

COUNTY PERRY

TOWNSHIP Jackson

SECTION LOT No. 13
(CIRCLE ONE)

OWNER/BUILDER
(CIRCLE ONE OR BOTH)

PAT L. CARTER

PROPERTY ADDRESS 3670 Turp. Rd/189 Junction
(ADDRESS OF WELL LOCATION A)

LOCATION OF PROPERTY CORNER OF C. Rd. 51 & L. 189

CONSTRUCTION DETAILS

CASING		Borehole Diameter <u>5</u> in.		GROUT	
① Diameter <u>5</u> in.	Length _____ ft.	Wall Thickness <u>275</u> in.	Material <u>BENONITE</u>	Volume used <u>200/63</u>	
② Diameter _____ in.	Length _____ ft.	Wall Thickness _____ in.	Method of installation <u>DRY</u>		
Type: ☒ Steel	☐ Galv.	☐ PVC	Depth: placed from <u>SURFACE</u> ft. to <u>?</u>		
☐ Other _____	☐ Other _____	☐ Other _____	GRAVEL PACK (Filter Pack)		
Joints: ☒ Threaded	☐ Welded	☐ Solvent	Material _____	Volume used _____	
☐ Other _____	☐ Other _____	☐ Other _____	Method of installation _____		
Liner: _____	Length _____	Type _____	Wall Thickness _____ in.	Depth: placed from _____ ft. to _____	
SCREEN			Pitless Device ☒ Adapter ☐ Preassembled unit		
Type (wire wrapped, louvered, etc.) _____			Use of Well <u>DOMESTIC</u>		
Length _____ ft.			☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____		
Set between _____ ft. and _____ ft.			Date of Completion <u>11-12-94</u>		

WELL LOG*

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

Show color, texture, hardness, and formation:
sandstone, shale, limestone, gravel, clay, sand, etc.

Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.	From	To
Mud & SAND BROWN	0	25
GRAY SAND	25	30
GRAY CLAY	30	35
GRAY SAND STONE	35	60
GRAY SHALE & SAND	60	65

WELL TEST

☒ Bailing ☐ Pumping* ☐ Other _____
 Test rate 10 gpm Duration of test 2 hr
 Drawdown 45
 Measured from: ☒ top of casing ☐ ground level ☐ Other _____
 Static Level (depth to water) 15 ft. Date: 11-9-94
 Quality (clear, cloudy, taste, odor) cloudy odor

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

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.

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A hand-drawn map of a property. At the top, a horizontal line is labeled "C.R. 57". Below this line, a vertical line runs down the right side of the map. A horizontal line labeled "Drive Way" crosses the vertical line. To the left of the vertical line, there is a dot labeled "well". To the right of the vertical line, the text "T. 189" is written. A wavy line labeled "Turkey Run" runs diagonally across the lower part of the map. The letter "W" is at the top left, and "S" is at the bottom center.

2

*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. C. Anderson
Address 3745 Twsp. Rd. 221 S.R.

Signed J. J. H. H. H. H.
Date 11-12-94

City, State, Zip New L., O. 43764

ODH Registration Number 102

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

5565