

WELL LOG AND DRILLING REPORT

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

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

728244

Permit Number

949.92

COUNTY Morrow

TOWNSHIP Bennington

SECTION/LOT No.
(CIRCLE ONE)

OWNER/BUILDER
(CIRCLE ONE OR BOTH)

Ron Rister

PROPERTY ADDRESS

1673 C.R. 26

(ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY

Same

CONSTRUCTION DETAILS

CASING

1 Diameter 5 1/2 in. Length 43 ft. Wall Thickness _____ in.

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

Type: ☒ Steel ☐ Galv. ☐ PVC ☐ Other

Joints: ☒ Threaded ☐ Welded ☐ Solvent ☐ 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 _____ Volume used _____

Method of installation _____

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

☐ 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
Top Soil	0	3
Yellow Clay	3	8
Blue Clay	8	23
Gravel	23	43

WELL TEST

☐ Bailing ☐ Pumping* ☐ Other

Test rate _____ gpm Duration of test _____ hrs.

Drawdown _____ ft.

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

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

Quality (clear, cloudy, taste, odor) _____

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

PUMP

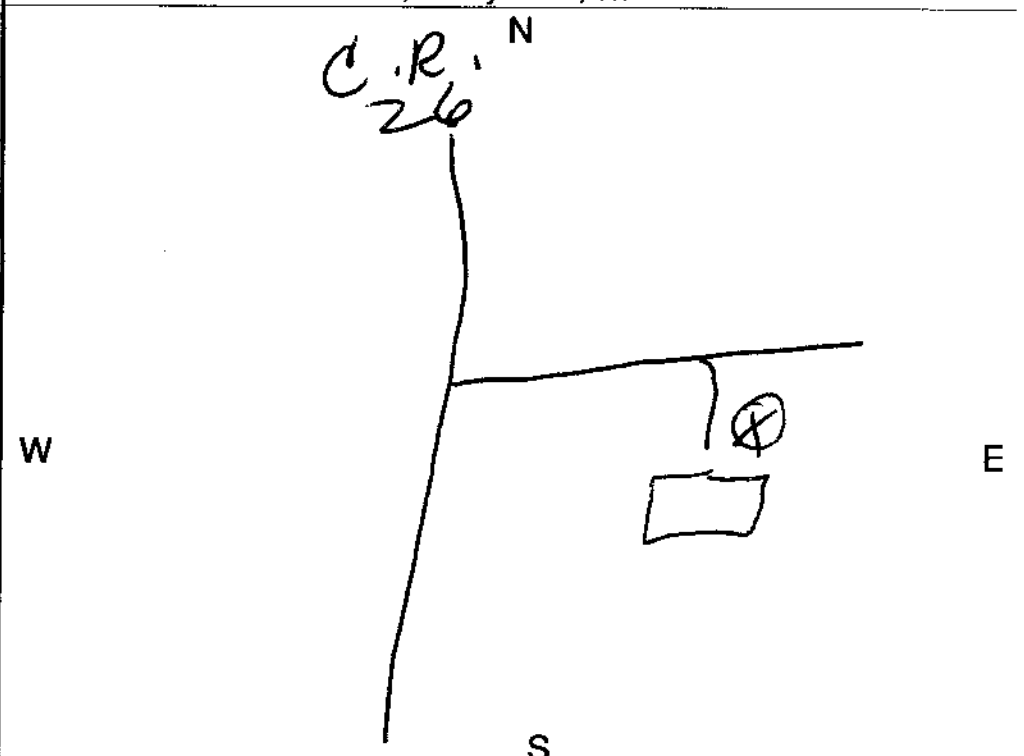
Type of pump _____ Capacity _____ gpm

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

W.B. Hass & Sons

Signed

Gary Hass

Address

86 St. Rt. 61

Date

4-28

City, State, Zip

Sunkung, Oh. 43074

ODH Registration Number

639

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

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