

WELL LOG AND DRILLING REPORT

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

841071
Permit Number 97-116

COUNTY *Fulton*

TOWNSHIP *Dover*

SECTION LOT No. 3
(Circle One)

OWNER/BUILDER *David Roth*
(Circle One or Both) First Last
PROPERTY ADDRESS *15730 Co. Rd. H Wauseon*
(Address of well location) Number Street City

LOCATION OF PROPERTY *North side of Co. Rd. H, 3/4 mile West of Rte. 108* 43567
Zip Code + 4

CONSTRUCTION DETAILS

CASING (Length below grade) Borehole Diameter *30* in.
1 Diameter *6* in. Length *6* ft. Wall Thickness *.343* in. Material Volume used
2 Diameter *20* in. Length *20* ft. Wall Thickness *.50* in. Method of installation
Type: 1 Steel 2 Galv. ☒ PVC 3 Other
Joints: 1 Threaded 2 Welded ☒ Solvent 3 Other
Liner: Length Type Wall Thickness in. Depth placed from ft. to ft.
GRAVEL PACK (Filter Pack)
Material *Sand + gravel* Volume used *3 1/2 Ton*
Method of installation *dumped*
in. Depth placed from *26 1/2* ft. to *6* ft.
Pitless Device ☒ Adapter ☐ Preassembled unit
Use of Well *SFD*
Rotary Cable ☒ Augered Driven Dug Other
Date of Completion *2-14-98*

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>Sand, Tan water at 4'</i>	<i>0</i>	<i>9</i>
<i>sand, gray silty</i>	<i>9</i>	<i>11</i>
<i>clay, gray</i>	<i>11</i>	<i>26 1/2</i>

WELL TEST

Bailing ☒ Pumping* ☐ Other
Test rate *5* gpm Duration of test *1* hrs.
Drawdown *20* ft.
Measured from: ☐ top of casing ☒ ground level ☐ Other
Static Level (depth to water) *3* ft. Date: *2-13-98*
Quality (clear, cloudy, taste, odor) *No odor, slight cloud*

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

PUMP

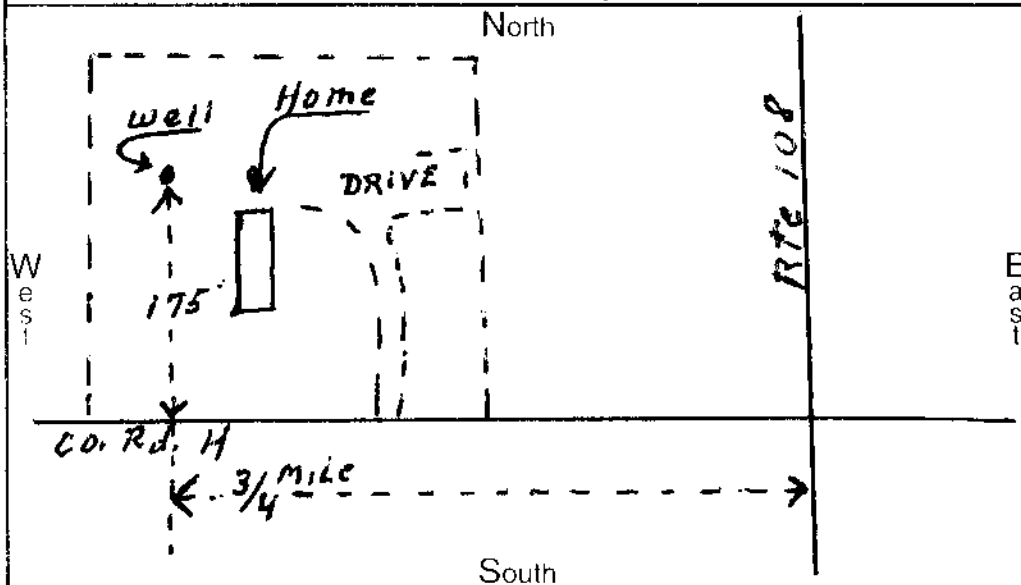
Type of pump *Jet* Capacity *?* gpm
Pump set at ft.
Pump installed by *owner*

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. Horvath*

Address *9981 Co. Rd. 4*

Date *2/16/98*

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