State Well Report

Part 1

For Office Use Only:

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a anoma	Mississippi Department	of Environmental Quality	· · · · · · · · · · · · · · · · · · ·	
160-42459	CYFFICE OF LARUEU	O MATOR MADE	Well#:	
THE THE THE	k P.O. Bo	x 10631	} • !	
Kelle Undling of an	Jackson, MS	39289-0631	L. S. Elevation:	
ם ל עונו	(601)9	61-5210		
te drilling completed: 4-16-8 b	(601)354	-6938 (fax)	E-log V:	
•			1.1.1.1.	
		driller in detail and filed t	vitiTiho Department within	
State Law requires that this rep	ort be prepared by the	Own		
All UBAS Of COMPletion as at mine	5 77	We	li Location	
Well Owner Inform	ation	Λ,	12 - COR 34 - GAB	
0.1 1 1		Latitude: 134 07.92	10 Longitude: 090 37 934	
owner Name Richard met	V-25-V		D C S	
0 0 1	1580	Method of LavLong (circle	one): Lionvendonia Screey.	
falling Address: V. 0 , P. A.			L CDS Surpey-prode CPS	
		USGS quad, Hand-held GPS, Survey-grade GPS		
	>01751	1 14 . CF a 1	Twn 27 N Rng 4 W	
The same	ns 38676	MM NOC N 200 T	de la Mai	
- Line	tate Zip Code	Diamerica.	of Charles and	
LIV	-	Distance Direction	of Clarked ers ms	
relephone No. (bbd) 645-5	2260	-James - Strat		
1 Globitotto 140. (
	Well	ប្រជា		
		Luinate Fish Culture	Other:	
Purpose of Well (circle one) Home	Industrial Public Supply		4-11-04	
也)	1 - 0 & Date	well drilling completed:	7-16 40	
Purpose of Well (circle one) Home Date well drilling started:	by " O Date	was same of the same		
If flowing, method of flow regulation: Static Water Level:	Valve	(U-17-158	
~ tl	show of helphy (circle one	land surface Date measure	d:	
Static Water Level: D.Tfee	TOUNE OF DESIGNA (TOTAL)			
	(electric las	E IIII IIIIC GALLANI,		
Method of Measurement (errere one)	- h		of D feet	
Method of Measurement (circle one) Hole depth: 120 Wei	depth:	Mell Exonica to a active	UI	
Hole debin:				
Type of grout (circle one): Cement	Bentonite Mi	X	0110	
	14	inches Type of casin	B: PVC	
Casing length: \$0 feet	Casing diameter: 16		P# C	
	i	inches Type of scree	n: PUC	
Screen length: 40 feet	Screen diameter.	•	150 6-	
A78	Certing denth: From	n XO feel to _	130 feet	
Screen slot size:inc	UCE SCHOOL TANK	•	Nomeni Trevelonment	
Type of completion (circle all applica	hier (Gravel nacked Un	derreamed Telescoped (Open note Manutin Development	
Type of completion (circle all applica	nioj.	,		
	Other (describs):			
Top of lap pipe or reduction in casing	•	then on	e screen, describe on back of page	
Too of the pipe or reduction in casing	i:feet.]	L telescoped or more man on	411-12	
Tob or 1sh hibo at toppegan in constant	-	Dennity Sanie Nearr	un Gher: 1/5/1/A7	
Logs run (circle all applicable): No	log run Electric Gamma	Kily Denzity Some Meno		
TOES for formers are abbreviated	-			
Name of organization running log(s)		in a direction of the same	able requirements of the Mississippi	
Y cartify that the well was drilled,	constructed, and completed	TH SECONDENCE MICH STY SAME	cable requirements of the Mississippi ations and state laws.	
I certify that the well was drilled, of Department of Environmental Qua	otter and/or the Mississippi	Department of Health regula	HIOUS SING STREET AS.	
Department of Environmental Co.	empl grand or any second of the	(1		
1 0 1 1 1 1 1 1		10	elone 189	
I DIDN AIC	E 0674			
		Signa	nure of Weles Well Convector	
Print Name of Water Well Contract	or and License 140.			

