

1/5/87  
noon  
1/6/87  
AM

05-402085

approved  
1/6/87 R. Hodges

# PERMIT

P 37671  
A 36634

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

BUREAU OF ENVIRONMENTAL HEALTH

DISTRICT 5th

XX662388X  
461-9933

DATE 9/17/86

I.C.O.P. INDEXED  
{ Time expired }

Souder Builders, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 9335 Old Scaggsville Road, Laurel, MD 20707

PHONE

SUBDIVISION Ritter Property

ROAD 11945 Lime Kiln Road

LOT 2

PROPERTY OWNER Stewart & Irene Smith

ADDRESS

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 9 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 240 feet from the front lot line and 75 feet from the right lot line as seen when facing the property from Lime Kiln Road. Run trench(s) along contour toward rear of property.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY C. Williams

DATE 8/05/86

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

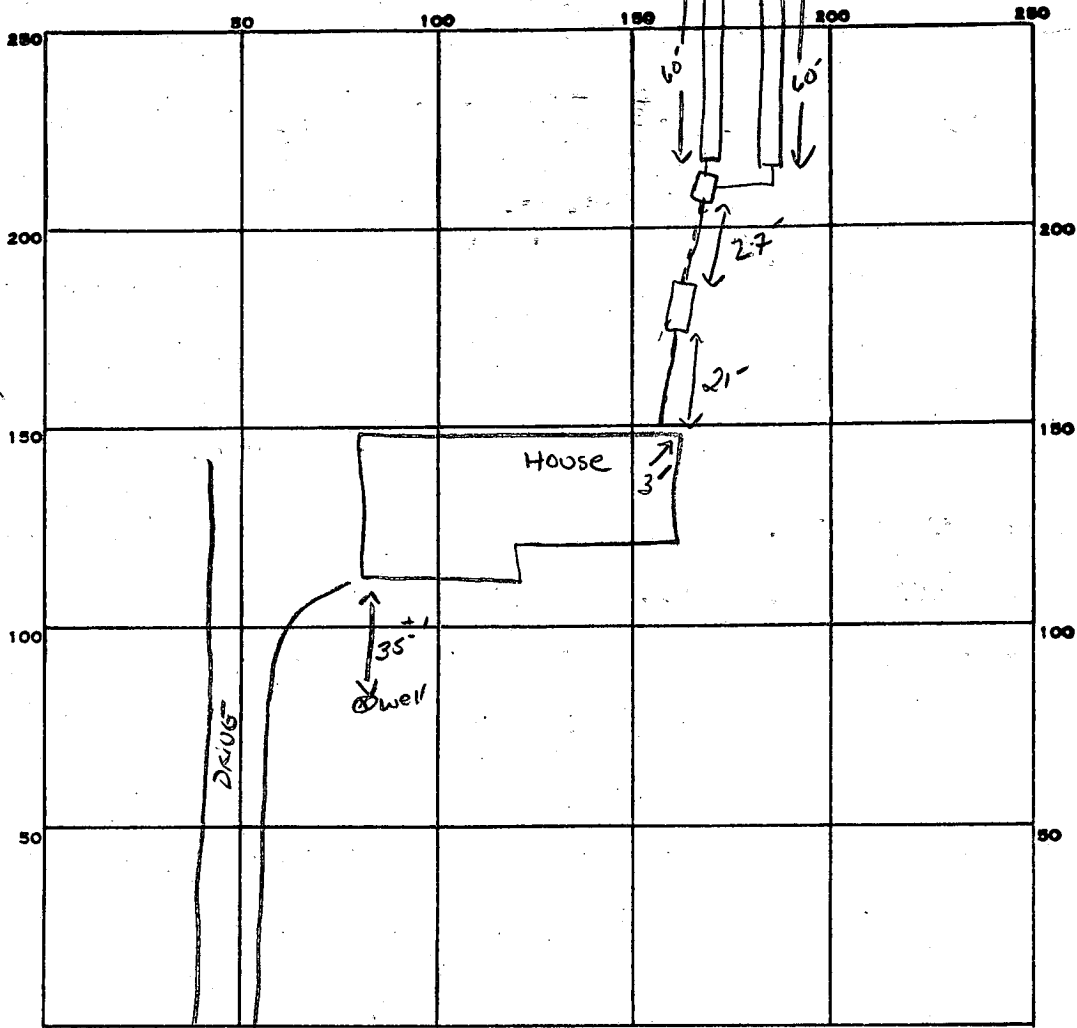
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 36634



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.  
Lime Kiln Rd.

