

Part 2 never received 3/13

County: Bolivar  
 Permit #: GW-43653  
 Driller: Clarence McMurry  
 Date drilling completed: 10-17-11

**State Well Report**  
**Part 1 - Driller's Log**

Mississippi Department of Environmental Quality  
 Office of Land and Water Resources  
 P.O. Box 2307  
 Jackson, MS 39225  
 (601)961 5210  
 (601)961- 5228 (fax)

**For Office Use Only:**  
 Aquifer: \_\_\_\_\_  
 Well #: 152  
 L. S. Elevation: \_\_\_\_\_  
 E-log #: \_\_\_\_\_

*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.*

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>Larry Davis Farms</u>	Latitude: <u>N 33° 38' 43.20"</u> Longitude: <u>W 90° 53' 05.11"</u>
Mailing Address: <u>1320 Litton Rd</u>	Method of Lat/Long (circle one): <u>Conventional Survey</u>
<u>Shaw MS 38773</u>	USGS quad, <u>Hand-held GPS</u> Survey-grade GPS
City State Zip Code	<u>NE 1/4 NE 1/4 Sec 26 Twa 21N Rng 7W</u>
Telephone No. <u>(662) 754-5134</u>	Distance Direction Nearest Town
	<u>? Miles EAST of Bend: T</u>
	<u>Well #3</u>
Well / Borehole Data	
Date drilling started: <u>10-17-11</u> Date drilling completed: <u>10-17-11</u> Hole depth: <u>125'</u> Hole diameter: <u>26"</u>	
Location of the source of any surface water used for drilling: <u>hailed water from ditch near by</u>	
Method of dosing and volume of Chlorine used in drilling and development: _____	
Logs run (circle all applicable): <u>No log run</u> Electric Gamma Ray Density Sonic Neutron Other: _____	
Name of organization running log(s): _____	
Purpose of borehole (check one): Water Well <input checked="" type="checkbox"/> Geotechnical/Geological Investigation _____ Ground Source Heat Pump _____	
Seismic Survey _____ Other (describe) _____	
<i>If drilling is not related to water well construction, skip the remainder of this block</i>	
Purpose of Well (check one): Home _____ Industrial _____ Public Supply _____ Irrigation _____ Fish Culture _____ Other: _____	
If a flowing well, method of flow regulation: Valve _____ Other (describe) <u>N/A</u>	
Static Water Level: _____ feet above or <u>below</u> (circle one) land surface Date measured: _____	
Method of Measurement (circle one) steel tape <u>electric tape</u> air line other: _____	
Well depth: <u>125'</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one): Neat Cement Bentonite Mix	
Casing length: <u>75</u> feet Casing diameter: <u>16</u> inches Type of casing: <u>PVC</u>	
Screen length: <u>30</u> feet Screen diameter: <u>16</u> inches Type of screen: <u>PVC</u>	
Screen slot size: <u>0.50</u> inches Setting depth: From <u>75'</u> feet to <u>125'</u> feet	
Type of completion (circle all applicable): <u>Gravel packed</u> Underreamed Telescoped Open hole Natural Development	
Other (describe): _____	
Top of lap pipe or reduction in casing: <u>N/A</u> feet <i>If telescoped or more than one screen, describe on next page</i>	

Well Only

