

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

Ohio Department of Natural Resources
Division of Water, 1939 Fountain Square Drive
Columbus, Ohio 43224-9971 Voice (614) 265-6739 Fax (614) 447-9503

859416

WELL LOCATION	CONSTRUCTION DETAILS															
County <u>Warren</u> Township <u>Franklin</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____															
Owner/Builder <u>H/H Constructors/Ch. Hicks</u> (Circle One or Both) First Last	BOREHOLE/CASING (measured from ground surface)															
Address of Well Location <u>180 Colonel Pl.</u> Number Street Name	1 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter <u>6.00</u> in. Length <u>55</u> ft. Thickness <u>1/8</u> in.															
City <u>Carlisle, Ohio</u> Zip Code +4 <u>45005</u>	2 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.															
Permit No. <u>101-28</u> Section/Lot No. _____ (Circle One or Both)	Casing Height Above Ground _____ ft.															
Location of Well in State Plane coordinates, if available: Use of Well _____	Type 1 ☐ Steel 1 ☒ Galv. 1 ☐ PVC 1 ☐ Other _____															
N ☐ X _____ +/- _____ ft. or m	2 ☐ _____ 2 ☐ _____ 2 ☐ Other _____															
S ☐ Y _____ +/- _____ ft. or m	Joints 1 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐ Other _____															
Elevation of Well _____ +/- _____ ft. or m	2 ☐ _____ 2 ☐ _____ 2 ☐ Other _____															
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____	SCREEN <u>Perforated</u> <u>1/8</u> <u>Reflected</u> <u>4</u> ft.															
Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____	Diameter <u>6.00</u> Slot Size _____ Screen Length _____ ft.															
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: _____	Type _____ Material _____															
	Set Between <u>51</u> ft. and <u>55</u> ft.															
	GRAVEL PACK (Filter Pack)															
	Material/Size _____ Volume/Weight Used _____															
	Method of Installation _____															
	Depth: Placed FROM _____ ft. TO _____ ft.															
	GROUT															
	Material <u>Environment #8</u> Volume/Weight Used <u>65</u> #															
	Method of Installation <u>Dry around casing</u>															
	Depth: Placed FROM <u>0</u> ft. TO <u>45</u> ft.															
	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>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>RED CLAY & GRAVEL</td> <td>0</td> <td>8</td> </tr> <tr> <td>BR CLAY & GRAVEL</td> <td>8</td> <td>30</td> </tr> <tr> <td>Dr. CLAY-SAND & GRAVEL</td> <td>30</td> <td>42</td> </tr> <tr> <td>GRAVEL + WATER</td> <td>42</td> <td>55</td> </tr> </tbody> </table>		From	To	RED CLAY & GRAVEL	0	8	BR CLAY & GRAVEL	8	30	Dr. CLAY-SAND & GRAVEL	30	42	GRAVEL + WATER	42	55
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Dr. CLAY-SAND & GRAVEL	30	42														
GRAVEL + WATER	42	55														
	6 FT. GRAVEL in Bottom of Well															
WELL TEST*																
Pre-Pumping Static Level <u>15</u> ft. Date <u>11-30-98</u>																
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____																
☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____																
Test Rate <u>20</u> gpm Duration of Test <u>3</u> hrs.																
Feet of Drawdown <u>40</u> ft. Sustainable Yield <u>20</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 <u>CLEAR</u>																
PUMP/PITLESS																
Type of pump <u>1</u> Capacity _____ gpm																
Pump set at _____ ft. Pitless Type _____																
Pump installed by _____																
I hereby certify the information is true and correct to the best of my knowledge.																
Drilling Firm <u>GILBERT WELL DRILLING</u>																
Address <u>13049 FRIEND RD.</u>																
City, State, Zip <u>GERMANTOWN, OH 45327</u>																
PHONE <u>855-2965</u>																
Signed <u>James Gilbert</u> Date <u>11-30-98</u>																
ODH Registration Number <u>00533</u>																
(If more space is needed to complete drilling log, use next consecutively numbered form.)																
Date of Well Completion <u>11-30-98</u>	Total Depth of Well <u>55</u> ft.															

Completion of this form is required by section 1521.05 Ohio Revised Code and must be filed within 30 days after completion of drilling