

WELL LOG AND DRILLING REPORT

DNR 7802.05e

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

Well Log Number

3026218

Page 1 of 1 for this record.

WELL LOCATION	CONSTRUCTION DETAILS																																								
County <u>ASHTABULA</u> Township <u>CONNEAUT</u>	Drilling Method: <u>CABLE TOOL</u>																																								
Owner/Builder <u>JEFF ANDERSON</u>	BOREHOLE/CASING (Measured from ground surface)																																								
Address of Well Location <u>545 COLVER RD</u>	1 { Borehole Diameter <u>10</u> inches Depth <u>80</u> ft. Casing Diameter <u>10.625</u> in. Length <u>68</u> ft. Thickness <u>0.188</u> in.																																								
City <u>CONNEAUT</u> Zip Code +4 <u>44030</u>	2 { Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.																																								
Permit No. _____ Section; _____ and/or Lot No. _____	Casing Height Above Ground <u>2</u> ft.																																								
Use of Well <u>DOMESTIC</u>	Type { 1: <u>STEEL</u> 2: _____																																								
Coordinates of Well (Use only one of the below coordinate systems)	Joints { 1: <u>WELDED</u> 2: _____																																								
Latitude, Longitude Coordinates	SCREEN																																								
Latitude: <u>41.910109</u> Longitude: <u>-80.521505</u>	Diameter _____ in. Slot Size _____ in. Screen Length _____ ft.																																								
Elevation of Well in feet: <u>833.4</u> +/- _____ ft.	Type _____ Material _____																																								
Datum Plane: ☐ NAD27 ☐ NAD83 Elevation Source <u>DIGITAL MAP</u>	Set Between _____ ft. and _____ ft.																																								
Source of Coordinates: <u>DIGITAL MAP</u>	GRAVEL PACK (Filter Pack)																																								
Well location written description:	Material/Size _____ Vol/Wt. Used _____																																								
<u>LAST HOUSE ON SOUTH SIDE OF ROAD AT PA LINE</u>	Method of Installation _____																																								
	Depth: Placed From: _____ ft. To: _____ ft.																																								
	GROUT																																								
	Material <u>BENTONITE DRY GRANULA</u> Vol/Wt. Used <u>120</u>																																								
	Method of Installation <u>DRY-DRIVEN</u>																																								
	Depth: Placed From: <u>0</u> ft. To: <u>68</u> ft.																																								
	DRILLING LOG*																																								
Comments on water quality/quantity and well construction:	FORMATIONS INCLUDE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.																																								
<u>WATER IS CLEAR</u>	<table border="1"><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>SOFT</td><td>SOIL</td><td>0</td><td>2</td></tr><tr><td>BROWN</td><td>SOFT</td><td>CLAY</td><td>2</td><td>14</td></tr><tr><td>GRAY</td><td>SOFT</td><td>CLAY</td><td>14</td><td>30</td></tr><tr><td>GRAY</td><td>SANDY</td><td>CLAY</td><td>30</td><td>45</td></tr><tr><td>GRAY</td><td>GRAVELLY</td><td>CLAY</td><td>45</td><td>68</td></tr><tr><td>GRAY</td><td>FIRM</td><td>SHALE</td><td>68</td><td>80</td></tr><tr><td></td><td></td><td>WATER AT</td><td>70</td><td>80</td></tr></tbody></table>	Color	Texture	Formation	From	To	BROWN	SOFT	SOIL	0	2	BROWN	SOFT	CLAY	2	14	GRAY	SOFT	CLAY	14	30	GRAY	SANDY	CLAY	30	45	GRAY	GRAVELLY	CLAY	45	68	GRAY	FIRM	SHALE	68	80			WATER AT	70	80
Color	Texture	Formation	From	To																																					
BROWN	SOFT	SOIL	0	2																																					
BROWN	SOFT	CLAY	2	14																																					
GRAY	SOFT	CLAY	14	30																																					
GRAY	SANDY	CLAY	30	45																																					
GRAY	GRAVELLY	CLAY	45	68																																					
GRAY	FIRM	SHALE	68	80																																					
		WATER AT	70	80																																					
WELL TEST *																																									
Pre-Pumping Static Level <u>38</u> ft. Date <u>9/10/2025</u>																																									
Measured from <u>GROUND LEVEL</u>																																									
Pumping test method <u>BAILING</u>																																									
Test Rate <u>1</u> gpm Duration of Test <u>1</u> hrs.																																									
Feet of Drawdown <u>42</u> ft. Sustainable Yield <u>3</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 <u>SUBMERSIBLE</u> Capacity <u>10</u> gpm																																									
Pump set at <u>75</u> ft. Pitless Type <u>PULL THRU</u>																																									
Pump installed by <u>G&H WATER</u>																																									
I hereby certify the information given is accurate and correct to the best of my knowledge.																																									
Drilling Firm <u>G & H WELL DRILLING</u>																																									
Address <u>234 N SPRUCE ST</u>																																									
City, State, Zip <u>JEFFERSON OH 44047</u>																																									
Signed <u>RYAN GOFF</u> Date <u>10/29/2025</u>																																									
(Filed Electronically)																																									
ODH Registration Number <u>003178</u> Last Revised on <u>11/12/2025</u>	Aquifer Type (Formation producing the most water.) <u>SHALE</u>																																								
	Date of Well Completion <u>09/10/2025</u> Total Depth of Well <u>80</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.