County: \bigcirc County:	State V	Vell Report				
Permit #:		-	For Office Use Only:			
Driller: $\underline{J}_{n} \otimes \underline{S}_{n} \otimes \underline{S}_{n} \otimes \underline{S}_{n}$ Date drilling completed: $\underline{\mathcal{S}}_{n} = \underline{\mathcal{S}}_{n} \otimes \underline{S}_{n} \otimes \underline$	Mississippi Departmen	nt of Environmental Quality	Aquifer:			
Date drilling completed: $\underline{\$} - \underline{\$} - \underline{\$} = \underline{\$}$ Image: Date drilling completed: $\underline{\$} - \underline{\$} - \underline{\$} = \underline{\$}$ Image: Date drilling completed: $\underline{\$} - \underline{\$} - \underline{\$} = \underline{\$}$ Image: Date drilling completed: $\underline{\$} - \underline{\$} - \underline{\$} = \underline{\$} = \underline{\$} = \underline{\$}$ Image: Date drilling completed: $\underline{\$} - \underline{\$} - \underline{\$} = \underline{\$}$	Strice of Land		Well #: <u>N-165</u>			
(601)354-6938 (fax) E-log #:	Jackson, I		L. S. Elevation:			
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 Owner (Landowner if borehole is not for a water well) Owner Name_ $Paty_Adams$			E-log #:			
Department at the above address within 30 days of completion of drilling of the well or borehole. Information on Well Owner Well or Borehole Location Well or Borehole Location Well or Borehole Location Well or Borehole Location Owner Name_Otty_Addons_ Mailing Address 5888 Mer.s Gd Bybolia Ms 38611 Latitude: 34 • 46 · 803 ·· Longitude 89 • 44 · 309 Mailing Address 5888 Mer.s Gd Td Bybolia Ms 38611 Latitude: 34 • 46 · 803 ·· Longitude 89 • 44 · 309 Mailing Address 5888 Mer.s Gd Mailitage Genetical Barlow Bybolia Ms 38611 Latitude: 34 • 46 · 803 ·· Longitude 89 • 44 · 309 Method of Lat/Long (circle one): Conventional Survey, Mailing Address 5888 Mer.s Second flow Second flow Bybolia Ms 38611 Second flow Second flow Second flow Owner Mailes Second flow Second flow Output Method of Lat/Long (circle one): Name of drilling completed: 8-9 · 57						
Information on Well Owner Well or Borehole Location Well or Borehole Location (Landowner if borehole is not for a water well) Owner Name_O_O_O_A Owner Name_O_O_A Owner Name_O_O_A Owner Name_O_O_A Owner Name O_O and Source of any surface water used for drilling: Owner Name O_O and source of any surface water used for drilling: Owner Name O_O and source of any surface water used for drilling: Owner Name O_O and source of any surface water used for drilling: Owner Name Of organization running log(s): Purpose of borehole (check one): Water WellO Geotechnical/Geological Investigation	Department at the above address within 30 days of com	ense holder responsible for a pletion of drilling of the well	the work and filed with the			
Owner Name_Potsy_Addoms	Information on Well Owner	Well or Bo	orehole Location			
Maining Address $\underline{\bigcirc}$ $$	\wedge	Latitude: 34 . 46 . 803	" Longitude: <u>89.44</u> , 209,			
Maining Address $\underline{\bigcirc}$ $$		Method of Lat/Long (circle of	ne): Conventional Survey, 13			
B_{Yho} Lia MS 38611 City State Zip Code Telephone No. (462) $838 - 2324$ Distance Direction Nearest Town Well / Borehole Data Well / Borehole Data Date drilling started: $8 - 9 - 05$ Date drilling completed: $8 - 9 - 05$ Hole depth: 125 Hole diameter: $8''$ Location of the source of any surface water used for drilling: PA Method of dosing and volume of Chlorine used in drilling and development: PA Logs run (circle all applicable): $0 \log run$ Electric Gamma Ray Density Sonic Neutron Other:	Mailing Address: 5888 myers rd-					
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $						
Telephone No. (462) 838-334 3 Miles 5E of 19. mill Well / Borehole Data Well / Borehole Data Date drilling started: $S - 9 - 05$ Date drilling completed: $S - 9 - 05$ Hole depth: 125 Hole diameter: 8' Location of the source of any surface water used for drilling: PA Method of dosing and volume of Chlorine used in drilling and development: PA Logs run (circle all applicable): $10 \log run$ Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s): Purpose of borehole (check one): Water Well Geotechnical/Geological Investigation Geotechnical/Geological Investigation Seismic Survey Other (describe)	Byholia MS 38611 NE 1/ Sw 1/ Sec 33 Twn 35 Rng Jw					
Telephone No. (dc) X 3 5 - 7 3 3 4 Well / Borehole Data Date drilling completed: 8-9-05 Hole depth: 125 ' Hole diameter: 8'' Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Location of the source of any surface water used for drilling:A Logs run (circle all applicable): @	_	Distance Direction	Nearest Town			
Date drilling started: $S - 9 - 65$ Date drilling completed: $8 - 9 - 65$ Hole depth: $1 - 5$ Hole diameter: 8^{+-} Location of the source of any surface water used for drilling: $N = A$ Method of dosing and volume of Chlorine used in drilling and development: $N = A$ Logs run (circle all applicable): $N = 100$ for run Electric Gamma Ray Density Sonic Neutron Other: Name of organization running log(s):	Telephone No. (62) 838- 2324					
Location of the source of any surface water used for drilling:A Method of dosing and volume of Chlorine used in drilling and development:A Logs run (circle all applicable): 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:	Well / Bor	ehole Data				
Method of dosing and volume of Chlorine used in drilling and development:						
Method of dosing and volume of Chlorine used in drilling and development:	Location of the source of any surface water used for drilling:	VA				
Name of organization running log(s):	Method of dosing and volume of Chlorine used in drilling and deve	lopment:	4			
Seismic SurveyOther (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:	Logs run (circle all applicable): So log run Electric Gamma Ray Density Sonic Neutron Other:					
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:	Purpose of borehole (check one): Water Well <u>Ceotechnical/Geological Investigation</u> Ground Source Heat Pump					
If a flowing well, method of flow regulation: Valve \nearrow Other (describe)						
Static Water Level: 42 feet above or felow circle one) land surface Date measured: 8-9-05						
Method of Measurement (circle one) steel tape electric tape air line other: <u>string (weight</u>						
Well depth: 125 Well grouted to a depth of 18 feet Type of grout (circle one): Neat Cement Bentonite Mix						
Casing length: <u>115</u> feet Casing diameter: <u>4</u> inches Type of casing: <u>p.c.</u>						
Screen length: 10 feet Screen diameter: 4 inches Type of screen: 900						
Screen slot size: ,010 inches Setting depth: From 115 feet to (25 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: reduction in casing: feet. If telescoped or more than one screen, describe on next page						

