

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

Permit Number 13454

COUNTY Ross TOWNSHIP Concord SECTION/LOT No. _____
(Circle One)
OWNER/BUILDER George Mavis PROPERTY ADDRESS 5491 Goodhope Rd., Chillicothe
(Circle One or Both) First Last (Address of well location) Number Street City 45601
LOCATION OF PROPERTY Same Zip Code + 4 _____

CONSTRUCTION DETAILS

CASING (Length below grade) <u>6</u> ft.		Borehole Diameter <u>5 3/8</u> in.		GROUT	
1 Diameter	<u>6</u> in.	Length	<u>26</u> ft.	Wall Thickness	<u>.142</u> in.
2 Diameter	<u> </u> in.	Length	<u> </u> ft.	Wall Thickness	<u> </u> in.
Type:	1 ☒ Steel	2 ☒ Galv.	1 ☐ PVC	2 ☐ Other	<u> </u>
Joints:	1 ☒ Threaded	2 ☒ Welded	1 ☐ Solvent	2 ☐ Other	<u> </u>
Liner:	Length <u> </u>	Type <u> </u>	Wall Thickness <u> </u>	in.	
SCREEN				GRAVEL PACK (Filter Pack)	
Type (wire wrapped, louvered, etc.) <u> </u>				Material <u> </u>	
Length <u> </u> ft.				Diameter <u> </u> in.	
Set between <u> </u> ft. and <u> </u> ft.				Slot <u> </u>	
Material <u> </u>				Depth: placed from <u> </u> ft. to <u> </u> ft.	
Pitless Device ☐ Adapter ☐ Preassembled unit ☐				Use of Well <u> </u>	
Date of Completion <u>6-27-96</u>				☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Dug ☐ Other <u> </u>	

WELL LOG*

INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.

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

[illegible]

WELL TEST

☒ Bailing ☐ Pumping* ☐ Other —
Test rate 10 gpm Duration of test 3 hrs.
Drawdown 34 ft.
Measured from: ☐ top of casing ☒ ground level ☐ Other _____
Static Level (depth to water) 49 ft. Date: 6-27-96
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: ☐ GPS ☐ Survey ☐ Other _____

Sketch a map showing distance well lies from numbered state highways, street intersections, county roads, buildings or other notable landmarks.

North

RT. 35
4-LANE

W

E

RT. 138

South

Austin Rd.

Goodhope Rd.

House or well

Clarksville Exit

*(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 Estep Water Well Drilling

Signed James B. Estep

Address P.O. Box 15

Date 9-29-96

City, State, Zip Richmond Dale, Ohio 45673

ODH Registration Number 459

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