

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

944916

WELL LOCATION

County ASHTABULA Township ANDOVER

Owner/Builder LITWILER
(Circle One or Both) First Last

Address of Well Location 6548 Gibbs Rd
Number Street Name

City Andover Zip Code +4

Permit No. 37-07 Section/Lot No.
(Circle One or Both)

Location of Well in State Plane
coordinates, if available:

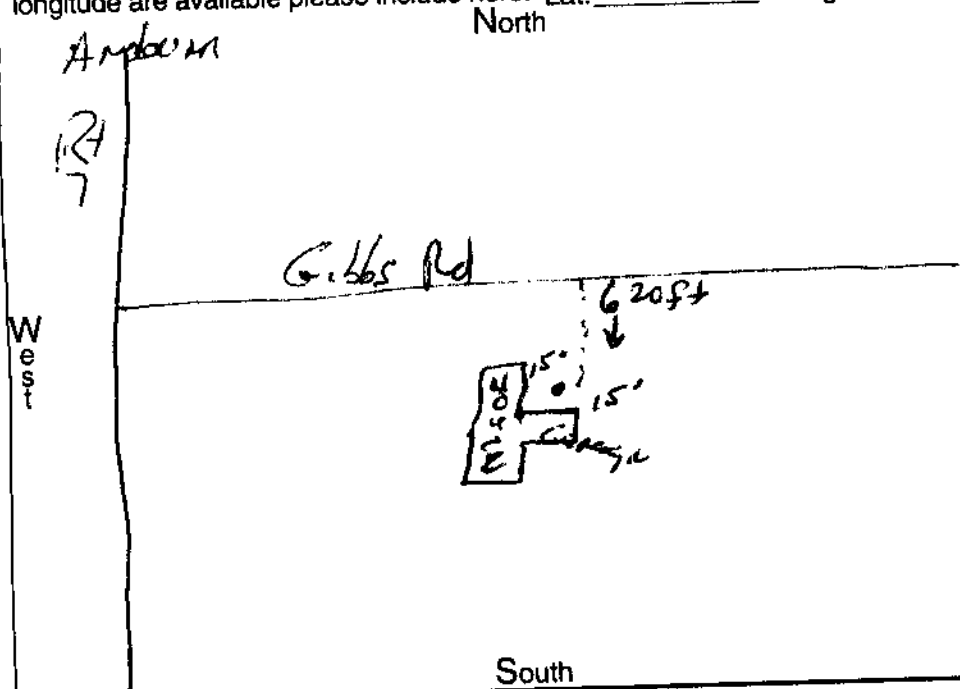
N ☒ X 41° 35.67 N +/- 4 ft. or m
S ☐ Y 080° 32.81 W +/- 4 ft. or m

Elevation of Well 1060 +/- 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 20 ft. Date

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

☐ Air ☒ Bailing ☐ Pumping* ☐ Other

Test Rate 3 gpm Duration of Test 1/2 hrs.

Feet of Drawdown 130 ft. Sustainable Yield 3 gpm

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

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

Quality

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 Tom THURBER WELLS & Pumps

Address 207 CHESTNUT

City, State, Zip Jamestown PA 16134

Signed Thomas A. Thurber Date 6-7-07

ODH Registration Number 2042

CONSTRUCTION DETAILS

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other

BOREHOLE/CASING (measured from ground surface)

1 ☐ Borehole Diameter 6 inches Depth 150 ft.

Casing Diameter 6 5/8 in. Length 25 ft. Thickness 188 in.

2 ☐ Borehole Diameter _____ inches Depth _____ ft.

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

Casing Height Above Ground 15 in ft.

Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐

2 ☐ 2 ☐ 2 ☐ 2 ☐ Other

Joints 1 ☐ Threaded 1 ☒ Welded 1 ☐ Solvent 1 ☐

2 ☐ 2 ☐ 2 ☐ 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 YO BEN Volume/Weight Used 80 lb

Method of Installation DRILL DRIVE

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
BROWN CLAY & GRAVEL	0	10
BROWN SAND	10	15
GRAY CLAY	15	22
MED/GR SH.	22	30
" " S SHALE	30	35
" " SH	35	45
" " S SHALE	45	50
" " SH	50	65
" " WADING SHALE	65	80
" " SH	80	105
HARD GR S SHALE	105	110
MED GR SH	110	145
DK GR SH	145	180

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

Date of Well Completion JUN 21 07 Total Depth of Well 150 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