	HESTER .	- Cusierano	
	- STATE	WELL REPORT	
2		Part 1	For Office Use Only:
County: BOLIVAR	D	riller's Log	Well #: <u>M 267</u>
Permit #: 64 - 47492	Mississippi Departr	ment of Environmental Quality	Aquifer:
Driller: J.NEWOME 0.773	Office of La	nd and Water Resources 2,0. Box 2309	E-Log #:
Date drilling completed: $7.0.13$	Jacks	on, MS 39225-2309	
		601)961-5210 1)360-0535 (fax)	
State Law requires that this report Department at the above address	t be prepared by the within 30 days of co	license holder responsible for t mpletion of drilling of the well	he work and filed with the or borehole.
Well Owner Informa	tion	Well or Bore	hole Location
(Landowner if borehole is not fo	or a water well)	Latitude: 33 4 3 36 Lon	ngitude: 090 39 98
Owner Name: Ross HESTER		Method of Lat/Long (check one	e): Conventional Survey,
Mailing Address: 616 Smith F	2040		•
		USGS quad, Hand-held G	rs, survey-grade Grs
CLEVELAND MS	38732	NENW NE 4, Sec	12V T ZZN ROSW
City State		4 Miles H.E.	of CLEVELAND
Telephone No. ()		(Distance) (Direction)	(Nearest Town)
Method of dosing and volume of Chlo Logs run (circle all applicable)	man Electric Gam		
	smic Survey Other	nical/Geological Investigation (describe)	Ground Source Heat Pump
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable)	smic Survey Other related to water well Home Industrial	nical/Geological Investigation (describe) construction, skip the remainded Public Supply	Ground Source Heat Pump
Purpose of borehole (circle one):-Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe):	smic Survey Other related to water well Home Industrial	nical/Geological Investigation (describe) construction, skip the remainded Public Supply	Ground Source Heat Pump er of this block Fish Culture
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg	Ser Well Geotechr smic Survey Other <i>related to water well</i> ): Home Industrial gulation: Valve	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Irrigation Other (describe)	Ground Source Heat Pump er of this block Fish Culture
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe):	smic Survey Geotechr smic Survey Other related to water well ): Home Industrial gulation: Valve eet [above or belo (circle one)	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Trigation Other (describe) w] land surface Date measure	Ground Source Heat Pump er of this block Fish Culture
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe):	smic Survey Geotechr smic Survey Other related to water well Home Industrial gulation: Valve eet [above or belo (circle one)	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Trigation Other (describe) w] land surface Date measure c tape Air line Other (describe)	Ground Source Heat Pump er of this block Fish Culture ed:
Purpose of borehole (circle one): Wate Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe):	Ser Well Geotechr smic Survey Other related to water well Home Industrial gulation: Valve eet [above or belo (circle one) Steel tape Electric o a depth of:	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Public Supply Other (describe) w] land surface Date measure c tape Air line Other (describe feet Type of grout (circle one	Ground Source Heat Pump  er of this block  Fish Culture  ed:
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg Static Water Level:fe Method of measurement (circle one)	Ser Well Geotechr smic Survey Other related to water well Home Industrial gulation: Valve eet [above or belo (circle one) Steel tape Electric o a depth of:	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Irrigation Other (describe) w] land surface Date measure tape Air line Other (describe feet Type of grout (circle one inches Type of	Ground Source Heat Pump er of this block Fish Culture ed: ed: p: p: Neat Cement Bentonite Mix f casing: J.C.
Purpose of borehole (circle one): Wate Seise If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg Static Water Level:fe Method of measurement (circle one) Well depth: Well grouted to Casing length:feet	er Well Geotechr smic Survey Other related to water well ): Home Industrial gulation: Valve eet [above or belo (circle one) ): Steel tape Electric o a depth of: Casing diameter:	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Public Supply Other (describe) w] land surface Date measure tape Air line Other (describe feet Type of grout (circle one inches Type of	Ground Source Heat Pump  er of this block  Fish Culture  ed:
Purpose of borehole (circle one): Wate Seise If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg Static Water Level:fe Method of measurement (circle one) Well depth: Well grouted to Casing length:feet Screen length:feet	Screen diameter:	nical/Geological Investigation (describe) construction, skip the remainded Public Supply Public Supply Other (describe) w] land surface Date measure tape Air line Other (describe feet Type of grout (circle one inches Type of	Ground Source Heat Pump
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg Static Water Level:fe Method of measurement (circle one) Well depth: Well grouted to Casing length:feet Screen length:feet Screen slot size:feet	Screen diameter:	nical/Geological Investigation (describe)	Ground Source Heat Pump
Purpose of borehole (circle one): Wat Seis If drilling is not r Purpose of Well (circle all applicable) Other (describe): If a flowing well, method of flow reg Static Water Level:fe Method of measurement (circle one) Well depth: Well grouted to Casing length: feet Screen length: feet Screen slot size: feet Type of completion (circle all applicable)	eer Well Geotechr smic Survey Other related to water well ): Home Industrial gulation: Valve eet [above or belo (circle one) ): Steel tape Electric o a depth of: Casing diameter: Screen diameter: screen diameter: fravel packed	nical/Geological Investigation (describe)	Ground Source Heat Pump
Purpose of borehole ( <i>circle one</i> ): Wat Seis <i>If drilling is not r</i> Purpose of Well ( <i>circle all applicable</i> ) Other ( <i>describe</i> ):	eer Well Geotechr smic Survey Other related to water well ): Home Industrial gulation: Valve eet [above or belo (circle one) ): Steel tape Electric o a depth of: Casing diameter: Screen diameter: screen diameter: fravel packed	hical/Geological Investigation (describe)	Ground Source Heat Pump

