INFORMATION 1 2 3 (SEQ. NO.) 6 MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 6 8 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 400 14 20 USE FOR WATER (CIRCLE APPROPRIATE BOX): [D] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) [F] FARMING, AGRICULTURE, IRRIGATION [I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT [M] MUNICIPAL WATER SUPPLY [P] PRIVATE WATER COMPANY [T] TEST MUST HAVE STATE HEALTH DEPT. APPROVAL

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) [N] NORTH [E] EAST [NE] NORTHEAST [SE] SOUTHEAST [S] SOUTH [W] WEST [NW] NORTHWEST [SW] SOUTHWEST NEAR WHAT ROAD: Henryton ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) [N] NORTH [S] SOUTH [E] EAST [W] WEST DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 100 34 37 38 39

APPROXIMATE DEPTH OF WELL: 100 24 28 FEET APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH) METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD): [CABLE] BORED (OR AUGERED) JETTED DRIVEN 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) REVERSE-ROTARY DRIVE-POINT OTHER (DESCRIBE): REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) [N] THIS WELL WILL NOT REPLACE AN EXISTING WELL [Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY [D] THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP. N Well 95 deep 28 ft casing 25 ft open hole 8 bags cement RT. 99

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 63 FORCE: WRITE INITIALS IN BOX CONDITIONS: 70 71 72 73 74 75 76 77 78 79

BOX NUMBER: E 320 N 540 NORTH COORDINATE: 42 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 4 CONTINUED HEALTH DEPARTMENT APPROVAL 1 2 3 (SEQ. NO.) 6 STATE HEALTH (CIRCLE "BOX") COUNTY NAME: Howard COUNTY NO.: APPROVED BY: DATE: 9/23/76

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY) 1 2 3 (SEQ. NO.) 6

C 1 **9023** SEQUENCE NO. (WRA USE ONLY)
 1 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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) 11/9/76 DEPTH OF WELL 95 PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-1675
 DATE WELL COMPLETED 11/9/76 (TO NEAREST FOOT) 22 26
 8-13 15 20 DRILLERS IDENTIFICATION NO. 251

OWNER Curry Glen LAST NAME FIRST NAME
 STREET OR RFD 1554 Heryton RD. POST OFFICE Marriottsville MD.

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
20 ft of dirt			
75 ft of gray rock			

GROUTING RECORD
 WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO
 TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT BENTONITE CLAY
 NO. OF BAGS NO. OF POUNDS
 GALLONS OF WATER
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 25 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD
 INSERT APPROPRIATE CODE BELOW
 S T STEEL C O CONCRETE
 P L PLASTIC O T OTHER
 MAIN CASING TYPE NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)
 I 6 30

OTHER CASING (IF USED)
 DIAMETER (INCH) DEPTH (FEET) FROM TO
 E A C H C A S I N G

SCREEN RECORD
 SCREEN TYPE OR OPEN HOLE
 INSERT APPROPRIATE CODE BELOW
 S T STEEL B R BRASS OR BRONZE H O OPEN HOLE
 P L PLASTIC O T OTHER

DEPTH (NEAREST WHOLE FOOT)
 FROM TO
 1 2 3 (SEQ. NO.) 6
 1 8 9 11 15 17 21
 2 23 24 26 30 32 36
 3 38 39 41 45 47 51
 SLOT SIZE 1. 1/2

DIAMETER OF SCREEN 2 (NEAREST INCH)
 FROM 60 TO

IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX)

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

PUMPING TEST
 HOURS PUMPED (TO NEAREST HOUR) 5
 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 6
 METHOD USED TO MEASURE PUMPING RATE sand pump

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 40 (NEAREST FOOT)
 WHEN PUMPING 50 (NEAREST FOOT)
 TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 A AIR P PISTON T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
 CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

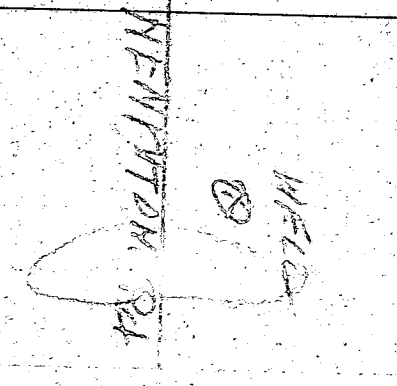
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE (NEAREST FOOT)
 BELOW } 50 51

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.

