

Does not need part 2

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 #: H 174
Aquifer: _____
E-Log #: _____

County: Clay County
Permit #: _____
Driller: _____
Date drilling completed: 12-10-13

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>Pete Patel</u>	Latitude: <u>33° 31' 14.77"</u> Longitude: <u>88° 39' 37.69"</u>
Mailing Address: <u>1025 Hwy 45 N. Alt</u>	Method of Lat/Long (check one): Conventional Survey _____, USGS quad _____, Hand-held GPS <input checked="" type="checkbox"/> , Survey-grade GPS _____
<u>West Point</u> <u>MS</u> <u>39773</u>	<u>NE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$, Sec <u>10</u> T <u>17S</u> R <u>6E</u>
City State Zip Code	_____ Miles _____ of _____ (Distance) (Direction) (Nearest Town)
Telephone No. (____) _____	

Well / Borehole Data

Date drilling started: 12-9-13 Date drilling completed: 12-9-13 Hole depth: 24' Hole diameter: 8"

Location of the source of any surface water used for drilling: NONE

Method of dosing and volume of Chlorine used in drilling and development: NONE

Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: _____

Name of organization running log(s): _____

Purpose of borehole (circle one): Water Well Geotechnical 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 (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture
Other (describe): GROUND WATER MONITORING

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: _____ feet [above or below] land surface Date measured: _____
(circle one)

Method of measurement (circle one): Steel tape Electric tape Air-line Other (describe): _____

Well depth: 24' Well grouted to a depth of: 17' feet Type of grout (circle one): Neat Cement Bentonite Mix

Casing length: 24 feet Casing diameter: _____ inches Type of casing: _____

Screen length: 5' feet Screen diameter: 2" inches Type of screen: PVC

Screen slot size: 10 inches Setting depth: From 24' feet to 19' feet

Type of completion (circle all applicable): Gravel packed Underreamed Open hole Natural Development

Other (describe): Surface pad w/ manhole

Top of lap pipe or reduction in casing: _____ feet

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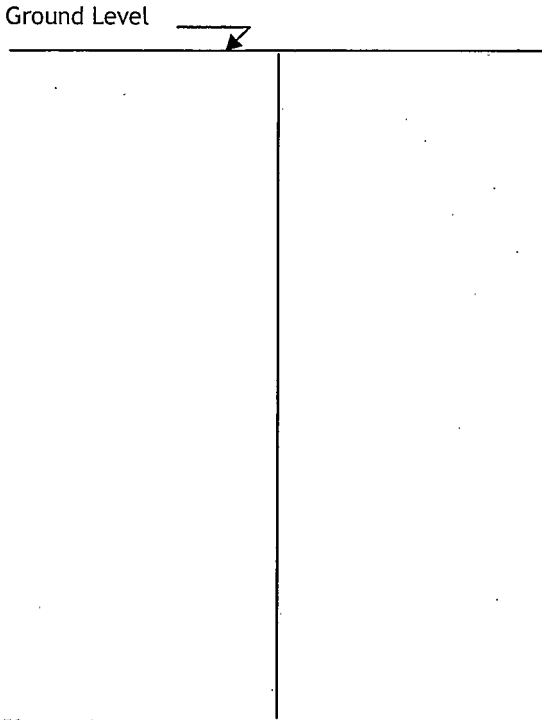
If telescoped or more than one screen, describe on next page

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

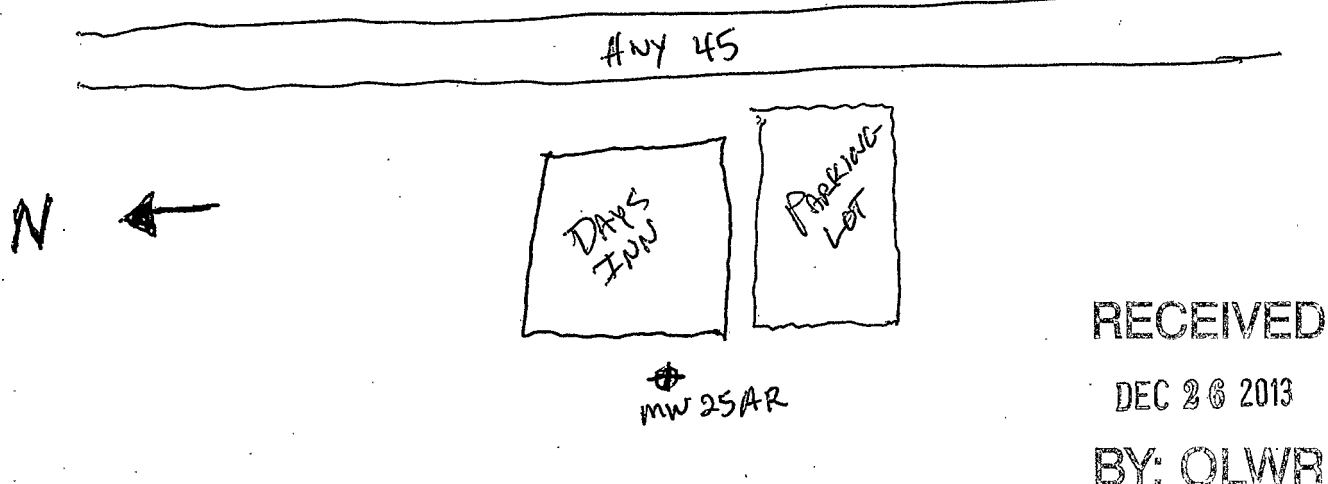


Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (depth)	To (depth)
GRAVEL Fill	Ground level	1'
SILTY TO FINE SANDY CLAY	1'	22'
Dense clay	22'	24'

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



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Landowner Name: PETE PATEL

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.

Joe Wilkinson UNR-00000592 12/17/13
Print Name of Responsible Licensee and License No. Date

Joe Wilkinson
Signature of Licensee