.

Form: OLWR-SWR-1A (4/13)

County:	Bolivar
Permit #:	GU 47442

If well telescopes, show depths on sketch.

Ground Level

	For	Office	Use	Only:
Well	#:	M21	07	

The sketch below only required for water wells

Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
TOP SOL	Ground level	10
CURT	10	40
FINE SAND/CUM MIX	40	60
FINE SAND	10	70
MEDILUM SAUD	70	85
COARSE 14ANS PERTUS	85	110
BOTTOM	110	112
		· · · ·
:		

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

Sketch the property layout and include the following:

1) the well location

UF

10" CASING

any permanent structures on the property that may aid in locating the well
 any roads, power lines, or other items that may aid in locating the property and the well



Landowner Name:

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.

JOHN NEWCOME Print Name of Responsible License	0,773 ee and License No.	7.10.13 Date	42	gnature of Licensee	
			1	Form: OLV	D. CW

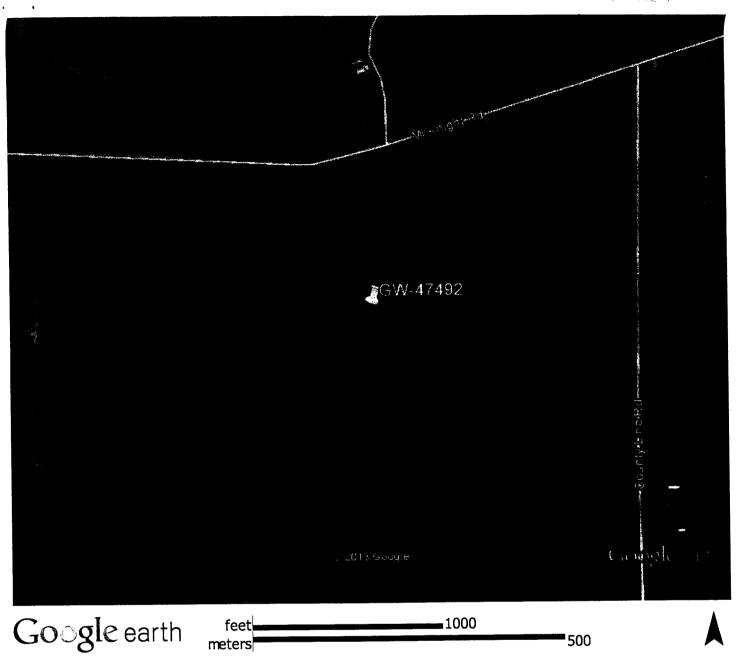
Form: OLWR-SWR-1A (4/13)

