

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

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

1009871

WELL LOCATION**CONSTRUCTION DETAILS**

County Summit Township Springfield

Owner/Builder GARY SUMMERVILLE
(Circle One or Both) First Last

Address of Well Location 543 Edith Ave
Number Street Name

City AKRON Zip Code +4 44311

Permit No. 389863 Section/Lot No. _____
(Circle One or Both)

Location of Well in State Plane coordinates, if available:

Use of Well RESIDENTIAL

N ☒ X ☐ +/- _____ ft. or m

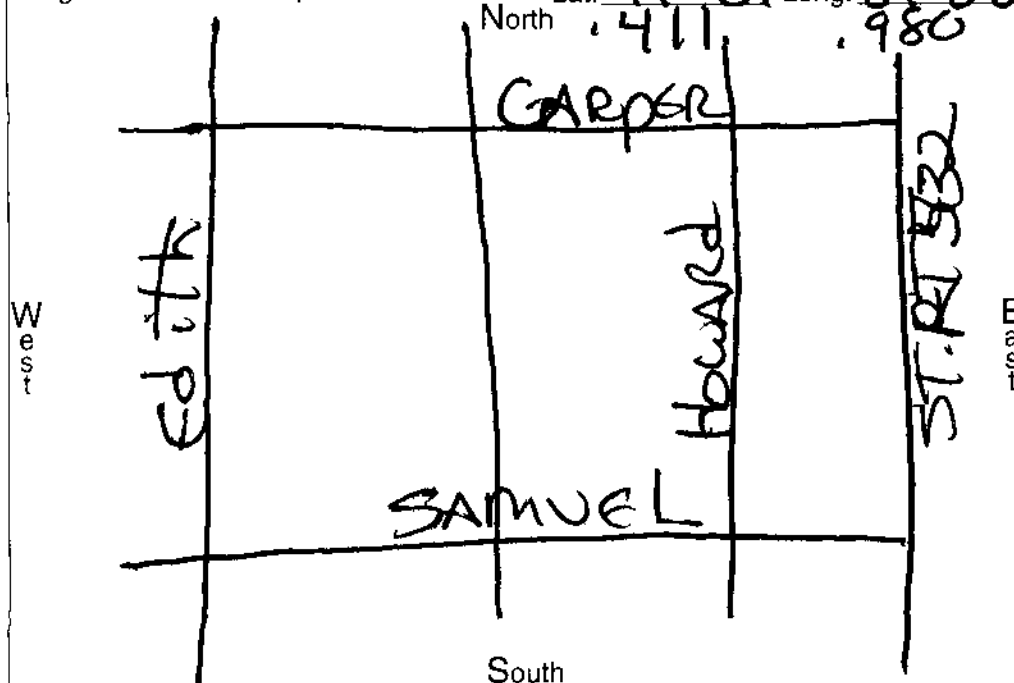
S ☐ Y ☒ +/- _____ ft. or m

Elevation of Well 365' +/- _____ 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: 41° 01' 41" N Long: 81° 26' 01" W



☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____

BOREHOLE/CASING (measured from ground surface)

1 ☐ Borehole Diameter _____ inches Depth 60' ft.
Casing Diameter 5 1/16" in. Length 38 ft. Thickness .275 in.

2 ☐ Borehole Diameter _____ inches Depth _____ ft.
Casing Diameter _____ in. Length _____ ft. Thickness _____ in.

Casing Height Above Ground 15" 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 _____ 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 DRY Volume/Weight Used 150 LBS

Method of Installation DRY

Depth: Placed FROM 0 ft. TO 36 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>CLAY & GRAVEL</u>	<u>0</u>	<u>19</u>
<u>SHALE</u>	<u>19</u>	<u>60</u>

WELL TEST*

Pre-Pumping Static Level 20 ft. Date 7-17-08

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

☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____

Test Rate 20 gpm Duration of Test 2 hrs.

Feet of Drawdown 15 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 ☒ No

Quality CLEAR

PUMP/PITLESS

Type of pump Goulds SUB Capacity 10 gpm

Pump set at 50 ft. Pitless Type SNAPPY Bulldog

Pump installed by COOPER WELL

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

Drilling Firm COOPER WELL DRILLING INC.

Address 2206 KILLIAN RD

City, State, Zip AKRON OHIO 44312

Signed Carl Cooper Date 7-17-08

ODH Registration Number 125

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

Date of Well Completion 7-17-08 Total Depth of Well 60 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