WELL LOG AND DRILLING REPORT

ORIGINAL

NO CARBON PAPER NECESSARY – SELF-TRANSCRIBING

State of Ohio
DEPARTMENT OF NATURAL RESOURCES
Division of Geological Survey
Fountain Square
Columbus, Ohio 43224 Phone (614) 466-5344

484156

COUNTY Lorain TOWNSHIP LAGRANGE SECTION OF TOWNSHIP OR LOT NUMBER _____

OWNER Dale Yost ADDRESS 416 Georgia

LOCATION OF PROPERTY 1st house on Bush from 301

CONSTRUCTION DETAILS

Casing diameter 6 Length of casing —

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 — gpm Duration of test — hrs

Drawdown _____ ft Date 8-15-75

Static level (depth to water) _____ ft

Quality (clear, cloudy, taste, odor) _____

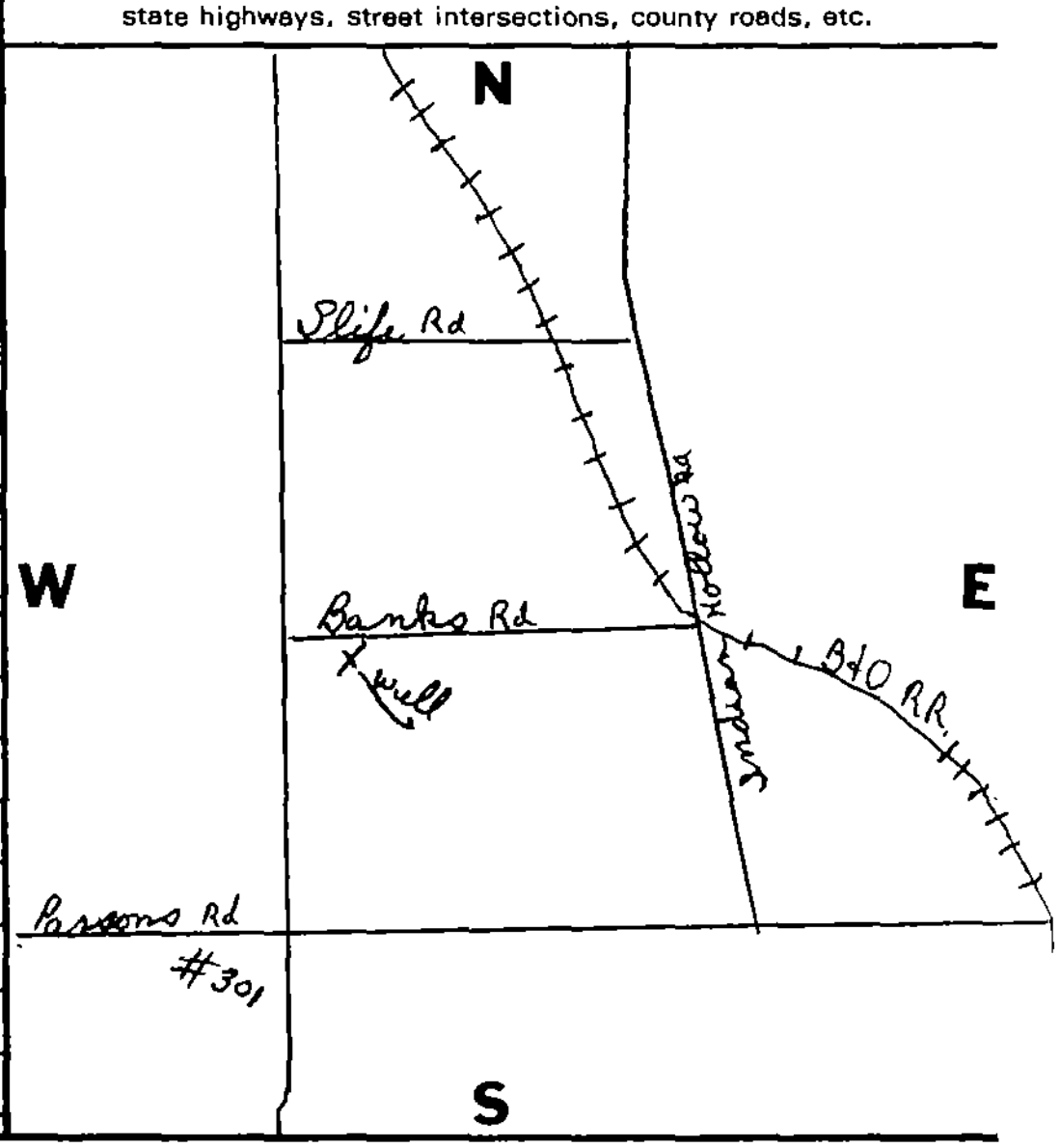
Pump installed by _____

WELL LOG*

Formations: sandstone, shale, limestone, gravel, clay	From	To
Sand	0 ft	13 ft
Blue Clay + Sand	13	18
Gray Shale	18	50
Gray Shale + Broken rock	50	57
Sand Stone	57	60
Black Shale	60	71
Sand Stone	71	78
Red Shale	78	80
Dry Hole		

SKETCH SHOWING LOCATION

Locate in reference to numbered state highways, street intersections, county roads, etc.



DRILLING FIRM Diderich & Sons DATE 8-15-75

ADDRESS N. Ridgeville SIGNED S. Diderich

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