County:       But isoc       Part 2         Premp It a:       Curver isoc       Completent:       Image: State Completent of Environmental Quality         Date completent:       2-f0-2       Curver isoc       Part 2         Date completent:       2-f0-2       Part 2       Part 2         Date completent:       Mell Owner Information       Well Control Cont			STATE W	ELL REPORT	
Permt #: <u>6</u> ( <u>0</u> ) - <u>47452</u> Priller: <u>1</u> , <u>Wexcease</u> <u>0</u> -273         Date completed: <u>7-10-13</u> Nassissippi Department of Environmental Quality Office of Land and Water Resources Jackson, NS 39225-2309       Well #: <u>M.3.C.7.</u> Date completed: <u>7-10-13</u> Statissippi Department of Environmental Quality Office of Land and Water Resources Jackson, NS 39225-2309       Well #: <u>M.3.C.7.</u> This part of the report must be completed by all locased water well comparent of the above address within 30 days of vell completion. Well Owner Information       Well #: <u>M.3.C.7.</u> Owner Name: <u>Roscy Hocker</u> Latitude: <u>33</u> 4/C 36. [ongitude: <u>90</u> 39' 48''.         Mailing Address: <u>616 Sun Hokes</u> <u>87332</u> City       State <u>210</u> Code <u>1055 reprint</u> <u>1055 reprint</u> Viet Merror <u>500 feet</u> Qual	Γ	County: Boling			For Office Use Only:
Driller: J. Networkson Q. 777       Mississpip Department of Environments dealing       Mississpip Department of Water Networkson Query P.O. Box 2007         Date completed: J. 1(2-13)       Box 2007       P.O. Box 2007         Sort Information from block on Part I       Office of Land Water Resources       P.O. Box 2007         This part of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1       of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1       of well Owner Information         Well Owner Information       Well Owner Information       Well Owner State         (br coll and box parts filed with the Department at the above address with 30 days of well completed by a formation of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by a Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by Econsed vater well contractor or a licensed pump installer. A copy of Part 1         of the report must be completed by Econsed vater well contractor or a licensed pump installer.			Pump Installe	r's Completion Report	
Date completed:       2-10-13       P.O. Box 2309       Aquifer:         Gov information from block on Part I       Jackcon, MS 39225-2309       (601)961-5210         This part of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor or a licensed pump installer. A copy of Parl of the report must be completed by a licensed varie well contractor pump installer. A copy of Parl of the report of the		•	Mississippi Departn Office of Lar	nd and Water Resources	Well #:
Garvin in black on Part 1         Garvin in State Completed by a licensed warm well contractor or a licensed pump installer. A copy of Part 1         Garvin in State Completed by a licensed warm well contractor or a licensed pump installer. A copy of Part 1         Of the report must be completed by a licensed warm well contractor or a licensed pump installer. A copy of Part 1         Garvin in State Completed by a licensed warm well contractor or a licensed pump installer. A copy of Part 1         Of the report must be completed by a licensed warm well contractor or a licensed pump installer. A copy of Part 1         Maining Address:         Of the report must be completed by a licensed warm well contractor or a licensed pump installed cord         Maining Address:         Of the report must be completed by a licensed warm well contractor or a licensed pump installed Survey-grade GPS         Usereport mustof pump Test for Town Net (describe):			Р	.O. Box 2309	Aquifer:
(601) 360-0535 (fax)         This part 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 attended and both parts filed with the Department at the above address within 30 days of well completion.         Well Owner Information         Well Cock on a licensed water well contractor or a licensed pump installer. A copy of Part 1         Well Owner Information         Well Owner Information Owner Information Owner State View (GPS X, Survey-grade GPS (View (GPS X, Survey-grad					Aquiter:
of the report must be attached and both parts filed with the Department at the double address within the Depa	L			•	
Weil Owner Information       Weil Location         Owner Name: $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ Weil Location         Mailing Address: $[0][0]$ $S_m$ $[H]$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ Weil $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$ Mailing Address: $[0][0]$ $S_m$ $[H]$ $\mathbb{R}$ $\mathbb{R}$ Weil $\mathbb{R}$ <t< td=""><td></td><td>This part of the report must be complete of the report must be attached and both</td><td>ed by a licensed water parts filed with the L</td><td>well contractor or a licensed puper of the second puper to the sec</td><td>mp installer. A copy of Part 1 within 30 days of well completion.</td></t<>		This part of the report must be complete of the report must be attached and both	ed by a licensed water parts filed with the L	well contractor or a licensed puper of the second puper to the sec	mp installer. A copy of Part 1 within 30 days of well completion.
