

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

WELL LOG AND DRILLING REPORT

Ohio Department of Natural Resources
Division of Water, 2045 Morse Road
Columbus, Ohio 43229-6605 Voice (614) 265-6740 Fax (614) 265-6767

0995422

WELL LOCATION

CONSTRUCTION DETAILS

County Licking Township Liberty
Owner/Builder Leah Rhestant
(Circle One or Both) First Last
Address of Well Location 5995 North Ridge Rd
Number Street Name
City Johnstown Zip Code +4 3031
Permit No. 9791 Section/Lot No. _____
(Circle One or Both)
Location of Well in State Plane coordinates, if available:
N 40 08.53 +/- ft. or m
S 082 36.82 +/- ft. or m
Elevation of Well 1163 +/- ft. or m
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source GPS
Source of Coordinates: ☒ GPS ☐ Survey ☐ Other _____

☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____
BOREHOLE/CASING (measured from ground surface)
1 Borehole Diameter 5 inches Depth 215 ft.
Casing Diameter 5 in. Length 215 ft. Thickness .225 in.
2 Borehole Diameter _____ inches Depth _____ ft.
Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
Casing Height Above Ground 18' ft.
Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐ Other _____
2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____
Joints 1 ☒ Threaded 1 ☐ Welded 1 ☐ Solvent 1 ☐ Other _____
2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____

SCREEN

Diameter _____ Slot Size _____ Screen Length _____ ft.
Type N/A Material _____
Set Between _____ ft. and _____ ft.

GRAVEL PACK (Filter Pack)

Material/Size _____ Volume/Weight Used _____
Method of Installation N/A
Depth: Placed FROM _____ ft. TO _____ ft.

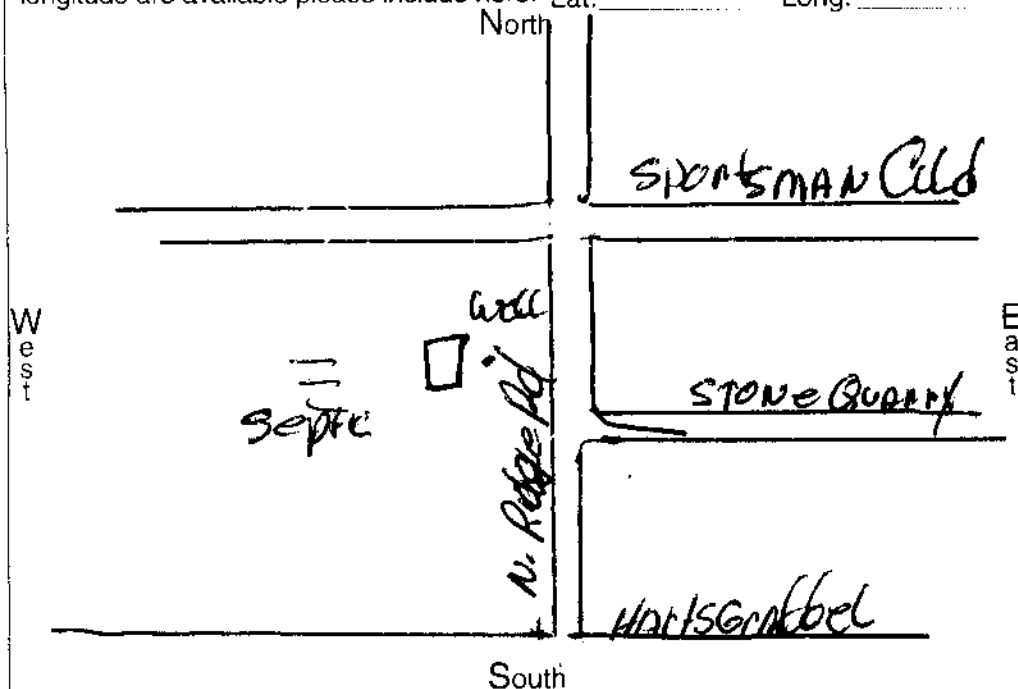
GROUT

Material Ben Seal Volume/Weight Used 240#
Method of Installation Dry
Depth: Placed FROM 0 ft. TO 210 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
<u>TO P Soil</u>	<u>0</u>	<u>1</u>
<u>Brown Shale</u>	<u>1</u>	<u>15</u>
<u>Gray Shale</u>	<u>15</u>	<u>25</u>
<u>Brown Shale</u>	<u>25</u>	<u>60</u>
<u>Sand & Gravel</u>	<u>60</u>	<u>65</u>
<u>Brown Shale</u>	<u>65</u>	<u>205</u>
<u>Yellow Sand Stone</u>	<u>205</u>	<u>210</u>
<u>Gray Shale & Sand Stone</u>	<u>210</u>	<u>215</u>
<u>T.D.</u>		<u>215</u>

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 50' ft. Date 5-27-11
Measured from: ☒ Top of Casing ☐ Ground Level ☐ Other _____
☐ Air ☐ Bailing ☒ Pumping* ☐ Other _____
Test Rate 8 gpm Duration of Test 4 hrs.
Feet of Drawdown 150 ft. Sustainable Yield 46 gpm
*(Attach a copy of the pumping test record, per section 1521.05, ORC)
Is Copy Attached? ☐ Yes ☒ No Flowing Well? ☐ Yes ☐ No
Quality Clear

PUMP/PITLESS

Type of pump 3/4 HP. Myers Capacity 8 gpm
Pump set at 200' ft. Pitless Type Slide
Pump installed by Danny's

I hereby certify the information given is accurate and correct to the best of my knowledge.

Drilling Firm DANNY'S DRILLING
Address 50 MORGAN AVE
City, State, Zip NEWARK, OHIO 43055

Signed Daniel W. Moran Date 7-19-11
ODH Registration Number 1774 Revised

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

Date of Well Completion 5-27-11 Total Depth of Well 215 ft.

Revised well log

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, 2045 MORSE ROAD, COLS., OHIO 43229-6605
Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy