County: BELTON	
Permit#: MS (W-16953	
Driller: Galuce Housew WEUGO	
Date drilling completed: 2-13-09	_

# **State Well Report**

Part 1 - Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225
(601)961- 5210
(601)961- 5228 (fax)

For Office Use Only:
Aguifer: WLCXL
well #: 6 45
L. S. Elevation:
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.

Department at the above address within 50 days of comp	neuon of uruing of the well of borenoie.			
Information on Well Owner	Well or Borehole Location			
(Landowner if borehole is not for a water well)				
`	Latitude: 34 ° 50 ' 55" Longitude: 89 ° 15' 18"			
Owner Name KEVZN SZMSON				
	Method of Lat/Long (circle one): Conventional Survey,			
Mailing Address: P.o. Box 26				
Maning reduction 1991 John December 1991	USGS quad Hand-held GPS, Survey-grade GPS			
	58 1/ 58 1/ Sec 1 Twn 35 Rng 1 W			
Sars amina	NE W			
ASHLAND MS 3863 City State Zip Code	Distance Direction Nearest Town			
City State Zip Code				
Telephone No. (662) >>4-3>41	3 Miles WEST of ASHUND			
Telephone No.				
Well / Bore	hole Data			
5	λα			
Date drilling started: 2-13-69 Date drilling completed: 2-13-69	Hole depth: 340 Hole diameter: 61			
Location of the source of any surface water used for drilling:				
Method of dosing and volume of Chlorine used in drilling and devel	opment: 51b. 5HOCICWG			
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 Well Geotechnical/Geole	ogical Investigation Ground Source Heat Pump			
• • • • • • • • • • • • • • • • • • • •	• • = !=			
Seismic Survey Other (describe)	)			
If drilling is not related to water well construction	n, skip the remainder of this block			
If withing to not reside to react west construction, and the remainder of this ower.				
Purpose of Well (check one): Home Industrial Public Supply Irrigation X Fish Culture Other:				
Tapose of work (electrone). Home industria I done supply ingaron_v_ I isn cuttine other.				
If a flowing well, method of flow regulation: ValveO	ther (describe)			
Static Water Level: feet above or below (circle one) land surface Date measured:				
Method of Measurement (circle one) steel tape electric tape air line other: well Sound of Measurement (circle one)				
Well depth: 340 Well grouted to a depth of 60 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Type of ground only, from Contonit Delitority				
Casing length: 280 feet Casing diameter: 12 inches Type of casing: PVC				
cusing rengin. V - rect casing manifers. 1 year of casing. 1				
Screen length: 60 feet Screen diameter: 12 inches Type of screen: PVC				
solven length. 1 ype of scient. 7				
Screen slot size:				
Screen slot size:				
Type of completion (circle all applicable). Gravel packed Underreamed Telescoped Open hole Natural Development				
Type of completion (encie an applicable). Graver packed Tonden	realised relescoped Open note Natural Development			
Other (describe)				
Outer (describe):				
Top of lap pipe or reduction in casing: feet. If tele	encomed on more than one govern describe on most = ===			
Top of lap pipe or reduction in casing:feet. If telescoped or more than one screen, describe on next page				

Form: OLWR-SWR-1A (04/08)

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BY: OLWR

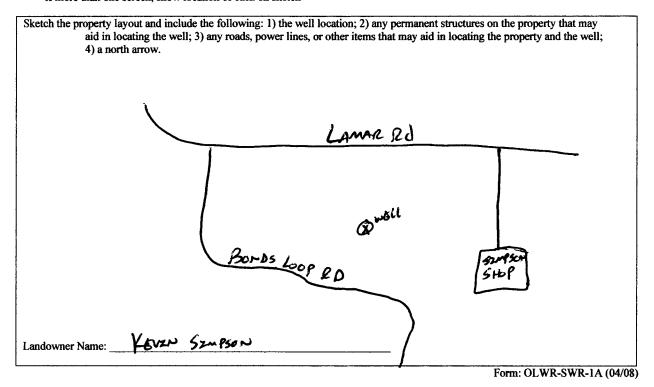
## The sketch below only required for water wells

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

Ground Level	If well telescopes, show depths on sketch.				
	Ground Level				
37 Mapiera 340		(1111)	CASSUL - 280 STADIOR - 340		

Description of Formations Encountered	From (depth)	To (depth)
Description of Formations Encountered	Ground Level	28
REDSA-D	28	60
WHITECHY	60	170
WHITE CHY & SUND	110	185
WHITE CLAY	185	260
REDSA-D WHITE CHY WHITE CHY & SAND WHITE CHY SAND	260	340
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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 laws.

P	rint	Name	of i	Res	ponsible	Licensee	and	License No.
			·-		P			

Date

Signature of Licensee

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MAR 0 5 2012

BY: OLWR (MS-GW-16953)

# County: Beston Permit #: MSGW-16953

Driller: GALLE HUSTEN WELL G. 

Copy information from block on Part 1

## STATE WELL REPORT

## Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality

Office of Land and Water Resources P.O. Box 2309

Jackson, MS 39225 (601)961-5210 (601)961-5228 (fax)

For Office Use Only:				
Aquifer:				
Well #:G45				

This part of the report must be completed by a licensed water well report must be attached and both parts filed with the Department	I contractor or a licensed pump installer. A copy of Part 1 of the				
Well Owner Information	Well Location				
Owner Name: KEVEN Sanpson	Latitude: 34 <sup>6</sup> 50'55'' Longitude: 89 <sup>6</sup> 15'18"				
Mailing Address: P.o. Box 26	Method of Lat/Long (check one): Conventional Survey,				
	USGS quad, Hand-held GPS, Survey-grade GPS				
Asherd MS 38663 City State Zip Code	55 1/4 55 1/4 Sec 2 T 35 R 1W				
City State Zip Code	Distance Direction Nearest Town				
Telephone No. (662) 334-3341	3 Miles WEST of ASHLAD				
Pump Type Circle one	Power Type Circle one				
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas				
Bucket Piston Turbine	Electric Motor Hand Tractor PTO				
Centrifugal Rotary Flowing Well	Windmill Other (specify):				
Other (specify):	Horse Power Rating of Motor: 100 Hf				
Date Pump Installed: 2-27-2009	Setting Depth: 220 feet				
Rated Pump Capacity: Gallons Per Minute	Number of Stages: 4				
Pump Test Data	Method of Measuring Water Level				
Date Well Tested:	Circle one				
Static Water Level (A):Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape				
Pumping Water Level (B):Feet Below Land Surface	Other (specify):				
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head:feet				
Test Pumping Rate:Gallons Per Minute	Well yieldedGPM with a drawdown of				
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping				
I HEREBY CERTIFY that the above statements are true to the best	of my knowledge.				
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer				
	Form: OLWR-SWR-1B (04/08) RECEIV				
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BY: OLWR