280  
3/540  
540

PERMIT CARD

SEPTIC TANK, LEVEL ✓ 150 GAL CLEANOUTS ST OK

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9.5 FT. TRENCH WIDTH 2 FT. INLET 4.5"

GRAVEL DEPTH 5 FE IN. TOTAL LENGTH 60 60 FT. 7070  
120

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA 605 TOTAL BOTH TR

SEEPAGE PITS, INSIDE DIAMETER — FT. DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS 1-5-87 OK TO ADD STONE TO BOTH TRENCHES. SAGL  
1/6/86 540 SPARE REQUIRED 605 INSTALLED  
STONE ADDED, CLEANOUT IN TANK, PIPES CONNECTED R/HODGES

DATE SYSTEM APPROVED 1/6/86 INSPECTOR Raymond Hodges

not  
3/10/86  
9:30 AM

# APPLICATION

PERCOLATION TESTING

A 36634

P \_\_\_\_\_

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

DISTRICT 5<sup>m</sup>

DATE 3/7/86

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 JAMES F. RITTER

ADDRESS 8431 OLD Columbia Rd. Laurel 20707 PHONE \_\_\_\_\_

PROSPECTIVE BUYER JAMES K. RITTER

ADDRESS 3031 OAK BREEN Circle Apt B E.C. 21043 PHONE 461-5645

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 2 New Lot

ROAD AND DESCRIPTION #937 Lime Kiln Rd. Fulton, Md. 20759

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

BLDG. PERMIT SIGNED  
AND RETURNED 9-10-86  
S. Aul  
BP #72823

SIZE OF LOT 3<sup>+</sup> 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. \* Jack Haddock (JW)  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_


REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING 3-10-86 Perc. Results Satisfactory. Hold for Certified hole  
Location, house & well site. S. Aul

# THIS IS NOT A PERMIT

SOIL PROFILE

0' 


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 \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

lot  
3/18/86

# APPLICATION

PERCOLATION TESTING

A 36634

P \_\_\_\_\_

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

DISTRICT 5<sup>th</sup>

DATE 5/7/86

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 JAMES F. RITTER

ADDRESS 8431 OLD Columbia Rd. Laurel 20707 PHONE \_\_\_\_\_

PROSPECTIVE BUYER JAMES K. RITTER

ADDRESS 3031 OAK GREEN Circle Apt B E.C. 21043 PHONE 461-5645

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 2 New Lot

ROAD AND DESCRIPTION 11937 Lime Kiln Rd. Fulton, Md. 20759

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT 3<sup>+</sup> 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.

