•	State W	ell Report					
P-1. 7	State Well Report Part 1 – Driller's Log		For Office Use Only:				
County: Coveylor		t of Environmental Quality	Aquifer:				
Permit #: 0 - 586	Office of Land ar	nd Water Resources	Well #: <u> </u>				
Driller: JAMES WELLS		3ox 2309 , MS 39225	!				
		961- 5210	L. S. Elevation:				
Date drilling completed: 7-/5-09	(601)961	- 5228 (fax)	E-log #:				
State I am requires that this renor	t he nrenared hy the lice	ense holder responsible for t	the work and filed with the				
Department at the above address	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 C	wner	Well or Bo	orehole Location				
(Landowner if borehole is not for	Latitude: 31 ° 31 '04		" Longitude: 89° 30', 00 "				
Owner Name PULL O	2/ / 1/1	Method of Lat/Long (circle or	ne): Conventional Survey,				
Mailing Address: 281 Uni	USGS quad, Hand-held		GPS, Survey-grade GPS				
January	Jonay MIS NW 1/2 NW 1/2 Sec 3		Twn 6N Rng 15 W				
City Stat	e Zip Code	Distance Direction  Miles EAST	Nearest Town				
Telephone No. (60) 765 90 28			of Jeminary				
	Well / Borel	nolo Data					
Date drilling started: 7-15-09 Date drilling completed: 7-15-09 Hole depth: 120 Hole diameter: 7							
Location of the source of any surface water used for drilling:  Method of dosing and volume of Chlorine used in drilling and development:  3 Ur Shork							
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:  Name of organization running log(s):							
Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Ground Source Heat Pump							
Seismic Survey Other (describe)							
If drilling is not related to water well construction, skip the remainder of this block							
Purpose of Well (check one): Home Industrial Public Supply Irrigation Fish Culture Other:							
If a flowing well, method of flow regulation: Valve Other (describe)							
Static Water Level: 76 feet above of below (circle one) land surface Date measured: 7-15-09							
Method of Measurement (circle one) steel tape electric tape air line other:							
Well depth: 7-15-09 Well grouted to a depth of / 6 feet Type of grout (circle one) Neat Cement Bentonite Mix							
Casing length: 106 feet Casing diameter: 4 inches Type of casing: 600							
Screen length: 20 feet Screen diameter: 4 inches Type of screen: PVC							
Screen slot size: .008 inches Setting depth: From 100 feet to 120 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 next page							
Form: OLWR-SWR-1A (04/08)							

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## The sketch below only required for water wells

If well telescopes, show deaths on sketch.

II WELL LEVES LUDGES, STATE WEST	10. A14 W.L
Ground Level	
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Water	
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Description of formations encountered must be provided for all wells and boreholes, unless specifically exempted by regulations

Description of Formations Encountered	From (deptn)	To (depth)
	Ground Level	2
[lan	7_	20 128
250	20	120
		<del> </del>
		<del>                                     </del>
		<del></del>
		<del> </del>
	1	<u> </u>

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.

49 A Services

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Union Cheek of

Way

Landowner Name: Paul Burner

Form: CLWR-SWP-14 (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

THE THINKS WELLS D. S. 86

Proportion of The proposition Likewise and Thomas No. 1986.

James WALL

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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 Information  Owner Name: Well Owner Information  Owner Name: Well Owner Information  Mailing Address: Z8 / Writon Church R  Serving MS  City State Zip Code  Distance Direction Nearest Town  Telephone No. 601, 765-9628  Pump Type  Circle one  Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Gas  Bucket Piston Turbine Electric Motor Hand Tractor PTO  Centrifugal Rotary Flowing Well Windmill Other (specify):  Date Pump Installed: 7-15-09  Rated Pump Capacity: 20 Gallons Per Minute  Pump Test Data  Method of Measuring Water Level	STATE WELL REPORT					
Date completed: 7-15-09  Convinformation from block on Part 1  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 Information  Well Owner Information  Owner Name:	Permit#:	Part 2 Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources		Aquifer:		
Note   Pump Type   Circle one   Circle one	Date completed: 7-15-09	Jackson, MS 39225 (601)961-5210		Well #: M87 Elevation:		
Pump Type Circle one  Air Lift  Jet Submersible Diesel Engine Gasoline Engine Natural Gas Bucket Piston Turbine Electric Motor Hand Tractor PTO Centrifugal Rotary Flowing Well Windmill Other (specify): Horse Power Rating of Motor:  Date Pump Installed: 7-/5-49 Setting Depth: Number of Stages:  Pump Test Data  Method of Measuring Water Level	Well Owner Information  Owner Name: Paul Byrun  Mailing Address: 28/ Union Church Ri  Saninary MS  City State Zip Code		Method of Lat/Long (check one): Conventional Survey,  USGS quad, Hand-held GPS, Survey-grade GPS,  NW 1/4 NW 1/4 Sec3 T_6N R			
Circle one  Air Lift Jet Submersible Diesel Engine Gasoline Engine Natural Gas  Bucket Piston Turbine Electric Motor Hand Tractor PTO  Centrifugal Rotary Flowing Well Windmill Other (specify):  Date Pump Installed: 7-/5-09  Rated Pump Capacity: Setting Depth: 100 feet  Rated Pump Capacity: Solution Per Minute Number of Stages: Method of Measuring Water Level	Telephone No. (601) 765-9628 3 Miles FAST of Samurary M.					
Bucket Piston Turbine Electric Motor Hand Tractor PTO  Centrifugal Rotary Flowing Well Windmill Other (specify):  Other (specify): Horse Power Rating of Motor: Setting Depth: JOO feet  Rated Pump Capacity: Callons Per Minute			**			
Centrifugal Rotary Flowing Well Windmill Other (specify):  Other (specify): Horse Power Rating of Motor:    Date Pump Installed:    Rated Pump Capacity:    Callons Per Minute    Pump Test Data    Windmill Other (specify):    Setting Depth:    Number of Stages:    Method of Measuring Water Level	Air Lift Jet	Submersible	Diesel Engine Gasoli	ne Engine Natural Gas		
Other (specify): Horse Power Rating of Motor:	Bucket Piston	Turbine	Electric Motor Hand	Tractor PTO		
Rated Pump Capacity: Gallons Per Minute		Flowing Well		· ·		
Pump Test Data Method of Measuring Water Level						
	Rated Pump Capacity: 20	Gallons Per Minute	Number of Stages:			
	Pump Test Data		<del>-</del>			
Date Well Tested: 7 / 5 - 6 9  Static Water Level (A):	Static Water Level (A): 70 Feet Pumping Water Level (B): 100 Feet Pumping Water Level (B): 100 Feet Pumping Rate: 20	Below Land Surface Below Land Surface Below Land Surface Gallons Per Minute	Air Line Electric Mea Other (specify):  For flowing well, measured s  Well yielded	hut in head:feet		

I HEREBY CERTIFY that the above statements are true to the best of my knowledge.

TAMES WELLS 0-586
Print Name of Pump Installer and License No. (if applicable)

Signature of Pump Installer
Form: OLWR-SWR-1B (04/08)
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