DNR 7802.94
TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

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

Permit Number 843071 145-96

COUNTY ALLEN TOWNSHIP RICHLAND SECTION/LOT No. (Circle One)

OWNER/BUILDER (Circle One or Both) CRAIG (First) BLOOM (Last)

PROPERTY ADDRESS (Address of well location) 11776 (Number) SNIDER (Street) Rd. BLUFFTON (City)

LOCATION OF PROPERTY S.A.A. Zip Code + 4

CONSTRUCTION DETAILS

CASING *(Length below grade) Borehole Diameter 6 in.

1 Diameter 6 in. Length* ft. Wall Thickness in.

2 Diameter in. Length* ft. Wall Thickness in.

Type: 1/2 Steel 1/2 Galv. 2 (PVC) 1/2 Other

Joints: 1/2 Threaded 1/2 Welded 1/2 Solvent 1/2 Other

Liner: Length Type Wall Thickness in.

SCREEN

Type (wire wrapped, louvered, etc.) Material

Length ft. Diameter in.

Set between ft. and ft. Slot

GROUT

Material Volume used

Method of installation

Depth: placed from ft. to ft.

GRAVEL PACK (Filter Pack)

Material Volume used

Method of installation

Depth: placed from ft. to ft.

Pitless Device | Adapter | Preassembled unit

Use of Well

X Rotary Cable Augered Driven Dug Other

Date of Completion 11-5-96

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	
		Drilled existing well Deeper well was 53'
53	143	Limestone
		Drilled 90' deeper

WELL TEST

Bailing Pumping* Other

Test rate 20 gpm Duration of test 1 hrs.

Drawdown ft.

Measured from: top of casing ground level Other

Static Level (depth to water) 53 ft. Date 11-5-96

Quality (clear, cloudy, taste, odor) Clear

*(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

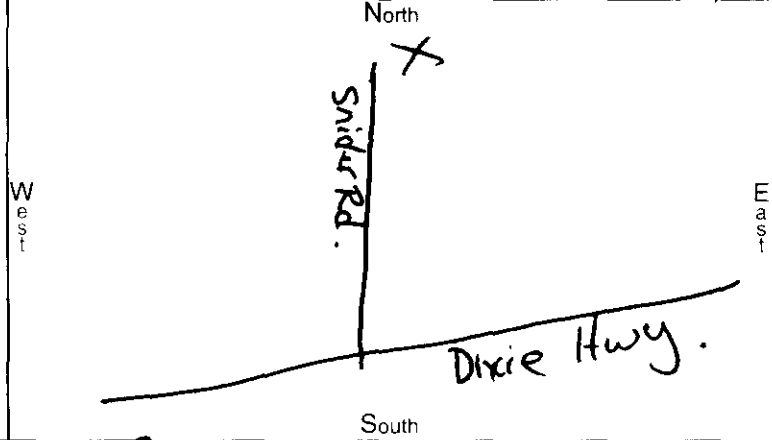
Location of well in State Plane coordinates, if available:

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.



*(If additional space is needed to complete well log, use next consecutively numbered form.)

Drilling Firm GH Bierly Inc

Address Box 7171

City, State, Zip Lafayette OH

I hereby certify the information given is accurate and correct to the best of my knowledge.

Signed Bruce Clum

Date 11-5-96

ODH Registration Number 715

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