Jack Haddock Jr (JW)  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

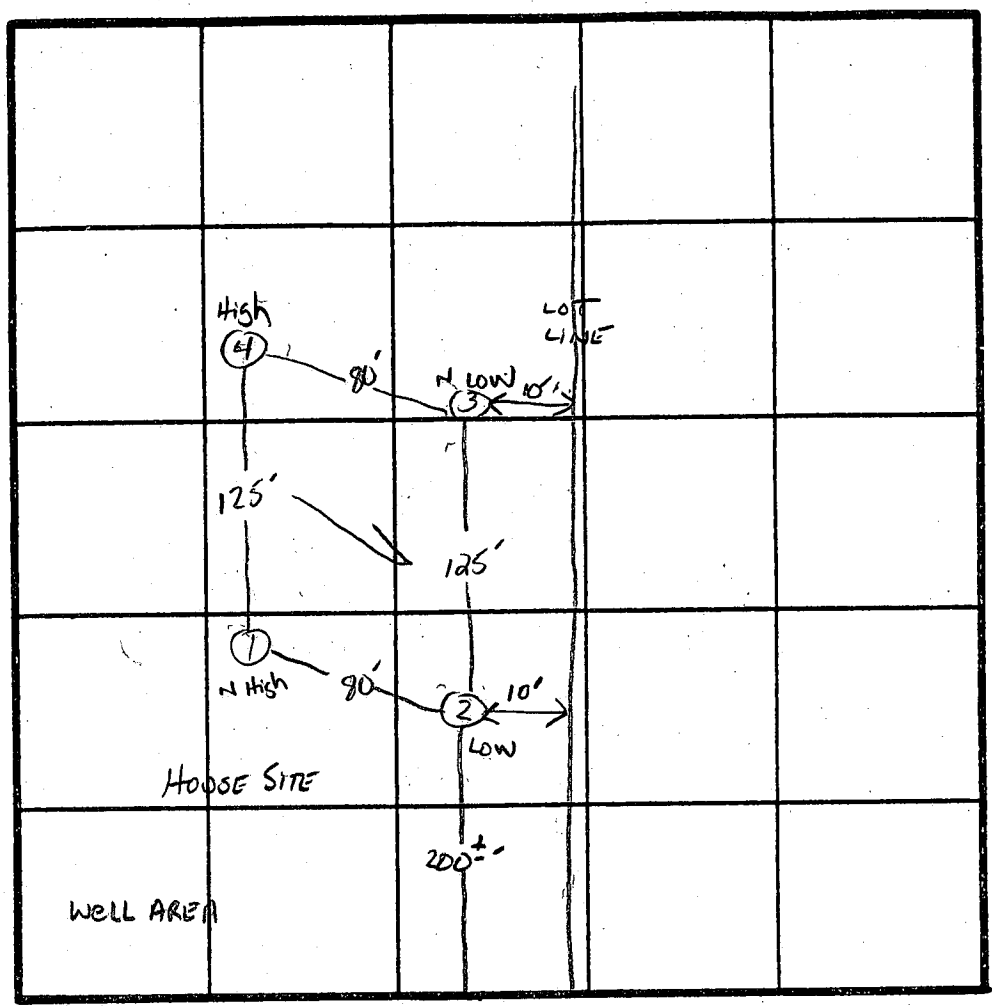
① ② ③  
SOIL PROFILE

0" AP

14" 4/11 BR Silt CLAY LM. <10% FRAGMENTS

34" yellow RED micaceous silt CLAY <10% FRAGMENTS

44" RED yellow micaceous silt SAND <10% FRAGMENTS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
Lime Kiln Rd.

④  
AP

14" yellow BR silt CLAY LM. <10% FRAGMENTS

44" BROWN RED SAND silt LM LESS micaceous <10% FRAGMENTS

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/10/86	1 S	5'	9:55	10:09	10:09	10:29	20min	
	1 M	9.5'	9:55	9:57	9:57	9:59	2min	
	1 V	14'	UNIFORM SOIL STRUCTURE Below 44"					
	2 S	5.5'	10:01	10:04	10:04	10:11	7min	
	2 V	14'	SAME AS #1					
	3 S	5'	10:12	10:15	10:15	10:27	12min	
	3 V	14'	SAME AS #1+2					
	4 S	4.5'	10:28	10:30	10:30	10:34	2min	
	4 V	14'	UNIFORM SOIL STRUCTURE Below 44"					

REMARKS \_\_\_\_\_

TYPE OF SOIL Gleneta Silt Loam

TESTED BY S. Abel ALSO PRESENT MR. RITTER, Skip

EH-12-1079

281

# APPLICATION

## PERCOLATION TESTING

34647  
P ~~34647~~  
A Repair

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

DISTRICT 5<sup>th</sup>  
DATE 3/7/86

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 JAMES F. RITTER STEWART SMITH IRENE SMITH ADD SAME.

