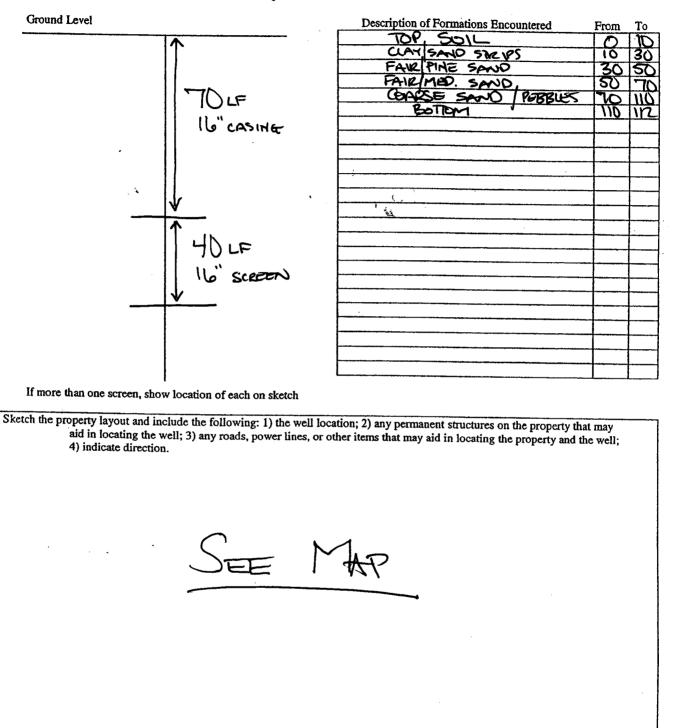
Permit #: $60^{-4}38114$ Office of Land and Water ResourcesDriller: $\overline{J.NEWcome}$ 0.773P.O. Box 10631Jackson, MS 39289-0631Jackson, MS 39289-0631L	For Office Use Only: puifer:
County: $Boliva($ Part 1Mississippi Department of Environmental QualityAqDriller: $\underline{J.NEWCOME} 0.773$ Office of Land and Water ResourcesWater ResourcesDriller: $\underline{J.NEWCOME} 0.773$ Jackson, MS 39289-0631LDate drilling completed: $(b-9-2011)$	uifer:
Permit #: <u>GW-43811</u> Driller: <u>J. NEWCOME 0.773</u> Date drilling completed: <u>6-9-2011</u> Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 10631 Jackson, MS 39289-0631 L	ell #:
Driller: J. NEWCOME 0.773 P.O. Box 10631 We Date drilling completed: 6-9-2011 Jackson, MS 39289-0631 L	
Driller: <u>Jackson, MS 39289-0631</u> Date drilling completed: (601)961-5210	1
Date drilling completed: $6-9-2011$ (601)961-5210	S. Elevation:
(601)354-6938 (fax)	
	log #:
State Law requires that this report be prepared by the driller in detail and filed with 30 days of completion of drilling of the well.	the Department within
Well Owner Information Well Los	
Dwner Name H.E. & S. F. Properties LP Latitude: 33.56.09." I	ongitude: 10 .51, 12,
Mailing Address: <u>P.O.</u> Box 1 Method of Lat/Long (circle one):	
USGS quad Hand-held GP	
Maron GA 31202 NEWAW 4 Sec 18V	Twn 24N Rng 06W
City State Zip Code NL	Nearest Town
Telephone No. () Direction Direction Of	GUNNISON
-	
Well Data	
Fulpose of wen (chele one) frome industrial i done cappy	ther:
Date well drilling started: $6 - 9 - 2011$ Date well drilling completed: $6 - 9$	[-201]
If flowing, method of flow regulation: Valve Other (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:	
Hole depth: Well depth: Well grouted to a depth of	10 feet
Type of grout (circle one): Cement Bentonite Mix	
	P.V.C.
	$\frac{1}{2}$
Screen length: <u>40</u> feet Screen diameter: <u>16</u> inches Type of screen:	<u>Y.V.C.</u>
Screen slot size: inches Setting depth: From feet to	<u> feet</u>
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open ho	ole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. If telescoped or more than one scree	n, describe on back of page
Logs run (circle all applicable). No log run Electric Gamma Ray Density Sonic Neutron O	ther:
Name of organization running log(s):	
I certify that the well was drilled, constructed, and completed in accordance with all applicable re	
Department of Environmental Quality and/or the Mississippi Department of Health regulations a	ind state laws.
= 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1	
JOHN NEWCOME U-115 COLLAR	
Print Name of Water Well Contractor and License No. Signature of V	Water Well Contractor
	NUG 9 9 20

1

If well telescopes please sketch below and show depths.



Landowner Name:

C ature of Water Well Contractor Sig

ballylax	ELL REPORT For Of	fice Use Only:
Calal - U 2211 Pump Installer	s Completion Report Aquifer:	
in this is the partition	nt of Environmental Quality and Water Resources	D181
	Box 2309	
(60))961-5210	
Copy information from block on Part 1 (601)9	51-5228 (fax)	
This part of the report must be completed by a licensed water well report must be attached and both parts filed with the Department	contractor or a licensed pump installer. A cop at the above address within 30 days of well com	y of Part 1 of the pletion.
Well Owner Information	Well Location	
Owner Name: H.E. & G.F. Properties LP	Latitude: 33.56. 09" Longitude: 90051. 12"	
Mailing Address: P.O. BOX 1	Method of Lat/Long (check one): Conventional Survey	
	USGS quad, Hand-held GPS X, Survey-grade GPS	
Macon GA 31202 City State Zip Code	<u>NE 4 NW 4 sec 18 T 24N R 06W</u>	
Telephone No. ()	Distance Direction Of Charge	e Town 1600
Pump Type	Power Type	
Air Lift Jet Submersible	Diesel Engine Gasoline Engine	Natoral G as
Bucket Piston Turbine	Electric Motor Hand	Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify):	
Other (specify):	Horse Power Rating of Motor:	
Date Pump Installed: 6 12/11	Setting Depth: 70	feet
Rated Pump Capacity: 2800 Gallons Per Minute	Number of Stages:	
Pump Test Data	Method of Measuring Water	-i.eval
Date Well Tested:	Circle one	
Static Water Level (A): Feet Below Land Surface	Air Line Electric Measuring Line	Steel Lape
	Other (specify):	
Pumping Water Level (B):Feet Below Land Surface		
Drawdown [(B) – (A)]:Feet Below Land Surface	For flowing well, measured shut in head:	
Test Pumping Rate: Gallons Per Minute	Well yielded GPM with a	drawdown of
Duration of Pump Test (minimum 4 hours):hours	feet after	hours of pumping
This is for (circle one): New Well Replacement of E		:
I HEREBY CERTIFY that the above statements are true to the best	of my knowledge.	
Cong Kowe 0-111P	- L'IL QU	
Print Name of Pump(Installer and License No. (if applicable)	Signature of Pump Installer Form: OL	WR-SWR-1C (07-09)
		AUG 0 8 2
		MAL MOI
		BY. UL

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