

WELL LOG AND DRILLING REPORT

1014671

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

Ohio Department of Natural Resources
Division of Soil and Water Resources, 2045 Morse Road Building B
Columbus, Ohio 43229-6693 Voice (614) 265-6740 Fax (614) 265-6767

WELL LOCATION	CONSTRUCTION DETAILS
County <u>Hocking</u> Township <u>Benton</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other BOREHOLE/CASING (measured from ground surface)
Owner/Builder (Circle One or Both) <u>Dan G. L. Filler</u>	1 ☐ Borehole Diameter <u>7"</u> inches, Depth <u>73'</u> ft. Casing Diameter <u>7"</u> in. Length <u>40-7'</u> ft. Thickness <u>.44</u> in.
Address of Well Location <u>23270 SR#56</u>	2 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
City <u>South Bloomingville</u> Zip Code <u>+4</u> <u>43152</u>	Casing Height Above Ground <u>18"</u> ft.
Permit No. <u>2011-003</u> Section/Lot No. _____	Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐ Other
Location of Well in State Plane coordinates, if available: Use of Well <u>Domestic</u>	Joints 1 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐ Other
N ☐ X _____ +/- _____ ft. or m	SCREEN
S ☐ Y _____ +/- _____ ft. or m	Diameter _____ Slot Size _____ Screen Length _____ ft.
Elevation of Well _____ +/- _____ ft. or m	Type _____ Material _____
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____	Set Between _____ ft. and _____ ft.
Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____	GRAVEL PACK (Filter Pack)
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 _____ South _____	Material/Size _____ Volume/Weight Used _____ Method of Installation _____ Depth: Placed FROM _____ ft. TO _____ ft.
	GROUT
	Material <u>Benseal</u> Volume/Weight Used <u>160#</u>
	Method of Installation <u>Backfilled as Driven</u>
	Depth: Placed FROM <u>39</u> ft. TO <u>Surface</u> ft.
WELL TEST*	DRILLING LOG*
Pre-Pumping Static Level <u>19'</u> ft. Date <u>3</u>	INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____	Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.
☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____	
Test Rate <u>15</u> gpm Duration of Test <u>1 1/2</u> hrs.	
Feet of Drawdown <u>33'</u> ft. Sustainable Yield _____ 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 <u>Submersible</u> Capacity <u>12</u> gpm	
Pump set at <u>63</u> ft. Pitless Type <u>Adapter</u>	
Pump installed by <u>Tom Gobel well Drilling LLC</u>	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>Tom Gobel well Drilling LLC</u>	
Address <u>10919 Cin. Zanesville Rd</u>	
City, State, Zip <u>Amanda, Ohio, 43102</u>	
Signed <u>Tom Gobel</u> Date <u>Feb 3, 2011</u>	
ODH Registration Number <u>108</u>	

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

Date of Well Completion Feb 3, 2011 Total Depth of Well 73' 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 SOIL AND WATER RESOURCES, 2045 MORSE ROAD BLD. B, COLS., OHIO 43229-6693

Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy