

COUNTY MADISON TOWNSHIP FAIRFIELD SECTION/LOT No. _____
(CIRCLE ONE)
OWNER/BUILDER ROBERT M. SCHLAEGEL PROPERTY ADDRESS 7435 Lilly Chapel Seagrave Rd/58
(CIRCLE ONE OR BOTH) (ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY EAST of Jordon DR 665 TO LILLY CHAPEL GEOGUELLIER RD TURN LEFT

CONSTRUCTION DETAILS

CASING Borehole Diameter 7 7/8 in.
① Diameter 5 in. Length 169 ft. Wall Thickness SPR 21 in. Material Bea Seal Volume used 300/b5
② Diameter _____ in. Length _____ ft. Wall Thickness _____ in. Method of installation _____
Type: ① Steel ① Galv. ☒ PVC ① _____
② _____ ② _____ ② Other _____
Joints: ① Threaded ① Welded ☒ Solvent ① _____
② _____ ② _____ ② 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 _____
GRAVEL PACK (Filter Pack)
Material _____ Volume used _____
Method of installation _____
Depth: placed from _____ ft. to _____ ft.
Pitless Device ☐ Adapter ☐ Preassembled unit
Use of Well House well
☒ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____
Date of Completion 9-21-93

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>Yellow Clay</u>	<u>0</u>	<u>20</u>
<u>HARD PAN</u>	<u>20</u>	<u>85</u>
<u>SAND</u>	<u>85</u>	<u>89</u>
<u>HARD PAN</u>	<u>89</u>	<u>148</u>
<u>Red clay Prouschok</u>	<u>148</u>	<u>169</u>
<u>WELL AT Limestone</u>	<u>169</u>	<u>199</u>
<u>WELL AT</u>	<u>199</u>	

Ref. 1c

WELL TEST

☐ Bailing ☐ Pumping* ☐ Other _____
Test rate 20 gpm Duration of test 24 hrs
Drawdown 68 ft.
Measured from: ☒ top of casing ☐ ground level ☐ Other _____
Static Level (depth to water) 57 ft. Date: _____
Quality (clear, cloudy, taste, odor) clear

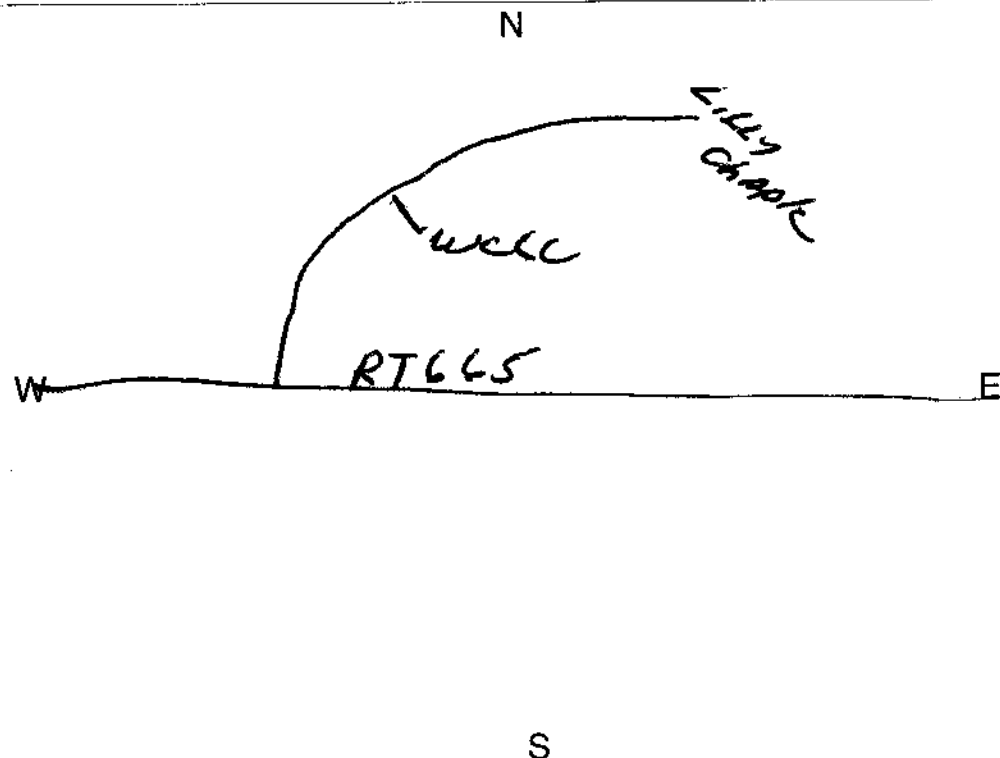
*(Attach a copy of the pumping test record, per section 1521.05, ORC)

PUMP

Type of pump AIR MOTOR Capacity 1/2 gpm
Pump set at 85 FT ft.
Pump installed by S J Lenczner

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 T L UNDERHILL
WELL DRILLING
Address 5510 REAR RT. 187
MECHANICSBURG, OH 43044
City, State, Zip _____

Signed [Signature]
Date 9-21-93
ODH Registration Number 1594

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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