

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

1005890

WELL LOCATION

County **KNOX** Township **BUTLER**

Owner/Builder **LEVI A. TROYER**
(Circle One or Both) First Last

Address of Well Location **30256 BRUSH RUN RD**
Number Street Name

City **HOWARD OH** Zip Code +4 **43028**

Permit No. **2007-096** Section/Lot No. _____
(Circle One or Both)

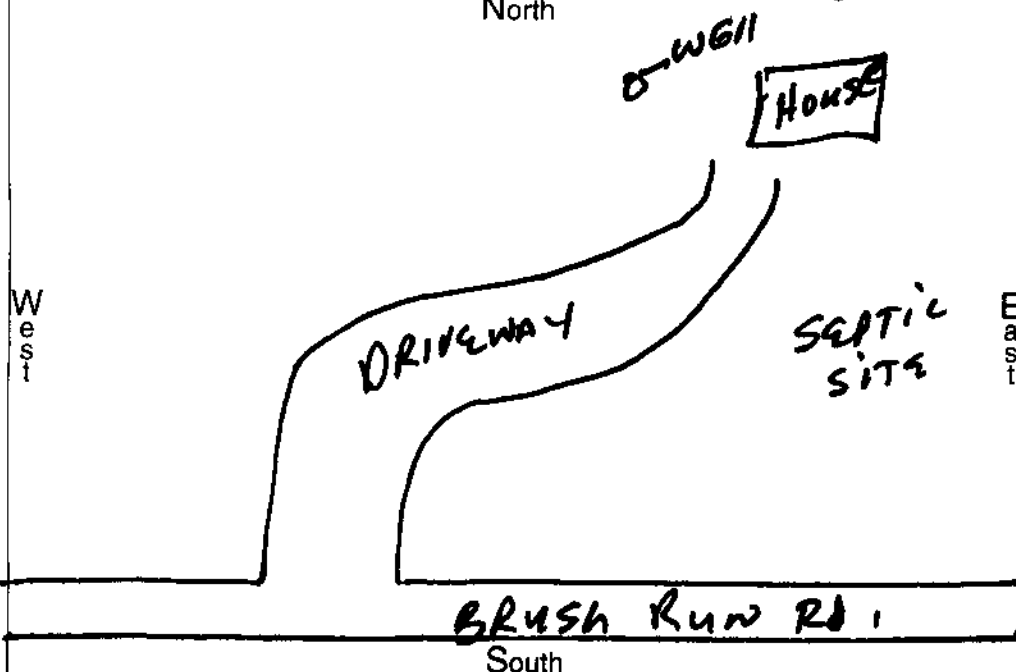
Location of Well in State Plane coordinates, if available: Use of Well **PRIVATE**
N ☒ **X** **N** **40 20.924** +/- ft. or m
S ☐ **Y** **W** **082 12.083** +/- ft. or m

Elevation of Well +/- 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: _____
North



WELL TEST*

Pre-Pumping Static Level **75** ft. Date **8-15-07**

Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____

☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____

Test Rate **10** gpm Duration of Test **1** hrs.

Feet of Drawdown **15** ft. Sustainable Yield **8** gpm

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

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

Quality **GOOD**

PUMP/PITLESS

Type of pump **OWNER TO INSTAL** 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 **CARROLL'S WELL&PUMP**

Address **29959 STAATS RD**

City, State, Zip **HOWARD OH 43028**

Signed **Carroll's Well & Pump** Date **9-15-07**

ODH Registration Number **2562**

CONSTRUCTION DETAILS

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____

BOREHOLE/CASING (measured from ground surface)

☒ Borehole Diameter **10** inches Depth **27** ft.

Casing Diameter **6** in. Length **27** ft. Thickness **SDR 21** in.

☐ Borehole Diameter _____ inches Depth _____ ft.

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

Casing Height Above Ground **2** ft.

Type 1 ☐ Steel 1 ☐ Galv. 1 ☒ PVC 1 ☐ _____

2 ☐ _____ 2 ☐ _____ 2 ☐ _____ 2 ☐ _____

Joints 1 ☐ Threaded 1 ☐ Welded 1 ☒ Solvent 1 ☐ _____

2 ☐ _____ 2 ☐ _____ 2 ☐ _____ 2 ☐ _____

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 **BENTONITE** Volume/Weight Used **450 LBS**

Method of Installation **POURED**

Depth: Placed FROM **27** ft. TO **0** 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
CLAY&SHALE	0	25
GRAY SHALE	25	90
SANDSTONE	90	97
GRAY SHALE	97	130

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

Date of Well Completion **8-15-07** Total Depth of Well **130** 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