

NO CARBON PAPER
NECESSARY -
SELF-TRANSCRIBING

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

COUNTY Rose TOWNSHIP Liberty SECTION OF TOWNSHIP _____
OWNER Earl Steiner ADDRESS 29223-115.-35
LOCATION OF PROPERTY _____

CONSTRUCTION DETAILS		BAILING OR PUMPING TEST (specify one by circling)	
Casing diameter <u>6"</u>	Length of casing <u>78.5'</u>	Test rate <u>12</u> gpm	Duration of test _____ hrs
Type of screen <u>perf</u>	Length of screen <u>1.2</u>	Drawdown <u>nr</u> ft	Date <u>8/17/85</u>
Type of pump _____		Static level (depth to water) <u>4.8'</u>	ft
Capacity of pump _____		Quality (clear, cloudy, taste, odor) <u>clear</u>	
Depth of pump setting _____			
Date of completion _____		Pump installed by _____	

[illegible]**DRILLING FIRM**

Don Nathel

DATE _____

8/17/85