And A I	State Well Report		For Office Use Only	
County: Amfe.		oriller's Log		
Desmit #		t of Environmental Quality nd Water Resources	Aquifer:	
Driller: Filzgemld. Well Som		lox 10631	Well #: <u>M - 135</u> L. S. Elevation:	
• · · · · · · · · · · · · · · · · · · ·	10	IS 39289-0631		
Date drilling completed: 10-12-55		961-5210		
	(601)354	1-6938 (fax)	E-log #:	
State Law requires that this repo	nt be prepared by the lies	<u>nen kuldar i 1973 ji 1</u>	an a na na na sa	
triormation on Well		well or Bo	orehole Location	
	,	Tainnto 4	_" Longitude'	
		Method of Lat/Long (circle of	ie): Conventional Survey.	
Mailing Address MIKE Gerre	11		,	
Mailing Address Mike Ferre Dikon Rd			GPS, Survey-grade GPS	
Whety M	r/	1/4 1/4 Sec_25	Twn <u>2N</u> Rng <u>YE</u>	
	ate Zip Code	Distance Direction	Negrest Town	
City 7 St	an Zip Cour	Distance Direction	oi hverly	
Telephone No. ()		-		
	Well / Bore	hala Data		
Location of the source of any surface was Method of dosing and volume of Chlorid Logs run (circle all applicable) No log D Name of organization running log(s).	ne used in drilling and develo	-		
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log p	ne used in drilling and developm Electric Gamme "	ning <u>Chin Mar</u> a		
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log run Name of organization running log(s). Purpose of borehole (check one): Water V	ne used in drilling and development Electric. Gamme P., Well Geotechnical/Geok	balling factor Marine Marine	1 Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log run Name of organization running log(s) Purpose of borehole (check one): Water V Solumie If drilling is not relate	ne used in drilling and developm Electric: Gamme P., Well Geotechnical/Geok Survey Other (describe) al to water well constraint	ogical Investigation Ground	d Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log run Name of organization running log(s). Purpose of borehole (check one): Water V	ne used in drilling and developm Electric: Gamme P., Well Geotechnical/Geok Survey Other (describe) al to water well constraint	ogical Investigation Ground	d Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log run Name of organization running log(s) Purpose of borehole (check one): Water V Solumie If drilling is not relate	ne used in drilling and development Electric. Gamme P., Well Geotechnical/Geole Survey Other (describe) and to water well construction Industrial Public Supply	pgical Investigation Ground	d Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) Prolog D Name of organization running log(s). Purpose of borehole (check one): Water V Sciencie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulation	ne used in drilling and development Electric. Gamme P., Well Geotechnical/Geok Survey Other (describe) of to water well constraint Industrial Public Supply ion: Valve Other	pgical Investigation Ground	d Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) Prolog D Name of organization running log(s). Purpose of borehole (check one): Water V Sciencie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulation	ne used in drilling and development Electric. Gaussian P., Well Geotechnical/Geoko Survey Other (describe) al to water well constraints Industrial Public Supply ion: Valve Other Other Other ibove of below (circle one) is	During Carlie Martin Description Ground Integration Plate Calmer ther (describe) and surface Date measured:	d Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) No log ro Name of organization running log(s). Purpose of borehole (check one): Water V Solumie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulati Static Water Level:feet a	ne used in drilling and development of the second s	During Carlie Martin Description Ground Integration Plate Calmer ther (describe) and surface Date measured:	1 Source Heat Pump	
Method of dosing and volume of Chlorid Logs run (circle all applicable) Prolog to Name of organization running log(s) Purpose of borehole (check one): Water V Sciencia If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulation Static Water Level: 56 feet a Method of Measurement (circle one) (Well depth: Well grouted to a d	ne used in drilling and development of 10 feet Type ing diameter:	builty Carlo Martin pgical Investigation Ground Inigation Fish Culture ther (describe) and surface Date measured: air line other of grout (circle one). Neat Cen inches Type of casing:	1 Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) the log to Name of organization running log(s). Purpose of borehole (check one): Water V Solumie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulations Static Water Level: 56 feet a Method of Measurement (circle one) (Well depth: 160 Well grouted to a d Casing length: 130 feet Cas	ne used in drilling and development of 10 feet Type ing diameter:	builty Carlo Martin pgical Investigation Ground Inigation Fish Culture ther (describe) and surface Date measured: air line other of grout (circle one). Neat Cen inches Type of casing:	1 Source Heat Pump	
Method of dosing and volume of Chlorin Logs run (circle all applicable) the log to Name of organization running log(s). Purpose of borehole (check one): Water V Solumie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulations Static Water Level: 56 feet a Method of Measurement (circle one) (Well depth: 160 Well grouted to a d Casing length: 130 feet Cas	ne used in drilling and developments of the second	beiling Guide Marine ogical Investigation Ground Intgation Fish Culture ther (describe) and surface Date measured: air line other of grout (circle one). Next Cen	D = 12 - as $D = 12 - as$ $D = 12 - as$ Ac Ac	
Method of dosing and volume of Chlorin Logs run (circle all applicable) Prolog of Name of organization running log(s). Purpose of borehole (check one): Water V Solumie If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulations Static Water Level: 56 feet a Method of Measurement (circle one) (Well depth: 100 feet Cas Screen length: 30 feet Scr (100 feet Scr	ne used in drilling and development of the setting depth: From	ogical Investigation Ground	D = 12 - as $D = 12 - as$ $D = 12 - as$ Min Ac Prc $u = feet$	
Method of dosing and volume of Chloris Logs run (circle all applicable) rio log ro Name of organization running log(s). Purpose of borehole (check one): Water V Solumio If drilling is not relate Purpose of Well (check one): Home If a flowing well, method of flow regulations Static Water Level: 56 feet a Method of Measurement (circle one) (Well depth: 160 Well grouted to a d Casing length: 30 feet Cas Screen length: 30 feet Scr Screen slot size: 10 feet a Method size: 10 feet Scr	ne used in drilling and development of the setting depth: From	ogical Investigation Ground	D = 12 - cs $D = 12 - cs$ Min Ac Prc $v = feet$	

