

APPLICATION

PERCOLATION TESTING

A 38718

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 4

DATE 12/17/86

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 Roy W. Gram + Wife TSM Partnership

ADDRESS 791 Morgan Station Rd PHONE 465-9279
489-4995

PROSPECTIVE BUYER Hemphill Partnership

ADDRESS 10176 Baltimore National Pike Suite 210 PHONE 465-5855

PROPERTY LOCATION: LOT 12 Prelim 10/21/87

SUBDIVISION Morgan Station (~~Gram Property~~) LOT NO. 17

ROAD AND DESCRIPTION E/S Morgan Station Rd north of Old Frederick Rd
(839 Iron Rail Court)

TAX MAP 3 PARCEL # 9

SIZE OF LOT 3 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.

Mad A. Keri
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4/27/91 Perc OK Hold for Plat

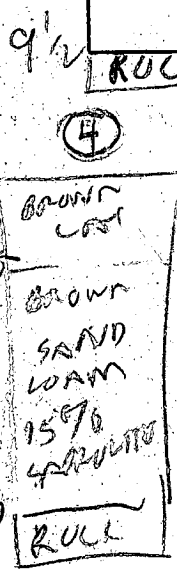
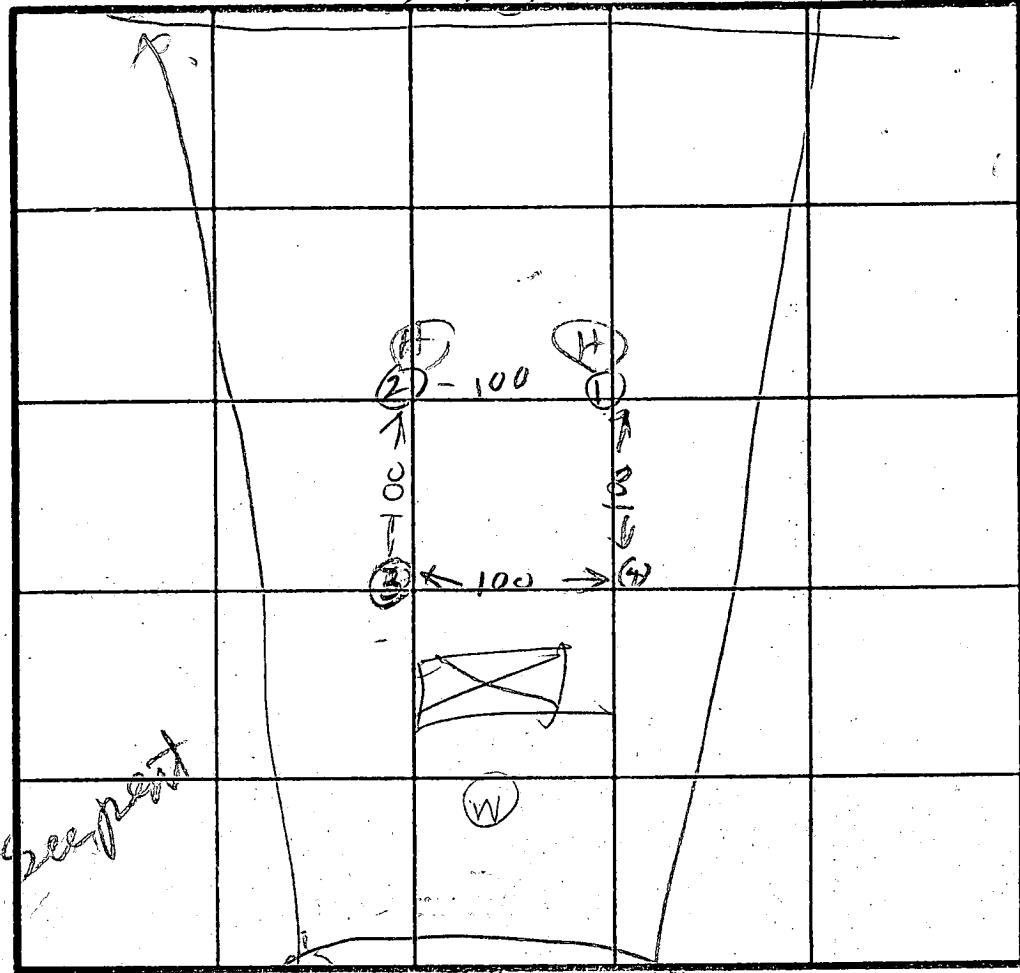
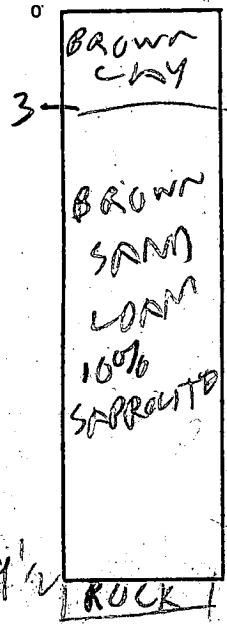
BLDG. PERMIT SIGNED
AND RETURNED 9/8/89
Serial # 28910
SFD - 4 Bedrooms

