

WELL LOG AND DRILLING REPORT

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

827397

Permit Number 58-97

COUNTY Vinton

TOWNSHIP Vinton

SECTION/LOT No. 11
(Circle One)

OWNER/BUILDER
(Circle One or Both)

Alicia Malone

PROPERTY ADDRESS
(Address of well location)

36501 Malone Rd.

Radcliff

LOCATION OF PROPERTY Vinton Twp. Rd. 12 near Gas Line

45695
Zip Code - 4

CONSTRUCTION DETAILS

CASING *(Length below grade)		Borehole Diameter	<u>5 7/8</u> in.	GROUT	<u>Drill Cuttings</u>		
[1] Diameter	<u>6</u> in.	Length*	<u>25</u> ft.	Material	<u>Granular Bedrock</u>	Volume used	<u>50 lbs</u>
[2] Diameter		Length*		Method of installation	<u>Pour</u>		
Type:	[1] Steel	[1] Galv.	[1] PVC	Depth: placed from	<u>25</u>	ft. to	<u>surface</u> ft.
	[2]	[2]	[2] Other	GRAVEL PACK (Filter Pack)			
Joints:	[1] Threaded	[1] Welded	[1] Solvent	Material		Volume used	
	[2]	[2]	[2] Other	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.)				Use of Well			
Length ft. Diameter				[] Rotary [] Cable [] Augered [] Driven [] Dug [] Other			
Set between ft. and ft. Slot				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>Yellow Sandy Clay</u>	<u>0</u>	<u>23</u>
<u>Gray Shale</u>	<u>23</u>	<u>25</u>
<u>Hard Gray Sandy Shale</u>	<u>25</u>	<u>105</u>
<u>Red Shale</u>	<u>105</u>	<u>110</u>
<u>Gray Sandy Shale</u>	<u>110</u>	<u>137</u>
<u>Silica Sand Rock</u>	<u>137</u>	<u>140</u>
Gray Shale	140	145
Gray Shale	145	150

WELL TEST

[] Bailing	<u>1/2?</u>	[] Pumping*	<u>40</u>	Other <u>air blow</u>
Test rate	<u>1/2</u> gpm	Duration of test	<u>-</u>	hrs.
Drawdown				ft.
Measured from:	[] top of casing	[] ground level	[] Other	
Static Level (depth to water)		ft.	Date:	
Quality (clear, cloudy, taste, odor)				

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

PUMP

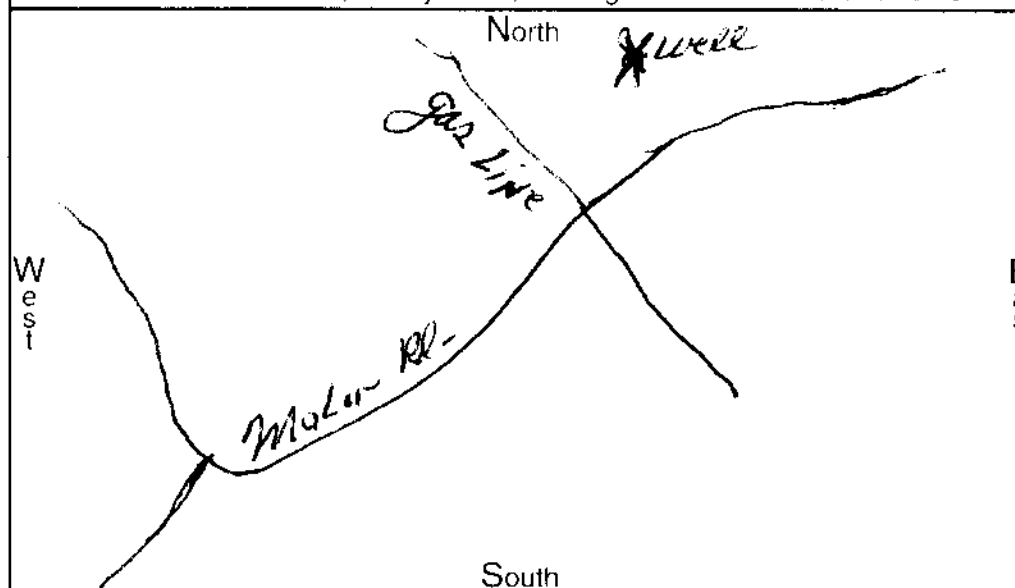
Type of pump	Capacity	gpm
Pump set at		ft.
Pump installed by		

WELL LOCATION

Location of well in State Plane coordinates, if available:

Zone	x	y
Elevation of well	ft./m.	Datum plain: [] INAD27 [] INAD83
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 Hall's Well Drilling

Signed Randolph Hall

Address 23957 STR. 93.5

Date 10-1-97

City, State, Zip Wellston, Ohio 45692

ODH Registration Number 423

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