

WELL LOG AND DRILLING REPORT

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

817981

Permit Number 126-97

COUNTY

Hocking

TOWNSHIP

Green

SECTION/LOT No.

(Circle One)

OWNER/BUILDER

(Circle One or Both)

Gary Herlman
First Last

PROPERTY ADDRESS

(Address of well location)

34336
Number

Keller Rd. Logan Oh.
Street City

43136
Zip Code - 4

LOCATION OF PROPERTY

Same

CONSTRUCTION DETAILS

CASING (Length below grade)		Borehole Diameter <u>7</u> in.		GROUT	
[1] Diameter <u>5 1/2</u> in.	Length* <u>47</u> ft.	Wall Thickness <u>1/4</u> in.	Material <u>Benseal</u>	Volume used <u>3 bags</u>	
[2] Diameter	Length*	Wall Thickness	in. Method of installation <u>Hand in annulus</u>		
Type: [1] <u>Steel</u>	[1] Galv.	[1] PVC	Depth: placed from <u>47</u> ft. to <u>Surface</u> ft.		
[2] <u>Threaded</u>	[2] Welded	[2] Solvent	GRAVEL PACK (Filter Pack)		
			Material	Volume used	
			Method of installation		
Liner: Length	Type	Wall Thickness	in. Depth: placed from	ft. to	ft.
SCREEN			Pitless Device [] Adapter [] Preassembled unit		
Type (wire wrapped, louvered, etc.)			Material		
Length	ft.	Diameter	Use of Well <u>Residence</u>		
Set between	ft. and	ft.	Slot	[] Rotary <u>Cable</u> [] Augered [] Driven [] Dug [] Other	
Date of Completion					

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>Surface</u>	<u>0</u>	<u>15</u>
<u>Shale (gray)</u>	<u>15</u>	<u>45</u>
<u>Sand & shale</u>	<u>45</u>	<u>78</u>
<u>Sand water</u>	<u>78</u>	<u>80</u>
<u>Bad acid @ 78'</u>	<u>78</u>	<u>TD</u>

WELL TEST

[x] Bailing [] Pumping* [] Other
Test rate 30 gpm Duration of test 2 hrs.
Drawdown 20 ft.
Measured from: [x] top of casing [] ground level [] Other
Static Level (depth to water) 50 ft. Date: 9-20-97
Quality clear, cloudy, taste, odor

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

PUMP

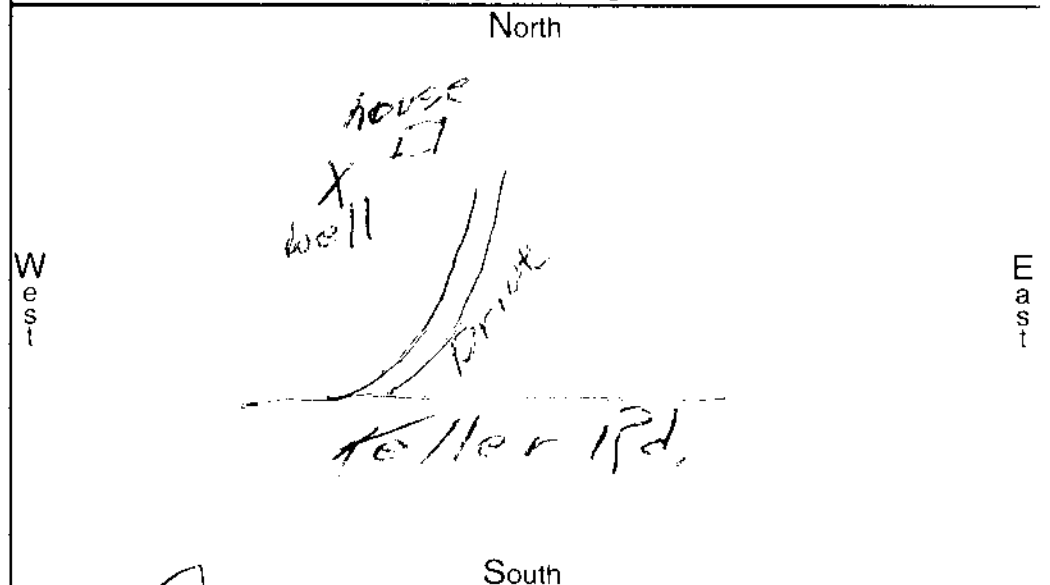
Type of pump Capacity gpm
Pump set at ft.
Pump installed by

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: [] IGPS [] 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

No Testine

Signed

Reed Molestine

Address

11097 Frasure Holber Rd.

Date

10-5-97

City, State, Zip

Logan Oh. 43136

ODH Registration Number

1151

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