State '	Well Report	
	- Driller's Log For Office Use Only:	
Mississinni Departm	ent of Environmental Quality Aquifer:	
Permit #: Office of Land	d and Water Resources H-1/2	
	. DOX 10051	
	MS 39289-0631 L. S. Elevation:	
	354-6938 (fax) E-log #:	
State Law requires that this report be prepared by the l <u>Department at the above address within 30 days of con</u>	license holder responsible for the work and filed with the molection of drilling of the well or borehole.	
Information on Well Owner	Well or Borehole Location	
(Landowner if borehole is not for a water well)	Latituda: 34 . 56 , 358 " Landinda 89 . 42, 99("	
Owner Name Jeremsy Kinney	Latitude: $34 \circ 56$, 358 , Longitude: $89 \circ 42$, 996 , 21 Method of Lat/Long (circle one): Conventional Survey,	
Mailing Address: 224 durhon rd.	Method of Lat/Long (circle one): Conventional Survey,	
Maining Address. Our Cor Ver 18.	USGS quad Hand-held GPS, Survey-grade GPS	
Bulachie MS 38611	NE 1/ SW 1/ Sec 3 Twn 35 Rng Sw	
Byholia MS 38611 City State Zip Code	Distance Direction Nearest Town	
Telephone No. (901) 461- 7470	Distance Direction Nearest Town <u>112</u> Miles 500 of Borton	
Well / Bo	rehole Data	
Date drilling started: 3-17-0 Date drilling completed: 3-17-	O6 Hole depth: 155 Hole diameter: 8	
Location of the source of any surface water used for drilling:	Δ	
Method of dosing and volume of Chlorine used in drilling and dev	velopment: NA	
Logs run (circle all applicable): No log rup Electric Gamma Ra Name of organization running log(s):		
Purpose of borehole (check one): Water Well Geotechnical/Ge	ological Investigation Ground Source Heat Pump	
Seismic Survey Other (descrit	be)	
If drilling is not related to water well construct	ion, skip the remainder of this block	
Purpose of Well (check one): Home / Industrial Public Supp	olyIrrigationFish CultureOther:	
If a flowing well, method of flow regulation: Valve $\begin{tabular}{c} \begin{tabular}{c} \begin{tabular}{c} \end{tabular} \end{tabular}$		
Static Water Level:feet above or below (circle one) land surface Date measured: 3-17-06	
Method of Measurement (circle one) steel tape electric tap	be air line other: String I weight.	
Well depth: 155 Well grouted to a depth of 10 feet Type of grout (circle one): Neat Cement Bentonite Mix		
Casing length: 145' feet Casing diameter: 4 inches Type of casing: puc		
Screen length: <u>15</u> feet Screen diameter: <u>4</u>	inches Type of screen:	
Screen slot size: <u>. C (O</u> inches Setting depth: From		
Type of completion (circle all applicable): Gravel packed Underreamed Telescoped Open hole Natural Development		
Other (describe):		
	telescoped or more than one screen, describe on next page	

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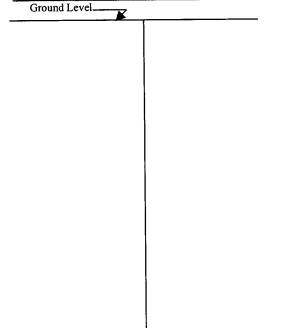
Form: OLWR-SWR-1A

APR 1 0 2006 BY: OLW R

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The sketch below only required for water wells

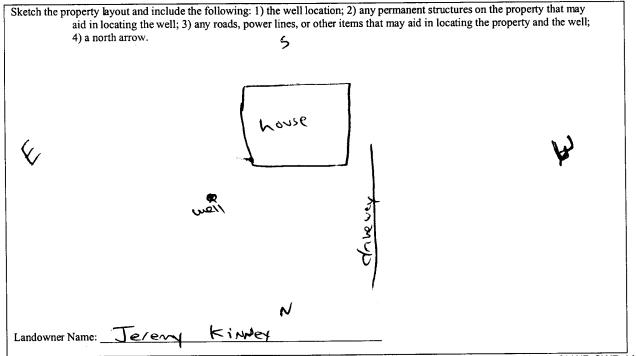
If well telescopes, show depths on sketch.



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

Description of Formations Encountered	From (depth)	To (depth)
clay dirt	Ground Level	18
clay dirt while soud	(8)	155
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<u> </u>		
	1	

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



Form: OLWR-SWR-1A

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. 0-620 4-5-06. Jones w Mason

Janow Morz

Print Name of Responsible Licensee and License No.

Date

Signature of Licensee

APR 1 0 2006

BY: OLWR

	STATE WELL REPORT	
County: Deso to	Part 2 Pump Installer's Completion Report	For Office Use Only:
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources	Aquifer:
Driller: Jones w Moscon	P.O. Box 10631	Well #: <u>H-163</u>
Date completed: $3 - 17 - 06$	Jackson, MS 39289-0631 (601)961-5210	
Copy information from block on Part 1	(601)354-6938 (fax)	Elevation:

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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
 Well Location

Wen Owner Information	Wen Ebeauon		
Owner Name: Jereny Kinney Mailing Address: 224 durhom rd.	Latitude: 34. 56, 358 Longitude: 29.42, 996 21 Method of Lat/Long (check one): Conventional Survey 59,		
Byhalia MS 38611 City State Zip Code	USGS quad, Hand-held GPS <u></u> , Survey-grade GPS <u>メ 医 ¼ Sw ¼ Sec 3 T ƏS R Sw</u> Distance Direction Nearest Town		
Telephone No. (901) 461- 7470	<u>112 Miles Sw of Borton</u>		

Pump Type Circle one		Power Type Circle one			
Air Lift	Jet	Submersible	Diesel Engine	Gasoline Engine	Natural Gas
Bucket	Piston	Turbine C	Electric Motor	Hand	Tractor PTO
Centrifugal	Rotary	Flowing Well	Windmill	Other (specify):	
Other (specify):			Horse Power Rating	of Motor: 314	
Date Pump Installed:	3-17-06		Setting Depth:	40	feet
Rated Pump Capacity: _	12	_Gallons Per Minute	Number of Stages:	<u> </u>	

Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: $3 - 17 - 0.6$ Static Water Level (A): 15 Feet Below Land Surface Pumping Water Level (B): \sim^A Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape Other (specify): <u>String (weight</u>	
Drawdown [(B) – (A)]: Feet Below Land Surface Test Pumping Rate: \Box Gallons Per Minute Duration of Pump Test (minimum 4 hours): ∂H hours	For flowing well, measured shut in head: $\[NA]_{feet}$ feet Well yielded $\[NA]_{feet}$ GPM with a drawdown of $\[NA]_{feet}$ after $\[D4]_{hours}$ of pumping	

I HEREBY CERTIFY that the above statements are true to the best o	of my knowledge.	
Jones w. Mason 0-620	Jours in Maria	
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	
	Form: OLV	EIVED

APR 1 0 2006 BY: OLW R