Mailing Address:       616 5m Ha Read         Mailing Address:       616 5m Ha Aread         City       State       712 5m Read         Telephone No. (	Γ	Well Owner Informati	ion	Well	Location
Mailing Address: $G = G$ $G = G$ Mailing Address: $G = G$ $G = G$ Mailing Address: $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G = G$ $G = G$ $G = G$ $G = G$ $G = G = G = G$ $G = G$ $G = G$ $G = G$ $G = G = G = G = G$ $G = G = G = G = G = G$ $G = G = G = G = G = G$ $G = G = G$ $G = G = G$ $G = G = G$		Owner Name: Ross Hoster	-	Latitude: 33 46 36 Lo	ongitude: <u>90 39 48"</u>
Uses quadHand-held GPS_X_survey-grade GPS		Mailing Address: 616 5m. H	Read	Method of Lat/Long (check on	e): Conventional Survey,
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $		-	•	USGS guad, Hand-held	GPS $X$ , Survey-grade GPS
City       State       Zip Code       Here       Miles       N.E.       of       (Ieucland         Telephone No. (		Clareland Ms	38732	NE NW NE 14. Sec	12 T 22N R 052
Pump Type (circle one)         Submersible       Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):         Date Pump Installed: $7-12-13$ Rated Pump Capacity: $1000$ Gallons Per Minute         Is This Pump (circle one):       Gew Repaired Replacement         Power Rating of Motor: $25\%$ Setting Depth: $200$ Horse Power Rating of Motor: $25\%$ Setting Depth: $200$ feet Number of Stages:		City State	Zip Code	4 Hiles N.F.	of (leveland
Submersible       Turbine       Air Lift       Centrifugal       Flowing Well       Jet       Piston       Rated       Pump Capacity:       1000       Gallons       Gallons       Per Minute         Is This Pump (circle one):       (ew)       Repaired       Replacement       Power Type (circle one)       Gallons       Per Minute         Electric       Diesel       Gasoline       Natural Gas       Tractor PTO       Windmill       Other (describe):		Telephone No. ()		(Distance) (Direction)	(Nearest Town)
Submersible       Turbine       Air Lift       Centrifugal       Flowing Well       Jet       Piston       Rated       Pump Capacity:       1000       Gallons       Gallons       Per Minute         Is This Pump (circle one):       (ew)       Repaired       Replacement       Power Type (circle one)       Gallons       Per Minute         Electric       Diesel       Gasoline       Natural Gas       Tractor PTO       Windmill       Other (describe):	ſ		Pump Ty	pe (circle one)	
Date Pump Installed:       7-12-13       Rated Pump Capacity:       1000       Gallons Per Minute         Is This Pump (circle one):       (New Repaired Replacement       Power Type (circle one)	ł	Submersible Turbine Air Lift Centri		•	describe):
Is This Pump (circle one):	٦				
Power Type (circle one)         Electric Diesel Gasoline Natural Gas Tractor PTO Windmill Other (describe):		· · · · · · · · · · · · · · · · · · ·			
Horse Power Rating of Motor:Setting Depth:feet Number of Stages:         Pump Test Data for Non Flowing Well         Date Well Tested:			Power Ty	<b>/pe (c</b> ircle one)	
Pump Test Data for Non Flowing Well         Date Well Tested:	0	Electric Diesel Gasoline Natural Ga	s Tractor PTO Wi	ndmill Other ( <i>describe</i> ):	
Date Well Tested:	٦	Horse Power Rating of Motor:	Setting Dep	th: <u>7</u> Dfeet Numb	er of Stages:
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:Gallons Per Minute Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): Pump Test/Data for Flowing Well Measured shut in head:feet. $M_O + 4CS + eA$ Well yieldedGPM with a drawdown offeet afterhours of pumping Meter Installation Meter Manufacturer: $McCrometer$ Meter Serial Number: $13-05099-08$ Meter Model Number/Name: $MO 308$ Type of Meter: $pcpeller$ Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):GAT 1000 Installation Date: $7-13-13$ Meter installed by: $Chicot Trcing ation Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.$			Pump Test Data	for Non Flowing Well	
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:Gallons Per Minute Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): Pump Test, Data for Flowing Well Measured shut in head:feet. $M_O + LS + E + LS + LS$		Date Well Tested: M		puration of Pump Test (min	imum 4 hours): hours
Drawdown [(B) - (A)]:Feet Below Land Surface Test Pumping Rate:Gallons Per Minute Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): Pump Test,Data for Flowing Well Measured shut in head:feet. // $J + l \leq l \in d$ Well yieldedGPM with a drawdown offeet afterhours of pumping Meter Installation Meter Manufacturer: $McCrometer$ Meter Serial Number: $J_2-05099-08$ Meter Model Number/Name: $M0308$ Type of Meter: $pcopeller$ Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):galf 1000 Installation Date: $7-13 \cdot 13$ Meter installed by: $Chicod Trcigation$ Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.		Static Water Level (A)	et Below Land Surface	$e^{\mathcal{A}}$ Pumping Water Level (B):	Feet Below Land Surface
