

TYPE OR USE PEN
SELF-TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

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

757251

Permit Number 1055

COUNTY PREBLE TOWNSHIP WASHINGTON

SECTION/LOT No.
(CIRCLE ONE)

OWNER/BUILDER
(CIRCLE ONE OR BOTH)

Full Gospel Temple

PROPERTY ADDRESS 4745 U.S. Rt. 127 North Eaton
(ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY 4745 (west side) U.S. Rt. 127 N., 3 miles South of St. Rt. 40

CONSTRUCTION DETAILS

CASING
Borehole Diameter 6 1/2 in.
① Diameter 6 in. Length 30 ft. Wall Thickness 3/16 in. Material Granular Volume used 150 lbs
② Diameter _____ in. Length _____ ft. Wall Thickness _____ in. Method of installation Dry (shovel)
Type: ☒ Steel ☒ Galv. ☐ PVC ☐ Other _____
Joints: ☐ Threaded ☒ Welded ☐ Solvent ☐ 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 _____

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 Church
☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____
Date of Completion 6/92

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
Sand & Gravel

0 16

Clay
Gravel

16 20

20 30

POOR TAN Limestone

30 34

White Limestone

34 49

Blue Shale & Limestone

49 54

54 60

Water at 49 ft.

WELL TEST

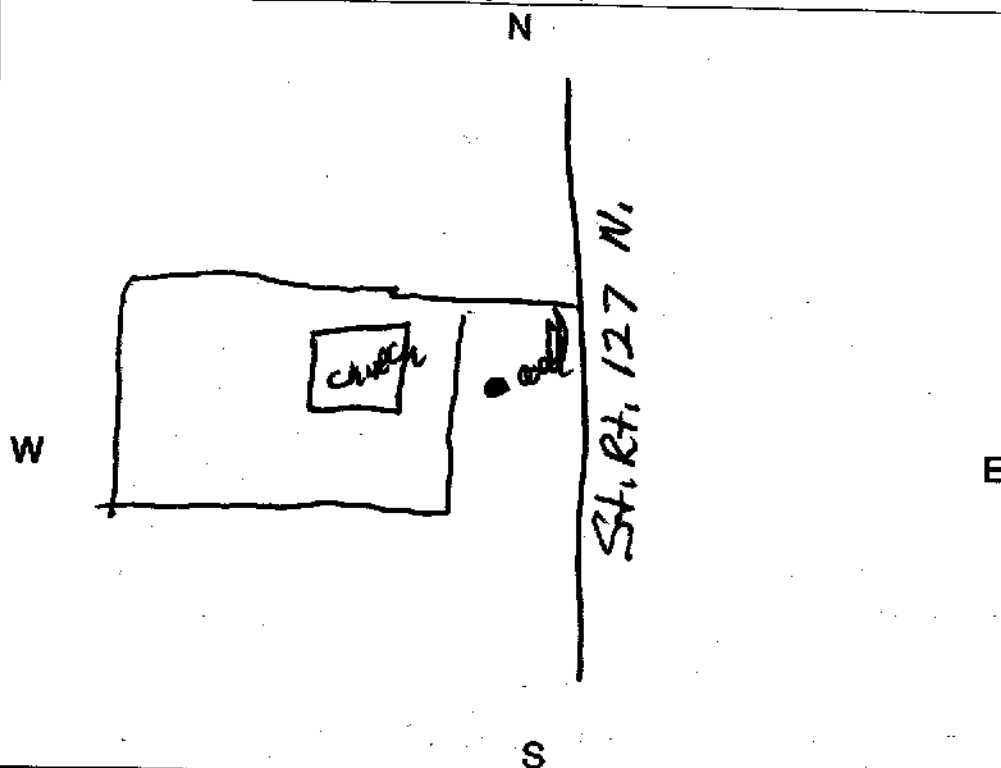
☒ Bailing ☐ Pumping* ☐ Other _____
Test rate 11 gpm Duration of test 2 hrs.
Drawdown 4 ft.
Measured from: ☐ top of casing ☒ ground level ☐ Other _____
Static Level (depth to water) 18 ft. Date: 6/92
Quality (clear, cloudy, taste, odor) Clear no odor
*(Attach a copy of the pumping test record, per section 1521.05, ORC)

PUMP

Type of pump Sub Capacity 10 gpm
Pump set at 50 ft. ft.
Pump installed by Smith & Sons

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.

Drilling Firm Smith & Sons

Address P.O. Box 32

City, State, Zip West Alex. Ohio 45381

Signed Larry Smith

Date 7/92

ODH Registration Number 970

DNR 7802.90

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