

WELL LOG AND DRILLING REPORT

777151

DNR 7802.93
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 Highland

TOWNSHIP Fairfield

SECTION/LOT No.
(CIRCLE ONE)

OWNER/BUILDER
(CIRCLE ONE OR BOTH)

William Knot

PROPERTY ADDRESS

12835 st. Rt. 72 N. Leesburg

LOCATION OF PROPERTY

12835 st. Rt. 72 N. Leesburg OH 45135

CONSTRUCTION DETAILS

CASING Borehole Diameter 5 5/8 in. **GROUT** Material Cutting Volume used 35 gallon

① Diameter 6" OD in. Length 116 ft. Wall Thickness 0.258 in. Material whit pour

② Diameter _____ in. Length _____ ft. Wall Thickness _____ in. Method of installation _____

Type: ① Steel ② Galv. ③ PVC ④ Other _____

Joints: ① Threaded ② Welded ③ Solvent ④ Other _____

Liner: Length _____ Type _____ Wall Thickness _____ in. Depth: placed from 116 ft. to ground level ft.

SCREEN NO **GRAVEL PACK** (Filter Pack) Material 1 1/4" limestone Volume used 30 gallon

Type (wire wrapped, louvered, etc.) _____ Material _____ Method of installation Drop in a handful at a time.

Length _____ ft. Diameter _____ in. Depth: placed from 136 ft. to 106 ft.

Set between _____ ft. and _____ ft. Slot _____

Pitless Device ☒ Adapter ☐ Preassembled unit

Use of Well Home

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

Date of Completion 8-20-93

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

<u>Topsoil</u>	<u>0</u>	<u>3</u>
<u>Topsoil & Sandy clay</u>	<u>3</u>	<u>9</u>
<u>Yellow clay & coarse sand</u>	<u>9</u>	<u>21</u>
<u>Yellowish clay, sand, small gravel</u>	<u>21</u>	<u>45</u>
<u>Fine sand & small gravel</u>	<u>45</u>	<u>80</u>
<u>Large gravel & coarse sand</u>	<u>80</u>	<u>116</u>
<u>soft gray shale</u>	<u>116</u>	<u>136</u>

Water is coming from bottom of casing at 116 ft.
Well is gravel packed back to 106 ft.

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270800239 JAN 1993

WELL TEST

☒ Bailing ☐ Pumping* ☐ Other _____

Test rate 8 gpm Duration of test 6 hrs.

Drawdown 40 ft.

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

Static Level (depth to water) 17 ft. Date: 9-14-93

Quality (clear, cloudy, taste, odor) no odor

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

PUMP

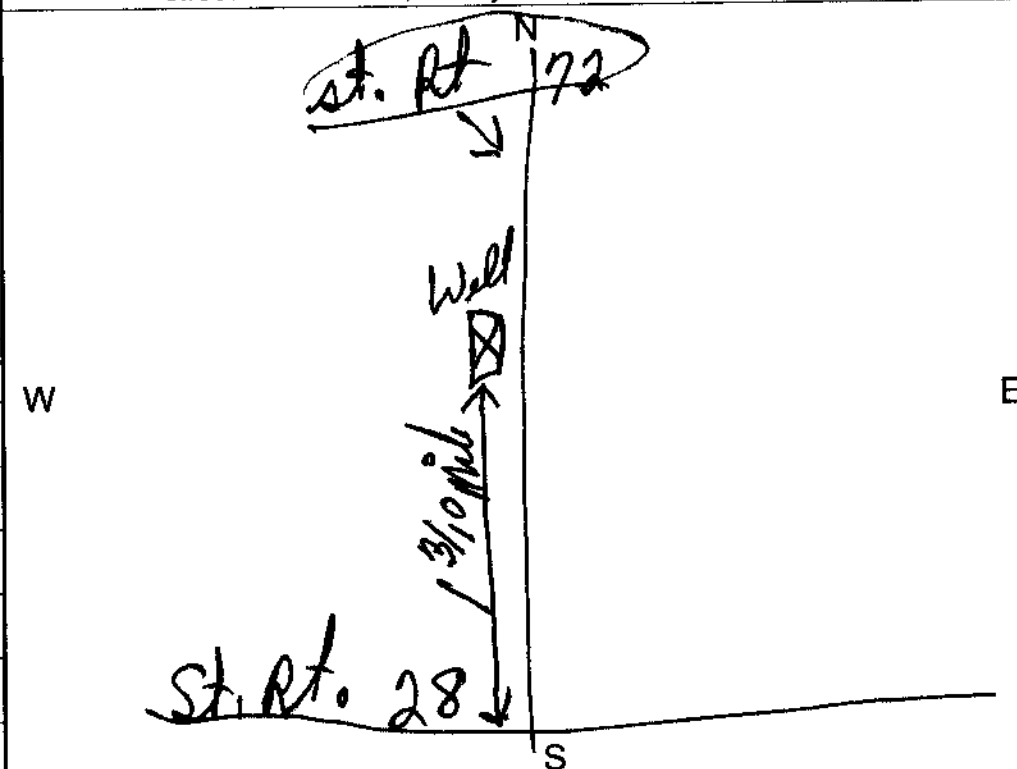
Type of pump NO Capacity _____ gpm

Pump set at _____ ft.

Pump installed by _____

SKETCH SHOWING WELL LOCATION

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



*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

Walt Drilling

Signed

Wayne Walt

Address

4748 Carmel Rd.

Date

9-14-93

City, State, Zip

4748 Carmel Rd. Hillsboro OH

ODH Registration Number

1489

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

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