

WELL LOG AND DRILLING REPORT

ORIGINAL

NO CARBON PAPER
NECESSARY—
SELF-TRANSCRIBING

State of Ohio
DEPARTMENT OF NATURAL RESOURCES
Division of Water
65 S. Front St., Rm. 815 Phone (614) 469-2646
Columbus, Ohio 43215

438698

County Stark Township Lake Section of Township _____

Owner Ma Miller Address Hartsville O

Location of property 3164 Townsend ave N.W

CONSTRUCTION DETAILS

Casing diameter 5" Length of casing 111
Type of screen _____ Length of screen _____
Type of pump _____
Capacity of pump _____
Depth of pump setting _____
Date of completion _____

BAILING OR PUMPING TEST (Specify one by circling)

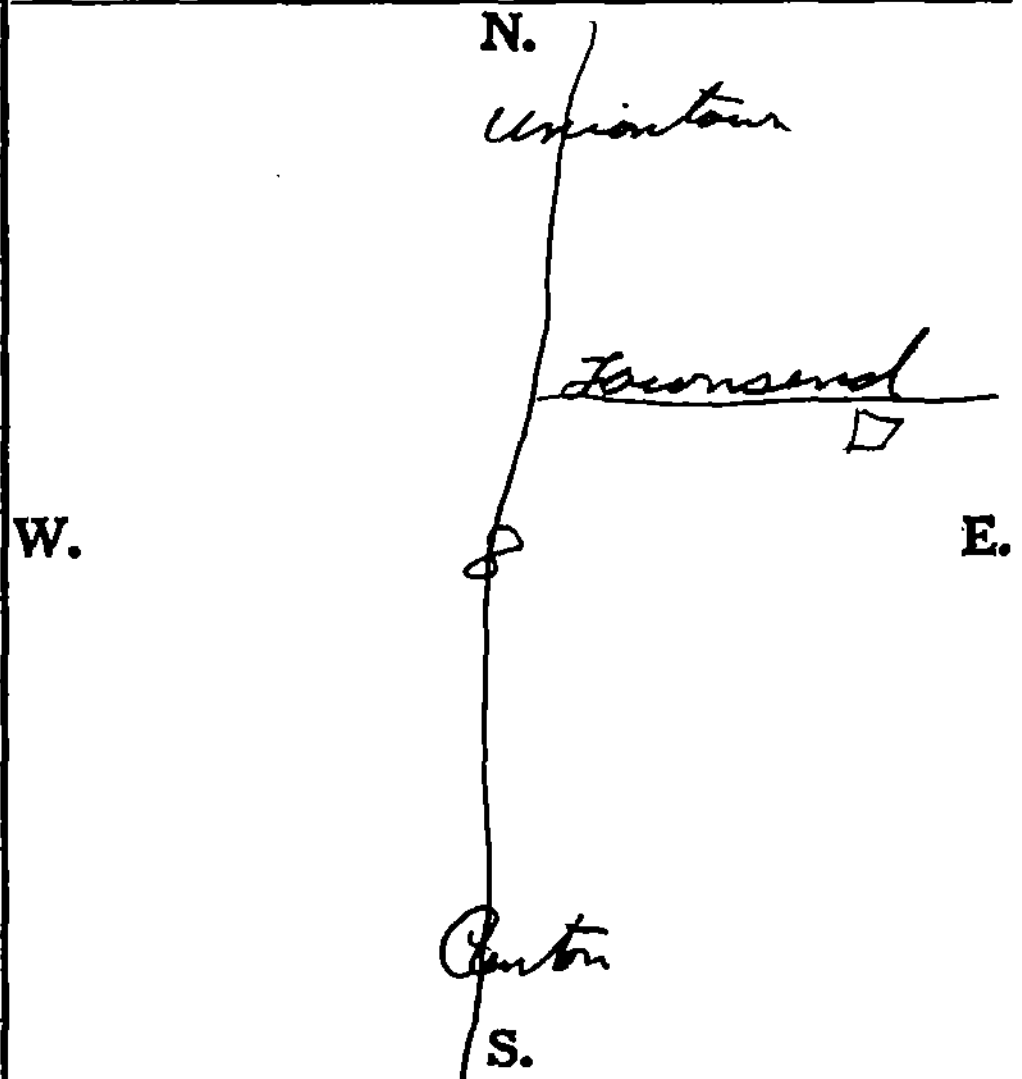
Test Rate 18 G.P.M. Duration of test 1 hrs
Drawdown 12 ft. Date 11-7-72
Static level-depth to water 60 ft.
Quality (clear, cloudy, taste, odor) Clear
Pump installed by _____

WELL LOG*

Formations Sandstone, shale, limestone, gravel and clay	From	To
<u>Sand & gravel</u>	<u>0 Feet</u>	<u>108 Ft.</u>
<u>Sandstone</u>	<u>108</u>	<u>121</u>

SKETCH SHOWING LOCATION

Locate in reference to numbered
State Highways, St. Intersections, County roads, etc.



Drilling Firm J J Skolnik
Address Magnolia O

Date 11-14-72
Signed J Skolnik

*If additional space is needed to complete well log, use next consecutive numbered form.