Plum Creek #1	CTATE WELL DEDODT	
county: <u>Covington</u>	STATE WELL REPORT Part 1	For Office Use Only:
J	Driller's Log	Well #: H 33
Permit #:	Mississippi Department of Environmental Quality	Aquifer:
Driller: John W Mompson	Office of Land and Water Resources P.O. Box 2309	E-Log #:
Date drilling completed: 5-131-14	Jackson, MS 39225-2309	E-LOg #.
** * **********************************	(601)961-5210 (601)360-0535 (fax)	
	, , , , ,	ha wash and filed with the
State Law requires that this report  Department at the above address w	be prepared by the license holder responsible for to within 30 days of completion of drilling of the well of	or borehole.
Well Owner Informat	ion Well or Bore	hole Location
(Landowner if borehole is not for	a water well) Latitude: 31°38°26" Lor	ngitude: <u>87°26' 10'                                      </u>
Owner Name: Mossbacher	Alashad of lat /l ann (chack and	A. Conventional Survey
Mailing Address: 712 Main S	7 sie 200	): Conventional Survey,
Houston TX	770777 USGS quad, Hand-held G	
	SE 1/4 SE 1/4, Sec_	19 VT 8N R 14W
City State	Zip Code Zip Code Zip Code	
Telephone No. ()	(Distance) (Direction)	(Nearest Town)
receptione No. ()		
- 20 H	Well / Borehole Data	7
	drilling completed: $5-31-14$ Hole depth: $40$	
Location of the source of any surface v	vater used for drilling: Local Creek	
Method of dosing and volume of Chlori	ne used in drilling and development: added S	gallons of Clorax to water
Logs run (circle all applicable). No log r	Electric Gamma Ray Density Sonic Neutro	on Other:
Name of organization running log(s):		
		Crowned Courses Heart Dumping
Purpose of borehole (circle one): Water		Ground Source Heat PumpRecei
	ic Survey Other (describe)	
If drilling is not rel	ated to water well construction, skip the remainder	of this block JUN 1 3 2
Purpose of Well (circle all applicable):	Home Industrial Public Supply Irrigation	Fish Culture BV
Other (describe): Fig Supply	/	
If a flowing well, method of flow regul	ation: Valve Other (describe)	
Static Water Level:feet	: [above or below] land surface Date measured (circle one)	± <u>5-31-14</u>
Method of measurement (circle one): S	iteel tape Electric tape (ar line Other (describe)	:
Well depth: 200 Well grouted to a	depth of: 20 feet Type of grout (circle one):	Neat Cement Bentonite Mix
	asing diameter: 4 inches Type of	0110
l ){ A	71	PIK CIHLI
010	i/	200
Screen slot size: O 10 inches	Setting depth: Fromfeet_to	feet
Type of completion (circle all applicabl	e): Gravel packed Underreamed Open hole	Natural Development
Other (describe):		
Top of lap pipe or reduction in casing:	feet	1

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

Form: OLWR-SWR-1A (4/13)

County: Coving ton  Permit #:	Well	For Office Use #: \( \text{\chi} 33	Only:
The sketch below only required for water wells	Description of formations encount and boreholes, unless specifically e		
If well telescopes, show depths on sketch.	Description of Formations Encountered	d From ( <i>depth</i> )	To (depth)
Ground Level	rand + clay	Ground level	20
	white clay	20	40
	white clay	40	60
	sand + clay	60	100
160	sand	100	200
Screen	clay	200	240
200			
dummy			
Pipe 4"			
J-240			
more than one screen, show location of each on sketch	- Address of the Control of the Cont		
2) any permanent structures on the property that may aid 3) any roads, power lines, or other items that may aid in			
4) north arrow		Rece JUN 1 3 BY OL	Pivec 2014 WR
ndowner Name: Maschacher  FREBY CERTIFY that the well/borehole was drilled, o	constructed, and completed in accord	dance with all appli	cable
ndowner Name: Massbacker	constructed, and completed in accordinental Quality and the Mississippi Def	dance with all appli	

