County: Desoto
Permit #:
Driller: Joes w. Major.
Date drilling completed: 9-27-17

Mailing Address: 4835

Well Owner Information (Landowner if borehole is not for a water well)

Owner Name: Humbert Robinson

## 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 #: M 399
Aquifer:
E-Log #:

Well or Borehole Location

Latitude: 34°47'37:87" Longitude: 89°49'34,54" W

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

USGS quad\_\_\_\_\_, Hand-held GPS\_\_\_\_\_, Survey-grade GPS\_

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.

Marianda Das 38632 NESE SW 14, Sec 27 T 35 R 6W
City State Zip Code 3/4 Miles Sw of cocknown
Telephone No. (602) 298-2858 (Distance) (Direction) (Nearest Town)
Well / Borehole Data
Date drilling started: 9-37-17 Date drilling completed: 9-37-17. Hole depth: 185 Hole diameter: 7"
Location of the source of any surface water used for drilling: ~ 14
Method of dosing and volume of Chlorine used in drilling and development: 50 ppm and scenler
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): N.4.
If a flowing well, method of flow regulation: Valve Other (describe) \lambda V^
Static Water Level:feet [above or (below] [and surface Date measured:
Method of measurement (circle one): Steel tape Electric tape Air line Other (describe):
Well depth: 185 Well grouted to a depth of: 50 feet Type of grout (circle one): Neat Cement Bentonite Mix
Casing length: 165 feet Casing diameter: 4 inches Type of casing: p-1
Screen length: 20 feet Screen diameter:inches Type of screen:
Screen slot size: 00 inches Setting depth: From 6 feet to 185 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

County: Descho	· · · · · · · · · · · · · · · · · · ·	or Office Use Only:
Permit #:	Well #:	<u>M399</u>
The sketch below only required for water wells	Description of formations encountered and boreholes, unless specifically exen	
If well telescopes, show depths on sketch.	Description of Formations Encountered	From (depth) To (dep
Ground Level	clay List.	Ground level 20
	white clay-	92 30
	white souds	30 110
	white clay	110 112
	white rough	112 185
•		
	· · · · · · · · · · · · · · · · · · ·	
· ·		
	ľ	
If more than one screen, show location of each on sket	tch	
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may	may aid in locating the well	Livill sprags rd
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r	may aid in locating the well	Livill sprags rd
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may 4) north arrow	may aid in locating the well aid in locating the property and the well	
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may 4) north arrow	may aid in locating the well	Linilly springs od
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may 4) north arrow	may aid in locating the well aid in locating the property and the well	
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may 4) north arrow	may aid in locating the well aid in locating the property and the well	
Sketch the property layout and include the following:  1) the well location 2) any permanent structures on the property that r 3) any roads, power lines, or other items that may 4) north arrow	may aid in locating the well aid in locating the property and the well	ce with all applicable
Sketch the property layout and include the following:  1) the well location  2) any permanent structures on the property that r  3) any roads, power lines, or other items that may  4) north arrow  Landowner Name:  I HEREBY CERTIFY that the well/borehole was drifted in the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the Mississippi Department of English and the company of the compan	may aid in locating the well aid in locating the property and the well	ce with all applicable tment of Health regulatio

## STATE WELL REPORT

County: Desoto

Driller: Jac w. Mojai

Permit #: \_

## Part 2

Pump Installer's Completion Report
Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 2309

For Office Use Only:
Well #: <u>M399</u>
Aquifer:

Date completed. 47071	Jackson, MS 39225-2309
Copy information from block on Part 1	(601)961-5210
	(601) 360-0535 (fax)
This part of the report must be completed by a licens of the report must be attached and both parts filed w	sed water well contractor or a licensed pump installer. A copy of Part 1 with the Department at the above address within 30 days of well completion.
Well Owner Information	well Location . 1
Owner Name: Humbet Robinson	Latitude: 34°47'27. 87" Longitude: 89°49'24,54" W
Mailing Address: 4875 Treedway	
Mailing Address: 1000 (76670049	USGS quad, Hand-held GPS, Survey-grade GPS
Thermodo Ms 380	(32 NE 1/4 156W 1/4, Sec 27 T 35 R 6W
City State Zip	8 Miles Sw of Cockrum (Distance) (Direction) (Nearest Town)
Telephone No. (662) 298, 385	8 (Distance) (Direction) (Nearest Town)
P	Pump Type (circle one)
Submorphia Turbine Air Lift Centrifugal Flowi	ing Well Jet Piston Rotary Other (describe):
Submersion furbile All 2112 centurings.	Rated Pump Capacity: 20 Gallons Per Minute
Is This Pump (circle one): New Repaired Re	placement ower Type (circle one)
	· · · · · · · · · · · · · · · · · · ·
Electric Diesel Gasoline Natural Gas Tractor P	PTO Windmill Other (describe):
Horse Power Rating of Motor: Set	ting Depth:
Pump Te	est Data for Non Flowing Well
Pata Wall Tostad: 9-27-12	Duration of Pump Test (minimum 4 hours): 24 hours
Date well rested.	nd Surface Pumping Water Level (B): NH Feet Below Land Surface
Static Water Level (A): Feet Below Lan	d Surface Pullphing Water Level (b)
Drawdown [(B) - (A)]:Feet Below	Land Surface Test Pumping Rate: 20 Gallons Per Minute
Method of measurement (circle one): Steel tape	Electric tape Air line Other (describe): Stry laein
	Test Data for Flowing Well
Measured shut in head:feet.	- 1
Well yielded 20 GPM with a drawdown of	of NA feet after 21 hours of pumping
	Meter Installation
	the second secon
	Meter Serial Number: NA
Meter Model Number/Name:	Type of Meter
Totalizer Register Unit and Multiplier Factor (AF x	( .001, gal x 1000, etc):
Installation Date: //A Meter inst	alled by: J M
· • · · · · · · · · · · · · · · · · · ·	Replacement
is this mean (an are the ).	·
Important: By submitting the above information For agricultural wells, a	you are certifying that this meter was installed to manufacturer standards. 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.
	<u> </u>
Joes w. Mara 0-620	applicable) Date Signature of Pump Installer
Print Name of Pump Installer and License No. (if	applicable) Date 'Signature of Pump Installer Form: OLWR-SWR-1B (4/1