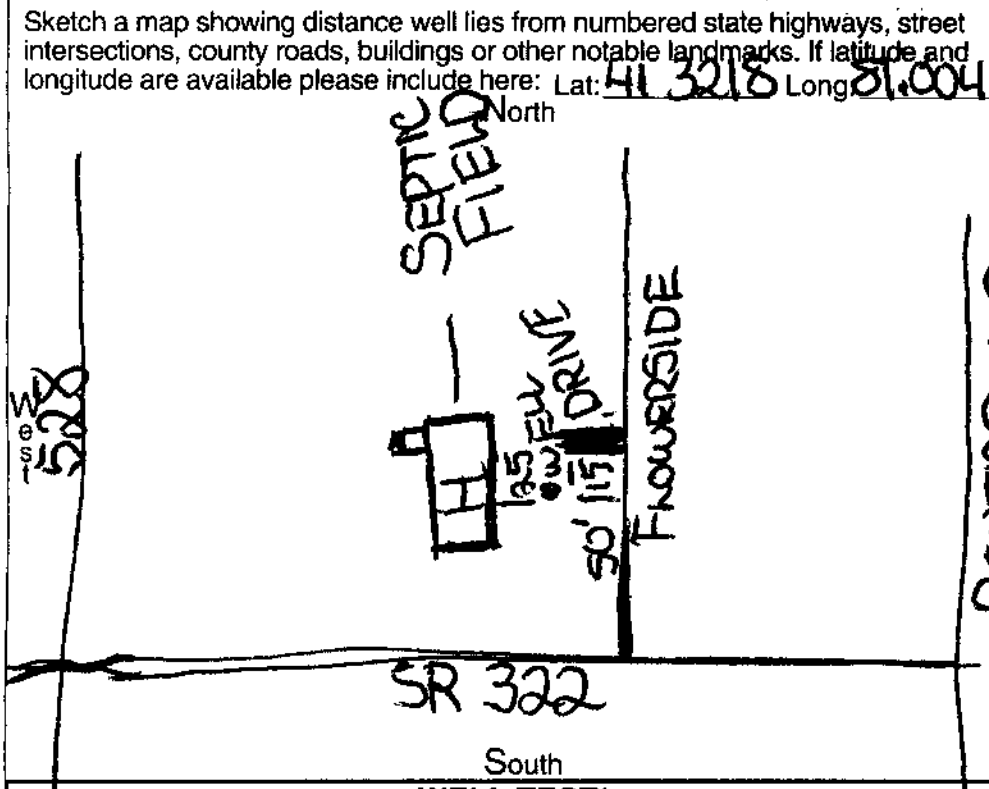


TYPE OR USE PEN  
SELF TRANSCRIBING  
PRESS HARD

# 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

880366

| WELL LOCATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           | CONSTRUCTION DETAILS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------|----|---------------------------------|----------|-----------|----------------------------------------|-----------|------------|----------------------------|-----------|------------|----------------------|-----------|-----------|--------------------------------------|--|--|----------------------|--|--|
| County <u>GEAUGA</u> Township <u>HUNTSBURG</u><br>Owner/Builder <u>MICHAEL MARUNA</u><br>Address of Well Location <u>12330 FLOWERSIDE</u><br>City <u>HUNTSBURG</u> Zip Code +4 <u>44046</u><br>Permit No. <u>155062</u> Section/Lot No. <u>12330</u><br>Location of Well in State Plane coordinates, if available: Use of Well <u>SF</u><br>Elevation of Well <u>981</u><br>Datum Plain: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 Elevation Source <u>GPS 300</u><br>Source of Coordinates: <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Survey <input type="checkbox"/> Other                                                                                                                                                               |           | <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Cable <input type="checkbox"/> Augered <input type="checkbox"/> Driven <input type="checkbox"/> Other<br><b>BOREHOLE/CASING</b> (measured from ground surface)<br>1 <input checked="" type="checkbox"/> Borehole Diameter <u>8</u> inches Depth <u>81</u> ft.<br>Casing Diameter <u>8 5/8</u> in. Length <u>27</u> ft. Thickness <u>1/8</u> in.<br>2 <input type="checkbox"/> Borehole Diameter _____ inches Depth _____ ft.<br>Casing Diameter _____ in. Length _____ ft. Thickness _____ in.<br>Casing Height Above Ground <u>2.5</u> ft.<br>Type 1 <input checked="" type="checkbox"/> Steel 1 <input type="checkbox"/> Galv. 1 <input type="checkbox"/> PVC 1 <input type="checkbox"/><br>2 <input type="checkbox"/> Steel 2 <input type="checkbox"/> Galv. 2 <input type="checkbox"/> PVC 2 <input type="checkbox"/> Other<br>Joints 1 <input type="checkbox"/> Threaded 1 <input checked="" type="checkbox"/> Welded 1 <input type="checkbox"/> Solvent 1 <input type="checkbox"/><br>2 <input type="checkbox"/> Threaded 2 <input type="checkbox"/> Welded 2 <input type="checkbox"/> Solvent 2 <input type="checkbox"/> 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: <u>41.3218</u> Long: <u>81.0041</u><br>                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | <b>SCREEN</b><br>Diameter <u>NA</u> Slot Size _____ Screen Length _____ ft.<br>Type _____ Material _____<br>Set Between _____ ft. and _____ ft.<br><b>GRAVEL PACK</b> (Filter Pack)<br>Material/Size <u>NA</u> Volume/Weight Used _____<br>Method of Installation _____<br>Depth: Placed FROM _____ ft. TO _____ ft.<br><b>GROUT</b><br>Material <u>BAROID GRAUWAP</u> Volume/Weight Used <u>100 #</u><br>Method of Installation <u>POUR &amp; DRIVE</u><br>Depth: Placed FROM <u>0</u> ft. TO <u>25</u> ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <b>WELL TEST*</b><br>Pre-Pumping Static Level <u>5</u> ft. Date <u>6-22-04</u><br>Measured from: <input type="checkbox"/> Top of Casing <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> Other<br><input type="checkbox"/> Air <input checked="" type="checkbox"/> Bailing <input type="checkbox"/> Pumping* <input type="checkbox"/> Other<br>Test Rate <u>5</u> gpm Duration of Test <u>2</u> hrs.