DNR 7802.92
TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

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

764758

Permit Number 3327

COUNTY Mahoning TOWNSHIP Smith SECTION/LOT No. S.E (CIRCLE ONE)

OWNER/BUILDER (CIRCLE ONE OR BOTH) Millie Thompson PROPERTY ADDRESS 12152 12th St. (ADDRESS OF WELL LOCATION ▲)

LOCATION OF PROPERTY ¼ mile North of Courtney Road on west Side of 12th St.

CONSTRUCTION DETAILS

CASING Borehole Diameter ____ in.

[1] Diameter 6 in. Length 30 ft. Wall Thickness .188 in.

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

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

Joints: [1] Threaded [1] Welded [1] 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 ____ ft. to ____ ft.

Pitless Device ☑ Adapter ☐ Preassembled unit

Use of Well Singel Family Dwelling

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other

Date of Completion 7-1-95

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	0	12
Glacial Deposits	12	25
Coal	25	29
Sandy Shale	29	125
T.D	125	

WELL TEST

☒ Bailing ☐ Pumping* ☐ Other

Test rate 10 gpm Duration of test ½ hrs.

Drawdown 20 ft.

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

Static Level (depth to water) 20 ft. Date: 7-1-95

Quality (clear, cloudy, taste, odor) ____

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

PUMP

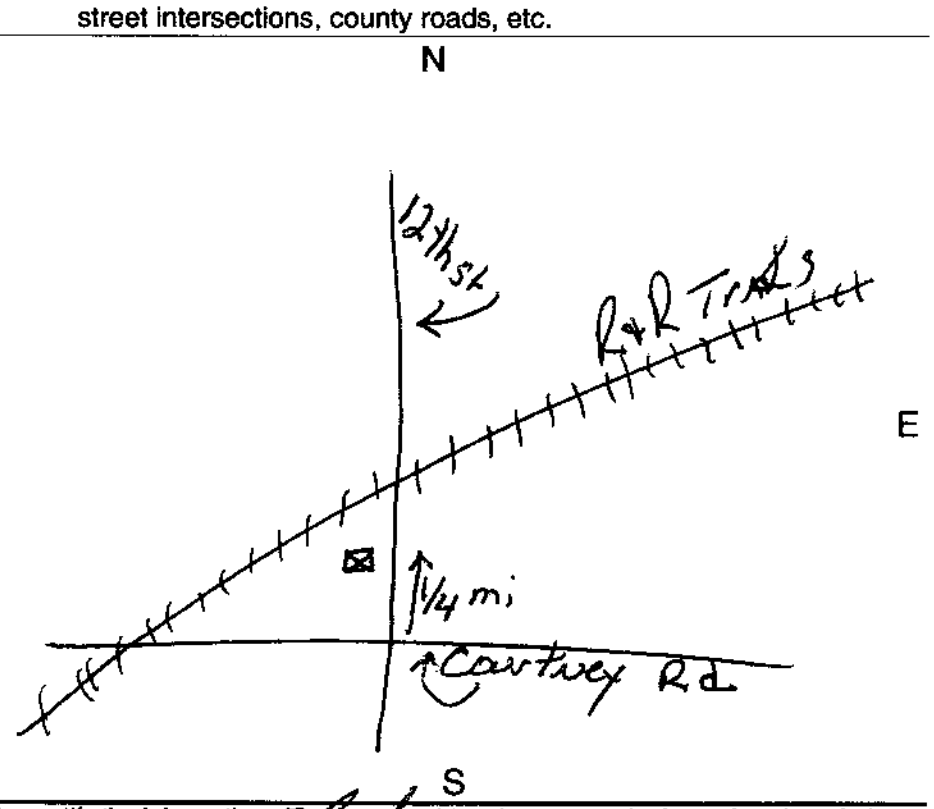
Type of pump Sub Capacity 10 gpm

Pump set at 110 ft.

Pump installed by Owner & Dan Kerr

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.

I hereby certify the information given is accurate and correct to the best of my knowledge.

Drilling Firm Rick Scott Drilling

Address P.O. Box 2412

City, State, Zip Alliance Oh. 44601

Signed ____

Date 7-1-95

ODH Registration Number 2064

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

5512 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