	STATE	WELL REPORT	
county: Desoto	SIALE	Part 1	For Office Use Only:
Permit #: MS- GW 17137 /	I	Driller's Log	Well #: <u>1015c</u>
Driller: Jores W. Mason	Mississippi Depart Office of L	ment of Environmental Quality and and Water Resources	Aquifer:
Date drilling completed: 10 ~ 3~14		P.O. Box 2309 son, MS 39225-2309	E-Log #:
		(601)961-5210	
		1)360-0535 (fax)	
State Law requires that this report a Department at the above address w	be prepared by the ithin 30 days of co	license holder responsible for the molecule for the self of the se	he work and filed with the or borehole
Well Owner Informati (Landowner if borehole is not for	on		hole Location
Owner Name: Industrial Develop		Latitude: 34 59 34,55 N Lon	gitude: <u>گ1<sup>°</sup> 4</u> 6 <sup>′</sup> ک <sup>1</sup> ′ 45 مع
Mailing Address: 9124 Pall		Method of Lat/Long (check one)	): Conventional Survey,
		USGS quad, Hand-held GI	
Olive Brouch my	38654	SW 12 Stx 1/4, Sec_	18 VT ISV RUSW
<u>Olive</u> Bravel My City State	Zip Code		
Telephone No. ( <u>901</u> ) <u>680-7108</u>		(Distance) (Direction)	(Nearest Town)
	Wall / R	orehole Data	
Date drilling started: <u>10-3-14</u> Date of Location of the source of any surface wa			Hole diameter: 12"
Method of dosing and volume of Chloring	e used in drilling a	nd development: <u>com and</u>	areter
Logs run (circle all applicable). No log ru	Electric Gamm	a Ray Density Sonic Neutror	Other:
Name of organization running log(s):			
Purpose of borehole (circle one): Water V	-	cal/Geological Investigation G	round Source Heat Pump
Seismic	Survey Other (	describe)	
If drilling is not relat	ed to water well co	nstruction, skip the remainder of	of this block
Purpose of Well (circle all applicable): He	ome Industrial	Public Supply Irrigation Fi	sh Culture
Other (describe):N \A			
If a flowing well, method of flow regulat			
Static Water Level: <u><math>\delta^{0}</math></u> feet [i	above or below] (circle one)	and surface Date measured:	10-4-14
Method of measurement (circle one): Ste	el tape Electric ta	ape Air line Other ( <i>describe</i> ):	string / neight
Well depth: $305$ Well grouted to a de	epth of: <u>50</u> fe	et Type of grout (circle one): N	leat Cement Bentonite Mix
(1)		P	
Screen length: <u>40</u> feet Scr	een diameter:		reen: <u>puc</u>
Casing length: <u>40</u> feet Casi Screen length: <u>40</u> feet Scr Screen slot size: <u>030</u> inches Type of completion ( <i>circle all applicable</i> ):	Setting depth:	From	305 feet
Type of completion (circle all applicable):	Gravel packed >	Underreamed Open hole	Natural Development
Other (describe):NA			NOV 0 3 2014
Top of lap pipe or reduction in casing:	<u>,⊳V</u> ≁_feet		gen to Fourier and a
If telescope	ed or more than on	e screen, describe on next page	

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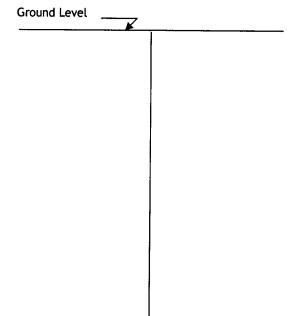
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County: _	Desato
Permit #:	MIS Gec 17137

	For	Office Use Only:	•
Well	#:	D 150	

The sketch below only required for water wells

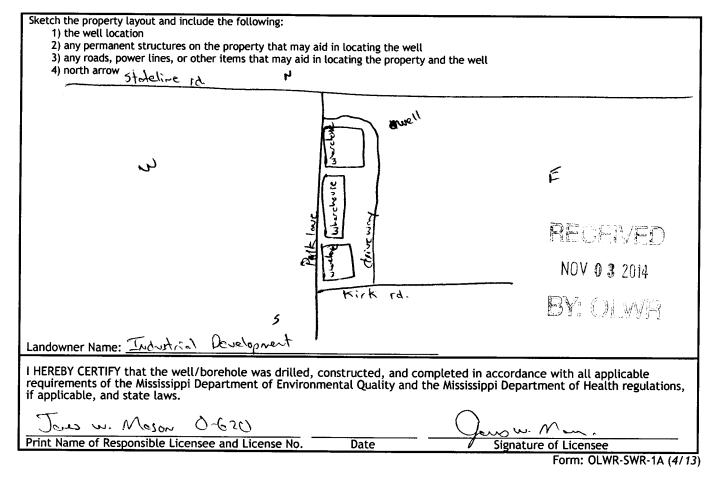
If well telescopes, show depths on sketch.



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

To (depth) 30 50 80
80
(10
40
200
) (O
305

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



	STATE W	<b>ELL REPORT</b>	
County: Desoto		Part 2	For Office Use On
Permit #: 125-6-6-6-(713)		er's Completion Report ment of Environmental Quality	Well #:
Driller: Jones w. Moson		nd and Water Resources	weit #:
Date completed: 10-4-14		P.O. Box 2309 on, MS 39225-2309	Aquifer:
Copy information from block on Part 1		601)961-5210	Aquiret:
	(601	) 360-0535 (fax)	
This part of the report must be complete of the report must be attached and both	ed by a licensed water	r well contractor or a licensed pur	np installer. A copy of Part
Well Owner Informati			ocation
Owner Name: Industrial Devel	monent	Latitude: 34 59' 34.55 N Lon	
Mailing Address: 9124 polk	•		
Mailing Address: 10 9 Port	1000	Method of Lat/Long (check one)	
		USGS quad, Hand-held G	
Olive Breach Ms City State	JOGS4 Zin Code	5 w 1/2, Sec 14, Sec	
Telephone No. ( <u>901) 680-7108</u>	•	$\frac{\partial}{(Distance)}$ Miles $\frac{N}{(Direction)}$ of	hendy corner
		(Distance) (Direction)	(Nearest Town)
		pe (circle one)	
Submersible Turbine Air Lift Centrif	ugal Flowing Well	Jet Piston Rotary Other (des	cribe):
Date Pump Installed: 10-4-14		Rated Pump Capacity:30	OGallons Per M
Is This Pump (circle one): (New) Rep	baired Replacemer	nt	
	the second se	pe (circle one)	
Electric Diesel Gasoline Natural Gas	Tractor PTO Win	dmill Other ( <i>describe</i> ):	
Horse Power Rating of Motor:	Setting Dept	h: 168 feet Number	of Stages:
	Pump Test Data	for Non Flowing Woll	
	-	for Non Flowing Well	in the way of the
Date Well Tested: <u>10- ዛ~ ૫ ૫</u>		Duration of Pump Test (minimu	,
Date Well Tested: <u>10- ዛ~ ૫ ૫</u> Static Water Level (A): <u>80</u> Feet	Below Land Surface	Duration of Pump Test ( <i>minimu</i> Pumping Water Level (B): <u>•</u>	Feet Below Land Sur
Date Well Tested: <u>10- ዛ~ ૫ ૫</u> Static Water Level (A): <u>80</u> Feet	Below Land Surface	Duration of Pump Test ( <i>minimu</i> Pumping Water Level (B): <u>•</u>	Feet Below Land Sur
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