DNR 7802.96

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 43224-9971 Voice (614) 265-6739 Fax (614) 447-9503

878222

WELL LOCATION

County HURON Township BRONSON

Owner/Builder (Circle One or Both) LARRY REILLY (First Last)

Address of Well Location 394 OLD STATE RD. (Number Street Name)

City NORWALK Zip Code +4 44857

Permit No. 244200 Section/Lot No. (Circle One or Both) 1

Location of Well in State Plane coordinates, if available: Use of Well RESIDENTIAL

N ☐ X _____ +/- _____ ft. or m

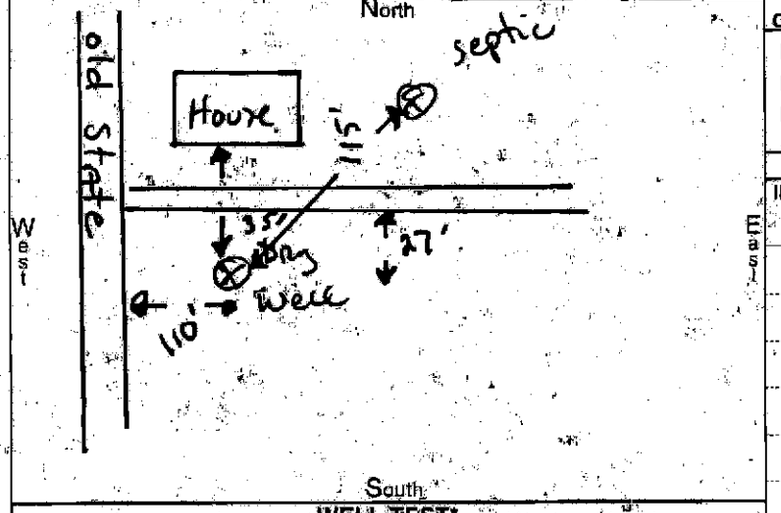
S ☐ Y _____ +/- _____ ft. or m

Elevation of Well _____ +/- _____ ft. or m

Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____

Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____

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: _____



WELL TEST*

Pre-Pumping Static Level 8 ft. Date 5/24.00

Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____

☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____

Test Rate ¼ gpm Duration of Test 15min hrs.

Feet of Drawdown 96 ft. Sustainable Yield ¼ gpm

*(Attach a copy of the pumping test record, per section 1521.05, ORC)

Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ No

Quality no salt or sulfur

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 Woodworth Drilling & Pump Svc.

Address 1820 St Rt 598

City, State, Zip Galion OH 44833

Signed _____ Date 7/7/00

ODH Registration Number 1456

CONSTRUCTION DETAILS

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____

BOREHOLE/CASING (measured from ground surface)

1 ☐ Borehole Diameter 5½ inches Depth 96 ft.

Casing Diameter _____ in. Length _____ ft. Thickness _____ 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 ☐ Other _____

Joints: 1 ☐ Threaded 1 ☐ Welded 1 ☐ Solvent 1 ☐ 2 ☐ Other _____

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.

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
AMENDED		
SANDSTONE & GRAY SHALE	49	96
TD	96	

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

Date of Well Completion 5/24/00 Total Depth of Well 96 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