State W	ell Report		
	Driller's Log	For Office Use Only:	
Mississippi Departmen	t of Environmental Quality	Aquifer:	
Permit #: Office of Land a	and Water Resources	Well #: K-256	
$  Driller \rangle \langle D $	Box 10631	· ·	
	48 39289-0631 1961-5210	L. S. Elevation:	
	4-6938 (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 comp Information on Well Owner		or borehole.	
(Landowner if borehole is not for a water well)			
a Frank Culture	Latitude: 34 . 49 . 133	" Longitude: <u>90 • 03 · 894</u> " <b>53</b>	
Owner Name Frank Cullier 2850 Mailing Address: Oak graave cave	Method of Lat/Long (circle or	ne): Conventional Survey,	
	USGS quad, Hand-held	GPS, Survey-grade GPS	
Lot 17	NW1/SE 1/ Sec 17	Twn 3s Rng 8W	
Hernondo Ms. 38630			
City State Zip Code	tate Zip Code Distance Direction Nearest Town 3/4 Miles SE of Frees Corner		
Telephone No. (901) 483-4034			
Well / Bord	ehole Data		
Date drilling started: 5-4-07 Date drilling completed: 5-4-0	Date drilling started: 5-4-07 Date drilling completed: 5-4-07 Hole depth: 140' Hole diameter: 6314 '		
Location of the source of any surface water used for drilling: Method of dosing and volume of Chlorine used in drilling and deve	کم		
Logs run (circle all applicable). No log nur Electric Gamma Ray			
	Density Some Neutron		
Purpose of borehole (check one): Water Well Geotechnical/Geol	logical Investigation Ground	I Source Heat Pump	
Seismic SurveyOther ( <i>describe</i> ) If drilling is not related to water well construction, skip the remainder of this block			
Purpose of Well (check one): Home 🗹 Industrial Public Suppl	y Irrigation Fish Culture	Other:	
If a flowing well, method of flow regulation: Valve C	Other (describe)		
Static Water Level: feet above or below (circle one)	land surface Date measured:	5-5-07	
Method of Measurement (circle one) steel tape electric tape air line other: <u>string (meight</u>			
Well depth: <u>140</u> Well grouted to a depth of <u>10</u> feet Type of grout (circle one): Neat Cement Bentonite Mix			
Casing length: 130 feet Casing diameter: 4inches Type of casing:			
Screen length: $20$ feet Screen diameter: $4$ inches Type of screen: $0.12$			
Screen slot size:			
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	

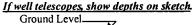
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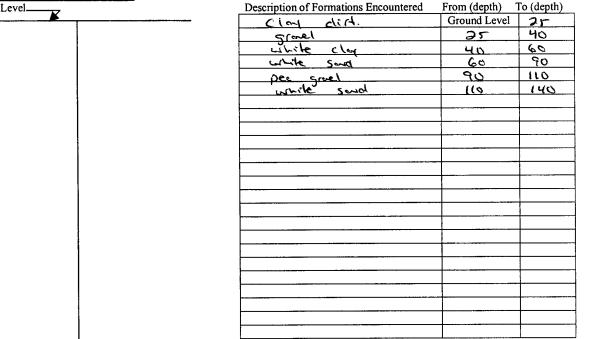
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K-256

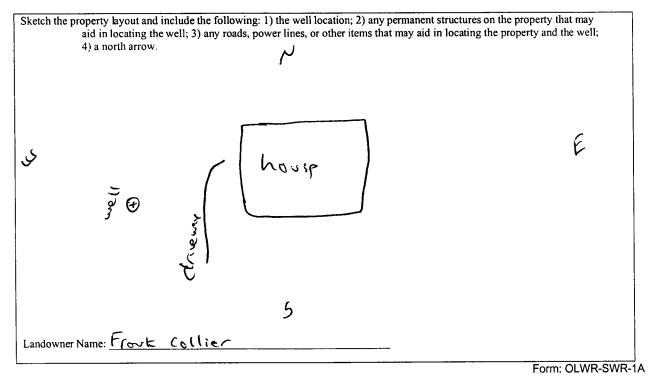
## The sketch below only required for water wells





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

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



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.

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	STATE WE	LL REPORT		
County: Desoto		art 2 Completion Report	For Office Use Only:	
Permit #:	Mississippi Department of Environmental Quality Office of Land and Water Resources		Aquifer:	
Driller: James W. Aleson	P.O. B	lox 10631	Well #: K-256	
Date completed: 5-5-07	(601)	IS 39289-0631 961-5210	Elevation:	
Copy information from block on Part 1	(601)354	4-6938 (fax)		
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		

Owner Name: Fronk Collier 2850 Mailing Address: Oak growe cove	Latitude: <u>34,49,133</u> Longitude: <u>90,03,894</u> <b>08</b> Method of Lat/Long (check one): Conventional Survey,
Lot 17	USGS quad, Hand-held GPS, Survey-grade GPS
City State Zip Code	NW 1/ SE 1/ Sec 17 T 35 R 8W
	Distance Direction Nearest Town
Telephone No. Gol) 483-4034	3) y Miles SE of Frees Corner

Pump Type Circle one		Power 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):	
Other (specify):			Horse Power Rating	of Motor: 112	
Date Pump Installed:	5-5-07	L	Setting Depth:	90	_feet
Rated Pump Capacity:	20	Gallons Per Minute	Number of Stages: _	14	

Pump Test Data	Method of Measuring Water Level Circle one	
Date Well Tested: Static Water Level (A): Feet Below Land Surface   Pumping Water Level (B): Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape Other (specify): <u>String ( weight )</u>	
Drawdown [(B) - (A)]: Peet Below Land Surface   Test Pumping Rate: 20   Gallons Per Minute	For flowing well, measured shut in head: $\underline{\mathcal{M}}_{feet}$ feet Well yielded $\underline{\partial} \underline{\partial} \underline{\partial}$ GPM with a drawdown of	
Duration of Pump Test (minimum 4 hours): hours	$\mathcal{M}$ feet after $\mathcal{A}$ hours of pumping	

I HEREBY CERTIFY that the above statements are true to the bes	t of my knowledge.	
Jones W. Mason 0-620	Jes	
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	
		RECEIVED

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