

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING 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

1021305

WELL LOCATION		CONSTRUCTION DETAILS																												
County <u>Rocking</u> Township <u>Marion</u> Owner/Builder <u>Griffey Strawn</u> Address of Well Location <u>33064 Marville Rd</u> City <u>Bremen</u> Zip Code +4 <u>43107</u> Permit No. <u>181-95</u> Section/Lot No. <u>43107</u> Location of Well in State Plane coordinates, if available: Use of Well _____ N ☐ X _____ ft. or m S ☐ Y _____ ft. or m Elevation of Well _____ ft. or m Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____ Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____		☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____ BOREHOLE/CASING (measured from ground surface) 1 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter <u>5 8</u> in. Length <u>SPR17</u> ft. Thickness _____ in. 2 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in. Casing Height Above Ground <u>18 in</u> Type 1 ☐ Steel 1 ☐ Galv. 1 ☒ PVC 1 ☐ Other _____ 2 ☐ Steel 2 ☐ Galv. 2 ☐ PVC 2 ☐ Other _____ Joints 1 ☐ Threaded 1 ☐ Welded 1 ☒ Solvent 1 ☐ Other _____ 2 ☐ Threaded 2 ☐ Welded 2 ☐ Solvent 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>Weld Plug + Cement</u> Volume/Weight Used _____ Method of Installation <u>Packing</u> Depth: Placed FROM <u>113</u> ft. TO <u>Top</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: _____ North South		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 style="text-align: center;">From</th> <th style="text-align: center;">To</th> </tr> </thead> <tbody> <tr> <td><u>Top Soil</u></td> <td style="text-align: center;"><u>0</u></td> <td style="text-align: center;"><u>5</u></td> </tr> <tr> <td><u>Sand Stone</u></td> <td style="text-align: center;"><u>5</u></td> <td style="text-align: center;"><u>10</u></td> </tr> <tr> <td><u>Shale</u></td> <td style="text-align: center;"><u>10</u></td> <td style="text-align: center;"><u>50</u></td> </tr> <tr> <td><u>Lime Stone</u></td> <td style="text-align: center;"><u>50</u></td> <td style="text-align: center;"><u>60</u></td> </tr> <tr> <td><u>Gray Sand Rock</u></td> <td style="text-align: center;"><u>60</u></td> <td style="text-align: center;"><u>117</u></td> </tr> <tr> <td><u>Shale Rock</u></td> <td style="text-align: center;"><u>117</u></td> <td style="text-align: center;"><u>150</u></td> </tr> <tr> <td><u>Sand Rock</u></td> <td style="text-align: center;"><u>150</u></td> <td style="text-align: center;"><u>180</u></td> </tr> <tr> <td><u>Shale</u></td> <td style="text-align: center;"><u>180</u></td> <td style="text-align: center;"><u>200</u></td> </tr> </tbody> </table>			From	To	<u>Top Soil</u>	<u>0</u>	<u>5</u>	<u>Sand Stone</u>	<u>5</u>	<u>10</u>	<u>Shale</u>	<u>10</u>	<u>50</u>	<u>Lime Stone</u>	<u>50</u>	<u>60</u>	<u>Gray Sand Rock</u>	<u>60</u>	<u>117</u>	<u>Shale Rock</u>	<u>117</u>	<u>150</u>	<u>Sand Rock</u>	<u>150</u>	<u>180</u>	<u>Shale</u>	<u>180</u>	<u>200</u>
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WELL TEST* Pre-Pumping Static Level <u>174</u> ft. Date _____ Measured from: ☒ Top of Casing ☐ Ground Level ☐ Other _____ ☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____ Test Rate <u>60</u> gpm Duration of Test <u>1/2</u> hrs. Feet of Drawdown <u>20</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 <u>Clear</u>																														
PUMP/PITLESS Type of pump <u>3/4 Gould</u> Capacity <u>10</u> gpm Pump set at <u>150</u> ft. Pitless Type <u>Merl</u> Pump installed by _____ I hereby certify the information given is accurate and correct to the best of my knowledge. Drilling Firm <u>Neckros Well Drilling</u> Address <u>8095 Lewis Rd 241 SE</u> City, State, Zip <u>New Blacksburg Ohio</u> Signed <u>John W. Neiberg</u> Date <u>11-23-98</u> ODH Registration Number <u>18049</u>		(If more space is needed to complete drilling log, use next consecutively numbered form.) Date of Well Completion <u>12-10-95</u> Total Depth of Well <u>200</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