THIS IS NOT A PERMIT

Lot 17

375

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

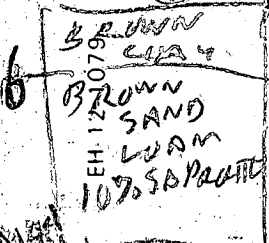
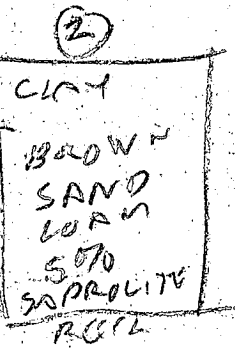
UNNAMED RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/27/87	1S	3.5	1113	1120	1126	1130	10
	1D	7.0	1113	1119	1119	1126	7
4/27/87	1V	9.5	OK BUT ROCK BOTTOM				
4/27/87	2S	2	1132	1156	DILSON		1st timer
	2V	12 1/2	C				
4/27/87	3S	3	1133	1139	1139	1147	8
	3V	14	OK BUT ROCK BOTTOM				
4/27/87	4V	10	OK BUT ROCK BOTTOM				
	3M	4 1/2	1219	1243	24 min slow		
	3EM	6.5	101	109	109	119	10

av
Time
6 min

max
depth
3 ft

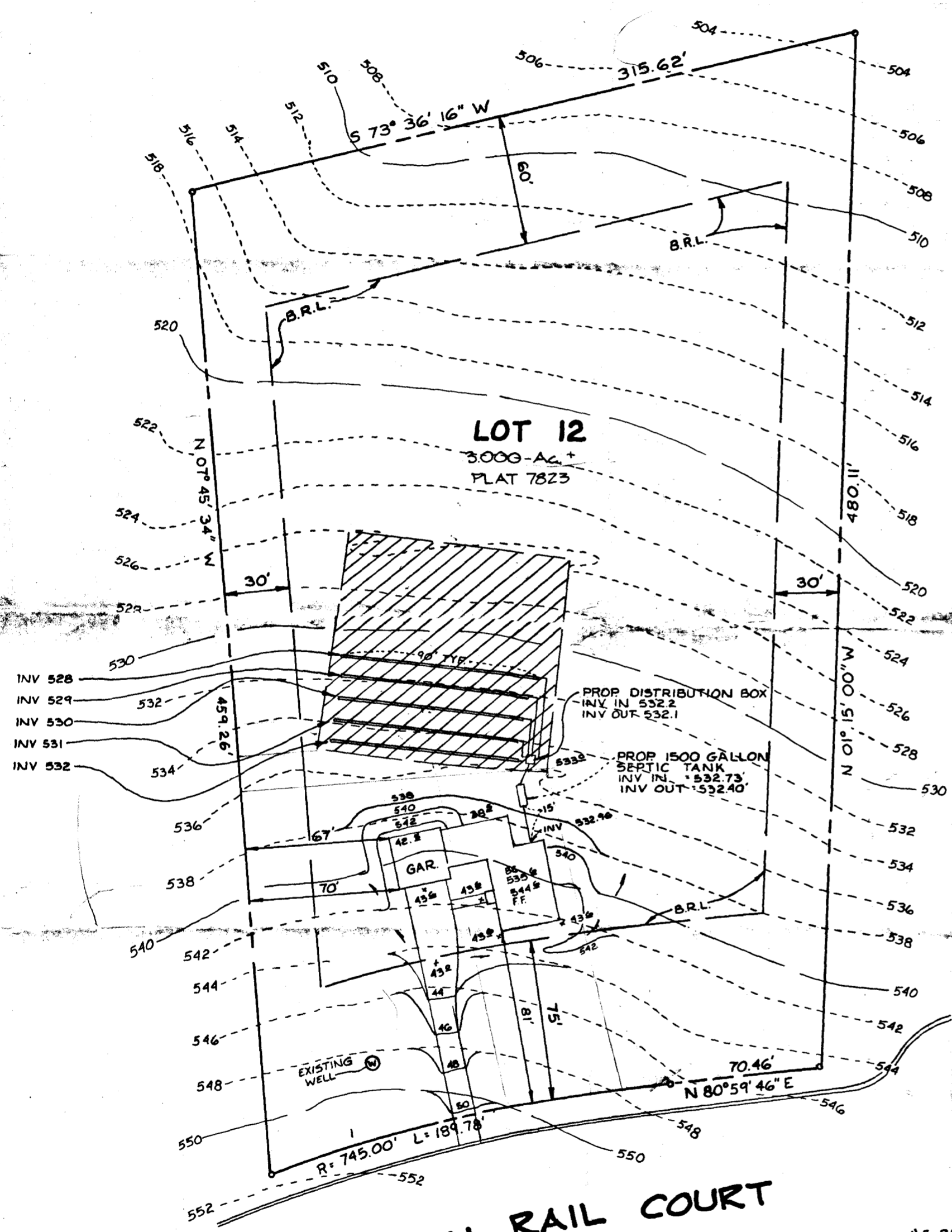
BOTTOM
5'
180#/BR



REMARKS: 1 Holes dug per Plat attached R/H

TESTED BY: R. HODGES

ALSO PRESENT: DAVE POP KETTERMAN OLIVER KAMM



9/8/89
 PLANS OK
 BH

IRON RAIL COURT

- 1) 1.5 BEDROOM HOUSE
- 2) 180 SQ FT / BEDROOM
