

WELL LOG AND DRILLING REPORT

TYPE OR USE PEN
SELF-TRANSCRIBING
PRESS-BOARD

Ohio Department of Natural Resources
Division of Water, 1939 Fountain Square Drive
Columbus, Ohio 43224 Phone (614) 265-6759

Form Number

29 841846

COUNTY Knox

TOWNSHIP Liberty

SECTION/LOT No. 3

OWNER/BUILDER Ron Ross

PROPERTY ADDRESS 7450 Simmons Church Rd Centerburg

LOCATION OF PROPERTY 7450 Simmons Church Rd.

43011

CONSTRUCTION DETAILS

CASING				GROUT			
Outer Diameter	5	Length	400	ft	Wall Thickness	0.244	in
Material		Weight		lb	Wall Thickness		in
Type	☒ J-Box	Other			Method of installation	dry	
Depth		Placed from	0	ft	to	200	ft
				GRAVEL PACK (Filter Pack)			
				Material			
				Volume used			
				Method of installation			
				Depth placed from			
				ft. to			
SCREEN				Pitress Device			
Type	Standard	Material		☒ Adapter			
Length		Material		Preassembled unit			
Set back		Slot		Use of Well residential			
				Rotary ☒ Cable			
				Augered			
				Dig			
				Other			
				Date of completion			
				8-25-97			

WELL LOG*

INDICATE DEPTHS AT WHICH WATER IS ENCOUNTERED.
Show color, texture, hardness, and formation
e.g. brown shale, onestone, gravel, clay, sand, etc.

	From	To
yellow clay and stone	0	22
gray clay and stone	22	360
gray clay and sand	360	393
gray shale	393	405

WELL TEST

Boiling	☒ Pumping	Other
Flow rate	10	gpm
Drawdown	5	ft
Measured from	☒ top of casing	ground level
Static Level (depth to water)	116	ft
Quality (clear, cloudy, taste, odor)	clear	
Date: 8-25-97		

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

PUMP

Type of pump	1hp submersible	Capacity	10
Pump serial	200		
Pump installed by	Gates Well Drilling		

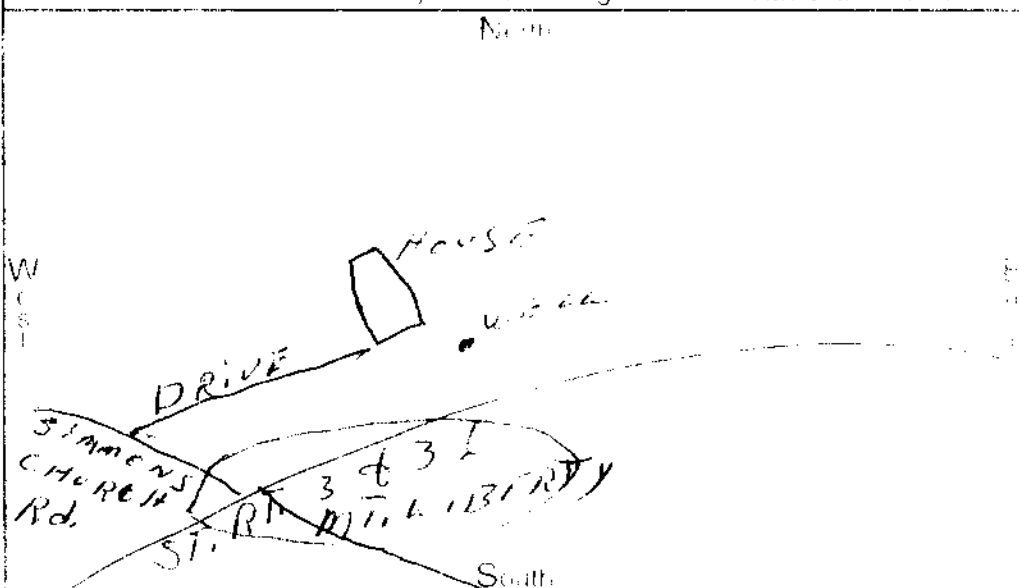
WELL LOCATION

Location of well: State Plane coordinates if available

Elevation of well

Source of coordinates: GPS Survey Other

Sketch a map showing distance well lies from numbered state highway, street or sections, county roads, buildings or other notable landmarks



Printed well logs needed to complete well log, use next consecutively numbered forms. I hereby certify the information given is accurate and correct to the best of my knowledge.

Date: Gates Well Drilling
Box 3

Signature: *Symon*
Date: 9-9-97

City: Mt. Liberty, Ohio 43048

ODNR Registration Number: 119

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