Cconny: Hrwite 0.05 Part 1 For Office Use Only: Permit #	· 1 ()	State Well Report	
Duiler: Image: Imag	County: Amite 005	-	For Office Use Only:
Duiler: Image: Imag	Permit #: Missi	ssippi Department of Environmental Quality	Aquifer:
Date drilling completed: 1.3. CS Jackson, MS 30239.0631 (6013961-5210 (6013954-6038 (fxx) L.S. Elevation: Bild Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well. Well Veen Information Well Ower Information Well Veen Information Well Veen Information Owner Name State Law requires that this report be prepared by the driller in detail and filed with the Department within Well Ower Information Well Veen Information Multing Address: Carty NE ^(N) Rd! Latitude: " Longitude: Listing and the State Zip Code Distage Direction Number of Well (circle one) Home Industrial Purpose of Well (circle one) Tote above or below (circle one) and surface State So Attice describe) Date well drilling completed: 2.3 - 05; If Bowing, method of flow regulation: Value Other (describe) So State Waret Level: So feet above or		Office of Land and Water Resources	
Date diffing completed:			
State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well. Well Owner Information Well Coation Latitude:	Date drilling completed: $d - 3 - 05'$	(601)961-5210	L. S. Elevation:
Side Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well. Well Owner haformation Owner Name State State " Longitude:	Fitzgerald W De Service Bone.	(601)354-6938 (fax)	E-log #:
Well Owner Information Owner Name Data Well Location Mailing Address: Caury Me Rd Latitude: " Longitude:"" Mailing Address: Caury Me Rd Latitude: " Longitude:"" Mailing Address: Caury Me Rd Method of Lat/Long (circle one): Conventional Survey, USGS quad, Hand-held GPS, Survey-grade GPS	State Law requires that this report be	prenared by the drillor in detail and filed	with the Department within
Owner Name $\int 21/A$ $felesery$ Mailing Address: $(auref + Iver Rd)$ Latitude:		well.	
Mailing Address: Curfy / Me Rd Mailing Address: Curfy / Me Rd Lattuce mail Mailing Address: Congrute Lattuce mail Lattuce mail Lattuce mail Lattuce mail Mailing Address: Lattuce Lattuce mail Mail Mail Mail Mail <	$\bigcap $	Wel	I Location
Mailing Address: Curfy Né Rd. Lacty mg City State Zip Code Direction Well Data Method of LavLong (circle one): Conventional Survey. Prepense of Well (circle one) Home Industrial Purpose of Well (circle one) Home Industrial Static Water Level: State State State State Feet above or below (circle one) land surface Date measured: State State Veel depth: JS Well depth: State Ype of grout (circle one): Cement Bentonite Mix Circere alsot size: Inches State Type of screen: PWC Ype of completion (circle all applicable): Growel pasked Underreamed Telescoped Open hole Natura		Latitude:'	_" Longitude:^ , "
Lbety MG City State Zip Code Meters Distance Direction Nearest Town Miles Scale 1 of Number of Meanstrain Public Supply Irrigation Fish Culture Other: Date well drilling started: 1-3-05 Date well drilling completed: 2-3-05 f flowing, method of flow regulation: Valve Other (describe)	Mailing Address: (ounty live Ra)		
Lbety MG City State Zip Code Meters Distance Direction Nearest Town Miles Scale 1 of Number of Meanstrain Public Supply Irrigation Fish Culture Other: Date well drilling started: 1-3-05 Date well drilling completed: 2-3-05 f flowing, method of flow regulation: Valve Other (describe)	1 7	USGS quad, Hand-held	GPS. Survey-grade GPS
Pelephone No. (Libety ms	14 14 800 3	3 Ton 2N DUE
Well Data Burpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:	City / State	Zip Code	Iwn ~ Rng 1
Well Data Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:	Telephone No. ()	Distance Direction Miles Seafly	Nearest Town
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other:			
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f flowing, method of flow regulation: ValveOther (describe)	Purpose of Well (circle one) Home Industrial	Public Supply Irrigation Fish Culture	Other:
f flowing, method of flow regulation: ValveOther (describe)	Date well drilling started:	Date well drilling completed: 2-	3-05
Static Water Level: <u>80</u> feet above or below (circle one) land surface Date measured: <u>23-05</u> . Method of Measurement (circle one) steel tape electric tape air line other: <u></u> Hole depth: <u>95</u> Well depth: <u>95</u> Well grouted to a depth of <u>10</u> feet Well grout (circle one): Cement Bentonite Mix Casing length: <u>85</u> feet Casing diameter: <u>97</u> inches Type of casing: <u>976</u> icreen length: <u>10</u> feet Screen diameter: <u>977</u> inches Type of screen: <u>976</u> icreen length: <u>10</u> feet Screen diameter: <u>977</u> inches Type of screen: <u>976</u> feet icreen slot size: <u>012</u> inches Setting depth: From <u>855</u> feet to <u>955</u> feet ype of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe): <u>100 feet</u> feet. If telescoped or more than one screen, describe on back of page logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: <u>100 feet</u> feet incerein for granization running log(s): <u>100 feet requirements of the Mississippi</u> repartment of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. RECEIVE <i>BAA EdgarAl</i> <u>94</u> <u>64</u> <u>6000</u> 2000	f flowing, method of flow regulation: Valve	Other (describe)	
Method of Measurement (circle one) Steel tape electric tape air line other:	Static Water Level: 80 feet above or b	velow (circle one) land surface Date measured:	2-3-05
Alole depth: 95 Well grouted to a depth of	Method of Measurement (circle one)		
type of grout (circle one): Cement Bentonite Mix Casing length:	Hole depth: Well depth:	<u>95</u> Well grouted to a depth of	1/1- 600
Casing length:	Time of amount (1)		1001
Creen length: <u>IV</u> feet Screen diameter: <u>Y''</u> inches Type of screen: <u>PVC</u> creen slot size: <u>OID</u> inches Setting depth: From <u>85</u> feet to <u>75</u> feet ype of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe): <u>Corvel packed Underreamed Telescoped Open hole Natural Development</u> of of lap pipe or reduction in casing: <u>feet</u> . If telescoped or more than one screen, describe on back of page ogs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: <u>lame of organization running log(s)</u> certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. RECENCE <i>BIAJ EligerAld</i> <u>OU</u> . <i>Buchlyuly</i> FEB 07 200			
Geneen slot size: 1012 inches Setting depth: Fromfeet tofeet tofeet Sype of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development Other (describe):			Ove
Screen slot size: '012 inches Setting depth: From	creen length: <u>lu</u> feet Screen diame	eter: <u> </u>	PVC
Other (describe):	Screen slot size: <u>'01</u> , inches Setti	ng depth: Fromfeet to	2-1
Sop of lap pipe or reduction in casing: feet. If telescoped or more than one screen, describe on back of page ogs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Iame of organization running log(s):	ype of completion (circle all applicable): Gravel	packed Underreamed Telescoped Open	hole Natural Development
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Lame of organization running log(s): certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. BACELEGERAL DQ BIACELEGERAL DQ FEB 07 2000			
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Lame of organization running log(s): certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws. BACELEGERAL DQ BIACELEGERAL DQ FEB 07 2000	op of lap pipe or reduction in casing:	feet. If telescoped or more than one scree	en, describe on back of no
The second secon	ogs run (circle all applicable): No log run Elect	ric Gamma Ray Density Sonic Neutron	Other:
BIAL Elizeral duality and/or the Mississippi Department of Health regulations and state laws. RECEIVE	Name of organization running log(s).		
BIAL Elizeral duality and/or the Mississippi Department of Health regulations and state laws. RECEIVE	cerury that the well was drilled, constructed, an	nd completed in accordance with all applicable r	equirements of the Mississinni
	Separtment of Environmental Quality and/or the $k \to 1 = 1$	Mississippi Department of Health regulations a	and state laws. RECEIVE
	DIAC Chizgerald	024. Beerly	typeld FEB 07 2005
	Tint Name of Water Well Contractor and License N	No. Signature of	