DCT 2 8 2005 BY: OLWR

N-135

0

130

13¢

60

Ground Level

<u>80</u> 10

 \mathcal{L}^{j}

30

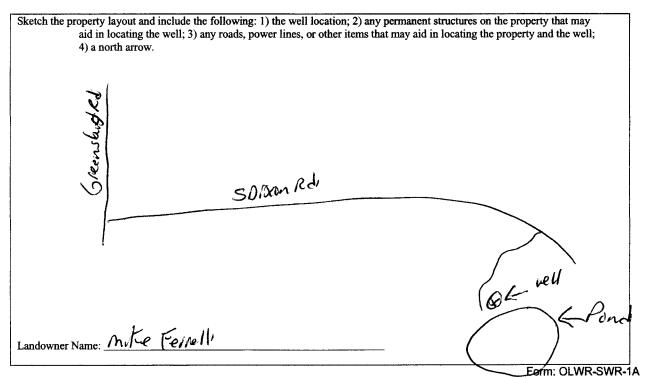
The sketch below only required for water wells

If well telescopes, show depths on sketch. Ground Level

Description of formations encountered	must be provide	<u>ed for all</u>
wells and boreholes, unless specifically	exempted by re	gulations
Description of Formations Encountered	From (depth)	To (depth)

Description of Formations En
Clar Grand Stan
Speri
Jun
clue
Clue Surt Curse Sant
Cause San
······································
······································
· · · · · · · · · · · · · · · · · · ·
L

If more than one screen, show location of each on sketch



I certify that the well/borehole was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi Department of Environmental Quality and the Mississippi Department of Health regulations, if applicable, and state

124

laws. BIAdielzycald

10-12-05 Date

Print Name of Responsible Licensee and License No.

Signature of Licensee

RECEIVED OCT 2 8 2005 BY: OLWR

. (STATE WELL	REPORT			
County: <u>Amile</u> Permit #: Driller: <u>Flagerald Well Suite</u> ,	Part 2 Pump Installer's Completion Report ississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631		Aquifer:	fice Use Only:	
Date completed:	Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)				
<u>Copy information from block on Part 1</u> This part of the report must be completed by	· /	. ,	L		
report must be attached and both parts filed Well Owner Informatio	with the Department at the ab	ove address within 3			
Owner Name: Mike Ferrell	Latitu	Latitude:Longitude:			
Mailing Address: Dixon Rd		Method of Lat/Long (check one): Conventional Survey,			
		Gquad, Hand-he	-		
<u>Libely my</u> City State	Zip Code	¹ / ₄ Sec <u>25</u> T <u>2N</u> _ R_ <u>4</u> E			
Telephone No. ()	Distan	ce Direction MilesSouth	. 1		
Pump Type	·····		Power Type		
Circle one	_		Circle one		
Air Lift Jet	Diesel	Engine Gase	oline Engine	Natural Gas	
Bucket Piston T	urbine Electr	c Motor Han	d	Tractor PTO	
Centrifugal Rotary I	Flowing Well Windr		er (specify):		
Other (specify):		Horse Power Rating of Motor: $\underline{5 \mu \rho}$.			
Date Pump Installed: <u>12-05</u> Rated Pump Capacity: <u>85</u> G		g Depth:		_feet	
Pump Test Data		Method of Measuring Water Level Circle one			
Date Well Tested:Feet Be Static Water Level (A):Feet Be Pumping Water Level (B):Feet Be	elow Land Surface Other	ne Electric M (specify):	leasuring Line	Steel Tape	
Drawdown [(B) – (A)]:Feet Be	low Land Surface For flo	wing well, measured	shut in head:	feet	
Test Pumping Rate:Ga	allons Per Minute Well y	ielded	GPM with a c	lrawdown of	
Duration of Pump Test (minimum 4 hours):	hours	feet after	ho	ours of pumping	
I HEREBY CERTIFY that the above statemen BIAL EFgener L Print Name of Pump Installer and License No.	024. 13	wiedge. Cal Stypelf Signature of Pump		n: OLWR-SWR-1B	

· · · · ·

OCT 2 8 2005 BY: OLWR