

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

894387

WELL LOCATION		CONSTRUCTION DETAILS																							
County Franklin Township 		☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____ BOREHOLE/CASING (measured from ground surface)																							
Owner/Builder York Temple Country Club (Circle One or Both) First Last		1 Borehole Diameter <u>12</u> inches Depth <u>53</u> ft. Casing Diameter <u>12</u> in. Length <u>41</u> ft. Thickness <u>3/8</u> in.																							
Address of Well Location 7459 North High Street Number Street Name		2 Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.																							
City Worthington Zip Code +4 43235		Casing Height Above Ground <u>3'</u> ft.																							
Permit No. _____ Section/Lot No. _____ (Circle One or Both)		Type ☒ Steel ☐ Galv. ☐ PVC ☐ Other _____ Joints ☐ Threaded ☒ Welded ☐ Solvent ☐ Other _____																							
Location of Well in State Plane coordinates, if available: N ☐ S ☐ E ☐ W ☐ T ☐ Elevation of Well _____ ft. or m.		SCREEN Diameter <u>12"</u> TS Slot Size <u>100</u> Screen Length <u>15</u> ft. Type <u>WW</u> Material <u>S.S.</u> Set Between <u>38</u> ft. and <u>53</u> ft.																							
Datum Plan: ☐ NAD27 ☐ NAD83 Elevation Source _____ Source of Coordinates: ☐ GPS ☐ Survey ☐ Other _____		GRAVEL PACK (Filter Pack) Material/Size <u>n/a</u> Volume/Weight Used <u>n/a</u> Method of Installation _____ Depth: Placed FROM _____ ft. TO _____ ft.																							
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		GROUT Material <u>n/a</u> 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.																							
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>Top Soil & Clay</td> <td>0</td> <td>15'</td> </tr> <tr> <td>Large rock & gravel</td> <td>15'</td> <td>20'</td> </tr> <tr> <td>Hard pan</td> <td>20'</td> <td>35'</td> </tr> <tr> <td>Gravel & clay</td> <td>35'</td> <td>40'</td> </tr> <tr> <td>Large rock & gravel</td> <td>40'</td> <td>45'</td> </tr> <tr> <td>Large rock & gravel</td> <td>45'</td> <td>50'</td> </tr> <tr> <td>Large rock</td> <td>50'</td> <td>53'</td> </tr> </tbody> </table>			From	To	Top Soil & Clay	0	15'	Large rock & gravel	15'	20'	Hard pan	20'	35'	Gravel & clay	35'	40'	Large rock & gravel	40'	45'	Large rock & gravel	45'	50'	Large rock
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WELL TEST* Pre-Pumping Static Level <u>10</u> ft Date <u>5/3/02</u> Measured from: ☐ Top of Casing ☒ Ground Level ☐ Other _____ Air ☐ Bailing ☒ Pumping* ☐ Other _____ Test Rate <u>560</u> gpm Duration of Test <u>1</u> hrs. Feet of Drawdown <u>23</u> ft. Sustainable Yield <u>500</u> gpm (Attach a copy of the pumping test record, per section 1521.05, ORC) Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☒ No Quality _____																									
PUMP/PITLESS Type of pump <u>VERTICAL</u> Capacity <u>500</u> gpm Pump set at <u>30</u> ft. Pitless Type _____ Pump installed by <u>MOODY'S OF DAYTON/G.M. BAKER</u> I hereby certify the information given is accurate and correct to the best of my knowledge. Drilling Firm <u>Moody's of Dayton dba G.M. Baker & Son</u> Address <u>335 Hosack Street</u> City, State, Zip <u>Columbus Ohio 43207</u> Signed <u>[Signature]</u> Date _____ ODH Registration Number <u>636</u>		(If more space is needed to complete drilling log, use next consecutively numbered form.) Date of Well Completion <u>4/17/02</u> Total Depth of Well <u>53</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