State	Well Report	For Office Use Only:	
County: Coving fon Part 1 -	Part 1 – Driller's Log		
iviississippi Departii	nent of Environmental Quality	Aquifer:	
Office of Lan	d and Water Resources D. Box 10631	Well #: H- 24	
Jackson	, MS 39289-0631	L. S. Elevation: 345' 7090	
	(601)961-5210		
(601)	354-6938 (fax)	E-log #:	
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 co.	mpletion of drilling of the well	or borehole.	
Information on Well Owner Well or Bo		rehole Location	
(Landowner if borehole is not for a water well)	Latitude: 31 . 41 , 22.5	5" Longitude: <u>89° 25 ' 15"</u>	
Owner Name Denuil Fraley Mailing Address: 1407 Monroe Rd			
Mailing Address: 1407 Montoe Rd	Method of Lat/Long (circle or	e): Conventional Survey,	
	1"	GPS, Survey-grade GPS	
Collins MS 39428 City State Zip Code	<u>SE 1/4 NE 1/4 Sec 5</u>	Twn 8N Rng 14W	
City State Zip Code Distance Direction Telephone No. (600 7/67-88)/ Telephone No. (600 7/67-88)/		Nearest Town	
Telephone No. (60) 765-8811	_/8_Miles _ E	of <u>(s/lins</u>	
Well / Bo	rehole Data		
Date drilling started: 4/6/09 Date drilling completed: 4/15		Hole diameter: 5"	
Location of the source of any surface water weed for 1 111 7	() () ()	0064	
Location of the source of any surface water used for drilling: <u>Jat</u> Method of dosing and volume of Chlorine used in drilling and dev	relopment: Longht (Con.)	e Bleach 1000 cal 1122	
Logs run (circle all applicable): No log run Electric Gamma Ra	v Density Sonic Neutron (Other:	
Name of organization running log(s):	Trough State of State	other.	
Purpose of borehole (check one): Water Well Geotechnical/Geo	ological Investigation Ground	Source Heat Pump	
Seismic Survey Other (describ	be)		
If drilling is not related to water well construction	on, skip the remainder of this blo	ck	
Purpose of Well (check one): Home Industrial Public Supp	ly Irrigation Fish Culture _	Other:	
If a flowing well, method of flow regulation: Valve	Other (describe)		
Static Water Level:feet above or below (circle one)	land surface Date measured:	1	
Method of Measurement (circle one) steel tape electric tape	e air line other:		
Well depth: Well grouted to a depth offeet Typ	e of grout (circle one): Neat Cemer	nt Bentonite Mix	
Casing length:feet Casing diameter:	inches Type of casing:	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
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 Unde	rreamed Telescoped Open he	ole Natural Development	
Other (describe):			
Top of lap pipe or reduction in casing:feet. If te			

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MAY 0 8 2009

BY: OLWR

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

If well telescopes, show a Ground Level	
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Description of Formations Encountered	From (depth)	To (depth)
	Ground Level	
Sand & Grave	0	37
C(94.	37	122
Sand	122	210
Sand & Gravel	210	240
Sand	240	287
(94	287	377
Kokk.	377	378
Sand	378	380
Hard clay	380	354
Rock - Shoul Fogsils	354	356
Clay 1	356	410
Silty clay	. 410	440
Sand d'Clay Jagors	940	480

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

		•	
	•		
downer Name:			

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.

ARCHIE MCKENZIE 0-555

Print Name of Responsible Licensee and License No.

Signature of Licensee