

State Well Report

Part I - Driller's Log

Mississippi Department of Environmental Quality
 Office of Land and Water Resources
 P.O. Box 10631
 Jackson, MS 39289-0631
 (601)961-9210
 (601)354-6938 (fax)

County: Issaquena Forest
 Permit #: _____
 Driller: John Parrish
 Date drilling completed: 7-30-07

For Office Use Only:
 Aquifer: _____
 Well #: A-95
 L. S. Elevation: _____
 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 completion of drilling of the well or borehole.

Information on Well Owner <i>(Landowner if borehole is not for a water well)</i>	Well or Borehole Location
Owner Name: <u>South Ms Electric Power</u>	Latitude: <u>31-25-04</u> Longitude: <u>89-25-43</u>
Mailing Address: <u>3492 Hwy 42</u> <u>Lott Town Rd.</u>	Method of Lat/Long (circle one): Conventional Survey, USGS quad, <u>Hand-held GPS</u> , Survey-grade GPS
<u>Hattiesburg Ms 39402</u> City State Zip Code	1/4 Sec <u>0</u> Twn <u>5N</u> Rng <u>14W</u>
Telephone No. () _____	Distance Direction Nearest Town <u>6</u> Miles <u>North</u> of <u>Hattiesburg Ms</u>

Well / Borehole Data

Date drilling started: 5-15-07 Date drilling completed: 7-30-07 Hole depth: 230 Hole diameter: 4 3/4

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): _____

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: _____

If a flowing well, method of flow regulation: Valve _____ Other (describe) _____

Static Water Level: _____ feet above or below (circle one) land surface Date measured: _____

Method of Measurement (circle one) steel tape electric tape air line other: _____

Well depth: _____ Well grouted to a depth of _____ feet Type of grout (circle one): Neat Cement Bentonite Mix _____

Casing length: _____ feet Casing diameter: _____ inches Type of casing: _____

Screen length: _____ feet Screen diameter: _____ inches Type of screen: _____

Screen slot size: _____ inches Setting depth: From _____ feet to _____ 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: _____ feet *If telescoped or more than one screen, describe on next page*

Form: OLWR-SWR-1A

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The sketch below only required for water wells

If well telescopes, show depths on sketch.

Ground Level \longrightarrow

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

Description of Formations Encountered	From (depth) To (depth)	
	Ground Level	ft
Clay		0
Gravel & Sand	40	62
Clay	62	280

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

Sketch the property layout and include the following: 1) the well location; 2) any permanent structures on the property that may aid in locating the well; 3) any roads, power lines, or other items that may aid in locating the property and the well; 4) a north arrow.

L14	L6	L5	L1	64	57
			L2	78	57
			L3	98	67
			L4	117	82
L13	L7	L4	L5	139	101
			L6	133	86
L12	L8	L3	L7	113	61
			L8	94	52
			L9	74	39
L11	L9	L2	L10	54	36
			L11	72	21
	L10	L1	L12	96	43
			L13	112	61
			L14	134	81

Warehouse
A
Landowner Name: GARMY

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.

Print Name of Responsible Licensee and License No. Fred Danforth 0-6986T Date 8-15-07 Signature of Licensee Fred Danforth

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10	10	10
20	20	20
30	30	30
40	40	40
50	50	50
60	60	60
70	70	70
80	80	80
90	90	90
100	100	100

10	10	10
20	20	20
30	30	30
40	40	40
50	50	50
60	60	60
70	70	70
80	80	80
90	90	90
100	100	100

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Handwritten text at the bottom of the page, possibly a date or a reference.