Pump Test Data for Flowing Well         Measured shut in head:      feet.      feet afterhours of pumping         Well yielded      GPM with a drawdown offeet afterhours of pumping         Meter Manufacturer:       Mc(comet-orMeter Installation         Meter Manufacturer:       Mc(comet-orMeter Serial Number:       13-05099-08         Meter Model Number/Name:       M0308       Type of Meter:       10000         Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):       gal x 1000       10000         Installation Date:       7-13.13       Meter installed by:       Chicod       Totalizer for a for a for a for a for a gricultural wells, a list of approved meters is on the MDEQ website.		Drawdown [(B) - (A)]:	Feet Below Land Su	rface Test Pumping Rate: _	Gallons Per Minute
Pump Test Data for Flowing Well         Measured shut in head:      feet.      feet afterhours of pumping         Well yielded      GPM with a drawdown offeet afterhours of pumping         Meter Manufacturer:       Mc(cometer /Meter Installation         Meter Manufacturer:       Mc(cometer /Meter Serial Number:       13-05099-08         Meter Model Number/Name:       MO308       Type of Meter:       10000         Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):       gal x 1000       10000         Installation Date:       7-13.13       Meter installed by:       Chicod       Totalizer for a first of a first		Method of measurement (circle one):	Steel tape Electric	tape Air line Other (describe	):
Well yieldedGPM with a drawdown offeet afterhours of pumping         Meter Installation         Meter Manufacturer: McCrometer         Meter Installation         Meter Manufacturer: McCrometer         Meter Model Number/Name: M0308         Type of Meter: propeller         Meter Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):galf 1000         Installation Date:7-13         Meter installed by:					
Meter Installation         Meter Installation         Meter Manufacturer: <u>McCrometer</u> Meter Manufacturer: <u>McCrometer</u> Meter Model Number/Name: <u>MO308</u> Type of Meter: <u>propeller</u> Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): <u>gal x 1000</u> Installation Date: <u>7-13.13</u> Meter installed by: <u>Chicot Troig trog</u> Is This Meter (circle one):       New Repaired Replacement       Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.		Measured shut in head:fee	t. / Uof	fested	
Meter Manufacturer:       McCrometer       Meter Serial Number:       3-05099-03         Meter Model Number/Name:       M0308       Type of Meter:       \$10000         Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):       gal x 1000       1000         Installation Date:       7-13.13       Meter installed by:       Chicot Triggtion         Is This Meter (circle one):       New Repaired Replacement         Important:       By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.		Well yieldedGPM with a	drawdown of	feet_after	hours of pumping
Meter Model Number/Name:       MO308       Type of Meter:       propeller         Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):       gal x 1000         Installation Date:       7-13.13       Meter installed by:       Chicol Troig strong         Is This Meter (circle one):       New Repaired Replacement         Important:       By submitting the above information you are certifying that this meter was installed to manufacturer standards.			Meter	Installation	
Meter Model Number/Name:       MO308       Type of Meter:       propeller         Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):       gal x 1000         Installation Date:       7-13.13       Meter installed by:       Chicol Troig strong         Is This Meter (circle one):       New Repaired Replacement         Important:       By submitting the above information you are certifying that this meter was installed to manufacturer standards.		Meter Manufacturer: McCrome	Ler	Meter Serial Number:	15-05049-08
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc): <u>gal x 1000</u> Installation Date: <u>7-13.13</u> Meter installed by: <u>Chicot Trong stron</u> Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.				Type of Meter:ρ (	opeller
Installation Date: <u>7-13.13</u> Meter installed by: <u>Chicol Trigsting</u> Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.		Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):			
Is This Meter (circle one): New Repaired Replacement Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.					
For agricultural wells, a list of approved meters is on the MDEQ websue.		ス	Repaired Replacer	nent	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.		Important: By submitting the above For agricul	information you are tural wells, a list of a	certifying that this meter was in proved meters is on the MDE	stalled to manufacturer standards. ) website.
		I HEREBY CERTIFY that the above stat	tements are true to	the best of my knowledge.	
IN IN AND SUID BID ID ALLING		11 11 1/1 1 -	7110	Biz is n/ 1	LILL
Print Name of Pump Installer and License No. ( <i>if applicable</i> ) Date Signature of Pump Installer			14114	$\wedge \gamma \wedge \gamma$	

,

Form: OLWR-SWR-2A (4/13)

N1267



٦,