WELL LOG AND DRILLING REPORT

726983

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

Ohio Department of Natural Resources, Divison of Water
1939 Fountain Square Drive, Columbus, Ohio 43224 Phone (614) 265-6739

Permit Number _____

COUNTY LAKE TOWNSHIP Leroy SECTION/LOT No. _____ (CIRCLE ONE)

OWNER/BUILDER (CIRCLE ONE OR BOTH) Tom Reed Builders PROPERTY ADDRESS 7615 Brakeman Rd (ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY 150 yds South of RT 86 East side of Brakeman

CONSTRUCTION DETAILS

CASING Borehole Diameter 8 in.

[1] Diameter 5 5/8 in. Length 53 ft. Wall Thickness .144 in.

[2] Diameter _____ in. Length _____ ft. Wall Thickness _____ in.

Type: [1] [2] Steel [1] [2] Galv. [1] [2] PVC [1] [2] Other _____

Joints: [1] [2] Threaded [1] [2] Welded [1] [2] Solvent [1] [2] Other _____

Liner: Length _____ Type _____ Wall Thickness _____ in.

SCREEN

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

Length _____ ft. Diameter _____ in.

Set between _____ ft. and _____ ft. Slot _____

GROUT

Material Bentonite Volume used 250 #

Method of installation Poured

Depth: placed from _____ ft. to _____ ft.

GRAVEL PACK (Filter Pack)

Material _____ Volume used _____

Method of installation _____

Depth: placed from _____ ft. to _____ ft.

Pitless Device ☐ Adapter ☐ Preassembled unit

Use of Well Single Family

☐ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____

Date of Completion _____

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
Yell Clay	0	5
Brown Shale Sndstn Layers	5	32
Gray Shale	32	42
Gray Shale Sndstn Layers.	42	52
Gray White Sand Stone.	52	80
Oil in Shale Between 40' & 45'		

WELL TEST

☐ Bailing ☐ Pumping* ☐ Other _____

Test rate 18 gpm Duration of test 2 hrs.

Drawdown 5' ft.

Measured from: ☐ top of casing ☐ ground level ☐ Other _____

Static Level (depth to water) 42 ft. Date: _____

Quality (clear, cloudy, taste, odor) Clear.

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

PUMP

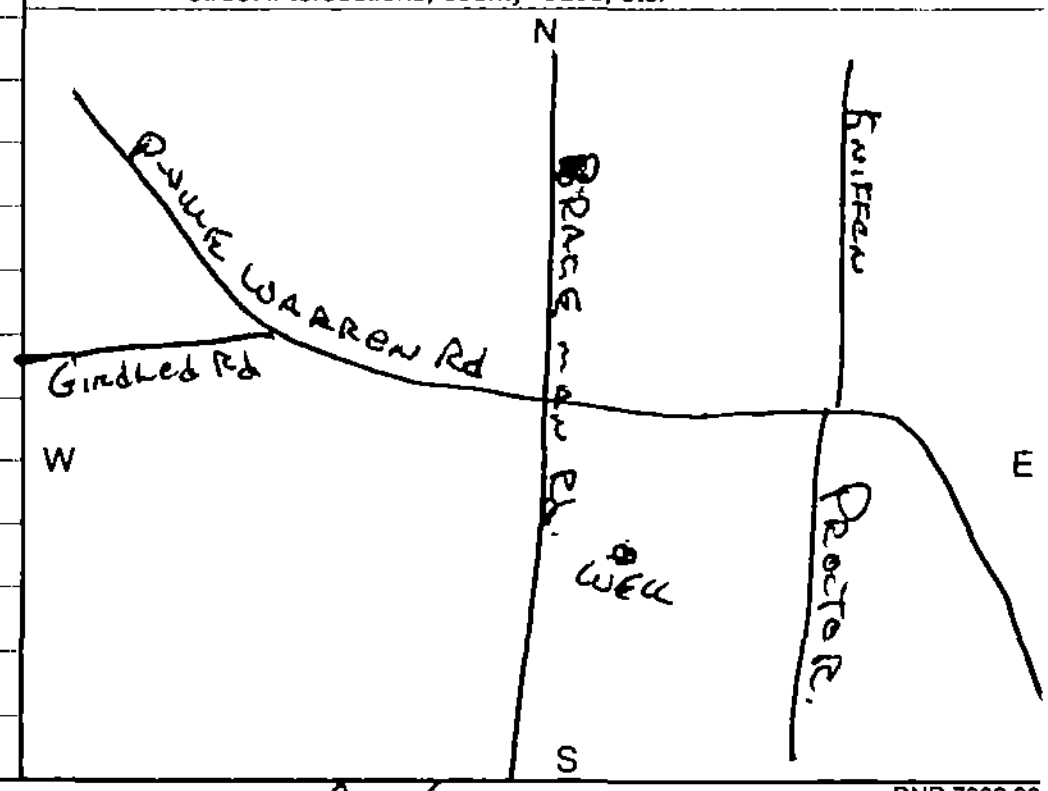
Type of pump _____ Capacity _____ gpm

Pump set at _____ ft.

Pump installed by _____

SKETCH SHOWING WELL 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 7802.90

Drilling Firm Davis Water System.

Address 11908 Warren Rd.

City, State, Zip Perrysville Ohio

Signed _____

Date Oct 12 1991

ODH Registration Number 231

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

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

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