

WELL LOG AND DRILLING REPORT

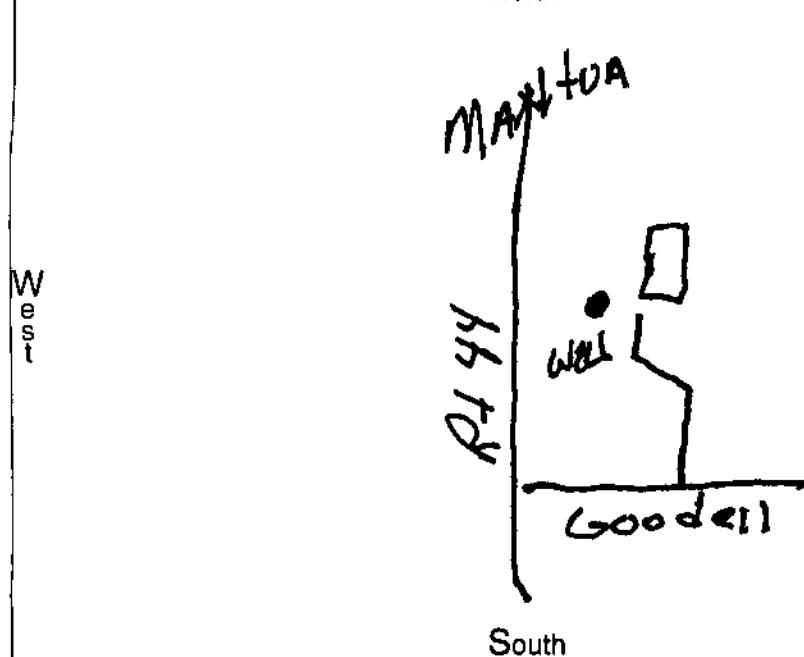
TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARDOhio Department of Natural Resources
Division of Water, 2045 Morse Road

Columbus, Ohio 43229-6605 Voice (614) 265-6740 Fax (614) 265-6767

1001474

WELL LOCATION

CONSTRUCTION DETAILS

County Portage Township ShalersvilleOwner/Builder MICHAEL MAREK
(Circle One or Both) First LastAddress of Well Location 4787 Goodell Rd
Number Street NameCity MANTUA Zip Code +4 44255Permit No. 07-41 Section/Lot No. _____
(Circle One or Both)Location of Well in State Plane
coordinates, if available:N ☐ X ☐ +/- _____ ft. or mS ☐ Y ☐ +/- _____ ft. or mElevation of Well 1170' +/- _____ ft. or mDatum Plain: ☐ NAD27 ☐ NAD83 Elevation Source GPSSource of Coordinates: ☒ GPS ☐ Survey ☐ OtherSketch a map showing distance well lies from numbered state highways, street
intersections, county roads, buildings or other notable landmarks. If latitude and
longitude are available please include here: Lat: 41°16'20" Long: 082°47'
North☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____
BOREHOLE/CASING (measured from ground surface)1 ☒ Borehole Diameter 6 5/8 inches Depth 80 ft.Casing Diameter 6 5/8 in. Length 40 ft. Thickness 188 in.2 ☐ Borehole Diameter _____ inches Depth _____ ft.

Casing Diameter _____ in. Length _____ ft. Thickness _____ in.

Casing Height Above Ground 1-4" ft.Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____Joints 1 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____

SCREEN

Diameter N/A Slot Size _____ Screen Length _____ ft.

Type _____ Material _____

Set Between _____ ft. and _____ ft.

GRAVEL PACK (Filter Pack)

Material/Size N/A Volume/Weight Used _____

Method of Installation _____

Depth: Placed FROM _____ ft. TO _____ ft.

GROUT

Material Benoseal Volume/Weight Used 150#Method of Installation Dry driven / Grout pourDepth: Placed FROM 39 ft. TO SURFACE ft.

DRILLING LOG*

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

Show color, texture, hardness, and formation:
sandstone, shale, limestone, gravel, clay, sand, etc.

	From	To
<u>Yellow clay w/snd</u>	<u>0</u>	<u>18</u>
<u>Red sandstone w/mud shans</u>	<u>18</u>	<u>41</u>
<u>Tan sandstone</u>	<u>41</u>	<u>52</u>
<u>Gray shale (water bearing)</u>	<u>52</u>	<u>67</u>
<u>Light gray shale</u>	<u>67</u>	<u>80</u>

WELL TEST*

Pre-Pumping Static Level 26 ft. Date 7/17/07Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____Test Rate 25 gpm Duration of Test 2 1/2 hrs.Feet of Drawdown 52 ft. Sustainable Yield 20 gpm

*(Attach a copy of the pumping test record, per section 1521.05, ORC)

Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ NoQuality Clear

PUMP/PITLESS

Type of pump _____ Capacity _____ gpm

Pump set at _____ ft. Pitless Type _____

Pump installed by _____

I hereby certify the information given is accurate and correct to the best of my knowledge.

Drilling Firm CUNNINGHAM WELL DRILLINGAddress 5495 St. Rt 534City, State, Zip ROME OH 44085Signed [Signature] Date 7/17/07ODH Registration Number 850

*(If more space is needed to complete drilling log, use next consecutively numbered form.)

Date of Well Completion 7/17/07 Total Depth of Well 80' ft.Completion of this form is required by section 1521.05, Ohio Revised Code - file within 30 days after completion of drilling.
ORIGINAL COPY TO - ODNR, DIVISION OF WATER, 2045 MORSE ROAD, COLS., OHIO 43229-6605
Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy