

ORIGINAL

State of Ohio
DEPARTMENT OF NATURAL RESOURCES
Division of Water
Fountain Square
Columbus, Ohio 43224

526433

COUNTY Summit TOWNSHIP Lordstown SECTION OF TOWNSHIP _____
OWNER Edith C Johnson ADDRESS 3249 Lusk Rd
LOCATION OF PROPERTY 3249 Lusk Rd SW Lordstown

BAILING OR PUMPING TEST
(specify one by circling)

(specify one by circling)

Test rate 30 gpm Duration of test 2 hrs

Drawdown 10 ft Date 1/27/28

Static level (depth to water) 10 ft

Quality (clear, cloudy, taste, odor) _____

Pump installed by _____

Date of completion _____

SKETCH SHOWING LOCATION

From

To

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

Yellow clay	0 ft	10 ft
Sand Rock	10	85

0 ft

10 ft

10

65-

W

N

E

S

DRILLING FIRM**ADDRESS**

DATE _____

SIGNED

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