ADDRESS 8431 OLD Columbia Rd, LAUREL 20707 PHONE \_\_\_\_\_

✗ PROSPECTIVE BUYER JAMES K. RITTER

ADDRESS 8031 OAK BREEN Circle Apt B PHONE 461-5645  
Ellicott City 21043

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 1 Existing House

ROAD AND DESCRIPTION 11937 Lime Kiln Rd. Fulton, Md. 20759

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT 3+ Acres TYPE BLDG. SFD  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

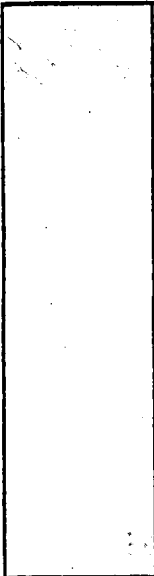
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING 3-10-86; Visual Inspection shows same soil as lot 2  
EXISTING SYSTEM FUNCTIONING; hold for certified hole on subdivision  
PLAT showing 10,000 sq AREA between existing system and visual hole.

# THIS IS NOT A PERMIT

SOIL PROFILE

0' 


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 \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

EH-12-1079

# APPLICATION

## PERCOLATION TESTING

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

DISTRICT 5<sup>th</sup>

DATE 3/7/88

34647  
A ~~34647~~  
A Repair

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 JAMES F. RITTER

ADDRESS 8431 OLD Columbia Rd, LAUREL 20707 PHONE \_\_\_\_\_

✗ PROSPECTIVE BUYER JAMES K. RITTER

ADDRESS 8031 OAK BREEN Circle Apt B PHONE 461-5645  
Ellicott City 21043

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 1 Existing House

ROAD AND DESCRIPTION 11937 Lime Kiln Rd. Fulton, Md. 20759

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT 3+ Acres TYPE BLDG. SFD  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Jack Aycock Jr (SW)  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

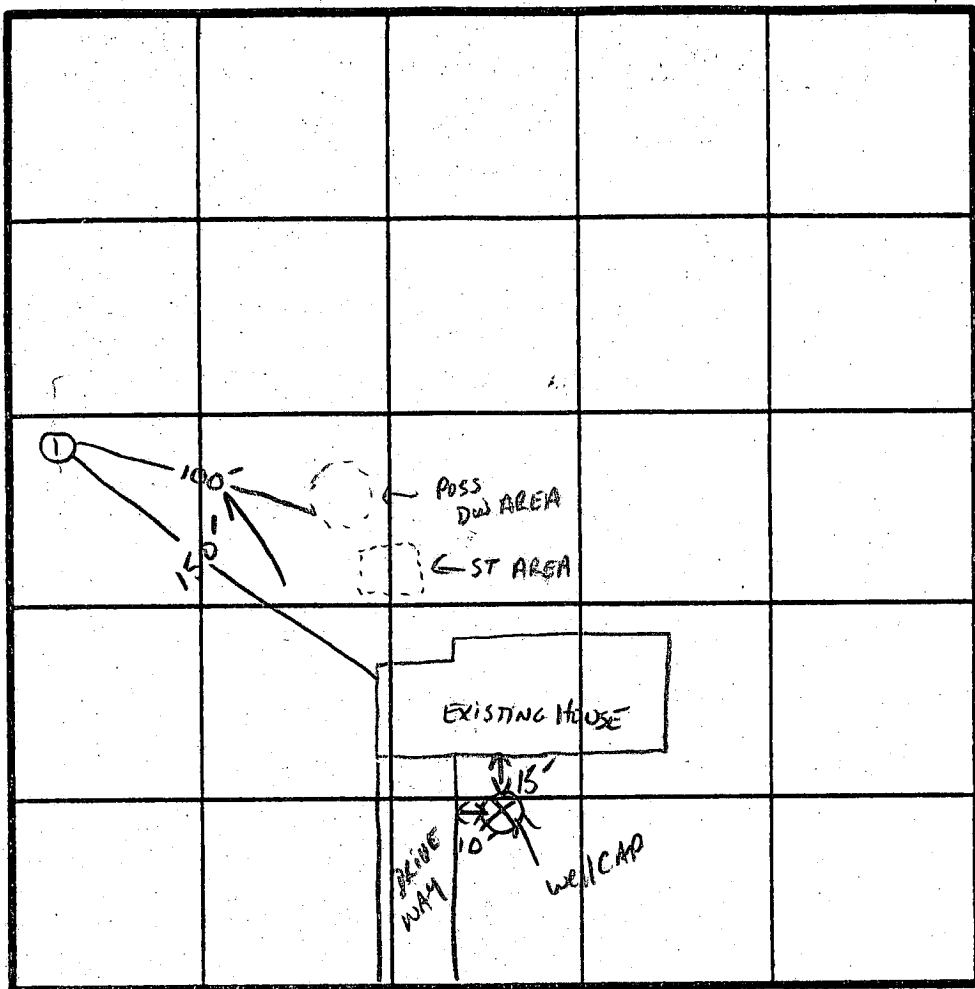
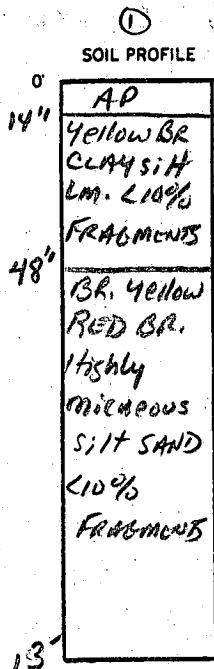
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
Lime Kiln Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/10/86	IV	13'	UNIFORM SOIL STRUCTURE Below 4'					
			SOIL SIMILAR TO LOT 2 TESTED NOT NECESSARY TO PROC - 2 8" / 1" PROC.					

