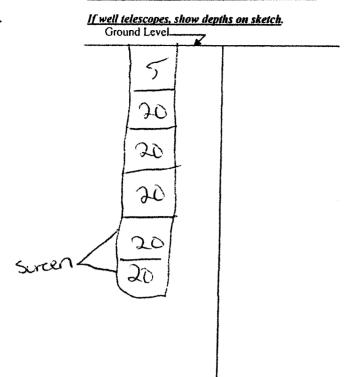
: GWA7267 replaces 13433			
Talled habit Complete			
County: Caborna Part 1 - J Mississippi Department	Vell Report Driller's Log Int of Environmental Quality	For Office Use Only Aquifer: 123	;
Driller: bel Jumper P.O. Jackson	nd Water Resources Box 2309 n, MS 39225	Well #:	
Date drilling completed: (601)96	961- 5210 1- 5228 (fax)	E-log #:	
State Law requires that this report be prepared by the lic Department at the above address within 30 days of comp	pletion of drilling of the well	or borehole.	1e
Information on Well Owner (Landowner if borehole is not for a water well)	Latitude: 34 . Q. , 20	" Longitude: 10 . 27	15-
Owner Name_Henny_Shefler	Method of Lat/Long (circle on		
Mailing Address: 520 Celston Kd	-	GPS, Survey-grade GPS	
Chackeyde the 35/1014	SW 14 5W 14 Sec 21		* 1 1
City State Zip Code	Distance Direction	of <u>ClarRShale</u>	
Telephone No. ()	holo Data		
Date drilling started: 2-4-17 Date drilling completed: 2-4-1	· · · ·	Hole diameter: 28, ~	
Location of the source of any surface water used for drilling:	earest Well		
Logs run (circle all applicable): No log run Electric Gamma Ray Name of organization running log(s):	Density Sonic Neutron (	Dther:	-
Purpose of borehole (check one): Water Well Geotechnical/Geolo	gical Investigation Ground	Source Heat Pump	
Seismic SurveyOther (describe) If drilling is not related to water well construction		<u>ck</u>	
Purpose of Well (check one): Home Industrial Public Supply	IrrigationFish Culture	Other:	
If a flowing well, method of flow regulation: Valve Ot	her (describe)		
Static Water Level: feet above or below (circle one) la	nd surface Date measured:	2-4-13	
Method of Measurement (circle one) (stee tape) electric tape	air line other:		
Well depth: 105 Well grouted to a depth of feet Type of			
Casing length: <u>65</u> feet Casing diameter: <u>161</u>	inches Type of casing:	puc	
Screen length: <u>40</u> feet Screen diameter: <u>11</u>	inches Type of screen:	pvc 105	
Screen slot size: 0,50 inches Setting depth: From	b 65 feet to	feet feet	
Type of completion (circle all applicable): Gravel packed Underre Other (describe):			t
Top of lap pipe or reduction in casing:feet. If teles	scoped or more than one screen		
		Form: OLWR-SWR-1A (	
			FEB 1 3 2013

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BY:	OL	W	
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The sketch below only required for water wells



Description	of formations	encountered	must be provided for a	ll
<u>wells and b</u>	<u>oreholes, unle</u>	ss specifically	<u>v exempted by regulatio</u>	ns

Description of Formations Encountered	From (depth)	To (depth)
Simo Gumbo	Ground Level	90
(cumb)	20	40
Sanch	40	Lev .
sand	w w	50
Course Sanc	50	100
gravel it sanch	/00	115
	<u> </u>	ļ
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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) a north arrow.