DRILLER'S NAME (PLEASE PRINT) Arthur P. Anderson
 SIGNATURE Arthur P. Anderson



RT. 99

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

WRA PERMIT NUMBER

FILL IN THIS FORM COMPLETELY

10/31/79
 9:30a.m.

OWNER: COL. 18 LAST NAME **CURRY** COL. 19 FIRST NAME **GLEN W**
 STREET OR RFD: COL. 20 **1715 HENRYTON RD** COL. 21
 CITY OR TOWN: COL. 22 **MARRIOTTSVILLE MD.** COL. 23

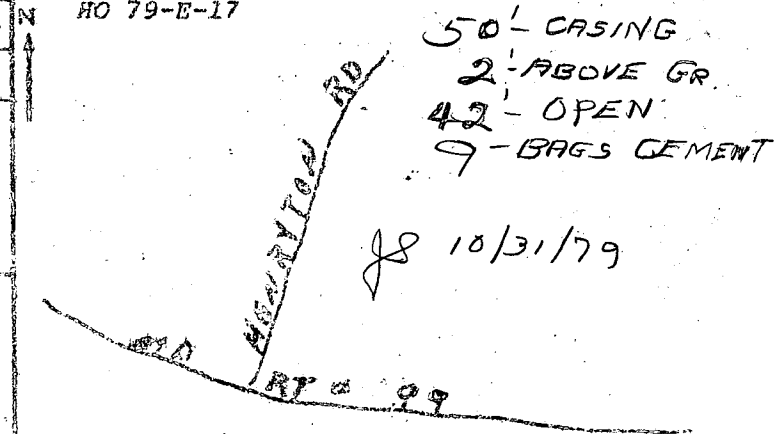
DRILLER INFORMATION
 DATE: **11/24/79** LICENSE NUMBER: **209**
 NAME: **Howard Dillon** DRILLER LAST NAME
 NAME: **Howard Dillon** LAST NAME

LOCATION OF WELL
 COUNTY: **HOWARD**
 SUBDIVISION: **Henryton Heights**
 SECTION: **1** LOT: **12**
 NEAREST TOWN: **MARRIOTTSVILLE**
 MILES FROM TOWN (ENTER 0 IF IN TOWN): **2**

WELL INFORMATION
 PUMPING RATE (GALLONS PER MINUTE): **5**
 DAILY QUANTITY NEEDED (GALLONS PER DAY): **300**
 USE FOR WATER (CIRCLE APPROPRIATE BOX)
 MUNICIPAL WATER SUPPLY: MUDY HAVE STATE HEALTH DEPT. APPROVAL

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
 NORTH EAST NORTHWEST SOUTHWEST
 SOUTH WEST NORTHWEST SOUTHWEST
 NEAR WHAT ROAD: **1715 HENRYTON RD**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): **S**
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): **75 FT**

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEAREST TOWN, ROAD, AND STREAM WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



DEPTH OF WELL: **250** FEET
 DIAMETER OF WELL: **6** (NEAREST INCH)
 METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD):
 ROTARY (CIRCLE) DRIVEN
 REVERSE ROTARY DRIVE-POINT
 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 REPLACE AN EXISTING WELL
 DEPTH NUMBER OF WELL TO BE REPLACED OR OCEANIC (IF AVAILABLE): **140-73-1675**

NOT TO BE FILLED IN BY DRILLER (WPA USE ONLY)
 ENGINEER REVIEW DISTRICT NO. **W19297**

HEALTH DEPARTMENT APPROVAL
 APPROVED BY: **Ronald W. Monaghan**
 DATE: **10/25/79**

BOX NUMBER: **820** (E) **540** (N)
 NORTH COORDINATE: **80 81 82 83 84 85**
 EAST COORDINATE: **57 58 59 60 61 62 63**
 ELEVATION AT WELL HEAD (FEET): **66 66 67 68**

FILE Emergency Well DATE REPORTED Oct. 25, 1979

PROPERTY OWNER Glenn Curry

P.O. ADDRESS 1715 Herryton Road TELEPHONE 328-2861

DIRECTIONS TO PROPERTY Marristville, Md. 21104

INFORMANT Driller - Dillon (363-0980)

Old well is pumping nothing but sand.