REMARKS: NO EVIDENCE OF SEPTIC SYSTEM FAILURE.

TYPE OF SOIL: Greenely Silt Lm.

TESTED BY: S. Abel ALSO PRESENT: SKIP, MA. RITTER

EH-12-1079

B 1 5712 SEQUENCE NO. (OEP USE ONLY)  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL  
please print or type

OEP PERMIT NUMBER  
40-81-1975  
70 fill in this form completely 79

Date Received 04/8/86  
OWNER INFORMATION  
8 RITTER KEITH  
15 Last Name Owner First Name 34  
36 3031 OAK GREEN CIRCLE  
55 Street or RFD  
57 ELLICOTT CITY MD 21043  
70 State 72 Zip 76

B 3 LOCATION OF WELL  
1 HOWARD  
2 8 COUNTY 21  
3 ROME  
4 23 SUBDIVISION 42  
5 SECTION 44 46 LOT 48 50 6.5 ACRE  
6 FULTON  
7 52 NEAREST TOWN 71  
8 MILES FROM TOWN (enter 0 if in town) 73 76 77 78

DRILLER INFORMATION  
Ralph Mayne  
77 License No. 80 273  
Ralph Mayne (well drilling)  
9120 Brown Church Rd. Mt. Airy  
Ralph Mayne 4/9/86  
Signature Date

B 4  
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
3 11 LIME KILN RD. 30  
4 NEAR WHAT ROAD  
5 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
6 NORTH N  
7 WEST W 32 EAST E  
8 SOUTH S  
9 34 200 37  
10 DISTANCE FROM ROAD  
11 ENTER FT or MI 38 39

B 2 WELL INFORMATION  
1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5  
3 8 12  
4 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500  
5 14 20

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-36634  
COUNTY NAME COUNTY NO.  
OEP SIGNATURE STATE HEALTH INSERT S 41  
DATE ISSUED 051686 Sidney Abel 11-16-86  
43 48 CO SIGNATURE EXP. DATE  
NORTH GRID 479000 EAST GRID 0820000  
50 55 57 63

