county: Bolivar	STATE WELL REPORT Part 1	For Office Use Only:
Permit #: GW-48090	Driller's Log	Well #: <u>EZ11</u>
Driller: Willie Bryant	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Date drilling completed: $5 - 3 - 14$	P.O. Box 2309 Jackson, MS 39225-2309	E-Log #:
L	(601)961-5210	

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(601)360-0535 (fax)

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.

Well Owner Information	Well or Borehole Location
(Landowner if borehole is not for a water well)	Latitude: 33 54 30.72" Longitude: 90 42 35.11" W
Owner Name: Dary/ Grant	
Mailing Address: 1.0. BOX 243	Method of Lat/Long (check one): Conventional Survey,
	USGS quad, Hand-held GPS Survey-grade GPS
Shelly MS 38774 City State Zip Code	$\frac{5}{5} \frac{5}{14} \frac{5}{5} \frac{5}{14} \frac{5}{14} \frac{5}{14} \frac{22^{27}}{5} \frac{7}{24} \frac{24}{N} \frac{1}{R} \frac{5}{5} \frac{5}{14} $
Telephone No. (442) 515 - 3577	(Distance) (Direction) (Nearest Town)
Well / B	orehole Data
Date drilling started: $5 - 3 - 14$ Date drilling completed:	5-3-14 Hole depth: 120 Hole diameter: 12 32
Location of the source of any surface water used for drilli	ng: <u>Nearby ditch</u>
Method of dosing and volume of Chlorine used in drilling a	nd development: 0
Logs run (circle all applicable) No log run Electric Game	na Ray Density Sonic Neutron Other:
Name of organization running log(s):	
Purpose of borehole (circle one) Water Well Geotechni	ical/Geological Investigation Ground Source Heat Pump
Seismic Survey Other	(describe)
If drilling is not related to water well c	onstruction, skip the remainder of this block
Purpose of Well (circle all applicable): Home Industrial	Public Supply Irrigation Fish Culture
Other (describe):	
If a flowing well, method of flow regulation: Valve	
Static Water Level: <u>43</u> feet [above or below (circle one)	Wand surface Date measured: $5 - 6 - 14$
	tape Air line Other (describe): Son & Water level meter
	feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: <u><u>90</u>feet Casing diameter:</u>	
Screen length: <u>40</u> feet Screen diameter: _	
Screen slot size: , 0.32inches Setting depth	: From <u>80</u> feet to <u>120</u> feet
Type of completion (circle all applicable): Gravel packed	Underreamed Open hole Natural Presignment
Other (describe):	8 Different Theory of the State of the St
Top of lap pipe or reduction in casing: $-0$ feet	
If telescoped or more than	one screen, describe on next page

Form: OLWR-SWR (A/(14)3)

County: <u>BOLIVAY</u> Permit #: <u>GW-48</u>	090		or Office Use	•
The sketch below only re If well telescopes, show d		Description of formations encountere and boreholes, unless specifically exe	d must be provide mpted by regulati	d for all ons
Ground Level	enns on skeich.	Description of Formations Encountered	From (depth)	To (de
		Clay	Ground level	53
		Med. Sa'nd	55	60
		coarse sand	60	100
		Kocks & grave/	100	12
			· · · · · · · · · · · · · · · · · · ·	
				-
If more than one screen, show	w location of each on sketch			
Sketch the property layout an	d include the following:	·		
<ol> <li>the well location</li> <li>any permanent structure</li> </ol>	iles on the property that may a	id in locating the well locating the property and the well		
I they let	All the	yell 3 A.		
Landowner Name: <u>FSQ 1</u>	Mound Bayou	miles south east of shelp		

I HEREBY 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.

Date

14

5-14-

Willie L. Bryant 0-639 Print Name of Responsible Licensee and License No.

wided for all wells ulations

Nilli L. Bugan Signature of Lipensee Form: OLW Form: OLWR-SWR-1A (4/13)

