

CONSTRUCTION DETAILS									
CASING		Borehole Diameter _____ in.				GROUT			
① Diameter <u>6</u> in.		Length <u>25</u> ft.		Wall Thickness <u>.142</u> in.		Material <u>Natural cuttings</u>		Volume used _____	
② Diameter _____ in.		Length _____ ft.		Wall Thickness _____ in.		Method of installation <u>Driving process</u>			
Type: ① ☐ Steel		② ☒ Galv.		① ☐ PVC		② ☐ Other _____		Depth: placed from _____ ft. to <u>25</u> ft.	
② ☒ Threaded		① ☐ Welded		① ☐ Solvent		② ☐ Other _____		GRAVEL PACK (Filter Pack)	
② ☐ Other _____								Material _____ Volume used _____	
Liner: Length _____ Type _____		Wall Thickness _____ in.		Depth: placed from _____ ft. to _____ ft.					
SCREEN					Pitless Device ☐ Adapter ☐ Preassembled unit				
Type (wire wrapped, louvered, etc.) _____ Material _____					Use of Well				
Length _____ ft. Diameter _____ in.					☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____				
Set between _____ ft. and _____ ft. Slot _____					Date of Completion <u>12-28-93</u>				

WELL TEST

☒ Bailing 8 ☐ Pumping* ☐ Other _____
Test rate _____ gpm Duration of test 4 hrs
Drawdown 82 ft.
Measured from: ☐ top of casing ☒ ground level ☐ Other _____
Static Level (depth to water) 14 ft. Date: 12-28-98
Quality (clear, cloudy, taste, odor) _____
*(Attach a copy of the pumping test record, per section 1521.05, ORC)

From	To
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0	8
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प 25

Lime stone

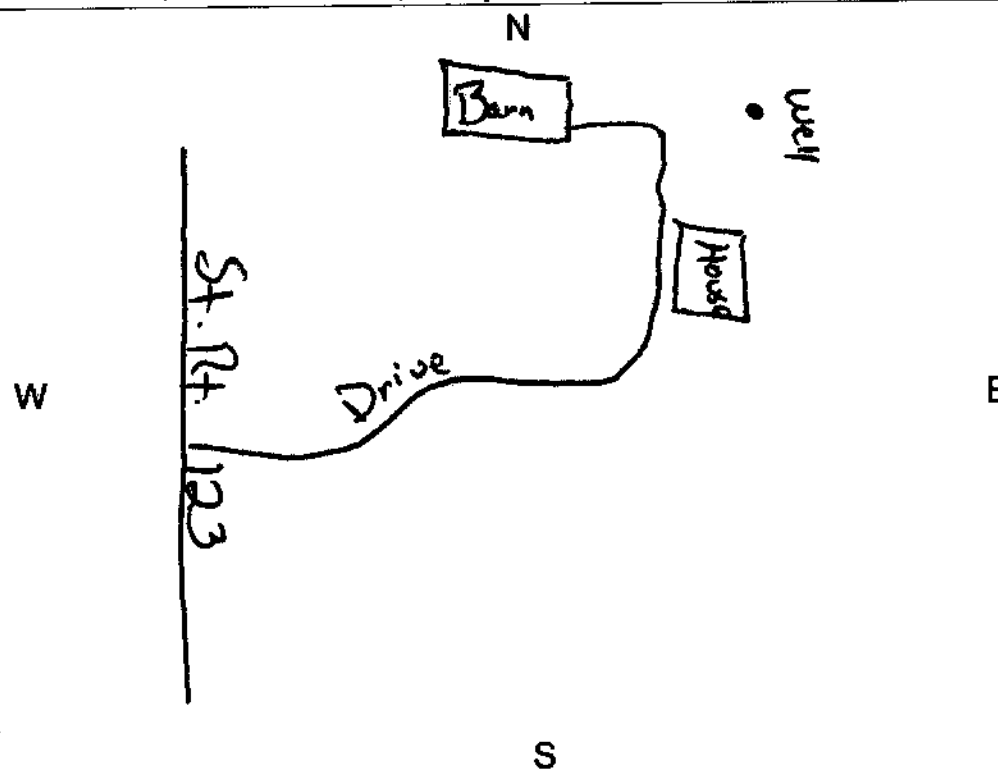
26	100
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PUMP

Type of pump _____ Capacity _____ gpm
Pump set at _____ ft.
Pump installed by _____

SKETCH SHOWING WELL LOCATION

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



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

Signed

Date _____

ODH Registration Number

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