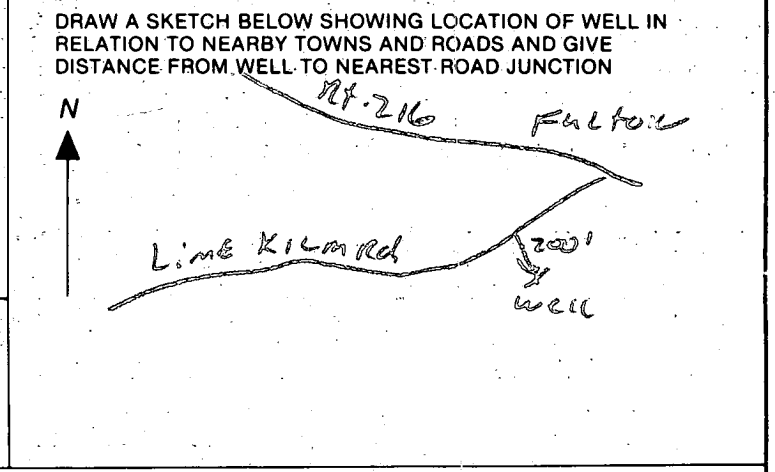
APPROXIMATE DEPTH OF WELL 150 FEET  
24 28

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
SOURCES OF DRILLING WATER  
1. well  
2.  
3.  
WRITE THE BOX NUMBER FROM THE MAP HERE  
E 820  
N 420 9  
000 000  
Lime Kiln  
7-23-86  
location ok  
47 PIPE  
42' OPEN  
10 BAG CEMENT  
S. Abel  
NOT Present for Grant

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  
39 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) 41 52



Not to be filled in by driller (OEP USE ONLY)  
APPROP. PERMIT NUMBER 54 GAP 63  
FORCE 5A WRITE INITIALS IN BOX PERMIT NO. 40-81-1975  
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

**C1** 00533 SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND**  
**WELL COMPLETION REPORT**  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN  
 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER **A-36634**

DATE Received [ ] DATE WELL COMPLETED **072386** Depth of Well **200** (TO NEAREST FOOT)  
 FROM "PERMIT TO DRILL WELL" **40-81-1475**

OWNER **RITTER KEITH** last name first name  
 STREET OR RFD **LINE KILN Rd.** TOWN **FULTON**  
 SUBDIVISION SECTION LOT **2**

**WELL LOG**  
 Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	30	
Sand Stone	30	50	<input checked="" type="checkbox"/>
Micka	50	60	
Sand Stone	60	65	<input checked="" type="checkbox"/>
Micka	65	200	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **1000** NO. OF POUNDS **1000**  
 GALLONS OF WATER **60**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **42** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST CO PL OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN Casing TYPE **PL** Nominal diameter **6** Total depth **42**  
 top (nearest inch) (nearest foot)

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

screen type or open hole insert appropriate code below  
**ST BR HO PL OT**  
 STEEL BRASS OPEN HOLE PLASTIC OTHER

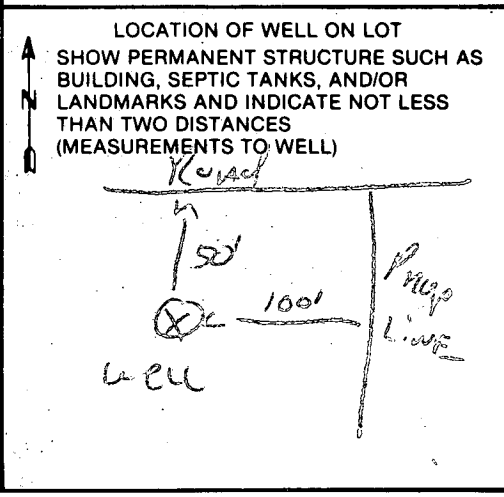
**C2**  
 DEPTH (nearest ft.) **200**  
**HO 45 200**  
 EACH SCREEN  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH)  
 from to

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

OEP 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

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **4**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **35**  
 WHEN PUMPING **20**  
 TYPE OF PUMP USED (for test)  
**A** air **P** piston **T** turbine  
**C** centrifugal **R** rotary **O** other (describe below)  
**J** jet **S** submersible

**PUMP INSTALLED**  
 DRILLER WILL INSTALL PUMP YES  NO  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon)  
 PUMP HORSE POWER  
 PUMP COLUMN LENGTH (nearest ft.)  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 LAND SURFACE (nearest foot)



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 10.17.13 "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 IDENT. NO. **273**  
**Ralph Wayne**  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
**Ralph S. Wayne**  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER  
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL  
DRILLER:

My well driller is not to install the pump for my water well, and I  
hereby certify that it will be my responsibility to have a Pump Permit  
taken out by a registered master plumber or certified pump installer.  
It will be my responsibility to notify the Health Department before  
and during the installation so that inspections can be made by their  
representative. (Pursuant to Chapter XVII, of the Plumbing Code of  
Howard County.)

