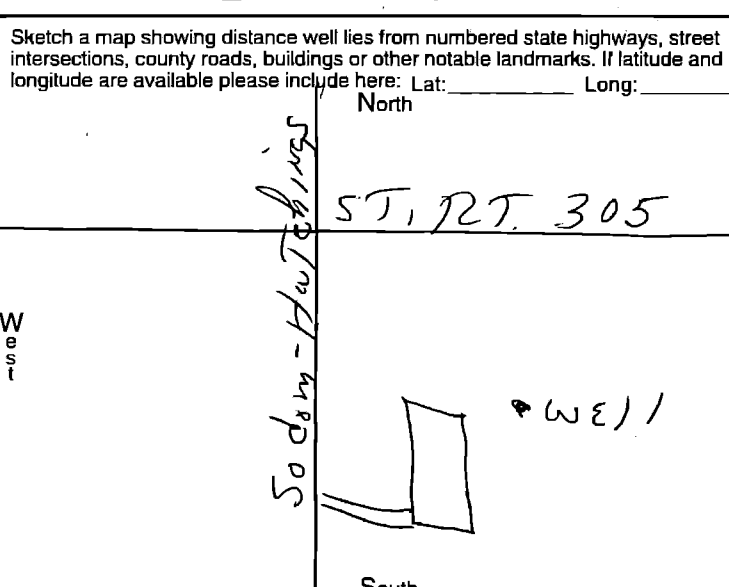


TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

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

878367

WELL LOCATION		CONSTRUCTION DETAILS																				
County <u>Trumbull</u> Township <u>Fowler</u>		☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____																				
Owner/Builder (Circle One or Both) <u>William M. Tzel</u>		BOREHOLE/CASING (measured from ground surface)																				
Address of Well Location <u>2280 Sodom-Hutchings</u>		1 ☐ Borehole Diameter <u>8</u> inches Depth <u>25</u> ft.																				
City <u>Fowler</u> Zip Code <u>4</u>		Casing Diameter <u>8.75</u> in. Length <u>27</u> ft. Thickness <u>1.88</u> in.																				
Permit No. <u>238004</u> Section/Lot No. _____		2 ☐ Borehole Diameter _____ inches Depth _____ ft.																				
Location of Well in State Plane coordinates, if available: _____		Casing Diameter _____ in. Length _____ ft. Thickness _____ in.																				
Use of Well <u>DOMESTIC</u>		Casing Height Above Ground <u>1 1/2</u> ft.																				
N ☐ X _____ +/- _____ ft. or m		Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐																				
S ☐ Y _____ +/- _____ ft. or m		2 ☐ Steel 2 ☐ Galv. 2 ☐ PVC 2 ☐ Other _____																				
Elevation of Well _____ +/- _____ ft. or m		Joints 1 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐																				
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____		2 ☐ Threaded 2 ☐ Welded 2 ☐ Solvent 2 ☐ Other _____																				
Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____		SCREEN																				
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: _____ 		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 <u>200 LB</u>																						
Method of Installation <u>VOID PLUG</u>																						
Depth: Placed FROM <u>25</u> ft. TO <u>TOP</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"><thead><tr><th></th><th>From</th><th>To</th></tr></thead><tbody><tr><td>Brown Clay</td><td>0</td><td>3</td></tr><tr><td>Blue-Clay</td><td>3</td><td>5</td></tr><tr><td>Blue Clay-Sand</td><td>5</td><td>8</td></tr><tr><td>Brown Sandstone</td><td>8</td><td>25</td></tr><tr><td>Gray Rock</td><td>25</td><td>27</td></tr><tr><td>Shale</td><td>27</td><td>83</td></tr></tbody></table>			From	To	Brown Clay	0	3	Blue-Clay	3	5	Blue Clay-Sand	5	8	Brown Sandstone	8	25	Gray Rock	25	27	Shale	27	83
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WELL TEST*																						
Pre-Pumping Static Level <u>20</u> ft. Date <u>9-26-99</u>																						
Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____																						
☐ Air ☒ Bailing ☐ Pumping* ☐ Other _____																						
Test Rate <u>8</u> gpm Duration of Test <u>ONE</u> hrs.																						
Feet of Drawdown <u>20</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 <u>Cloudy</u>																						
PUMP/PITLESS																						
Type of pump <u>Summersible</u> Capacity <u>8</u> gpm																						
Pump set at <u>22</u> ft. Pitless Type <u>McCrill</u>																						
Pump installed by <u>W. Boorn</u>																						
I hereby certify the information given is accurate and correct to the best of my knowledge.																						
Drilling Firm <u>Boorn Drilling</u>																						
Address <u>PO Box 252</u>																						
City, State, Zip <u>Bristolville, OH 44402</u>																						
Signed <u>W. Boorn</u> Date <u>9-27-99</u>																						
ODH Registration Number <u>578</u>																						
Date of Well Completion <u>9-27-99</u> Total Depth of Well <u>83</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