- 3) LENGTH OF TRENCHES REQUIRED $\frac{2 \times 180}{2} = 450'$
- 4) LENGTH OF TRENCHES PROVIDED: 450'

ARTER, INC.
 YORS

PLAN TO ACCOMPANY APPLICATION
 FOR BUILDING PERMIT
 LOT 12
MORGAN STATION
 FOURTH ELECTION DISTRICT HOWARD COUNTY, MD.
 JUNE 14, 1989 SCALE: 1" = 50'

B 1 5918 SEQUENCE NO. (OR USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

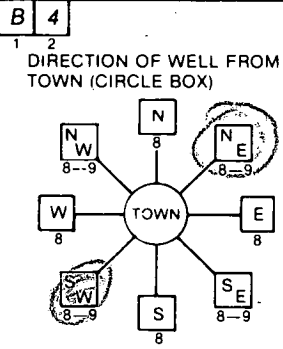
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
70 40-88-0622 79
fill in this form completely

Date Received (APA) 132389
OWNER INFORMATION
15 Last Name: HEMPHILL
Owner: ASSOCIATES
34 First Name: [blank]
36 Street or RFD: 10176 BALT MAR PIKE
55
57 Town: ELLICOTT
70 State: MD
72 Zip: 21043
76

B 3 LOCATION OF WELL
1 2
8 COUNTY: HOWARD
21
23 SUBDIVISION: MORGAN STATION
42
SECTION: [blank] 44 46 LOT: 12 Parcel 1911
48 50
52 NEAREST TOWN: 215601
71
MILES FROM TOWN (enter 0 if in town): 3 73 76 77 78 MI

