

WELL LOG AND DRILLING REPORTTYPE 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

Pg. 1 864886

WELL LOCATION		CONSTRUCTION DETAILS	
County <u>Hocking</u>	Township <u>HEARNY</u>	☒ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Other BOREHOLE/CASING (measured from ground surface)	
Owner/Builder (Circle One or Both) <u>TAMER</u> First <u>HART</u> Last	Address of Well Location <u>18554 Happy Hollow Rd.</u> Number Street Name	1. Borehole Diameter <u>8 1/2</u> inches Depth <u>137</u> ft. Casing Diameter <u>5</u> in. Length <u>138</u> ft. Thickness <u>SDR 21</u> in.	
City <u>Laurelville</u>	Zip Code +4 <u>43135</u>	2. Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.	
Permit No. <u>176-01</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 <u>Single Family</u>	Type ☐ Steel ☐ Galv. ☒ PVC ☐ Other Joints ☐ Threaded ☐ Welded ☐ Solvent ☐ Other <u>SPLINE LOCK</u>	
N ☐ X ☐ S ☐ Y ☐	Elevation of Well _____ ft. c. m.	SCREEN	
Datum Plain: ☐ NAD27 ☐ NAD83	Elevation Source _____	Diameter _____ Slot Size _____ Screen Length _____ ft.	
Source of Coordinates: ☐ GPS ☐ Survey ☐ Other		Type _____ Material _____	
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 _____		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 <u>Bestrite Grout</u> Volume/Weight Used <u>400 lb</u>	
		Method of Installation <u>Pumped Through Casing</u>	
		Depth: Placed FROM <u>137</u> ft. TO <u>138</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.			
		From	To
<u>BROWN CLAY</u>		<u>0</u>	<u>25</u>
<u>SOFT GRAY SHALE</u>		<u>25</u>	<u>34</u>
<u>BROWN CLAY</u>		<u>34</u>	<u>36</u>
<u>BROWN SANDSTONE</u>		<u>36</u>	<u>43</u>
<u>SANDY GRAY SHALE</u>		<u>43</u>	<u>63</u>
<u>BROWN SANDSTONE</u>		<u>63</u>	<u>76</u>
<u>SANDY GRAY SHALE</u>		<u>76</u>	<u>100</u>
<u>BROWN SANDSTONE</u>		<u>100</u>	<u>150</u>
<u>GRAY SANDSTONE</u>		<u>150</u>	<u>190</u>
<u>SANDY GRAY SHALE</u>		<u>190</u>	<u>210</u>
<u>GRAY SANDSTONE</u>		<u>210</u>	<u>270</u>
<u>DARK GRAY SHALE</u>		<u>270</u>	<u>300</u>
WELL TEST*			
Pre-Pumping Static Level <u>148</u> ft.		Date <u>4-24-02</u>	
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____			
☒ Air ☐ Bailing ☐ Pumping ☐ Other _____			
Test Rate <u>1/2</u> gpm		Duration of Test <u>1 1/2</u> hrs.	
Feet of Drawdown <u>72.7</u> ft.		Sustainable Yield <u>5</u> gpm	
* Attach a copy of the pumping test record, per section 1521.05, ORC)			
Copy Attached? ☒ Yes ☐ No		Flowing Well? ☐ Yes ☒ No	
Qualifier _____			
PUMP/PITLESS			
Type of pump _____		Capacity _____ gpm	
Pump set at _____ ft.		Pitless Type <u>PULL THROUGH</u>	
Pump installed by <u>J. E. Hart</u>			
I hereby certify the information given is accurate and correct to the best of my knowledge.			
Drilling Firm <u>HART'S WATER WELL D+S</u>			
Address <u>PO BOX 27</u>			
City, State, Zip <u>Laurelville, Ohio 43135</u>			
Signed <u>J. E. Hart</u>		Date <u>4-27-02</u>	
ODNR Registration Number <u>1541</u>			
		Date of Well Completion <u>4-23-02</u>	
		Total Depth of Well <u>380</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

PUMPING TEST RECORD

ODNR-Division of Water
Ground-Water Resources Section

192

864886

Page No. _____

Owner JAMES HART Address ~~1000~~ 18539 HARRY HOLLOW RD.
 County Hocking Township Perry
 Date 4-23-02 (Test Started) 1 (Test Ended) ODNR Log# 864886 Other Well ID _____
 Company Conducting Test HART'S WATER WELL Individual Making Measurements _____
 Type of Test Water Intrusion Distance From Pumping Well 300'
 Measuring Equipment Used Air Lift
 Static Water Level (S₀) 148 Measuring Point _____ Elevation Above Ground _____

Date	Clock Time (Use Military Time)	Time Since Pumping Started (In Minutes)	Depth to Water (S)	Change in Water Level (S - S ₀)	Discharge Rate (GPM)	Comments (Include Weather Conditions)
4-23	16:00	0	148			
4	16:15	1 15	380		1/2	Cloudy
	16:30	2 15	380		1/2	Clear
	16:45	3 15	380		1/2	"
	16:55	4 10	380		1/2	"
	17:10	5 15	380		1/2	"
	17:20	6 10	380		1/2	"
	17:30	7 10	380		1/2	"
		8				
		9				
		10				
		11				
		12				
		13				
		14				
		15				
		20				
		25				
		30				
		35				
		40				
		45				
		50				
		55				
		60 (1hr)				
		90				
		120 (2hr)				
		150				
		180 (3hr)				
		240 (4hr)				

