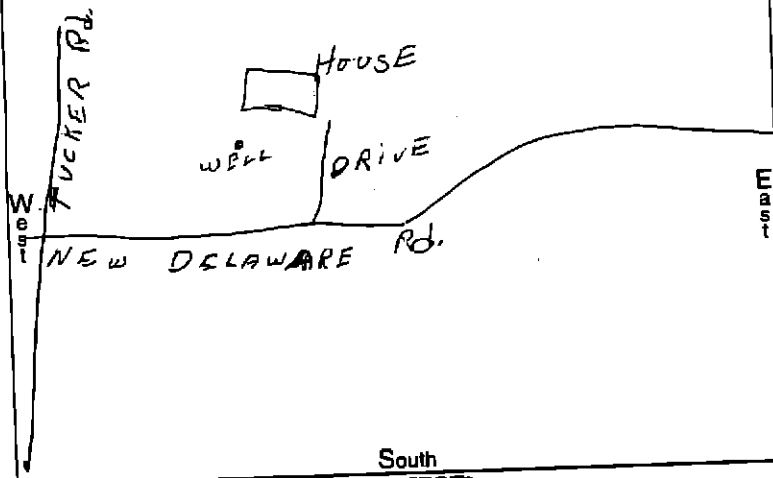


WELL LOG AND DRILLING REPORT

858761

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARDOhio Department of Natural Resources
Division of Water, 1939 Fountain Square Drive
Columbus, Ohio 43224-9971 Voice (614) 265-6739 Fax (614) 447-9503

WELL LOCATION		CONSTRUCTION DETAILS																
County <u>Knex</u> Township <u>Liberty</u> Owner/Builder <u>Michael & Alice Hickman</u> (Circle One or Both) Address of Well Location <u>8105 New Delaware Rd.</u> Number Street Name City <u>MT. VERNON, OH</u> Zip Code <u>+4 43050</u> Permit No. <u>215-97</u> Section/Lot No. <u>3</u> (Circle One or Both) Location of Well in State Plane coordinates, if available: N ☐ X ☒ ft. or m S ☐ Y ☐ ft. or m Elevation of Well _____ ft. or m Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____ Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____		☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____ BOREHOLE/CASING (measured from ground surface) 1 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter <u>5</u> in. Length <u>250</u> ft. Thickness <u>0.244</u> in. 2 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in. Casing Height Above Ground _____ ft. Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐ 2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____ Joints 1 ☒ Threaded 1 ☐ Welded 1 ☐ Solvent 1 ☐ 2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____																
Sketch a map showing distance well lies from numbered state highways, street intersections, county roads, buildings or other notable landmarks. If latitude and longitude are available please include here: Lat: _____ Long: _____ North _____ 		SCREEN Diameter _____ Slot Size _____ Screen Length _____ ft. Type _____ Material _____ Set Between _____ ft. and _____ ft. GRAVEL PACK (Filter Pack) Material/Size _____ Volume/Weight Used _____ Method of Installation _____ Depth: Placed FROM _____ ft. TO _____ ft. GROUT Material _____ Volume/Weight Used _____ Method of Installation _____ Depth: Placed FROM _____ ft. TO _____ ft.																
WELL TEST Pre-Pumping Static Level <u>220</u> ft. Date _____ Measured from: ☒ Top of Casing ☐ Ground Level ☐ Other _____ ☐ Air ☐ Bailing ☒ Pumping* ☐ Other _____ Test Rate <u>10</u> gpm Duration of Test <u>2</u> hrs. Feet of Drawdown <u>0</u> ft. Sustainable Yield <u>10</u> gpm *(Attach a copy of the pumping test record, per section 1521.05, ORC) Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ No Quality _____		DRILLING LOG* INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED. Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">From</th> <th style="text-align: center;">To</th> </tr> </thead> <tbody> <tr> <td>Top Soil</td> <td style="text-align: center;">0</td> <td style="text-align: center;">3</td> </tr> <tr> <td>Clay</td> <td style="text-align: center;">3</td> <td style="text-align: center;">250</td> </tr> <tr> <td>Yellow Shale</td> <td style="text-align: center;">250</td> <td style="text-align: center;">300</td> </tr> <tr> <td>DRIVE SHOE</td> <td></td> <td></td> </tr> </tbody> </table>			From	To	Top Soil	0	3	Clay	3	250	Yellow Shale	250	300	DRIVE SHOE		
	From	To																
Top Soil	0	3																
Clay	3	250																
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PUMP/PITLESS Type of pump <u>1hp submersible</u> Capacity <u>10</u> gpm Pump set at <u>280</u> ft. Pitless Type <u>DICKENS</u> Pump installed by <u>GATES Well Drilling (119)</u> I hereby certify the information given is accurate and correct to the best of my knowledge. Drilling Firm <u>J & O Drilling</u> Address <u>16380 Murray Rd</u> City, State, Zip <u>MT. VERNON, OH 43050</u> Signed <u>Jessie A. Keir</u> Date <u>2-26-98</u> ODH Registration Number <u>2254</u>		*(If more space is needed to complete drilling log, use next consecutively numbered form.) Date of Well Completion <u>2-24-98</u> Total Depth of Well <u>300</u> ft.																

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 43224-9971
 Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy