WELL LOG AND DRILLING REPORT

736316

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 2-94

COUNTY JACKSON TOWNSHIP Jefferson SECTION/LOT No. (CIRCLE ONE)

OWNER/BUILDER (CIRCLE ONE OR BOTH) Donald Carter PROPERTY ADDRESS 1449 Monro Hollow Rd. (ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY Oak Hill

CONSTRUCTION DETAILS

CASING Borehole Diameter 8 in.

[1] Diameter 6 in. Length 27 ft. Wall Thickness SCD40 in.

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

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

Joints: [1] Threaded [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. Slot ____

Set between ____ ft. and ____ ft.

GROUT & Drill cuttings

Material Concrete Volume used ____

Method of installation pour

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
Soil & Sub Soil	0	3
Clay & Soft Shale	3	16
Med Shale Blue	16	24
Gray Sandy Shale	24	35
Dark Shale	35	72
Light Sandy Shale	72	116
Water 45 Ft		

WELL TEST

☑ Bailing ☐ Pumping* ☐ Other ____

Test rate 1 1/2 gpm Duration of test 2 hrs.

Drawdown 116 ft.

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

Static Level (depth to water) 41 ft. Date: ____

Quality (clear, cloudy, taste, odor) ____

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

PUMP

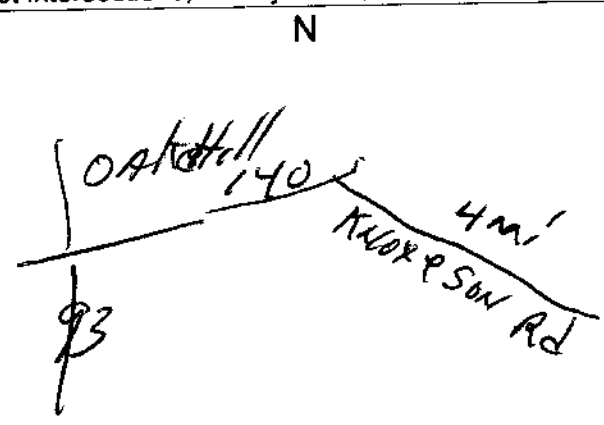
Type of pump ____ Capacity ____ gpm

Pump set at Owner Installed ft.

Pump installed by ____

SKETCH SHOWING WELL LOCATION

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



DNR 7802.90

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

Drilling Firm E & S Drilling

Address RT 1 Box 328

City, State, Zip Hamden Ohio 45634

Signed Earl E Stump

Date 4-10-94

ODH Registration Number 627

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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