

WELL LOG AND DRILLING REPORT

748262

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

Permit Number

COUNTY Stark

TOWNSHIP Bethlehem

SECTION 4
(CIRCLE ONE)

OWNER/BUILDER James & Mary Taylor
(CIRCLE ONE OR BOTH)

PROPERTY ADDRESS 7765 Brinker St. NW, Navarre, O
(ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY East on Hudson left on Brinker 1/4 mile, house on left

CONSTRUCTION DETAILS

CASING Borehole Diameter 8" 100 FT. 5" 90 FT GROUT 400 LBS GRAVEL 50 LBS BENONITE

[1] Diameter _____ in. Length _____ ft. Wall Thickness _____ in. Material #20 MASH FIRE CLAY Volume used 4,800 lbs.

[2] Diameter 5 1/2 in. Length 102 ft. Wall Thickness 50 R 21 in. Method of installation MIXED & POURED 25 LBS VOCLAY TABLETS

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

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

Liner: Length _____ Type _____ Wall Thickness _____ in. Depth: placed from _____ ft. to _____ ft.

SCREEN

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

Length _____ ft. Diameter _____ in.

Set between _____ ft. and _____ ft. Slot _____

Pitless Device ☐ Adapter ☐ Preassembled unit

Use of Well DOMESTIC

☐ 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
CLAY & GRAVEL	0	10
GRAVEL & CLAY	10	14
CLAY & BOLDERS	14	28
BROKEN LIME STONE	28	31
DARK GRAY CLAY	31	50
GRAY SHALE	50	92
SOFT SPOT	92	93
GRAY SLATE	93	160
DARK SHALE	160	185
SAND STONE GRAY	185	190
WATER AT		
50'		
110'		
185'		

WELL TEST

☒ Bailing ☐ Pumping* ☐ Other _____

Test rate 10.81 gpm Duration of test 37 MIN

Drawdown 10 ft.

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

Static Level (depth to water) 120 ft. Date: OCT 8, 1994

Quality (clear, cloudy, taste, odor) CLOUDY

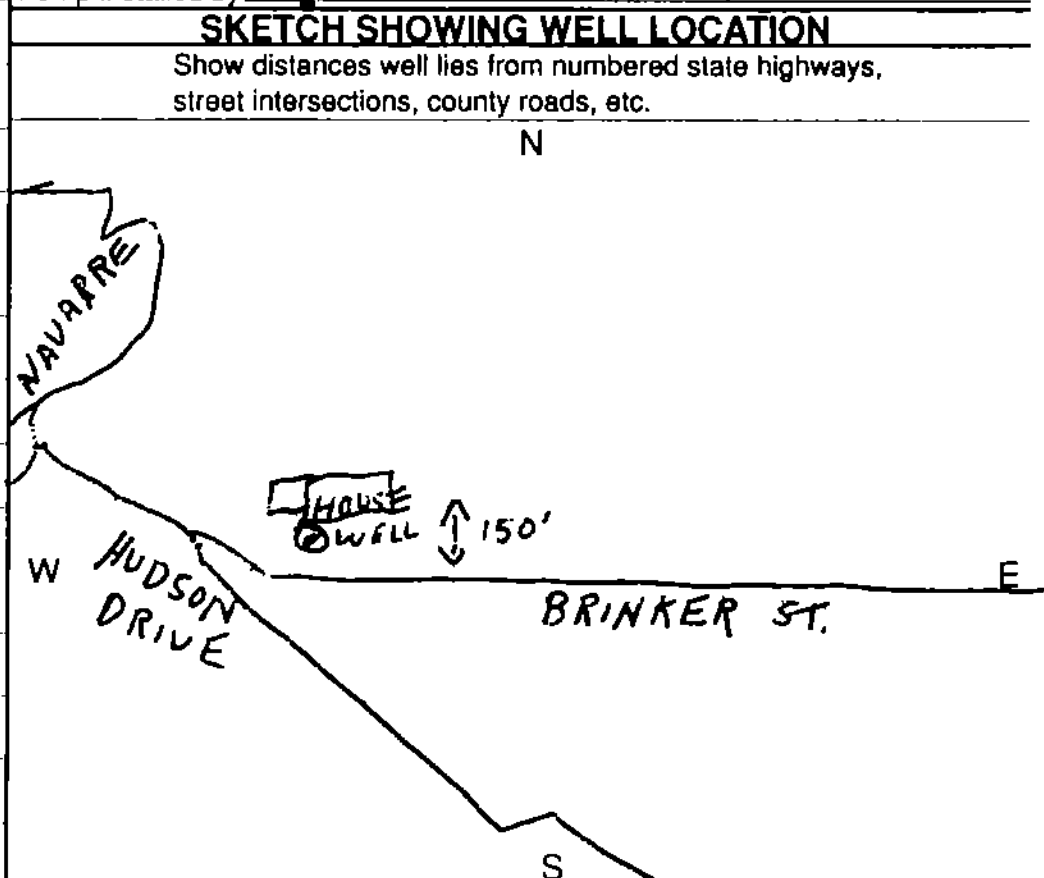
*(Attach a copy of the pumping test record, per section 1521.05, ORC)

PUMP

Type of pump _____ Capacity _____ gpm

Pump set at _____ ft.

Pump installed by ?



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

Drilling Firm Don Shetler Water Well Drilling

Address 8044 Frank St. S.W.

City, State, Zip Navarre, O 44662

Signed Don Shetler

Date Nov. 1, 1994

ODH Registration Number 584

5521 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

DNR 7802.90