DRILLER INFORMATION
Driller's Name: FRANK DeLph
77 License No. 80: 453
Firm Name: FRANK-DeLphwell Drillers INC
Address: 18234 Penn Shop Rd Mt Airy Md
Signature: Frank DeLph
Date: 3/17/89



11 Morgan Station
NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH (N) 32
WEST (W) 32
EAST (E) 32
SOUTH (S) 32
34 1300 37 DISTANCE FROM ROAD
ENTER FT or MI: F7 38 39

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.): 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A 38718
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED: 05/18/89
CO SIGNATURE: [blank] EXP. DATE: 11-17-89
NORTH GRID: 553000 EAST GRID: 0786000

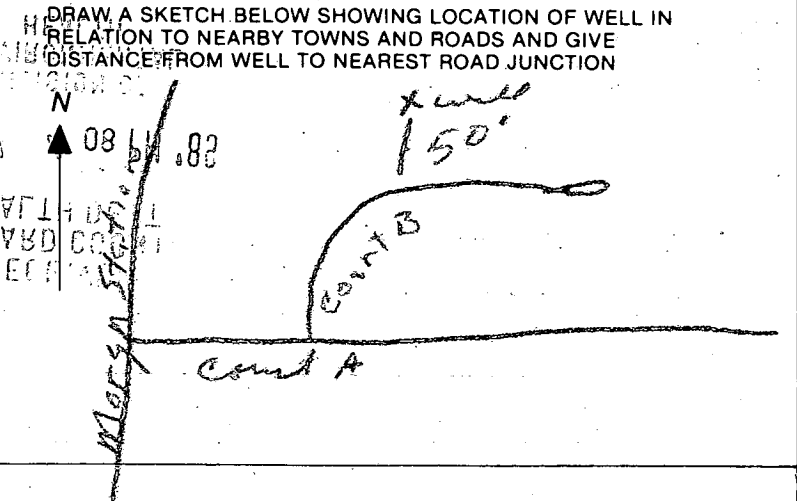
APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER:
1. WEH
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 786
N 553
6/13/89 Lot-12
21 ft casing
19 ft open hole
6 bags cement
1 ft above ground
6-13-89 JEN

REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE): [blank]



Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER: [blank] GAP [blank]
FORCE SA INITIALS IN BOX PERMIT No. 40-88-0622

SPECIAL CONDITIONS

C1 2468

SEQUENCE NO. (DENV USE ONLY)

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)

COUNTY NUMBER A-38718

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 061689

22 26 165 (TO NEAREST FOOT)

28 37 40-88-0622

OWNER STREET OR RFD last name first name TOWN SUBDIVISION SECTION LOT

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Shale, M.K.A., Sandstone, M.K.A., Sandstone, M.K.A.

GROUTING RECORD: WELL HAS BEEN GROUTED, 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 Nominal diameter, Total depth.

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

SCREEN RECORD: screen type or open hole, insert appropriate code below.

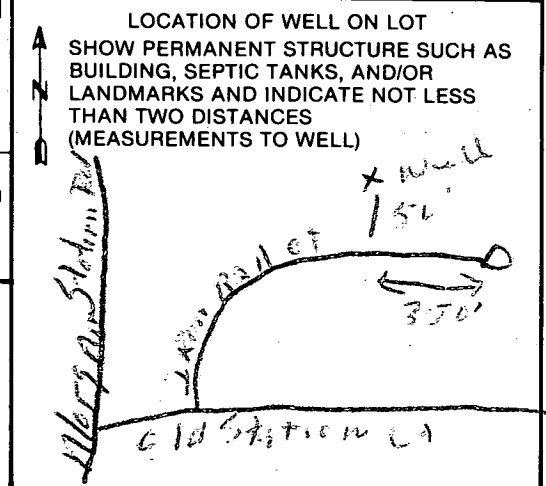
DEPTH (nearest ft.) table, SLOT SIZE, DIAMETER OF SCREEN.

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER), TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED: DRILLER WILL INSTALL PUMP, TYPE OF PUMP INSTALLED, CAPACITY, GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED, DRILLERS IDENT. NO., DRILLERS SIGNATURE, SITE SUPERVISOR.

