

STATE WELL REPORT

Part 1

Driller's Log

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309
Jackson, MS 39225-2309
(601)961-5210
(601)360-0535 (fax)

For Office Use Only:

Well #: FLA
Aquifer: _____
E-Log #: _____

County: CALHOUN
Permit #: _____
Driller: Ratliff Water Well
Date drilling completed: 7-31-14

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 <small>(Landowner if borehole is not for a water well)</small>	Well or Borehole Location
Owner Name: <u>John Covington</u>	Latitude: <u>N 33° 57' 23.0"</u> Longitude: <u>W 089° 29' 33.1"</u>
Mailing Address: <u>3609 Lyles Dr.</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>Oxford</u> City <u>Ms.</u> State <u>38655</u> Zip Code	<u>SE 1/4 SE 1/4, Sec 7 T 24 N R 8E</u>
Telephone No. (____) _____	<u>6</u> Miles <u>W</u> of <u>DAUCE MS.</u> (Distance) (Direction) (Nearest Town)

Well / Borehole Data
Date drilling started: <u>7-30-14</u> Date drilling completed: <u>7-31-14</u> Hole depth: <u>360</u> Hole diameter: <u>4 1/2</u>
Location of the source of any surface water used for drilling: <u>Pond</u>
Method of dosing and volume of Chlorine used in drilling and development: <u>HTH 50ppm</u>
Logs run (circle all applicable): <input checked="" type="checkbox"/> No log run <input type="checkbox"/> Electric <input type="checkbox"/> Gamma Ray <input type="checkbox"/> Density <input type="checkbox"/> Sonic <input type="checkbox"/> Neutron Other: _____
Name of organization running log(s): _____
Purpose of borehole (circle one): <input checked="" type="checkbox"/> Water Well <input type="checkbox"/> Geotechnical/Geological Investigation <input type="checkbox"/> Ground Source Heat Pump <input type="checkbox"/> Seismic Survey Other (describe) <u>TEST HOLE FOR WATER WELL - DRY HOLE</u>
<i>If drilling is not related to water well construction, skip the remainder of this block</i>

Purpose of Well (circle all applicable): Home Industrial Public Supply <input checked="" type="checkbox"/> Irrigation Fish Culture
Other (describe): <u>NO WELL MADE "DRY HOLE" TEST HOLE</u>
If a flowing well, method of flow regulation: Valve _____ Other (describe) _____
Static Water Level: _____ feet [above or below] land surface Date measured: _____ <small>(circle one)</small>
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): _____
Well depth: _____ Well grouted to a depth of: _____ feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: _____ feet Casing diameter: _____ inches Type of casing: _____
Screen length: _____ feet Screen diameter: _____ inches Type of screen: _____
Screen slot size: _____ inches Setting depth: From _____ feet to _____ feet
Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development
Other (describe): _____
Top of lap pipe or reduction in casing: _____ feet

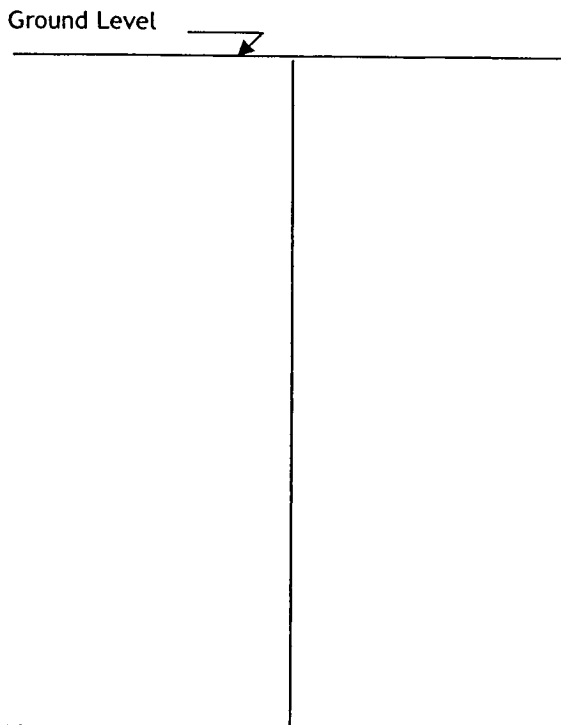
If telescoped or more than one screen, describe on next page

