

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

3030540

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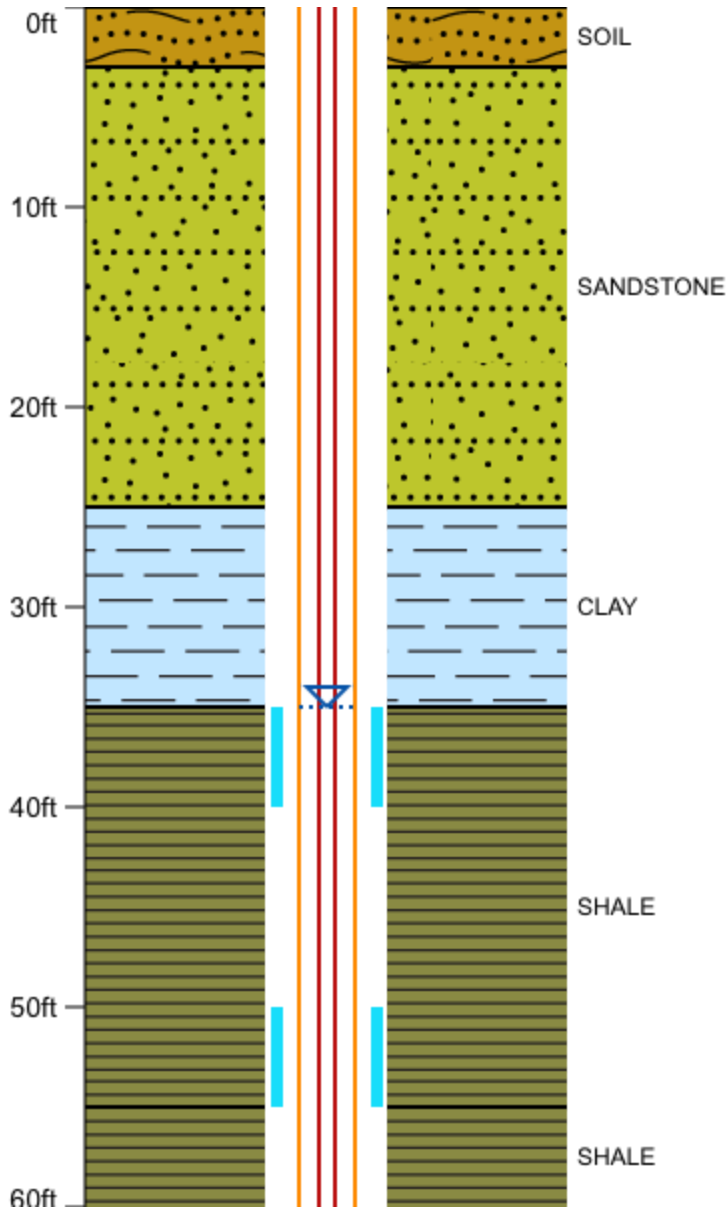
WELL LOCATION		CONSTRUCTION DETAILS																																									
County <u>MORGAN</u> Township <u>MARION</u>		Drilling Method: <u>CABLE TOOL</u>																																									
JAG REAL PROPERTY Owner/Builder		BOREHOLE/CASING (Measured from ground surface)																																									
3305 GOSHEN RUN RD Address of Well Location		1 { Borehole Diameter <u>11.08</u> inches Depth <u>60</u> ft. Casing Diameter <u>6</u> in. Length <u>62</u> ft. Thickness <u>0.316</u> in.																																									
City <u>CHESTERHILL</u> Zip Code +4 <u>42738</u>		2 { Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.																																									
Permit No. <u>601950</u> Section; _____ and/or Lot No. _____		Casing Height Above Ground <u>2</u> ft.																																									
Use of Well <u>DOMESTIC</u>		Type { 1: <u>PVC</u> 2: _____																																									
Coordinates of Well (Use only one of the below coordinate systems)		Joints { 1: <u>SOLVENT</u> 2: _____																																									
Latitude, Longitude Coordinates		SCREEN																																									
Latitude: <u>39.530923</u> Longitude: <u>-81.896199</u>		Diameter _____ in. Slot Size _____ in. Screen Length _____ ft.																																									
Elevation of Well in feet: <u>933.8</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 _____																																									
Behind cabin		Method of Installation _____																																									
Comments on water quality/quantity and well construction:		Depth: Placed From: _____ ft. To: _____ ft.																																									
Clean no odor		GROUT																																									
		Material <u>BENTONITE PELLETS/CHUF</u> Vol/Wt. Used <u>600 LBS</u>																																									
		Method of Installation <u>POURED (GRAVITY)</u>																																									
		Depth: Placed From: <u>0</u> ft. To: <u>28</u> ft.																																									
		DRILLING LOG*																																									
		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>FINE</td><td>SOIL</td><td>0</td><td>3</td></tr><tr><td>YELLOW</td><td>CREAMY</td><td>SANDSTONE</td><td>3</td><td>25</td></tr><tr><td>GRAY</td><td>CLAYEY</td><td>CLAY</td><td>25</td><td>35</td></tr><tr><td>LT. GRAY</td><td>HARD</td><td>SHALE</td><td>35</td><td>55</td></tr><tr><td>GRAY</td><td>SHALEY</td><td>SHALE</td><td>55</td><td>60</td></tr><tr><td></td><td></td><td>WATER AT</td><td>35</td><td>40</td></tr><tr><td></td><td></td><td>WATER AT</td><td>50</td><td>55</td></tr></tbody></table>		Color	Texture	Formation	From	To	BROWN	FINE	SOIL	0	3	YELLOW	CREAMY	SANDSTONE	3	25	GRAY	CLAYEY	CLAY	25	35	LT. GRAY	HARD	SHALE	35	55	GRAY	SHALEY	SHALE	55	60			WATER AT	35	40			WATER AT	50	55
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WELL TEST *																																											
Pre-Pumping Static Level <u>35</u> ft. Date <u>5/19/2026</u>																																											
Measured from <u>TOP OF CASING</u>																																											
Pumping test method <u>BAILING</u>																																											
Test Rate <u>30</u> gpm Duration of Test <u>1</u> hrs.																																											
Feet of Drawdown <u>27</u> ft. Sustainable Yield <u>7</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 <u>HOME OWNER</u>																																											
I hereby certify the information given is accurate and correct to the best of my knowledge.																																											
Drilling Firm <u>JET WATER WELL DRILLING</u>																																											
Address <u>17669 SR 26 SR</u>																																											
City, State, Zip <u>RENO OH 45773</u>																																											
Signed <u>RA CHEL THOMPSON</u> Date <u>5/28/2026</u>																																											
(Filed Electronically)																																											
ODH Registration Number <u>003173</u> Last Revised on <u>5/28/2026</u>		Aquifer Type (Formation producing the most water.) <u>SHALE</u>																																									
		Date of Well Completion <u>05/19/2026</u> Total Depth of Well <u>60</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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String: 1

Borehole Depth: 60 ft.

Borehole Diameter: 11.08 in

Casing Length: 62 ft.

Casing Diameter: 6 in.

| Borehole

| Casing

| Water At

| Static Water Level