

WELL LOG AND DRILLING REPORT

877964

TYPE 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

WELL LOCATION	CONSTRUCTION DETAILS
County <u>HOCKING</u> Township <u>Washington</u>	☒ Rotary ☐ Cable ☐ Augered ☐ Driven ☐ Other _____
Owner/Builder <u>SCOTT WEBER</u> (Circle One or Both) First Last	BOREHOLE/CASING (measured from ground surface)
Address of Well Location <u>21440 Claylick Rd.</u> Number Street Name	1 ☒ Borehole Diameter <u>7 7/8</u> inches Depth <u>80</u> ft.
City <u>Logan, OH</u> Zip Code +4 <u>43138</u>	Casing Diameter <u>5</u> in. Length <u>80</u> ft. Thickness <u>SDR 21</u> in.
Permit No. <u>25-99</u> Section/Lot No. _____ (Circle One or Both)	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>16"</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: _____ North	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 <u>Benesseal</u> Volume/Weight Used <u>200#</u>
	Method of Installation <u>Pressure Grout</u>
	Depth: Placed FROM <u>80'</u> ft. TO <u>10'</u> ft.
WELL TEST*	DRILLING LOG*
Pre-Pumping Static Level <u>120'</u> ft. Date <u>4-2-99</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>35</u> ft. Sustainable Yield <u>10</u> 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>Clear</u>	
PUMP/PITLESS	
Type of pump <u>SUB</u> Capacity <u>10</u> gpm	
Pump set at <u>180</u> ft. Pitless Type <u>HARVARD</u>	
Pump installed by <u>Warthman Drilling</u>	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>Warthman Drilling, Inc.</u>	
Address <u>RT 1</u>	
City, State, Zip <u>SUGAR GROVE, OH 43155</u>	
Signed <u>Scott Warthman</u> Date <u>4/12/99</u>	
DDH Registration Number <u>113</u>	
	*(If more space is needed to complete drilling log, use next consecutively numbered form.)
	Date of Well Completion <u>4-2-99</u> Total Depth of Well <u>200</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