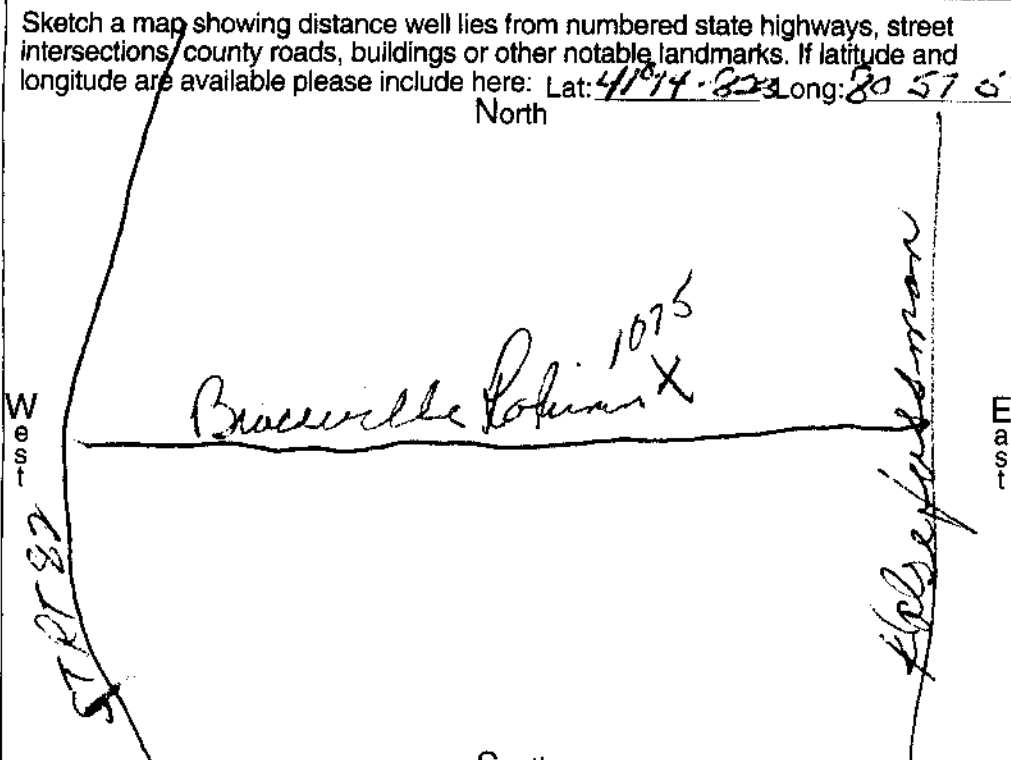


TYPE OR USE PEN  
SELF TRANSCRIBING  
PRESS HARD**WELL LOG AND DRILLING REPORT**Ohio Department of Natural Resources  
Division of Water, 1939 Fountain Square Drive  
Columbus, Ohio 43224-9971 Voice (614) 265-6739 Fax (614) 447-9503

