

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

840432

Permit Number

1714

COUNTY *Williams*

TOWNSHIP *Springfield*

SECTION/LOT No.
(Circle One)

OWNER/BUILDER *Richard Sullivan*
(Circle One or Both) First Last

PROPERTY ADDRESS *20977*
(Address of well location) Number

Rd C
Street

Bryan
City

43206
Zip Code + 4

LOCATION OF PROPERTY

CONSTRUCTION DETAILS

CASING * (Length below grade)		Borehole Diameter		in.		GROUT	
1 Diameter	<i>6</i>	in.	Length*	<i>90</i>	ft.	Wall Thickness	<i>237</i>
2 Diameter		in.	Length*		ft.	in.	Material <i>benzocite</i>
Type:	1 Steel	1 Galv.	☒ PVC	1		Method of installation	<i>pumped around casing</i>
	2	2	2	2		Depth: placed from	<i>90</i> ft. to <i>surface</i> ft.
Joints:	1 Threaded	1 Welded	☒ Solvent	1		GRAVEL PACK (Filter Pack)	
	2	2	2	2		Material	Volume used
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 <i>Domestic</i>			
Length ft. Diameter				in. ☒ Rotary Cable Augered Driven Dug Other			
Set between ft. and ft. Slot				Date of Completion <i>9-15-97</i>			

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
<i>Top soil</i>	<i>0</i>	<i>1</i>
<i>yellow clay</i>	<i>1</i>	<i>18</i>
<i>Blue clay</i>	<i>18</i>	<i>90</i>
<i>Shale</i>	<i>90</i>	<i>135</i>

WELL TEST

Bailing	Pumping*	Other
Test rate <i>4</i>	gpm	Duration of test <i>24</i> hrs.
Drawdown		ft.
Measured from: ☒ top of casing	ground level	Other
Static Level (depth to water)	<i>60</i> ft.	Date: <i>9-15-97</i>
Quality (clear, cloudy, taste, odor)		

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

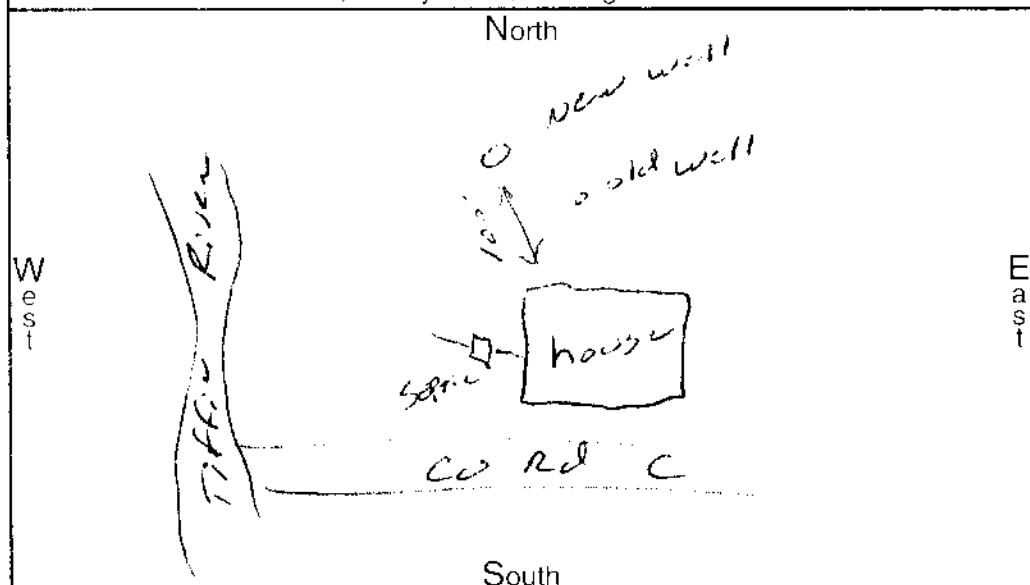
PUMP

Type of pump	<i>Meyers</i>	Capacity	<i>80</i> gpm
Pump set at	<i>85</i>		ft.
Pump installed by <i>Costons</i>			

WELL LOCATION

Location of well in State Plane coordinates, if available:
Zone *x* *y*
Elevation of well ft./m. Datum plain: ☐ NAD27 ☐ 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 *Costons Well Service*

Signed *Michael Coston*