State Well Report					
County: Benton		Driller's Log	For Office Use Only:		
		t of Environmental Quality	Aquifer:		
Permit #:		and Water Resources	Well #: <u> </u>		
Driller: Jones w. Mason		Box 10631	wen#: L		
	1 '	1S 39289-0631	L. S. Elevation:		
Date drilling completed: 11-15- ひん		961-5210	E-log #:		
	[601)35	4-6938 (fax)	E-log #:		
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.					
Information on Well		Well or Bo	orehole Location		
(Landowner if borehole is not f	or a water well)	34.53 26	" I aminuta 89 . 00 645"		
Owner Name Chris Show		Latitude: 9 1 33 9.5	" Longitude: 89 · 09 · 42" ne): Conventional Survey,		
		Method of Lat/Long (circle or	ne): Conventional Survey,		
Mailing Address: 3935 gray A	Icdemy rd.				
5 (·		GPS, Survey-grade GPS		
		SE 14 NE 14 Sec 24	Twn OSV Rng IE		
Asulad M:	38603	NE			
City Sta	te Zip Code	Distance Direction Miles NE	Nearest Town		
Telephone No. (66) 224-500	\supset	J Willes NL	01 2571.658		
	Well / Bore	ehole Data			
Date drilling started: 11-15-06 Date drilling completed: 11-15-06 Hole depth: 163' Hole diameter: 63/4					
Location of the source of any surface water used for drilling: NA Method of dosing and volume of Chlorine used in drilling and development:					
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):					
Purpose of borehole (check one): Water V	/ell_Geotechnical/Geol	ogical Investigation Ground	i Source Heat Pump		
Seismic SurveyOther (describe)					
If drilling is not related to water well construction, skip the remainder of this block					
Purpose of Well (check one): Home 🗹 Industrial Public Supply Irrigation Fish Culture Other:					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: 100 feet above o below (circle one) land surface Date measured: 11-15-06					
Method of Measurement (circle one) steel tape electric tape air line other: String weight.					
Well depth: 163' Well grouted to a depth of 16 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 143 feet Casing diameter: 4 inches Type of casing: puc					
Screen length: 20 feet Screen diameter: 4 inches Type of screen: 900					
Screen slot size:,Olo inches Setting depth: From					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development					
Other (describe):					
Top of lap pipe or reduction in casing: feet. If telescoped or more than one screen, describe on next page					

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Thes	ketch	helow	anly	reauired	for	water	wells

If well telescopes, show depths on sketch. Ground Level_

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

Description of Formations Encountered	From (depth)	i o (depin)
clay dirt	Ground Level	8
red Sand	8	30
hard rock.	30	31
while soud	3 (65
while clay	65	フネ
white soud	72	98
white clay	98	100
white sand.	100	163
14.		
		

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

Sketch the property layout and include the following: 1 aid in locating the well; 3) any roads, pow 4) a north arrow.) the well location; 2) any permanent structures wer lines, or other items that may aid in locating	on the property that may the property and the well;
4) a north arrow.	177	
de		
drive un		
7	house	
		_
		01
المهير) المهير		
	7	
Landowner Name: Chris Schoup	<u> </u>	Farm OLWID OWD 4

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

laws.

Tones U. Mos on 0-620 12-2-06

Print Name of Responsible Licensee and License No. Date

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STATE WELL REPORT Part 2 County: Benton For Office Use Only: Pump Installer's Completion Report Mississippi Department of Environmental Quality Permit #: Aquifer: Office of Land and Water Resources Driller: Jones W. Mason P.O. Box 10631 Well #: F Jackson, MS 39289-0631 Date completed: 11-15-06 (601)961-5210 Elevation: (601)354-6938 (fax) Copy information from block on Part 1 This part of the report must be completed by a licensed water well contractor or a licensed pump installer. A copy of Part 1 of the report must be attached and both parts filed with the Department at the above address within 30 days of well completion. Well Location Well Owner Information Owner Name: Chris Show Latitude: 34.53.215 Longitude: 89.09.642 Mailing Address: 3935 gray Acdemy rd. Method of Lat/Long (check one): Conventional Survey____, USGS quad , Hand-held GPS , Survey-grade GPS SE 4 ME 4 Sec 26 T 25 R LE Distance Direction Nearest Town 3 Miles NE of Ashland Telephone No. (662) 224-5007 Power Type Pump Type Circle one Circle one Diesel Engine Gasoline Engine Natural Gas Submersible Air Lift Jet Electric Motor Hand Tractor PTO Turbine Bucket Piston Other (specify): Flowing Well Windmill Centrifugal Rotary Horse Power Rating of Motor: ____3/4 Other (specify): 130 feet Setting Depth: Date Pump Installed: _11-15-0C Number of Stages: _ _ ((Rated Pump Capacity: _____ Gallons Per Minute Method of Measuring Water Level Pump Test Data Circle one Date Well Tested: 11-15-06 Steel Tape Air Line Electric Measuring Line Static Water Level (A): 1 See Feet Below Land Surface Other (specify): String I weight Pumping Water Level (B): NA Feet Below Land Surface For flowing well, measured shut in head: Feet Below Land Surface 15 GPM with a drawdown of Well yielded Gallons Per Minute Test Pumping Rate: feet after 24 __hours of pumping Duration of Pump Test (minimum 4 hours): 24

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

Tones w. Majon 0-620
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer

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