County: Beston Permit #: 0-162 Driller: Law Concentration Date drilling completed: 6-28-08 State Law requires that this report be prepared by the Department at the above address within 30 days of co				
Information on Well Owner (Landowner if borehole is not for a water well)		prehole Location		
Owner Name Leslie Curtis				
	Method of Lat/Long (circle or	ne): Conventional Survey		
Mailing Address: 536 Curtis RP				
	-	GPS, Survey-grade GPS		
michigan City ma, 38647 City State Zip Code	¼¼ Sec_ <u>3</u>			
City State Zip Code	Distance Direction	Nearest Town of Lama		
Telephone No. (662) 224 - 3253	$$ Miles \underline{NE}	of Lama		
Weil / Ba	prehole Data			
Date drilling started <u>6-28-08</u> Date drilling completed: <u>6-28-68</u> Hole depth: <u>147</u> Hole diameter: <u>8</u> Location of the source of any surface water used for drilling: <u><u>Mell</u> <u>Methan</u> Method of dosing and volume of Chlorine used in drilling and development: <u>Yz PK Chlorine to 1000</u> Mell <u>Under</u> Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other: <u></u> Name of organization running log(s):</u>				
Purpose of borehole (check one): Water Well X Geotechnical/Ge Seismic Survey Other (descri	be)			
If drilling is not related to water well construction, skip the remainder of this block				
Purpose of Well (check one): Home X Industrial Public Supply Irrigation Fish Culture Other:				
If a flowing well, method of flow regulation: Valve	Other (describe)			
Static Water Level:feet above of below (circle one) land surface Date measured:				
Method of Measurement (circle one) steel tape electric tape air line other:				
Well depth: 147 Well grouted to a depth of 7^{-1} feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 137 feet Casing diameter: 4 inches Type of casing: PVC				
Screen length: <u>10</u> feet Screen diameter: <u>4</u> inches Type of screen: <u>PVC</u>				
Screen slot size: $0/3$ inches Setting depth: From $1/37$ feet to $1/47$ feet				
Type of completion (circle all applicable): Gravel packed Und		-		
Other (describe):				
Top of lap pipe or reduction in casing:feet. If a	elescoped or more than one scree			
		Form: OLWR-SWR-1A		
		RECEIVE		
		JUL 2 5 2008		
		BY: OLWF		

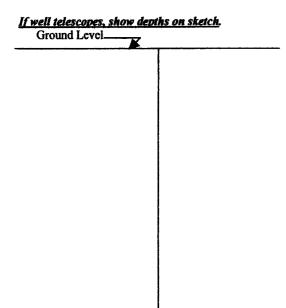
•	STATE WELL REPORT				
County: <u>Benton</u> Permit #: <u>6-162</u> Driller: <u>Lany Corperter</u> Date completed: <u>6-28-08</u> <u>Copy information from block on Part 1</u> This part of the report must be completed report must be attached and both parts file Well Owner Information Owner Name: <u>Lastice Cur</u> Mailing Address: <u>536 Curr</u> Mailing Address: <u>536 Curr</u>	P Pump Installer' Mississippi Departmen Office of Land P.O. 1 Jackson, N (601) (601)35 by a licensed water well a with the Department of ion the RO	Part 2 s Completion Report ht of Environmental Quality and Water Resources Box 10631 MS 39289-0631 9961-5210 i4-6938 (fax) contractor or a licensed pump in the above address within 30 da Well Latitude: Method of Lat/Long (check on	ays of well completion.		
Telephone No. (662) 224 - 3	-	Distance Direction	Nearest Town		
Pump Type Circle one			ver Type rcle one		
Air Lift Jet	Submersible	Diesel Engine Gasolin	e Engine Natural Gas		
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO		
Centrifugal Rotary	Flowing Well	Windmill Other (s	specify):		
Other (specify):		Horse Power Rating of Motor:			
Date Pump Installed: 6-28- Rated Pump Capacity: 10					
Kateu Fullp Capacity.			**************************************		
Pump Test Data Date Well Tested: 6-28-02	7		suring Water Level rcle one		
		Air Line Electric Meas	auring Line Steel Tape		
Static Water Level (A): <u>90</u> Feet I Pumping Water Level (B): <u>95</u> Feet E		Other (specify):			
Drawdown [(B) - (A)]: Feet I	Below Land Surface	For flowing well, measured shu	It in head: feet		
Test Pumping Rate:		Well yielded			
Duration of Pump Test (minimum 4 hours):			4 hours of pumping		
·····					
I HEREBY CERTIFY that the above statemed <u>LARRY</u> <u>CARPENTE</u> Print Name of Pump Installer and License No.	R 0-162	f my knowledge.			
Form: OLWR-SWA-1B					

.

.

70

The sketch below only required for water wells



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

Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
Surface Sail	0	21
mel. Red Sand	21	45
A CLOO		
net white Sand	45	68
P P P		
White Clay	48	22
1.4.1.0		
White Fire Sont		110
White Come Said	11-	1117
White Come Sart	110	147
		1
	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	+
	+	+
		1
	+	1
L	I	J

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) a north arrow. House Landowner Name: Form: OLWR-SWR-1A

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

PECEIVED LARRY CARPENTER 6-112 6-30-08 Larry Ca Print Name of Responsible Licensee and License No. Date Signature of JUL 2 5 2008 Signature of Licensee BY: OLWR