County: CAIHOUN
 Permit #: _____

For Office Use Only:
 Well #: F1A

The sketch below only required for water wells

If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth) Ground level	To (depth)
<u>CLAY</u>		<u>20</u>
<u>SANDY CLAY</u>	<u>20</u>	<u>60</u>
<u>CLAY</u>	<u>60</u>	<u>80</u>
<u>SOFT CLAY w/ lignite</u>	<u>80</u>	<u>130</u>
<u>HARD CLAY</u>	<u>130</u>	<u>160</u>
<u>CLAY w/ HARD CLAY</u>	<u>160</u>	<u>360</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) north arrow

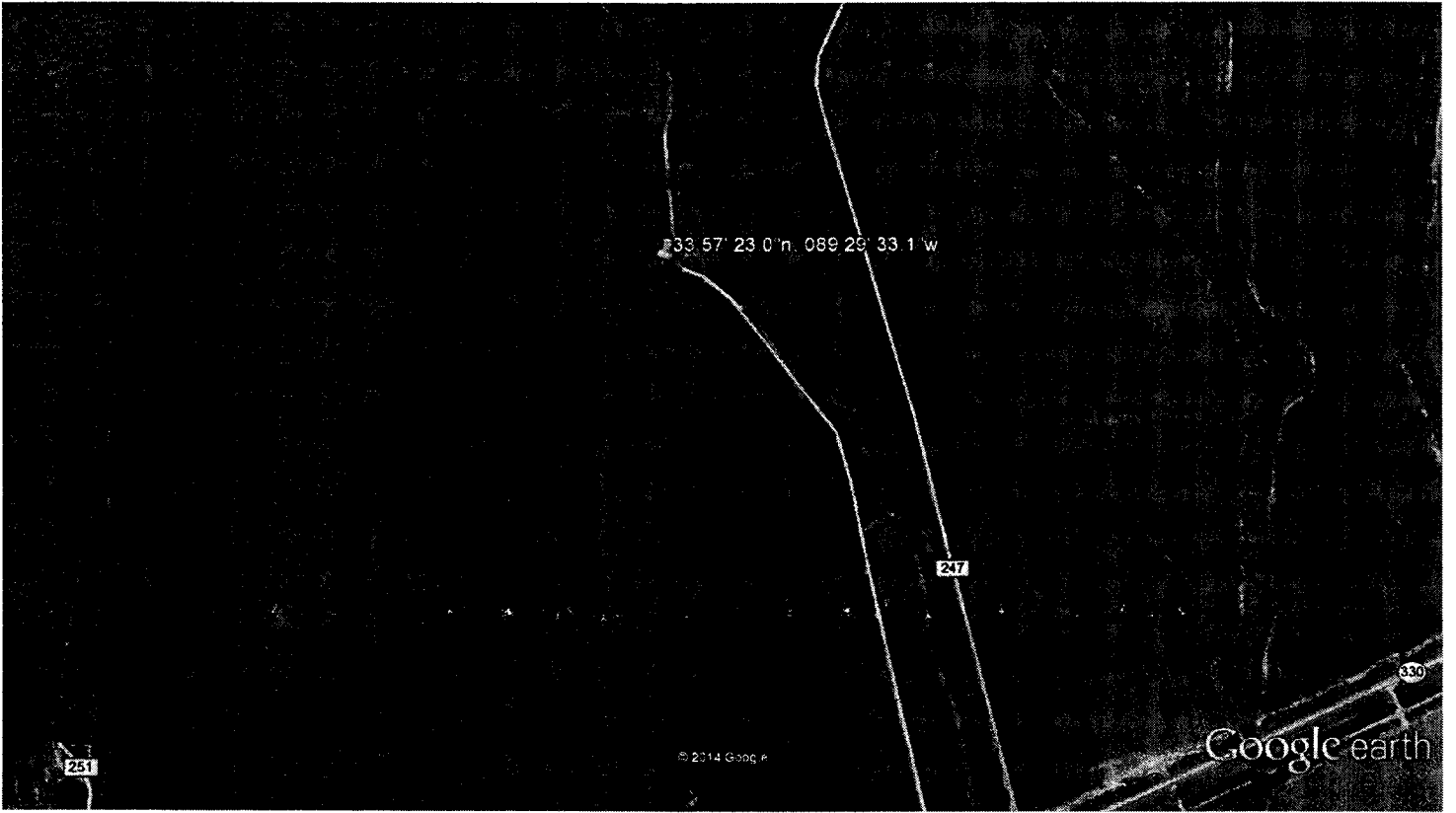
See MAP

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 DEPARTMENT OF
 ENVIRONMENTAL QUALITY

Landowner Name: John Gouington

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.

Robert E. Ruffill 0-002 8-8-14 Robert E. Ruffill
 Print Name of Responsible Licensee and License No. Date Signature of Licensee



Google earth



33° 57' 23.0\"/>
089° 29' 33.1\" W