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<b>A</b>	STATE WE	ELL REPORT			
County: BOIIVER	7	Part 2	For Office Use Only:		
Permit #: <u>6W-48090</u> Driller: <u>Willie Brant</u>	Pump Installer's Completion Report Mississippi Department of Environmental Quality		Well #: <u>E-211</u>		
Driller: $\underline{-4/1/1 \times DryanT}$ Office of Land and Water Resources Date completed: $5 - 10 - 14$ P.O. Box 2309					
Copy information from block on Part 1	Jackson, MS 39225-2309 Adulter:				
		1)961-5210 360-0535 (fax)			
This part of the report must be completed of the report must be attached and both	ted by a licensed water w h narts filed with the De	vell contractor or a licensed pun nartment at the above address w	np installer. A copy of Part 1		
Well Owner Informa	tion	· Well L	pcation		
Owner Name: Dary/ Grant Latitude: 33 54 30.72 Longitude: 90 42 35.11					
Mailing Address: <u>P.O. Box</u>	1/1	÷	: Conventional Survey,		
	1	USGS quad, Hand-held GI	PS, Survey-grade GPS		
shelby ms	38774	SWAY Story, Sec.	227 24N RSW		
City / State	Zip Codé	5 Miles SE of			
Telephone No. (662) 5/5- 3	> 77	(Distance) (Direction)	(Nearøst Town)		
~	Pump Type	e (circle one)			
Submersible Turbine Air Lift Centr	ifugal Flowing Well	iet Piston Rotary Other (de:	scribe):		
Date Pump Installed: $5 - 10 - 10$					
Is This Pump (circle one): New R	epaired Replacement				
	Power Type	e (circle one)			
Electric Diesel Gasoline Natural Ga					
Horse Power Rating of Motor:	) Setting Depth	:	of Stages: <u>2</u>		
	Pump Test Data fo	or Non Flowing Well			
Date Well Tested:		Duration of Pump Test (minim	um 4 hours): hours		
Static Water Level (A): Fe	et Below Land Surface	Pumping Water Level (B): _	Feet Below Land Surface		
Drawdown [(B) - (A)]:	Feet Below Land Surfa	ce Test Pumping Rate:	Gallons Per Minute		
Method of measurement (circle one):	Steel tape Electric tap	e Air line Other (describe):			
		for Flowing Well			
Measured shut in head:fe	et.	-			
Well yielded GPM with a	a drawdown of	feet_after	hours of pumping		
Mc Come		stallation Meter Serial Number:	14-01327		
		Meter Serial NUMBER:			
Meter Manufacturer: <u>McCrom</u>	· · · ·				
Meter Model Number/Name: <u>M03</u>	06	Type of Meter:	Deller		
Meter Model Number/Name: <u>M03</u> Totalizer Register Unit and Multiplier	0 6 Factor (AF x .001, gal >	Type of Meter: <u>fr0</u> , ( 1000, etc):	Deller		
Meter Model Number/Name: <u>M03</u>	0 6 Factor (AF x .001, gal >	Type of Meter:	ser Willie Bryant		
Meter Model Number/Name: $\underline{M03}$ Totalizer Register Unit and Multiplier Installation Date: $\underline{5-10-14}$	0 6 Factor (AF x .001, gal >	Type of Meter: <u>fro</u> , (1000, etc): br/antwelldfump	ser Willie Bryant		
Meter Model Number/Name: $\underline{M030}$ Totalizer Register Unit and Multiplier Installation Date: $\underline{5-10-14}$ Is This Meter (circle one): New F Important: By submitting the above	0 6 Factor (AF x .001, gal x Meter installed by: Repaired Replacemen <i>information you are cer</i>	Type of Meter: <u>fro</u> (1000, etc): <u>from f Welld fump</u> nt tifying that this meter was insta	Deller Ser Willie Bryant Iled to manufacturer standards.		
Meter Model Number/Name: $\underline{M030}$ Totalizer Register Unit and Multiplier Installation Date: $\underline{5-10-14}$ Is This Meter (circle one): New F Important: By submitting the above	0 6 Factor (AF x .001, gal x Meter installed by: Repaired Replacemen <i>information you are cer</i>	Type of Meter: <u>fro</u> , (1000, etc): br/ant Welld fump nt	Deller Ser Willie Bryant Iled to manufacturer standards.		
Meter Model Number/Name: $\underline{M030}$ Totalizer Register Unit and Multiplier Installation Date: $\underline{5-10-14}$ Is This Meter (circle one): New F Important: By submitting the above	0 6 Factor (AF x .001, gal x Meter installed by: Repaired Replacemen <i>information you are cer</i> <i>tural wells, a list of app</i>	Type of Meter: <u>fro</u> (1000, etc): <u>from f Welld fump</u> at difying that this meter was insta roved meters is on the MDEQ w	Deller Ser Willie Bryant Iled to manufacturer standards.		
Meter Model Number/Name: <u>M03</u> Totalizer Register Unit and Multiplier Installation Date: <u>5-10-14</u> Is This Meter (circle one): New F Important: By submitting the above For agricul	0 6 Factor (AF x .001, gal x Meter installed by: Repaired Replacemen <i>information you are cer</i> <i>tural wells, a list of app</i>	Type of Meter: <u>fro</u> (1000, etc): <u>from f Welld fump</u> at difying that this meter was insta roved meters is on the MDEQ w	Deller Ser Willie Bryant Iled to manufacturer standards.		

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