

WELL LOG AND DRILLING REPORT

699749

State of Ohio
DEPARTMENT OF NATURAL RESOURCES
Division of Water
1939 Fountain Square Drive
Columbus, Ohio 43224
(614) 265-6739

TYPE OR USE PEN
SELF-TRANSCRIBING
PRESS HARD!

Permit Number

COUNTY Henry TOWNSHIP Bartlow SECTION/LOT NO. 24
(CIRCLE ONE)
OWNER/BUILDER Alva VanScyoc PROPERTY ADDRESS B-389 C.Rd. 1, Deshler
(CIRCLE ONE OR BOTH) (ADDRESS OF WELL LOCATION 1)
LOCATION OF PROPERTY _____

CONSTRUCTION DETAILS

CASING
Diameter 6 in. Length 67 ft. Wall Thickness .142 in.

Type: ☒ Steel ☒ Galv. ☐ PVC ☐ OtherJoints: ☒ Threaded ☐ Welded ☐ Solvent ☐ Other**SCREEN**

Type (wire wrapped, louvered, etc.) _____ Material _____

Length _____ ft. Diameter _____ in.

Set between _____ ft. and _____ ft. Slot _____

☒ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Dug ☐ OtherDate of completion 1-30-90**GROUT**Material Subbit 70/100 Volume used _____Method of installation GravityDepth: placed from 66 ft. to Surface ft.**GRAVEL PACK**

Material _____ Volume used _____

Method of installation _____

Depth: placed from _____ ft. to _____ ft.

Pitless Device ☐ Adapter ☐ Preassembled unitUse of Well Single family Dwelling**PUMP**

Type of pump _____ Capacity _____ gpm

Pump set at _____ ft.

Pump installed by _____

WELL TESTBailing ☐

or

Pumping ☒Test rate 10 gpm Duration of test _____ hrs.

Drawdown _____ ft.

Measured from: ☒ Top of casing ☐ ground level ☐ OtherStatic Level (depth to water) _____ ft. Date: 1-30-90Quality clear (cloudy, taste, odor)

(Attach a copy of the pumping test record, per 1521.05, ORC)

WELL LOG*

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

Show color, texture, hardness, and formation:

sandstone, shale, limestone, gravel, clay, sand, etc.

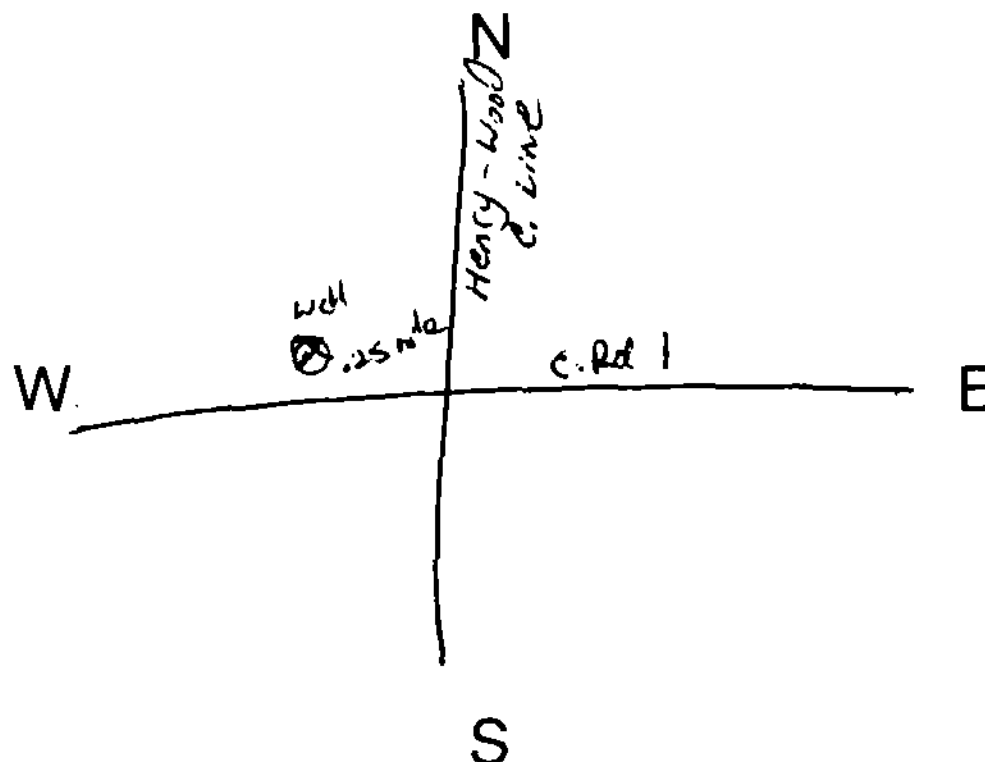
	From	To
<u>Brown clay</u>	<u>0 ft.</u>	<u>15 ft.</u>
<u>Grey clay</u>	<u>15</u>	<u>66</u>
<u>Limestone</u>	<u>66</u>	<u>81</u>

Water 76

Plugged Old Well
4 Bags of Hole Plug
2-12-90

SKETCH SHOWING LOCATION

Show distances well lies from numbered
state highways, street intersections, county roads, etc.



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

DNR 7802.88

DRILLING FIRM Stemman Well DrillingADDRESS P.O. Box 27CITY, STATE, ZIP Wilcox Ohio 45847SIGNED Jerry StemmanDATE 1-30-90ODH REGISTRATION NUMBER 31 7774 #1769

Completion of this form is required by 1521.05, Ohio Revised Code - file within 30 days after completion of drilling.

ORIGINAL COPY - ODNR, DIVISION OF WATER, 1939 FOUNTAIN SQ. DRIVE, COLS., OHIO 43224

Blue - Customer's Copy Pink - Driller's Copy Green - Local Health Dept. Copy