State Well Report			
County: Balivaz	Part 1 - Driller's Log		For Office Use Only:
Permit#: GW-44 PG8	Mississippi Department of Environmental Quality Office of Land and Water Resources		Aquiller: 6 253
Driller Clarence Mc Mury	P.O.	Box 2307	Weil #:
Date drilling completed 3-28-11		n, MS 39225 961-5210	L. S. Elevation:
San Williag Stripholon	(601)96	1- 5228 (fax)	E-log #
State Law requires that this repor	t be prepured by the lic	ense holder responsible for s	he week and Old I delay
Department of the above address Information on Well C	within 30 days of com	pletion of drilling of the well	or borehole
(Landowner if borchule is not for		1	rehole Location
Owner Name PiskANell: B		I ntitude: <u>N33° 52 30,33</u>	" Longitude <u>1190 ° 50 - 43.64"</u>
Mailing Address: P.O. Box		Method of Lat/Long (circle on	e): Conventional Survey,
	······································		GPS, Survey-grade GPS
Clevel and M.	5 38732	SE NW	[Iwa 23/ Rng 603
I'clephone No. (62) 515-8340		SE NW Direction 5.2 Miles North	Nearest Town of PACE
	Well / Bara		
Date drilling storted: 3-25-(Date dri	lling completed: 3-28-1	Hole depth: 120	Hole diameter 26"
Location of the source of any surface water used for drilling: 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			
Purpose of borchole (check one): Water Well & Geolechnical/Geological Investigation Ground Source Heat Pump			
Seismic Survey Other (describe) If drilling is not related to water well construction, skip the remainder of this block			
Purpose of Well (check one): HomeIndustrialPublic Supply Irrigation/ Fish CultureOther:			
If a flowing well, method of flow regulation: Valve Other (describe)			
Static Water Level: 39 foet above or tellow circle one) land surface Date measured: 3-29-1/			
Method of Management (visit and			
Well depth: 118 Well grouted to a depth of 10 feet Type of grout (sinch and) N			
Casing length: UF feet Casing diameter: 16 unches Type of easing: CVC			
Screen length: 50 feet Screen diameter: 16 inches Type of screen: 700.			
Screen slot size: . 050 inches	Setting depth: From		1/ \$ feet
Type of completion (circle all applicable): Gravel packed Underreamed I clescoped Open hole Natural Development			
Other (describe)			
Top of hap pipe or reduction in casing	NA feet Michael	scoped or more than one screen	describe on next page

The sketch below only required 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 exempled by regulations

Description of Formations Encountered	From (depth)	To (depth)
Clay Frine Sand	Ground Level	18
Fine Sand		22
Madium Sand i pen 5 (well Madium Course sand & Dou	7.2	37
	3-7	
Man = Gravel		20
Mediumsand	20	_33
Medium Coarse Sand & pais roud	23	62
Medium and I peng tovel	62	62
Cocise Jone & penglavel	<u> </u>	/02
Medium Course Sand Epen	102	
Course Some & pensionel		1/3
French spengiavel	1/3	<u>// 7</u>
FINE ZCHAK	<u>/ ল</u>	120
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		<u> </u>
		

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

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow. West Mound Boyou

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

laylon Miller 0-703 3-31-11 Print Name of Responsible Licensee and License No.

To:601

360 0535

STATE WELL REPORT

Permit 4: GW-44868 Date completed. 3-29-11 Convincemental from block on Part 1

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:				
Aquifor:				
Well# _ 6253				
Elevation:				

This puri 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 Owner Information

Well Location

Owner Namo: 7:5 AAACII: Basthers did not be above address within 30 days of well completion.

Well Location

Latitude: N33*52'30.33" Langitude: W90*50'43.69"

Method of Lath ong (check onc): Conventional Survey

USGS and Hand-held GPS Survey-grade GPS

City State Lip Code

Direction Nearest Town

Telephone No. (662) 515-5340

5.7 Miles North of PACE

	Pump Ty Circle on			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).	sar Drive
Other (specify):			Horse Power Ratio		
Date Pump Installed	<u> </u>	<u>-//</u>	Setting Depth:	70	fcci
Rated Pump Capacit		Gallons Per Musute	Humber of Stages:		- 1881

Pump Test Data	Method of Measuring Water Level
Date Well Tested: NOT TESTED	Circle one
Static Water Level (A): 39 Peet Below I and Surface	An Line Electric Measuring Line Steel Tape
Pumping Water Level (B) - A Feet Below Land Surface	Other (specify):
Drawdown [(B) (A)] Peel Below Land Surface	For flowing well, measured shut in head:
Test Pumping Rate: N A Gallons Per Minute	Well yielded GPM with a drawdown of
Thuration of Pump Test (minimum 4 hours). A hours	feet wfter hours of pumping

LITT DEDIT COMPANY		
I HEREBY CERTIFY that the above statements are true to the best of	f my knowledge	1
Claylon Miller 0-703	10- 1-	200 OR
Print Name of Pump Installer and License No. (if applicable)	Clayton	
	Segnature of Puny	p Installer

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