

WELL LOG AND DRILLING REPORT

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

827520

Permit Number 96-318

COUNTY Portage

TOWNSHIP Brimfield

SECTION/LOT No.
(Circle One)

OWNER/BUILDER Michael Stone PROPERTY ADDRESS 4501 Sunnybrook Rd. City Kent
(Circle One or Both) First Last (Address of well location) Number Street Zip Code + 4

LOCATION OF PROPERTY 4501 Sunnybrook Rd. 44240

CONSTRUCTION DETAILS

CASING * (Length below grade)		Borehole Diameter		in.		GROUT	
1. Diameter	<u>5</u>	in.	Length*	<u>72 1/2</u>	ft.	in.	Material
2. Diameter		in.	Length*		ft.	in.	Method of installation
Type:	☒ Steel	☐ Galv.	☐ PVC	☐ Other		Depth: placed from	ft. to
Joints:	☒ Threaded	☐ Welded	☐ Solvent	☐ Other		GRAVEL PACK (Filter Pack)	
Liner:	Length	Type	Wall Thickness			Material	Volume used
SCREEN		Type (wire wrapped, louvered, etc.)		Material		Method of installation	
Length	<u>none</u>	ft.	Diameter			Depth: placed from	ft. to
Set between	ft. and		ft.	Slot		Pitless Device	Adapter ☐ Preassembled unit ☐
						Use of Well	<u>Private</u>
						in.	☒ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other
						Date of Completion	<u>Aug 14/96</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
SAND	0	13
Clay - SAND	13	21
Clay	21	52
SAND - CLAY	52	60
Lime Stone	60	70
SAND - Stone	70	74

WELL TEST

☒ Bailing ☒ Pumping* ☐ Other
Test rate 12 gpm Duration of test 2 hrs.
Drawdown 28 ft.
Measured from: ☒ top of casing ☐ ground level ☐ Other
Static Level (depth to water) 32 ft. Date: Aug 20/96
Quality clear (cloudy, taste, odor)

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

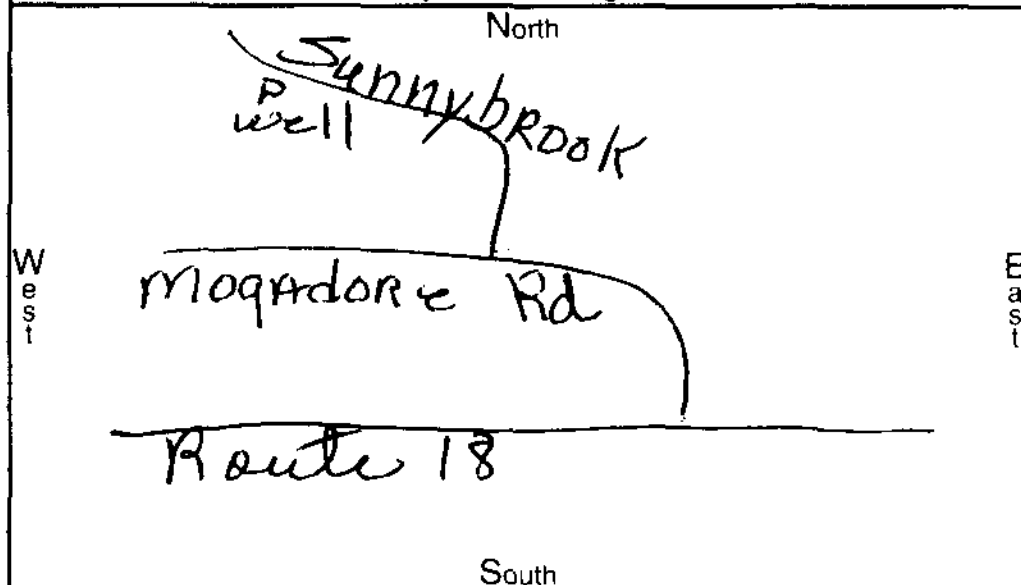
PUMP

Type of pump Serm Capacity 7 gpm
Pump set at 70 ft.
Pump installed by CARL Lemon

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 CARL Lemon

Signed

Address 1067 E AVER ST

Date

City, State, Zip Moquadore Oh 44240

ODH Registration Number

893

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