County: Deroto
Permit #:
Driller: Janes w. Majour
Date drilling completed: 12-1-15

Owner Name: Trent Rocs

Mailing Address: 5610

**Well Owner Information** 

(Landowner if borehole is not for a water well)

Rock creck Or.

#### STATE WELL REPORT

### Part 1

Driller's Log

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

(601)360-0535 (fax)

For Office Use Only:
Well #:
Aquifer:
E-Log #:

Well or Borehole Location

Latitude: 34 46 44,77 2 Longitude: 89 50 21,10 0

Method of Lat/Long (check one): Conventional Survey\_

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.

USGS quad, Hand-held GPS, Survey-grade GPS				
Hernando Ms 38632 NOW 14-SE 14, Sec 33 T 35 R 6W				
City State Zip Code Alphaba				
Telephone No. (901) 508-6207 (Distance) (Direction) (Nearest Town)				
Well / Borehole Data				
Date drilling started: 12-1-15 Date drilling completed: 13-1-15 Hole depth: 120 Hole diameter: 2'				
Location of the source of any surface water used for drilling:				
Method of dosing and volume of Chlorine used in drilling and development:				
Logs run (circle all applicable) No log run Electric Gamma Ray Density Sonic Neutron Other:				
Name of organization running log(s): レス				
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 N/A Other (describe)				
Static Water Level: 57 feet [above of below] land surface Date measured: 12-1-15 (circle one)				
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe): String I weight				
Well depth: 120 Well grouted to a depth of: 10 feet Type of grout (circle one): Neat Cement Bentonite Mix				
Casing length: 110 feet Casing diameter: 4 inches Type of casing: 5 v.C.				
Screen length: 10 feet Screen diameter:inches Type of screen:				
Screen slot size: Old inches Setting depth: From 160 feet to 110 feet				
Type of completion (circle all applicable). Gravel packed Underreamed 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 (4/13)

Permit #:	Well #	For Office Use O	nly:
he sketch below only required for water wells	Description of formations encounter		
	and boreholes, unless specifically ex	empted by regulations	!
well telescopes, show depths on sketch.	Description of Formations Encountered	From (depth)	Γο (depth)
round Level	Clay dich	Ground level	18
	0 1	18	35
	white soul		120
	Warte 32		<u>.                                     </u>
			·
	<del></del>		
	···		
	A A WAR AND THE STATE OF THE ST		
etch the property layout and include the following:  1) the well location  2) any permanent structures on the property that may a			
3) any roads, power lines, or other items that may aid i 4) north arrow	aid in locating the well n locating the property and the well		
3) any roads, power lines, or other items that may aid i 4) north arrow	and in locating the well in locating the property and the p		
3) any roads, power lines, or other items that may aid if 4) north arrow	n locating the property and the well	<b>\</b>	
3) any roads, power lines, or other items that may aid if 4) north arrow	n locating the property and the well	pera conser a N	
3) any roads, power lines, or other items that may aid if 4) north arrow	n locating the property and the well	<b>N</b>	, Se
3) any roads, power lines, or other items that may aid i 4) north arrow	n locating the property and the well	i.	<sup>⊙</sup> €
3) any roads, power lines, or other items that may aid if 4) north arrow	n locating the property and the well	AN 04 2019	O. S. C.
3) any roads, power lines, or other items that may aid if 4) north arrow	n locating the property and the well	i.	, see
3) any roads, power lines, or other items that may aid if the survey of	n locating the property and the well	i.	
3) any roads, power lines, or other items that may aid it is north arrow	n locating the property and the well	An Office	
3) any roads, power lines, or other items that may aid it is north arrow	n locating the property and the well	An Office	
3) any roads, power lines, or other items that may aid if the survey of	n locating the property and the well  well  house	AN QUE 2019	ole
and any roads, power lines, or other items that may aid it is a north arrow  Indowner Name:  REREBY CERTIFY that the well/borehole was drilled, quirements of the Mississippi Department of Environapplicable, and state laws.	constructed, and completed in accordance Quality and the Mississippi Departmental Quality and Quality a	AN QUE 2019	ole
and any roads, power lines, or other items that may aid it is a north arrow  Indowner Name:  REREBY CERTIFY that the well/borehole was drilled, quirements of the Mississippi Department of Environapplicable, and state laws.	constructed, and completed in accordance Quality and the Mississippi Dep.	AN QUE 2019	ole

### STATE WELL REPORT

# County: Desoto Permit #: Driller: Janes

## Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources

For Office Use Only:
Well #: 111318
Aquifer:

i bate completed.	7.0. Box 2309			
Jacks	on, MS 39225-2309 Aquifer:			
	601)961-5210 ) 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: Trent Ross				
	Latitude: 3억 역사 역사 기가 Longitude: 온 역 50 31.10 대			
Mailing Address: 5610 rockcreek dr.	Method of Lat/Long (check one): Conventional Survey,			
USGS quad, Hand-held GPS V, Survey-grade				
Hernando Mr 38632 City State Zip Code	NW 14 SE 14, Sec 33 T 35 R GW			
1				
Telephone No. (901) 508 - 6207	Objection Of Alphaba (Nearest Town)			
	pe (circle one)			
Submersible Turbine Air Lift Centrifugal Flowing Well Jet Piston Rotary Other (describe):				
Date Pump Installed: 12-1-17 Rated Pump Capacity: 10 Gallons Per Minute				
Is This Pump (circle one): New Repaired Replaceme	nt			
Power Ty	pe (circle one)			
Electric Diesel Gasoline Natural Gas Tractor PTO Wir	dmill Other (describe):			
Horse Power Pating of Motor: 3/4 Sotting Door	h: <u>SO</u> feet Number of Stages: <u></u>			
Thorse Fower Rating of Motor:	in. 10 leet Number of Stages. 0			
Pump Test Data for Non Flowing Well				
Date Well Tested: 12-1-15 Duration of Pump Test (minimum 4 hours): 24 hours				
Static Water Level (A): 57 Feet Below Land Surface Pumping Water Level (B): 1/2 Feet Below Land Surface				
Drawdown [(B) - (A)]: へん Feet Below Land Surface Test Pumping Rate:(〇 Gallons Per Minute				
	ape Air line Other (describe): String luciful-			
·	ta for Flowing Well			
Measured shut in head: _\(\frac{\lambda \lambda^{\lambda}}{\tau}\) feet.				
Well yielded $\frac{10}{2}$ GPM with a drawdown of $\frac{N}{2}$	$\gamma$ feet after $O$ hours of pumping			
Meter Installation				
Meter Manufacturer: _ ノ ( ^	Meter Serial Number:			
Meter Model Number/Name: んん	Type of Meter: ~ / / /			
Meter Manufacturer: JA   Meter Serial Number:   Meter Serial Number: NA   Type of Meter:   Totalizer Register Unit and Multiplier Factor (AF x .001, gal x 1000, etc):				
Installation Date: NA Meter installed by:				
Is 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.				
Print Name of Pump Installer and License No. (if applicable)  Print Name of Pump Installer and License No. (if applicable)  Print Name of Pump Installer and License No. (if applicable)  Print Name of Pump Installer and License No. (if applicable)				

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