\_\_\_\_\_  
(Name)

Keith Ritter

3031 - OAK GREEN CIRCLE AP#-B

\_\_\_\_\_  
(Address)

ELLICOTT CITY, MD 21043

PH- 461-5645

\_\_\_\_\_  
(OEP Well Permit Number)

\_\_\_\_\_  
(Date)



STATE OF MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
LABORATORIES ADMINISTRATION  
REPORT OF WATER ANALYSIS

Bottle Number: H 9813 Name: KEITH RITTER County: HOWARD

Source of Sample: RITTER PROPERTY LIME KILN RD. Collector: S. Abel  
Street Town or City

Sample Type (Circle): Community Source Non-Community Distribution Private MCL Emergency Recheck Routing

Remarks: 140-81-1475

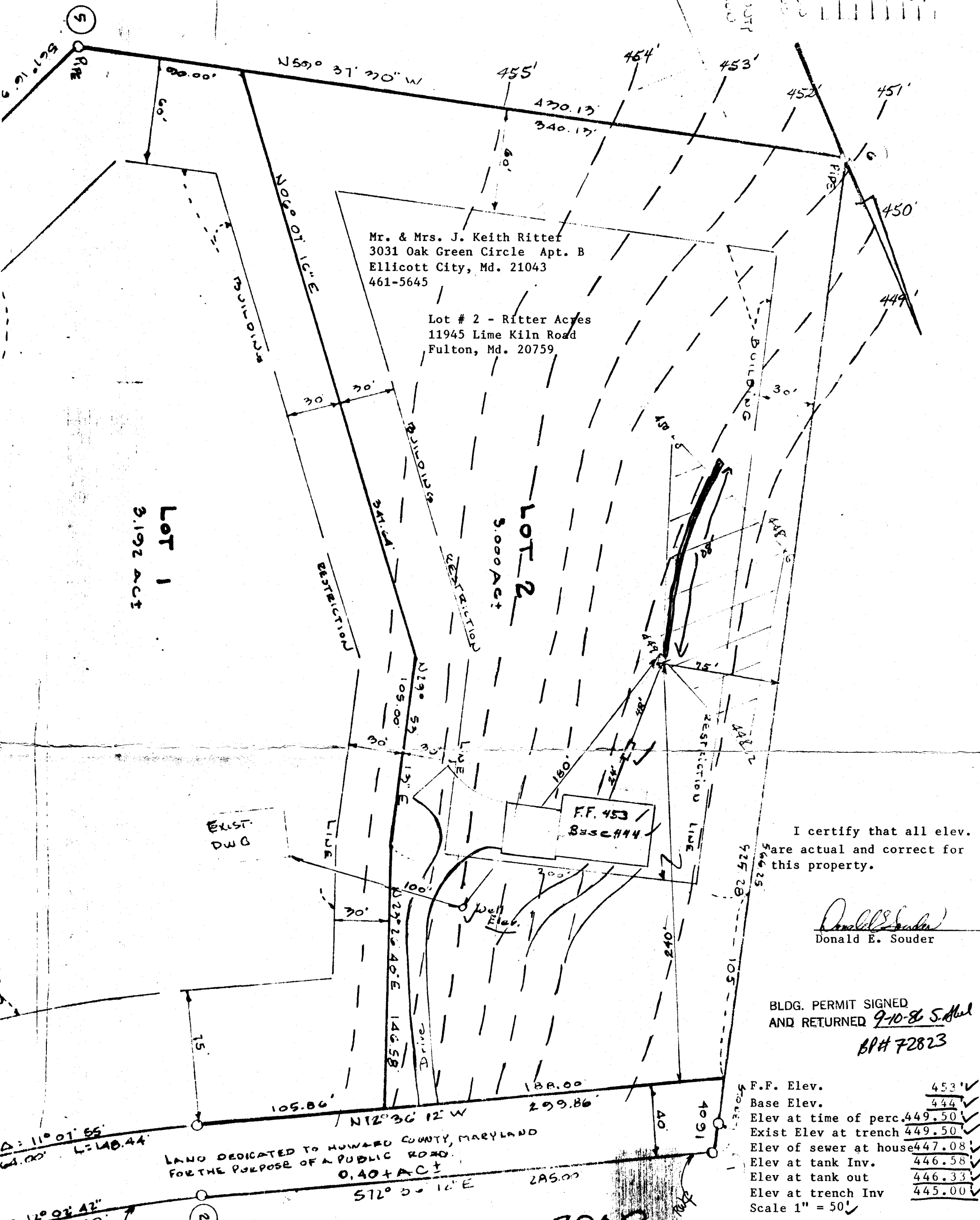
County: 13 Plant No.      Sampling Station      Date Collected 072386 Time 1130 <sup>A</sup>M  Acid  Iced