959808

| WELL LOCATION                                                                                                                                                                                                                                                                                                                                                  | CONSTRUCTION DETAILS                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| County <u>Trembly</u> Township <u>Braceville</u>                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Cable <input type="checkbox"/> Augered <input type="checkbox"/> Driven <input type="checkbox"/> Other _____                                                                                         |
| Owner/Builder <u>Harry J Sanderson</u><br>(Circle One or Both) First Last                                                                                                                                                                                                                                                                                      | <b>BOREHOLE/CASING</b> (measured from ground surface)                                                                                                                                                                                                                   |
| Address of Well Location <u>1075 Braceville Robinson Rd</u><br>Number Street Name                                                                                                                                                                                                                                                                              | 1 <input type="checkbox"/> Borehole Diameter <u>6.25</u> inches Depth <u>60</u> ft.<br>Casing Diameter <u>6.62</u> in. Length <u>28</u> ft. Thickness <u>1.88</u> in.                                                                                                   |
| City <u>Levellburg</u> Zip Code +4 <u>44430</u>                                                                                                                                                                                                                                                                                                                | 2 <input type="checkbox"/> Borehole Diameter _____ inches Depth _____ ft.<br>Casing Diameter _____ in. Length _____ ft. Thickness _____ in.                                                                                                                             |
| Permit No. <u>349587</u> Section/Lot No. _____<br>(Circle One or Both)                                                                                                                                                                                                                                                                                         | Casing Height Above Ground <u>13 in</u> ft.                                                                                                                                                                                                                             |
| Location of Well in State Plane coordinates, if available: Use of Well <u>Home</u>                                                                                                                                                                                                                                                                             | 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"/> _____ 2 <input type="checkbox"/> _____ 2 <input type="checkbox"/> Other _____           |
| N <input type="checkbox"/> X _____ +/- _____ ft. or m                                                                                                                                                                                                                                                                                                          | 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"/> _____ 2 <input type="checkbox"/> _____ 2 <input type="checkbox"/> Other _____ |
| S <input type="checkbox"/> Y _____ +/- _____ ft. or m                                                                                                                                                                                                                                                                                                          | <b>SCREEN</b>                                                                                                                                                                                                                                                           |
| Elevation of Well _____ +/- _____ ft. or m                                                                                                                                                                                                                                                                                                                     | Diameter _____ Slot Size _____ Screen Length _____ ft.                                                                                                                                                                                                                  |
| Datum Plain: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 Elevation Source <u>973.9</u>                                                                                                                                                                                                                                                       | Type _____ Material _____                                                                                                                                                                                                                                               |
| Source of Coordinates: <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Survey <input type="checkbox"/> Other _____                                                                                                                                                                                                                            | Set Between _____ ft. and _____ 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: <u>41°14' 32" N</u> Long: <u>80°57' 57" W</u><br>North<br> | <b>GRAVEL PACK</b> (Filter Pack)                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                | Material/Size _____ Volume/Weight Used _____                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                | Method of Installation _____                                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                | Depth: Placed FROM _____ ft. TO _____ ft.                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                | <b>GROUT</b>                                                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                | Material <u>Emulaplug</u> Volume/Weight Used <u>160 lb</u>                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                | Method of Installation <u>Gravity</u>                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                | Depth: Placed FROM <u>0</u> ft. TO <u>28</u> ft.                                                                                                                                                                                                                        |
| <b>WELL TEST*</b>                                                                                                                                                                                                                                                                                                                                              | <b>DRILLING LOG*</b>                                                                                                                                                                                                                                                    |
| Pre-Pumping Static Level <u>12</u> ft. Date <u>11/12/4</u>                                                                                                                                                                                                                                                                                                     | INDICATE DEPTH(S) AT WHICH WATER IS ENCOUNTERED.                                                                                                                                                                                                                        |
| Measured from: <input type="checkbox"/> Top of Casing <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> Other _____                                                                                                                                                                                                                    | Show color, texture, hardness, and formation: sandstone, shale, limestone, gravel, clay, sand, etc.                                                                                                                                                                     |
| <input type="checkbox"/> Air <input checked="" type="checkbox"/> Bailing <input type="checkbox"/> Pumping* <input type="checkbox"/> Other _____                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                         |
| Test Rate <u>15</u> gpm Duration of Test <u>1/2</u> hrs.                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                         |
| Feet of Drawdown <u>5</u> ft. Sustainable Yield <u>15</u> gpm                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                         |
| *(Attach a copy of the pumping test record, per section 1521.05, ORC)                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                         |
| Is Copy Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Flowing Well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                        |                                                                                                                                                                                                                                                                         |
| Quality <u>Good</u>                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                         |
| <b>PUMP/PITLESS</b>                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                         |
| Type of pump <u>Star Pite</u> Capacity <u>10</u> gpm                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                         |
| Pump set at <u>55</u> ft. Pitless Type <u>Wickens</u>                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                         |
| Pump installed by <u>R Tate</u>                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                         |
| I hereby certify the information given is accurate and correct to the best of my knowledge.                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                         |
| Drilling Firm <u>Tate Water Well Drilling</u>                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                         |
| Address <u>4453 Templeton Rd</u>                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                         |
| City, State, Zip <u>Warren Ohio 44481</u>                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                         |
| Signed <u>Stephen Tate</u> Date <u>11-17-04</u>                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                         |
| ODH Registration Number <u>02595</u>                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                                | *(If more space is needed to complete drilling log, use next consecutively numbered form.)                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                | Date of Well Completion <u>11/12/4</u> Total Depth of Well <u>60</u> ft.                                                                                                                                                                                                |