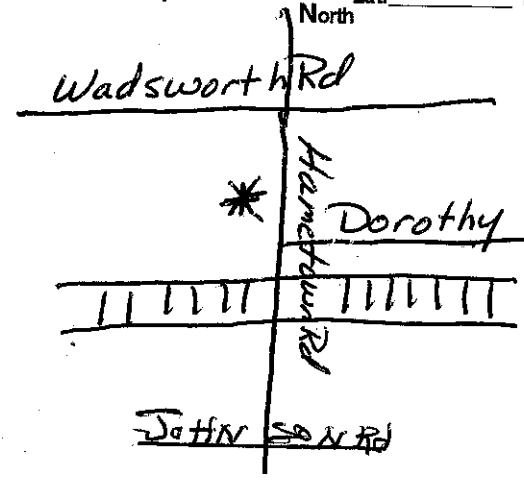


TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND BORING REPORT

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

1020440

WELL LOCATION		CONSTRUCTION DETAILS																
County <u>Summit</u> Township <u>Norton</u> Owner/Builder <u>Jerney Lester</u> Address of Well Location <u>4226 Hametown Rd</u> City <u>Norton</u> Zip Code +4 <u>44203</u> Permit No. <u>536244</u> Section/Lot No. <u>Domestic</u> Location of Well in State Plane coordinates, if available: N <u>41°11'</u> E <u>12'</u> +/- <u>0</u> ft or m S <u>081°40'</u> W <u>03'</u> +/- <u>5</u> ft or m Elevation of Well <u>18</u> ft or m Datum Plain: ☐ NAD27 ☒ NAD83 Elevation Source <u>GPS</u> Source of Coordinates: ☒ GPS ☐ Survey ☐ Other		☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other BOREHOLE/CASING (measured from ground surface) 1 ☐ Borehole Diameter <u>5</u> inches Depth <u>195</u> ft Casing Diameter <u>5 9/16</u> in. Length <u>163</u> ft Thickness <u>275</u> in. 2 ☐ Borehole Diameter _____ inches Depth _____ ft Casing Diameter _____ in. Length _____ ft Thickness _____ in. Casing Height Above Ground <u>18</u> 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 <u>Wyober</u> Volume/Weight Used <u>150/16</u> Method of Installation <u>Dry Driven</u> Depth: Placed FROM <u>0</u> ft TO <u>160</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: _____ 		DRILLING LOG* INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED. Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>Brown Sand & Gravel</td> <td>0</td> <td>71</td> </tr> <tr> <td>Gray Shale</td> <td>71</td> <td>165</td> </tr> <tr> <td>Gray Sandstone</td> <td>165</td> <td>195</td> </tr> <tr> <td>(Water)</td> <td></td> <td></td> </tr> </tbody> </table>			From	To	Brown Sand & Gravel	0	71	Gray Shale	71	165	Gray Sandstone	165	195	(Water)		
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WELL TEST* Pre-Pumping Static Level <u>50</u> ft. Date _____ 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>25</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 _____ Capacity _____ gpm Pump set at _____ ft Pitless Type _____ Pump installed by <u>Clinton Well & Pump</u> I hereby certify the information given is accurate and correct to the best of my knowledge. Drilling Firm <u>Robert E Smith</u> Address <u>1134 Swigart Rd</u> City, State, Zip <u>New Franklin OH 44203</u> Signed <u>Robert E Smith</u> Date <u>9-5-18</u> ODH Registration Number <u>247</u>																		

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