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YMD JOINT WATER MANAGEMENT DISTRICT

State W	ell Report							
	art 1 For Office Use Only:							
Mississippi Departmen	t of Environmental Quality Aguifer.							
Ult Wille	nd Water Resources ox 10631 Well #: Vell #: J - 69							
Jackson, M	S 39289-0631 L. S. Elevation:							
	961-5210							
(601)354	4-6938 (fax) E-log #:							
State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.								
Well Owner Information	Well Location							
Owner Name Richard Welton	Latitude: N34° 07, 940 Longitude: 090 32 . 906							
Mailing Address: P. O. Bar 1580	Method of Lat/Long (circle one): Conventional Survey,							
	USGS quad, Hand-held GPS, Survey-grade GPS							
City State Zip Code	NW 45t 4 Sec 18 Twn 27 N Rng 4 W							
Telephone No. (66) 645-2262	Distance Direction Nearest Town 3 Miles 5 h; of Clarkadele ms							
Well D	ata							
Purpose of Well (circle one) Home Industrial Public Supply	Irrigation Fish Culture Other:							
Date well drilling started: 4-16-08 Date well drilling completed: 4-16-08								
If flowing, method of flow regulation: Valve Other (describe)								
Static Water Level: 34 feet above of below (circle one) land surface Date measured: 4-17-08								
Method of Measurement (circle one) steel tape electric tape air line other.								
Hole depth: 120 Well depth: 120 Well grouted to a depth of 10 feet								
Type of grout (circle one): Cement Bentonite Mix								
Casing length: 80 feet Casing diameter: 16 inches Type of casing: PVC								
Screen length: 40 feet Screen diameter: 16	inches Type of screen: PuC							
Screen slot size: , 033 inches Setting depth: From 80 feet to 130 feet								
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 telescoped or more than one screen, describe on back of page								
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other: 150A1								
Name of organization running log(s):								
I certify that the well was drilled, constructed, and completed in accordance with all applicable requirements of the Mississippi								
Department of Environmental Quality and/or the Mississippi Department of Health regulations and state laws.								
ALAN PYCE 0674 Slowers								
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor							

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BY: OLWR

11 well telescopes please sketch below and show depute

GW42459

Description of Pornations Encountered	From 10
Clan	0 50
Soul	50 65
The Sand	65 78
Course Sand	138 102
Grand D	192112
Long Kidle	118 120
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\$	
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	1
	1
7	+
4	1

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

Sketch the pr	operty layout and include the follo aid in locating the well; 3) any rog 4) indicate direction.	wing: 1) the well hads, power lines, or	ocation, 2) and recorder other items of	manent structures	on the property the property an	that may ad the well;
	-7) marcas enecios.		CEMERA	NA W.		
Λ	v		0			
			1	1		
IN	,			E E		
			PLANTATION			
a approximate	AA		1 - 12 AL WILLOW			
-	well					,
A training of the second of th						
Landowner N	and Ridge metter					

Signature of Water Well Contractor

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STATE WELL REPORT

Part 2 For Guille Use Only: Perup Installer's Completes Report Mississippi Department of Environmental Quality Aquifer: Office of Land and Water Benevis P.O. Box 1063) Inchron, MS 39289-0631 Well #: (601)961-5210 Date completed: Hiermon: (601)354-6938 (fax) This report should be prepared by the pump besteller in detail and filed with the Department within 30 days of the West Lossis Well Owner Information Longitude: 090 -39 940 Method of LastLong (circle one): Conventional Survey, Mailing Address: USGS quad, Hand-held GPS, Survey-grade GPS Two all Name 4 W City State Zip Code Direction Nemest Town 3 to ME SW larkedal Telephone No. (_ Power Type Puncy Type Circle one Circle one Namural Gas Air Life Submarible Gazoline Engine les. Tractor PTO Bucket Pistern Turbing Electric Motor Hend Centrifugal Flowing Well Windmill Other (specify): ROBERY Morse Power Rading of Motor: Other (specify):_ Date Pump Installed: Setting Depth: Rated Pattip Capacity: Callon Per Minus Number of Stages. Pump Test Date Method of Measuring Water Level Circle one Date Well Tested: Air Line Electric Measuring Line Steel Tape Feet Below Land Surface Static Water Level (A): Other (specify): Pumping Water Level (B): Feet Below Lend Sturface Drawdown ((B) - (A)): Feet Below Lend Surface For flewing well, measured that in head: Test Pumping Rate: Gallens Par Mileste Well yielded_ GPM with a drawdown of Duration of Pump Test (minimum 4 hours); feet after____ hours of pumping I HEREBY CERTIFY that the above smements makes to the best of my knowledge

Signature of Paspy Installer

Print Name of Pump Installer and License No. (if applicable)

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