<br>Feet of Drawdown <u>75</u> ft. Sustainable Yield <u>5</u> gpm<br>*(Attach a copy of the pumping test record, per section 1521.05, ORC)<br>Is Copy Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Flowing Well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Quality <u>GROUDY, NO SMOEL</u> |           | <b>DRILLING LOG*</b><br>INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.<br>Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.<br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>Topsoil &amp; brown clay</u></td> <td><u>0</u></td> <td><u>5'</u></td> </tr> <tr> <td><u>Soft light gray silt &amp; clay</u></td> <td><u>5'</u></td> <td><u>20'</u></td> </tr> <tr> <td><u>Soft med gray shale</u></td> <td><u>20</u></td> <td><u>28'</u></td> </tr> <tr> <td><u>water bearing</u></td> <td><u>28</u></td> <td><u>80</u></td> </tr> <tr> <td><u>Mix of med hard to hard shale</u></td> <td></td> <td></td> </tr> <tr> <td><u>Ex hard shale</u></td> <td></td> <td></td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                  |  |  | From | To | <u>Topsoil &amp; brown clay</u> | <u>0</u> | <u>5'</u> | <u>Soft light gray silt &amp; clay</u> | <u>5'</u> | <u>20'</u> | <u>Soft med gray shale</u> | <u>20</u> | <u>28'</u> | <u>water bearing</u> | <u>28</u> | <u>80</u> | <u>Mix of med hard to hard shale</u> |  |  | <u>Ex hard shale</u> |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | From      | To                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>Topsoil &amp; brown clay</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u>0</u>  | <u>5'</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>Soft light gray silt &amp; clay</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>5'</u> | <u>20'</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>Soft med gray shale</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <u>20</u> | <u>28'</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>water bearing</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <u>28</u> | <u>80</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>Mix of med hard to hard shale</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <u>Ex hard shale</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| <b>PUMP/PITLESS</b><br>Type of pump _____ Capacity _____ gpm<br>Pump set at _____ ft. Pitless Type _____<br>Pump installed by _____<br>I hereby certify the information given is accurate and correct to the best of my knowledge.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           | (If more space is needed to complete drilling log, use next consecutively numbered form.)<br>Date of Well Completion <u>6-20-04</u> Total Depth of Well <u>80</u> ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |
| Drilling Firm <u>WILSON DRILLING</u><br>Address <u>895 BROWNVIEW RD</u><br>City, State, Zip <u>ROME, OH 44085</u><br>Signed <u>Ricky Wilson</u> Date <u>7-14-04</u><br>ODH Registration Number <u>02261</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |      |    |                                 |          |           |                                        |           |            |                            |           |            |                      |           |           |                                      |  |  |                      |  |  |