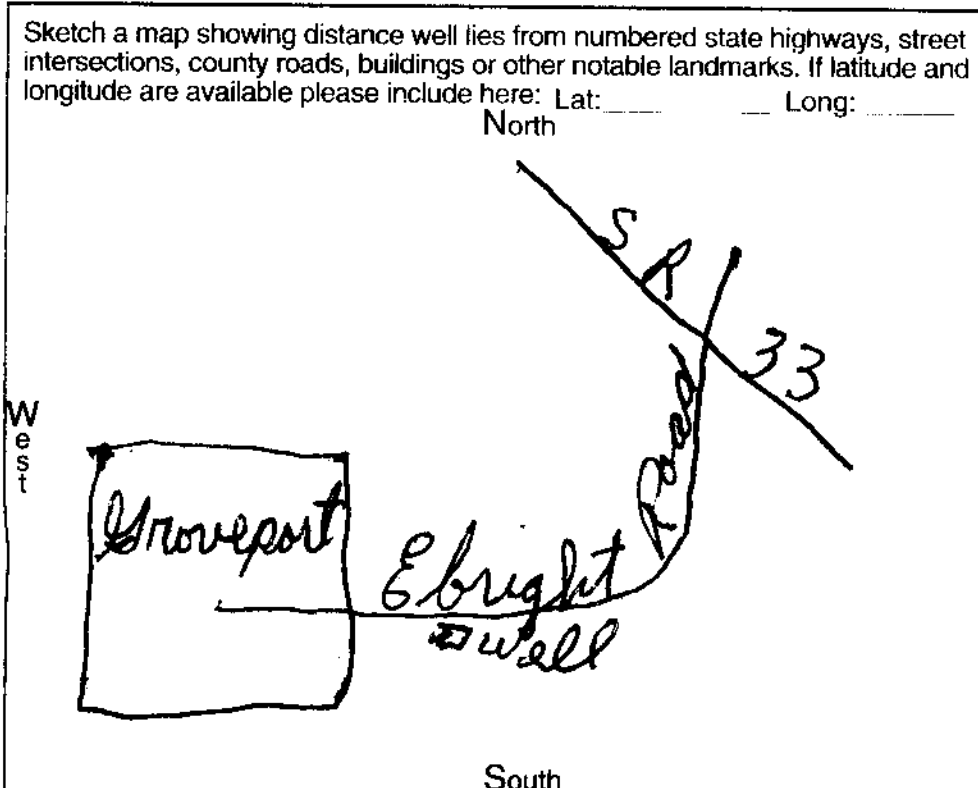


TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

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

863006

WELL LOCATION	CONSTRUCTION DETAILS
County <u>Franklin</u> Township <u>Madison</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other
Owner/Builder <u>Judith Howell</u> (Circle One or Both) First Last	BOREHOLE/CASING (measured from ground surface)
Address of Well Location <u>6036 Ebright Road</u> Number Street Name	1) Borehole Diameter _____ inches Depth _____ ft. Casing Diameter <u>5</u> in. Length <u>36</u> ft. Thickness <u>.219</u> in.
City <u>Groveport</u> Zip Code +4 <u>3125</u>	2) Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
Permit No. <u>WI9900036</u> Section/Lot No. _____ (Circle One or Both)	Casing Height Above Ground <u>1'</u> _____ ft.
Location of Well in State Plane coordinates, if available: Use of Well <u>House use</u>	Type 1 ☐ Steel 1 ☒ Galv. 1 ☐ PVC 1 ☐
N ☐ X _____ +/- _____ ft. or m	2 ☐ Steel 2 ☐ Galv. 2 ☐ PVC 2 ☐ Other _____
S ☐ Y _____ +/- _____ ft. or m	Joints 1 ☒ Threaded 1 ☐ Welded 1 ☐ Solvent 1 ☐
Elevation of Well _____ +/- _____ ft. or m	2 ☐ Threaded 2 ☐ Welded 2 ☐ Solvent 2 ☐ Other _____
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____	SCREEN
Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____	Diameter _____ 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: _____ North	Type <u>Perforation</u> Material _____
	Set Between <u>26</u> ft. and <u>28</u> ft.
	GRAVEL PACK (Filter Pack)
	Material/Size _____ Volume/Weight Used _____
	Method of Installation _____
	Depth: Placed FROM _____ ft. TO _____ ft.
	GROUT
	Material _____ Volume/Weight Used _____
WELL TEST*	DRILLING LOG*
Pre-Pumping Static Level <u>15</u> ft. Date <u>16 Mar 99</u>	INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____	Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.
☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____	
Test Rate <u>10</u> gpm Duration of Test <u>1</u> hrs.	
Feet of Drawdown <u>none</u> ft. Sustainable Yield _____ gpm	
*(Attach a copy of the pumping test record, per section 1521.05, ORC)	
Is Copy Attached? ☐ Yes ☐ No Flowing Well? ☐ Yes ☐ No	
Quality _____	
PUMP/PITLESS	
Type of pump _____ Capacity _____ gpm	
Pump set at _____ ft. Pitless Type _____	
Pump installed by _____	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>Sam Plummer & Sons</u>	
Address <u>4171 Summitview Road</u>	
City, State, Zip <u>Dublin Ohio 43016</u>	
Signed <u>Eddie Plummer</u> Date <u>17 Mar 99</u>	(If more space is needed to complete drilling log, use next consecutively numbered form.)
ODH Registration Number <u>143</u>	Date of Well Completion <u>16 Mar 99</u> Total Depth of Well <u>36</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