Ron Paris (269-3551)

CONDITION FOUND Not at home 10-25-79. Well is under
repair

HO - 79 - E - 17

ACTION TAKEN 10/31/79 New well grouted this date. JB

FINAL DISPOSITION _____

B 1	4617	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 HO-73-3471 FILL IN THIS FORM COMPLETELY
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DATE RECEIVED (WRA USE ONLY)	OWNER: <u>CURRY CLIFTON</u> COL 15 LAST NAME FIRST NAME COL 34 STREET OR RFD: <u>1715 HENRYTON RD</u> COL 36 COL 55 POST OFFICE: <u>MARRIOTTSVILLE MD. 21104</u> COL 57 COL 76
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B 1	CONTINUED	DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6		
DATE: <u>10/24/79</u>	LICENSE NUMBER: <u>209</u>	77 80
FIRST NAME: <u>HOWARD</u> DRILLER LAST NAME: <u>DELLON</u>		
SIGNATURE: <u>Howard Dellon</u>		

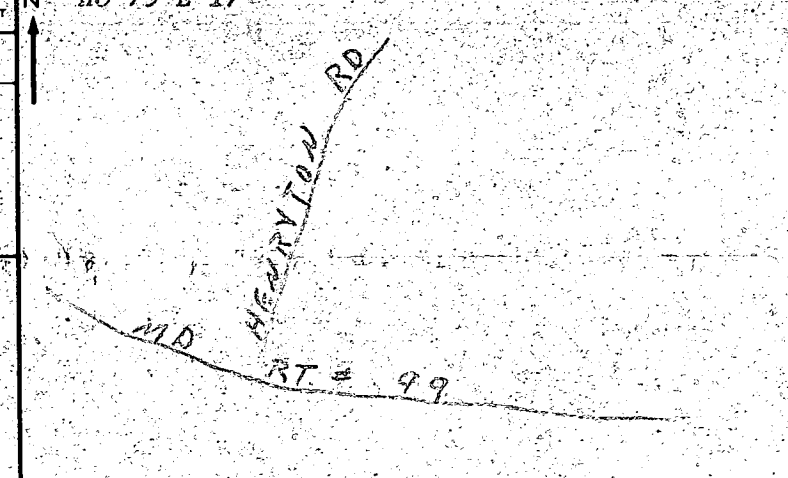
B 3	LOCATION OF WELL	
1 2 3 (SEQ. NO.) 6		
COUNTY: <u>HAWARD</u>	(DO NOT ABBREVIATE COUNTY NAME) 21	
SUBDIVISION: <u>None to State</u>	29 42	
SECTION: <u>1</u>	LOT: <u>12</u>	44 46 48 50
NEAREST TOWN: <u>MARRIOTTSVILLE</u> 71		
MILES FROM TOWN (ENTER 0 IF IN TOWN): <u>7.9</u> 76 77 78		

B 2	WELL INFORMATION	
1 2 3 (SEQ. NO.) 6		
MAXIMUM PUMPING RATE (GALLONS PER MINUTE): <u>5</u>	8 12	
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): <u>300</u>	14 20	
USE FOR WATER (CIRCLE APPROPRIATE BOX)		
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)		
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION		
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT		
<input type="checkbox"/> MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL		
<input type="checkbox"/> PRIVATE WATER COMPANY		
<input type="checkbox"/> TEST		

B 4	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)	
1 2 3 (SEQ. NO.) 6		
<input type="checkbox"/> NORTH <input type="checkbox"/> EAST <input type="checkbox"/> NE NORTHEAST <input type="checkbox"/> SE SOUTHEAST <input type="checkbox"/> SOUTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> NW NORTHWEST <input type="checkbox"/> SW SOUTHWEST		
NEAR ROAD: <u>IRISH HENRYTON RD</u>		
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): <input checked="" type="checkbox"/> NORTH <input type="checkbox"/> SOUTH <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): <u>25.11</u> 34 37 38 39		

APPROXIMATE DEPTH OF WELL: <u>250</u> FEET	24 26
APPROXIMATE DIAMETER OF WELL: <u>1</u> (NEAREST INCH)	
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)	
<input checked="" type="checkbox"/> BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN	
30-37 <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC ROTARY)	
<input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT	
OTHER (DESCRIBE):	

