

DNR 7802.94
TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

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

813800

Permit Number 193042

COUNTY Muskingum

TOWNSHIP Washington

SECTION 10 LOT No. 10
(Circle One)

OWNER/BUILDER Clint Cameron
(Circle One or Both) First Last

PROPERTY ADDRESS 3930 Adamsville Rd Zanesville
(Address of well location) Number Street City

LOCATION OF PROPERTY 3930 Adamsville Rd

Zip Code + 4
43701

CONSTRUCTION DETAILS

CASING (Length below grade) Borehole Diameter <u>10"</u> in.		GROUT	
① Diameter <u>7</u> in. Length <u>82</u> ft. Wall Thickness <u>.231</u> in.	Material <u>Cement</u> Volume used <u>800 Lb</u>		
② Diameter _____ in. Length _____ ft. Wall Thickness _____ in.	Method of installation <u>Poured</u>		
Type: ☒ Steel ☐ Galv. ☐ PVC	Depth: placed from <u>30</u> ft. to <u>0</u> ft.		
Joints: ☒ Threaded ☐ Welded ☐ Solvent	GRAVEL PACK (Filter Pack)		
Liner: Length <u>80</u> Type <u>Steel</u> Wall Thickness <u>.231</u> in.	Material <u>Gravel</u> Volume used <u>3000 Lb</u>		
SCREEN	Method of installation <u>Poured</u>		
Type (wire wrapped, louvered, etc.) _____ Material _____	Depth: placed from <u>80</u> ft. to <u>30</u> ft.		
Length _____ ft. Diameter _____ in.	Pitless Device ☒ Adapter ☐ Preassembled unit		
Set between _____ ft. and _____ ft. Slot _____	Use of Well <u>Domestic</u>		
	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other _____		
	Date of Completion <u>10-1-96</u>		

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>Loam</u>	<u>0</u>	<u>3</u>
<u>Brown Shale</u>	<u>3</u>	<u>15</u>
<u>Gray Shale (soft)</u>	<u>15</u>	<u>25</u>
<u>Brown Sandstone</u>	<u>25</u>	<u>55</u>
<u>Gray Shale</u>	<u>55</u>	<u>72</u>
<u>Gray Sandy Shale</u>	<u>72</u>	<u>80</u>

water 45'-50'

WELL TEST

☒ Bailing	☐ Pumping*	☐ Other _____
Test rate <u>20</u> gpm	Duration of test <u>2</u> hrs.	
Drawdown <u>57'</u>		
Measured from: ☐ top of casing ☒ ground level ☐ Other _____		
Static Level (depth to water) <u>23</u> ft.	Date: _____	
Quality (clear, <u>cloudy</u> , taste, odor) _____		

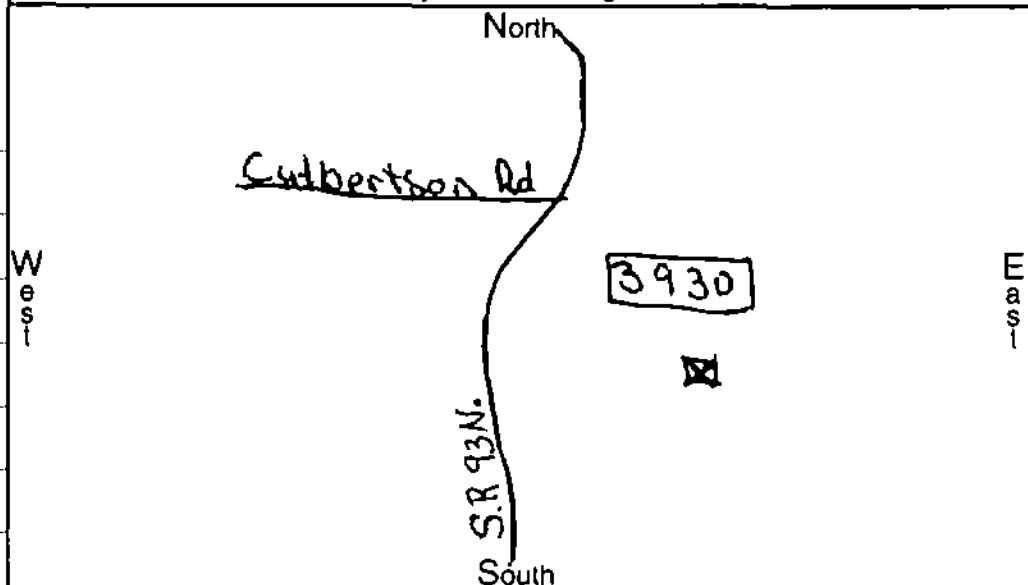
*(Attach a copy of the pumping test record, per section 1521.05, ORC)

PUMP

Type of pump <u>Submersible</u>	Capacity <u>10</u> gpm
Pump set at <u>70'</u>	
Pump installed by <u>Bohn Drilling</u>	

WELL LOCATION

Location of well in State Plane coordinates, if available:
Zone _____ x _____ y _____
Elevation of well _____ ft./m. Datum plain: ☐ NAD27 ☐ NAD83
Source of coordinates: ☐ GPS ☐ Survey ☐ Other _____
Sketch a map showing distance well lies from numbered state highways, street intersections, county roads, buildings or other notable landmarks.



(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 Clinton Cameron

Signed Clint Cameron

Address 3636 Adamsville Rd.

Date 11-1-96

City, State, Zip Zanesville, Ohio 43701

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