

TYPE OR USE PEN
SELF TRANSCRIBING
PRESS HARD

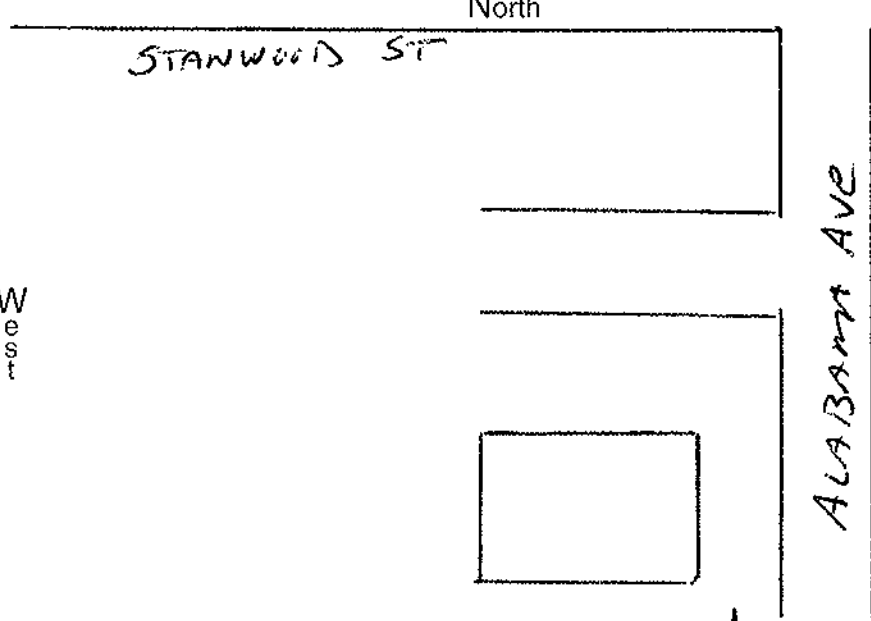
WELL LOG AND DRILLING REPORT

Ohio Department of Natural Resources

Division of Water, 2045 Morse Road

Columbus, Ohio 43229-6605 Voice (614) 265-6740 Fax (614) 265-6767

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WELL LOCATION	CONSTRUCTION DETAILS
County <u>STARK</u> Township <u>TUSC</u>	☐ Rotary ☒ Cable ☐ Augered ☐ Driven ☐ Other _____ BOREHOLE/CASING (measured from ground surface)
Owner/Builder (Circle One or Both) <u>JIM HENDERSON</u> First Last	1 ☐ Borehole Diameter <u>4 7/8</u> inches Depth <u>70</u> ft. Casing Diameter <u>5</u> in. Length <u>33</u> ft. Thickness <u>.250</u> in.
Address of Well Location <u>3751 ALABAMA AVE SW</u> Number Street Name	2 ☐ Borehole Diameter _____ inches Depth _____ ft. Casing Diameter _____ in. Length _____ ft. Thickness _____ in.
City <u>NAVAHO</u> Zip Code +4 <u>44662</u>	Casing Height Above Ground <u>14"</u> ft.
Permit No. <u>24211</u> Section/Lot No. _____ (Circle One or Both)	Type 1 ☒ Steel 1 ☐ Galv. 1 ☐ PVC 1 ☐ Other _____ 2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____
Location of Well in State Plane coordinates, if available: Use of Well <u>Home</u>	Joints 1 ☒ Threaded 1 ☐ Welded 1 ☐ Solvent 1 ☐ Other _____ 2 ☐ 2 ☐ 2 ☐ 2 ☐ Other _____
N ☐ X <u>40</u> . <u>45</u> +/- <u>492</u> ft. or m	SCREEN
S ☐ Y <u>081</u> . <u>88</u> +/- <u>019</u> ft. or m	Diameter _____ Slot Size _____ Screen Length _____ ft.
Elevation of Well <u>1080</u> . +/- _____ ft. or m	Type <u>NONE</u> Material _____
Datum Plain: ☐ NAD27 ☐ NAD83 Elevation Source _____	Set Between _____ ft. and _____ ft.
Source of Coordinates: ☒ GPS ☐ Survey ☐ Other _____	GRAVEL PACK (Filter Pack)
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  South	Material/Size _____ Volume/Weight Used _____
	Method of Installation <u>NONE</u>
	Depth: Placed FROM _____ ft. TO _____ ft.
	GROUT
	Material <u>100# BENSEAL</u> Volume/Weight Used _____
	Method of Installation <u>DRIVEN w/ CASING</u>
	Depth: Placed FROM <u>33</u> ft. TO <u>SURFACE</u> ft.
WELL TEST*	DRILLING LOG*
Pre-Pumping Static Level <u>21</u> ft. Date <u>11-15-13</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>16</u> gpm Duration of Test <u>1</u> hrs.	
Feet of Drawdown <u>4</u> ft. Sustainable Yield <u>16</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>60</u> ft. Pitless Type <u>Dickens</u>	
Pump installed by <u>NICK WILLIAMS</u>	
I hereby certify the information given is accurate and correct to the best of my knowledge.	
Drilling Firm <u>WILLIAMS DRILLING CO</u>	
Address <u>15255 STANWOOD ST SW</u>	
City, State, Zip <u>DALTON, OHIO 44618</u>	
Signed <u>[Signature]</u> Date <u>11-15-13</u>	
ODH Registration Number <u>2212</u>	
	(If more space is needed to complete drilling log, use next consecutively numbered form.) Date of Well Completion <u>11-15-13</u> Total Depth of Well <u>70</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, 2045 MORSE ROAD, COLS., OHIO 43229-6605
 Blue - Customer's copy Pink - Driller's copy Green - Local Health Dept. copy