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)	
<input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL	
<input checked="" 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	
<input type="checkbox"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE): <u>HO 73-3471</u>	

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)	
APPROPRIATION PERMIT NUMBER: <u>84</u>	ENGINEER REVIEW DISTRICT NO. <u>65</u>
FORCE: <input type="checkbox"/> WRITE INITIALS IN BOX	CONDITIONS: <u>WV</u>
A E N S G W Q C A P U	

BOX NUMBER: <u>820</u>	5/5
BOX NUMBER: <u>540</u>	5/5
NORTH COORDINATE: <u>50 51 52 53 54 55</u>	X
EAST COORDINATE: <u>57 58 59 60 61 62 63</u>	
ELEVATION AT WELL HEAD (FEET): <u>65 66 67 68</u>	0/0 5/0

B 4	HEALTH DEPARTMENT APPROVAL	
1 2 3 (SEQ. NO.) 6		
41 <input checked="" type="checkbox"/> STATE HEALTH (CIRCLE BOX)	COUNTY NAME: <u>HOWARD</u>	COUNTY NO.: <u>210207</u>
DATE: <u>10 25 79</u>	APPROVED BY: <u>Donald W. Monahan</u>	

B 5	SPECIAL CONDITIONS 8-83 (WRA USE ONLY)	
1 2 3 (SEQ. NO.) 6		

328-2861

C 1 **1211** SEQUENCE NO. (WRA USE ONLY)
 1 2 3 (SEQ. NO.)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 OF ALL CARDS)

DATE RECEIVED (WRA USE ONLY) **MON 11/13 8-13**
 DATE WELL COMPLETED **11/7/79**

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

DEPTH OF WELL **350**
 22 (TO NEAREST FOOT) 26

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-73-3491**
 28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. **209**

OWNER **CURRY** FIRST NAME **Glenn**
 STREET (OR RFD) **1715 Henryton Rd.** POST OFFICE **Marriottsville, Md. 21104**

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Mica Sand	0	50	
Mica Rock	50	350	X

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT BENTONITE CLAY

NO. OF BAGS **9** NO. OF POUNDS **855**

GALLONS OF WATER **72**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **47** FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES
 INSERT APPROPRIATE CODE BELOW
 STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE S T
 NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6**
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **50**

OTHER CASING (IF USED)

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE
 INSERT APPROPRIATE CODE BELOW
 STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

C 2 (SEQ. NO.)

DEPTH (NEAREST WHOLE FOOT)

FROM	TO
1 H O	50 350
2	
3	

SLOT SIZE 1. **2** 2. **2** 3. **3**

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **6**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **1**

METHOD USED TO MEASURE PUMPING RATE **TIME**

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING **40** (NEAREST FOOT)
 WHEN PUMPING **325** (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) **29**

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

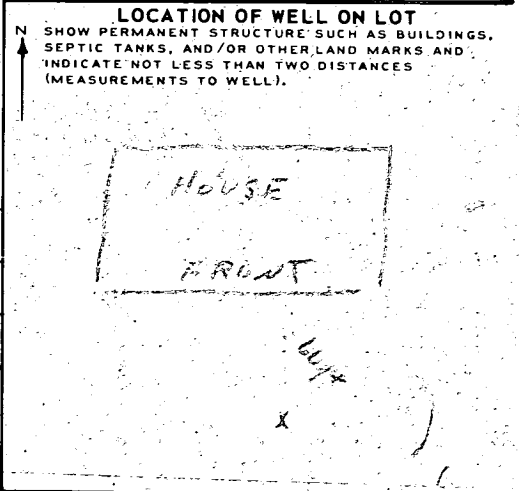
CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) **31** **35**

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 } **2** (NEAREST FOOT)



CIRCLE APPROPRIATE BOXES

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 **Howard Dillon**

(PLEASE PRINT) **Howard Dillon**

SIGNATURE *Howard Dillon*

DIAMETER OF SCREEN **56** (NEAREST INCH)
 FROM **60** TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX **68** F

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

TELESCOPE CASING **70** LOG INDICATOR **72** OTHER DATA AVAILABLE **74 75 76**