

WELL LOG AND DRILLING REPORT

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

841068

Permit Number 97-17

COUNTY *Henry*

TOWNSHIP *Washington*

SECTION LOT No *5722*
(Circle One)

OWNER/BUILDER *DONALD MOORE*
(Circle One or Both) First Last

PROPERTY ADDRESS *5722 Rd. U*
(Address of well location) Number Street

Liberty Center
City
43532
Zip Code - 4

LOCATION OF PROPERTY *North side of Rd. U, 1/4 mi. East of Rd. 6*

CONSTRUCTION DETAILS

CASING (Length below grade)		Borehole Diameter <i>30</i> in.		GROUT	
1 Diameter <i>6</i> in.	Length* <i>5</i> ft.	Wall Thickness <i>.343</i> in.	Material	Volume used	
2 Diameter <i>20</i> in.	Length* <i>20</i> ft.	Wall Thickness <i>.500</i> in.	Method of installation		
Type: 1 Steel 2 Galv. ☒ PVC	1 Threaded 2 Welded ☒ Solvent	1 Other	Depth: placed from	ft. to	
		2 Other	GRAVEL PACK (Filter Pack)		
			Material <i>Sand + gravel</i>	Volume used <i>3 1/2 Ton</i>	
			Method of installation <i>dumped</i>		
Liner: Length	Type	Wall Thickness	in.	Depth: placed from	ft. to
				26	5
SCREEN					
Type (wire wrapped, louvered, etc.)		Material			
Length	ft.	Diameter	in.	Rotary Cable ☒ Augered ☒ Driven ☐ Dug ☐ Other	
Set between	ft. and	ft.	Slot	Date of Completion <i>12-6-97</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>dark sandy fill</i>	<i>0</i>	<i>1</i>
<i>brown sandy clay water@5"</i>	<i>1</i>	<i>7</i>
<i>gray silty sand</i>	<i>7</i>	<i>13</i>
<i>soft gray clay</i>	<i>13</i>	<i>15</i>
<i>solid gray clay</i>	<i>15</i>	<i>26</i>

WELL TEST

Bailing	☒ Pumping*	☐ Other
Test rate <i>5</i> gpm	Duration of test <i>1</i> hrs.	
Drawdown <i>17</i> ft.		
Measured from: top of casing ☒ ground level ☐ Other		
Static Level (depth to water) <i>5</i> ft.	Date: <i>11-21-97</i>	
Quality (clear, cloudy, taste, odor) <i>Slight Cloud</i>		

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

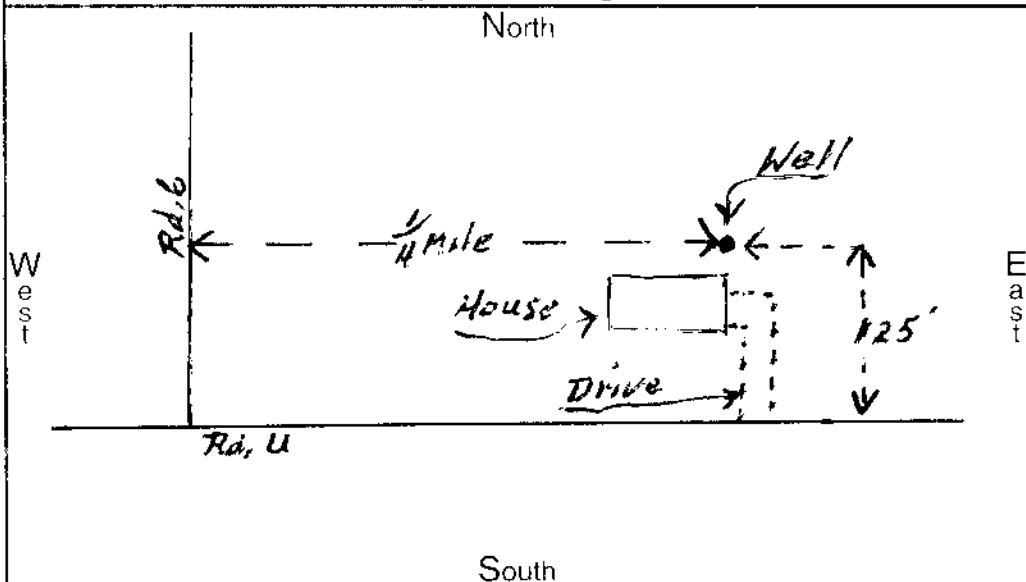
PUMP

Type of pump <i>Submersible</i>	Capacity <i>12</i> gpm
Pump set at <i>23</i>	ft.
Pump installed by <i>Wm. A. Gorsuch</i>	

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.



*(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 *DELTA DRILLING*

Signed *Wm. A. Gorsuch*

Address *9981 Co. Rd. 4*

Date *12-21-97*

City, State, Zip *Delta, Ohio 43515*

ODH Registration Number *1723*

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