Shefler Henry Landowner Name:

Form: OLWR-SWR-1A (04/08)

10%

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.

laws. smper -1+

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

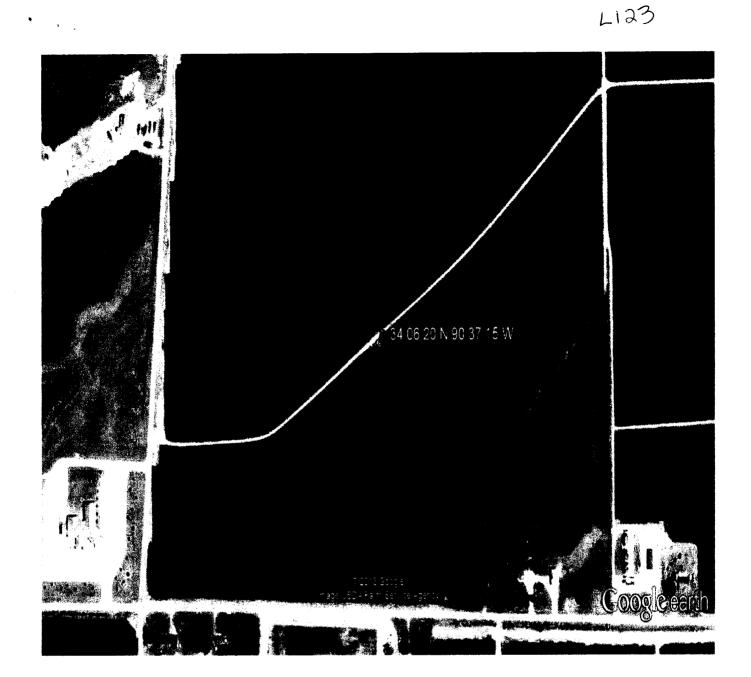
BY: OLWR

FEB 1 3 2013

		ELL REPORT	
County: Coahoma		Part 2	For Office Use Only:
Permit #: $(\mathcal{O}\mathcal{U}) - \mathcal{B}^{+}\mathcal{B}^{+}\mathcal{B}^{+}\mathcal{B}^{+}$	Pump Installer's Completion Report Mississippi Department of Environmental Quality		Aquifer:
Driller: Joel Jamper		1 and Water Resources ). Box 2309	
Date completed: 2-4-13	Jacks	on, MS 39225	Well #: 123
Copy information from block on Part 1		1)961-5210 961-5228 (fax)	Elevation:
This part of the report must be completed	]   hv a licensed water wel	ll contractor or a licensed pumi	installer. A copy of Part 1 of th
report must be attached and both parts fil	led with the Department	at the above address within 30	days of well completion. ell Location
Well Owner Informa			
Owner Name: Henry Sh	effer	Latitude: $24-0-20$	Longitude:37-15
Mailing Address: 570 62	Isten Ka	Method of Lat/Long (check	one): Conventional Survey,
			ld GPS, Survey-grade GPS
Charlesome M	5 38614	SW 1/ SW 1/ Sec 2	1 TZLENR DYLU
City State	Zip Code	Distance Direction	
~		LÍ Milos S	of Clayhidale
Telephone No. ()			
Pump Type		F	'ower Type
Circle one			Circle one
Air Lift Jet	Submersible	Diesel Engine Gaso	line Engine Natural Ga
Bucket Piston	Turbine	Electric Motor Hand	Tractor PTC
Centrifugal Rotary	Flowing Well	Windmill Othe	r (specify):
Other (specify):		Horse Power Rating of Mote	$r: \underline{(a) H.Y.}$
Date Pump Installed: 2-5-13		Setting Depth: 0 -	70 feet
Rated Pump Capacity: <u>3000</u>		Number of Stages: 51	mala
Rated Pump Capacity:	_Gallons Per Minute	Number of Stages:	ngre
Pump Test Data	<u> </u>		leasuring Water Level
Date Well Tested:			Circle one
	Below Land Surface	Air Line Electric M	easuring Line (Steel Tape)
		Other (specify):	
Pumping Water Level (B): <u>(</u> Feet			
Drawdown [(B) – (A)]: $20$ Feet	Below Land Surface	-	shut in head:fee
Test Pumping Rate: 3000	Gallons Per Minute	Well yielded 3000	GPM with a drawdown of
Duration of Pump Test (minimum 4 hours)	:6hours	feet after	8 hours of pumping
		·	
	nents are true to the best	of my knowledge	RE

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BY: OLWR



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