WELL LOG AND DRILLING REPORT

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

754850

Permit Number 2076

COUNTY Licking TOWNSHIP Fallsberg SECTION/LOT No. (CIRCLE ONE)

OWNER/BUILDER (CIRCLE ONE OR BOTH) Harold Swartz PROPERTY ADDRESS 10320 Pleasant Valley Drive (ADDRESS OF WELL LOCATION)

LOCATION OF PROPERTY Fallsberg Frazeysburg Ohio 43022

CONSTRUCTION DETAILS

CASING Borehole Diameter ____ in.

[1] Diameter 6 2 in. Length 5 ft. Wall Thickness ____ 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 ____ Volume used ____

Method of installation ____

Depth: placed from ____ ft. to ____ ft.

GRAVEL PACK (Filter Pack)

Material ____ Volume used ____

Method of installation ____

Depth: placed from owner will do ft. to ____ ft.

Pitless Device ☐ Adapter ☐ Preassembled unit

Use of Well family dwelling

☐ Rotary ☑ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other ____

Date of Completion 5-15-94

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	
0	02	top soil
02	15	yellow clay
15	22	DRIFT
22	50	yellow sand
50	80	gray shale
80	120	white sand
120		
90		water at
120		T. D.

WELL TEST

☑ Bailing ☐ Pumping* ☐ Other ____

Test rate 20 gpm Duration of test 1 hrs.

Drawdown 20 ft.

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

Static Level (depth to water) 20 ft. Date: 5-15-94

Quality (clear, cloudy, taste, odor) clear

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

PUMP

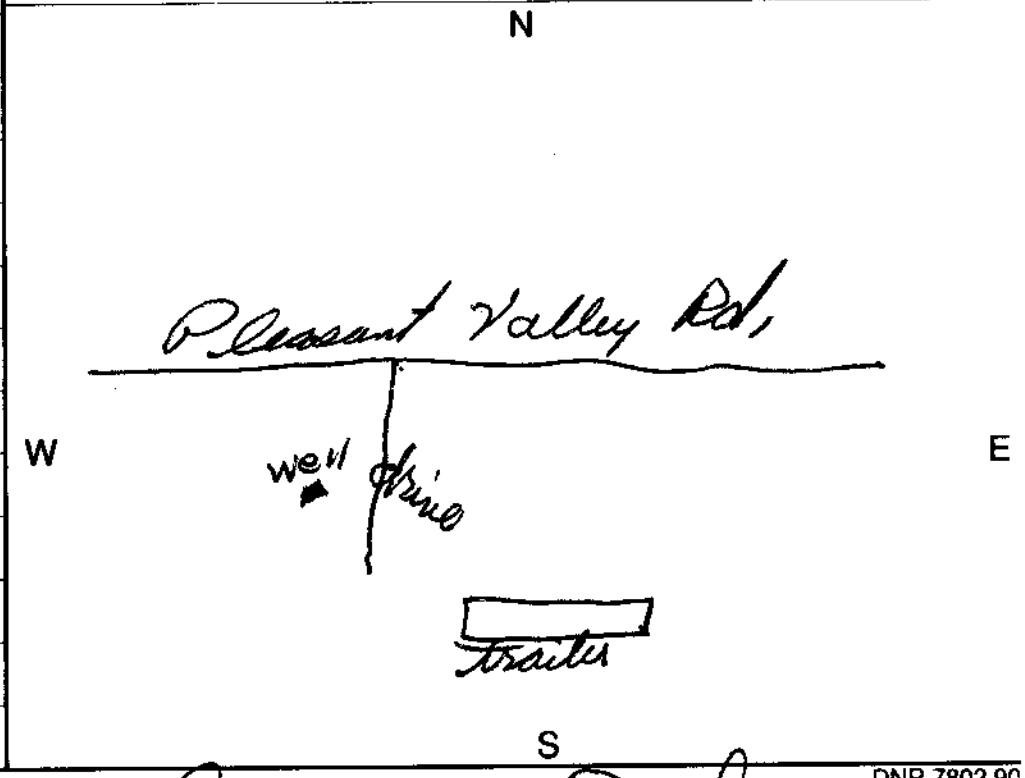
Type of pump ____ Capacity ____ gpm

Pump set at ____ ft.

Pump installed by owner will do pump Tilling

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 Parks Well Drilling

Address 3645 Jeffries Rd. SE

City, State, Zip Newark, Ohio 43055

Signed Lawrence Parks

Date may 26, 94

ODH Registration Number 684

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

5442 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