

WELL LOCATION	CONSTRUCTION DETAILS
County <u>Portage</u> Township <u>Hiram</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____
Owner/Builder (Circle One or Both) <u>Debra Blake</u>	BOREHOLE/CASING (measured from ground surface)
Address of Well Location <u>7591 STR 305</u>	1 ☒ Borehole Diameter <u>5.5</u> inches Depth <u>125</u> ft.
City <u>Hiram</u> Zip Code +4 <u>44234</u>	Casing Diameter <u>6</u> in. Length <u>28.5</u> ft. Thickness <u>.188</u> in.
Permit No. <u>17146</u> Section/Lot No. _____	2 ☐ Borehole Diameter _____ inches Depth _____ ft.
Location of Well in State Plane coordinates, if available: _____	Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
Use of Well <u>domestic</u>	Casing Height Above Ground <u>1'6"</u> ft.
N ☐ X _____ +/- _____ ft. or m	Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐ Other _____
S ☐ Y _____ +/- _____ ft. or m	2 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐ Other _____
Elevation of Well <u>1160</u> +/- _____ ft. or m	SCREEN
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____	Diameter _____ Slot Size _____ Screen Length _____ ft.
Source of Coordinates: ☒ GPS ☐ Survey ☐ Other _____	Type _____ Material _____
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: _____ <u>N 41° 18' 39" W 081° 01' 51"</u> 	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 <u>bentonite</u> Volume/Weight Used <u>#100</u>
	Method of Installation <u>drop driven</u>
	Depth: Placed FROM <u>0</u> ft. TO <u>28</u> ft.
WELL TEST*	DRILLING LOG*
Pre-Pumping Static Level <u>80</u> ft. Date <u>10-24-17</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 _____	From To
Test Rate <u>15</u> gpm Duration of Test <u>6</u> hrs.	<u>brown sand gravel clay</u> 0 4
Feet of Drawdown <u>20</u> ft. Sustainable Yield <u>15</u> gpm	<u>taw clay & sand</u> 4 10
*(Attach a copy of the pumping test record, per section 1521.05, ORC)	<u>Light gray clay & sand</u> 10 16
Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ No	<u>dark gray clay</u> 16 25
Quality _____	<u>gray sand stone soft</u> 25 28
	<u>dark gray sandstone getting lighter with depth</u> 28 125
	<u>water at</u> 115 120
PUMP/PITLESS	
Type of pump <u>1/2 hp sub</u> Capacity <u>10</u> gpm	
Pump set at <u>115</u> ft. Pitless Type <u>Pull Through</u>	
Pump installed by <u>Marty</u>	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>Pickens well (Marty's Pump)</u>	
Address <u>P.O. Box 155</u>	
City, State, Zip <u>Mantua OH 44255</u>	
Signed <u>Marty</u> Date <u>11-1-17</u>	
ODH Registration Number <u>953</u>	
*(If more space is needed to complete drilling log, use next consecutively numbered form.)	
Date of Well Completion <u>10-27-17</u> Total Depth of Well <u>125</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 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