## STATE WELL REPORT

## Permit #: Driller: John Date completed: 5-31-14

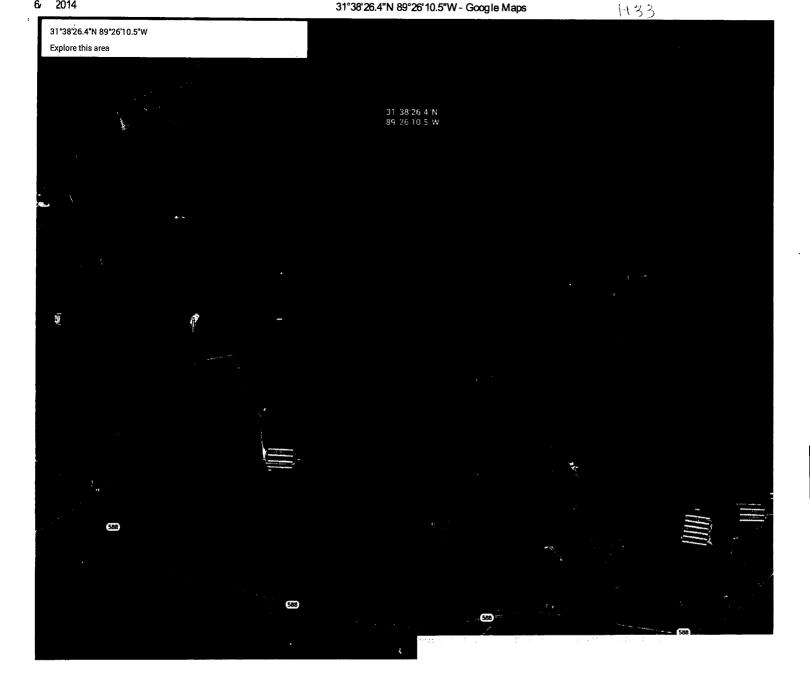
## Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309

For Office Use Only:		
Well #:H33		
Aquifer:		

Copy information from block on Part 1	(601)961-5210 (601) 360-0535 (fax)
This part of the report must be completed by a license	ed water well contractor or a licensed pump installer. A copy of Part 1
of the report must be attached and both parts filed wite Well Owner Information	th the Department at the above address within 30 days of well completion.  Well Location
Owner Name: Mssbacher	Latitude: 31 38 26 Longitude: 29 26 16 11
Mailing Address: 712 Main st ste 220	Method of Lat/Long (check one): Conventional Survey,
Houston TX 7700 Z	USGS quad, Hand-held GPS, Survey-grade GPS
	<u>SE 14 SE 14, Sec 19 T 8N R 14N</u>
City State Zip Co	7 Miles $E$ of $Collins$
Telephone No. ()	(Distance) (Direction) (Nearest Town)
Pur	mp Type (circle one)
Submersible Turbine Air Lift Centrifugal Flowing	Well Jet Piston Rotary Other (describe):
Date Pump Installed: 5-31-14	Rated Pump Capacity:85Gallons Per Minute
Is This Pump (circle one): (New) Repaired Repla	acement
Pow	ver Type (circle one)
	Windmill Other (describe):
Horse Power Rating of Motor: Settin	g Depth: 85 feet Number of Stages:
Pump Test	Data for Non Flowing Well
Date Well Tested: <u>5-31-14</u>	Duration of Pump Test ( <i>minimum 4 hours</i> ): hours
Static Water Level (A): 77 Feet Below Land S	Surface Pumping Water Level (B): 82 Feet Below Land Surface
Drawdown [(B) - (A)]:Feet Below Lai	nd Surface Test Pumping Rate: Gallons Per Minute
Method of measurement (circle one): Steel tape Elec	ctric tape (Air line) Other (describe):
	est Data for Flowing Well
Measured shut in head:feet.	
Well yieldedGPM with a drawdown of _	feet afterhours of pumping
	Neter Installation
Meter Manufacturer:	Meter Installation  Meter Serial Number:
Meter Model Number/Name:	Type of Meter:
	01, gal x 1000, etc):
Installation Date: Meter installe	d by:BYQLV
Is This Meter (circle one): New Repaired Repl	lacement
Important: By submitting the above information you	are certifying that this meter was installed to manufacturer standards.  It of approved meters is on the MDEQ website.
I HEREBY CERTIFY that the above statements are true	
John W Thompson 0-679	6-3-14 Vohn Withouse

Print Name of Pump Installer and License No. (if applicable) Signature of Purps Installer Form: OLWR-SWR-1B (4/13)



Received

BY OLWR