- If well telescopes please sketch below and show depths.

N-131

Ground Level		Description of Formations Encountered	From	То
	·····	(lup)	0	20
		Sunn	20	40
		Ciuce	40	180
		Currie Sand + grave	80	85
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If more than one screen, show location of each on sketch

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; (X) 4) indicate direction. House uel RECEIVED FEB 0 7 2005 BY: OLWR Curry Furmind, Slovia Puterson hibe.A Landowner Name:

Signature of Water Well Contractor

Permit #:	STATE WELL R Part 2 Pump Installer's Complet Mississippi Department of Envir Office of Land and Water	ion Report onmental Quality	For Office Use Only: Aquifer: Well #: <u>N 131</u> Elevation:	
Driller: Fitzger'Ald LellSevice Date completed: 2-3-05,	P.O. Box 10631 Jackson, MS 39289- (601)961-5210 (601)354-6938 (fr	0631		
This report should be prepared by the p installation of pump.	ump installer in detail and file	l with the Departme	ent within 30 days of the	
Well Owner Information		We	ell Location	
Owner Name: Glurin Palerson	Latitud	Latitude:Longitude:		
Mailing Address: and y FA/m Rd		Method of Lat/Long (circle one): Conventional Survey,		
		USGS quad, Han	d-held GPS, Survey-grade GI	
Liberty MC City State	Zip Code	14 14 Sec	<u>33 Twn 21 Rng 41</u>	
		Distance Direction Nearest Town		
Telephone No. ()	3	3 Miles South of Liberty		
			/	
Pump Type Circle one			ower Type Circle one	
Air Lift Jet	ubmersible Diesel E	ngine Gasoli	ine Engine Natural (
Bucket Piston T	urbine Electric	Motor Hand		
Centrifugal Rotary F	Nowing Well Windmi	ll Other	(specify):	
Other (specify):	Horse P		r: <u>1/2</u>	
Date Pump Installed: 2-3-05			feet	
Rated Pump Capacity:Ga		of Stages:		
Pump Test Data		Method of Ma	easuring Water Level	
Date Well Tested:		C	Circle one	
Static Water Level (A):Feet Be	A in T in	Electric Me	asuring Line Steel Tape	
Pumping Water Level (B):Feet Bel		pecify):	· · · · · · · · · · · · · · · · · · ·	
Drawdown [(B) – (A)]:Feet Be	low Land Surface For flow	ing well, measured sl	hut in head:fe	
Test Pumping Rate:Ga			GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours):			hours of pumpi	
			RECEIVE	
I HEREBY CERTIFY that the above statement	s are true to the best of my log	ladao		
Brad Etzenald	024	and I	FEB 0 7 2005	

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