

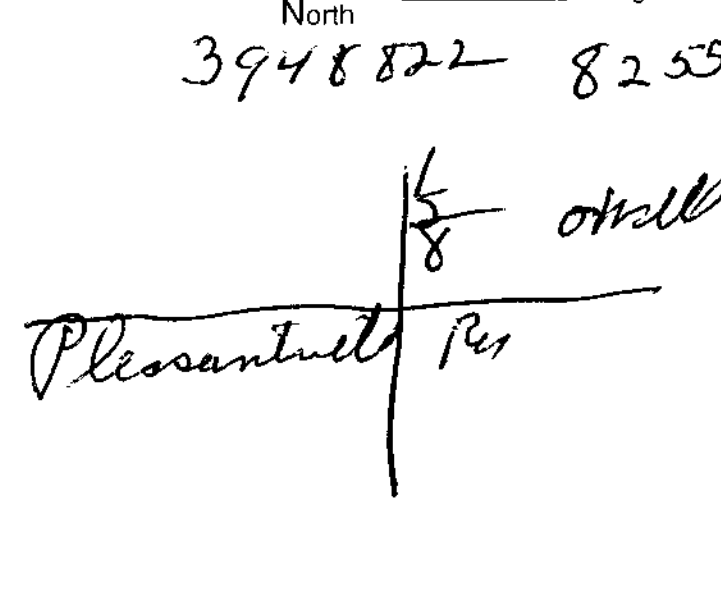
WELL LOG AND DRILLING REPORT

Ohio Department of Natural Resources

Division of Water, 2045 Morse Road

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

1003865

WELL LOCATION		CONSTRUCTION DETAILS	
County <u>Hanford</u>	Township <u>Lilburn</u> <u>Chum</u>		
Owner/Builder First Last <u>Alecia Pleasantville</u>			
Address of Well Location Number Street Name <u>480 Pleasantville</u>			
City <u>Baltimore</u> Zip Code +4 <u>3105</u>			
Permit No. <u>2008-120</u> Section/Lot No. (Circle One or Both)			
Location of Well in State Plane coordinates, if available:		Use of Well <u>House</u>	
N ☐ X _____ +/- ft. or m.	S ☐ Y _____ +/- ft. or m.		
Elevation of Well <u>937</u> . <u>10</u> +/- <u>18</u> ft. or m.	Datum Plain: ☒ NAD27 ☐ NAD83 Elevation Source _____		
Source of Coordinates: ☒ GPS ☐ Survey ☐ Other _____			
Sketch 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: _____ Long: _____ West East North 			
☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____			
BOREHOLE/CASING (measured from ground surface)			
Borehole Diameter _____ inches Depth _____ ft.		Casing Diameter <u>6" O.D.</u> Length <u>41</u> ft. Thickness <u>.188</u> in.	
Borehole Diameter _____ inches Depth _____ ft.		Casing Diameter _____ in. Length _____ ft. Thickness _____ in.	
Casing Height Above Ground _____ ft.			
Type ☒ Steel ☐ Galv. ☐ PVC ☐ Other _____	Joints ☒ Threaded ☐ Welded ☐ Solvent ☐ Other _____		
SCREEN			
Diameter _____ Slot Size _____ Screen Length _____ ft.		Type _____ Material _____	
Set Between _____ ft. and _____ ft.			
GRAVEL PACK (Filter Pack)			
Material/Size _____ Volume/Weight Used _____		Method of Installation _____	
Depth: Placed FROM _____ ft. TO _____ ft.			
GROUT			
Material <u>Ben Seal Dry Grout</u> Volume/Weight Used <u>50</u>		Method of Installation _____	
Depth: Placed FROM _____ ft. TO _____ 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</u>	<u>0</u>	<u>15</u>	
<u>Blue clay</u>	<u>15</u>	<u>33</u>	
<u>Blue soil</u>	<u>33</u>	<u>41</u>	
WELL TEST*			
Pre-Pumping Static Level <u>5</u> ft. Date <u>8-29-08</u>		Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____	
☐ Air ☐ Bailing ☒ Pumping* ☐ Other _____			
Test Rate <u>15</u> gpm Duration of Test <u>1</u> hrs.		Feet of Drawdown <u>10</u> ft. Sustainable Yield <u>15</u> gpm	
*(Attach a copy of the pumping test record, per section 1521.05, ORC)			
Is Copy Attached? Yes ☒ No ☐ Flowing Well? Yes ☐ No ☐ Quality _____			
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 <u>Karl Short Drill Co.</u>			
Address <u>Rt 65</u>			
City, State, Zip <u>Fallsville, MD 43136</u>			
Signed <u>/Karl Short</u> Date <u>8-29-08</u>		(If more space is needed to complete drilling log, use next consecutively numbered form.)	
ODH Registration Number _____		Date of Well Completion <u>8-29-08</u>	Total Depth of Well <u>41</u> 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