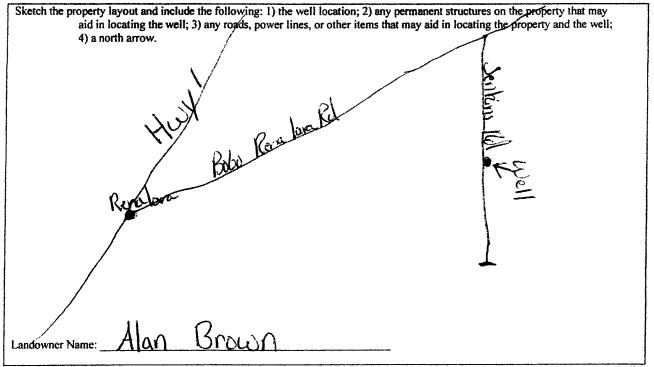
State W	ell Report	For Office Use Unly:			
	Driller's Log				
Mississippi Department	nt of Environmental Quality	Aquifer:			
	Box 2309	Well#: H115			
	n, MS 39225 961- 5210	L. S. Elevation:			
	1- 5228 (fax)	E-log #:			
State Law requires that this report he propaged by the lic	ense halder resnansihle for t				
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 (Landowner if borehole is not for a water well)	Well or Bo	rehole Location			
Owner Name Alan Brown		" Longitude: <u>90 ° 44 '</u> "			
Mailing Address: 104 Hickory	Method of Lat/Long (circle on	e): Conventional Survey,			
Street	USGS quad, Hand-held	GPS, Survey-grade GPS			
Brandon Ms 39042	<u>5E%SE%Sec_OS</u>	Twn <u>Ale N Kng OS W</u>			
City State Zip Code	Distance Direction Miles NE	Nearest Town			
Telephone No. ()					
Well / Bore					
Date drilling started: 3-10-13 Date drilling completed: 3-10.	3 Hole depth: 110	Hole diameter: 21 in			
	Location of the source of any surface water used for drilling: <u>Near est</u> <u>Well</u> 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 borehole (check one): Water Well Geotechnical/Geole	ogical Investigation Ground	Source Heat Pump			
Seismic SurveyOther (describe)					
Purpose of Well (check one): Home Industrial Public Supply					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level: feet above or below circle one) land surface Date measured: 3-11-13					
Method of Measurement (circle one) steel tape electric tape air line other:					
Well depth: 110 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 70 feet Casing diameter: 12 inches Type of casing: <u>NUC</u>					
Screen length: <u>40</u> feet Screen diameter: <u>12</u> inches Type of screen: <u>0VC</u>					
Screen slot size: 150 inches Setting depth: Fromfeet tofeet					
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development					
Other (describe):					
Top of lap pipe or reduction in casing:feet. If tel.	escoped or more than one scree	n, describe on next page Form: OLWR			
		MAR 2 5 2013			
		L BY: ULVVH			

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4115

The sketch below only required for water wells	Description of formations encountered wells and boreholes, unless specifical	d must he provided v exempted by reg	l for all ulations	
If well telescopes, show depths on sketch. Ground Level	Description of Formations Encountered From (depth) To (depth)			
	Top, soil	Ground Level	20	
10	sand	- 20	40	
	course sind	40	60	
	course sand	60	50	
30	Surve + gravel	80	100	
	Sand + grand	100	110	
90				
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If more than one screen, show location of each on sketch



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 laws.

Joel Jumper

Signature of Licensee MAR 25 2013

Print Name of Responsible Licensee and License No.

Date

BY: OLWH

STATE WELL REPORT					
County: <u>Coshoma</u> Permit #: <u>GW-47018</u> Driller: <u>bel</u> Jumper Date completed: <u>3-11-13</u> <u>Copy information from block on Part 1</u>	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: Aquifer:		
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 attached and both parts filed with the Department at the above address within 30 days of well completion.					
Well Owner Informatio Owner Name: <u>Alan Bro</u> Mailing Address: <u>104</u> <u>Hicko</u> <u>Street</u> <u>Brundon Ms</u> City State	Alan Brown s: 104 Hickory Street Brundon Ms 39042 City State Zip Code Latitude: 34-08-5(a Method of Lat/Long (check on USGS quad_, Hand-held SE 4 SE 4 Sec 05 Distance Direction		GPS, Survey-grade GPS		
Pump Type Circle one Air Lift Jet (S	Submersible		er Type cle one Engine Natural Gas		
3	urbine	Electric Motor Hand	Tractor PTO		
Other (specify): Date Pump Installed: 1000	Flowing Well allons Per Minute	Windmill Other (s Horse Power Rating of Motor:	70feet		
Pump Test Data Date Well Tested: 3-1-13 Static Water Level (A): A Feet Below Land Surface Pumping Water Level (B): 3 (c) Feet Below Land Surface Drawdown [(B) - (A)]: Feet Below Land Surface Test Pumping Rate: 1000 Gallons Per Minute Duration of Pump Test (minimum 4 hours): 5		Method of Measuring Water Level Circle one Air Line Electric Measuring Line Steel Tape Other (specify):			
I HEREBY CERTIFY that the above statements are true to the best of my knowledge. JOC Jumper 5317 Print Name of Pump Installer and License No. (if applicable) Form: OLWFWSWR215 (2008)					

