

WELL LOG AND DRILLING REPORT

1010199

Ohio Department of Natural Resources

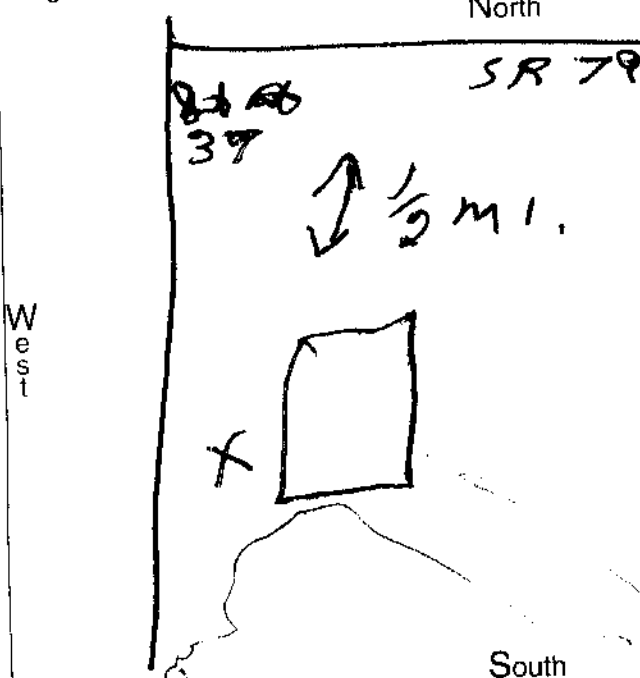
Division of Water, 2045 Morse Road

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

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOCATION		CONSTRUCTION DETAILS	
County <u>Fairfield</u>	Township <u>Walnut</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other	
Owner/Builder <u>Robert State II</u>	First Last	BOREHOLE/CASING (measured from ground surface)	
Address of Well Location <u>13750 Lincolnton Newark Rd</u>	Number Street Name	1 ☐ Borehole Diameter <u>5</u> inches	Depth <u>48</u> ft.
City <u>Millersport</u>	Zip Code +4 <u>3046</u>	Casing Diameter <u>5</u> in. Length <u>49</u> ft. Thickness <u>258</u> in.	
Permit No. <u>2012-86</u>	Section/Lot No. <u>Residential</u>	2 ☐ Borehole Diameter _____ inches	Depth _____ ft.
Location of Well in State Plane coordinates, if available:	Use of Well	Gasing Diameter _____ in. Length _____ ft. Thickness _____ in.	
N <u>39-55-484</u> +/- ft. or m		Casing Height Above Ground <u>1.4</u> ft.	
S <u>082-32-726</u> +/- ft. or m		Type ☐ Steel ☐ Galv. ☐ PVC ☐ Other	
Elevation of Well <u>1006</u> +/- ft. or m		Joints ☐ Threaded ☐ Welded ☐ Solvent ☐ Other	
Datum Plain: ☐ NAD27 ☐ NAD83	Elevation Source	SCREEN	
Source of Coordinates ☒ GPS ☐ Survey ☐ Other		Diameter <u>5</u> Slot Size <u>3/16</u> Screen Length <u>2</u> ft.	
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: _____		Type <u>SHOTS</u> Material <u>1 IN CASING</u>	
		Set Between <u>44</u> ft. and <u>46</u> ft.	
		GRAVEL PACK (Filter Pack)	
		Material/Size _____	Volume/Weight Used _____
		Method of Installation _____	
		Depth: Placed FROM _____ ft. TO _____ ft.	
		GROUT	
		Material <u>Ben Seal</u> Volume/Weight Used <u>80 lb</u>	
		Method of Installation <u>Pump as Piped</u>	
		Depth: Placed FROM <u>26</u> ft. TO <u>4</u> ft.	

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: _____



WELL TEST*	
Pre-Pumping Static Level <u>15</u> ft.	Date <u>9-2-10</u>
Measured from: ☐ Top of Casing ☐ Ground Level ☐ Other	
☐ Air ☐ Bailing ☐ Pumping* ☐ Other	
Test Rate <u>20</u> gpm	Duration of Test <u>1</u> hrs.
Feet of Drawdown <u>10</u> ft.	Sustainable Yield <u>20</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 <u>Clear</u>	

PUMP/PITLESS	
Type of pump <u>SUBM</u>	Capacity <u>12</u> gpm
Pump set at <u>35</u> ft.	Pitless Type <u>Diaphragm</u>
Pump installed by <u>Remuda</u>	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>Remuda</u>	
Address <u>Box 231</u>	
City, State, Zip <u>Buckeye Lake</u>	
Signed <u>R.L. Remuda</u>	Date <u>9-2-10</u>
ODH Registration Number <u>136</u>	

DRILLING LOG*		
INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.	From	To
Clay	0	20
Sand	20	23
Clay	23	42
Sand & Gravel	42	46
Clay	46	48
Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.		
*(If more space is needed to complete drilling log, use next consecutively numbered form.)		
Date of Well Completion <u>9-2-10</u>	Total Depth of Well <u>48</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