

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

3020791

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WELL LOCATION	
County <u>MONTGOMERY</u> Township <u>MIAMI</u>	
CITY OF <u>MIAMISBURG</u> Owner/Builder _____	
<u>1040 SOLDIERS HOME RD RD</u> Address of Well Location _____	
City <u>MIAMISBURG</u> Zip Code +4 <u>45342</u>	
Permit No. _____ Section; _____ and/or Lot No. _____	
Use of Well <u>PUBLIC/SEMI-PUB</u>	
Coordinates of Well (Use only one of the below coordinate systems)	
Latitude, Longitude Coordinates Latitude: <u>39.66057</u> Longitude: <u>-84.28778</u>	
Elevation of Well in feet: <u>706.2</u> +/- _____ ft.	
Datum Plane: ☐ NAD27 ☐ NAD83 Elevation Source <u>DIGITAL MAP</u>	
Source of Coordinates: <u>DIGITAL MAP</u>	
Well location written description: 	
Comments on water quality/quantity and well construction: <u>Clear, no odor</u>	
WELL TEST *	
Pre-Pumping Static Level <u>24.5</u> ft. Date <u>12/16/2024</u>	
Measured from <u>TOP OF CASING</u>	
Pumping test method <u>PUMPING</u>	
Test Rate <u>2152</u> gpm Duration of Test <u>72</u> hrs.	
Feet of Drawdown <u>16.4</u> ft. Sustainable Yield <u>2152</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 _____ gpm	
Pump set at _____ 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>LAYNE CHRISTENSEN CO</u>	
Address <u>6451 GERMANTOWN RD</u>	
City, State, Zip <u>MIDDLETOWN OH 45042</u>	
Signed <u>BOB CURLEY</u> Date <u>2/18/2025</u> (Filed Electronically)	
ODH Registration Number <u>002289</u> Last Revised on <u>8/1/2025</u>	

DRILLING DETAILS				
Drilling Method: <u>BUCKET AUGER</u>				
BOREHOLE/CASING (Measured from ground surface)				
1 {	Borehole Diameter	<u>34</u> inches	Depth	<u>151</u> ft.
	Casing Diameter	<u>20</u> in. Length <u>108</u> ft. Thickness <u>0.375</u> in.		
2 {	Borehole Diameter	_____ inches	Depth	_____ ft.
	Casing Diameter	_____ in. Length _____ ft. Thickness _____ in.		
Casing Height Above Ground			<u>3</u>	ft.
Type {	1: <u>STEEL</u>			
	2: _____			
Joints {	1: <u>WELDED</u>			
	2: _____			
SCREEN				
Diameter <u>20</u> in. Slot Size <u>0.04</u> in.		Screen Length <u>45</u> ft.		
Type <u>CONTINUOUS WIRE WOUND</u>		Material <u>STAINLESS STEEL</u>		
Set Between <u>106</u> ft. and <u>151</u> ft.				
GRAVEL PACK (Filter Pack)				
Material/Size _____		Vol/Wt. Used _____		
Method of Installation _____				
Depth: Placed From: _____ ft.		To: _____ ft.		
GROUT				
Material _____		Vol/Wt. Used _____		
Method of Installation _____				
Depth: Placed From: _____ ft.		To: _____ ft.		
DRILLING LOG*				
FORMATIONS INCLUDE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.				
Color	Texture	Formation	From	To
BROWN		SOIL	0	3
DARK GRAY		CLAY/GRAVEL/SILT	3	20
DARK		CLAY	20	26
DARK GRAY		CLAY & GRAVEL	26	53
DARK BROWN		CLAY	53	56
DARK		SILT/SAND/GRAVEL	56	73
BROWN		SAND/CLAY/GRAVEL	73	75
DARK BROWN		SAND & GRAVEL	75	80
DARK		SAND/CLAY/GRAVEL	80	85
DARK BROWN		SAND/CLAY/GRAVEL	85	90
DARK GRAY		SAND & GRAVEL	90	95
DARK		SAND & GRAVEL	95	100
DARK BROWN		SAND & GRAVEL	100	105
BROWN-GRAY		SAND	105	110
BROWN-GRAY		SAND & GRAVEL	110	115
BROWN		SAND & GRAVEL	115	120
DARK BROWN		SAND/CLAY/GRAVEL	120	125
DARK		SAND & GRAVEL	125	145
DARK BROWN		SAND & GRAVEL	145	150
DARK		CLAY	150	151
		WATER AT	26	151
Aquifer Type (Formation producing the most water.) <u>SAND & GRAVEL</u>				
Date of Well Completion <u>02/18/2025</u>		Total Depth of Well <u>151</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.