Field Data: pH\*      Chlorine Residual      Free      Total      Specific Conductance     

✓	ANALYSIS	CODE	RESULTS	✓	ANALYSIS	CODE	RESULTS
	pH*	011			Arsenic	253	
	Alkalinity (Total)	040			Barium	262	
	Alkalinity (HCO <sub>3</sub> )	050			Cadmium	273	
	Alkalinity (CO <sub>3</sub> )	060			Chromium	283	
	pH*, Ca CO <sub>3</sub> SAT.	071			Lead	302	
	Alkalinity, Ca CO <sub>3</sub> SAT	080			Mercury	314	
	Hardness	110			Selenium	323	
	Ammonia-N	143			Silver	333	
✓	Nitrate-Nitrite N	162	<u>0.7</u>		Aluminum*	192	
	Nitrite N	173			Calcium	231	
	MBAS	182			Copper	241	
	Chloride	091			Iron	122	
	Fluoride	101			Magnesium	241	
	Color*	020			Manganese	133	
	Turbidity*	031			Nickel	391	
	Conductance*, SPEC.	201			Potassium	361	
	Silica	210			Sodium	371	
	Sulfate	220			Zinc	342	
	Total Residue	381					

\* Results reported in units, all others in milligrams per liter (ppm)

Date Received      Date Reported Jul 30 1986 Chemist      Lab No. 0-358



Mr. & Mrs. J. Keith Ritter  
 3031 Oak Green Circle Apt. B  
 Ellicott City, Md. 21043  
 461-5645

Lot # 2 - Ritter Acres  
 11945 Lime Kiln Road  
 Fulton, Md. 20759

Lot 1  
 3.192 Act

Lot 2  
 3.000 Act

I certify that all elev.  
 are actual and correct for  
 this property.

*Donald E. Souder*  
 Donald E. Souder

BLDG. PERMIT SIGNED  
 AND RETURNED 9-10-86 S. Abel  
 BP# 72823

F.F. Elev.	453.1
Base Elev.	444
Elev at time of perc.	449.50
Exist Elev at trench	449.50
Elev of sewer at house	447.08
Elev at tank Inv.	446.58
Elev at tank out	446.33
Elev at trench Inv	445.00
Scale	1" = 50'

LAND DEDICATED TO HOWARD COUNTY, MARYLAND  
 FOR THE PURPOSE OF A PUBLIC ROAD.  
 0.40+ACT

11945 LIME KILN ROAD

9-10-86  
 elevations ok  
 ok to use one  
 trench 108' long  
 in 3BR w/o disposal  
 S. Abel

45'-9.5"  
 180 P/BR  
 3BR  
 108' trench  
 RECEIVED  
 HOWARD COUNTY  
 HEALTH DEPT.  
 SEP 10 9 03 AM '86  
 ENVIRONMENTAL  
 HEALTH