County: Bolivan Part 1	For Office Use Only:	
County: Mississippi Department of Environmental Qua	lity Aquifer:	
Permit #: Office of Land and Water Resources	Well #: E-147	
Driller: RATLY Ff water well P.O. Box 10631		
Jackson, MS 39289-0631	L. S. Elevation:	
Date drilling completed: (601)961-5210 (601)354-6938 (fax)	E-log #:	
(601)56 (-111)		
State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.		
Well Owner Information	Well Location	
Owner Name Mound Bayon Latitude: 33.52	49 " Longitude: 90 • 44 · 12 "	
Mailing Address: Boy 1080 Method of Lat/Long (cir	cle one): Conventional Survey,	
	I-held GPS, Survey-grade GPS	
Mound Boyou, MS 38762 SE 14 SW 14 Sec City State Zip Code	32 Twn 24N Rng 15W	
	ion Nearest Town Of Moure Bayou	
Telephone No. (	of Mound Bayou	
Well Data		
Purpose of Well (circle one) Home Industrial Public Supply Irrigation Fish Culture Other: Test well		
Date well drilling started: June 2005 Date well drilling completed: July 2005		
If flowing, method of flow regulation: Valve Other (describe)		
Static Water Level: 42 feet above or below (circle one) land surface Date measured: 7/14/2005		
Method of Measurement (circle one) steel tape electric tape air line other:		
Hole depth: 800 ft Well depth: 765 ft Well grouted to a depth offeet		
Type of grout (circle one): Cement Bentonite Mix		
Casing length: 725 feet Casing diameter: 4 inches Type of casing: 5+co		
Screen length: 40 feet Screen diameter: 4 inches Type of screen: 55 Pist was		
Screen slot size: 20 inches Setting depth: From 725 feet to 765 feet		
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 back of page		
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:		
Name of organization running log(s):		

Department of Environmental Quality and/or the Mississippi Department of Health regulations and

Print Name of Water Well Contractor and License No.

**RECEIVED** 

Signature of Water Well Contractor

AUG 0 3 2005

BY: OLWR

Ground Level

20 80 180
180
44
440
500
600
640
770
770
780
800
$\top$
1 1
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If more than one screen, show location of each on sketch

ketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that m	ay
aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the w	ell;
4) indicate direction.	

Landowner Name: City of Mound BAyou

Signature of Water Well Contractor

**RECEIVED** 

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BY: OLWR