	STATE V	VELL REPORT	318
	SIALE	Part 1	
county: Amte	Dr	riller's Log	For Office Use Only:
.ounty:	Mississioni Departm	nent of Environmental Quality	Well #:
Permit #:		nd and Water Resources O. Box 2309	Aquifer:
Driller: Fitzgrald hell forgic-	p, P. Jackso	n, MS 39225-2309	E-Log #:
Date drilling completed: <u>9-13-18</u>		501)961-5555	
	•	)961-5228 (fax)	
State Law requires that this report	be prepared by the l	license holder responsible for	the work and filed with the
State Law requires that this report Department at the above address v	vithin 30 days of con	npleaon of arming of the wet	
Well Owner Informat	ion	Well or Bo	rehole Location
(Landowner if borehole is not for		Latitude: 31 4 54.1 L	ongitude: <u>40° 36′ 104</u> ′
Owner Name: Russ Rerug.		Wath a d of Lat / ong (shock o	ne): Conventional Survey,
Mailing Address:		1	
		USGS quad, Hand-held	GPS, Survey-grade GPS
		SE IN NE V. Se	CATIN REE
Gilburi MS, City State	Zip Code		
City State	Zip Code	(Distance) (Direction)	of(Nearest Town)
Telephone No. ()		(Distance) (Direction)	(110211050-10111)
Date drilling started: 9-13 · 14. Dat	Well / B	orehole Data	
Location of the source of any surface Method of dosing and volume of Chlo	rine used in drilling a	and development:	utron Other:
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Form:	OLW	/R-9	SWR-	·1A (	4/1	3)

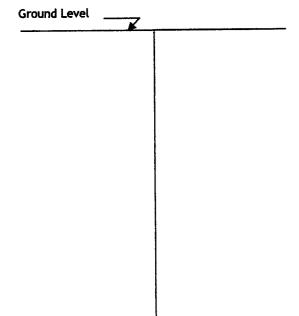
County:	
Permit #:	

For Office Use Only	•
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Well #: \_\_\_\_\_\_\_\_\_

## The sketch below only required for water wells

## If well telescopes, show depths on sketch.



<u>Description of formations encountered must be provided for all wells</u> and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
	From ( <i>depth</i> ) Ground level	
		55
Auy,	0	
Cidvet	<i>2</i> 0 20	40
Course Sand	40	40 68
	1	
	+	
		İ
	1	
<u> </u>	1	

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

4) north arrow

Russ Reeves. Landowner Name:

I HEREBY 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 laws.

BIAN Flacerald	074	9-13-15-	Bettel	
Print Name of Responsible License	e and License No.	Date	Signature of Li	

## Google Maps 31°04'54.1"N 90°36'10.4"W



Imagery ©2018 Google, Map data ©2018 Google 200

200 ft



31°04'54.1"N 90°36'10.4"W 31.081702, -90.602901

#1

NA, MS

39JW+MR Gillsburg, Mississippi

Russ Reeves, 9-13-18; 65-20

16 HP

RECEIVED DEC 21 2018 BY OLWR

	STATE W	ELL REPORT	
County: Armite		Part 2	For Office Use Only
-	<b>Pump Installe</b>	er's Completion Report	Well#: U138
Permit #:	Mississippi Depart	ment of Environmental Quality and and Water Resources	Well #:
Date completed: <u>9-13-18</u> .	F	P.O. Box 2309	Aquifer:
Copy information from block on Part 1		on, MS 39225-2309 (601)961-5210	Aquiter:
Copy mornation from block on Fare 1	•	1) 360-0535 (fax)	
This part of the report must be completed of the report must be attached and both p	t by a licensed wate	r well contractor or a licensed put	np installer. A copy of Part 1 within 30 days of well complet
of the report must be attached and both p Well Owner Information	oans juea wun ine i on	Well L	ocation
Dwner Name: Russ Rocks.		Latitude: 310 4 54.1" Lor	ngitude: <u>40°36 (0 y</u> "
Mailing Address:		Method of Lat/Long (check one	
naimis Auviess		USGS quad, Hand-held G	
Gilsburg- MS		SE 1/ NE 14, Sec	
Gilburg_ MS City State	Zip Code		
Telephone No. ()		(Distance) (Direction)	f(Nearest Town)
	Pump T)	ype (check one)	
	Power T	ype (check one)	
Fiertric []/filesel ]] Gasoline ]]Natural Gas		ype (check one) indmill Other (describe):	r of Stages:
Fiertric []/filesel ]] Gasoline ]]Natural Gas	Power T	ype (check one) indmill Other (describe):	r of Stages:
Electric $\square$ Diesel $\square$ Gasoline $\square$ Natural Gas Horse Power Rating of Motor: $\_$ $\_$ $\square$ $\square$ $\square$	Power T Tractor PTO Wi Setting Dep Pump Test Data	ype (check one) indmill Other ( <i>describe</i> ): pth: <u>50</u> feet Numbe a for Non Flowing Well	r of Stages:
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Form: OLWR-SWR-2A (4/13)