	STATE WELL REPORT		Epp		
County: Desoto	Part 1		For Office Use Only:		
	D	riller's Log	Well #: M370		
Permit #:	Mississippi Department of Environmental Quality		Aquifer:		
	Office of Land and Water Resources P.O. Box 2309		E-Log #:		
Date drilling completed: 1-2-15		on, MS 39225-2309	L-Log #.		
(601)961-5210 (601)360-0535 (fax)					
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.					
Well Owner Information (Landowner if borehole is not for a		Well or Bore	hole Location		
	i water well)	Latitude: 34°46'35,18N Longitude: 89°50'29,95"			
Owner Name: Treat Ross		Method of Lat/Long (check one): Conventional Survey,			
Mailing Address: 3/13 Costic lock cieck					
LOT 3			-held GPS, Survey-grade GPS		
Hernando MS City State	38632 NE 14 5W 1		33 T 35 R GW		
		MilesNE of	Alphaba		
Telephone No. (901) 508-620	7	(Distance) (Direction)	(Nearest Town)		
Well / Borehole Data					
Date drilling started: 1-2-15 Date drilling completed: 1-2-15 Hole depth: 110 Hole diameter: 63/4					
Location of the source of any surface water used for drilling: NA					
Method of dosing and volume of Chlorine used in drilling and development: 5 ppm and greater					
Logs run (circle all applicable): No log run Electric Gamma Ray Density Sonic Neutron Other:					
Name of organization running log(s): NA					
Purpose of borehole (circle 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 (circle all applicable): Home Industrial Public Supply Irrigation Fish Culture					
Other (describe):					
If a flowing well, method of flow regulation: Valve Other (describe)					
Static Water Level:					
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): 5tring (weight					
Well depth: 110 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix					
Casing length: 100 feet Cas	Casing length: 100 feet Casing diameter: 4 inches Type of casing:				
Screen length: 10 feet Screen diameter: 4 inches Type of screen: 000					
Screen slot size:, CIOinches Setting depth: From feet to feet					
Type of completion (circle all applicable): Stavel packed Underreamed Open hole Natural Development					

__feet

If telescoped or more than one screen, describe on next page

Other (describe): NA

Form: OLWR-SWR-1A (4/13)

Permit #:	_	\	For Office Use of Markette 4.	Only:
he sketch below only required for	water wells	Description of formations encoder and boreholes, unless specifications		
f well telescopes, show depths on sl	ketch.	una vorenotes, untess specifical	ty exempled by regulation	<u>ns</u>
round Level		Description of Formations Encount	ered From (depth) Ground level	To (depth)
- Contractive -	<u> </u>	alon dist		10
		red soud	10	<u> </u>
·		gruel	30	<u>86</u>
		white day	98	50
		white soud		110
Series	- CONTRACT			
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	20 3015			
	FEB 02 2015			
	MOIME			
		111.	~=	
		100 m		
more than one screen, show location of	f each on sketch			
1) the well location				
2) any permanent structures on the p 3) any roads, power lines, or other ite 4) north arrow	User Hurs A	n locating the well ocating the property and the well	county line	E rd·
3) any roads, power lines, or other ite 4) north arrow	went way aid in lo	Rect Property and the well	county line	
3) any roads, power lines, or other ite 4) north arrow	ems that may aid in lo	Rect Sonstructed, and completed in ac	cordance with all applic	rd.
any roads, power lines, or other ite 4) north arrow andowner Name: Treat R EREBY CERTIFY that the well/borel quirements of the Mississippi Depart applicable, and state laws.	ems that may aid in lo	Property and the well A Property and the well A Onstructed, and completed in accental Quality and the Mississippi	cordance with all applic Department of Health I	rd.
any roads, power lines, or other ite 4) north arrow Indowner Name: Treat R EREBY CERTIFY that the well/borel quirements of the Mississippi Depar	ems that may aid in lo	Processing the property and the well was a constructed, and completed in accental Quality and the Mississippi	cordance with all applic	rd.

STATE WELL REPORT

County: Permit #: Date completed: 1-2-15 Copy information from block on Part 1

Part 2

Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Box 2309 Jackson, MS 39225-2309 (601)961-5210

	-
For Office Use Only:	
Well #: <u>M370</u>	. ••
Aquifer:	

) 360-0535 (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: Treat Ross	Latitude: <u>34°46′35.18ぃ</u> Longitude: <u>89°50′39.95 "w</u>			
Mailing Address: 5775 costlerock circk	Method of Lat/Long (check one): Conventional Survey,			
<u>Lot 3</u>	USGS quad, Hand-held GPS, Survey-grade GPS			
Hernando MS 30632 City State Zip Code	NE 14 5W 14, Sec 33 T 35 R 6W			
_	(Distance) NE of Alphaba (Nearest Town)			
Telephone No. (ON) 508-620フ	(Distance) (Direction) (Nearest Town)			
Pump Typ	e (circle one)			
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):				
Date Pump Installed: 1-2-15 Rated Pump Capacity: 10 Gallons Per Minute				
Is This Pump (circle one): (New Repaired Replacement				
Power Typ	e (circle one)			
Electric Diesel Gasoline Natural Gas Tractor PTO Wind	Imill Other (describe):			
Horse Power Rating of Motor: 3/4 Setting Depth	n: $\underline{\delta}$ O feet Number of Stages: $\underline{\mathcal{E}}$			
Pump Test Data for Non Flowing Well				
Date Well Tested: 1- 2-15 Duration of Pump Test (minimum 4 hours): 34 hours				
Static Water Level (A): 51 Feet Below Land Surface Pumping Water Level (B): 1/2 Feet Below Land Surface				
Drawdown [(B) - (A)]:				
Method of measurement (circle one): Steel tape	De Airline Other (describe): String lueight			
Pump Test Data for Flowing Well				
Measured shut in head: _ い (ト feet.				
Well yielded 10 GPM with a drawdown of N \	$\frac{4}{2}$ feet after $\frac{\partial \mathcal{Y}}{\partial \mathbf{Y}}$ hours of pumping			
Meter Installation				
Meter Manufacturer: いん	Meter Serial Number: ん(^ケ			
Meter Model Number/Name:レル	Type of Meter:			
Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):レート				
Installation Date: Meter installed by:				
ls This Meter (circle one): New Repaired Replacement				
Important: By submitting the above information you are certifying that this meter was installed to manufacturer standards. For agricultural wells, a list of approved meters is on the MDEQ website.				
I HEREBY CERTIFY that the above statements are true to the best of my knowledge.				
T				

Print Name of Pump Installer and License No. (if applicable) goow. Man 1-30-15 Signature of Pump Installer Date

Form: OLWR-SWR-1B (4/13)