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Form: OLWR-SWR-1A

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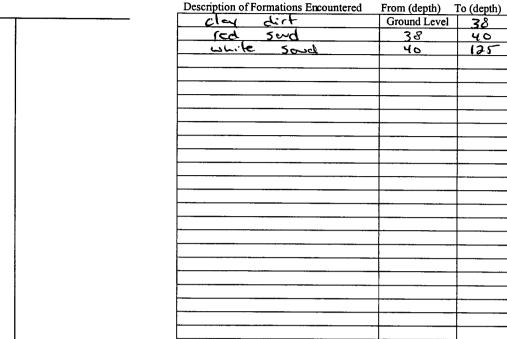
MIDE

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

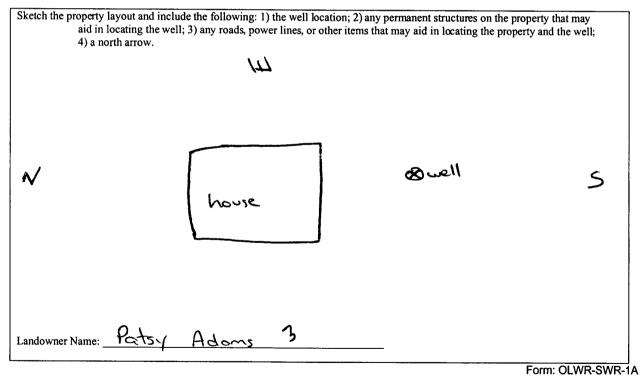
The sketch below only required for water wells

If well telescopes, show depths on sketch. Ground Level_ K

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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.

 Joney
 Mason
 6-620
 8-26-05
 Joney
 Joney
 Mason

 Print Name of Responsible Licensee and License No.
 Date
 Signature of Licensee

	STATE WELL REPORT	
County: Desoto	Part 2 Pump Installer's Completion Report	For Office Use Only:
Permit #:	Mississippi Department of Environmental Quality	Aquifer:
Driller: Janes w. Mascu	Office of Land and Water Resources P.O. Box 10631	-
Date completed: 8-9-05	Jackson, MS 39289-0631 (601)961-5210	Well #: MICS
Copy information from block on Part 1	(601)354-6938 (fax)	
This part of the report must be complete	ed by a licensed water well contractor or a licensed pump	installer. A copy of Part 1 of the

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report must be attached and both parts filed with the Department at the above address within 30 days of well completion.						
	Well Owner Infor					
Owner Name: <u>P</u>	sty Adom	\$	Latitude: 34.46.802 Longitude: 89.44.209			
Mailing Address:	5888 My	ers rd.	Method of Lat/Long (check one): Conventional Survey,			
			USGS quad, Hand-held GPS 2, Survey-grade GPS			
	Byholia M City Sta	s <u>38611</u> te Zip Code	<u>به الم الم Sec 33 T 35 R Sur</u>			
			Distance Direction Nearest Town			
Telephone No. (62) 838-	<u>Ə 3ə4</u>	<u>3</u> Miles <u>SE</u> of <u>Ing</u> , Mills.			
Pump Type Power Type						
Circle one			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:			Horse Power Rating of Motor:			
Date Pump Installed: 8-9-05 Setting Depth:		Setting Depth:feet				
Rated Pump Capa	acity:	Gallons Per Minute	Number of Stages: //			
Pump Test Data Method of Measuring Water Level						
-			Circle one			
Date Well Tested: 8-9-05						
Static Water Level (A): 42 Feet Below Land Surface		Feet Below Land Surface	Air Line Electric Measuring Line Steel Tape			
Pumping Water Level (R): NA Feet Below Land Surface Other (specify): <u>String</u> weight						

Static Water Level (A): $\mathbf{43}$ Feet Below Land SurfacePumping Water Level (B): \mathbf{NA} Feet Below Land SurfaceDrawdown [(B) - (A)]: \mathbf{NA} Feet Below Land SurfaceTest Pumping Rate: $(\mathbf{2})$ Gallons Per MinuteDuration of Pump Test (minimum 4 hours): $\mathbf{34}$ hours \mathbf{MA} feet after $\mathbf{34}$

I HEREBY CERTIFY that the above statements are true to the best of	of my knowledge.	
Jones w Mason	gen when	
Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer	
		Earm: OLIM/D SIM/D 1D

Form: OLWR-SWR-1B