

WELL LOG AND DRILLING REPORT

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

Ohio Department of Natural Resources

Division of Water, 2045 Morse Road

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

1010571

WELL LOCATION

CONSTRUCTION DETAILS

County Coshocton Township Adams
Owner/Builder Donna Rand
(Circle One or Both) First Last
Address of Well Location 25304 Adams Trl 251
Number Street Name
City Newcomerstown Zip Code +4 43882
Permit No. Section/Lot No.
(Circle One or Both)
Location of Well in State Plane coordinates, if available: Use of Well Agriculture
N X N 40° 18.911' +/- ft. or m
S Y W 081° 39.204' +/- ft. or m
Elevation of Well 831 +/- ft. or m
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source GPS
Source of Coordinates: ☒ GPS ☐ Survey ☐ Other

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other
BOREHOLE/CASING (measured from ground surface)
1 ☐ Borehole Diameter 10 1/2 inches Depth 80 ft.
Casing Diameter 5.56 in. Length 40 ft. Thickness .265 in.
2 ☐ Borehole Diameter _____ inches Depth _____ ft.
Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
Casing Height Above Ground 1' 2" 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 5.56 Slot Size 032 Screen Length 40 ft.
Type PVC slotted fabric Material PVC
Set Between 40 ft. and 80 ft.

GRAVEL PACK (Filter Pack)

Material/Size gravel #20 Volume/Weight Used 2300#
Method of Installation Pour in
Depth: Placed FROM 80 ft. TO 40 ft.

GROUT

Material 78 Bentonite Volume/Weight Used 1250#
Method of Installation Pour in
Depth: Placed FROM 85 ft. TO 0 ft.

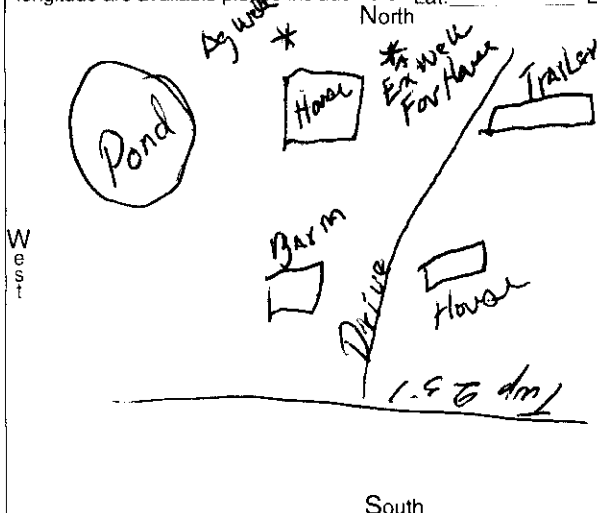
DRILLING LOG*

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

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

	From	To
Top soil	0	3
Brown shale	3	27
gray shale	27	37
Brown sandstone	37	47
gray sandstone	47	66
Limestone	66	68
gray sandstone	68	74
gray shale	74	80

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 40 ft. Date 7/5/09
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other
☐ Air ☒ Bailing ☐ Pumping* ☐ Other
Test Rate 12 gpm Duration of Test 3 hrs.
Feet of Drawdown 50 ft. Sustainable Yield 12 gpm
(Attach a copy of the pumping test record, per section 1521.05, ORC)
Is Copy Attached? ☐ Yes ☐ No Flowing Well? ☐ Yes ☒ No
Quality Cloudy

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 Sheets Machinery
Address 5000 TR 146
City, State, Zip Coshocton Ohio 43812

Signed Rodney Sheets Date 7/14/09
ODH Registration Number 000727

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

Date of Well Completion 7/5/09 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