

Well Log Number

DNR 7802.05e

Ohio Department of Natural Resources
Division of Geological Survey, 2045 Morse Road, Columbus, Ohio 43229-6605
Phone (614) 265-6576

3004997

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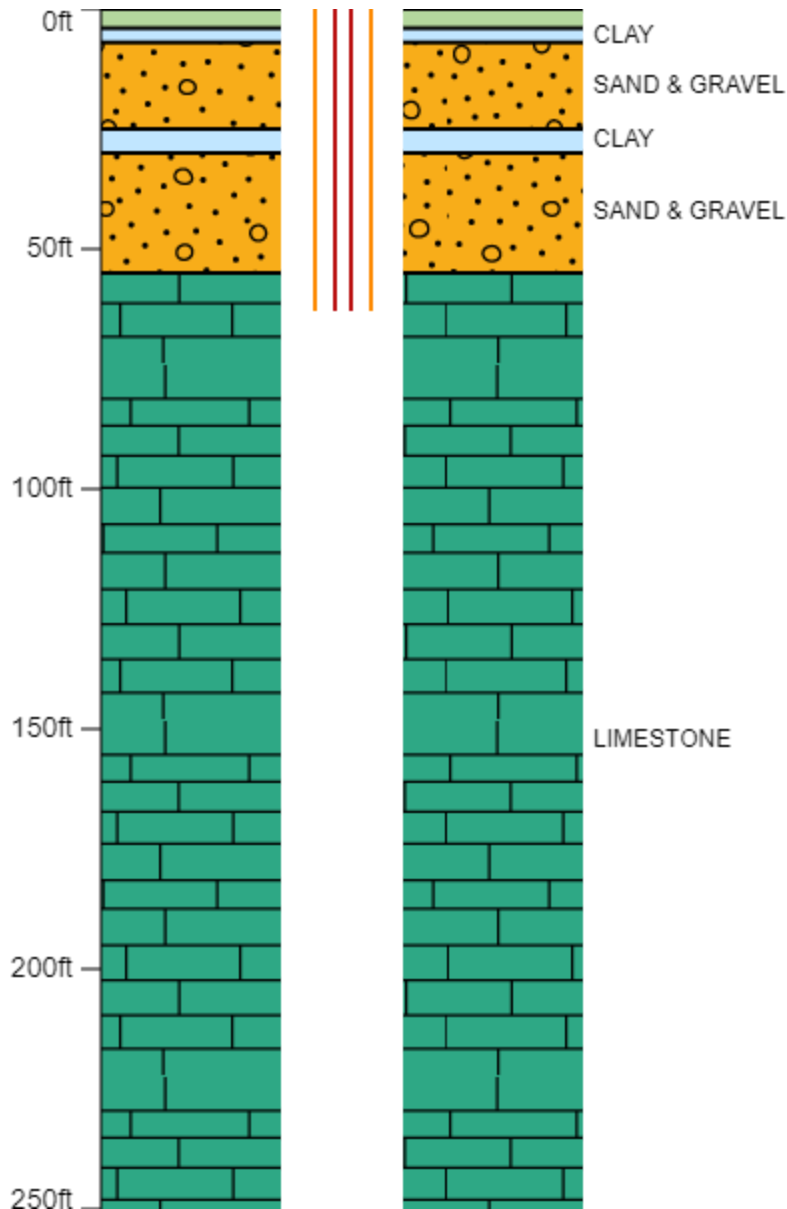
WELL LOCATION		CONSTRUCTION DETAILS																																														
County <u>AUGLAIZE</u> Township <u>MOULTON</u>		Drilling Method: <u>ROTARY</u>																																														
CITY OF WAPAKONETA		BOREHOLE/CASING (Measured from ground surface)																																														
Owner/Builder		1 { Borehole Diameter <u>24</u> inches Depth <u>63</u> ft. Casing Diameter <u>16</u> in. Length <u>65</u> ft. Thickness <u>0.375</u> in.																																														
<u>1251 SCHAUB RD</u>		2 { Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.																																														
Address of Well Location		Casing Height Above Ground <u>2</u> ft.																																														
City <u>WAPAKONETA</u> Zip Code +4 <u>45895</u>		Type { 1: <u>STEEL</u> 2: _____																																														
Permit No. _____ Section; <u>31</u> and/or Lot No. _____		Joints { 1: <u>WELDED</u> 2: _____																																														
Use of Well <u>MUNICIPAL</u>		SCREEN																																														
Coordinates of Well (Use only one of the below coordinate systems)		Diameter _____ in. Slot Size _____ in. Screen Length _____ ft.																																														
Latitude, Longitude Coordinates		Type _____ Material _____																																														
Latitude: <u>40.561704</u> Longitude: <u>-84.225334</u>		Set Between _____ ft. and _____ ft.																																														
Elevation of Well in feet: <u>868.9</u> +/- _____ ft.		GRAVEL PACK (Filter Pack)																																														
Datum Plane: ☐ NAD27 ☐ NAD83 Elevation Source <u>DIGITAL MAP</u>		Material/Size _____ Vol/Wt. Used _____																																														
Source of Coordinates: <u>GPS</u>		Method of Installation _____																																														
Well location written description:		Depth: Placed From: _____ ft. To: _____ ft.																																														
Test "Location B"		GROUT																																														
		Material _____ Vol/Wt. Used _____																																														
		Method of Installation _____																																														
		Depth: Placed From: _____ ft. To: _____ ft.																																														
		DRILLING LOG*																																														
Comments on water quality/quantity and well construction:		FORMATIONS INCLUDE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.																																														
