

Customer going to set pump

Form: OLMWR-SWR-1A

Top of lap pipe or reduction in casing: \_\_\_\_\_ feet. If telescoped or more than one screen, describe on next page.

Other (describe): \_\_\_\_\_

Type of completion (circle all applicable): Gravel packed Undreamed Telescoped Open hole Natural Development

Screen slot size: \_\_\_\_\_ inches Setting depth: From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Screen length: \_\_\_\_\_ feet Screen diameter: \_\_\_\_\_ inches Type of screen: \_\_\_\_\_

Casing length: \_\_\_\_\_ feet Casing diameter: \_\_\_\_\_ inches Type of casing: \_\_\_\_\_

Well depth: \_\_\_\_\_ feet Well grouted to a depth of \_\_\_\_\_ feet Type of grout (circle one): Neat Cement Bentonite Mix

Method of Measurement (circle one): steel tape electric tape air line other: \_\_\_\_\_

Static Water Level: \_\_\_\_\_ feet above or below (circle one) land surface Date measured: \_\_\_\_\_

If a flowing well, method of flow regulation: Valve \_\_\_\_\_ Other (describe) \_\_\_\_\_

Purpose of Well (check one): Home  Industrial  Public Supply  Irrigation  Fish Culture  Other: \_\_\_\_\_

Purpose of borehole (check one): Water Well  Geotechnical/Geological Investigation  Ground Source Heat Pump  Seismic Survey  Other (describe) \_\_\_\_\_

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: \_\_\_\_\_

Method of dosing and volume of Chlorine used in drilling and development: \_\_\_\_\_

Location of the source of any surface water used for drilling: \_\_\_\_\_

Date drilling started: \_\_\_\_\_ Date drilling completed: \_\_\_\_\_ Hole depth: \_\_\_\_\_ Hole diameter: \_\_\_\_\_

Well / Borehole Data

Information on Well Owner (Landowner if borehole is not for a water well)

Owner Name: Bobby Jackson

Mailing Address: Cobbs Rd

City: Clarks State: MS Zip Code: \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_

Well or Borehole Location

Latitude: 31° 17' 35.3" Longitude: 90° 58' 07"

Method of Lat/Long (circle one): Conventional Survey

USGS quad, Hand-held GPS, Survey-grade GPS

Distance \_\_\_\_\_ Miles Direction \_\_\_\_\_ of \_\_\_\_\_ Nearest Town \_\_\_\_\_

Town 4r Sec 27 Rng 2e

State Law requires that this report be prepared by the license holder responsible for the work and filed with the Department at the above address within 30 days of completion of drilling of the well or borehole.

For Office Use Only:

Acquirer: \_\_\_\_\_ Well #: A-61 L. S. Elevation: \_\_\_\_\_ E-Log #: \_\_\_\_\_

State Well Report  
 Part 1 - Driller's Log  
 Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 10631  
 Jackson, MS 39289-0631  
 (601) 961-5210  
 (601) 354-6938 (fax)

County: Harris

Permit #: \_\_\_\_\_

Driller: Fitzgerald Well Serv

Date drilling completed: 7-17-08