		<table><thead><tr><th>Color</th><th>Texture</th><th>Formation</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>BROWN</td><td>CLAYEY</td><td>CLAY & GRAVEL</td><td>0</td><td>4</td></tr><tr><td>GRAY</td><td></td><td>CLAY</td><td>4</td><td>7</td></tr><tr><td></td><td></td><td>SAND & GRAVEL</td><td>7</td><td>25</td></tr><tr><td>GRAY</td><td></td><td>CLAY</td><td>25</td><td>30</td></tr><tr><td></td><td></td><td>SAND & GRAVEL</td><td>30</td><td>55</td></tr><tr><td></td><td></td><td>LIMESTONE</td><td>55</td><td>250</td></tr><tr><td></td><td></td><td>WATER AT</td><td>145</td><td>145</td></tr><tr><td></td><td></td><td>WATER AT</td><td>180</td><td>180</td></tr></tbody></table>		Color	Texture	Formation	From	To	BROWN	CLAYEY	CLAY & GRAVEL	0	4	GRAY		CLAY	4	7			SAND & GRAVEL	7	25	GRAY		CLAY	25	30			SAND & GRAVEL	30	55			LIMESTONE	55	250			WATER AT	145	145			WATER AT	180	180
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WELL TEST *																																																
Pre-Pumping Static Level <u>12.5</u> ft. Date <u>11/3/2022</u>																																																
Measured from <u>TOP OF CASING</u>																																																
Pumping test method <u>PUMPING</u>																																																
Test Rate <u>1250</u> gpm Duration of Test <u>24</u> hrs.																																																
Feet of Drawdown <u>99.1</u> ft. Sustainable Yield <u>1250</u> gpm																																																
*(Attach a copy of the pumping test record, per section 1521.05, ORC)																																																
Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ No																																																
PUMP/PITLESS																																																
Type of pump _____ Capacity <u>0</u> gpm																																																
Pump set at <u>0</u> ft. Pitless Type _____																																																
Pump installed by _____																																																
I hereby certify the information given is accurate and correct to the best of my knowledge.																																																
Drilling Firm <u>HAD INC</u>																																																
Address <u>9797 BENNER RD</u>																																																
City, State, Zip <u>RIITMAN OH 44270</u>																																																
Signed <u>KAYLA SAMS</u> Date <u>12/2/2022</u>																																																
(Filed Electronically)																																																
ODH Registration Number <u>002148</u> Last Revised on <u>7/30/2025</u>		Aquifer Type (Formation producing the most water.) <u>LIMESTONE</u>																																														
		Date of Well Completion <u>11/05/2022</u> Total Depth of Well <u>250</u> ft.																																														

Completion of this form is required by section 1521.05, Ohio Revised Code - file within 30 days after completion of drilling.
Distribute copies of this record to Customer, and Local Health Department.

WELL LOG AND DRILLING REPORT

Ohio Department of Natural Resources
Division of Water, 2045 Morse Road, Columbus, Ohio 43229-6605
Voice (614) 265-6740 Fax (614) 265-6767

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Some formations labels
have been removed due
to space limitations.